
CenCal Health

HIPAA Transactions Companion Guide

**Refers to the Implementation Guides
Based on X12 version 004010**

Companion Guide Version Number: 1.0

August 4, 2003

Disclosure Statement

None specified.

Preface

This Companion Document to the ASC X12N Implementation Guides adopted under HIPAA clarifies and specifies the data content when exchanging electronically with CenCal Health. Transmissions based on this companion document, used in tandem with the X12N Implementation Guides, are compliant with both X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

EDITOR'S NOTE:

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1 Introduction

1.1 Scope

This Companion document supports the implementation of a batch processing application.

CenCal Health will accept inbound submissions and provide outbound transactions that are formatted correctly in X12 terms. The files must comply with the specifications outlined in this companion document as well as the corresponding HIPAA implementation guide.

CenCal Health EDI applications will edit for these conditions and reject files that are out of compliance.

This companion document will specify everything that is necessary to conduct EDI for this standard transaction. This includes:

- Specifications on the communications link
- Specifications on the submission methods
- Specifications on the transactions

1.2 Overview

This companion guide compliments the ASC X12N implementation guide currently adopted from HIPAA.

This companion guide will be the vehicle that CenCal Health uses with its trading partners to further qualify the HIPAA adopted implementation guide. This companion guide is compliant with the corresponding HIPAA implementation guide in terms of data element and code sets standards and requirements.

Data elements that require mutual agreement and understanding will be specified in this companion guide. Types of information that will be clarified within this companion are:

- Qualifiers that will be used from the HIPAA implementation guides to describe certain data elements
- Situational segments and data elements that will be utilized to satisfy business conditions
- Trading partner profile information for purpose of establishing who we are trading with for the transmissions exchanged

1.3 References

ASC X12N Implementation Guides

1. Health Care Eligibility Benefit Inquiry and Response
 - 270/271 (004010X092) May 2000 – Guide
 - 270/271 (004010X092A1) October 2002 – Addenda

2. Benefit Enrollment and Maintenance
 - 834 (004010X095) May 2000 – Guide
 - 834 (004010X095A1) October 2002 – Addenda
3. Payroll Deducted and Other Group Premium Payment for Insurance Products
 - 820 (004010X061) May 2000 – Guide
 - 820 (004010X061A1) October 2002 – Addenda
4. Health Care Services Review – Request for Review and Response
 - 278 (004010X094) May 2000 – Guide
 - 278 (004010X094A1) October 2002 - Addenda
5. Health Care Claim: Professional
 - 837 (004010X098) May 2000 – Guide
 - 837 (004010X098A1) October 2002 – Addenda
6. Health Care Claim: Institutional
 - 837 (004010X096) May 2000 – Guide
 - 837 (004010X096A1) October 2002 – Addenda
7. Health Care Claim Status Request and Response
 - 276/277 (004010X093) May 2000 – Guide
 - 276/277 (004010X093A1) October 2002 – Addenda
8. Health Care Claim Payment/Advice
 - 835 (004010X091) May 2000 – Guide
 - 835 (004010X091A1) October 2002 – Addenda

1.4 Additional Information

Electronic Data Interchange (EDI) is the computer-to-computer exchange of formatted business data between trading partners. The computer system generating the transactions must supply complete and accurate information while the system receiving the transactions must be capable of interpreting and utilizing the information in ASC X12N format, without human intervention.

The transactions must be sent in a specific format that will allow our computer application to translate the data. CenCal Health supports the standard transactions adopted from HIPAA.

2 Getting Started

2.1 Working with CenCal Health

Contact CenCal Health IT Dept. for all EDI related customer service requests. (See contact information in section 5 below.)

2.2 Trading Partner Registration

To register as a trading partner with CenCal Health the following sequence of events will take place.

1. Initial conversations are held between the trading partner and CenCal Health.
2. Verbal agreements are reached as to the transactions that will be conducted.
3. A trading partner agreement and associated companion guides are provided and reviewed.
4. Submitter Id and Receiver Id is established for the purpose of identification.
5. Required trading partner profiling is built into our EDI translator.
6. Test files are exchanged and test runs conducted.
7. Once a brief testing phase is completed and a trading partner agreement is in place the trading partner is registered.

2.3 Certification and Testing Overview

Due to Medi-cal's (DHS) delayed readiness for compliance, CenCal Health, which manages the Medi-cal program at a regional level (SBHI), understands that it is currently not possible to fully comply at first 6 levels and therefore does not require its trading partners to show evidence of third party certification. However, CenCal Health asks that trading partners attempt to certify their transactions as much as possible to avoid rejections of transactions due to syntax and/or data.

