Administrative Services of Kansas (ASK)

HIPAA 837 005010X222A1
Standard Companion Guide

Refers to the Implementation Guides
Based on ASC X12 version 005010
Disclosure Statement

This document is provided “as is” without any express or implied warranty. Note that the copyright on the underlying ASC X12 Standards is held by DISA on behalf of ASC X12. 2010 © Companion Guide copyright by Administrative Services of Kansas (ASK) dba Blue Cross and Blue Shield of Kansas (BCBSKS). All rights reserved. This document may be copied.
Preface

This Companion Guide to the v5010 ASC X12N Technical Report Type 3 (TR3) and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with ASK. Transmissions based on this companion guide, used in tandem with v5010 ASC X12N TR3, 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 TR3 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 TR3's.
# Table of Contents

1 **INTRODUCTION** .................................................................................................................. 5
   Scope ................................................................................................................................. 5
   Overview .......................................................................................................................... 5
   References ....................................................................................................................... 5
   Additional Information ................................................................................................. 5

2 **GETTING STARTED** ............................................................................................................. 5
   Working with Administrative Services of Kansas (ASK) .................................................. 5
   Trading Partner Registration ............................................................................................ 5
   Certification and Testing Overview ................................................................................ 5

3 **TESTING WITH THE PAYER** ............................................................................................. 5

4 **CONNECTIVITY WITH THE PAYER/COMMUNICATIONS** .................................................. 5
   Process flows .................................................................................................................. 5
   Transmission Administrative Procedures ....................................................................... 5
   Re-Transmission Procedure ............................................................................................ 5
   Communication protocol specifications ......................................................................... 6
   Passwords ......................................................................................................................... 6

5 **CONTACT INFORMATION** ................................................................................................... 6
   EDI Customer Service ..................................................................................................... 6
   EDI Technical Assistance ................................................................................................. 6
   Provider Service Number ................................................................................................. 6
   Applicable websites/e-mail .............................................................................................. 6

6 **CONTROL SEGMENTS/ENVELOPES** .................................................................................. 6
   ISA – IEA.......................................................................................................................... 7
   GS - GE............................................................................................................................. 7
   ST – SE............................................................................................................................... 7

7 **PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS** .................................................. 6

8 **ACKNOWLEDGEMENTS AND/OR REPORTS** .................................................................... 7
   Report Inventory .............................................................................................................. 7

9 **TRADING PARTNER** .......................................................................................................... 7

10 **TRANSACTION SPECIFIC INFORMATION** .................................................................... 7

APPENDICES ............................................................................................................................ 9
   Change Summary ............................................................................................................. 9
1 INTRODUCTION
This section describes how ASC X12N Technical Report Type 3 (TR3) adopted under HIPAA will be detailed with the use of a table.

SCOPE
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 documents. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guides and is in conformance with ASC X12’s Fair Use and Copyright statements.

Overview
This Companion Guide to the v5010 ASC X12N Technical Report Type 3 (TR3) and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with ASK. Transmissions based on this companion guide, used in tandem with v5010 ASC X12N TR3, 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 TR3 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 TR3’s.

References

Additional Information

2 GETTING STARTED

Working with Administrative Services of Kansas

Batch Trading Partner Enrollment

Batch Certification and Testing Overview

3 TESTING WITH THE PAYER


4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

Batch Transmission Administrative Procedures Interactive Tour –
https://clyde.bcbsks.com/ask5010/jsps/ask_tp_login.jsp

Batch Re-Transmission Administrative Procedures Interactive Tour –
https://clyde.bcbsks.com/ask5010/jsps/ask_tp_login.jsp
Batch Communications Protocol Specifications Telecommunications Manual - 
http://www.ask-edi.com/HIPAA/user_documentation/Telecommunications.htm

Batch Passwords Telecommunications Manual - 
http://www.ask-edi.com/HIPAA/user_documentation/Telecommunications.htm

5 CONTACT INFORMATION
EDI Technical Assistance - http://www.ask-edi.com/contact_us.htm

Provider Service Number –
Blue Cross and Blue Shield of Kansas
http://www.bcbsks.com/CustomerService/Providers/contact.shtml
Blue Cross and Blue Shield of Kansas City
http://www.bluekc.com/Contact_Us/Contact_Us.aspx

