Truli for Health

HIPAA Transaction Standard Companion Guide

For Availity®[1] Health Information Network Users

Refers to the Technical Report Type Three (TR3) based on ASC X12 Version 005010 X279A1

835 – Health Care Claim Payment/Advice

Companion Guide Version Number: 1.0

101553 0520

Disclosure Statement

The Truli for Health HIPAA Transaction Standard Companion Guide for EDI Transactions Technical Reports, Type 3 (TR3) provides guidelines for submitting electronic batch transactions. Because the HIPAA ASC X12-TR3s require transmitters and receivers to make certain determinations /elections (e.g., whether, or to what extent, situational data elements apply) this Companion Guide documents those determinations, elections, assumptions or data issues that are permitted to be specific to Truli for Health business processes when implementing the HIPAA ASC X12 5010 TR3s.

This Companion Guide does not replace or cover all segments specified in the HIPAA ASC X12 TR3s. It does not attempt to amend any of the requirements of the TR3s or impose any additional obligations on trading partners of Truli for Health that are not permitted to be imposed by the HIPAA Standards for Electronic Transactions. This Companion Guide provides information on Truli for Health specific codes relevant to Truli for Health business processes, rules and situations that are within the parameters of HIPAA. Readers of this Companion Guide should be acquainted with the HIPAA ASC X12 TR3s, their structure and content.

This Companion Guide provides supplemental information that exists between Truli for Health and its trading partners.Trading partners should refer to their trading partner agreement for guidelines pertaining to Availity LLC, legal conditions surrounding the implementation of the EDI transactions and code sets. However, trading partners should refer to this Companion Guide for information on Truli for Health business rules or technical requirements regarding the implementation of HIPAA-compliant EDI transactions and code sets.

Nothing contained in this Companion Guide is intended to amend, revoke, contradict or otherwise alter the terms and conditions of your applicable trading partner agreement. If there is an inconsistency between the terms of this Companion Guide and the terms of your applicable trading partner agreement, the terms of the trading partner agreement will govern. If there is an inconsistency between the terms of this Companion Guide and any terms of the TR3, the relevant TR3 will govern with respect to HIPAA edits and this Companion Guide will govern with respect to business edits.

This page left blank

101553 0520

Version Change Log

Date	Description	Page
5-14-20	**Initial document creation**	**NA**

101553 0520

Contents

1 INTRODUCTION

The Health Insurance Portability and Accountability Act (HIPAA) requires that the health care industry in the United States comply with the electronic data interchange (EDI) standards as established by the Secretary of Health and Human Services. The Technical Reports Type 3 Guides (TR3s) for the ANSI 835 Electronic Remittance Advice transaction specifies in detail the required information and formats. It contains requirements for the use of specific segments and specific data elements within segments and was written for all health care providers and other submitters. It is critical that your software vendor or IT staff review this document carefully and follow its requirements to send HIPAA-compliant files to Truli for Health via your vendor. The ASC X12 005010X279A1 is the established standard for Electronic Remittance Advice (ANSI 835).

1.1 Scope

This 835 Companion Guide was created for Truli for Health trading partners to supplement the ASC X12 835 5010 Technical Reports Type 3 (TR3). It describes the data content, Truli for Health business rules, and characteristics of the 835 transaction. This section specifies the appropriate and recommended use of the Companion Guide.

1.2 Overview

The Health Insurance Portability and Accountability Act (HIPAA) require that the health care industry in the United States comply with the Electronic Data Interchange (EDI) standards as established by the Secretary of Health and Human Services. The ASC X12 835 5010 is the established standard for the electronic Health Care Payment Advice.

The TR3 for the 835 Health Care Payment Advice Transaction specifies in detail the required format. It contains requirements for the use of specific segments and specific data elements within segments, and was written for all providers, facilities, suppliers and payers and clearinghouses involved in the exchange of the 835 transaction. It is critical that your software vendor or IT staff carefully review this companion document in conjunction with the 835 TR3 and follow the requirements to successfully receive HIPAA compliant files from Truli for Health.

1.3 References

- TR3 Guides for ASC X12 835 v005010X221A1 Electronic Remittance Advice (ANSI 835) and all other HIPAA standard transactions are available electronically at wpc-edi.com.
- For more information, including an online demonstration, please visit Availity.com or call 800-282-4548.
- CAQH CORE Operating Rules Phase II caqh.org/CORE_operat_rules.php.

2 GETTING STARTED

2.1 Working with Truli for Health

Availity optimizes information exchange between multiple health care stakeholders through a single, secure network. The Availity Health Information Network encompasses administrative,

[1]Availity, LLC, is a multi-payer joint venture company. For more information or to register, visit availity.com.

