
IOWA MEDICAID ENTERPRISE

Standard Companion Guide Transaction Information

**Instructions related to Transactions based on ASC
X12 Implementation Guides, version 005010A1/A2**





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IOWA MEDICAID ENTERPRISE COMPANION GUIDE

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Preface

Companion Guides (CG) may contain two types of data, instructions for electronic communications with the publishing entity (Communications/Connectivity Instructions) and supplemental information for creating transactions for the publishing entity while ensuring compliance with the associated ASC X12 IG (Transaction Instructions). Either the Communications/Connectivity component or the Transaction Instruction component must be included in every CG. The components may be published as separate documents or as a single document.

The Communications/Connectivity component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange.

The Transaction Instruction component is included in the CG when the publishing entity wants to clarify the IG instructions for submission of specific electronic transactions. The Transaction Instruction component content is limited by ASCX12's copyrights and Fair Use statement.



Table of Contents

1	Introduction	7
1.1	Background	7
1.1.1	Overview of HIPAA Legislation	7
1.1.2	Compliance according to HIPAA	7
1.1.3	Compliance according to ASC X12	8
1.2	Scope	8
1.3	Overview	8
1.4	References	8
1.5	Additional Information	10
2	Getting Started	8
2.1	Working with EDISS	8
2.2	Trading Partner Registration	9
2.3	Certification and Testing Overview	10
3	Testing with the Payer	11
4	Connectivity with the Payer/Communications	11
4.1	PROCESS FLOWS	11
4.2	TRANSMISSION ADMINISTRATIVE PROCEDURES	12
4.3	RE-TRANSMISSION PROCEDURE	12
4.4	COMMUNICATION AND SECURITY PROTOCOL SPECIFICATIONS	12
	Providers Using a Vendor to Submit to EDISS	12
	Providers Submitting Directly to EDISS	12
5	Contact Information	13
5.1	EDI Support Services Help Desk	13
5.2	EDI Support Services Mailing Address	13
5.3	Provider Service Number	13
5.4	Applicable Websites/E-Mail	13
6	Control Segments/Envelopes	14
6.1	ISA-IEA	14
6.2	GS-GE	14
6.3	ST-SE	14



7 Payer Specific Business Rules and Limitations	14
8 Acknowledgements and/or Reports.....	15
8.1 The TA1 Interchange Acknowledgment (TA1).....	15
8.2 999 Functional Acknowledgement.....	15
9 Trading Partner Agreements.....	16
10 Transaction Specific Information	16
Appendices	18
1. Implementation Checklist	18
2. Business Scenarios.....	18
3. Frequently Asked Questions	19
4. Change Summary	19



1 Introduction

1.1 Background

1.1.1 Overview of HIPAA Legislation

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 carries provisions for administrative simplification. This requires the Secretary of the Department of Health and Human Services (HHS) to adopt standards to support the electronic exchange of administrative and financial health care transactions primarily between health care providers and plans. HIPAA directs the Secretary to adopt standards for transactions to enable health information to be exchanged electronically and to adopt specifications for implementing each standard HIPAA serves to:

- Create better access to health insurance
- Limit fraud and abuse
- Reduce administrative costs

1.1.2 Compliance according to HIPAA

The HIPAA regulations at 45 CFR 162.915 require that covered entities not enter into a trading partner agreement that would do any of the following:

- Change the definition, data condition, or use of a data element or segment in a standard.
- Add any data elements or segments to the maximum defined data set.
- Use any code or data elements that are marked “not used” in the standard’s implementation specifications or are not in the standard’s implementation specification(s).
- Change the meaning or intent of the standard’s implementation specification(s).



1.1.3 Compliance according to ASC X12

ASC X12 requirements include specific restrictions that prohibit trading partners from:

- Modifying any defining, explanatory, or clarifying content contained in the implementation guide.
- Modifying any requirement contained in the implementation guide.

1.2 Scope

The Transaction Instruction component of this companion guide must be used in conjunction with the associated ASC X12 Implementation Guides - 005010X279 and 005010X279A1 Health Care Eligibility Benefit Inquiry and Response (270/271). -The instructions in this companion guide are not intended to be stand-alone requirements documents. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guides and is in conformance with ASC X12's Fair Use and Copyright statements.

1.3 Overview

The Transaction Instruction component of this companion guide must be used in conjunction with an associated ASC X12 Implementation Guide.

1.4 References

For more information regarding electronic claims submission, HIPAA Standards and general EDI-industry questions visit the following links:

- <http://www.edissweb.com/med/news/hipaa5010.html>
- http://www.cms.gov/Versions5010andD0/40_Educational_Resources.asp
- <http://www.wpc-edi.com/>

2 Getting Started

2.1 Working with EDISS

EDI Support Services (EDISS) is available to assist Trading Partners Monday, Tuesday, Thursday and Friday from 8:00 AM to 5:00 PM CT, and Wednesday from 10:00 AM to 5:00 PM CT. Contact EDISS to initiate the registration process.



