Allways Health Partners

HIPAA Transaction

Standard Companion Guide (270/271, 005010X279A1)

Refers to the Technical Report Type 3 based on X12 version 005010A1

Companion Guide Version Number 2.0

Contents

Preface

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Allways Health Partners. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

Preface

Introduction

The Health Insurance Portability and Accountability Act–Administration Simplification (HIPAA-AS) requires Allways Health Partners (ALLWAYS HEALTH PARTNERS) and all other covered entities to comply with the electronic data interchange standards for health care as established by the Secretary of Health and Human Services.

This guide is designed to help those responsible for testing and setting up electronic eligibility transactions. This guide documents and clarifies when situational data elements and segments must be used for reporting and identifies codes and data elements that do not apply. This guide supplements (but does not contradict) requirements in the ASC X12N 270/271 (version 005010X279A1) implementation.

The guide includes details regarding the technical requirements necessary to transmit EDI information with ALLWAYS HEALTH PARTNERS, and general information on setting up the trading partner relationship.

It also details data requirements specific to ALLWAYS HEALTH PARTNERS for processing the 270/271.

As well as Tables and Appendices that show the segments and elements affected, code listings and examples of the X12 data for the 270/271.

Technical Requirements

ALLWAYS HEALTH PARTNERS supports the 270/271 ASC X12N version 005010X279A1 for benefit inquiries and responses in a real time or batch transaction.

Real Time 270s have a single ST/SE loop, one information source, one information receiver, one subscriber loop, and one dependent loop when needed. For trading partners using the NEHEN portal, (see Section 3 CONNECTING AND COMMUNICATING on page 4), the last character of the GS02 element is set to "R" on the 270. Typical turnaround time is under 10 seconds during which the portal connection is held open.

Batch 270s can take up to 24 hours to process a response. A single 271 is created for each 270 submitted. Up to 99 inquiries can be included per ST/SE loop. For trading partners using the NEHEN portal, (see Section 3 CONNECTING AND COMMUNICATING on page 4), the last character of the GS02 is set to "B" on the 270.

ALLWAYS HEALTH PARTNERS also accepts and processes very large benefit inquiry batch files. A maximum of 99,000 inquiries per file can be submitted. ALLWAYS HEALTH PARTNERS's response to all inquiries in the incoming 270 file is returned in one 271 response file, usually within 24 hours of a batch inquiry file submission. If a trading partner plans to submit batch files in excess of 10,000 inquiries, the schedule of submission must be determined with ALLWAYS HEALTH PARTNERS.

ALLWAYS HEALTH PARTNERS has specific requirements for very large batch inquiries. Each inquiry file may contain one, and only one, Interchange Control Header and Trailer (ISA/ISE segments) and one, and only one, functional group header and trailer (GS/GE segments). The one, and only one, functional group may contain a maximum of 1,000 ST/SE segments. Each transaction set may contain a maximum of 99 inquiries per ST/SE segments and a maximum of one file per day may be submitted.

Getting Started

Trading Partner Set-Up and Trading Partner Agreements

Two documents important to the setup of new EDI partnerships are detailed below:

EDI Trade Partner Agreement – Defines requirements for the secure use, transmission, and storage of protected information exchanged between the payer and trading partners.

EDI Connectivity Questionnaire Form – A survey of Trading Partner information, identifiers, desired EDI transactions, and requested e-channels. This information is used to set up new Trading Partners for EDI or to edit existing information.

Testing

Creating a Test File

Trading partners must create multiple 270s for testing purposes as part of their test plan. It is recommended that the data content and codes used mirror what is used in production. For a batch file, a minimum of 25 inquiries must be included in each test transaction.

Test Plan

ALLWAYS HEALTH PARTNERS requires two successful and unique submissions before you are authorized to move to our production environment. Successful tests are defined as passing validation through our BizTalk complier and completing a round-trip submission and response through the chosen transmission medium.

ALLWAYS HEALTH PARTNERS provides support for testing Monday -Friday 9:00 AM to 4:00 PM EST.

Connecting and Communicating

Transmission Methods

ALLWAYS HEALTH PARTNERS provided multiple options for submission of production 270 transactions. These options are provided at no cost per transaction.

OPTION (1) - FTP over SSL

OPTION (2) - FTP with PGP Encrypted Files

OPTION (3) New England Healthcare Exchange Network (NEHEN) – http://www.nehen.org

OPTION (4) NEHENNet - http://www.nehennet.org A consortium of the six largest payer organizations in Massachusetts that has created an affordable, Web-based, single gateway for essential electronic transactions.

