



CARECORE NATIONAL LLC

X12 Professional Claims

This companion guide is specific for NYNM contracted providers

**Standard Companion Guide: Communications /
Connectivity / Electronic Funds Transfer
Transaction Information**

**Instructions related to transactions based on ASC X12
Implementation Guides, version 005010**

837 Professional Claims 005010X222A1

Companion Guide Version Number: 1.0

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Preface

Companion Guides (CG) may contain two types of data: instructions for electronic communications with the publishing entity (Communications/Connectivity Instructions) and supplemental information for creating transactions for the publishing entity while ensuring compliance with the associated ASC X12 IG (Transaction Instructions). Either the Communications/Connectivity component or the Transaction Instruction component must be included in every CG. The components may be published as separate documents or as a single document.

The Communications/Connectivity component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange. The Transaction Instruction component is included in the CG when the publishing entity wants to clarify the IG instructions for submission of specific electronic transactions. The Transaction Instruction component content is limited by ASCX12's copyrights and Fair Use statement.

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1 Communications/Connectivity Introduction

1.1 Scope

This document is to be used as a companion document to the Health Insurance Portability and Accountability Act (HIPAA) Implementation Guides. It is designed to provide the information necessary to facilitate electronic interchange of healthcare transactions with CareCore National LLC. Electronic Data Interchange, or EDI, is a way of sending information from one computer to another. EDI helps providers and payers maintain a flow of vital information by enabling the transmission of claims and managed care transactions. EDI connects providers, payers and other health care partners using computers and communications networks or modems and ordinary phone lines. It allows you to send and receive vital healthcare information electronically. Information is sent from your billing or practice management system to an EDI network where it is verified for accuracy and then sent straight through to the payer's computer systems.

1.2 References

1.2.1 ASC X12

ASC X12N/005010X222A1 Health Care Claim: Professional (837P)

You can purchase these copyrighted guides from the ASC X12 store at <http://store.x12.org/>.

1.2.2 HIPAA Assistance

For information on the HIPAA ASC X12 005010 transaction sets along with the errata for each, visit <http://wpc-edi.com>, and select the appropriate category from the list provided.

2 Getting Started

CareCore National Direct Submitter Access & EFT Registration

2.1 To establish connectivity to CareCore National LLC.

- All users must register for direct submission and EFT. Instructions and registration forms are located online. www.claimschannel360.com

2.2 Benefits of ClaimsChannel 360

Claims Channel 360 is an online system through which you can submit claims, register for EFT, and access reports from CareCore National LLC.

- Reduction of mail handling cost & delays
- Reduction in processing time & costs
- Instant notification of critical claim errors
- Detailed Batch & Claim Statistics
- Ability to edit/fix claims online
- Electronic Fund Transfer Payment

2.3 Initial Registration for ClaimsChannel360 (NYNM users) account

ClaimsChannel360 account for NYNM users

- Go to www.claimschannel360.com
- Register by selecting 'Sign Up'
- Once Complete with filling out the online registration form select 'Submit Form'
- Upon receiving a username and password from edi@carecorenational.com, enter the www.claimschannel360.com site and select 'Secure Login'

2.4 To Register for EFT on ClaimsChannel360 (NYNM Users)

- ❖ *You must register for a user ID and password on Claims Channel 360 prior to requesting access for EFT.*

2.4.1 EFT Registration for ClaimsChannel360


- NYNM Providers go to www.claimschannel360.com
- Click on Secure Login after you have received your User ID and Password from edi@carecorenational.com
- The WebVPN screen will appear
- Enter User ID and Password "USING ALL CAPS" assigned by CareCore National EDI
- Click Login, you are now connected to Claims Channel 360
- Enter User ID and Password assigned by CareCore National EDI
- Click Login

