



ALAMEDA COUNTY PUBLIC HEALTH DEPARTMENT

SB 12 PHYSICIAN REIMBURSEMENT PROGRAM

EDI COMPANION GUIDE



ALAMEDA COUNTY PUBLIC HEALTH DEPARTMENT (ACPHD) SB 12 PHYSICIAN REIMBURSEMENT PROGRAM ELECTRONIC DATA INTERCHANGE (EDI) COMPANION GUIDE

PURPOSE

This Companion Guide provides Alameda County Public Health Department (ACPHD) trading partners with guidelines for submitting electronic transactions. The ACPHD Companion Guide to EDI Transactions documents any assumptions, conventions, or data issues that may be specific to ACPHD business processes when implementing the HIPAA ASC X12N 4010A1 Implementation Guides. As such, this Companion Guide is unique to ACPHD.

This document does NOT replace the HIPAA ASC X12N Implementation Guides for EDI transactions, nor does it attempt to amend any of the rules therein or impose any mandates on any trading partners of ACPHD.

This document provides information on ACPHD specific code handling and situation handling that is within the parameters of the HIPAA Administrative Simplification rules.

Readers of this Companion Guide should be acquainted with the HIPAA Implementation Guides, their structure and content. Information contained within the HIPAA Implementation Guides (IGs) has not been repeated here although the IGs have been referenced when necessary.

Connectivity information is also provided in this companion guide.

This Companion Guide provides supplemental information to the Trading Partner Guidelines provided by ACPHD to its trading partners. This Companion Guide provides information on ACPHD business rules or technical requirements regarding the implementation of HIPAA compliant EDI transactions and code sets.

Nothing contained in this Guide is intended to amend, revoke, contradict, or otherwise alter the terms of the Trading Partner Guidelines. If there is an inconsistency with the terms of this guide and the terms of the Trading Partner Guidelines, the terms of the Trading Partner Guidelines shall govern.

PROCESS OVERVIEW

- Exchange of electronic claims with ACPHD will happen through FTP site designated and supported by Alameda County.
- All exchanged files must be in HIPAA compliant format (ANSI X12N Version 4010A1).
- Files submitted by the last working Business day of the month will be adjudicated the following month.
- Functional acknowledgement (997) will be posted in the FTP site within three business days.
- 835 file will be posted in FTP site on or around the 15th of the month.
- Checks will be mailed on or around the 15th of the month.

FTP SITE DIRECTORY SETUP

- After establishing a FTP connection, the only directory that will be assessable is the one associated with the Trading Partner logon.
- See the User Guide for “Secure File Transfer Protocol Using a Web Browser” for details.



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FILE NAME CONVENTION

In order to communicate efficiently, the naming convention of every file will include three elements: 1) The FTP User Name assigned to the trading partner (included in the EDI Enrollment Approval and Instructions form); 2) The transaction number (837; 997 or 835) and 3) The date the file was created in CCYYMMDD format. (CALBER_997_20040317).

SECURITY

ACPHD uses a protected FTP site for the upload and download of electronic claims. Each submitter will be assigned a restricted FTP site that can only be accessed by individuals who enter a valid user name and password. EDI Submitters will receive the FTP site address information in the EDI Enrollment Approval and Instructions form. The user name and password will be communicated via telephone by ACPHD.

TESTING

The following information is critical to the electronic transaction submission process. Sections A - C apply to all providers/submitters desiring to submit transactions electronically.

A. Pre-test Requirements

- The **EDI Trading Partner and Submitter Application** is signed and delivered to ACPHD.
- An **EDI Enrollment Approval and Instructions** form is sent to the EDI Submitter. Passwords are communicated.
- The submitter ID will be used to send test and production transactions.

B. Test Requirements

Testing will be accomplished in two phases. The first phase is communication and compliance testing (Submit one 837P and receive one 997). The second phase is end-to-end testing (submit two 837P, receive two 997 and two 835). Testing must be completed successfully before production is allowed.

Communication and compliance testing:

- EDI Submitter will connect to the receiving system located at <ftp://alcoftp1.co.alameda.ca.us> via the Internet, using the login and password provided.
- An 837 Professional containing between 25 and 50 claims will be submitted.
- Submitter will notify ACPHD EDI Contact via e-mail when file is dropped.
- ACPHD will drop the correspondent 997 functional acknowledgement in the FTP site directory within 3 working days.
- The 997 will serve as the submitter's confirmation of the HIPAA format compliance testing. It is responsibility of the submitter to check 997 and, if the 997 indicates file was rejected, the submitter will make necessary corrections and re-submit file via FTP.