Truli for Health is a trade name of BeHealthy Florida, Inc., an Independent Licensee of the Blue Cross and Blue Shield Association.

101553 0520

financial, and clinical services, supporting both real-time and batch EDI via the web and through business to business (B2B) integration. For more information, including an online demonstration, please visit availity.com or call 800-282-4548.

2.2 Trading Partner Registration

In order to register, you will need:

- Basic information about your practice, including your Federal Tax ID and National Provider Identifier.
- Someone with the legal authority (typically an owner or senior partner) to sign agreements for your organization.
- An office manager or other employee who can oversee the Availity implementation and maintain user id's and access.

2.3 Certification and Testing Overview

All trading partners and clearing houses should be certified via Availity. It is recommended that the trading partner obtain HIPAA certification from an approved testing and certification third party vendor prior to testing.

3 TESTING WITH TRULI FOR HEALTH AND AVAILITY

Truli for Health recommends that trading partners contact Truli for Health to obtain a testing schedule and or notify Truli for Health of potential testing opportunities prior to implementing any foreseen transaction impacts to the business flow of both Truli for Health and/or the trading partner.

4 CONNECTIVITY/COMMUNICATIONS WITH FLORIDA BLUE MEDICARE AND AVAILITY

4.1 Process Map

101553 0520

4.2 Transmission Administrative Procedure

Connectivity

Secure File Transfer via Internet

FTP via ISDN, Leased Lines, Frame Relay, VPN

Firewall Mechanics

If you are behind a firewall, make sure that your FTPS client passes the Internet facing IP address of the server rather than the internal IP. Failure to do so usually causes the communication break when the client tries to list the files available in the server or during upload or download of files.

4.3 Re-Transmission Procedure

Encryption Method

Secure Socket Layer (SSL)

4.4 Communication Protocol Specifications

Protocols Used

- HTTPS/FTPS
- HTTPS and your common Internet browsers (IE, Firefox, etc.) Port 443 (default)
- FTPS: Any FTP client capable of SSL encryption

101553 0520

- Client examples are:
  - Valicert ftp client
  - Cute-FTP
  - WS-FTP Pro
  - FileZilla
  - Others
- FTPS Parameters:
  - Port 21
  - Authentication:FTP over SSL (explicit) or FTP over TLS (explicit)
  - Active Mode
  - File retention is 72 hours
- SSH Parameters
  - Use SFTP or SCP
  - Port 22
  - Authentication:user id and password

4.5 Passwords

If a password change is necessary, please contact Availity at 800-282-4548 or availity.com.

5   CONTACT INFORMATION

5.1 EDI Customer Service

For EDI customer service related to Truli for Health, please visit Availity.com or call 800-282-4548.

5.2 EDI Technical Assistance

For support of EDI transactions through Availity, please visit Availity.com or call 800-282-4548.

5.3 Provider Service Number

For provider services, please contact Truli for Health at 823-238-8144. For faster service, please have your Availity transaction id available.

5.4 Applicable websites/e-mail

- Availity.com
- Truli for Health.com

6   CONTROL SEGMENTS/ENVELOPES

ANSI 835 – Electronic Remittance Advice:

The purpose of this section is to delineate specific data requirements where multiple valid values are presented within the ANSI 835 5010 A1 TR3.

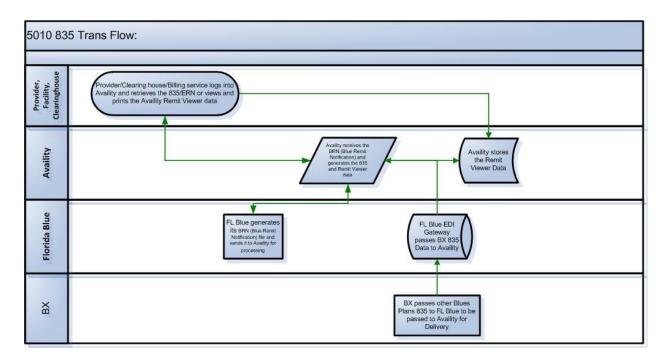[1]Availity, LLC, is a multi-payer joint venture company. For more information or to register, visit availity.com.

Truli for Health is a trade name of BeHealthy Florida, Inc., an Independent Licensee of the Blue Cross and Blue Shield Association.

101553 0520

Common Definitions:

- **Interchange control header (ISA06) Interchange Sender ID (Mailbox ID)** – is individually assigned to each trading partner.
- **Interchange control header (ISA08) Interchange Receiver ID** - If submitting directly to Truli for Health use, 592015694 (+6 spaces). If submitting through Availity, use 030240928 (+6 spaces). Reference the Availity EDI guide at Availity.com.
- **Interchange control header (ISA15) Usage Indicator** – defines whether the transaction is a test (T) or production (P).
- **Functional Group Header (GS02) Application Sender's code** – is individually assigned to each trading partner.

