

ANSI ASC X12N 837 Healthcare Claim Companion Guide

Professional and Institutional Hawaii Medicaid Fee for Service

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Disclaimer

Purpose of the ANSI ASC X12N 837 Healthcare Claim Transaction Companion Guide

This companion guide for the ANSI ASC X12N 837 Professional and Institutional Healthcare Claim transaction has been created for use in conjunction with the standard Implementation Guide. It should not be considered a replacement for the Implementation Guide, but rather used as an additional source of information. The companion guide contains data clarifications derived from specific business rules that apply exclusively to Hawaii Medicaid- Fee for Service. The guide also includes useful information about sending and receiving data to and from Conduent EDI Solutions.

1. Introduction

Overview

Conduent EDI Solutions, a leader in healthcare technology, provides clearinghouse services to providers enrolled in contracted healthcare plans. Our electronic transaction services provide the following functionalities:

- · Easily submit all of your transactions to one source
- · Submit transactions twenty-four hours a day, seven days a week
- · Receive confirmation of receipt of each file transferred

Healthcare plans that participate with Conduent are referred to as payers. Transactions are accepted electronically into our data center in Pittsburg, PA and are processed through the Conduent State Healthcare Clearinghouse (SHCH) engine. The Conduent SHCH provides connectivity for the flow of electronic healthcare transaction s between medical providers, billing services, vendors and other clearinghouses. Additionally, Conduent SHCH provides translation to and from ANSI ASC X12N standard formats.

The 837 Institutional and Professional transaction data will be submitted to the Conduent SHCH for processing and the Conduent SHCH validates submission of the ANSI X12N format(s). Please refer to Chapter 4 for more information regarding transmission responses.

Audience

This 837 Claim Companion Guide is intended for Trading Partner use in conjunction with the ANSI ASC X12N 837 National Electronic Data Interchange Transaction Set Implementation Guides (Professional and Institutional). The ANSI ASC X12N Implementation Guides can be accessed at http://store.x12.org/store/. This Companion Guide outlines the procedures necessary for engaging in Electronic Data Interchange (EDI) with Conduent and specifies data clarification where applicable.

2. EDI Enrollment and Contact

Enrollment Information

All entities that send electronic claims to Conduent for processing and retrieves reports and responses must complete an enrollment form. This form provides Conduent the information necessary to assign a Logon Name, Logon ID, and Trading Partner ID, which are required to send/retrieve electronic transactions. To obtain the EDI enrollment form, contact the EDI Helpdesk or download the EDI enrollment form from our website at http://edisolutionsmmis.portal.conduent.com/gcro/.

EDI Support

The EDI Helpdesk assists users with questions about electronic submission. The EDI Helpdesk is available to all Hawaii Medicaid providers Monday through Friday from 8:00 a.m. to 5:00 p.m. Hawaii Standard Time at (888) 333-5641 or (808) 952-5583 or via email at hi.ecstest@Conduent.com.

The EDI Helpdesk:

- · Provides information on available services
- · Enrolls users for claims submission
- · Verifies receipt of electronic transmissions
- · Provides technical assistance to users who are experiencing transmission difficulties

Tracking Transmission/Production Problems

Please have the following information available when contacting the EDI Helpdesk regarding transmission and production issues.

• Trading Partner ID: Your Trading Partner ID is our key to accessing your Trading Partner information. Please have this number available each time you contact the EDI Helpdesk.

Highlights

To promote efficient, accurate electronic transaction processing, please note:

- Each user is assigned a six-digit Trading Partner ID.
- · Login User IDs (passwords) are nine characters.
- · All dates are in the CCYYMMDD format.
- All date/times are in the CCYYMMDDHHMM format.
- The same phone number will be used for transmitting test and production files.

- Hawaii Medicaid Provider IDs must be padded with two leading zeroes. Do not pad NPI numbers with the leading zeroes.
- The Payer ID for Hawaii Medicaid- Fee for Service is 77060. Transmissions without this value in the appropriate fields will not be processed.

