

EDI Support Services

Frequently Asked Questions

The following page of frequently asked questions is broken down into sections related to topic for your convenience.

Getting Started

How do I get started with Electronic Data Interchange Support Services (EDISS)?

Visit our [Registration](#) page for an overview of the entire getting started process. It can be accessed via the homepage of www.edissweb.com.

What is required for enrollment with EDISS?

To begin enrollment, EDISS requires providers create an online profile in EDISS 'Connect'. Creating a profile in EDI Connect provides EDISS with all the necessary information for setup completion in our system. All demographic, facility, line of business, electronic transaction, and method of submission information is captured immediately during online registration.

What is Connect?

Connect is a web-based application that allows providers to update basic facility information, add billing NPIs and lines of business, add or change vendor associations, and manage their electronic transactions online.

What are the advantages of Connect?

With the inception of Connect, enrollment with EDISS has become much more efficient.

The following is a list of additional advantages of Connect:

- Easy control/management of user profiles
- Administrative and operational cost savings
- Real-time registration and validation of EDI status

Is there any paperwork required for registration?

Providers new to EDISS are only required to submit the appropriate enrollment form to register for electronic transactions. Depending on the line of business and location of practice, the form(s) may be different. During registration through

In this document:

Answers to the most common EDI questions:

- Getting Started
- Testing Process
- Connectivity
- Understanding Reports
- Claim Payment
- General Claim Questions

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Connect, users are prompted to download the appropriate form(s). Any form that EDISS requires needs to be faxed to the fax number listed on the needed form.

How long will it take to get set up to submit electronically?

EDISS strives to have all provider setups processed within 7-10 business days. Depending on how a provider has chosen to submit claims to EDISS, they may have to complete the testing process before they can send production claims to EDISS. See below for more information about the testing process.

Testing Process

Am I required to test?

EDISS requires all direct providers to test claim submission. Testing ensures providers submit claim transactions in the HIPAA compliant format and meet the syntax and structure billing requirements defined in the Implementation Guide and the Companion Documents.

Providers who use a Billing Service or Clearinghouse to submit claim transactions will have that Billing Service or Clearinghouse test on their behalf.

Billing Services and Clearinghouses have the option of applying for Blanket Approval. Blanket Approval status indicates the Billing Service or Clearinghouse is no longer required to test each individual provider. For more information on Blanket Approval, review the [Blanket Approval Criteria](#) document listed under the Vendors page of www.edissweb.com.

All lines of business other than Medicare will be able to test in Connect. For more information on testing, visit www.edissweb.com and select Registration at the top of the page.

How do I submit a test file?

Test files are submitted over the internet through Connect. Directions for submitting a test file are included in the Connect User Guide found on the Registration page of www.edissweb.com. We recommend reviewing these instructions prior to contacting our help desk with any additional questions.

How do I know when I can begin testing?

Testing can begin in Connect when the following statements are true:

- All appropriate enrollment forms have been received by EDISS.
- A Submitter ID has been assigned to your profile.
- 837 transactions indicate testing required.

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My test file passed; does that mean I am in production?

EDISS reviews the file and completes the steps to move the associated NPI into a production status. Once set up in production, your transaction is approved in Connect.

Connectivity Questions

Is there downtime for submitting claims to EDISS?

EDISS phone lines are available for submission of production files 24/7, with the exception of every Sunday from 6:00 a.m. to 12:00 p.m. (CT) when the lines are unavailable for scheduled maintenance.

Why can't I log into the Bulletin Board System (BBS)?

The following are the most common reasons for the inability to log into the Bulletin Board System:

- The Submitter dialed the incorrect phone number. Verify the phone number by checking the number listed on the production fax (sent by EDISS).
- The login password has expired. All passwords for the Bulletin Board System expire every 60 days. Documentation titled [Changing Passwords in EDISS' Bulletin Board System \(BBS\)](#) is available on the Software/Connectivity page of our website to assist providers with updating the password.
- The password is suspended. For security reasons, if the Submitter enters a login and password incorrectly three times, EDISS suspends the user. The Submitter needs to have the contact person listed with EDISS call to have the password reset.

Why can't I change my Bulletin Board System (BBS) password?

The following are the most common occurrences for the inability to change a password on the Bulletin Board System:

- The password does not meet the required criteria. EDISS lists password criteria on the bottom of the testing and production faxes sent to the Submitter. If the Submitter does not follow the criteria, the system does not allow them to change the password.
- The password is suspended. For security reasons, if a Submitter enters a login and password incorrectly three times, EDISS suspends the user. The Submitter must call EDISS to have the password reset.

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How do I send an electronic transaction through the Bulletin Board System (BBS)?

Submitters can send transactions after EDISS sends them a production email. The Submitter dials the number listed on the email to access the Bulletin Board System (BBS). To log into the BBS, the Submitter uses the login ID and password on the fax. Upon the first login, the password expires. Instructions on using the [Bulletin Board System](#) are available on the Training and Help page our website. For assistance in sending a file to EDISS, providers testing directly with EDISS should reference the Bulletin Board System (BBS) documentation located on the Training and Help page of our website.

Understanding Reports

I submitted a claim file and I do not understand an error on my report. What should I do?

Depending on which report lists the error, Submitters have the ability to research the error on their own.

- For errors on any report (Transaction Acknowledgement report (TRN), TA1 Interchange Acknowledgement Report, 999 report and 277CA report, Submitters can review the report documentation on the Reports page of our website. Submitters without access to the Implementation Guides or to software that translates the report may call EDISS for assistance in reviewing the report.

I did not receive all reports regarding the status of my claim file. What should I do?

If a Submitter did not receive all reports, one of two scenarios is likely:

The submitted claim file had errors that stopped any further processing. Submitters should review all delivered reports. If errors are present, correct them and resubmit the corrected claim file.

The Submitter submitted the claim file during a busy time of operation in EDISS and is experiencing slower processing times. Submitters can check the [EDISS homepage](#) to see any noted delays in processing. The reports can take up to 2-4 hours to generate.

Claim Payment

How long does it take to receive payment?

Claims submitted electronically pay in 14 days, while claims submitted on paper pay in 27 days. If additional adjudication occurs on the claim, payment may take longer than 14 days.

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Why did my claim deny for payment?

EDISS cannot provide information to Submitters regarding the denial of claim payment. EDISS does not have the necessary information to research denial inquiries once the claim passes the editing performed by EDISS' front-end processing system. Submitters need to contact the appropriate call center for assistance. The call center representative should be able to state why the claim denied for payment. At that point, if the Submitter has questions or concerns with the data submitted in the claim file, EDISS would be the appropriate area to call. A representative with the EDISS Help Desk can review the submitted file for the data in question as long as the Submitter submitted the file within the past 30 days.