



Troubleshooting 837s, 835s and 999s

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Objectives

- Learn how to read a 999 file
- Learn how to read an 835 file
- Learn about unique IDs that will help us “connect” 837 files to 999s and 835s
- Learn about various error codes
- Learn about a few EDI review tools
- Hopefully, lots of questions and answers

Purpose of Files

- 837P = Health Care Claim: Professional
 - Outpatient periodic services
- 837I = Health Care Claim: Institutional
 - Hospital services, ICF, PRTF, Residential
- 999 = Implementation Acknowledgement for Health Care Insurance
 - Acknowledges 837 receipt and acceptance
- 835 = Health Care Claim Payment/Advice
 - Payments, adjustments, denials and reasons

837P

ISA*00* *00* *ZZ*12345 *ZZ*23071
*121130*1740*^*00501*000000181*1*T*:~
GS*HC*12345*13102*20121130*1740*181*X*005010X222A1~
ST*837*0048*005010X222A1~
BHT*0019*00*0008*20121130*1740*CH~
NM1*41*2*PROVIDER INC*****46*12346~
PER*IC*BILLING OFFICE*TE*9193329945~
NM1*40*2*ABC PAYER*****46*23071~
HL*1**20*1~
PRV*BI*PXC*101YM0800X~
NM1*85*2*PROVIDER INC*****XX*1023026986~
N3*141 K TECHNOLOGY DR~
N4*GARNER*NC*275299999~
REF*EI*999445555~

837P

HL*2*1*22*0~
SBR*P*18*****MC~
NM1*IL*1*DOE*JANE****MI*999447777L~
N3*ABC CHAPEL HILL RD~
N4*DURHAM*NC*27707~
DMG*D8*20001209*F~
NM1*PR*2*ABC PAYER****PI*23071~
CLM*48*150***11:B:1*Y*A*Y*Y*P~
HI*ABK:F71~
LX*1~
SV1*HC:99212*150*UN*1***1~
DTP*472*D8*20121127~
SE*24*0048~
GE*1*181~
IEA*1*000000181~

837I

ISA*00* *00* *ZZ*12345 *ZZ*23071
*130205*1615*^*00501*000000031*1*T*:~
GS*HC*12345*23071*20130205*1615*30*X*005010X223A2~
ST*837*0069*005010X223A2~
BHT*0019*00*3920394930203*20130205*1615*CH~
NM1*41*2*SSI CLEARINGHOUSE*****46*12345~
PER*IC*BILLING OFFICE*TE*9195551111~
NM1*40*2*ABC PAYER*****46*23071~
HL*1**20*1~
PRV*BI*PXC*261QM1300X~
NM1*85*2*DUKE HOSP RALEIGH*****XX*1013916352~
N3*5213 SOUTH ALSTON AVE~
N4*DURHAM*NC*277134430~
REF*EI*562070036~
HL*2*1*22*0~
SBR*P*18*****MC~
NM1*IL*1*DOE*JANE*****MI*444335555~
N3*999 COURT DR~
N4*RALEIGH*NC*27610~

8371

DMG*D8*19830512*F~
NM1*PR*2*ABC PAYER*****PI*23071~
CLM*69*2000***11:A:3**A*Y*Y~
DTP*434*RD8*20121227-20121228~
DTP*435*DT*201212261249~
CL1*2*1*30~
HI*BK:29532~
HI*BJ:29532~
HI*BF:2913~
NM1*71*1*SMITH*JOHN*****XX*1073518460~
PRV*AT*PXC*207P00000X~
LX*1~
SV2*0100**2000*DA*2~
REF*6R*45456789001~
SE*43*0069~
GE*1*30~
IEA*1*000000031~