3. Transmission Methods

Conduent provides several mechanisms for you to upload your files or retrieve response transactions. Which method(s) is/are used depends on your needs and preferences. With your Trading Partner/Submitter enrollment comes access to a bulletin board for asynchronous dial-up (typically for small providers). Coupled with that is automatic access to a "small volume/small file" Web site for direct submission and response retrieval. For larger volume or large file submitters, we can provide access to the MOVEit DMZ (with a Web browser-based interface).

These various methods will be discussed in the following order:

- Bulletin Board System (BBS)
- EDIOnline (smaller volume/smaller file Web site)
- MOVEit DMZ

Bulletin Board System

Conduent provides an interactive, menu-driven bulletin board system that allows you to upload your transaction files and receive immediate confirmation of the status of your transfer. This bulletin board system (BBS) can be accessed using a standard modem and supports modem speeds of up to 56,000 bps. Transaction transmission is available twenty-four hours a day, seven days a week. This availability is subject to scheduled and unscheduled host downtime. It is operational policy to schedule preventative maintenance periods on weekends whenever possible.

Communication Protocols

Conduent currently supports the following communication options:

XMODEM, YMODEM, ZMODEM, Kermit

Teleprocessing Requirements

The general specifications for communication with Conduent are:

Telecommunications	Hayes-compatible 2400-56K bps asynchronous modem.
File Format	ASCII text data
Compression Techniques	PKZIP will compress one or more files into a single ZIP archive.
	WINZIP will compress one or more files into a

single ZIP archive.

Conduent accepts transmission with any of the above compression techniques, as well as non-compression files.

Data Format

8 data bit, 1stop bit, no parity, full duplex.

Transmission Protocol

ZMODEM uses 128 byte to 1024 byte variable packets and a 16-bit or 32-bit Cyclical Redundancy Check (CRC).

XMODEM uses 128 byte blocks and a 16-bit CRC.

YMODEM uses 1024 byte blocks and a 16-bit CRC.

KERMIT can be accepted if X, Y, or ZMODEM capabilities are not available with your communication software.

Teleprocessing Settings

ASCII Sending

Send line ends with line feeds (should not be set).

Echo typed characters locally (should not be set).

Line delay 0 milliseconds.

Character delay 0 milliseconds.

ASCII Receiving

Append line feeds to incoming line ends should not be checked.

Wrap lines that exceed terminal width.

Terminal Emulation

VT100 or Auto.

Transmission Procedures

SUBMITTER

HOST SYSTEM

1. Dials Host

Answers call, negotiates a common baud rate, and sends to the Trading Partner:

"Please enter your Login=>"

2. Enters Login Name <CR>

Receives User Name (Login Name) and sends to the Trading Partner:

"Please enter your password=>"

3. Enters Password <CR>

Receives Login and verifies if Trading Partner is an authorized user:

Sends HOST selection menu followed by a user prompt:

"Please Enter Your Selection=>"

4. Enters Desired Selection <CR>

#1. Electronic Claims Submission:

Assigns and sends the transmission file name then waits for ZMODEM (by default) file transfer to be initiated by the Trading Partner.

#2. View Submitter Profile

3. Select File Transfer Protocol: Allows you to change the protocol for the current submission only. The protocol may be changed to (**k**)ermit, (**x**)Modem, (**y**)Modem, or (**z**)Modem.

Enter selection [k, x, y, z]:

5. File Areas

9. Exit & Disconnect: Terminates connection.

5. Enters "1" to send file <CR>

Receives ZMODEM (or other designated protocol) file transfer. Upon completion, initiates file confirmation. Sends file confirmation report.

Sends HOST selection menu followed by a user prompt=>

"Please Enter Your Selection=>"

1. Electronic Claims Submission:

Assigns and sends the transmission file name then waits for ZMODEM (by default) file transfer to be initiated by the Trading Partner.

2. View Submitter Profile

3. Select File Transfer Protocol: Allows you to change the protocol for the current submission only. The protocol may be changed to (k)ermit, (x)Modem, (y)Modem, or (z)Modem.

Enter selection [k, x, y, z]:

4. Download Confirmation

9. Exit & Disconnect: Terminates connection.

Transmission Telephone Numbers

Conduent provides availability for transmission 24 hours a day, 7 days a week. There are no restrictions on the number or frequency of transmissions. The transmission telephone numbers are (800) 334-2832, (800) 334-4650, (800) 334-6165 and (800) 335-6171.

