# Health Care Claim Status Request and Notification (276/277)

ASC X12N 276/277 (005010X212)

NE Medicaid 5010 Companion Guide

Department of Health & Human Services



# DIVISION OF MEDICAID AND LONG-TERM CARE

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# Nebraska Medicaid Companion Guide Version 3.00

#### **Disclosure Statement**

This Companion Guide is to be used with, and not as a replacement for, the ASC X12N 5010 version of the HIPAA Transaction Technical Report Type 3 (TR3).

The TR3's for each transaction are available electronically from ASCX12 at <a href="http://store.x12.org">http://store.x12.org</a>.

This Companion Guide is considered a living document, and as such, the information provided herein will be subject to change. A copy of the document and any changes to the document will be posted via the NE Medicaid website located at: <u>https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx</u>

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#### Preface

This Companion Guide to the ASC X12N Technical Report Type 3 (TR3) adopted under HIPAA clarifies and specifies the data content when data is transmitted electronically to or from Nebraska Medicaid (NE Medicaid). Transmissions based on this Companion Guide, used in tandem with the X12N TR3, are compliant with both X12N syntax and those guides.

This Companion Guide is intended to convey information that is within the framework of the ASC X12N TR3 adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usage of data expressed in the TR3.

All transactions must be submitted in accordance with the regulations contained within the Nebraska Administrative Code (NAC) Title 471, Nebraska Medical Assistance Program and Title 482, Nebraska Managed Care Program.

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# **1 INTRODUCTION**

# 1.1 SCOPE

This Companion Guide contains the format and establishes the data content of the **Health Care Claim Status Request (276) and Health Care Claim Status Notification (277)** HIPAA X12 transactions.

# **1.2 OVERVIEW**

This Companion Guide governs the **Health Care Claim Status Request and Notification (276/277)** HIPAA X12 transaction (ASC X12N 276/277 (005010X212)).

# **1.3 REFERENCES**

- ASC X12 Version 5010A1 Implementation Guides: <u>http://store.x12.org</u>
- CAQH/CORE: <u>https://www.caqh.org/</u>
- NE Medicaid Program Electronic Data Interchange (EDI) Home Page: <u>https://dhhs.ne.gov/Pages/Medicaid-Provider-Electronic-Data-Interchange.aspx</u>
- NE Medicaid EDI Help Desk 866-498-4357 or 402-471-9461 (in Lincoln) or via email at <u>DHHS.MedicaidEDI@nebraska.gov</u>.

# **1.4 ADDITIONAL INFORMATION**

Nebraska Medicaid currently supports both batch and real-time transactions for HTTP/S and batch only for SFTP for the 276/277.

# 2 GETTING STARTED

# 2.1 WORKING WITH NEBRASKA MEDICAID

Trading Partners interested in submitting the 276/277 transaction for either real-time or batch should contact the NE Medicaid EDI help desk at 866-498-4357 or 402-471-9461 (in Lincoln) or via email at: <u>DHHS.MedicaidEDI@nebraska.gov</u>.

# 2.2 TRADING PARTNER ENROLLMENT

Trading Partners are required to enroll with NE Medicaid in order to submit 276 requests and receive 277 responses. Required forms for testing/production submission are:

- i. Nebraska Medicaid Trading Partner Agreement
- ii. Nebraska Medicaid Trading Partner Profile
- iii. Nebraska Medicaid Trading Partner Authorization

Forms required to initiate the enrollment process can be found on the NE Medicaid EDI web page at: https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx

## 2.3 TESTING OVERVEW

After all required forms are submitted and accepted by Nebraska Medicaid, you may begin to submit test transactions. Nebraska Medicaid's testing region will mirror the production region.

