



Blue Cross & Blue Shield of Rhode Island

**276/277 Health Care Claim Status Request
and Response Companion Guide
(Real-Time and Batch)**

HIPAA version 5010

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PREFACE

This *Companion Guide* supplements the ASC X12 276/277 (005010X212) 5010 *Technical Report 3(TR3)* and *Errata (005010X212E2)* adopted under HIPAA. Its purpose is to clarify the rules and specify the data content when data is electronically transmitted to Blue Cross & Blue Shield of Rhode Island (hereinafter "BCBSRI"). The rules for transmitting data detailed herein are compliant with both X12 syntax and the 5010 *Technical Reports 3(TR3s)* and *Errata*. This *Companion Guide* does not convey information that in any way exceeds the requirements or usages of data expressed in the 5010 *Technical Reports 3(TR3s)* and *Errata*.

DISCLAIMER

This *Companion Guide* is considered a living document, and as such, the information provided herein will be subject to change after July 1, 2011 in the event that BCBSRI revises its policies or HIPAA Transactions and Code Sets law is updated or amended.

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1.0 Introduction

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that all health insurance payers in the United States comply with the electronic data interchange (EDI) standards for health care as established by the Secretary of Health and Human Services (HHS).

The *ANSI X12N 5010 Technical Reports 3 (TR3s)* and *Errata* adhere to the final HIPAA Transaction Regulations and have been established as the standards of compliance for electronic transactions. The 5010 *Technical Reports 3 (TR3s)* are available electronically at www.wpc-edi.com.

2.0 Scope

This *276/277 Health Care Claim Status Request and Response Companion Guide* is designed for use in conjunction with the *ANSI ASC X12N 276/277(005010X212) Health Care Claim Status Request and Response 5010 Technical Report 3 (TR3)* and *Errata*. The specifications contained within this *Companion Guide* define current functions and provide supplemental information specific to Blue Cross & Blue Shield of Rhode Island (BCBSRI). The information presented is for clarification and does not contradict any requirements in the *ANSI X12N 5010 Technical Reports 3 (TR3s)* and *Errata*.

The tables in **Sections 7.1** and **7.2** detail the additional information directly related to loops, segments, or data elements specific to BCBSRI transactions.

3.0 Trading Partners

A BCBSRI EDI trading partner is any business partner (provider, billing service, software vendor, employer group, financial institution, etc.) who transmits to or receives electronic data from BCBSRI.

In order to register as a BCBSRI Trading Partner and begin testing, it is necessary to complete the Trading Partner Registration (TPR) form. In addition, trading partners must print out and complete a copy of the Trading Partner Agreement (TPA) before partner testing can begin. Both documents are located on the BCBSRI Web site (https://www.bcbsri.com/BCBSRIWeb/providers/provider_network_system/companion_guides.jsp). Both original documents must be returned to:

Director, EDI & Electronic Information Exchange
ATTN: EDI Trading Partner Agreement & Registration
Blue Cross & Blue Shield of Rhode Island
500 Exchange Street
Providence, RI 02903

4.0 Working with BCBSRI

BCBSRI will work closely with its trading partners to establish effective communication protocols and to resolve any connectivity issues that may arise regarding the exchange of HIPAA-related electronic transactions.

4.1 Contact Information

The following contact information is provided to assist in the process of implementing 276/277 transactions or if you should encounter any 276/277 transaction production issues.

Call the Information Technology (IT) Service Desk, which supports BCBSRI at 401-751-1673 or 1-855-721-4211.

5.0 Payer Connectivity/Communications

5.1 Transmission Administrative Procedures

BCBSRI Operations personnel will establish logons, passwords and a HIPAA transaction mailbox for each trading partner approved for testing.

5.2 Retransmission Procedures

In the event should issues arise that will require trading partners to resubmit transactions, BCBSRI support personnel will confirm that it is necessary to retransmit the file(s) in question and will forward specific information to the trading partner.

5.3 Communications Protocols

The initial communications will utilize Internet browser technology (IP Protocol) to the secure BCBSRI Sterling File Gateway using HTTPS connectivity (with certificate) or Secure File Transfer Protocol (SFTP(using SSH keys)) for batch transmissions.. It is required that all trading partners have Internet access with an industry standard browser.