BlueCross BlueShield Western New York
https://securews.bcbswny.com/web/content/WNYmember/contact.html

BlueShield Northeastern New York
https://securews.bsneny.com/web/content/NENYmember/contact.html

HealthNow New York
https://securews.healthnowny.com/web/content/HNNY_brochure/home/about-us/contact-us.html

6 CONTROL SEGEMENTS/ENVELOPES
See section 10

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS
1. All transmissions submitted without a valid Trading Partner number will be rejected. A trading 
   Partner number can be obtained by completing the EDI Enrollment Form found on the 
   website at www.ask-edi.com/forms.
2. Only loops, segments, and data elements valid for the ASC X12 Technical Report Type 3 
   (TR3) will be translated. Submitting data, not valid based on the TR3 will cause files to be 
   rejected.
3. All lower case characters submitted on an inbound 837 file will be converted to upper case 
   when sending data to the payers processing system.
4. Taxonomy codes are not required in order to process claims, but will be accepted if 
   submitted. Taxonomy codes that are submitted must be valid against the taxonomy code set 
   published at WPC References. Claims submitted with invalid taxonomy codes will be 
   rejected. BCBSKS and BCBSKC do not use taxonomy codes for claims adjudication.
5. Compression of files is supported between the submitter and receiver.
6. Patient Control/Claims Submitter's Identifier - The ASC X12 TR3 allows up to 38 characters 
   in the 2300 Loop, CLM01; however, the 835 Claim Payment/Advice CLP01 returns a 
   maximum of 20 characters.
7. File names should not contain any of the following characters: Dollar ("$"), Ampersand ("&"), 
   Plus ("+"), Comma (""), Forward slash/Virgule ("/"), Colon (";"), Semi-colon (";"), Equals ("="), 
   Question mark ("?"), or 'At' symbol (@)
8. For Internet File Transmissions Only: File names must contain only alphabetical ("A-Z, a-z"), 
   numeric (0-9), hyphen ("-"), or underscore ("_" ) as characters, with hyphen and underscore 
   not acceptable as starting and ending characters.
9. The max length for any input file name should not exceed 28 characters.
10. **ASK** will make every effort to provide 60 days notice to Trading Partners regarding edit changes or additions. Notice will be posted to the News section of the ASK web site.

11. BCBSKS and BCBSKC require Medicare Primary information to be submitted at line level - 2430

12. ASK accepts Basic and Extended Code Sets

13. Scheduled system maintenance occurs Sunday between 4:00 am – 10:00 am (all times listed are Central Time Zone)

8 **ACKNOWLEDGEMENTS**


9 **TRADING PARTNER**

An EDI Trading Partner is defined as an ASK customer (provider, billing service, software vendor, employer group, clearinghouse etc.) that transmits to, or receives electronic data from ASK.

**Batch Enrollment** - [http://www.ask-edi.com/forms.htm](http://www.ask-edi.com/forms.htm)

10 **TRANSACTIONS SPECIFIC INFORMATION**

These tables contain one or more rows for each segment for which a supplemental instruction is needed.

<table>
<thead>
<tr>
<th>Page</th>
<th>Loop</th>
<th>Seg.</th>
<th>Data Element</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interchange Control Header/ISA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.4</td>
<td>N/A</td>
<td>ISA05</td>
<td>Interchange ID Qualifier</td>
<td>‘ZZ’</td>
</tr>
<tr>
<td>C.4</td>
<td>N/A</td>
<td>ISA06</td>
<td>Interchange Sender ID</td>
<td>Trading Partner Number assigned by ASK.</td>
</tr>
<tr>
<td>C.5</td>
<td>N/A</td>
<td>ISA07</td>
<td>Interchange ID Qualifier</td>
<td>‘ZZ’</td>
</tr>
<tr>
<td>C.5</td>
<td>N/A</td>
<td>ISA08</td>
<td>Interchange Receiver ID</td>
<td>ASK, ASK INC, ASKINC</td>
</tr>
<tr>
<td>C.5</td>
<td>N/A</td>
<td>ISA13</td>
<td>Interchange Control Number</td>
<td>Must be unique for each transaction.</td>
</tr>
<tr>
<td>Functional Group Header/GS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| C.7 | N/A | GS03 | Application Receiver Code | BCBSKS = Blue Cross and Blue Shield of Kansas  
BCBSKC = Blue Cross and Blue Shield of Kansas City  
PHP = Preferred Health Professionals  
EDIM = EDI Midwest  
HNNY = HealthNow New York (BlueShield of Northeastern New York, BlueCross and BlueShield of Western New York) |
### Loop 1000A - Submitter Name