End-to-end testing:

- EDI Submitter will submit a second 837 Professional containing between 25 and 50 claims.
- Submitter will notify ACPHD EDI Contact via e-mail when file is dropped.



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- ACPHD will drop the correspondent 997 functional acknowledgement in the FTP site directory within 3 working days.
- A technical analyst will evaluate the test file, will import it into the ACPHD SB12 test application and process for adjudication. Within five days an 835 test transaction will be created and submitted to the FTP site for the vendor to pick up and evaluate within its own systems.
- Finally, a third 837 Professional transaction will be submitted. This file should contain similar number of claims as the number expected to be submitted monthly. The above steps for processing will be followed.

C. Successful testing

Testing for each transaction type must be completed to the satisfaction of ACPHD before production transaction files can be exchanged.

A minimum of three satisfactory 837P submissions is needed to start production of electronic claims.

The EDI Technical Analyst will notify by e-mail or fax the successful completion of testing. The notification will include the date that actual transactions will start being accepted in production.

ACTUAL TRANSACTION SUBMISSIONS

1. Exchange of electronic claims with ACPHD will happen through the assigned restricted FTP site that can only be accessed by individuals who enter a valid username and password.
2. All exchanged files must follow the naming conventions mentioned above.
3. All exchanged files must be in HIPAA compliant format (ANSI X12N Version 4010A1) and ACPHD guidelines. Follow the HIPAA X12N Implementation Guides for EDI transactions and the guidelines provided by ACPHD on 837, 835 and 997 transactions (below)
4. Functional acknowledgement (997) will be posted in the FTP site within three business days. It is responsibility of vendor to check 997 to determine if file was accepted. If 997 indicates file was rejected, vendor will make necessary corrections and re-send file via FTP.
5. Files submitted by the last working Business day of the month will be adjudicated the following month.
6. Files will be imported into the SB12 application and Quality Assurance procedures will be run to determine if claims fit the SB 12 Program Standards.
7. 835 file will be posted in FTP site on or around the 15th of the month.
8. Checks will be mailed on or around the 15th of the month.
9. Vendor will be notified if there are any problems that may result on delay of adjudication and/or payment.



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**ACPHD GUIDELINE FOR:
837 HEALTH CARE CLAIM - PROFESSIONAL**

The following separator or terminator values are required by ACPHD:

Data element Separator = “*” (asterisk)

Segment Terminator = “~” (tilde)

Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	ISA	Interchange Control Header The ISA is a fixed-length record with fixed-length elements. Deviating from the standard’s ISA element sizes will cause the interchange to be rejected.		
	ISA01	Authorization Information Qualifier	00	No Authorization Information Present.
	ISA03	Security Information Qualifier	00	No Security Information Present
	ISA05	Sender Interchange ID Qualifier	ZZ	Mutually Defined
	ISA06	Interchange Sender ID		The sender’s Submitter ID as documented in the EDI Enrollment Approval and Instructions form.
	ISA07	Interchange Receiver ID Qualifier	ZZ	
	ISA08	Interchange Receiver ID	ACPHDSB12	ACPHDSB12 is the value documented in the EDI Enrollment Approval and Instructions form.
	ISA13	Interchange Control Number		This unique Number must be identical to the Interchange Control Number in IEA02.
	ISA14	Acknowledgement Requested	0	TA1 acknowledgements will NOT be utilized by ACPHD.
	ISA16	Component Element Separator	:	
	GS	Functional Group Header		



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	GS01	Functional Identifier Code	HC	
	GS02	Application Sender ID		Enter the same value as ISA06. The sender’s Submitter ID as documented in the EDI Enrollment Approval and Instructions form.
	GS03	Application Receiver Code	ACPHDSB12	Enter the same value as ISA08. ACPHDSB12 is the value as documented in the EDI Enrollment Approval and Instructions form.
	GS08	Version/Release/Industry Identifier Code	004010X098 A1	004010X098A1 for transactions submitted in version 4010A1.
	ST	Transaction Set Header		
	ST02	Transaction Set Control Number		This unique Number must be identical to the Transaction Set Control Number in SE02.
	BHT	Beginning of Hierarchical Transaction		
	BHT02	Transaction Set Purpose Code	00	Original transmissions of claims. ACPHD processes original transactions only.
	BHT06	Claim or Encounter Identifier	CH	
1000A	Submitter Name			
	NM109	Submitter Identifier		Enter the same value as ISA06 and GS02. The sender’s Submitter ID as documented in the EDI Enrollment Approval and Instructions form.
1000B	Receiver Name			
	NM103	Receiver Name	ALAMEDA COUNTY - PHD	
	NM109	Identification Code	ACPHDSB12	Enter the same value as ISA06 and GS02. ACPHDSB12 is the value as documented in the EDI Enrollment Approval and Instructions form.