BCBSRI provides a Web-based application known as BCBSRI Sterling File Gateway that enables trading partners to:

- Submit (send) HIPAA transactions;
- Receive HIPAA transaction responses; and
- View history files (directory) of all batch transactions sent and received.

5.3.1 Passwords

Trading partner access will be verified by the logon and password whenever the BCBSRI Connect Enterprise system is accessed. Operation procedures will assure that logons and passwords are initiated, monitored and maintained in a secure manner.

5.3.2 Connecting to BCBSRI via EDI Gateway

Please go to www.bcbsri.com and select the **Providers** tab, **HIPAA** and **Documentation** to view or print *BCBSRI EDI Gateway*, a document that provides detailed instructions on how to connect to the BCBSRI Sterling File Gateway. If necessary, also reference the *BCBSRI Blue Gateway Document(s) for HTTPS or SFTP connectivity* for specific data communications set-up instructions.

6.0 Receiver/Sender Identifiers

6.1 ISA-IEA Control Structure/Envelopes

Sender ID interchange control segments: Use ID Qualifier code ZZ in ISA05. The Submitter ID provided by BCBSRI in the Trading Partner Agreement must be used in ISA06 and GS02. ID limited to 8 characters with a leading alpha prefix. Prefixes: **P = Production, T = Test**.

Receiver ID interchange control segments: Use ID Qualifier code ZZ in ISA07. Use the Receiver ID provided by BCBSRI in the Trading Partner Agreement in the ISA08 and GS03.

6.1.1 ISA Delimiters

BCBSRI systems will accept the valid delimiters listed below and request that the use of delimiters be restricted to the following:

- * = Element Delimiter
- :
- ~ = Terminator Delimiter
- ^, { = Repetition Delimiter (ISA11)

6.2 GS-GE Control Segments/Envelopes

Sender ID interchange control segments: Submitter = GS02.

Receiver ID interchange control segments: Receiver = GS03.

Sender IDs will be assigned.

GS Segments/Reference Codes:

		Batch format	Real-Time
Functional Identifier Code	GS01	HR	HR
Application's Sender Code	GS02	TXXXXXXX (test) PXXXXXXX (prod)	TRXXXXXXX (test) PRXXXXXXX (prod)
Application's Receivers Code	GS03	222774	R222774
Date	GS04	CCYYMMDD	CCYYMMDD
Time	GS05	HHMM	HHMM
Group Control Number	GS06	Required	Required
Responsible Agency Code	GS07	X	X
Version/Release/Industry Identifier Code	GS08	005010X212	005010X212

7.0 BCBSRI Specific Business Rules and Limitations

General: The claim status information is current as of the date and time of the creation of the 277 response. BCBSRI will process batch requests for claim status on a 24-hour turnaround with the exception of FEP and non-BCBSRI subscribers.

BCBSRI can give an electronic claim status response, if the dates of service are within the past two years. Claim status requests for dates of service greater than two years will be returned with a response of "claim not found." Contact Customer Service for this type of request at 401-274-4848 or 1-800-230-9050.

If no matching claim is found, an appropriate reject reason will be returned.

If multiple matches are found within the same date range of the claim status request, all will be returned. This may occur due to split claims.

Claim status will only be returned for responses if the submitter requesting the claims status is authorized by the servicing provider on the 276 request.

All line items (start and end service dates) must fall within the requested date period in order for

the claim to be selected for response.

If a claim is found that matches any of the specific matching criteria (Claim ID, Claim Submitted Charges), then that claim will be selected for response. If a specific matching criterion is not satisfied, then the claims that match the more general criteria (dates, servicing provider) will be selected for response.

Valid Submitters: BCBSRI will only accept transactions from valid trading partners whose submitter IDs are on file. It will reject transmissions if the submitter ID cannot be validated.

Enveloping Data: BCBSRI will accept single GS-GE groups within a single ISA-IEA of the transaction envelope for Real-Time transactions. The 276 Real-Time requests must be limited to one patient request per ISA-IEA, GS-GE and ST-SE envelope configuration.

BCBSRI will accept multiple GS-GE groups within a single ISA-IEA of the transaction envelope for Batch transactions. Each group must be of the same transaction type.

Note: Real-Time and Batch transactions cannot be mixed in the same ISA-IEA, GS-GE grouping.

Transaction Editing: All HIPAA 5010 Technical Report (TR3) data requirements must be met including the required data elements to support the HIPAA search rules. The claim status response will be returned with the appropriate STC segment valued or returned as rejected in a 999 Report.