OPTION (5) CAQH SOAP - ALLWAYS HEALTH PARTNERS supports the use of HTTP SOAP + WSDL envelope standards as identified in CAQH CORE Phase II Connectivity standards (http://www.caqh.org/pdf/270.pdf). The following is a list of technical standards and versions for the HTTP MIME Multipart envelope and eligibility payload:

HTTP Version 1.1

CSOAP Version 1.2

SSL Version 3

Health Care Eligibility Benefit Inquiry and Response Version 005010X279A1
Batch Submissions & Response Pickups use MTOM to handle the file payloads.
Provider needs an ALLWAYS HEALTH PARTNERS-issue X12 client certificate to connect to ALLWAYS HEALTH PARTNERS over HTTPS

CAQH MIME ALLWAYS HEALTH PARTNERS supports the use of HTTP MIME Multipart existing envelope standards and has implemented the HTTP MIME Multipart envelope standards as identified in CAQH CORE Phase II Connectivity standards (http://www.caqh.org/pdf/270.pdf). The following is a list of technical standards and versions for the HTTP MIME Multipart envelope and eligibility payload:

HTTP Version 1.1

SSL Version 3.0

MIME Version 1.0

Health Care Eligibility Benefit Inquiry and Response Version 005010X092A1

ALLWAYS HEALTH PARTNERS provides certificates to use in place of a user ID and password for SOAP and CMIME upon completion of enrollment process.

Message specifications for CSOAP and CMIME Envelope Element	Specification
Payload Type	005010X279A1
Processing Mode	Real-time or Batch
SenderID	ISA06 value as assigned by ALLWAYS HEALTH PARTNERS
ReceiverID	ALLWAYSHEALTH
CORERuleVersion	2.2.0
Certificate Version	X509

Contact Information

EDI Customer Service
Vincent Chiachio
(857) 282-3004

EDI Technical Assistance
Vincent Chiachio
(857) 282-3004

Provider Service
1-855-444-4647

Applicable Web Sites and E-mail
WWW.ALLWAYSHEALTH.ORG
PEOVIDERSERVICE@ALLWAYSHEALTH.ORG
HELPDESK@ALLWAYSHEALTH.ORG

IF ALLWAYS HEALTH PARTNERS SYSTEMS ARE UNAVAILABLE, YOU CAN GO TO THE FOLLOWING WEB SITE FOR INFORMATION……………… HTTPS://ALLWAYSHEALTH .ORG/CORESTATUS.ASPX

Control Segments/Envelopes

Control Segments/Envelopes are used to provide information about the trading partner and the types of information contained within the transmission. The Control Segments for most of the health care transactions are comprises of an Envelope (ISA-IEA); a Functional Group Header (GS/GE); and a Transaction Set (ST/SE).

ISA-IEA

Information in the Interchange Control Header must represent the information necessary to identify trading partners. Prior to implementing with ALLWAYS HEALTH PARTNERS, a trading partner will obtain Trading Partner Identification Numbers.

ISA	ELEMENT NAME	NOTES
ISA01	Auth Information Qualifier	00 No auth info present 03 Additional data information
ISA03	Security Info Qualifier	00 No info present 01 Password
ISA05	Interchange ID Qualifier	ZZ Mutually Defined
ISA06	Interchange Sender ID	ALLWAYS HEALTH PARTNERS WILL SUPPLE THIS DURING TRADING
ISA07	Interchange ID Qualifier	ZZ Mutually Defined
ISA08	Interchange Receiver ID	ALLWAYS HEALTH PARTNERS WILL SUPPLE THIS DURING TRADING
ISA09	Interchange Date	YYMMDD
ISA10	Interchange Time	HHMM
ISA11	Interchange Control Stds. Identifier	^
ISA12	Interchange Control Version No.	00501
ISA13	Interchange Control No.	
ISA14	Acknowledgment Requested	0 No acknowledgement requested
ISA15	Usage Indicator	P Production data
ISA16	Component Element Separator	:

GS-GE

GS02	Application Sender's Code	SAME AS ISA06
GS03	Application Receiver's Code	SAME AS ISA08
GS04	Date	Format CCYYMMDD
GS05	Time	Format HHMM (**recommended**), HHMMSS, HHMMSSD, HHMMSSDD
GS06	Group Control No.	Numeric
GS07	Responsible Agency Code	X Accredited Standards Committee X 12
GS08	Version/Release/Industry ID Code	005010X279A1

ALLWAYS HEALTH PARTNERS Business Rules and Limitations

If the submitter is using the Member's Last Name as a search parameter, ALLWAYS HEALTH PARTNERS will accept both normalized (no special characters) or non-normalized (including special character) name submissions and will search our member files for either configuration.