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
2000A	ACPHD requests only one (1) Billing Provider Number (2010AA_NM109) is submitted per transaction. This will help the processing of claims in the SB12 application and allow that each vendor receives its own Remittance Advice and Payment in a timely manner.			
2010AA	Billing Provider Name			
	NM103	Name Last or Organization Name		Billing provider name.
	NM109	Identification Code		National Provider Identifier (NPI). Use only one NPI per transaction submitted
2000B	For the purpose of SB12612 funds the <u>subscriber is always the patient</u>. The Subscriber loop contains the information used by SB12 612 Adjudication system in Loop ID-2010BA. After the SUBSCRIBER information, skip the PATIENT information requested in loop 2000C and proceed to Loop 2300.			
2000B	HL04	Hierarchical Child Code	0	0 – No subordinate HL segment in this Hierarchical structure. For ACPHD the subscriber is always the patient .
2010BA	Subscriber Name			
	NM103	Subscriber Last Name		This field is required for the SB12 adjudication application.
	NM104	Subscriber First Name		This field is required for the SB12 adjudication application.
	NM105	Subscriber Middle Name		
	NM108	Subscriber Primary Identifier	MI	
	NM109	Subscriber Primary Identifier		ACPHD will not assign this number. Any value submitted will be stored and returned on 835 Loop 2100 NM109.
	N401	Subscriber City Name		This field is required for the SB12 adjudication application.
	N402	Subscriber State Code		This field is required for the SB12 adjudication application.
	N403	Subscriber Postal Zip Code		



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	DMG02	Subscriber Birth Date		This field is required for the SB12 adjudication application.
	REF01	Reference Identifier Qualifier		
	REF02	Subscriber Supplemental Identifier		
2010BB	Payer Information			
	NM103	Payer Organization Name	ALAMEDA COUNTY - PHD	Enter the same value as 1000B NM103. This value is documented in the EDI Enrollment Approval and Instructions form
	NM108	Identification Code Qualifier	PI	
	NM109	Payer Primary Identifier	ACPHDSB12	This value is documented in the EDI Enrollment Approval and Instructions form
	N301	Payer Address Line 1	1000 Broadway 5fth floor	
	N401	Payer City Name	Oakland	
	N402	Payer State or Province	CA	
	N403	Payer Postal Code	94607	
2000C	Loop 2000C is not used for the purpose of SB12 612; only Loop 2000B is used. The subscriber is always the patient.			
2300	CLAIM INFORMATION			
	CLM01	Patient Account Number		Patient account number assigned by the provider. Returned in 835 Loop 2100 CLP01.
	CLM05-1	Facility Type Code		This field is required for the SB12 adjudication application.
2310B	Rendering Provider Name			



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	REF01	Rendering Provider Identification Qualifier	0B	State License Number (this must appear in either 2310B REF01 if it applies to the entire claim or 2420A REF01 if different by service line).
	REF02	Rendering Provider Secondary Identifier		This field is required for the SB12 adjudication application unless this information appears in 2420A REF02.
2310D	Service facility location			
	NM103	Laboratory or Facility Name		This field is required for the SB12 adjudication application.
2400	SERVICE LINE			
	SV101-1	Service ID Qualifier	HC	CPT codes are used in the SB12 adjudication application.
	SV101 -2	Procedure Code		This field is required for the SB12 adjudication application.
	SV101 -3	Procedure Modifier		ACPHD processes only the first Modifier.
	SV102	Line Item Charge Amount		This field is required for the SB12 adjudication application.
	SV104	Service Unit Count		
	DTP03	Service Date		This field is required for the SB12 adjudication application.
2420A	Rendering Provider Name			
	REF01	Reference Identification Qualifier	0B	State License Number (this must appear in either 2310B REF01 if it applies to the entire claim or 2420A REF01 if applies to service line).
	REF02	Rendering Provider Secondary Identifier		This field is required for the SB12 adjudication application if 2310 REF02 does not apply to the whole claim.
	GE	Functional Group Trailer		
	GE02	Group Control Number		This Unique Number must be identical to the Group Control Number in GS06.



