835

**HIPAA Transaction
Standard Companion Guide**

**Refers to the Implementation Guides
Based on ASC X12 version 005010**

CORE v5010 Companion Guide

August 2015

Gold Coast
Health Plan ℠
A Public Entity

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Gold Coast Health Plan

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Disclosure Statement

Preface

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Gold Coast Health Plan. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC 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.

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1 INTRODUCTION

Under the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the Secretary of the Department of Health and Human Services (HHS) is directed to adopt standards to support the electronic exchange of administrative and financial health care transactions. The purpose of the Administrative Simplification portion of HIPAA is enable health information to be exchanged electronically and to adopt standards for those transactions.

1.1 SCOPE

This section specifies the appropriate and recommended use of the Companion Guide.

This companion guide is intended for Gold Coast Health Plan Trading Partners interested in exchanging HIPAA compliant X12 transactions with Gold Coast Health Plan. It is intended to be used in conjunction with X12N Implementation Guides and is not intended to contradict or exceed X12 standards. It is intended to be used to clarify the CORE rules. It contains information about specific Gold Coast Health Plan requirements for processing following X12N Implementation Guides:

- 005010X221A1, Health Care Claim Payment/Advice (835)

All instructions in this document are written using information known at the time of publication and are subject to change.

1.2 OVERVIEW

The Health Insurance Portability and Accountability Act–Administration Simplification (HIPAAAS) requires Gold Coast Health Plan and all other covered entities to comply with the electronic data interchange standards for health care as established by the Secretary of Health and Human Services.

This guide is designed to help those responsible for testing and setting up electronic claim status transactions. Specifically, it documents and clarifies when situational data elements and segments must be used for reporting and identifies codes and data elements that do not apply to Gold Coast Health Plan. This guide supplements (but does not contradict) requirements in the ASC X12N 835 (version 005010X212) implementation. This information should be given to the provider's business area to ensure that claims status responses are interpreted correctly.

1.3 REFERENCES

This section specifies additional documents useful for the read. For example, the X12N Implementation Guides adopted under HIPAA that this document is a companion to.

ACS X12 Version 5010 TR3s: http://store.x12.org/store/healthcare-5010-consolidated-guides

CAQH/CORE: http://www.caqh.org/COREv5010.php

2 GETTING STARTED

2.1 WORKING WITH GOLD COAST HEALTH PLAN

For questions relating to the Gold Coast Health Plan 835/Health Care Claim Remittance Advice Transaction or testing, contact the Provider Relations department at 888-301-1228 or e-mail questions to providerrelations@goldchp.org

2.2 TRADING PARTNER REGISTRATION

Trading Partners will retrieve the enrollment form from the GCHP website at the address listed below. http://www.goldcoasthealthplan.org/providers/resources.aspx. Trading Partners will submit the completed form to GCHP via fax or email to providerrelations@goldchp.org

3 TESTING WITH THE PAYER

After the trading partner setup is complete, test 835 transactions may be sent to the test environment. Gold Coast Health Plan will notify the provider upon successful completion of testing and will prepare the provider for production status.

- During the testing process, Gold Coast Health Plan will examine test transactions for required elements and ensure that the trading partner gets a response during the testing mode.
- When the trading partner is ready to receive 835 transactions from production mailbox, they must notify Gold Coast Health Plan Provider Services. Provider Services will then move the submitter to the production environment.
- The trading partner mailbox name will remain the same when moving from test to production. Changing passwords is optional upon submitter's request to the Provider Services Team.

4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

4.1 PROCESS FLOWS

4.1.1 Batch

- The user application submits an SOAP request at https://or.edifecs.com/mt1sp700 and MIME request at https://or.edifecs.com/mt1mp700
- Gold Coast Health Plan's system authenticates the user
- If the user is successfully authorized, all 835s available for the requested trading partner will be delivered. If the user is unauthorized then and unauthorized response is returned.
- If the user is submitting acknowledgement data and the user is successfully authorized, an HTTP 202 OK status is returned to the user indicating that the batch transaction has been accepted for processing.

4.2 TRANSMISSION ADMINISTRATIVE PROCEDURES

4.2.1 Structure Requirements

Batch 835 requests are limited to 1 pickup request per transmission.

4.3   RE-TRANSMISSION PROCEDURE

If the HTTP post reply message is not received within the 60-second response period, the user's CORE compliant system should send a duplicate transaction no sooner than 90 seconds after the original attempt was sent.