2.2 Trading Partner Registration

Listed below are the steps to begin sending healthcare data electronically through EDI Support Services (EDISS). Electronic Data Interchange (EDI) provides several benefits to providers. For more information on the benefits of EDI, [click here](#). To view CMS EDI instructions via the CMS website, [click here](#).

- **Register in Total OnBoarding (TOB)**
Totalonboarding.com 

Total OnBoarding is the initial account creation in TOB; where basic demographic information is collected and users will set up a login and password for their TOB account. If a facility is registered with EDISS for electronic transactions their registration information has been auto-loaded into TOB. The registration process will vary for this user type.

Steps in registration include:

- A. Creating a New User Account
- B. Selecting Account Type (i.e., Provider, Vendor, Additional Access)
- C. Adding contact Information
- D. Reading and Accepting TOB Agreements
- E. Creating a User name and Password for Account access for TOB

- **Confirm the primary email address**

A confirmation email is sent to the primary email address within minutes of the account creation. Instructions are included in the email for confirming that email address, which assures further delivery of TOB e-mails.

- **Manage NPI and Lines of Business**

New EDISS providers must enter the billing NPI(s) and choose the associated states (regions) for their profile. This may be the state in which the practice is located.

Existing EDISS providers are automatically registered in TOB and the NPI(s) is already on their profile. Providers should confirm that the automatic entries, such as NPI(s) and regions are accurate.

- **Select Vendors**

New EDISS providers may select a Vendor if they are using a Clearinghouse or Billing Service. If claims are sent directly to EDISS no vendor selection is required.



Existing EDISS providers' vendor information is automatically entered in TOB.. Providers should confirm that the vendor information is accurate.

Note: Vendors must be HIPAA compliant. EDISS provides a list on the EDISS website of HIPAA compliant vendors currently in production. To view the list, [click here](#).

- **Manage Transactions**

New EDISS providers must select the transactions associated with each NPI in their profile. The available transactions are dependent on the region selected on the profile.

Select transactions click the NPI on the profile. The screen for transaction selection appears. If the profile contains more than one NPI each NPI will have to be updated separately.

Existing EDISS providers are automatically entered in TOB and transactions exist on their profile. Providers should confirm that the transactions are accurate.

Note: For any direct transaction, a software vendor must be selected. If PC-ACE Pro32 is chosen as the software, a PC-ACE Service Agreement appears and must be acted upon.

- **Complete Enrollment Forms (if applicable)**

For some Lines of Business an enrollment form is required. Enrollment forms must be faxed to EDISS.

2.3 Certification and Testing Overview

Complete the Digital Certificate Process (if applicable)

Users who have a direct transaction that requires testing with EDISS must complete the Identity Validation Form process to obtain a Digital Certificate. For more information about Digital Certificates, view the FAQ page in TOB.

Complete the Testing Process (if applicable)

EDISS requires all Trading Partners to test their electronic health care claim transactions through TOB before being granted production status. The testing process verifies the format and structural accuracy of the electronic claim file sent by a Trading Partner. If a Billing Service or Clearinghouse sends claims on a provider's behalf, that vendor tests for the provider.



Some Billing Services and Clearinghouses have applied for Blanket Approval and may not need to test; this accelerates the process of being granted production status. [Click here](#) for the Blanket Approval guidelines and procedures. For more information about TOB testing process, view the FAQ page in TOB.

The steps above are outlined in the Total OnBoarding (TOB) User Guides and Online Tutorials located on the Total OnBoarding tab of the EDISS website.

3 Testing with the Payer

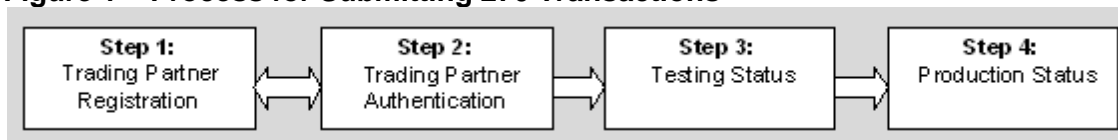
All newly registered Trading Partners must work with EDISS to complete basic transaction submission testing. Successful transaction submission and receipt of both valid and error responses is an indication that all systems involved can properly submit and receive transactions. EDISS is available to assist with new Trading Partner testing Monday, Tuesday, Thursday and Friday from 8:00 AM to 5:00 PM CT, and Wednesday from 10:00 AM to 5:00 PM CT.

