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HEALTH PLAN

Sanford Health Plan

HIPAA Transaction Standard Companion Guide

**Refers to the Technical Report Type 3 (TR3)
Implementation Guides**

**Based on ASC X12 Version 005010X212A1
Health Care Claim Status
Request and Response
(276/277)**

Companion Guide Version Number: 1.0

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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 Sanford Health Plan (hereinafter "SHP"). 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 December 1, 2012 in the event that SHP 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 Sanford Health Plan (SHP). 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** details the additional information directly related to loops, segments, or data elements specific to SHP transactions.

3.0 Trading Partners

A SHP 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 SHP.

In order to register as a SHP 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 SHP Web site <http://www.sanfordhealthplan.org/forproviders/providerediresources/>

Both original documents must be returned to:

EDI Trading Partner Agreement & Registration
Sanford Health Plan
300 CHERAPA PI Ste 201
Sioux Falls, SD 57103

4.0 ADDITIONAL INFORMATION

- Submitters must have Internet (HTTPS) connection capability to submit a 276 request and receive 277 responses.
- The submitter must be associated with at least one provider in the Sanford Health Plan provider database.
- Only real-time 276 inquiries are supported.
- This system supports inquiries for registered providers only.

5.0 GETTING STARTED

5.1 WORKING WITH SANFORD HEALTH PLAN

Providers, billing services, and clearinghouses interested in submitting 276 inquiries and receiving 277 responses via Sanford Health Plan should contact Sanford Health Plan via the following numbers,

(877) 305-5463 or 605-328-6868

5.2 CAQH CORE Connectivity:

Council for Affordable Health Care (CAQH) is seeking to simplify healthcare administration. CAQH through CORE, (Committee on Operating Rules for Information Exchange) a voluntary organization comprised of providers, health plans, vendors and clearinghouses, has developed industry rules. These rules seek to increase interoperability between health plans and providers to reduce administrative costs. The rules are being released in phases. CORE has defined methods for connecting to a health plan, details of the connectivity methods can be found on the CAQH website <http://www.CAQH.org>.

5.3 TRADING PARTNER REGISTRATION

Trading partners must enroll with the Sanford Health Plan to use the HTTPS connectivity channel. Prospective trading partners must complete and submit a Sanford Health Plan Trading Partner EDI Agreement (Appendix A) and the Trading Partner Agreement found in this Companion guide in Appendix B.

5.4 CERTIFICATION AND TESTING OVERVIEW

Trading Partners are required to submit test transactions to ensure that their systems are ASC X12 TR3 compliant. Each Trading Partner may submit up to 10 test transactions during the testing phase. Testing is coordinated as part of the trading partner enrollment process.

6.0 TESTING WITH SANFORD HEALTH PLAN

Trading Partners must complete basic transaction submission testing with Sanford Health Plan. Tests must be performed for each X12 transaction type.

Trading Partner Registration is available to assist with new Trading Partner testing Monday – Friday, from 9:00 AM to 5:00 PM CST.

6.1 Transmission Administrative Procedures

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

6.2 Retransmission Procedures

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

Table 1: Testing Process

Testing Steps	Test Instructions
Test Plan	SHP and the trading partner agree to a predefined set of test data with expected results. In addition, a plan must be developed for a test to production transition that considers volume testing and transaction acceptance ratios.
Connectivity	SHP-supported connectivity protocols are listed in Section 8 of this Companion Guide.
Security	SHP will validate approved trading partners are submitting transactions allowed per Sanford Health Plan enrollment applications.
Data Integrity	Data integrity is determined by SHP's TR3 editor. Testing cannot progress until a trading partner's data receives no TR3 edit errors. SHP expects there may be an occasional situation in which a trading partner's TR3 edit interpretation differs from Sanford Health Plan's interpretation. SHP will work with the trading partner to resolve such differences on an individual basis.
Acknowledgment/ Response Transactions	Trading partners must demonstrate the ability to receive acknowledgment and response transactions via the HTTPS channels.
Results Analysis	SHP and the trading partner will review acknowledgment and response transactions for consistency with the predefined expected results.