If no response is received after the second attempt, the user's CORE compliant system should submit no more than five duplicate transactions within the next 15 minutes. If the additional attempts result in the same timeout termination, the user's CORE compliant system should notify the user to contact the health plan or information source directly to determine if system availability problems exist or if there are known Internet traffic constraints causing the delay.

4.4   COMMUNICATION PROTOCOL SPECIFICATIONS

The following is a list of technical standards and versions for the SOAP envelope and claim status payload:
• HTTP Version 1.1
• CSOAP Version 1.2
• SSL Version 3
• CAQH SOAP (Gold Coast Health Plan supports the use of HTTP SOAP + WSDL envelope standards as identified in CAQH CORE Phase III Connectivity standards)

The following is a list of technical standards and versions for the HTTP MIME multipart envelope and claim status payload:
• HTTP Version 1.1
• SSL Version 3.0
• MIME Version 1.0
• CAQH MIME (Gold Coast Health Plan supports the use of MIME Multipart envelope standards as identified in CAQH CORE Phase III Connectivity standards)

Message Specifications for SOAP Envelope Element	Specification
PayloadType	005010X221A1 Health Care Claim Payment/Advice (835)
ProcessingMode	Batch
SenderID	IKA
ReceiverID	As mutually agreed by Gold Coast
Certificate Version	Username Password

4.5   PASSWORDS

The Provider Relations is responsible for password assignment and resets. For any information or queries, please contact at 888-301-1228 or email us at providerrelations@goldchp.org

4.6   MAINTENANCE SCHEDULE

The systems used by the 835 transaction have a standard maintenance schedule of Sunday 10PM to 12AM PST. The systems are unavailable during this time. Email notifications will be sent notifying submitters of unscheduled system outages.

5   CONTACT INFORMATION

The following sections provide contact information for any questions regarding HIPAA, 835 transaction, and documentation or testing.

5.1 EDI CUSTOMER SERVICE

For 835 Transaction related questions, contact Provider Relations at 888-301-1228 or providerrelations@goldchp.org

5.2 EDI TECHNICAL ASSISTANCE

Contact Provider Relations at 888-301-1228 or providerrelations@goldchp.org

5.3 PROVIDER SERVICE NUMBER

Contact Provider Relations at 888-301-1228

5.4 APPLICABLE WEBSITES/E-MAIL

Website: http://www.goldcoasthealthplan.org/providers/resources.aspx
Email: providerrelations@goldchp.org

6 CONTROL SEGMENTS/ENVELOPES

6.1 ISA-IEA

The ISA segment terminator, which immediately follows the component element separator, must consist of only one character code. This same character code must be used as the segment terminator for each segment in the ISA-IEA segment set.

Files must contain a single ISA-IEA per transaction.
- Incoming:
  ANSI 835 batch pickup requests do not contain inbound ISA data.
- Outgoing:

Segment Name	Segment ID	R/O	No. of Char	Value	Remarks
Authorization Information Qualifier	ISA01	R	2	00	00 - No Authorization Information Present
Authorization Information	ISA02	R	10	<spaces>	No Authorization Information Present
Security Information Qualifier	ISA03	R	2	00	00 - No Security Information Present
Security Information/ Password	ISA04	R	10	<spaces>	No Security Information Present
Interchange ID Qualifier	ISA05	R	2	ZZ	Sender Qualifier
Interchange Sender ID	ISA06	R	15	IKA	Sender's Identification Number
Interchange ID Qualifier	ISA07	R	2	<receiverqual>	
Interchange Receiver ID/ Trading Partner ID	ISA08	R	15	<receiver ID>	

Interchange Date	ISA09	R	6	<YYYYMMDD>	Date of the interchange in YYMMDD format
Interchange Time	ISA10	R	4	<HHMM>	Time of the interchange in HHMM format
Repetition Separator	ISA11	R	1	^ (is a typical separator received)	
Interchange Control Version Number	ISAI2	R	5	00501	Version number
Interchange Control Number/Last Control Number	ISA13	R	9	<Auto-generated>	Assigned by the interchange sender, must be associated with IEA02 segment
Acknowledgement Request	ISA14	R	1	0	0 - No Acknowledgement Requested
Usage Indicator	ISA15	R	1	<T or P>	T-test data; P-production data
Separator	ISA16	R	1	<Any>	ASCII Value. Component element separator