- You are now logged on
- On the left side of screen click 'Indirect Submitters' or 'Submitter Services'
- Select 'EFT and Remittances' and then 'EFT Acct Mgmt'
- The vendor page appears, select the Vendor number you wish to enable for EFT
- The EFT form will appear
- Complete form with the required information, some information will be automatically filled in, but can be modified as needed
- Click the "SUBMIT" button on the bottom of the screen once all fields have been completed
- You will receive a prompt to confirm or modify you information. (**NO modifications can be made after you click 'submit agreement'**)
- Click "Submit the Agreement"
- Print, and then sign the completed form (**Form must be signed by a representative authorized on the bank account**)

2.4.2. Submit Completed and signed EFT Registration Form To:

CareCore National, LLC
Attention Finance Department, NYNM
400 Buckwalter Place Boulevard
Bluffton, SC 29910

YOUR EFT SUBMISSION MUST BE ACCOMPANIED BY A VOIDED CHECK FROM THE INTENDED ACCOUNT.

 *NOTE: Once you have completed the submission of the EFT agreement you will be automatically returned to the Vendors page. The EFT document will now appear under the EFT Agreement column and the status in the EFT Approved column will have changed from Not Enabled to CCN Review. Once CCN has received the signed document, voided check, and reviewed all the necessary information, the status will show as EFT Enabled and you will begin to receive the electronic deposits in the account you requested.*

2.5 To Become a Direct Submitter for ClaimsChannel360

- ❖ **After receiving your User ID and Password assigned by CareCore National EDI**
 - You will need to submit a test file to CareCore National
 - To begin the testing process contact your vendor to ensure you can send a HIPAA compliant ASCX125010 837P file
 - Your vendor should refer to the specific NYNM CareCore National Companion Guide to obtain specific guidelines for 5010 837P submission to CareCore National
 - Once your software has been configured, contact CareCore National EDI at edi@carecorenational.com and provide your contact information. An EDI Specialist will contact you to setup an appointment to assist in uploading a test file
 - The EDI Specialist will review the test file and communicate the results
 - Upon completion of a successful test file, the provider will be approved for direct Submission though ClaimsChannel 360

3 Available direct submitter access

As a direct submitter with CareCore National LLC you now have access to the following:

- Uploading Claims
- Claim inquiries
- Batch Claims Search
- Pickup Reports
- EFT Process
- Remittance Advices (Text)
- 835 Files
- Communication updates

3.1 File Requirements

- ✓ Claim should be in TXT format
- ✓ Claim File should be in no larger than 10MB
- ✓ File name lengths should be 30 characters or less

3.2 To upload a claim or batch file

- Select Submitter Services
- Select Claims
- Select Batch Claims
- Batch claim Upload screen will appear
- Select the following from the drop down box
 - Purpose of transmission
 - Health Plan
 - Use the browse button to locate the file on your system
 - Once the file has been selected verify the file name is correct

- Click upload, your file has been successfully uploaded to ClaimsChannel360

✚ NOTE: It is a critical detail to know that CareCore National LLC will treat all inbound claims as “Original”.

4 Validation

After the file is submitted, you will receive a File Syntax Acknowledgement (997) or an Implementation Acknowledgement (999).

✚ A 997 or 999 file-level acknowledgement is not a guarantee that your claims were accepted. Once the file is acknowledged, CareCore National LLC ensures that the required fields are present and readable.

5 To access the claim inquiry function

- Go to: www.claimschannel360.com.
- Click on Secure Login.
- The WebVPN screen will appear.
- Enter the user ID and password, click 'Login'. Please note, both are case sensitive and should be entered using “**ALL CAPS**”.
- The ClaimsChannel Participant Login screen will appear.
- You will need to re-enter your user ID and password, then click 'login'.
- Once logged in, click on 'Submitter Services' or 'Indirect Submitters' shown on the left side of the screen.
- Select 'Claims' and then 'Claim Inquiry' ~ from here you can inquire on the claims.
- Please note; the more fields you fill in on the inquiry screen will result in a more precise and speedier search. When searching by date range enter one day prior and one day after the date of service in your search.
- This will bring your results to a new screen labeled 'Claim Inquiry Results'.
- To view the details of a specific claim, click on the number (displayed in green print) under the 'Form Number' column for the specific claim you wish to view.
- This will bring you to a new screen labeled 'Encounter Claim Detail', which will show you the details specific to that claim.
- To return to the previous search results screen, click on the back arrow at the top left of your screen.
- To conduct a Batch Claims Inquiry select 'Submitter Services', 'Claims', 'Batch Queue'
- Enter Search parameters and to view a summary of the batch claims click 'Internal #/Health Plan' or 'Submitter/Batch'.
- When viewing the Batch Summary, other reports are also available to the provider on their claims.