EDIOnline

This smaller-file or smaller volume web site allows a Trading Partner to initiate the submission of a batch file for processing. It also allows for the retrieval (download) of any files you may be expecting such as 999's, etc. Access to this site is automatic (no additional setup required) with Trading Partner enrollment.

The URL of the site is: https://edionline.portal.conduent.com/EDIOnline/redirect.action. This is an SSL secured site, and you will be automatically redirected to a secured page.

A Trading Partner accesses the web site via a web browser and is prompted for login and password. These credentials are the same as those used to access the Bulletin Board System. These details are provided once a Trading Partner is enrolled.

Once logged in, the user is presented with a drop-down to select the desired option: Send File or Retrieve File. It is important to note that new Trading Partners who have not yet successfully submitted a file may not (in most cases) have a mailbox created yet. If this is the case, the option to Retrieve File will not be available.

Files for submission may be selected from the user's PC or work environment using the "Browse" function in conjunction with the "Add" and "Remove" functions. To transmit the selected files for processing, the Trading Partner must click the "Submit" link. All files submitted must be in the ANSI ASC X12N 837 format.

MOVFit DMZ

The MOVEit DMZ is a secured transmission protocols & secured storage landing zone (intermediate storage) for the exchange of files between Trading Partners and Conduent. Its use is intended for those Trading Partners/Submitters who will be submitting a larger volume of physical files (in excess of 20 per day) or whose physical file sizes regularly exceed 2MB. **Access to the site is not automatic**. Trading Partners must contact their EDI representative to request setup on the site.

If approved, a separate URL will be provided, along with new credentials, a "Welcome Letter" containing basic site navigation, restrictions on passwords, and other helpful information. **Trading Partners approved for this site should note that files are retained for only 30 days, whether or not they have been retrieved.**

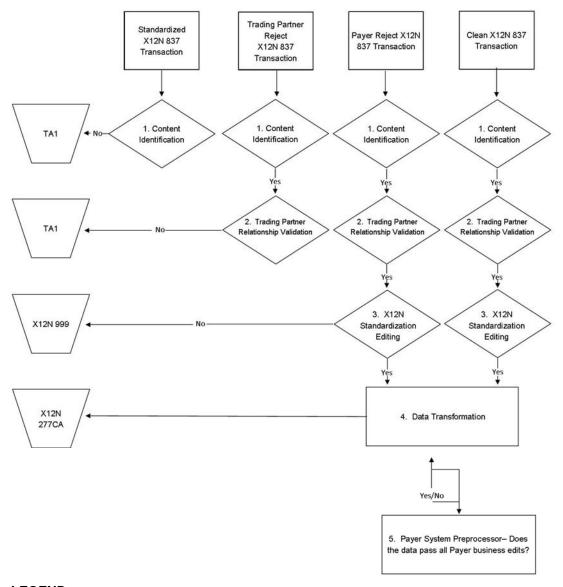
4. Transmission Responses/Reports

The acceptance/rejection reports pertain to accuracy within EDI transaction format syntax and transaction implementation guide compliance.

A transaction contains four levels of editing. If the transaction fails an edit, the edit level in which the error occurs designates rejection of an entire batch or a single claim. The four levels are:

- Interchange Level Errors
- Functional Group Level Results
- Transaction Set Level Syntax Results
- Implementation Guide Level Results

Editing and Validation Flow Diagram



LEGEND:

- Content Identification: Data identification is attempted. If the data is corrupt or intended for another resource, a TA1 (Interchange Acknowledgement) will be returned. If the data can be identified, it is then checked for Trading Partner Relationship Validation.
- 2. Trading Partner Relationship Validation: The Trading Partner information is validated. If the Trading Partner information is invalid, a TA1 (Interchange Acknowledgement) will be returned to the Submitter. If the Trading Partner relationship is valid, the data will be passed for X12N syntax validation.
- 3. X12N Syntax Validation: A determination will be made as to whether the data is ANSI ASC X12N. A 999 (Functional Acknowledgement) will be returned to the Submitter. The 999 contains ACCEPT or REJECT information. If the file contained syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported. If the data passes X12N syntax validation, payer business edits will be performed.
- Data Transformation: The data is transformed and sent to the payer system for pre-processor business edit check.
- 5. Payer Business Edits: Front-end editing of the data will occur. An X12N 277 Claim Acknowledgement will be sent detailing acceptance or rejection errors. If the data passes this level, it will proceed to the payer system for processing

In the description below, the four levels and their affiliated acceptance/rejection reports are discussed.