999

ISA*00* *00* *ZZ*DHC303
*ZZ*BHAH0140
*130311*1221*^*00501*000002799*0*P*:~
GS*FA*DHC303*BHAH0140*20130311*12214318
*2741*X*005010X231A1~
ST*999*2741001*005010X231A1~
AK1*HC*181*005010X222A1~
AK2*837*0048*005010X222A1~
IK5*A~
AK9*A*1*1*1~
SE*6*2741001~
GE*1*2741~
IEA*1*000002799~

835

ISA*00* 00* *ZZ*SY303 *ZZ*ADDT003 *130315*1504**^*00501*000000023*0*P*::~~
GS*HP*SY303*ADDT003*20130315*1504*1*X*005010X221A1~
ST*835*0001~
BPR*I*153.25*C*ACH*CCP*01*053111222*DA*000132223333*1560790210**01*053100300*DA*00013733268
8*20130313~
TRN*1*111111111*1560790210~
REF*EV*AY7788~
DTM*405*20130313~
N1*PR*MCO PAYMENT CENTER~
N3*1120 POND DRIVE~
N4*BIG CITY*NC*27399~
PER*BL*BIG CLAIMS OFFICE*TE*9196739111~
N1*PE*ABC VOCATIONAL SERVICES*XX*1073755555~
REF*TJ*560895000~
LX*1~
CLP*13462*1*153.25*153.25**MC*292013065001850*11*1~
NM1*QC*1*ADAMS*THOMAS****MI*947313518L~
NM1*74*1***L***C*947313777L~
AMT*AU*153.25~
SVC*HC:T2021*153.25*153.25**25~
DTM*472*20130225~
REF*6R*01~
AMT*B6*153.25~
SE*37*0001~
GE*1*1~
IEA*1*000000023~

Matching 837s to 835s and 999s

- ISA File Header – Interchange Control
 - At the beginning of every file, you will have an ISA segment
 - Identifies the Sender
 - Identifies the Receiver
 - Gives the date and time of file production
 - Assigns a **unique identifier** to the file
- Can have multiple functional groups under the ISA header

[Language of Electronic Claims]

- ISA Header

ISA*00* *00* *ZZ*10999
*ZZ*NCXIX *090420*1820*^*00501
*000002011*1*P*:~

Matching 837s to 835s and 999s

- GS Header – Functional Group
 - At the beginning of every functional group, you will have a GS segment
 - Identifies the type of transactions that will follow
 - Assigns a **unique identifier** to each functional group
- Can have multiple transaction sets under the GS header

Matching 837s to 835s and 999s

- GS Header

GS*HC*10260*NCXIX*20090420*1820

*199*X*005010X098A2~

Language of Electronic Claims

- Transaction Set Header
 - At the beginning of every transaction, you will have an ST segment
 - Identifies the type of transaction set that will follow (837, 835, 277, ect)
 - Assigns a **unique identifier** to each transaction set
- Can have only one transaction set under the ST header

[Language of Electronic Claims]

- Transaction Header

ST*837*000000001~

Language of Electronic Claims

■ Footers

- At the end of every transaction envelope, you will have a SE segment
 - Verifies the **transaction envelope ID**
 - Provides a count of transaction lines
- At the end of every file, you will have a GE segment and an IEA segment
 - Verifies the file's **unique IDs**
 - Provides a count of envelopes

[Language of Electronic Claims]

- Transaction Footer

SE*567*000000001~

[Language of Electronic Claims]

- GE Footer

GE*1*199~

[Language of Electronic Claims]

- IEA Footer

IEA*1*000002011~

Interchange Control Segments

ISA*00* *00* *ZZ*12345 *ZZ*23071
*121130*1740*^*00501*00000181*1*P*:~

GS*HC*12345*13102*20121130*1740*181*X*005010X222A1~



GE*1*181~

IEA*1*00000181~

Transaction Set Envelope

ST*837*0048*005010X222A1~



SE*36*0048~

Returned 999

ISA*00* *00* *ZZ*DHC303 *ZZ*BHAH0140
*130311*1221*^*00501*000002799*0*P*:~
GS*FA*DHC303*BHAH0140*20130311*12214318*2741*X*0
05010X231A1~
ST*999*2741001*005010X231A1~
AK1*HC*181*005010X222A1~
AK2*837*0048*005010X222A1~
IK5*A~
AK9*A*1*1*1~
SE*6*2741001~
GE*1*2741~
IEA*1*000002799~