If the submitter request a Service Type 1- Medical Care, 35 -Dental Care, AL-Vision, or MH- Mental Health, ALLWAYS HEALTH PARTNERS will NOT return Patient Financial Obligations.

If a Service Type 30- Health Plan Benefit Coverage is submitted, ALLWAYS HEALTH PARTNERS will return coverage and patient financial obligations for the following benefit types, 33- Chiropractic, 48 – Hospital Inpatient, 50- Hospital Outpatient, 86_Emergency Services, 98- Professional Office Visit, and UC- Urgent Care

If the benefit is for Telemedicine, the EB03 is BY and the EB05 is TELEMEDICINE.

If the benefit configuration is too complicated to respond with a definitive answer (i.e. service covered under one co-pay for a particular procedure but under another co-pay for a different procedure). ALLWAYS HEALTH PARTNERS will respond with a base patient financial obligation and place a U Unknown in the EB12

Acknowledgements and Reports

The file acknowledgement for a 270 Eligibility Inquiry Transaction is the 271 Eligibility Response Transaction. A 999 will not be returned at this time.

Trading Partner Agreements

Please go the following link for the most up to date version of ALLWAYS HEALTH PARTNERS's Trading Partner Agreement

Trading Partner Agreement

270/271 Specific Information for ALLWAYS HEALTH PARTNERS

All ALLWAYS HEALTH PARTNERS Member's have a unique ID number and are considered subscribers for HIPAA transaction purposes. If you submit a 270 request using the ALLWAYS HEALTH PARTNERS ID number the information returned will be for the holder of that ID number which will be the name and demographic information of the patient.

On any 270 request that includes both ALLWAYS HEALTH PARTNERS Member ID and Name, ALLWAYS HEALTH PARTNERS will default to the Member ID Number as the default search parameter. If no match is found, ALLWAYS HEALTH PARTNERS will not use the name field as a secondary search parameter.

Appendices

Business Scenarios
Chiropractic benefits will display the number of visits at the base level. If you are checking eligibility on an existing patient who has been having regular visits, please contact ALLWAYS HEALTH PARTNERS's Provider Relations Department as the member may have benefits beyond the base number of visits returned.

ALLWAYS HEALTH PARTNERS will return these Service Benefits when the following Service Types are requested.

Service Type Code	Service Type Definition	ALLWAYS HEALTH PARTNERS Business Rule
EQ	Service Type Requested	
30	Health Benefit Plan Coverage	
EB	Service Type Returned	
1	Medical Care	Active Status ONLY (no benefit returned)
3	Consultation	Benefit returned
33	Chiropractic	Benefit returned
35	Dental Care	Active Status ONLY (no benefit returned)
47	Hospital	Active Status ONLY (no benefit returned)
48	Hospital - Inpatient	Benefit returned
50	Hospital - Outpatient	Benefit returned
53	Hospital - Ambulatory Surgical	Benefit returned
60	General Benefit	Early Intervention under 3 YRs of age
86	Emergency Services	Benefit returned
88	Pharmacy	Active Status ONLY (no benefit returned)
98	Professional (Physician) Visit - Office	Active Status ONLY (no benefit returned)
BY	Physician Visit - Office: Sick	Benefit returned
BZ	Physician Visit - Office: Well	Benefit returned
AL	Vision (Optometry)	Active Status ONLY (no benefit returned)
MH	Mental Health	Active Status ONLY (no benefit returned)
UC	Urgent Care	Benefit returned

BY	Physician Visit - Office: Sick	USED FOR TELEMEDICINE

EQ	Service Type Requested	
1	Medical Care	
EB	**Service Type Returned**	
1	Medical Care	Active Status ONLY (no benefit returned)
2	Surgical	Benefit returned
3	Consultation	Benefit returned
42	Home Health Care	Benefit returned
45	Hospice	Benefit returned
54	Long Term Care	Benefit returned
69	Maternity	Benefit returned
73	Diagnostic Medical	Benefit returned
76	Dialysis	Benefit returned
83	Infertility	Benefit returned
AG	Skilled Nursing Care	Benefit returned
BT	Gynecological	Benefit returned
BU	Obstetrical	Benefit returned
BV	Obstetrical/Gynecological	Benefit returned
DM	Durable Medical Equipment	Benefit returned