Similarly, CenCal Health will attempt to certify its outbound transactions as much as possible within the Medi-cal limitations. CenCal Health uses Claredi for certification and incorporates the following WEDI/SNIP levels of testing where applicable:

- Level 1, Integrity Testing (X12 Syntax)
- Level 2, Requirement Testing (HIPAA Implementation Guide Syntax)
- Level 3, Balancing Testing (i.e. 835 claim line balancing to the claim document)
- Level 4, Situation Testing (Use of Situational Segments that business relevant)
- Level 5, Code Sets Testing
- Level 6, Product Types/Types of Service Testing (i.e. provider specialties)

2.4 Versions Supported

CenCal Health currently supports the ASC X12 4010 version with October 2002 Addenda (A1)

3 Testing with the Payer

CenCal Health would like to establish with the trading partner a set of scenarios that are intended for testing.

This can be a high level description of the contents of the transaction.

This should be a representation or cross section of the majority of conditions that will be encountered with production data from these transactions.

When testing with CenCal Health, it is expected that the Trading Partner will be able to provide a dedicated testing window.

Data sent by CenCal Health may not be up to date as it is being procured from a test database which is not always updated with production data.

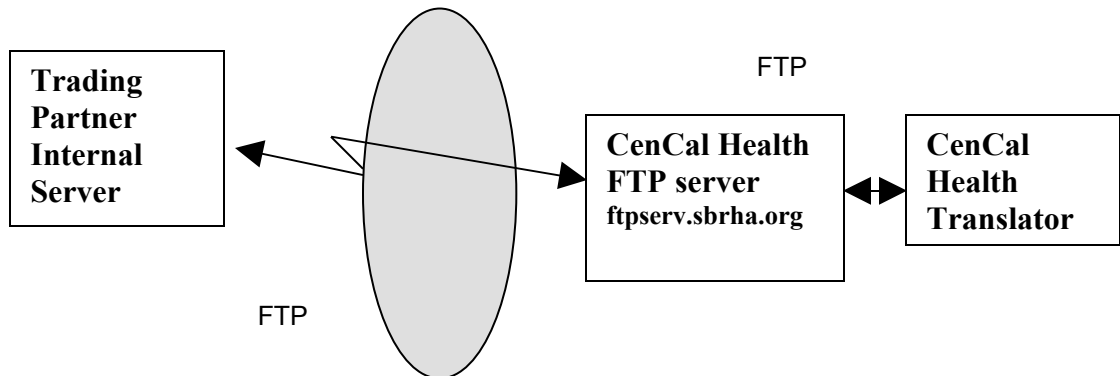
4 Connectivity with the Payer / Communications

4.1 Process flows

Currently, CenCal Health supports only FTP of encrypted data over the Internet for transmission of HIPAA transactions.

All encryption is to be done via PGP. Files submitted to CenCal Health will be encrypted with Trading Partner's public key while all outbound files will be encrypted using the CenCal Health's public key.

Figure 4.1.1A
FTP of Encrypted Data over the Internet from Trading Partner to CenCal Health



4.2 Transmission Administrative Procedures

Before establishing data communications with CenCal Health, a trading partner relationship must exist. As part of the process establishing the relationship, CenCal Health and the trading partner must exchange certain technical information. This information is needed by both parties in order to establish communications.

The information requested will include:

1. Contacts; business, data and communications
2. Dates; testing, production
3. File information; size, naming
4. Transfer; schedule, protocol
5. Server information; host name, userID, password, file location, file name
6. Notification; failure, success

4.3 Communication protocol specifications

The following items are required to exchange data with CenCal Health utilizing FTP over the Internet. The trading partner is responsible for the acquisition and installation of these items. This list assumes that CenCal Health FTP server will be used.

1. Internet Connectivity; if large files will be exchanged, then the trading partner should consider a broadband connection.
2. Computer with FTP client and connectivity to the Internet.
3. PGP software for encryption/decryption. RSA (also known as Legacy) keys must be generated and exchanged with CenCal Health via e-mail (public keys only).
4. E-mail capability to exchange configuration and testing information.

Initial setup will include confirming FTP connectivity, exchanging PGP public keys and performing end-to-end communications testing.

Before sending data to CenCal Health, the data must be encrypted with PGP and then sent to the CenCal Health FTP server (ftpserv.sbrha.org) using the FTP client over the Internet connection. When receiving data from CenCal Health, the FTP client will be used to get the data from the CenCal Health FTP server after which PGP will be used to decrypt the data.

4.4 Passwords

CenCal Health requires the uses of UserIDs and Passwords to access its systems and servers. If CenCal Health's FTP server is to be used to exchange data, CenCal Health

will assign each trading partner a unique userID and password. The UserID, password and other information will be communicated with the trading partner via e-mail.

In the event a trading partner forgets their password, the trading partner will notify CenCal Health to retrieve it

4.5 Encryption

CenCal Health requires the encryption of data that is exchanged via the Internet or any other public network. CenCal Health utilizes PGP with 1024 or 2048 bit keys for file encryption.