999 Status

- Accepted

IK5*A~

AK9*A*1*1*1~

- Rejected

IK5*R~

AK9*R*1*1*0~

- Accepted with errors

IK5*E~

AK9*E*1*1*1~

999 Status

- Partially Accepted

IK5*A~



IK5*A~



IK5*R~



AK9*P*3*3*2~

- To be partially accepted, the submitted claim file must have contained multiple transaction sets

Accepted 999

ISA*00* *00* *ZZ*DHC303 *ZZ*BHAH0140
*130311*1221*^*00501*000002799*0*P*:~
GS*FA*DHC303*BHAH0140*20130311*12214318*2741*X*0
05010X231A1~
ST*999*2741001*005010X231A1~
AK1*HC*181*005010X222A1~
AK2*837*0048*005010X222A1~
IK5*A~
AK9*A*1*1*1~
SE*6*2741001~
GE*1*2741~
IEA*1*000002799~

Rejected 999

ISA*00* *00* *ZZ*23071 *ZZ*12345
*150630*1206*^*00501*000278420*0*P*:~
TA1*000000002*150115*1740*A*000~
GS*FA*23021*12345*20150630*1206*278420*X*005010X231A1~
ST*999*0001*005010X231A1~
AK1*HC*102*005010X222A1~
AK2*837*0002*005010X222A1~
IK3*HI*20*2300*8~
CTX*CLM01:ALH567~
IK4*1:2*1271*I6*F71~
IK5*R*5~
AK9*R*1*1*0~
SE*9*0001~
GE*1*278420~
IEA*1*000278420~

Partially Rejected 999

ISA*00* *00* *ZZ*23071 *ZZ*12345
*150630*1206*^*00501*000278420*0*P*:~
TA1*000000002*150115*1740*A*000~
GS*FA*23021*12345*20150630*1206*278420*X*005010X231A1~
ST*999*0001*005010X231A1~
AK1*HC*102*005010X222A1~
AK2*837*0001*005010X222A1~
IK5*A*~
AK2*837*0002*005010X222A1~
IK3*HI*20*2300*8~
CTX*CLM01:ALH567~
IK4*1:2*1271*I6*F71~
IK5*R*~
AK9*P*2*2*1*5~
SE*9*0001~
GE*1*278420~
IEA*1*000278420~

IK3 Segment: Error Identification

Segment Type with Error

Position in Transaction Set

IK3*HI*20*2300*8~

Loop

Syntax Error Code

IK3 Error Codes Are in the ASCX12 999 Guide

IK304 620 **Implementation Segment Syntax Error Code** O 1 ID 1/3

Code indicating implementation error found based on the syntax editing of a segment

CODE	DEFINITION
1	Unrecognized segment ID
2	Unexpected segment
3	Required Segment Missing
4	Loop Occurs Over Maximum Times
5	Segment Exceeds Maximum Use
6	Segment Not in Defined Transaction Set
7	Segment Not in Proper Sequence
8	Segment Has Data Element Errors
14	Implementation "Not Used" Segment Present
16	Implementation Dependent Segment Missing
17	Implementation Loop Occurs Under Minimum Times
18	Implementation Segment Below Minimum Use
19	Implementation Dependent "Not Used" Segment Present