7.1 276 Claim Status Request

The following are specific BCBSRI rules applicable to 276 Claim Status Request transactions:

Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
1.	2100A – INFORMATION SOURCE NAME Identification Code Qualifier	NM108	42	Value PI
	Information Source Primary Identifier	NM109	42	Use 00370 or 00870.
2.	2100B- INFORMATION RECEIVER NAME Identification Code Qualifier	NM108	46	Use value '46'
	Identification Code	NM109	46	Electronic Transmitter Identification Number (ETIN) assigned by BCBSRI, Use BCBSRI assigned Trading partner ID.
3.	2100C – SERVICE PROVIDER NAME Identification Code Qualifier	NM108	51	Value XX
	Information Source Primary Identifier	NM109	51	National Provider Identifier (NPI)
4.	2000D - Subscriber Demographic Information	DMG01	54	Date Time Format Qualifier- D8
		DMG02	55	Subscriber Date of Birth (CCYYMMDD)

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Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
5.	2100D – SUBSCRIBER NAME Subscriber Name	NM103	57	Subscriber last name
		NM104	57	Subscriber first name
	Subscriber Identifier qualifier	NM108	57	Use Value 'MI'
	Subscriber ID Code	NM109	57	Always required. Note: Use BCBSRI ID exactly as it appears on the member's ID card. If an alpha prefix is on the member's ID card, then include in request.
9.	2200D- CLAIM STATUS TRACKNIG NUMBER Trace Type Code	TRN01	58	Use Value '1'
	Reference Identification	TRN02	58	Transaction Trace Number from Sender Only send on Subscriber Level
10..	2100E – DEPENDENT NAME Entity Identifier Code	NM101	79	Required if Dependent is patient to act as a tie breaker for duplicate matches.
	Entity Type Qualifier	NM102	79	Value QC
11.	2200E- CLAIM STATUS TRACKNIG NUMBER	TRN01	81	Use Value '1'
		TRN02	81	Transaction Trace Number from Sender Use only on Dependent claims status requests

7.2 277 Claim Status Response

The following are specific BCBSRI rules applicable to 277 Claim Status Response transactions:

Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
1.	2100A – INFORMATION SOURCE NAME Identification Code Qualifier	NM108	112	Value PI.
	Information Source Primary Identifier	NM109	112	Value received on 276 (2100A/NM109) will be returned 00370 or 00870.
2.	2100B- INFORMATION RECEIVER NAME Identification Code Qualifier	NM108	119	Value 46
		NM109	119	Electronic Transmitter Identification Number (ETIN) assigned by BCBSRI, Use BCBSRI assigned Trading partner ID.
3.	2100C – SERVICE PROVIDER NAME Information Source Primary Identifier	NM108	128	Value XX
		NM109	128	NPI (National Provider Identification number)