4 Connectivity with the Payer/Communications

4.1 PROCESS FLOWS

In order to access the EDISS applications, potential Trading Partners must obtain a Submitter ID through EDISS. Figure 1 illustrates the high level process for successfully registering as a Trading Partner and submitting 270 transactions:

Figure 1 – Process for Submitting 270 Transactions





4.2 TRANSMISSION ADMINISTRATIVE PROCEDURES

The EDISS system is available 24 hours a day, 7 days a week, with the exception of scheduled system maintenance. EDISS will notify the Trading Partners of any planned or unplanned downtime. Notifications are available via the EDISS website: www.edissweb.com.

The EDISS production systems maintenance window is Sunday from 6:00 am - 12:00 pm (CT) and Thursday from 12:00 am - 3:00 am (CT). These timeframes were selected since EDISS typically has low activity during this time and would have the least impact on Trading Partners. We apologize for any inconvenience. If you have scheduled any jobs to automatically send your claim data, please note this downtime and adjust scheduled sends accordingly.

4.3 RE-TRANSMISSION PROCEDURE

Trading Partners may contact EDISS for assistance in researching problems with their transactions. However, EDISS will not edit Trading Partner eligibility data and/or resubmit transactions for processing on behalf of a Trading Partner. The Trading Partner must correct the file and resubmit, following the same processes and procedures of the original file.

4.4 COMMUNICATION AND SECURITY PROTOCOL SPECIFICATIONS

Connection to EDISS depends on the method in which you send data to EDISS.

Providers Using a Vendor to Submit to EDISS

When submitting EDI transaction(s) to a Billing Service or Clearinghouse, connectivity may be the responsibility of the vendor. Verify with the vendor before attempting to establish connectivity to EDISS.

Providers Submitting Directly to EDISS

When submitting claims directly to EDISS, the provider must establish and maintain a direct connection to EDISS. One of the most frequently used options to connect to EDISS is HyperTerminal.

HyperTerminal is communication software installed on many computers running on a Microsoft Windows based operating system. Although EDISS does not support HyperTerminal, EDISS provides documentation for configuring HyperTerminal for data transmission.

A generic HyperTerminal session to establish a connection between your office and EDISS is available for download under the PC-ACE Pro32 link on EDISS website, www.edissweb.com.

Additional information is provided using the following link:
<http://www.edissweb.com/med/software/index.html>



5 Contact Information

5.1 EDI Support Services Help Desk

Phone: 1-800-967-7902

Fax: 1-701-277-7850

Hours of Operation:

- Monday, Tuesday, Thursday and Friday 8:00 a.m. - 5:00 p.m. (CT)
- Wednesday 10:00 a.m. - 5:00 p.m. (CT)

5.2 EDI Support Services Mailing Address

EDI Support Services
PO Box 6729
Fargo, ND 58108-6729

5.3 Provider Service Number

Provider inquiries regarding claims, credit/adjustments, provider enrollment and status of application.

Toll Free Phone: 800-338-7909

Des Moines Area Phone: 515-256-4609

Fax: 515-725-1155

Hours of Operation: Monday through Friday 7:30 a.m. - 4:30 p.m. (CT)

5.4 Websites and Email Address

support@edissweb.com

Note: When using email to contact EDISS, include the following information:

- Your name
- Business name and location
- Business telephone number and extension
- Complete description of the issue

To ensure delivery to your inbox (not bulk or junk mail folders), please add support@edissweb.com to your address book or safe list.

<http://www.ime.state.ia.us/Providers/index.html>

6 Control Segments/Envelopes

6.1 ISA-IEA

The following table details the values specifically required within the ISA Header of the 270 Request transaction.

Loop ID	Reference	Name	Codes	Notes/Comments
Control Segment	ISA	INTERCHANGE CONTROL HEADER		
Control Segment	ISA06	Interchange Sender ID		Assigned by EDISS
Control Segment	ISA08	Interchange Receiver ID	18049	

6.2 GS-GE

The following table details the values specifically required within the GS Header of the 270 request transaction.

Loop ID	Reference	Name	Codes	Notes/Comments
Control Segment	GS	Functional Group Header		
Control Segment	GS02	Application Senders Code		Assigned by EDISS
Control Segment	GS03	Application Receiver's Code	0026	

6.3 ST-SE

There are no expected custom values for the ST/SE segments within the 270 request. Please follow the rules as specified by the IG.

7 Payer Specific Business Rules and Limitations

This section contains payer-specific information that is not necessarily tied to specific data elements or segments (which are more appropriately described in Section 3). It includes descriptions of business rules, processes, or limitations that impact how the



payer uses the content of inbound transactions or creates the content of outbound transactions. This information is intended to help the trading partner understand the business context of the EDI transactions.