Interchange Level Errors and TA1 Rejection Report

This segment acknowledges the reception of an X12 interchange header and trailer from a previous interchange. If the header/trailer pair is received corrected, the TA1 reflects a valid interchange, regardless of the validity of the contents for the data included inside the header/trailer envelope. Receipt of the TA1 is subject to Trading Partner agreement. Any X12N syntax error that occurs at this level will result in the entire transaction being rejected. These rejections are reported on a TA1 Interchange Acknowledgement.

If the data can be identified, it is then checked for Trading Partner relationship validation. Once validated, if the Trading Partner information is invalid, a TA1 report is forwarded to the Submitter. If the Trading Partner information is valid, the data is passed for X12N syntax validation.

EXAMPLE:

The transaction was built with incorrect sender information or incorrect total of groups at the end of the transaction:

ISA (contains sender information)

GS

ST

Detailed Segment Information- 1

SE

ST

Detailed Segment Information- 2

SE

ST

Detailed Segment Information- 3

SF

GE

IEA (contains a number total of all functional groups within the batch)

For an additional example of this report, please see the ANSI ASC X12N 837 Implementation Guide.

Transaction Set Level Syntax Results and 999 Rejection Report

This edit is enforced by transaction set level syntax problems for all transactions within each functional group. These edits check the ST and SE level segments and the data content within these segments. These segments consist of the entire detailed information within a transaction. Any X12N syntax error that occurs at this level will result in the entire transaction being rejected. However, if the functional group consists of additional transactions without errors, these will be processed. The rejections are reported on a 999.

999- Functional Acknowledgement

When Conduent SHCH validates submission of the ANSI format, the Conduent SHCH generates a 999 Functional Acknowledgement. The 999 contains **ACCEPT** or **REJECT** information; if the file contained syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported on the 999. For an example of this report, please see the ANSI ASC X12N 837 Implementation Guide. The Trading Partner Agreement between Conduent and the Trading Partners requires this method of acknowledgement.

If the data passes X12N syntax validation, payer business edits are performed.

EXAMPLE:

The batch was built with incorrect segment data:

ISA
GS
ST
Detailed Segment Information- 1
SE (contains detailed information within a transaction)
ST
Detailed Segment Information- 2
SE
ST
Detailed Segment Information- 3
SE (contains detailed information within a transaction)
GE
IEA

Implementation Guide Level Edits and the 277CA Application Advice

This edit is enforced by the implementation guide rules for the particular transaction. These edits will vary depending on the rules set by the implementation guide, code sets, and looping structures. Any errors that occur at this level will result in the data content within the claim being rejected. However, if the batch consists of additional claims without errors, these will be processed.

277CA- Application Advice

If a business edit fails during the translation of the ANSI ASC X12N 837 transaction, a 277CA-application advice will be returned to the Submitter. It will detail what errors are present, and if necessary, what action the submitter should take. The use of the 277CA transaction is not required by HIPAA; however is useful in detailing information outside the scope of the 999. For an example of this report, please see the ANSI ASC X12N 277CA Implementation Guide.

EXAMPLE:

The batch was built with incorrect transaction "required field" data:

ISA

GS
ST

Detailed Segment Information- 1 (contains HIPAA required field data)
SE
ST

Detailed Segment Information- 2 (contains HIPAA required field data)
SE
ST

Detailed Segment Information- 3 (contains HIPAA required field data)
SE
GE
GE
IEA

For further explanation, please see Chapter 4, "Editing and Validation Flow Diagram" for a visual depiction of the error process/responses.

Data Retrieval Methods

This section describes the available data retrieval modes from Conduent. The ANSI ASC X12N 837 Professional and Institutional is an inbound (to Conduent) claim transaction.