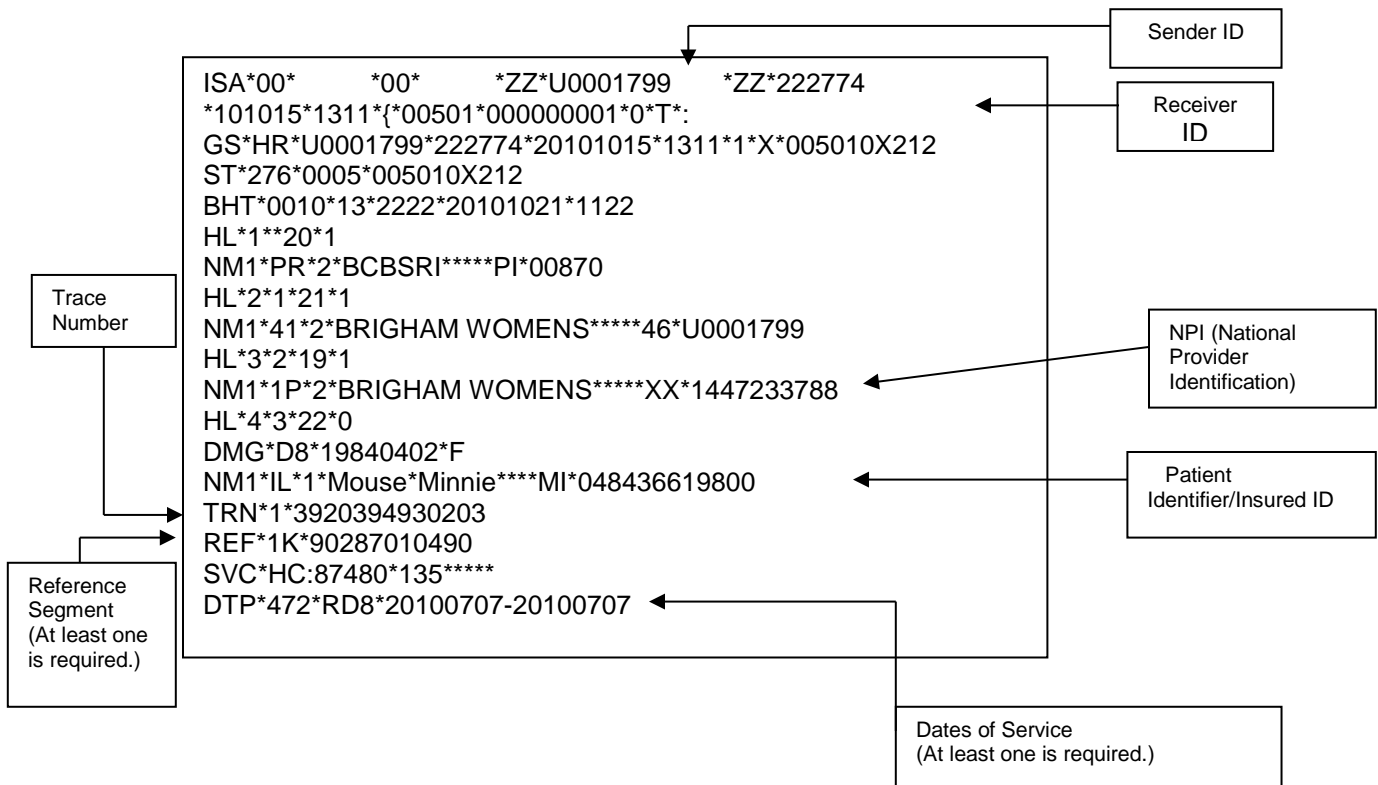
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Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
4.	2100D – SUBSCRIBER NAME Subscriber Primary Identifier	NM109	136	Always returned, as BCBSRI does not have individual member identifiers.
5.	2200D – SERVICE LINE STATUS INFORMATION Subscriber	STC	138	This segment is returned when the subscriber is the patient. Example: STC*F1: 65*19960501 (F1=Finalize payment, 65= Claim/line has been paid.)
6.	2100E – DEPENDENT NAME Patient First Name	NM104	176	Always returned when 276 request is for the dependent.
7.	2200E – SERVICE LINE STATUS INFORMATION Dependent	STC	178	This segment is returned when the dependent is the patient. Example: STC*A4:35*19960501 (A4=Acknowledgement/Claim not found, 35=Claim/encounter not found)

7.3 276 Claim Status Request (Example)

In the following explanation, the prefix "T" signifies "test," and the prefix "P" signifies "production."

As illustrated in the example below, the ISA Sender ID for "non-Real-Time," batch submissions is **T00XXXXX** or **P00XXXXX**. For 276 Real-Time submissions, the ISA Sender ID is **TR0XXXXX** or **PR0XXXXX**. One Real-Time request within one Transaction Set Header (ST) or one Group Segment (GS) will be accepted.



Non-BCBSRI member and FEP Claim status requests will be forwarded to another entity, and the submitter will not receive any indication the request was forwarded. If multiple requests are submitted within a ST/SE, the 277 responses from the other entities will be received individually.

7.4 277 Claim Status Response (Example)

```
ISA*00*      *00*      *ZZ*222774  *ZZ*U0001799  *101025*0807*{*00501*000452014*0*T*:
GS*HN*222774*U0001799*20101025*0807131*1*X*005010X212
ST*277*0001*005010X212
BHT*0010*08*3920394930203*20101025*1122*DG
HL*1**20*1
NM1*PR*2*BCBSRI*****PI*00870
PER*IC**TE*4012714848
HL*2*1*21*1
NM1*41*2*BRIGHAM WOMENS*****46*U0001799
HL*3*2*19*1
NM1*1P*2*BRIGHAM WOMENS*****XX*1992703938
HL*4*3*22*0
NM1*IL*1*LASTNAME*FIRSTNAME*L***MI*1153399178008
TRN*2*3920394930203
STC*F0:3*20101025**120*50.32*20100129
REF*1K*60029025210
REF*EJ*00654978USA89056
DTP*472*RD8*20100105-20100105
SVC*HC:99213*120*50.32****1
STC*F1:65*20101025
DTP*472*RD8*20100105-20100105
SE*20*0001
GE*1*1
IEA*1*000452014
```