6 To access Remittance

6.1 Remittance Advices

1. Go to www.claimschannel360.com
2. Click on 'Secure Login'
3. This will take you to the WebVPN page where you will enter the login and password from above, then click 'Login', "Please note, both are case sensitive and should be entered using **"ALL CAPS"**".
4. This will bring you to the ClaimsChannel Participant Login screen. You will need to enter your login and password again, then click 'login'.
5. Once logged in, click on 'Indirect Submitters' or 'Submitter Services' shown on the left side of the screen.
6. Then select 'EFT and Remittances' and then "Remittance Advices".
 - The Remittance Advices page appears with a tab for each Health Plan.
 - Select the Health Plan you want to view.
 - Under the Health Plan tab, a list of all Remittance Advices (RA) available will be listed for you to select from.
 - Select the one you want to review; click on it and the Remittance Advice will open up on your screen.
 - If you want to print the RA, click on File at the top left hand of your internet window and click print.
 - You may want to select Print Preview first to view how the RA will actually print, so you can change your page settings if needed.

6.2 Remittance-835:

1. Go to www.claimschannel360.com.
2. Click on 'Secure Login'.
3. This will take you to the WebVPN page where you will enter the login and password from above, then click 'Login' enter user ID and password, Please note, both are case sensitive and should be entered using **"ALL CAPS"**.
4. This will bring you to the ClaimsChannel Participant Login screen. You will need to enter your login and password again, then click 'login'.
5. Once logged in, click on 'Indirect Submitters' or 'Submitter Services' shown on the left side of the screen.
6. Then select 'EFT and Remittances' and then 'Remittance-835'
 - The 835 Files page appears with a tab for each Health Plan
 - Select the Health Plan you want to view.
 - Under the Health Plan tab, a list of all 835s available will be listed for you to select from.
 - Select the one you want to view/download, right click on it and a pop up window will appear allowing you to choose what you want to do with the file (i.e. Open, Save).

7 CareCore National Processing Hours

- CareCore National accepts files 24/7

8 Communication Protocols

- **Virtual Private Network (VPN):** This method will allow clients to upload their files through a secure point-to-point VPN “tunnel” connection over the internet.

8.1 Acceptable File Formats

CareCore National LLC accepts X12 transactions in a continuous stream using delimiters, (e.g. ~ tilde) to denote the end of the data. However, some communications protocols require the data to be in wrapped 80-byte format. CareCore National LLC accepts both formats.

- The Patient’s Health Plan **must be present** on each claim file
- Claim should be in TXT format
- Claim File should be in no larger than 10MB
- File name lengths should be 30 characters or less

9 Transmission Administrative Procedures

9.1 Retransmission Procedures

- CareCore National LLC 837 / batch claim Process only supports original claims. Therefore “Void Type” is not supported.
- ✚ HIPAA defines a “Claim Frequency Type Code” in Loop 2300, Segment CLM 05-3. The various types are “Original”, “Corrected”, “Replacement” or “Void”.
NOTE: It is a critical detail to know that CareCore National LLC will treat all inbound claims as “Original”.