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Sub-element Separator = ":" (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	SE	Transaction Set Trailer		
	SE02	Transaction Set Control Number		This Unique Number must be identical to the Transaction Set Control Number in ST02.
	IEA	Interchange Control Trailer		
	IEA02	Interchange Control Number		This Unique Number must be identical to the Interchange Control Number in ISA 13.



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**ACPHD GUIDELINE FOR:
835 HEALTH CARE CLAIM PAYMENT/ADVICE**

The following separator or terminator values are required by ACPHD:

Data element Separator = “*” (asterisk)

Segment Terminator = “~” (tilde)

Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	ISA	Interchange Control Header The ISA is a fixed-length record with fixed-length elements. Deviating from the standard’s ISA element sizes will cause the interchange to be rejected.		
	ISA01	Authorization Information Qualifier	00	No Authorization Information Present.
	ISA03	Security Information Qualifier	00	No Security Information Present
	ISA05	Sender Interchange ID Qualifier	ZZ	Mutually Defined
	ISA06	Interchange Sender ID	ACPHDSB12	ACPHDSB12 is the value as documented in the EDI Enrollment Approval and Instructions form.
	ISA07	Interchange Receiver ID Qualifier	ZZ	
	ISA08	Interchange Receiver ID		The receiver’s ID as documented in the EDI Enrollment Approval and Instructions form.
	ISA13	Interchange Control Number		This unique Number must be identical to the Interchange Control Number in IEA02.
	ISA14	Acknowledgement Requested	0	TA1 acknowledgements will NOT be utilized by ACPHD.
	ISA16	Component Element Separator	:	
	GS	Functional Group Header		
	GS01	Functional Identifier Code	HP	“HP” – Health Care Claim Payment/Advice (835)
	GS02	Application Sender ID	ACPHDSB12	The same value as ISA06 will be returned. ACPHDSB12 is the value as documented in the EDI Enrollment Approval and Instructions form.



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	GS03	Application Receiver Code		The same value as ISA08. The receiver’s ID as documented in the EDI Enrollment Approval and Instructions form.
	GS08	Version/Release/Industry Identifier Code	004010X091 A1	004010X091A1 for transactions submitted in version 4010A1.
	ST	Transaction Set Header		
	ST02	Transaction Set Control Number		This unique Number must be identical to the Transaction Set Control Number in SE02.
	BPR	Financial Information		
	BPR01	Transaction Handling Code	I	Remittance Information Only.
	BPR02	Monetary Amount		Total Actual Provider Payment Amount
	BPR03	Credit/Debit Flag Code	C	“C” in this element indicates a credit to the provider’s account.
	BPR04	Payment Method Code	CHK	Check.
	BPR16	Date		Check Issue Date
	TRN	Reassociation Trace Number		
	TRN01	Trace Type Code	1	Current Transaction Trace Number.
	TRN02	Reference Identification		Check Trace Number. The check number will be returned in this element.
	TRN03	Originating Company Identifier	1946000501	The tax Id number for Alameda County will be reported here.
	REF	Receiver Identification		
		Used when the receiver of the transaction is other than the payee (e.g., billing service)		
	REF01	Reference Identification Qualifier	EV	EV – Receiver Identification Number



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	REF02	Reference Identification		The information that was sent in the NM109 segment (Loop 1000A – Submitter Identification Code) of the 837 claim transaction will be returned here.
	DTM	Production Date		
	DTM01	Reference Identification Qualifier	405	Date Time Qualifier “405” – Production.
	DTM02	Date		Production Date expressed as CCYYMMDD.
1000A	LOOP 1000A – PAYER IDENTIFICATION			
	N1	Payer Identification		
	N101	Entity Identifier Code	PR	Payer.
	N102	Name	Alameda County - PHD	Payer Name. This value is documented in the EDI Enrollment Approval and Instructions form
	N3	Payer Address		
	N301	Address Information	1000 Broadway	
	N302	Address Information	Suite 500 – Room 5179	
	N4	Payer City, State, Zip Code		
	N401	City Name	Oakland	
	N402	State or Province Code	CA	
	N403	Postal Code	94607	
1000B	LOOP 1000B – PAYEE IDENTIFICATION			
	The following information is reported as it is reflected within the ACPHD SB12 Provider Enrollment form. Please contact ACPHD to report any changes.			
	N1	Payee Identification		
	N101	Entity Identifier Code	PE	Payee