CTX Segment: Error Identification

Business Unit Field Location



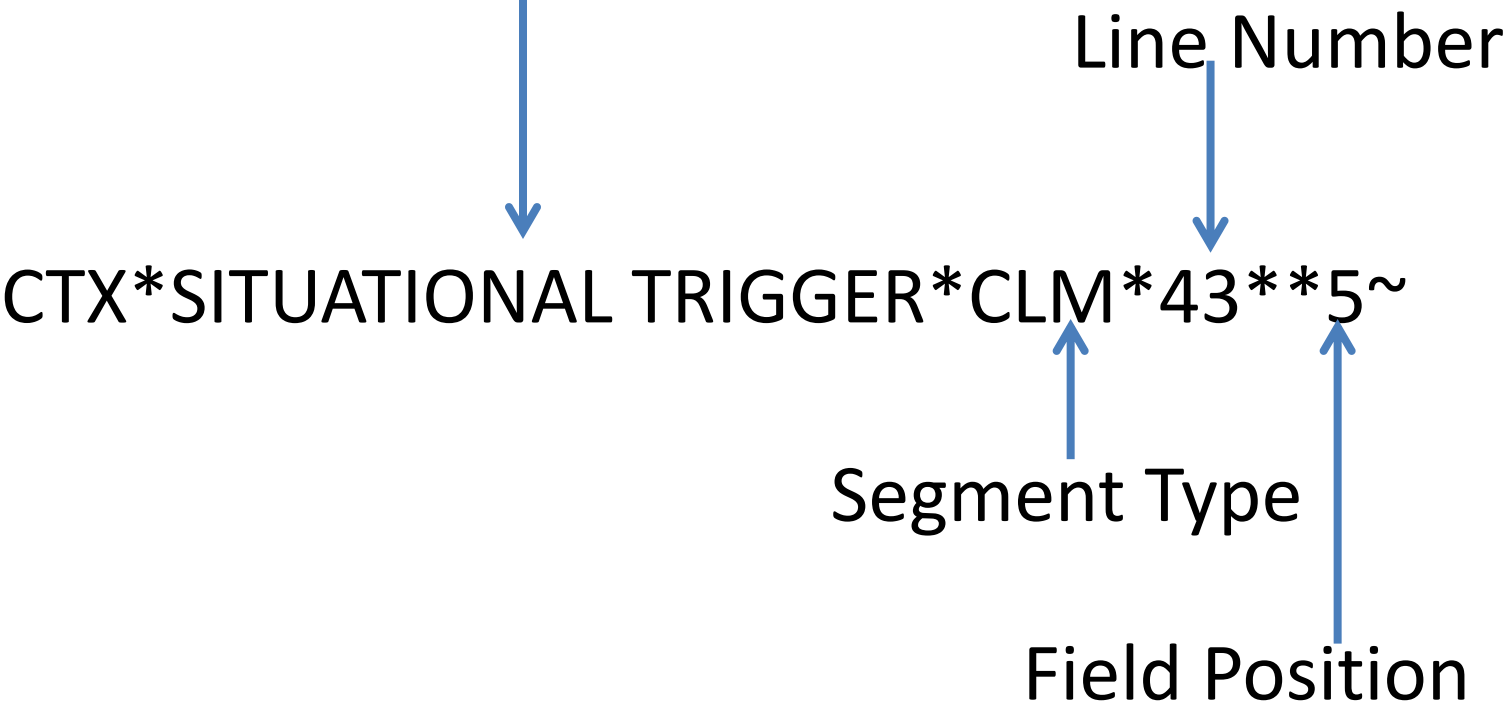
CTX*CLM01:ALH567~



Business Unit Field

CTX Segment: Segment Context

Always "Situational Trigger"



IK4 Segment: Data Element Note

Data Element Position in Segment

Syntax Error Code

IK4*1:2*1271*16*F71~

Data Element Reference Number

Copy of Bad Data Element

IK4 Error Codes Are in the ASCX12 999 Guide

IK403 **621** **Implementation Data Element Syntax Error Code M 1 ID 1/3**
Code indicating the implementation error found after syntax edits of a data element