For more information on testing, please visit the NE Medicaid EDI testing web page at: <a href="https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx">https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx</a>

# **3 TESTING WITH THE NEBRASKA MEDICAID**

#### • For SFTP batch transactions:

- Trading Partners must submit a minimum of two test files, where the majority of inquiries process correctly.
- If you submit requests for more than one provider, the test file must contain requests for more than one provider but does not need to contain a request for every provider.
- $\circ$   $\;$  Each file should contain different requests than in previous files.
- Batch Files received before 2:30 p.m. will be processed on the day they are received. If they are received after 2:30 p.m., they will be processed with the next day's test files.
- $\circ$   $\;$  Test results will be placed in your outbox and sent via email.

#### • For HTTP/S batch transactions:

- Trading Partners must submit a minimum of two test files, where the majority of requests process correctly.
- If you submit requests for more than one provider, the test file must contain requests for more than one provider but does not need to contain a request for every provider.
- Each file should contain different requests than in previous files.
- All batch files received will be processed in the order they are received. Acknowledgements will be available within an hour of the receipt of the 276 batch transaction. The 277 Response will be available no later than 6:00 a.m. CT, if submitted before 8:00 p.m. CT.
- Trading Partners will be required to submit a completed <u>Nebraska Medicaid Program HTTP/S Trading Partner Testing Status Form</u> to the EDI Help Desk at <u>DHHS.MedicaidEDI@nebraska.gov</u> to receive test results.
  - A blank copy of this form is available by contacting the EDI Help Desk at: <u>DHHS.MedicaidEDI@nebraska.gov</u> or in Appendix A.

# • For HTTP/S real-time transactions:

- Trading Partners must submit a minimum of five test requests without exceeding 1 request per transaction set that process correctly.
- Trading Partners will be required to submit the <u>Nebraska Medicaid Program HTTP/S Trading Partner Testing Status Form</u> to the EDI Help Desk at <u>DHHS.MedicaidEDI@nebraska.gov</u> to receive test results.
  - A blank copy of this form is available by contacting the EDI Help Desk at: <u>DHHS.MedicaidEDI@nebraska.gov</u> or in Appendix A.

For further information, please refer to EDI Testing webpage found at <a href="https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Partner-Enrollment.aspx">https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Partner-Enrollment.aspx</a>

#### 4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

Nebraska Medicaid currently supports both batch and real-time transactions for HTTP/S and batch only for SFTP for the 276/277.

#### 4.1 PROCESS FLOWS

**HTTP/S**: Please refer to the HTTP/S Nebraska Medicaid Submission Guide. This can be found on the EDI Submissions Requirements (5010) web page at: <u>https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx</u>

**SFTP**: Please refer to the SFTP Nebraska Medicaid Submissions Guide. This can be found on the EDI Submissions Requirements (5010) web page at: <u>https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-</u> <u>Submission-Requirements.aspx</u>

#### 4.2 TRANSMISSION ADMINISTRATIVE PROCEDURES

**<u>Real-time transactions</u>**: limited to one inquiry per transaction set.

**Batch transactions**: All batch files received will be processed in the order they are received. Acknowledgements will be available within an hour of receipt of the 276 batch transaction. The 276 Response for HTTP/S batch files will be available no later than 6:00 a.m. CT, if submitted before 8:00 p.m. CT.

For further information, please refer to the Nebraska Medicaid Submission guides at: <u>https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx</u>

Information on system maintenance and downtimes can be found at: <u>https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx</u>

#### 4.3 RE-TRANSMISSION PROCEDURE

Please refer to the Nebraska Medicaid Submission guides at: <u>https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx</u>

#### 4.4 COMMUNICATION PROTOCOL SPECIFICATIONS

Please refer to the Nebraska Medicaid Submission guides at: https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx

#### 4.5 PASSWORDS

Please refer to the Nebraska Medicaid Submission guides at: https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx

# **5 CONTACT INFORMATION**

#### 5.1 EDI CUSTOMER SERVICE

866-498-4357 or 402-471-9461 (in Lincoln) or via email at <u>DHHS.MedicaidEDI@nebraska.gov</u>.

#### 5.2 EDI TECHNICAL ASSISTANCE

866-498-4357 or 402-471-9461 (in Lincoln) or via email at DHHS.MedicaidEDI@nebraska.gov.