Error Reports

The 999, 824 and TA1 transactions will be posted to the Host Data Exchange (HDE) or sent via another agreed upon transmission mode.

The functions of the acceptance/rejection reports (TA1, 997 and 824) are discussed in: Chapter 4, Transmission Responses/Reports.

Bulletin Board System

Conduent provides an interactive, menu-driven bulletin board system that allows you to upload your transaction files and receive immediate confirmation of the status of your transfer. This bulletin board system (BBS) can be accessed using a standard modem and supports modem speeds of up to 56,000 bps. Transaction transmission is available twenty-four hours a day, seven days a week. This availability is subject to scheduled and unscheduled host downtime. It is operational policy to schedule preventative maintenance periods on weekends whenever possible.

Communications Protocols

Conduent currently supports the following communication options:

XMODEM, YMODEM, ZMODEM, Kermit

Teleprocessing Requirements

The general specifications for communication with Conduent are:

Telecommunications	Hayes-compatible 2400-56K bps asynchronous modem.
File Format	ASCII text data
Compression Techniques	PKZIP will compress one or more files into a single ZIP archive.

WINZIP will compress one or more files into a single ZIP archive.

Conduent accepts transmission with any of the above compression techniques, as well as non-compression files.

8 data bit, 1stop bit, no parity, full duplex.

Data Format

Transmission Protocol

ZMODEM uses 128 byte to 1024 byte variable packets and a 16-bit or 32-bit Cyclical Redundancy Check (CRC).

XMODEM uses 128 byte blocks and a 16-bit CRC.

YMODEM uses 1024 byte blocks and a 16-bit CRC.

KERMIT can be accepted if X, Y, or ZMODEM capabilities are not available with your communication software.

Teleprocessing Settings

ASCII Sending

Send line ends with line feeds (should not be set).

Echo typed characters locally (should not be set).

Line delay 0 milliseconds.

Character delay 0 milliseconds.

ASCII Receiving

Append line feeds to incoming line ends should not be checked.

Wrap lines that exceed terminal width.

VT100 or Auto.

Transmission Procedures

SUBMITTER

HOST SYSTEM

1. Dials Host

Answers call, negotiates a common baud rate, and sends to the Trading Partner:

"Please enter your Login=>"

2. Enters Login Name <CR>

Receives User Name (Login Name) and sends to the Trading Partner:

"Please enter your password=>"

3. Enters Password <CR>

Receives Login and verifies if Trading Partner is an authorized user:

Sends HOST selection menu followed by a user prompt:

"Please Enter Your Selection=>"

1. Electronic Claims Submission:

4. Enters Desired Selection <CR> nar

Assigns and sends the transmission file name then waits for ZMODEM (by default) file transfer to be initiated by the Trading Partner.

2. View Submitter Profile

3. Select File Transfer Protocol: Allows you to change the protocol for the current submission only. The protocol may be changed to (k)ermit, (x)Modem, (y)Modem, or (z)Modem.

Enter selection [k, x, y, z]:

#5. File Areas

9. Exit & Disconnect: Terminates connection.

5. Enters "5" to view response files <CR>

Sends File Area Selection menu followed by a user prompt=>

"Enter Selection=>"

6. Enters "F"<CR>

- #1. Confirmation Reports
- # 2. Hawaii FeeForService 824
- 7. Enters "#" followed by numerical selection <CR>
- #3. Hawaii FeeForService 999
- #4. Hawaii Waiver 824
- #5. Hawaii Waiver 999
- **# 9. Exit & Disconnect:** Terminates connection.

[F]ile Area [L]ist [M]ain Menu
[G]oodbye

EDIOnline

This smaller-file or smaller volume web site allows a Trading Partner to initiate the submission of a batch file for processing. It also allows for the retrieval (download) of any files you may be expecting such as 999's, etc. Access to this site is automatic (no additional setup required) with Trading Partner enrollment.

The URL of the site is: https://edionline.portal.conduent.com/EDIOnline/redirect.action. This is an SSL secured site, and you will be automatically redirected to a secured page.