ANSI 835 – Electronic Remittance Advice:

Global Information

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
E1	**Interchange Control Header**	ISA	All transactions utilize delimiters from the following list: >,*,~,^,|,{ and :
E2	**Interchange Control Structure**	ISA	Truli for Health sends Health Care Claim Payment/Advice data using the basic character set as defined in the ASC X12 005010X279A1 TR3. In addition to the basic character set, lower case characters and the special character (@) from the extended character set may be used.
E3	**Interchange Control Header Authorization Information Qualifier**	ISA01	Truli for Health sends 00 in this field.
E4	**Interchange Control Header Authorization Information**	ISA02	Truli for Health sends ten spaces in this field.
E5	**Interchange Control Header Security Information Qualifier**	ISA03	Truli for Health sends 00 in this field.
E6	**Interchange Control Header Security Information**	ISA04	Truli for Health sends ten spaces in this field.
E7	**Interchange Control Header Interchange ID Qualifier**	ISA05	Truli for Health sends ZZ in this field.
E8	**Interchange Control Header Interchange Sender ID**	ISA06	Truli for Health sends 592015694 in this field.
E9	**Interchange Control Header Interchange ID Qualifier**	ISA07	Truli for Health sends 01 in this field.

[1]Availity, LLC, is a multi-payer joint venture company. For more information or to register, visit availity.com.

Truli for Health is a trade name of BeHealthy Florida, Inc., an Independent Licensee of the Blue Cross and Blue Shield Association.

101553 0520

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
E10	Interchange Control Header Interchange Receiver ID	ISA08	Truli for Health sends individually assigned Truli for Health sender mailbox number in this field.
E11	Interchange Control Header Repetition Separator	ISA11	Truli for Health uses | as repetition separator.
E12	Interchange Control Header Acknowledgement Requested	ISA14	The TA1 will not be provided by Truli for Health without a code value of one (1) in the field
E13	Interchange Control Header Interchange Usage Indicator	ISA15	Truli for Health sends P in this field to indicate the data enclosed in this transaction is a production file.
E14	Interchange Control Header Component Element Separator	ISA16	Truli for Health uses : as the delimiters to separate component data elements within a composite data structure.
E15	Interchange Control Header Functional Group Header/Functional Group Trailer	GS - GE ISA - IEA	Truli for Health will only process one transaction type per GS-GE (functional group). However, we will process multiple ST's within one (1) GS segment as long as they are all the same transaction type.
E16	Functional Group Header Functional Identifier Code	GS01	HP – Health Care Claim Payment/Advice (835) Truli for Health sends the above value in this field.
E17	Functional Group Header Application Sender's Code	GS02	Truli for Health sends 592015694 in this field.
E18	Functional Group Header Application Receiver's Code	GS03	Truli for Health sends Truli for Health assigned sender code in this field.

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

Business Requirements

Global Information

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
G1	All Segments		Only loops, segments, and data elements valid for the 835 HIPAA Implementation Guide ASC X12N/005010X221A1 will be used for processing.

[1]Availity, LLC, is a multi-payer joint venture company. For more information or to register, visit availity.com.

Truli for Health is a trade name of BeHealthy Florida, Inc., an Independent Licensee of the Blue Cross and Blue Shield Association.

101553 0520

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
G2	**Remittance Advice**		Truli for Health electronic Health Care Payment Advice is available through Availity. Payment will be made either via electronic funds transfer (EFT) or paper check. Monthly capitation payments/adjustments will be disbursed with a paper roster and check. Institutional remittances: Truli for Health does not return detail service line items for whole priced claims.
G3	**Remittance Remarks**		Federal regulation limits Truli for Health's ability to provide proprietary explanations on standard electronic transactions; therefore, all remittance reasons and remarks will be reported using industry standard code sets.
G6	**Transition Handling Code**	BPR01	Truli for Health will only generate an H or I
G4	**Payment Method Code** Levy, lien and garnishment Note: All monies will be applied toward the levy, lien or garnishment. However, any money over the amount required to satisfy the levy, lien or garnishment will be reimbursed by Truli for Health.	BPR04 PLB03-1	NON – Non-payment data Anytime a levy, lien or garnishment is applied to the claim, BPR04 will contain the code NON. _____ IR – Internal Revenue LE – Levy TL – Garnishment WO – Withholding
G5	**Limitations**	CLP	Truli for Health limits the maximum number of CLP segments to 10,000 within one ST-SE envelope.

8 ACKNOWLEDGEMENTS AND/OR REPORTS

N/A

9 TRADING PARTNER AGREEMENTS

Please contact Availity for your trading partner agreement at 800-282-4548 or availity.com.