CODE	DEFINITION
1	Required Data Element Missing
2	Conditional Required Data Element Missing
3	Too Many Data Elements
4	Data Element Too Short
5	Data Element Too Long
6	Invalid Character In Data Element
7	Invalid Code Value
8	Invalid Date
9	Invalid Time
10	Exclusion Condition Violated
12	Too Many Repetitions
13	Too Many Components
I10	Implementation "Not Used" Data Element Present
I11	Implementation Too Few Repetitions
I12	Implementation Pattern Match Failure
I13	Implementation Dependent "Not Used" Data Element Present
I6	Code Value Not Used In Implementation
I9	Implementation Dependent Data Element Missing

999 Status (TA1)

ISA*00* *00* *ZZ*DHC303 *ZZ*BHAH0140
*130311*1221*^*00501*000002799*0*P*::~~

TA1*000000181*120228*1230*R*006~

IEA*1*000002799~

TA1 Reject Codes Are in the ASCX12 999 Guide

TA105 I18 **Interchange Note Code** M 1 ID 3/3
Code specifying the error found processing the interchange control structure

<u>CODE</u>	<u>DEFINITION</u>
000	No error
001	The Interchange Control Number in the Header and Trailer Do Not Match. The Value From the Header is Used in the Acknowledgment.
002	This Standard as Noted in the Control Standards Identifier is Not Supported.
003	This Version of the Controls is Not Supported
004	The Segment Terminator is Invalid
005	Invalid Interchange ID Qualifier for Sender
006	Invalid Interchange Sender ID
007	Invalid Interchange ID Qualifier for Receiver
008	Invalid Interchange Receiver ID
009	Unknown Interchange Receiver ID
010	Invalid Authorization Information Qualifier Value
011	Invalid Authorization Information Value
012	Invalid Security Information Qualifier Value
013	Invalid Security Information Value
014	Invalid Interchange Date Value
015	Invalid Interchange Time Value

TA1 Reject Codes Are in the ASCX12 999 Guide

016	Invalid Interchange Standards Identifier Value
017	Invalid Interchange Version ID Value
018	Invalid Interchange Control Number Value
019	Invalid Acknowledgment Requested Value
020	Invalid Test Indicator Value
021	Invalid Number of Included Groups Value
022	Invalid Control Structure
023	Improper (Premature) End-of-File (Transmission)
024	Invalid Interchange Content (e.g., Invalid GS Segment)
025	Duplicate Interchange Control Number
026	Invalid Data Element Separator
027	Invalid Component Element Separator
028	Invalid Delivery Date in Deferred Delivery Request
029	Invalid Delivery Time in Deferred Delivery Request
030	Invalid Delivery Time Code in Deferred Delivery Request
031	Invalid Grade of Service Code

WEDI – SNIP Levels – HIPAA Compliance (Strategic National Implementation Process)

- Type 1: EDI syntax integrity testing
- Type 2: HIPAA syntactical requirement testing
- Type 3: Balancing
- Type 4: Situation testing
- Type 5: External code set testing
- Type 6: Product types or line of services
- Type 7: Implementation Guide-Specific Trading Partners

Tools For EDI Testing

- Optum Transaction Testing Service (OTTS)
 - Expensive
 - Very, very comprehensive
 - Constant upgrades
 - Easy to use reports
 - Fast, online
- First Pass by Washington Publishing Company
- EDI Notepad by Liaison

999 versus 835

- 999 File
 - Specific to a submitted EDI file
 - Checks for HIPAA compliance
 - Nothing to do with claim processing
 - Usually all or nothing
- 835 file
 - Not specific to a submitted 837
 - All about claims processing, payments and denials
 - Each claim processed separately

835 Claim Status Codes

CLP*ALH048*1*150*150**MC*292013*11*1~

- Very confusing
- 1 does not mean **paid** as primary, 1 means **processed** as primary
- 2 does not mean **paid** as secondary, 2 means **processed** as secondary
- The only pure “denied” is 4
- 4 means there was a claim header problem and the entire claim could not be processed

Claim Status Codes Are in the ASC X12 Guides?