A Trading Partner accesses the web site via a web browser and is prompted for login and password. These credentials are the same as those used to access the Bulletin Board System. These details are provided once a Trading Partner is enrolled.

Once logged in, the user is presented with a drop-down to select the desired option: Send File or Retrieve File. It is important to note that new Trading Partners who have not yet successfully submitted a file may not (in most cases) have a mailbox created yet. If this is the case, the option to Retrieve File will not be available.

Files for retrieval will be shown depending on various factors, primarily what types the Trading Partner was set up to receive during the enrollment process, and whether or not any results have been posted to their mailbox. **Trading Partners should note that files are retained for a period of 60 days. After that time they are automatically deleted.**

6. Testing

Completion of the testing process is required prior to electronic submission of production data to Conduent. Assistance from the EDI Helpdesk is available throughout this process. Each test transmission is inspected thoroughly to ensure no format errors are present. Testing is conducted to verify the integrity of the format, not the integrity of the data; however, in order to simulate a production environment, we request that you send real transmission data. The number of test transmissions required depends on the number of format errors on a transmission and the relative severity of these errors. Additional testing may be required in the future to verify any changes made to the X12N formats.

Trading Partner Testing Procedures

- 1. Companion Guides and enrollment forms are available for download via the web at http://edisolutionsmmis.portal.conduent.com/gcro/.
- 2. The Trading Partner completes the enrollment form and submits it to the EDI Helpdesk.
- 3. The Trading Partner is assigned Logon Name and Logon User ID.
- 4. The Trading Partner contacts the EDI Helpdesk to arrange a testing schedule.
- 5. The Trading Partner executes test cases and sends the date to Conduent. Test data must contain real claim info. Preferably previously paid claims.
- 6. The EDI Helpdesk evaluates the flow of test data through the Conduent SHCH.
- 7. If test cases are completed successfully, the EDI Helpdesk contacts the Trading Partner and the Trading Partner is approved for placement into the production environment.
- 8. If test cases are unsuccessful, the EDI Helpdesk will contact the Trading Partner. The Trading Partner will remain in the testing environment until test cases are completed successfully. Only one successful test case is required in order to be placed in the production environment.

7. Transaction Descriptions

This section contains data clarifications. The clarifications include:

- Identifiers to use when a national standard has not been adopted (and),
- Parameters in the implementation guide that provide options.

Many of the data elements included in the Companion Guides are business requirements and are not standardization-required elements. Inclusion of a "business-required" data field, as defined in this Companion Guide, will aid in the delivery of a positive response.

In order to expedite claim processing, please limit the number of claims submitted to **5,000** per transmission. Trading Partners with more than 5,000 claims should send multiple 837 transactions.

Note: For fields marked as "NOT USED BY HAWAII", Hawaii does not use the segment or element for processing or updating of the adjudication system; however, the field may still be required by a Validator. Follow TR3 guidelines.

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Loop	Element	Description 837-P 5010 A1 FFS	Use	Hawaii Usage/Expected Value
	ISA	INTERCHANGE CONTROL HEADER	R	
	ISA01	Authorization Information Qualifier	R	00
	ISA02	Authorization Information	R	10 spaces
	ISA03	Security Information Qualifier	R	00
	ISA04	Security Information	R	10 spaces
	ISA05	Interchange ID Qualifier	R	ZZ
	ISA06	Interchange Sender ID	R	The Trading Partner ID provided during the enrollment process
	ISA07	Interchange ID Qualifier	R	ZZ
	ISA08	Interchange Receiver ID	R	100000
	ISA11	Interchange Control Standards ID	R	۸
	ISA13	Interchange Control Number	R	9-digit Interchange Control Number, assigned by the Submitter
	ISA14	Acknowledgement Requested	R	1
	ISA16	Component Element Separator	R	
	GS	FUNCTIONAL GROUP HEADER	R	
	GS02	Application Sender Code	R	The Trading Partner ID provided during the enrollment process
	GS03	Application Receiver Code	R	77060
	GS06	Group Control Number	R	May not have leading zeroes.
	ВНТ	BEGINNING OF HIERARCHICAL TRANSACTION	R	
	BHT06	Claim or Encounter ID	R	СН
1000A	NM1	SUBMITTER NAME	R	
1000A	NM109	Submitter Identifier	R	The Trading Partner ID provided during the enrollment process
1000B	NM1	RECEIVER NAME	R	
1000B	NM103	Receiver Name	R	Hawaii Medicaid
1000B	NM109	Receiver Primary Identifier	R	77060
				1