- All inbound data is edited against HIPAA x12 standards.
 - EDISS built edits into processing that check for structural and syntactical correctness. Data that does not pass these edit levels is returned to the Trading Partner on HIPAA based acknowledgement reports (999 Functional Acknowledgement).
- Spend Down transaction is not supported and hence the cancellation of Spend Down is not supported either.
- The Generic Request type (Type 30) and the 10 Mandatory Service Types are the only Request types supported. All other explicit Service Type requests are treated as Generic Requests.
- Issue Date is not considered for Processing

8 Acknowledgements and/or Reports

8.1 The TA1 Interchange Acknowledgment (TA1)

The TA1 Interchange Acknowledgment (TA1) is used to acknowledge syntactical correctness of the envelope associated with an ANSI X12 claim transaction. The TA1 report will be delivered only if the ISA*14 is set to "1" and there are errors. The TA1 report will not generate if no errors are detected.

8.2 999 Functional Acknowledgement

The purpose of the 999 Functional Acknowledgement is to confirm that the submitted file passed standard level syntax and structure editing within EDI Support Services (EDISS) front -end collection system. The report is generally available the same day the file is submitted.



9 Trading Partner Agreements

EDISS defines a Trading Partner as an entity that exchanges electronic health care information with EDISS.

Following criteria must be met in order to exchange electronic health care information with EDISS as a Trading Partner:

- A profile must exist within the Total OnBoarding system (TOB).
- A Network Service Agreement must be on file with EDISS.

Trading Partners (TP) that want to submit production 270 transactions electronically to EDISS must first pass a testing process. During the testing process, EDISS will work closely with the TP to ensure the claim file meets the structure and format required, and the data contains specific requirements for processing.

10 Transaction Specific Information

This section describes how ASC X12N Implementation Guides (IGs) adopted under HIPAA will be detailed with the use of a table. The tables contain a row for each segment that Acme Health Plan has something additional, over and above, the information in the IGs. That information can:

1. Limit the repeat of loops, or segments
2. Limit the length of a simple data element
3. Specify a sub-set of the IGs internal code listings
4. Clarify the use of loops, segments, composite and simple data elements
5. Any other information tied directly to a loop, segment, composite or simple data element pertinent to trading electronically with Acme Health Plan

In addition to the row for each segment, one or more additional rows are used to describe Acme Health Plan's usage for composite and simple data elements and for any other information. Notes and comments should be placed at the deepest level of detail. For example, a note about a code value should be placed on a row specifically for that code value, not in a general note about the segment.

The following table specifies the columns and suggested use of the rows for the detailed description of the transaction set companion guides.

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
	Control Segment	ISA	INTERCHANGE CONTROL HEADER			



IOWA MEDICAID ENTERPRISE COMPANION GUIDE

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
	Control Segment	ISA06	Interchange Sender ID		7	Assigned by EDISS
509	Control Segment	ISA08	Interchange Receiver ID	18049	5	
	Control Segment	GS	Functional Group Header			
513	Control Segment	GS02	Application Sender's Code		7	Assigned by EDISS
513	Control Segment	GS03	Application Receiver's Code	0026	4	



Appendices

1. Implementation Checklist

In order to access the EDISS applications, potential Trading Partners need to obtain a Submitter ID through EDISS.

Step 1: Trading Partner Registration

Complete TOB registration and the applicable NAS Iowa Medicaid enrollment form.

Step 2: Production Status

Once testing is complete, a Trading Partner can begin to submit 270 transactions and receive 271 transactions in the Production environment. The Usage Indicator (ISA15) must be "P".

2. Business Scenarios

This section contains all typical business scenarios with transmission examples. The scenarios and examples are intended to be explicit examples of situations that are not described in detail within in the implementation guide.

- Spend Down transaction is not supported and hence the cancellation of Spend Down is not supported either.
- The Generic Request type (Type 30) and the 10 Mandatory Service Types are the only Request types supported. All other explicit Service Type requests are treated as Generic Requests.
- Issue Date is not considered for Processing.
- EDISS collects transactions from two different connectivity portals for the Iowa Medicaid Line of Business.
 - Iowa Medicaid Web Portal – Provides a means for Iowa Medicaid Trading Partners to conduct electronic transactions with EDISS via the internet.
 - Bulletin Board System (BBS) – Provides direct connection to EDISS and is obtained through dialing into the EDISS through a phone modem.
- The EDISS Trading Partner community is comprised of Vendors and Direct Submitters.
 - **Vendor** - A vendor is an entity that provides hardware, software and/or ongoing technical support for covered entities. In EDI, a vendor can be classified as a software vendor, billing service or clearinghouse.



Direct Submitter - A facility which sends electronic health care transactions to EDISS without the aid of a third party vendor. Facilities that use a software vendor but handle submitting their claims internally are still considered direct.

3. Frequently Asked Questions

<http://www.edissweb.com/med/registration/index.html>

http://www.edissweb.com/docs/shared/edi_faq.pdf

4. Change Summary

Version	Date	Description of Change
1.0	12/27/11	Initial Release
1.1	01/01/13	Updated format for compliance with CORE Phase I Policies Operating Rules