CLP02

1029

Claim Status Code

M 1 ID 1/2

Code identifying the status of an entire claim as assigned by the payor, claim review organization or repricing organization

id: 835W1_2100_CLP02_ClaimStatusCode

To determine the full claim status reference Claim adjustment reason codes in the CAS segment in conjunction with this claim status code.

CODE	DEFINITION
1	Processed as Primary Use this code if the claim was adjudicated by the current payer as primary regardless of whether any part of the claim was paid.
2	Processed as Secondary Use this code if the claim was adjudicated by the current payer as secondary regardless of whether any part of the claim was paid.
3	Processed as Tertiary Use this code if the claim was adjudicated by the current payer as tertiary (or subsequent) regardless of whether any part of the claim was paid.
4	Denied Usage of this code would apply if the Patient/Subscriber is not recognized, and the claim was not forwarded to another payer.

Claim Numbers

- 837 File
 - CLM*ALH048*150***11:B:1*Y*A*Y*Y*P~
 - Field is named “Patient Control Number”
 - Whatever is in this field is returned on the 835
 - Make sure the “Patient Control Number” is unique
- 835 File
 - CLP*ALH048*1*150*150**MC*292013*11*1~

Line Item Control Numbers

- 837 File
 - REF*6R*45456789002~
 - Assigned at the service detail level
 - Whatever is in this field is returned on the 835
 - Not required, but a good idea
- 835 File
 - REF*6R*45456789002~

837 File

CLM*ALH048*150***11:B:1*Y*A*Y*Y*P~

HI*ABK:F71~

NM1*82*1*SMITH*JOHN****XX*1073518460~

PRV*PE*PXC*207P00000X~

LX*1~

SV1*HC:99212*150*UN*1***1~

DTP*472*D8*20121127~

REF*6R*REF*6R*45456789002 ~

Paid 835 File

CLP*ALH048*1*150*150**MC*292013*11*1~
NM1*QC*1*DOE*JOE*****MI*947313518L~
NM1*82*1*SMITH*JOHN*****XX*1073518460~
AMT*AU*150~
SVC*HC:99212*150*150**1~
DTM*472*20130429~
REF*6R*45456789002~
AMT*B6*150~

Denied 835 File

CLP*ALH048*1*150*0**MC*292013*11*1~
NM1*QC*1*DOE*JOE****MI*947313518L~
NM1*82*1*SMITH*JOHN****XX*1073518460~
SVC*HC:99212*150*0**1~
DTM*472*20130429~
CAS*CO*31*150~
REF*6R*45456789002~

CAS Segment

Claim Adjustment Group Code

Claim Adjustment Reason Code

CAS*CO*31*150~

Adjustment Amount

Claim Adjustment Group Codes

- Found in the ASC X12 835 Guide
- CO – Contractual Obligations
 - Most adjustments are contractual adjustments
- PR – Patient Responsibility
 - SSI Adjustments
- PI – Payer Initiated Reductions
- OA – Other Adjustments

Claim Adjustment Group Codes

- Each claim adjustment type must be on a separate CAS segment
 - CAS*CO*45*50~
 - CAS*PR*142*860.49~
 - CAS*PI*132*145~
 - CAS*OA*97*57.8~

Claim Adjustment Group Codes

- A CAS segment can have up to six different adjustment codes
 - CAS*CO*1*50**2*75**11*10.1**45*5**52*22*
*67*4.32~
- If there are more than six adjustment codes for an adjustment type, the CAS segment can repeat

Adjusted 835 File

CLP*ALH048*1*150*100**MC*292013*11*1~
NM1*QC*1*DOE*JOE****MI*947313518L~
NM1*82*1*SMITH*JOHN****XX*1073518460~
AMT*AU*100~
SVC*HC:99212*150*100**1~
DTM*472*20130429~
CAS*CO*45*50~
REF*6R*45456789002~
AMT*B6*100~