4.6 File Locations and Availability

CenCal Health expects all files to be submitted to its FTP server – ftpserv.sbrha.org -- in the ../infile directory under the trading partner's home directory. All outbound files will also be made available on this server under the ../outfile directory.

For testing, these files should go under ../inbound/test and outbound/test respectively.

Files in the outbound directory will never be deleted on a quarterly basis if the trading partner does not remove such files. Each inbound file is removed from the server after the translator has successfully processed it. Note that by "successful" CenCal Health is referring to a successful execution of the translator and is independent of HIPAA compliance (except in the case of submitting valid billing provider#'s for the 837).

5 Contact information

5.1 CenCal Health IT Department

CenCal Health IT Department is the central point of contact for all trading partner EDI activity including questions relating to file submissions.

Contact Names and Titles:

John Sanchez	Programmer/Analyst	mailto:jsanchez@cen-calhealth.org	805-685-9525 x106
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6 ISA and GS Information

This section describes CenCal Health use of the interchange (ISA) and functional group (GS) control segments.

Inbound Transactions (Trading partner is sender, CenCal Health is receiver)

Element	Description	Values Used	Comments
ISA01	Authorization Qualifier	Any	
ISA02	Authorization Code	Any	
ISA03	Security Qualifier	Any	
ISA04	Security Information	Any	
ISA05	Sender Qualifier	Any	
ISA06	Sender Id	Trading Partner's Sender Id	
ISA07	Receiver Qualifier	ZZ	"Mutually Defined"
ISA08	Receiver Id	000000953865941	CenCal Health of California Tax Id with leading zeros
ISA15	Usage Indicator	T P	Test File Production File
GS01	Functional Id Code	Indicates transaction type	See HIPAA IG
GS02	Sender's Code	Trading Partner's Sender Code	Can be same as ISA06
GS03	Receiver's Code	000000953865941	
GS08	Version Release Industry ID Code	Identifies the transaction in ASC Terms	See HIPAA IG

Outbound Transactions (Trading partner is receiver, CenCal Health is sender)

Element	Description	Values Used	Comments
ISA01	Authorization Qualifier	00	
ISA02	Authorization Code	1234567890	
ISA03	Security Qualifier	00	
ISA04	Security Information	0987654321	
ISA05	Sender Qualifier	ZZ	"Mutually Defined"
ISA06	Sender Id	000000953865941	CenCal Health of California Tax Id with leading zeros
ISA07	Receiver Qualifier	Any	
ISA08	Receiver Id	Trading Partner's Sender Id	
ISA15	Usage Indicator	T P	Test File Production File
GS01	Functional Id Code	Indicates transaction type	See HIPAA IG
GS02	Sender's Code	000000953865941	
GS03	Receiver's Code	Trading Partner's Sender Code	Will be same as ISA08
GS08	Version Release Industry ID Code	Identifies the transaction in ASC Terms	See HIPAA IG

7 Acknowledgements

- Acknowledgement will be sent so the trading partner will get confirmation that CenCal Health received an inbound submission and will be made available on the FTP server under the user's outfile directory (outfile/test for testing) similar to all outbound transactions. Likewise CenCal Health expects to receive an Acknowledgement from the Trading Partner after submission of an outbound file
- Acknowledgements will be made available immediately after the processing of the initial file
- Acknowledgements will include the 997 functional group as well as the TA1 segment in order to identify the originating message (TA101 = original ISA13). The structure will be as follows:

```

ISA
    TA1
    GS (997)
        ST
        SE
        .
        .
    GE
    .
    .
IEA
  
```

This is true for both inbound and outbound acknowledgements.

- If any HIPAA errors occur within an ST/SE, the whole ST/SE will reject though all others will be processed. The Trading Partner will be responsible for resending a new compliant file containing this ST/SE. If any errors occur in a GS/GE, all ST/SE's within the GS/GE will reject and no data within the ST/SE's will be processed. If an error occurs in the ISA/IEA, all GS/GE's and ST/SE's will reject as well and no data will be processed. For the former two, TA103 will equal "E" although this does not mean that the sender does not need to resend data. In fact, data will need to be resent at these levels. It is just saying that the ISA/IEA was accepted.
- Validation is done at levels 1,2,4 and only against a subset of the IG's (segments that CenCal Health is concerned with)
- Application errors will also be reported as well and have a custom error codes:
 - 100 – errors occurred during processing of ISA/IEA
 - 0 – errors occurred during processing of GS/GE
 - 0 – errors occurred during processing of ST/SE

Most likely CenCal Health will be able to resolve the issue before any of the data is resent.

