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

ASC X12N 276/277 (005010X212)

NE Medicaid 5010 Companion Guide



Publication Date: 03/18/2015 Effective Date: 03/09/2015

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 http://store.x12.org.

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

Express permission to use ASC X12 copyrighted materials has been granted.

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.

Table of Contents

1	INTRODUCTION	6
	1.1 SCOPE	6
	1.4 ADDITIONAL INFORMATION	
2	GETTING STARTED	6
	2.1 WORKING WITH NEBRASKA MEDICAID2.2 TRADING PARTNER ENROLLMENT	_
	2.3 TESTING OVERVEW	7
3	TESTING WITH THE NEBRASKA MEDICAID	7
4	CONNECTIVITY WITH THE PAYER/COMMUNICATIONS	9
	4.1 PROCESS FLOWS	9
	4.2 TRANSMISSION ADMINISTRATIVE PROCEDURES	9
	4.3 RE-TRANSMISSION PROCEDURE	
	4.4 COMMUNICATION PROTOCOL SPECIFICATIONS	
5	CONTACT INFORMATION	10
	5.1 EDI CUSTOMER SERVICE	10
	5.2 EDI TECHNICAL ASSISTANCE	
	5.3 PROVIDER SERVICE NUMBER	
	5.4 APPLICABLE WEBSITES/E-MAIL	10
6	CONTROL SEGMENTS/ENVELOPES	10
	6.1 ISA-IEA	10
	6.2 GS-GE	11
	6.3 ST-SE	11
7	PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS	11
8	ACKNOWLEDGEMENTS	11
	8.1 REAL-TIME	11
	8.2 BATCH SFTP	
	8.3 BATCH HTTP/S	12

9	TRA	DING PARTNER AGREEMENTS	12
	9.1	TRADING PARTNERS	12
10	TRA	NSACTION SPECIFIC INFORMATION	14
	10.1	L 276 TRANSACTION	14
	10.2	2 277 TRANSACTION	16
ΑP	PEN	DIX	18
		"Nebraska Medicaid Program HTTP/S Trading Partner Testing status form"	18
	В.	FREQUENTLY ASKED QUESTIONS	18
	C.	CHANGE SUMMARY	18

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

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: DHHS.MedicaidEDI@nebraska.gov.

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:

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

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.
- o 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.
- o 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.
- o 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: DHHS.MedicaidEDI@nebraska.gov or in Appendix A.

• For HTTP/S real-time transactions:

- o 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 https://dhhs.ne.gov/Pages/Electronic-Data-Interchange-Partner-Enrollment.aspx

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

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

4.2 TRANSMISSION ADMINISTRATIVE PROCEDURES

Real-time transactions: 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:

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

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

4.3 RE-TRANSMISSION PROCEDURE

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

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 DHHS.MedicaidEDI@nebraska.gov.

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: https://dhhs.ne.gov/Pages/Medicaid-Providers.aspx
- 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: http://store.x12.org

6 CONTROL SEGMENTS/ENVELOPES

6.1 ISA-IEA

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

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

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

6.2 **GS-GE**

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

Loop ID	Segment Type	Element Identifier	Element Name	NE Medicaid Directive
Header	GS	GS02	Application Sender's Code	This value cannot be "MMISNEBR". Use value identified on Trading Partner Profile.
		GS03	Application Receiver's 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 http://store.x12.org.

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

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.

10.1 276 TRANSACTION

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

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

10.2 277 TRANSACTION

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

Loop	Segment- Element	Name / Implementation Name	Nebraska Medicaid Directive
			(877) 255-3092 or (402) 471- 9128 are used.
	PER06	Communication Number	NE Medicaid Customer Service Center Phone Numbers (877) 255-3092 or (402) 471- 9128 are used.
2100C	NM1	PROVIDER NAME	
	NM108	Identification Code 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 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. "Nebraska Medicaid Program HTTP/S Trading Partner Testing status 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.

Release Date: March 9, 2015

Revision 3.00Reformat of v2.00 to CAQH CORE
Operating Rules Companion Guide template