6.3 Transition from Test to Production Status

When test results have satisfied the test plan and the Trading Partner Agreement has been executed, the trading partner's submission status is changed from test to production. At this time the trading partner can begin to send production transaction data.

7.0 Testing URLs for Real-time

SOAP: <https://editest.sanfordhealthplan.com/Interconnect-TAP/wcf/Epic.ManagedCare.Core/CORESoap.svc/NoModules>

MIME: <https://ediconnect.sanfordhealthplan.com/Interconnect/wcf/Epic.ManagedCare.Core/COREMime.svc/rest/RealTimeTransaction>

Production URLs for Real-time

SOAP: <https://ediconnect.sanfordhealthplan.com/Interconnect/wcf/Epic.ManagedCare.Core/CORESoap.svc/NoModules>

MIME: <https://ediconnect.sanfordhealthplan.com/Interconnect/wcf/Epic.ManagedCare.Core/COREMime.svc/rest/RealTimeTransaction>

8.0 Receiver/Sender Identifiers

8.1 ISA-IEA Control Structure/Envelopes

Sender ID interchanges control segments: Use ID Qualifier code ZZ in ISA05. The Submitter ID provided by SHP 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 interchanges control segments: Use ID Qualifier code ZZ in ISA07.

Use the Receiver ID provided by SHP in the Trading Partner Agreement in the ISA08 and GS03.

8.1.1 ISA Delimiters

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

***= Element Delimiter**

: = Composite Delimiter

~ = Terminator Delimiter

^, {= Repetition Delimiter (ISA11)

8.2 GS-GE Control Segments/Envelopes

Sender ID interchanges control segments:
 Submitter = GS02.
 Receiver ID interchanges control segments:
 Receiver = GS03.
 Sender IDs will be assigned.

GS Segments/Reference Codes:

		Batch format	Real-Time
Functional Identifier Code	GS01	HS	HS
Application's Sender Code	GS02	TXXXXXXX (test) PXXXXXXX (prod)	TRXXXXXX (test) PRXXXXX (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

9.0 SHP 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.

SHP can give an electronic claim status response, if the dates of service are within the past twelve months. Claim status requests for dates of service greater than twelve months will be returned with a response of "claim not found."

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: SHP 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: SHP 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.

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.