| 75 | 1000A | NM109 | Submitter Identifier | Trading Partner Number Assigned by ASK. |

### Loop 1000B - Receiver Name

| 80 | 1000B | NM103 | Receiver Name | ASK, ASK INC or ASKINC |
| 80 | 1000B | NM109 | Receiver Primary Identifier | ASK, ASK INC or ASKINC |

### Loop 2010AA - Billing Provider Name

| 99 | 2010AA | PER02 | Billing Provider Contact Name | Submission of the PER segment is highly recommended. This information will be used to contact the provider in the event claims cannot be submitted to the payer. |

### Loop 2000B – Subscriber Hierarchical Level

| 116 | 2000B | SBR01 | Payer Responsibility Sequence Number Code | Must be populated accurately on secondary and tertiary claims to insure accurate payment. |
| 118 | 2000B | SBR09 | Claim Filing Indicator Code | BCBSKS = BL  
BCBSKC = BL  
BCBSWNY = BL or CI  
BSNENY = BL or CI  
HealthNow New York = BL or CI  
PHP = BL or CI |

### Loop 2010BB - Payer Name

| 134 | 2010BB | NM108 | Identification Code Qualifier | Must be ‘PI’. |
| 134 | 2010BB | NM109 | Payer Identifier | BCBSKS = 47163  
BCBSKC = 47171  
BCBSWNY = 00301 or 00801  
BSNENY = 00800  
HealthNow New York = 55204  
PHP = 31478  
EDI Midwest = Appropriate payer number from EDI Midwest payer list. |

### Loop 2300 – Claim Information

| 203 | 2300 | REF02 | Claim Identifier for transmission intermediaries | DO NOT USE THIS FIELD. ASK, HealthNow, and BCBSKC will use this field to exchange information. |
| 210 | 2300 | NTE02 | Claim Note Text | Characters that can be used as delimiters cannot be used in narrative. |

### Loop 2320 – Other Subscriber Information

| 298 | 2320 | SBR09 | Claim Filing Indicator Code | Use the code that most accurately describes the Other Subscriber Information. Medicare should be submitted as MB or 16. |
| 305 | 2320 | AMT02 | Payer Paid Amount | A negative value will result in claim rejection. |

### Loop 2400 – Service Line

| 354 | 2400 | SV102 | Line Item Charge Amount | Negative value will result in claim being rejected. |
| 355 | 2400 | SV104 | Units or Minutes | Negative value will result in claim being rejected. |
| 369 | 2400 | CR102 | Patient Weight | Negative value will result in claim being rejected. |
| 370 | 2400 | CR106 | Transport Distance | Negative value will result in claim being rejected. |
| 415 | 2400 | PS102 | Purchased Service Charge Amount | Negative value will result in claim being rejected. |
APPENDICES

1. Unscheduled Downtime or Non Routine Downtime
   Trading Partners are responsible for notifying ASK when there are changes to contact or other Trading Partner information.
   ASK: Contact Us
   Batch – Notification will posted to phone system at - ASK: Contact Us Phone Menu Options

2. Holiday Schedule

CHANGE SUMMARY
This section describes the differences between the current Companion Guide and previous guide(s).

<table>
<thead>
<tr>
<th>Change Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Page</td>
</tr>
<tr>
<td>------</td>
</tr>
<tr>
<td>8</td>
</tr>
<tr>
<td>All</td>
</tr>
</tbody>
</table>

Administrative Services of Kansas (ASK) is Blue Cross and Blue Shield of Kansas dba ASK.