

Electronic Data Interchange (EDI) Companion Guide

Instructions related to transactions based on Accredited Standards Committee (ASC) X12 implementation guides (IGs)

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Preface

This document is intended to provide information needed by data submitters to exchange Electronic Data Interchange (EDI) data with the AAH EDI system. This Data Submitter Companion Guide does not provide detailed data specifications. Detailed specifications are published separately by (ASC X12) the industry committees responsible for their creation and maintenance.

Background

Overview of HIPAA legislation

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 carries provisions for administrative simplification. This requires the secretary of the Department of Health and Human Services (HHS) to adopt standards to support the electronic exchange of administrative and financial healthcare transactions primarily between healthcare providers and plans. HIPAA directs the secretary to adopt standards for transactions to enable health information to be exchanged electronically and to adopt specifications for implementing each standard. HIPAA serves to:

- Create better access to health insurance
- Limit fraud and abuse
- Reduce administrative costs

Compliance according to HIPAA

The HIPAA regulations at 45 CFR 162.915 require that covered entities not enter into a trading partner agreement that would do any of the following:

- Change the definition, data condition or use of a data element or segment in a standard.
- Add any data elements or segments to the maximum defined data set.
- Use any code or data element(s) that is/are marked “not used” in the standard’s implementation specifications or is/are not in the standard’s implementation specification(s).
- Change the meaning or intent of the standard’s implementation specification(s).

Compliance according to ASC X12

ASC X12 requirements include specific restrictions that prohibit trading partners from:

- Modifying any defining, explanatory or clarifying content contained in the implementation guide.
- Modifying any requirement contained in the implementation guide.

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. This companion guide conforms to all the requirements of any associated ASC X12 implementation guide and is in conformance with ASC X12’s fair use and copyright statements.

Document purpose

The purpose of the AllyAlign Health (AAH) companion guide is to define (for its directly connected trading partners) the required values for submission of 837 ANSI X12 Health



Care Claim: Institutional / Professional transaction(s) to AllyAlign Health. AllyAlign Health’s companion guide(s) supplement the HIPAA implementation guides and should be used in conjunction with the published HIPAA implementation guides. This document is not intended to convey information that in any way exceeds the requirements or uses of data expressed in the HIPAA implementation guides. This supplement is solely for the purpose of clarification and facilitation of implementing 837 transaction(s) with AllyAlign Health.

Data Submitters Registration:

An EDI Data Submitter is any entity which needs to be identified uniquely by a Unique Identifier representing the originations transaction. The required data elements are provided in the table below for data exchange:

Loop & Reference	Valid Value	Notes/Comments
ISA-01	'00'	No Authorization Required
ISA-02		No Authorization Required
ISA-03	'00'	No Security Information Required
ISA-04		No Security Information Required.
ISA-05	'ZZ'	Mutually Defined
ISA-06	Federal Tax ID	Fed Tax ID or any Unique Identifier representing the Organization as explained above.
ISA-07	'ZZ'	Mutually Defined
ISA-08	'463356260'	
ISA-14	'0' or '1'	Depending requirements use 0 for no acknowledgement or 1 to receive acknowledgement.
ISA-15	'P' or 'T'	P for Production

		T for Test data
ISA-16	‘:’	Colon
GS-02	Federal Tax ID	Fed Tax ID or any unique Identifier used in ISA-06
GS-03	‘463356260’	
NM1-03	‘Claimsnet’	Loop-1000B (Receiver Name)
NM1-09	‘463356260’	Loop-1000B (Receiver Primary Identifier)
NM1-09	PayerID	SSI Claimsnet ID from Payor List: http://www.claimsnet.com/register/payerlist/payersearch.asp

The 999-response file is generally available within 1 hour of file submission.

Service and Support:

For providers that submit directly to SSI Claimsnet and require support, they can contact SSI Claimsnet directly at either HelpDesk_Dallas@ssigroup.com or call 800-356-0092.

For providers that do not submit directly to SSI Claimsnet and require support, please contact your EDI Clearinghouse for direct support.