10.0 276 Claim Status Request

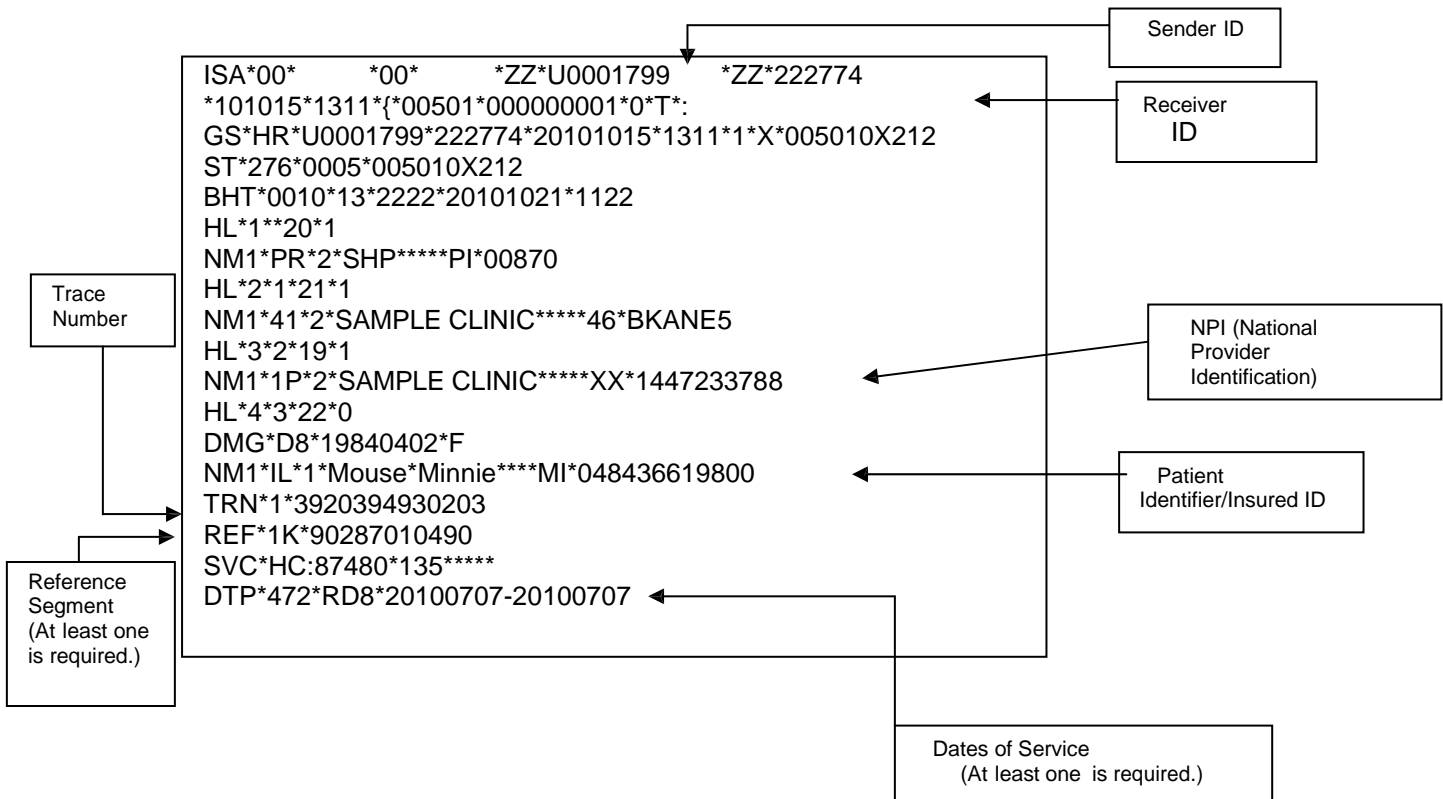
The following are specific SHP rules applicable to 276 Claim Status Request transactions:

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 SHP, Use SHP 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)
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 SHP 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

10.1 276 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.



11.0 277 Claim Status Response

The following are specific SHP 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 SHP, Use SHP assigned Trading partner ID.
3.	2100C – SERVICE PROVIDER NAME Information Source Primary Identifier	NM108	128	Value XX
		NM109	128	NPI (National Provider Identification number)
4.	2100D – SUBSCRIBER NAME Subscriber Primary Identifier	NM109	136	Always returned, as SHP 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)

11.1 277 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*SHP*****PI*00870
PER*IC**TE*4012714848
HL*2*1*21*1
NM1*41*2*SAMPLE CLINIC*****46*BKANE5
HL*3*2*19*1
NM1*1P*2*SAMPLE CLINIC*****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

```

12.0 Functional Acknowledgement/Reports

12.1 999 Implementation Acknowledgement Report

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

12.2 999 Rejection

In the event that a transmission is rejected, a 999 Rejection will be issued for the convenience of the trading partner.

Level 2 editing will be performed. Multiple 999s could occur if a transaction set resulted in both Level 1 and Level 2 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
```

DATA ELEMENT ERROR CODE: INVALID CODE VALUE

13.0 Document Version Control

Version Number	Date	Modified By	Comments/Revision Details
1.0	February 10, 2015	J. Feldman	Version incorporating all previous draft versions.
1.1	August 25, 2025	J. Feldman	Version incorporating all previous draft versions.
1.2	February 28, 2017	J. Feldman	Update