Segment Name	Segment ID	R/O	No. of Char	Value	Remarks
Number of Included Functional Groups	IEA01	R			
Interchange Control Number	IEA02	R	9		Must match the Interchange Control Number in ISA13

6.2 GS-GE

- <u>Incoming</u>:
  ANSI 835 batch pickup requests do not contain inbound GS data.
- <u>Outgoing</u>

Segment Name	Segment ID	R/O	No. of Char	Value	Remarks
Functional Identifier Code	GS01	R	2	HP	
Application Senders Code	GS02	R	2/15	IKA	
Application Receivers Code	G503	R	2/15	<receiver ID>	
Date	G504	R	8	<CCYYMMDD>	Functional Group creation date in CCYYMMDD format
Time	GS05	R	4/8		<HHMM>
Group Control Number	GS06	R	9		Assigned and maintained by the sender, must be associated with GE02 segment GS06
Responsible Agency Code	GS07	R	2	X	Accredited Standards Committee X12
Version/Release/Industry Identifier Code	GS08	R	12	005010X221A1	Transaction version

6.3 ST-SE

Each 835 delivered as a result of a batch request may contain multiple ST/SE groupings per payment within a given ISA/IEA envelope.

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

The Health Care Claim Payment/Advice (835) files may not contain non-standard procedure codes. Any such files will be rejected in their entirety. This directly affects providers who submit claims using "Local Codes" specific to California. Therefore, it is recommended that providers who use Local Codes do not enroll in this program.

8 ACKNOWLEDGEMENTS AND/OR REPORTS

8.1 999 – ACKNOWLEDGEMENT FOR HEALTH CARE INSURANCE

Gold Coast Health Plan supports the 999 functional Acknowledgement.

8.2 TA1 - INTERCHANGE ACKNOWLEDGEMENT REQUEST

Gold Coast Health Plan supports the Interchange Acknowledgement Request (TA1) when any issues at ISA level.

9 TRADING PARTNER AGREEMENTS

This section contains general information concerning Trading Partner Agreements (TPA). An actual TPA may optionally be included in an appendix.

9.1 TRADING PARTNERS

An EDI Trading Partner is defined as any Gold Coast Health Plan customer (provider, billing service, software vendor, employer group, financial institution, etc.) that transmits to, or receives electronic data from Gold Coast Health Plan.

Gold Coast Health Plan uses request through Provider services to register new partners and agreement/set-up forms to process electronic transactions.

10 TRANSACTION SPECIFIC INFORMATION

Gold Coast Health Plan does not have any transaction specific information above HIPAA and TR3 guidelines.

APPENDICES

A.   Transmission Examples

ISA*00*Authorizat*00*Security I*ZZ*Interchange Sen*ZZ*Interchange
Rec*150608*1037*^*00501*000000002*0*T*:
GS*HP*Sample Sen*Sample Rec*20150608*1037*12346*X*005010X221A1
ST*835*1235
BPR*C*211316.33*C*ACH*CTX*04*00000020*DA*123456*1512345678*123123123*04*80000008*DA*9
8765*20150608
TRN*1*12345*1512345678*123123123
DTM*405*20021026
N1*PR* Gold Coast Health Plan
N3*1 MAIN STREET
N4*TIMBUCKTU*AK*89111
REF*2U*999
PER*CX*Name*TE*1234567890*TE*1234567890*EX*999
PER*BL*Name*TE*1234567890
N1*PE*CYBIL MENTAL HOSPITAL*XX*1234567893
N4*TIMBUCKTU*AK*89111
REF*TJ*123478925
LX*110211
TS3*6543210903*11*19961231*1*211366.97
CLP*666123*1*211366.97*211318.40**15*1999999444444*11*1**100*100
CAS*CO*10*48.57
NM1*QC*1*SHEPARD*SAM*O***HN*666666666A
NM1*IL*1*SHEPARD*SAM*O***MI*666666666A
NM1*74*1******C*666666666B
NM1*82*1*SHEPARD*SAM*O***XX*1234567893
DTM*232*20021026
DTM*233*20021026
PER*CX*Name*TE*1234567890*TE*1234567890*EX*999
AMT*AU*8
QTY*CA*8
PLB*6543210903*20021026*CV:CP*1.27*CV:CP*-1.27*CV:CP*-1.2*CV:CP*-1.7*CV:CP*3.27*CV:CP*1.7
SE*28*1235
GE*1*12346
IEA*1*000000002

B.   Change Summary

None