8 Trading Partner Agreements

- Please refer to the Trading Partner Agreement submitted along with the Companion Guide
- These agreements should be signed before beginning testing

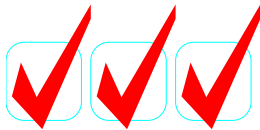
9 Trading Partner Questionnaire

- This form should include which forms will be submitted and/or received and which provider#'s will be submitted for. Likewise, for outbound transactions, the Trading Partner should include, in addition, programs and claim categories data should be included for,

10 Appendices

This section contains one or more appendices.

A Implementation Checklist



TRADING PARTNER TESTING CHECK LIST

The following tasks should be completed to insure a smooth implementation of the EDI process.

TASK	Responsibility	Date
<input type="checkbox"/> Sign Trading Partner Agreement(s)	CenCal Health & TP	
<input type="checkbox"/> Complete Questionnaire	CenCal Health & TP	
<input type="checkbox"/> If required, set-up encryption process	CenCal Health & TP	

<input type="checkbox"/> Establish schedule for testing	CenCal Health & TP	
<input type="checkbox"/> Complete testing	CenCal Health & TP	
<input type="checkbox"/> Production cut-over	CenCal Health & TP	

B Business Scenarios

TBD

C Trading Partner Agreement

Please refer to CenCal Health Trading Partner Agreement.doc

D Trading Partner Questionnaire

Please refer to CenCal Health Trading Partner Questionnaire.doc

11 Payer-Specific Transaction Requirements

11.1 All Files

- Submitted files sizes to be limited to under 1MB
- **Only one ISA/IEA per file**
- **We support all extended special characters that as long as they are not used as delimiters**
- **Will support 9/22 Medi-Cal updates**

11.2 Code sets

- For SBHI, as well as other programs, CenCal Health will follow DHS local code to national code implementation schedule. Otherwise, all other HIPAA code sets apply. Therefore, it is possible that some transactions cannot be fully certifiable however CenCal Health will continue to accept them

11.3837

Loop	Element	Values	Comments
Header	BHT02	00	Do not support reissues (18).
header	REF02	004010X96A1 004010X96DA1 004010X98A1 004010X98DA1	Oct 2002 addenda Production File Oct 2002 addenda Test File Oct 2002 addenda Production File Oct 2002 addenda Test File
1000B	NM109	000000953865941	CenCal Health Id
2010AA	REF01	1D	Required -Medicaid Provider No. Qualifier
	REF02		Required –Medicaid provider No.
2010AB	REF01	1D	Required – Medicaid Provider No. Qualifier
	REF02		Required - Medicaid provider No.
2010BA	NM108	MI	Qualifier
	NM109		CenCal Health (e.g. Medi-Cal) Subscriber Id
2010BB	NM109	000000953865941	CenCal Health Payer Id
2010CA	NM108	MI	Qualifier
2010CA	NM109		CenCal Health (e.g. Medi-Cal) Subscriber Id
2300	CL102		Not required as per Medi-Cal rules for SBHI. Expect values of 4,5,6 if not null
	HI102-2 (institutional)		Admitting Diagnosis (HI02-1=BJ) NOT required for Inpatient Claims

2310A 2420A 2310B 2420B 2310C 2420C 2310D 2420D 2310E	REF01	1D	Required if Loop used - Medicaid Provider No. Qualifier
	REF02		Required if Loop used -Medicaid Provider No.: Professional: 2310A/2420A – Referring prov# 2310B/2420B – Rendering prov# 2310C (I) -- Admitting prov# 2310D (P) – Facility#
2400	SV201 (institutional)		Not required as per Medi-Cal for SBHI

11.4835

Loop	Element	Values	Comments
Header	BPR02	C	
	BPR04	CHK	CenCal Health may eventually support electronic payments
	TRN02		Check#
	TRN03	1953865941	
1000B	N103	FI	Payee ID Qualifier
	N104		Payee Tax ID
2100	CLP02	1,5	Not able to determine always if CenCal Health is primary, secondary or tertiary so default to "1" for processed claims. Also, do not have a "denied" at claim header level. Only deny on service level
	CLP06	MC,0F	"MC" = SBHI, "OF" = PP2, HFP
	NM108	MI	Member ID Qualifier
	NM109		SBHI (Medi-Cal) ID or PP2, HFP ID
	NM108	MC	Service Provider ID Qualifier
	NM109		Service Provider Medicaid Provider#
2110	all		Each adjustment line is represented as a separate service line. However, there may be multiple adjustments per adjustment line which is represented by the CAS segment
	SVCxx_1	HC, ER	All non -HCPCS/CPT codes which are local codes are currently be treated as an "ER" type
	SVCxx_2		HC codes currently 2002 codes. Should be updated from Medi-Cal in September. May not always be up to date in future years because of Medi-Cal lag. For empty codes, we will use "00000".
trailer	PLB03_1	PI	Block payments

11.5 Other Forms (TBD)