#### 5.3 PROVIDER SERVICE NUMBER

Medicaid Claims Customer Service Center at 877-255-3092 or in Lincoln at 402-471-9128

#### 5.4 APPLICABLE WEBSITES/E-MAIL

- NE Medicaid Program Electronic Data Interchange (EDI) Home Page: <u>https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx</u>
- NE Medicaid EDI Help Desk 866-498-4357 or 402-471-9461 (in Lincoln) or via email at DHHS.MedicaidEDI@nebraska.gov.
- NE Medicaid and Long-Term Care home web page: http://dhhs.ne.gov/medicaid/Pages/medicaid\_index.aspx
- ASC X12 Version 5010X212 Implementation Guides: <u>http://store.x12.org</u>

#### **6 CONTROL SEGMENTS/ENVELOPES**

#### 6.1 ISA-IEA

The Trading Partner identifies the ISA05 and ISA06 on the Trading Partner Profile.

| Loop<br>ID | Segment<br>Type | Element<br>Identifier | Element<br>Name             | NE Medicaid Directive                                 |
|------------|-----------------|-----------------------|-----------------------------|---|
| Header     | ISA             | ISA05                 | Interchange<br>ID Qualifier | Use code identified on the<br>Trading Partner Profile |
|            |                 | ISA06                 | Interchange<br>Sender ID    | This value cannot be<br>"MMISNEBR". Use code          |

| Loop<br>ID | Segment<br>Type | Element<br>Identifier | Element<br>Name            | NE Medicaid Directive                    |
|------------|-----------------|-----------------------|----------------------------|--|
|            |                 |                       |                            | identified on Trading<br>Partner Profile |
|            |                 | ISA08                 | Interchange<br>Receiver ID | Use "MMISNEBR".                          |

#### 6.2 GS-GE

The Trading Partner identifies the GS02 on the Trading Partner Profile.

| Loop<br>ID | Segment<br>Type | Element<br>Identifier | Element<br>Name                   | NE Medicaid Directive  |
|------------|-----------------|-----------------------|-----------------------------------|--|
| Header     | GS              | GS02                  | Application<br>Sender's<br>Code   | This value cannot be<br>"MMISNEBR". Use value<br>identified on Trading<br>Partner Profile. |
|            |                 | GS03                  | Application<br>Receiver's<br>Code | Use "MMISNEBR".  |

#### 6.3 ST-SE

Please refer to the ASC X12N 5010 version of the HIPAA Transaction Technical Report Type 3 (TR3). The TR3's for each transaction are available electronically from ASCX12 at <u>http://store.x12.org</u>.

# **7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS**

Nebraska Medicaid Provider Handbooks are published on this DHHS web site. Each handbook includes the Medicaid regulations, appendices (forms, reports, and instructions) and provider bulletins applicable to each type of Medicaid provider.

For a complete listing, go to <u>Rules and Regulations</u> and <u>Provider Bulletins</u>. Provider handbooks are available at https://dbbs.pe.gov/Pages/Medicaid-Providers.aspx

https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx

# **8 ACKNOWLEDGEMENTS**

#### 8.1 REAL-TIME

The following responses can be expected from NE Medicaid for a realtime 276 transaction:

- 277 response transaction indicating the requested Claim Status (or)
- The ASC X12C/005010X231A1 Implementation Acknowledgement for Health Care Insurance (999) TR3

acknowledgement (for a 276 Reject) if the 276 transaction contains HIPAA compliancy errors

• TA1 acknowledgement for interchange errors.

# 8.2 BATCH SFTP

The following responses can be expected from NE Medicaid for a Batch 276 transaction:

- 277 response transaction will be available within two hours of processing with the requested Claim Status information.
- 999 acknowledgement within an hour of the 276 transaction to indicate whether the functional group was either accepted, accepted with errors or rejected.
- Nebraska Medicaid will generate a TA1 transaction for every inbound HIPAA X12 transaction received with a value of "1" in the ISA14 element of the ISA segment.