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	N102	Name		Name of provider organization as documented in the EDI Enrollment Approval and Instructions form.
	N103	Identification Code Qualifier	FI	Federal Taxpayer’s Identification Number.
	N104	Identification Code		Identification Code for the provider organization as documented in the EDI Enrollment Approval and Instructions form.
	N3	Payee Address		
	N301	Address Information		Payee Address Line
	N4	Payee City, State, Zip Code		
	N401	City Name		Payee City name
	N402	State or Province Code		Payee State Code
	N403	Postal Code		Payee Country Code
2000	LOOP 2000 – HEADER NUMBER			
	LX	Header Number		
	LX01	Assigned Number		Number assigned for differentiation within a transaction set. ACPHD will assign this number.
2100	LOOP 2100 – CLAIM PAYMENT INFORMATION			
	CLP	Claim Payment information		
	CLP01	Claim Submitter’s Identifier		The information that was sent in the 837 Loop 2300 CLM01 will be returned here.
	CLP02	Claim Status Code	1 Or 4	“1” - Processed as Primary (i.e. Paid) “4” – Denied
	CLP03	Monetary Amount		Total Claim Charge Amount.
	CLP04	Monetary Amount		Claim Payment Amount.



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LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	CLP06	Claim Filing Indicator Code	OF	Other Federal Program.
	CLP07	Reference Indication		This is claim number created by the SB12 Adjudication application.
	CLP08	Facility Code Value		Facility Type Code.
	CAS	Claim Adjustment This segment will not be used. Adjustment reason codes and amounts will be provided in the Service Adjustment level in Loop 2110 CAS.		
	NM1	Patient name		
	NM101	Entity identifier Code	QC	QC – Patient
	NM102	Entity Type Qualifier	1	1 – Person
	NM103	Name Last or Organization Name		Patient Last name
	NM104	Name First		Patient First Name
	NM108	Identification Code Qualifier	MI	MI - Member Identification Number.
	NM109	Identification Code		The information that was sent in the NM109 segment (Loop 2010BA) of the 837 claim transaction will be returned here.
2110	LOOP 2110 – SERVICE PAYMENT INFORMATION			
	SVC	Service Payment information		
	SVC01	Composite Medical Procedure Identifier		
	SVC01-1	Product/Service ID Qualifier	HC	Product or Service ID Qualifier
	SVC01-2	Product/service ID		CPT Code
	SVC01-3	Procedure Modifier		Procedure modifier



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Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	SVC02	Monetary Amount		Line Item Charge Amount
	SVC03	Monetary Amount		Line Item Provider Payment Amount
	SVC05	Quantity		Units of Service Paid Count
	DTM	Service Date		
	DTM01	Date/Time Qualifier	472	Date Time Qualifier 472 - Service
	DTM02	Date		Date of Service
	CAS	Service Adjustment		
	CAS01	Claim Adjustment Group Code	CO	CO – Contractual Obligations
	CAS02	Claim Adjustment Reason Code		Adjustment Reason Code
	CAS03	Monetary Amount		Adjustment Amount
	GE	Functional Group Trailer		
	GE02	Group Control Number		This Unique Number must be identical to the Group Control Number in GS06.
	SE	Transaction Set Trailer		
	SE02	Transaction Set Control Number		This Unique Number must be identical to the Transaction Set Control Number in ST02.
	IEA	Interchange Control Trailer		
	IEA02	Interchange Control Number		This Unique Number must be identical to the Interchange Control Number in ISA 13.