10 Contact Information

10.1 EDI, Claim Channel 360 direct submitter, connectivity, or password reset

- edi@carecorenational.com

10.2 NYNM Claims Assistance and Customer Service

- <http://nynmonline.com/webforms/Default.aspx>
- 1-888-511-5208 (ext. 1)

11 Control Segments/Envelopes

11.1 ISA-IEA

Control Segments / Envelopes are used to provide information about the trading partner and the type of information contained within the transmission.

ISA	Element Name	VALUE	DESCRIPTION
ISA05	Interchange ID Qualifier	30	(Your) U.S. Federal Tax Identification Number
ISA06	Interchange Sender ID	(YOUR) Tax ID	(Your) U.S. Federal Tax Identification Number
ISA07	Interchange ID Qualifier	ZZ	Mutually Defined
ISA08	Interchange Receiver ID	11334	NYNM/Emdeon Payer ID

Use **Your US Federal Tax ID** in the Application Sender's Code (**GS02**) data element. The Tax ID reported in this segment must match the Tax ID submitted in ISA06.

The Application Receiver's Code (**GS03**) should contain the **NYNM/Emdeon Payer ID 11334** and should match ISA08.

12 Change Summary

Document change summary log

Version	Date	Section	Comment
1.0	9/28/2011	ALL	Initial version of document

CareCore National LLC Transaction Instructions

1 Intended Use

The Transaction Instruction component of this companion guide must be used in conjunction with an associated ASC X12 Implementation Guide. The instructions in this companion guide are not intended to be stand-alone requirements documents. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guides and is in conformance with ASC X12's Fair Use and Copyright statements.

2 Included ASC X12 Implementation Guides

This table lists the X12N Implementation Guides for which specific transaction instructions apply.

UNIQUE ID	NAME
005010X222A1	Health Care Claim: Professional

3 Instruction Tables

These tables contain one or more rows for each segment for which a supplemental instruction is needed.

Loop	Segment	Qualifier	Comments
2000B	SBR04		The Patient Health Plan <u>must be present</u> for each claim file (Box 11c on CMS 1500 form)
2010AA	NM101	85	Identifies Billing Provider
2010AA	NM108	XX= NPI	NPI required along with an appropriate Tax ID in the REF segment
2010AA	NM109	NPI of the billing provider	Identifies billing provider (Box 33A on CMS 1500 form)
2010AA	REF01	EI= TAX ID	Identifies Tax ID of the Billing Provider
2010AA	REF02	Tax ID of the billing provider	TAX ID of the Billing Provider (Box 25 on CMS 1500 form)
2010BA	NM101	IL	Identifies subscriber
2010BA	NM103		Subscriber last name (Box 4 on CMS 1500 form)
2010BA	NM104		Subscriber first name (Box 4 on CMS 1500 form)
2010BA	NM108	MI	Member Identification Number
2010BA	NM109		If the subscriber is the patient, then populate the NM109 with Member ID (Box 1A on CMS 1500 form)
2010BB	NM101	PR	Identifies the payer

2010BB	NM103		<p>NYNM health plan (ONLY) Submit the following: Amerigroup NYNM</p> <p>Fidelis NYNM</p> <p>WellCare NYNM</p> <p>(Box 11C on CMS 1500 Form)</p>
2010BB	NM108	PI	Payer Identification
2010BB	NM109		<p>NYNM health plan (ONLY) Submit the following: Amerigroup (NYNM)..... AMERG</p> <p>Fidelis (NYNM).....FIDEL</p> <p>WellCare (NYNM).....WELLC</p>
2010CA	NM101	QC	Identifies Patient
2010CA	NM103		Patient last name (Box 2 on CMS 1500 form)
2010CA	NM104		Patient first name (Box 2 on CMS 1500 form)
2310A	NM109	Referring/ Attending NPI	NPI requires an appropriate REF segment (Box 17b of the CMS 1500 form)
2310B	NM101	82	Identifies Rendering provider
2310B	NM108	XX= NPI	NPI required along with an appropriate Tax ID in the REF segment
2310B	NMI09	Rendering provider NPI	NPI requires an appropriate REF segment (Box 24J of the CMS 1500 form)