# 8.3 BATCH HTTP/S

The following responses can be expected from NE Medicaid for a Batch 276 transaction:

- 277 response transaction with the requested Claim Status information.
- 999/TA1 acknowledgement within an hour of the 270 transaction to indicate whether the functional group was either accepted, accepted with errors or rejected.
- Nebraska Medicaid will generate a TA1 transaction for every inbound HIPAA X12 transaction received with a value of "1" in the ISA14 element of the ISA segment.

# **9 TRADING PARTNER AGREEMENTS**

Nebraska Medicaid Trading Partner Agreement is located at: <u>https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx</u>

#### 9.1 TRADING PARTNERS

A Trading Partner agreement means an agreement related to the exchange of information in electronic transactions. Nebraska Medicaid Providers can submit or receive electronic transactions directly or through a third party, such as a clearinghouse, to Nebraska Medicaid. The submitter of such transactions is known as a "Trading Partner." NE Medicaid will only exchange transactions with an approved Trading Partner after all required forms are submitted and accepted.

In order to ensure the integrity, security and confidentiality of data exchanged in electronic transactions and to permit appropriate disclosure and use of such data as permitted by law, Nebraska Medicaid

and the Trading Partner enter into this Agreement to address the conditions under which data will be exchanged and to ensure data will be exchanged in accordance with the Transaction and Code Set requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), when applicable.

Information regarding Trading Partner Enrollment Forms and EDI Testing can be found in Nebraska Medicaid Electronic Data Interchange (EDI) Home Page at:

https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx

# **10 TRANSACTION SPECIFIC INFORMATION**

Data usage requirements for Nebraska Medicaid will be identified throughout the Companion Guide as NE Medicaid directives. <u>Note</u>: Only segments with specific NE Medicaid directives are included in this Companion Guide.

NE Medicaid directives are shown for a specific data element and are used in both required and situational segments for the following circumstances:

- When a specific value is required by NE Medicaid, a Nebraska Medicaid Directive will be included indicating the value to use.
- When NE Medicaid uses a specific qualifier, a Nebraska Medicaid Directive indicating which qualifiers are used and when they are allowed will be included.

Transactions containing information not ASC X12N compliant will be rejected and will not enter into the adjudication system. An ASC X12N 999 or TA1, when requested, will be used to convey the rejection and associated reason.

| Loop | Segment-<br>Element | Name /<br>Implementation Name  | Nebraska Medicaid Directive   |
|------|---------------------|--------------------------------|---|
| ISA  |                     | INTERCHANGE CONTROL<br>HEADER  |   |
|      | ISA05               | Interchange ID Qualifier       | Use code identified on the Trading<br>Partner Profile                                   |
|      | ISA06               | Interchange Sender ID          | This value cannot be<br>"MMISNEBR". Use code identified<br>on Trading Partner Profile   |
|      | ISA08               | Interchange Receiver ID        | Use "MMISNEBR".   |
| GS   |                     | FUNCTIONAL GROUP<br>HEADER     |   |
|      | GS02                | Application Sender's Code      | This value cannot be<br>"MMISNEBR". Use value identified<br>on Trading Partner Profile. |
|      | GS03                | Application Receiver's<br>Code | Use "MMISNEBR".   |

# **10.1 276 TRANSACTION**

| Loop                      | Segment-<br>Element                   | Name /<br>Implementation Name                 | Nebraska Medicaid Directive   |
|---------------------------|---------------------------------------|---|---|
| 2100A                     | NM1                                   | PAYER NAME                                    |   |
|                           | NM109                                 | Payer Identifier                              | Use "NEMEDICAID"  |
| 2100B                     | NM1                                   | INFORMATION RECEIVER<br>NAME                  |   |
|                           | NM109                                 | Information Receiver<br>Identification Number | Use the four-digit Medicaid assigned Submitter ID                       |
| 2100C                     | NM1                                   | PROVIDER NAME                                 |   |
|                           | NM108                                 | Identification Code<br>Qualifier              | NE Medicaid will only process "XX" or "SV"                              |
| 2000D                     | 0D HL SUBSCRIBER LEVEL                |   |   |
|                           | HL04                                  | Hierarchical Child Code                       | NE Medicaid will only process "0"                                       |
| 2100D NM1 SUBSCRIBER NAME |                                       | SUBSCRIBER NAME                               |   |
|                           | NM102                                 | Entity Type Qualifier                         | NE Medicaid will only process "1"                                       |
|                           | NM108                                 | Identification Code<br>Qualifier              | NE Medicaid will only process "MI"                                      |
|                           | NM109                                 | Subscriber Identifier                         | Use the 11-digit Nebraska<br>Medicaid assigned Subscriber ID<br>number. |
| 2210D                     | 2210D SVC SERVICE LINE<br>INFORMATION |   |   |
|                           | SVC01 - 1                             | Product or Service ID<br>Qualifier            | Nebraska Medicaid will only<br>process "AD", "HC", "N4" or "NU"         |