101553 0520

10 TRANSACTION SPECIFIC INFORMATION

10.1 ASC X12 Transactions Supported

Truli for Health processes the following ASCX12 HIPAA transactions for Health Care Claim Payment/Advice.

BUSINESS REQUIREMENTS 1000B Payee Identification and Additional Identification

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
B1	**Identification Code Qualifier**	N103	The billing provider NPI qualifier of XX will be returned in this segment.
B2	**Identification Code**	N104	The billing provider NPI will be returned in this segment.
B3	**Reference Identification Qualifier**	REF01 & REF02	Qualifier PQ in REF01 indicates the Availity Customer Identification number in REF02.
B4	**Reference Identification Code**	REF01 & REF02	Qualifier TJ in REF01 indicates the federal tax identification (ID) or social security number in REF02.
B5	**Individual or Organizational Name**	NM103	NM103 Truli for Health will return this information when Truli for Health is aware that another payer should process a claim prior to Truli for Health.
B6	**Identification Code Qualifier**	NM108	PI – Payer Identifier will be in the NM108 data element when Truli for Health is aware that another payer should process a claim prior to Truli for Health.
B7	**Identification Code**	NM109	The code in the NM109 segment will be populated to identify the payer that processes as primary before Truli for Health.
B8	**Claim Status Code**	CLP02	CLP02 – Truli for Health will only send status codes one (1), two (2),four (4), and 22. **Note**: Claim Status Code four (4)will only be used to indicate that the patient is not recognized as a member of any Truli for Health product. Claim Status Code 22 is the only way to identify a reversal for 5010.

101553 0520

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
B9	**Claim Filing Indicator Code**	CLP06	CLP06 – Truli for Health will only send the following indicator codes: 12 – Preferred Provider Organization HM – Health Maintenance Organization
B10	**2100 Insured Name** Identification Code Qualifier	NM108	NM108 – Truli for Health will only send qualifier type MI to indicate insured identification and prior to NM109 – Truli for Health member Identification Number
B11	**Claim Adjustment Group Code**	CAS01	CO – Contractual Adjustment OA – Other Adjustment PI – Payor Initiated Reductions PR – Patient Responsibility
B12	**Claim Adjustment Information**	CAS CAS01-03 CAS05-06 CAS08-09 CAS11-12 CAS14-15 CAS17-18	When Recognizing Physician Excellence (RPE) bonus amounts apply, Group Code and Claim Adjustment Reason Code (CARC) CO*161 (Payer Initiated Bonus) will be used at the service line level. In order to balance your account receivables, money amounts associated with CO*161 should not be applied to the patient's account, but rather to your general ledger account. Reversals – Effective with version 5010, CR group code is no longer valid. The original group code from the previous 835 will be returned. The claim status indicator (CLP02) of 22 is the only way to identify a reversal for 5010.
B13	**Provider Level Adjustment** Note: Levy's, liens and garnishments. All monies will be applied toward the levy, lien or garnishment. However, any money over the amount required to satisfy the levy, lien or garnishment will be reimbursed by Truli for Health.	PLB03-1	50 – Late Charge 72 – Authorized Refund CS – Adjustment FB - Forward Balance IR – Internal Revenue Withholding L6 – Interest LE – Levy, Lien, Garnishment WO – Overpayment Recovery The above code values will identify the type of adjustment for the money amount found in PLB04.

101553 0520

Req #	Loop ID – Segment Description & Element Name	Reference Description	Plan Requirement
B14	**Provider Level Adjustment** Note: See Examples in the Plan Requirements Column	PLB03-2	Whenever there are situations that require Truli for Health to withhold or refund funds, the 835 TR3 requires payers to report these circumstances one of three specific ways on the 835. For overpayments, Truli for Health has chosen to send an invoice to the provider requesting overpaid funds be returned to Truli for Health within a specified timeframe. If those funds are not received within the timeframe, Truli for Health will withhold funds from future payments. When this occurs, Truli for Health will return a FCN (Financial Control Number) in the PLB03 composite data element following the WO qualifier. The FCN will consist of the patient account # and date of service. An example is indicated below: PLB* 12345845 (Provider NPI)*20140101 (date) *WO (overpayment recovery qualifier)>1103006_ _20140101 (patient account #_ _date of service)*40 (dollar amount) Refunds will be reported similarly but will be paired with the overpayment recovery qualifier WO in addition to the 72 qualifier followed by a negative dollar amount. For example: PLB* 12345845 (Provider NPI)*20140101 (date) *WO (overpayment recovery qualifier)>103555666 (invoice #) *40 (dollar amount) *72 (Refund)>103555666 (invoice #) *-40 (dollar amount)

101553 0520