Denied 835 File with Remark Codes

CLP*ALH048*1*150*0**MC*292013*11*1~
NM1*QC*1*DOE*JOE****MI*947313518L~
NM1*82*1*SMITH*JOHN****XX*1073518460~
SVC*HC:99212*150*0**1~
DTM*472*20130429~
CAS*CO*16*150~
REF*6R*45456789002~
LQ*HE*N54~

LQ Segment

Claim Payment Remark Code Qualifier



LQ*HE*N54~



Claim Payment Remark Code

Reason and Remark Codes

- Adjustment Reason Codes
 - The CAS segment can contain up to six claim adjustment reason codes
 - The CAS segment can only contain one claim adjustment group code
 - The CAS segment can repeat 99 times
- Claim Payment Reason Codes
 - The LQ segment will only include one reason code
 - The LQ segment can repeat up to 99 times

Where Do I Find Reason and Remark Codes?

- Washington Publishing Company
 - www.wpc-edi.com
 - View several code sets online
 - Buy code sets on CD
 - WPC also sells ASC X12 Implementation Guides
 - WPC also sells several EDI tools

EOB Code Crosswalk

<https://www2.ncdhhs.gov/DMA/hipaa/eobcrosswalk.pdf>

EOB	MEDICAID EOB DESCRIPTION	HIPAA ADJUSTMENT REASON CODE DESCRIPTION	HIPAA REMARK CODE DESCRIPTION	HIPAA CLAIM STATUS CODE DESCRIPTION
1	Fee adjusted to maximum allowable.	45 - Charge exceeds fee schedule-maximum allowable or contracted-legislated fee arrangement. (Use Group Codes PR or CO depending upon liability).	N381 - Consult our contractual agreement for restrictions-billing-payment information related to these charges.	65 - Claim-line has been paid. 483 - Maximum coverage amount met or exceeded for benefit period
2	Pre-admission not obtained.	197 - Precertification-authorization-notification absent.	N54 - Claim information is inconsistent with pre-certified-authorized services.	435 - Notice of Admission
3	Consecutive dates of service cannot be billed. List each date separately and resubmit.	125 - Submission-billing error(s).	N63 - Rebill services on separate claims.	187 - Date(s) of service.
4	Provider number missing or invalid. Enter corrected provider number on the claim and submit as a new claim.	125 - Submission-billing error(s).	N77 - Missing-incomplete-invalid designated provider number.	21 - Missing or invalid information. 132 - Entitys Medicaid provider ID

Most Common Issues

- Consumer cannot be identified
- Consumer's coverage has lapsed
- Consumer has other insurance
- Provider cannot be identified
- Service is not authorized
- Diagnosis is not valid for service
- Procedure code is not valid for date
- Duplicates

Special Situations – 837P COB

ISA*00* *00* *ZZ*12345 *ZZ*23071 *121130*1740*^*00501*000000181*1*T*:~
GS*HC*12345*13102*20121130*1740*181*X*005010X222A1~
ST*837*0048*005010X222A1~
BHT*0019*00*0008*20121130*1740*CH~
NM1*41*2*PROVIDER INC*****46*12346~
PER*IC*BILLING OFFICE*TE*9193329945~
NM1*40*2*ABC PAYER*****46*23071~
HL*1**20*1~
PRV*BI*PXC*101YM0800X~
NM1*85*2*PROVIDER INC*****XX*1023026986~
N3*141 K TECHNOLOY DR~
N4*GARNER*NC*275299999~
REF*EI*999445555~
HL*2*1*22*0~
SBR*S*18*****MC~
NM1*IL*1*DOE*JANE****MI*999447777L~
N3*ABC CHAPEL HILL RD~
N4*DURHAM*NC*27707~
DMG*D8*20001209*F~
NM1*PR*2*MCO PAYER*****PI*23071~
CLM*48*150***11:B:1*Y*A*Y*Y*P~
HI*ABK:F71~

Special Situations – 837 COB (cont.)