# **10.2 277 TRANSACTION**

| Loop  | Segment-<br>Element | Name /<br>Implementation Name         | Nebraska Medicaid Directive  |
|-------|---------------------|---------------------------------------|--|
| ISA   |                     | INTERCHANGE CONTROL<br>HEADER         |  |
|       | ISA05               | Interchange ID Qualifier              | Code "ZZ" is used.   |
|       | ISA06               | Interchange Sender ID                 | "MMISNEBR" is used.  |
|       | ISA07               | Interchange ID Qualifier              | The code identified on the Trading Partner Profile is used.  |
|       | ISA08               | Interchange Receiver ID               | "MMISNEBR" is used.  |
|       | ISA13               | Interchange Control<br>Number         | The Interchange Control Number,<br>ISA13, must be identical to the<br>associated Interchange Trailer<br>IEA02. |
| GS    |                     | FUNCTIONAL GROUP<br>HEADER            |  |
|       | GS02                | Application Sender's Code             | The value identified on Trading<br>Partner Profile is used.  |
|       | GS03                | Application Receiver's<br>Code        | "MMISNEBR" is used.  |
| 2100A | NM1                 | PAYER NAME                            |  |
|       | NM109               | Payer Identifier                      | "NEMEDICAID" will be sent  |
| 2100A | PER                 | PAYER CONTACT<br>INFORMATION          |  |
|       | PER04               | Payer Contact<br>Communication Number | NE Medicaid Customer Service<br>Center Phone Numbers   |

| Loop  | Segment-<br>Element | Name /<br>Implementation Name        | Nebraska Medicaid Directive  |
|-------|---------------------|--------------------------------------|--|
|       |                     |                                      | (877) 255-3092 or (402) 471-<br>9128 are used.                           |
|       | PER06               | Communication Number                 | NE Medicaid Customer Service<br>Center Phone Numbers                     |
|       | PERUO               | Communication Number                 | (877) 255-3092 or (402) 471-<br>9128 are used.                           |
| 2100C | NM1                 | PROVIDER NAME                        |  |
|       | NM108               | Identification Code<br>Qualifier     | NE Medicaid will only send "SV" and "XX".                                |
| 2100D | NM1                 | SUBSCRIBER NAME                      |  |
|       | NM103               | Subscriber Last Name                 | The subscriber name on file with NE Medicaid will be returned.           |
|       | NM104               | Subscriber First Name                | The subscriber name on file with NE Medicaid will be returned.           |
|       | NM105               | Subscriber Middle Name<br>or Initial | The subscriber name on file with NE Medicaid will be returned.           |
|       | NM109               | Subscriber Identifier                | The 11-digit NE Medicaid assigned subscriber ID number will be returned. |

#### APPENDIX

A. "<u>Nebraska Medicaid Program HTTP/S Trading Partner Testing status</u> form"

#### **B. FREQUENTLY ASKED QUESTIONS**

https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Submission-Requirements.aspx

#### C. CHANGE SUMMARY

For each version of this Companion Guide, a summary of the information changed since the previous version will be located in this section. Actual changes will be incorporated into the new version of the Companion Guide which will be published as a complete document.

#### **Revision 3.00**

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