EQ	Service Type Requested	
2	Surgical	
EB	**Service Type Returned**	
2	Surgical	Benefit returned
7	Anesthesia	Benefit returned
8	Surgical Assistance Assistant Surgeon	Benefit returned
20	Second Surgical Opinion	Benefit returned

EQ	Service Type Requested	
73	Diagnostic Medical	
EB	**Service Type Returned**	
73	Diagnostic Medical	Benefit returned
4	Diagnostic X-Ray	Benefit returned
5	Diagnostic Lab	Benefit returned
62	MRI/CAT Scan	Benefit returned

EQ	Service Type Requested	
A9	Rehabilitation	
EB	Service Type Returned	
A9	Rehabilitation	Active Status ONLY (no benefit returned)
6	Radiation Therapy	Benefit returned
12	Durable Medical Equipment Purchase	Benefit returned
18	Durable Medical Equipment Rental	Benefit returned
54	Long Term Care	Benefit returned
62	MRI/CAT Scan	Benefit returned
AA	Rehabilitation - Room and Board	Benefit returned
AB	Rehabilitation - Inpatient	Benefit returned
AD	Occupational Therapy	Benefit returned
AF	Speech Therapy	Benefit returned
AG	Skilled Nursing Care	Benefit returned
BG	Cardiac Rehabilitation	Benefit returned
PT	Physical Therapy	Benefit returned

EQ	Service Type Requested	
35	Dental Care	
EB	Service Type Returned	
35	Dental Care	Active Status ONLY (no benefit returned)
23	Diagnostic Dental	Unable To Provide
24	Periodontics	Unable To Provide
25	Restorative	Unable To Provide
26	Endodontics	Unable To Provide
27	Maxillofacial Prosthetics	Unable To Provide
28	Adjunctive Dental Services	Unable To Provide
36	Dental Crowns	Unable To Provide
37	Dental Accident	Benefit returned
38	Orthodontics	Unable To Provide
39	Prosthodontics	Unable To Provide
40	Oral Surgery	Benefit returned
41	Routine (Preventive) Dental	Unable To Provide

EQ	Service Type Requested	
47	Hospital	
EB	Service Type Returned	
47	Hospital	Active Status ONLY (no benefit returned)
48	Hospital - Inpatient	Benefit returned
49	Hospital - Room and Board	Benefit returned
50	Hospital - Outpatient	Benefit returned
51	Hospital - Emergency Accident	Benefit returned
52	Hospital - Emergency Medical	Benefit returned
53	Hospital - Ambulatory Surgical	Benefit returned

EQ	Service Type Requested	
88	Pharmacy	
EB	Service Type Returned	
88	Pharmacy	Active Status ONLY (no benefit returned)
92	Generic Prescription Drug	Benefit returned
B2	Brand Name Prescription Drug - Formulary	Benefit returned
B3	Brand Name Prescription Drug - Non-Formulary	Benefit returned
BW	Mail Order Prescription Drug: Brand Name	Benefit returned
BX	Mail Order Prescription Drug: Generic	Benefit returned

EQ	Service Type Requested	
98	Professional (Physician) Visit - Office	
EB	Service Type Returned	
98	Professional (Physician) Visit - Office	Active Status ONLY (no benefit returned)
3	Consult	Benefit returned
81	Routine Physical	Benefit returned
99	Professional Visits Hospital	Benefit returned
A0	Professional (Physician) Visit -Outpatient	Benefit returned
A3	Professional (Physician) Visit -Home	Benefit returned
BY	Physician Visit - Office: Sick	Benefit returned
BZ	Physician Visit - Office: Well	Benefit returned

EQ	Service Type Requested	
BV	Obstetrical/Gynecological	
EB	Service Type Returned	
65	Newborn Care	Benefit returned
69	Maternity	Benefit returned
BT	Gynecological	Benefit returned
BU	Obstetrical	Benefit returned
BV	Obstetrical/Gynecological	Benefit returned

EQ	Service Type Requested	
68	Well Baby Care	
EB	Service Type Returned	
68	Well Baby Care	Benefit returned
80	Immunizations	Benefit returned
BH	Pediatric	Benefit returned Early Intervention benefits are included