Loop	Element	Description 837-P 5010 A1 FFS	Use	Hawaii Usage/Expected Value
2010AB	NM1	PAY-TO ADDRESS NAME	S	SEGMENT NOT USED BY HAWAII Hawaii will use the PMMIS pay-to address. Providers need to ensure they have their correct pay-to address in PMMIS.
2000B	HL	SUBSCRIBER HIERARCHICAL LEVEL	R	
2000B	HL04	Hierarchical Child Code	R	0 Hawaii does not have dependent claims
2000B	SBR	SUBSCRIBER INFORMATION	R	
2000B	SBR09	Claim Filing Indicator Code	S	Hawaii Medicaid will only accept the MC value.
2010BA	NM1	SUBSCRIBER NAME	R	
2010BA	NM109	Subscriber Primary Identifier	S	10-digit HAWI ID (Member Identification Number)
2010BB	NM1	PAYER NAME	R	
2010BB	NM103	Payer Name	R	Hawaii Medicaid
2010BB	NM109	Payer Identification	R	77060
2010BB	REF	BILLING PROVIDER SECONDARY IDENTIFICATION	S	Atypical Provider Only. Hawaii Medicaid will only accept either NPI or Medicaid Legacy ID in a claim.
2010BB	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2010BB	REF02	Reference Identification	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an atypical provider. Do not send if medical provider.
2300	CLM	CLAIM INFORMATION	R	
2300	CLM05-3	Claim Frequency Type Code	R	1, 7 or 8
2300	REF	PAYER CLAIM CONTROL NUMBER	S	

Loop	Element	Description 837-P 5010 A1 FFS	Use	Hawaii Usage/Expected Value
2300	REF02	Claim Original Reference Number	R	12-digit Hawaii Medicaid CRN (Claim Reference Number)
2310A	NM1	REFFERRING PROVIDER NAME	S	To be used only if the Referring Provider differs from the Billing Provider. Otherwise, do not send or the claim will deny.
2310A	REF	REFERRING PROVIDER SECONDARY IDENTIFICATION	S	Required when claim involves a referral from an Atypical provider.
2310A	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310A	REF02	Referring Provider Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider.
2310B	REF	RENDERING PROVIDER SECONDARY IDENTIFIER	s	Atypical Provider Only. Hawaii will only accept either NPI or Medicaid Legacy ID in a claim.
2310B	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310B	REF02	Rendering Provider Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider.
2310C	REF	SERVICE FACILITY LOCATION SECONDARY IDENTIFIER	S	Atypical Provider Only Hawaii Medicaid will only accept either NPI or Medicaid Legacy ID in a claim.

Loop	Element	Description 837-P 5010 A1 FFS	Use	Hawaii Usage/Expected Value
2310C	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310C	REF02	Laboratory or Facility Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider.
	GE02	Group Control Number	R	May not have leading zeroes.

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Loop	Element	Description 837-I 5010 A2 FFS	Use	Hawaii Usage/Expected Value
	ISA	INTERCHANGE CONTROL HEADER	R	
	ISA01	Authorization Information Qualifier	R	00
	ISA02	Authorization Information	R	10 spaces
	ISA03	Security Information Qualifier	R	00
	ISA04	Security Information	R	10 spaces
	ISA05	Interchange ID Qualifier	R	ZZ
	ISA06	Interchange Sender ID	R	The Trading Partner ID provided during the enrollment process
	ISA07	Interchange ID Qualifier	R	ZZ
	ISA08	Interchange Receiver ID	R	100000
	ISA11	Interchange Control Standards ID	R	٨
	ISA13	Interchange Control Number	R	9-digit Interchange Control Number, assigned by the Submitter
	ISA14	Acknowledgement Requested	R	1
	ISA16	Component Element Separator	R	I
	GS	FUNCTIONAL GROUP HEADER	R	
	GS02	Application Sender Code	R	The Trading Partner ID provided during the enrollment process
	GS03	Application Receiver Code	R	77060
	GS06	Group Control Number	R	May not have leading zeroes.
	внт	BEGINNING OF HIERARCHICAL TRANSACTION	R	
	BHT06	Claim or Encounter ID	R	СН
1000A	NM1	SUBMITTER NAME	R	
1000A	NM109	Submitter Identifier	R	The Trading Partner ID provided during the enrollment process
1000B	NM1	RECEIVER NAME	R	
1000B	NM103	Receiver Name	R	Hawaii Medicaid
1000B	NM109	Receiver Primary Identifier	R	77060