SBR*P*18*****CI~
AMT*D*10~
OI***Y*P**Y~
NM1*IL*1*DOE*JANE****MI*BC123987~
N3*ABC CHAPEL HILL RD~
N4*DURHAM*NC*27707~
NM1*PR*2*BCBS*****PI*9876~
LX*1~
SV1*HC:99214*150*UN*1***1~
DTP*472*D8*20121127~
SVD*9876*10*HC:99214**1~
CAS*CO*45*5~
CAS*PR*1*135~
DTP*573*D8*20121129~
AMT*EAF*135~
SE*36*0048~
GE*1*181~
IEA*1*000000181~

Special Situations – 837I SSI

ISA*00* *00* *ZZ*23273 *ZZ*DNC00 *130304*1131*^*00501*863063001*1*P*:~
GS*HC*23273*DNC00*20130304*113148*863063001*X*005010X223A2~
ST*837*863063001*005010X223A2~
BHT*0019*00*863063001*20130301*113148*CH~
NM1*41*2*HEALTHFUSION*****46*23273~
PER*IC*PAYER CERTIFICATION*TE*8168918444*FX*8168910705~
NM1*40*2*THE MCO CENTER*****46*DNC00~
HL*31**20*1~
PRV*BI*PXC*315P00000X~
NM1*85*2*MURDOCH DEVELOPMENTAL CEN*****XX*1699811125~
N3*1600 EAST C STREET~
N4*BUTNER*NC*275093000~
REF*EI*561552193~
PER*IC*MARY DOE*TE*9195276231*FX*9197331512~
NM1*87*2~
N3*2021 MAIL SVC CTR CBO~
N4*RALEIGH*NC*276992021~
HL*32*31*22*0~
SBR*P*18*****MC~
NM1*IL*1*DOE*JANE****MI*949185441L~
N3*MURDOCH CENTER*PO BOX 3000~
N4*BUTNER*NC*27509~
DMG*D8*19771024*F~
NM1*PR*2*THE MCO CENTER*****PI*DNC00~
N3*1120 POND DRIVE~
N4*BIG CITY*NC*27399~

Special Situations – 837I SSI

CLM*40911505I405681*15578.08***65:A:3**A*Y*Y~

DTP*434*RD8*20130201-20130228~

DTP*435*DT*196001280626~

CL1*2*2*30~

REF*G1*245130981~

REF*D9*0DQQ00EK80086~

REF*EA*0400859~

HI*BK:3182~

HI*BJ:3182~

HI*BF:3439*BF:34590*BF:78459*BF:59654*BF:6101*BF:7062*BF:81000*BF:72871*BF:78039*BF:3669*BF:5990*BF:23879~

HI*BF:4240*BF:2811*BF:5533*BF:7230*BF:56400*BF:81504*BF:4659*BF:486*BF:72141*BF:73300*BF:23871*BF:734~

HI*BH:11:D8:19600128~

HI*BE:23:::491*BE:80:::28~

HI*BG:D7~

NM1*71*1*HOLIDAY*DOC****XX*1265581888~

PRV*AT*PXC*207Q00000X~

LX*1~

SV2*0100**15578.08*DA*28~

REF*6R*405681I1~

SE*55*863063002~

GE*1*863063001~

IEA*1*863063001~

Implementation Guides versus Companion Guides

- Implementation guides contain HIPAA compliant Federal guidelines
 - Very detailed and usually very long
 - Cannot be overridden by Companion Guides
 - Developed by ANSI ASC X12
 - Published by Washington Publishing Company
- Companion guides contain instructions specific to the Payer
 - Must conform to the Federal Implementation Guides
 - Usually rather short
 - In many cases, will say “see the implementation guide”

QUESTIONS?