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**ACPHD GUIDELINE FOR:
997 FUNCTIONAL ACKNOWLEDGEMENT**

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	ISA01	Authorization Information Qualifier	00	No Authorization Information Present.
	ISA03	Security Information Qualifier	00	No Security Information Present
	ISA05	Sender Interchange ID Qualifier	ZZ	Mutually Defined
	ISA06	Interchange Sender ID	ACPHDSB12	ACPHDSB12 is the value as documented in the EDI Enrollment Approval and Instructions form.
	ISA07	Interchange Receiver ID Qualifier	ZZ	
	ISA08	Interchange Receiver ID		The receiver’s ID as documented in the EDI Enrollment Approval and Instructions form.
	ISA13	Interchange Control Number		This unique Number must be identical to the Interchange Control Number in IEA02.
	ISA14	Acknowledgement Requested	0	Acknowledgements to the 997 will NOT be requested by ACPHD.
	ISA16	Component Element Separator	:	
	GS	Functional Group Header		
	GS01	Functional Identifier Code	FA	“FA” – Functional Acknowledgement (997)
	GS02	Application Sender ID	ACPHDSB12	The same value as ISA06 will be returned. ACPHDSB12 is the value as documented in the EDI Enrollment Approval and Instructions form.



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**ACPHD GUIDELINE FOR:
997 FUNCTIONAL ACKNOWLEDGEMENT**

The following separator or terminator values are required by ACPHD:

Data element Separator = “*” (asterisk)

Segment Terminator = “~” (tilde)

Sub-element Separator = “:” (colon)

LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	GS03	Application Receiver Code		The same value as ISA08. The receiver’s ID as documented in the EDI Enrollment Approval and Instructions form.
	GS08	Version/Release/Industry Identifier Code	004010X098 A1	004010X098A1 for transactions submitted in version 4010A1.
	ST	Transaction Set Header		
	ST02	Transaction Set Control Number		This unique Number must be identical to the Transaction Set Control Number in SE02.
	AK1	Functional Group Response Header		
	AK102	Group Control Number		This element contains the value from the GS06 being acknowledged (i.e., the Group Control Number).
	AK2	Transaction Set Response Header		
	AK201	Transaction Set Identifier Code	837	This element contains the value from the ST02 being acknowledged (i.e., the transaction Set Control Number)
	AK3	Data Segment Note		
	AK301	Segment Id Code		This element contains the identification of the data segment in error (e.g., “NM1” or “SV1”)
	AK302	Segment Position in Transaction Set		This element contains the location of the segment in error from the “ST” segment. The third segment after the “ST” would have a value of “4” (one for the “ST” plus three more)
	AK303	Loop Identifier Code		This element contains the number of the segment in error (e.g., “2300”)



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LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	AK304	Segment Syntax Error Code		This element contains the error noted for the segment. The codes and descriptions are: 1 – Unrecognized segment ID 2 – Unexpected segment 3 – Mandatory segment missing. 4 – Loop occurs over maximum times 5 – Segment exceeds maximum use 6 – Segment not in defined transaction set 7 – Segment not in proper sequence 8 – Segment has data element errors
	AK4	Data Element Note Used when there are errors to report in a data element or composite data structure		
	AK401 - 1	Element Position in Segment		This composite element contains the position in the segment of the element in error. If CLM03 was in error, the value would be “3.”
	AK401 - 2	Component Data Element Position in Composite		This composite element contains the position of the composite in error within its component structure.
	AK403	Data Element Syntax Error Code		This element contains the code indicating the error found. The values and descriptions are: 1 - Mandatory data element missing. 2 - Conditionally required data element missing. 3 - Too many data elements. 4 - Data element too short. 5 - Data element too long. 6 - Invalid character in data element. 7 - Invalid code value. 8 - Invalid date. 9 - Invalid time. 10 - Exclusion condition violated.
	AK404	Copy of Bad Data Element		This element contains a copy of the data in error. Not sent if bad data will affect usage/validity of this 997.



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LOOP	SEGMENT DATA ELEMENT	DESCRIPTION	VALUE	COMMENTS
	AK5	Transaction Set Response Trailer		
	AK501	Transaction Set Acknowledgment Code		This element contains the status of functional group. The values and descriptions used are: A – Accepted. R – Rejected with explanation.
	AK9	Functional Group Response Trailer		
	AK901	Functional Group Acknowledge Code		This element contains the status of functional group. The values and descriptions used are: A – Accepted. R – Rejected with explanation.
	AK902	Number of Transaction Sets included		This element contains the value from the original (file being acknowledged) GE01.
	GE	Functional Group Trailer		
	GE02	Group Control Number		This Unique Number must be identical to the Group Control Number in GS06.
	SE	Transaction Set Trailer		
	SE02	Transaction Set Control Number		This Unique Number must be identical to the Transaction Set Control Number in ST02.
	IEA	Interchange Control Trailer		
	IEA02	Interchange Control Number		This Unique Number must be identical to the Interchange Control Number in ISA 13.