Loop	Element	Description 837-I 5010 A2 FFS	Use	Hawaii Usage/Expected Value
2010AB	NM1	PAY-TO ADDRESS NAME	S	SEGMENT NOT USED BY HAWAII Hawaii will use the PMMIS pay-to address. Providers need to ensure they have their correct pay-to address in PMMIS.
2000B	HL	SUBSCRIBER HIERARCHICAL LEVEL	R	
2000B	HL04	Hierarchical Child Code	R	0 Hawaii does not have dependent claims
2000B	SBR	SUBSCRIBER INFORMATION	R	
2000B	SBR09	Claim Filing Indicator Code	S	Hawaii Medicaid will only accept the MC value.
2010BA	NM1	SUBSCRIBER NAME	R	
2010BA	NM109	Subscriber Primary Identifier	S	10-digit HAWI ID (Member Identification Number)
2010BB	NM1	PAYER NAME	R	
2010BB	NM103	Payer Name	R	Hawaii Medicaid
2010BB	NM109	Payer Identification	R	77060
2010BB	REF	BILLING PROVIDER SECONDARY IDENTIFICATION	S	Atypical Provider Only. Hawaii Medicaid will only accept either NPI or Medicaid Legacy ID in a claim.
2010BB	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2010BB	REF02	Reference Identification	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider.
2300	CLM	CLAIM INFORMATION	R	
2300	CLM05-3	Claim Frequency Type Code	R	1, 7 or 8
2300	REF	PAYER CLAIM CONTROL NUMBER	S	

Loop	Element	Description 837-I 5010 A2 FFS	Use	Hawaii Usage/Expected Value
2300	REF02	Claim Original Reference Number	R	12-digit Hawaii Medicaid CRN (Claim Reference Number)
2310A	REF	ATTENDING PROVIDER SECONDARY IDENTIFICATION	S	Atypical Provider Only
2310A	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310A	REF02	Attending Provider Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an atypical provider. Do not send if medical provider.
2310B	REF	OPERATING PHYSICIAN SECONDARY IDENTIFICATION	S	Atypical Provider Only
2310B	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310B	REF02	Operating Provider Secondary	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider.
2310C	REF	OTHER OPERATING PHYSICIAN SECONDARY IDENTIFICATION	s	Atypical Provider Only
2310C	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310C	REF02	Other Operating Provider Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider.

Loop	Element	Description 837-I 5010 A2 FFS	Use	Hawaii Usage/Expected Value
				Do not send if medical provider.
2310E	REF	SERVICE FACILITY LOCATION SECONDARY IDENTIFIER	s	Atypical Provider Only
2310E	REF01	Reference Identification Qualifier	R	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310E	REF02	Laboratory or Facility Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider. To be used only if the Referring Provider differs from the Billing Provider. Otherwise, do not send or the claim will deny.
2310F	REF	REFERRING PROVIDER SECONDARY IDENTIFICATION	s	Required when claim involves a referral from an Atypical provider.
2310F	REF01	Reference Identification Qualifier	s	Hawaii Medicaid will only accept qualifier G2 for Atypical providers.
2310F	REF02	Referring Provider Secondary Identifier	R	10-digit ID Two leading zeroes + 6-digit MQD Provider Registration ID (Medicaid ID) + 2-digit location code. Default location code is 01. Example: 0012345601 Segment should only be used for an Atypical provider. Do not send if medical provider.
	GE02	Group Control Number	R	May not have leading zeroes.