EQ	Service Type Requested	
MH	Mental Health	
EB	Service Type Returned	
MH	Mental Health	Active Status ONLY (no benefit returned)
67	Smoking Cessation	Benefit returned
A4	Psychiatric	Benefit returned
A5	Psychiatric - Room and Board	Benefit returned
A6	Psychotherapy	Benefit returned
A7	Psychiatric - Inpatient	Benefit returned
A8	Psychiatric - Outpatient	Benefit returned
AI	Substance Abuse	Benefit returned
AJ	Alcoholism	Benefit returned
AK	Drug Addiction	Benefit returned

ALLWAYS HEALTH PARTNERS will support the following Service Types

Service Type Code	Service Type Definition	ALLWAYS HEALTH PARTNERS Business Rule
1	Medical Care	Active Status ONLY (no benefit returned)
2	Surgical	Benefit returned
3	Consultation	Benefit returned
4	Diagnostic X-Ray	Benefit returned
5	Diagnostic Lab	Benefit returned
6	Radiation Therapy	Benefit returned
7	Anesthesia	Benefit returned
8	Surgical Assistance Assistant Surgeon	Benefit returned
12	Durable Medical Equipment Purchase	Benefit returned
18	Durable Medical Equipment Rental	Benefit returned
20	Second Surgical Opinion	Benefit returned
23	Diagnostic Dental	Unable To Provide
24	Periodontics	Unable To Provide
25	Restorative	Unable To Provide
26	Endodontics	Unable To Provide
27	Maxillofacial Prosthetics	Unable To Provide
28	Adjunctive Dental Services	Unable To Provide
33	Chiropractic	Benefit returned
35	Dental Care	Active Status ONLY (no benefit returned)
36	Dental Crowns	Unable To Provide
37	Dental Accident	Benefit returned
38	Orthodontics	Unable To Provide
39	Prosthodontics	Unable To Provide
40	Oral Surgery	Benefit returned
41	Routine (Preventive) Dental	Unable To Provide
42	Home Health Care	Benefit returned
45	Hospice	Benefit returned
47	Hospital	Active Status ONLY (no benefit returned)
48	Hospital - Inpatient	Benefit returned
49	Hospital - Room and Board	Benefit returned

50	Hospital - Outpatient	Benefit returned
51	Hospital - Emergency Accident	Benefit returned
52	Hospital - Emergency Medical	Benefit returned
53	Hospital - Ambulatory Surgical	Benefit returned
54	Long Term Care	Benefit returned
62	MRI/CAT Scan	Benefit returned
65	Newborn Care	Benefit returned
67	Smoking Cessation	Benefit returned
68	Well Baby Care	Benefit returned
69	Maternity	Benefit returned
73	Diagnostic Medical	Benefit returned
76	Dialysis	Benefit returned
80	Immunizations	Benefit returned
81	Routine Physical	Benefit returned
83	Infertility	Benefit returned
86	Emergency Services	Benefit returned
88	Pharmacy	Active Status ONLY (no benefit returned)
92	Generic Prescription Drug	Benefit returned
98	Professional (Physician) Visit - Office	Benefit returned
99	Professional Visits Hospital	Benefit returned
A0	Professional (Physician) Visit -Outpatient	Benefit returned
A3	Professional (Physician) Visit -Home	Benefit returned
A4	Psychiatric	Benefit returned
A5	Psychiatric - Room and Board	Benefit returned
A6	Psychotherapy	Benefit returned
A7	Psychiatric - Inpatient	Benefit returned
A8	Psychiatric - Outpatient	Benefit returned
A9	Rehabilitation	Active Status ONLY (no benefit returned)
AA	Rehabilitation - Room and Board	Benefit returned
AB	Rehabilitation - Inpatient	Benefit returned
AD	Occupational Therapy	Benefit returned
AF	Speech Therapy	Benefit returned
AG	Skilled Nursing Care	Benefit returned
AI	Substance Abuse	Benefit returned
AJ	Alcoholism	Benefit returned
AK	Drug Addiction	Benefit returned
AL	Vision (Optometry)	Active Status ONLY (no benefit returned)
B2	Brand Name Prescription Drug - Formulary	Benefit returned
B3	Brand Name Prescription Drug - Non-Formulary	Benefit returned

BG	Cardiac Rehabilitation	Benefit returned
BH	Pediatric	Benefit returned Early Intervention benefits are included
BT	Gynecological	Benefit returned
BU	Obstetrical	Benefit returned
BV	Obstetrical/Gynecological	Benefit returned
BW	Mail Order Prescription Drug: Brand Name	Benefit returned
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DM	Durable Medical Equipment	Benefit returned
MH	Mental Health	Active Status ONLY (no benefit returned)
PT	Physical Therapy	Benefit returned
UC	Urgent Care	Benefit returned