8.0 Functional Acknowledgement/Reports

8.1 999 Implementation Acknowledgement Report

Upon successful receipt of a 276, BCBSRI will **not** respond with a 999 functional acknowledgement transaction to inform the submitter that the transaction has arrived.

8.2 999 Rejection and 999 Plain Language Reports

In the event that a transmission is rejected, a 999 Rejection and a 999 Plain Language Report detailing the reasons for rejection will be issued for the convenience of the trading partner.

BCBSRI meets all requirements of SNIP, (Strategic National Implementation Process), (HIPAA) Level 4 for all inbound transactions.

Multiple 999s could occur if a transaction set resulted in both Level 1, 2 and/or Level 4 errors.

The following is an example of a 999 Rejection:

```
ISA*00*      *00*      *ZZ*222774      *ZZ*U0001799
*101026*0221*{*00501*000000001*0*T*:
GS*FA*222774*U0001799*20101026*0221*1*X*005010X212
ST*999*0001*005010X212
AK1*HR*1*005010X212
AK2*276*0005*005010X212
IK3*SVC*14*2210D*8
IK4*7**I9
IK5*R*5
AK9*R*1*1*0
SE*8*0001
GE*1*1
IEA*1*000000001
```

The following is an example of 999 Plain Language Report:

```
BLUE CROSS AND BLUE SHIELD OF RHODE ISLAND
PAPERLESS TRANSMISSION ACKNOWLEDGEMENT
FUNCTIONAL ACKNOWLEDGEMENT REPORT
Sender ID Number: 610017
ISA CTRL#: 000000014

FUNCTIONAL GROUP INFORMATION
REPORT DATE - 20101014
REPORT TIME -17:16:31
SUBMITTER ID: U0098500
Report ID: 20100414171631-140001-XXX

TRANSACTION INFORMATION
FUNCTIONAL GROUP CONTROL #: XXX
NUMBER OF INCLUDED TRANSACTION SETS: 1
NUMBER OF RECEIVED TRANSACTION SETS: 1
NUMBER OF ACCEPTED TRANSACTION SETS: 0

TRANSACTION SET INFORMATION
TRANSACTION SET CONTROL #: 0001
TRANSACTION SET ACKNOWLEDGEMENT STATUS: REJECTED
TOTAL NUMBER OF ERRORS IN TRANSACTIONS SET: 1

DATA SEGMENT (S) IN ERROR
ERROR NUMBER: 1
DATA SEGMENT ERROR: SEGMENT HAS DATA ELEMENT ERRORS
ANSI LOOP ID:
POSITION WITHIN TRANSACTION SET: 2
BAD ELEMENT: CLM
DATA ELEMENT (S) IN ERROR
POSITION IN SEGMENT: 9
DATA ELEMENT ERROR CODE: INVALID CODE VALUE
BAD DATA ELEMENT: X
```

9.0 Certification and Testing

BCBSRI has partnered with Foresight to provide a 24/7 online tool for self-service transaction validation. To use this tool, download the Trading Partner Agreement (TPA) and Trading Partner Registration (TPR) form from the www.bcbsri.com Web site. Complete the form and return to the Director of EDI & Electronic Information Exchange (refer to page 1). Upon receipt of the signed TPA and TPR, BCBSRI will provide you with a User ID and password allowing you to access the Foresight HIPAA Web site.

10.0 Document Version Control

Version Number	Date	Modified By	Comments/Revision Details
0.1	October 21, 2010	D.Santos L.Merola M.Hegarty G.Ruggiero	Version incorporating all previous draft versions.
1.0	April 29, 2011	D.Santos M.Hegarty G.Ruggiero	Published version for 5010 format
1.1	July 7, 2011	D.Santos	Updated document for Level 4 (SNIP) editing Section 8.2
1.2	February 15, 2012	D.Santos	Updated document for connectivity options and general formatting
1.21	October 27, 2014	D. Santos	Service Desk/Help Desk toll free phone number update section 4.1