#### NATIONAL GOVERNMENT SERVICES

# Standard Companion Guide Trading Partner Information

Instructions Related to the X12 277 Health Care Claim Request for Additional Information Version 6020

Companion Guide Version Number: 6.0

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### **Preface**

Companion guides (CG) may contain two types of data, instructions for electronic communications with the publishing entity (trading partner information) and supplemental information for creating transactions for the publishing entity while ensuring compliance with the associated ASC X12 Implementation Guide (IG) (transaction instructions). Either the trading partner information component or the transaction instruction component must be included in every CG. The components may be published as separate documents or as a single document.

The trading partner information component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange.

The transaction instruction component is included in the CG when the publishing entity wants to clarify the IG instructions for submission of specific electronic transactions. The transaction instruction component content is limited by ASCX12's copyrights and Fair Use statement.

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### **Trading Partner Information**

### Introduction

#### 1.1 Purpose

National Government Services (NGS) is publishing this document which is intended to provide information to trading partners for implementation of the transactions and documents necessary to exchange electronic requests for additional information with NGS.

This companion guide clarifies, supplements and further defines specific data content requirements to be used in conjunction with, and not in place of, the ASCX12N TR3s for the X12 277 Health Care Claim Request for Additional Information (277RFI) v6020 Transaction.

The companion guide provides communication, connectivity and transaction specific information to NGS trading partners and serves as the authoritative source for NGS-specific electronic data interchange (EDI) protocols

Operational information regarding registration, testing, support and specific information about control record setup is also documented.

#### 1.2 Scope

With this document, NGS EDI addresses how Part A and Part B providers or their business associates exchange the 277RFI v6020 to support the electronic request for additional information related to Medicare claims submitted to NGS.

This implementation is focusing on clinical reason codes. Providers may continue to receive additional development requests for nonclinical messages.

#### 1.3 Overview

This companion guide includes information needed to commence and maintain communication exchange with NGS for the purpose of exchanging electronic requests for additional information. In addition, this companion guide has been written to assist you in designing and implementing the associated transactions and documents to meet NGS processing standards. This information is organized in the sections listed below:

• **Getting Started:** This section includes information related to system operating hours. Information concerning trading partner registration is also included in this section.

- **Testing Requirements:** This section includes detailed transaction testing information needed to complete transaction testing with Medicare.
- **Connectivity/Communications:** This section includes information on NGS' transmission procedures as well as communication and security protocols.
- **Contact Information:** This section includes EDI customer service, EDI technical assistance and applicable websites.
- Control Segments/Envelopes: This section contains information needed to receive the ISA/IEA, GS/GE and ST/SE control segments for transactions to be received by Medicare.
- Acknowledgments and Reports: This section contains information on all transaction acknowledgments sent by Medicare and report inventory.
- Additional Trading Partner Information: This section contains information related to implementation checklist, transmission examples, trading partner agreements and other resources.

#### 1.4 References

The following websites provide information for where to obtain documentation for the ASCX12 277 v6020 X313 transaction.

Resource: Washington Publishing Company

# **Getting Started**

### 2.1 Working Together

NGS will work with providers directly through set-up, development, testing and production implementation of the electronic request for additional information.

Upon implementation, the NGS EDI help desk is the first point of contact for basic information and troubleshooting. An EDI email process is also accessible as a method of communicating with NGS. The email account is monitored by knowledgeable staff ready to assist you. When communicating via email, please exclude any protected health information (PHI) to ensure security is maintained. In addition to the NGS EDI help desk and email access, feel free to communicate via alternative methods (see section 5 below for contact information).

Specific information about the above-mentioned items can be found in the sections below.

#### 2.2 Trading Partner Registration

The EDI electronic request for additional information is offered to providers that enroll for electronic claims with NGS. EDI Analysts will work directly with the provider to ensure all trading partner management activity is appropriately completed. As a

reminder, providers are required to use a network service vendor to connect to the NGS EDI gateway.

### 2.3 Trading Partner Testing Process

Providers are not required to test 277 files.

#### 2.4 Paper Letters

Providers who enroll for the 277RFI and receive the electronic transaction will not also receive the associated paper letter. However, providers who enroll for the 277RFI may continue to receive paper letters for messages that cannot be mapped to standard Logical Observation Identifiers Names and Codes (LOINC) codes.

# Response to the 277RFI Electronic Request

Providers can respond electronically using the X12 275 transaction with the embedded HL7 standard or they can respond by mail or fax as they currently respond. We accept documents via paper, fax, CD/DVD, electronic submission of medical documentation (esMD) and NGSConnex. Instructions for signing up for NGSConnex can be found on our website. If responding by way of paper, you must include the internal control number (ICN)/document control number (DCN), Health Insurance Claim Number (HICN)/Medicare Beneficiary Identifier (MBI) and NPI on the documentation.

Medicare will accept clearly legible handwritten signatures, handwritten initials or electronic signatures. Rubber stamped signatures are not acceptable on any medical records except in accordance with the rehabilitation act of 1973. The author with a physical disability should submit proof of his/her inability to sign their signature due to their disability. Patient identification, date of service and provider of the service should be clearly identified in the submitted documentation. If the provider signature is not clearly legible, attach a signature log or key that includes the typed name of the provider with credentials, the signature, and the initials for each provider for which the records are requested. If you question the legibility of a signature, you should submit an attestation statement in your documentation response.

# **Connectivity/Communications**

#### 4.1 Process flows

- Additional information requests letters are generated, mapped to the 277RFI and delivered to trading partner mailboxes.
  - Paper letters are not printed and mailed
- Trading partners download the transactions and translate for internal processing to respond to the request.
- Providers can use any of the current response methods to return the requested documentation.
  - Part A and B providers can respond to the 277 electronically using the X12 275 transaction with the embedded HL7 supporting documentation. For further information please see the NGS 275 Claims Attachment Companion Guide located on the NGS Medicare website.
- Conditions that cannot be mapped to LOINC codes will generate paper letters which will continue to the print and mail process.
- Part A providers will continue to have the ability to view additional documentation requests (ADRs) via the Fiscal Intermediary Standard System (FISS) Direct Data Entry (DDE) application.

#### 4.2 Transmission Administrative Procedures

The NGS EDI gateway is accessed through an NGS-approved network service vendor.

#### 4.3 Communication Protocols

NGS supports Secured FTP (sFTP) protocol for all EDI file transfer activity with connectivity through an approved network service vendor (NSV).

For the implementation of the electronic request for additional information transaction, it is expected that providers can utilize their existing NSV connectivity to the NGS EDI gateway. It is recommended that providers contact their NSV to discuss any impacts to their existing connection prior to initiating this transaction with NGS.

#### 4.4 Security Protocols

Trading partners who conduct business with NGS Medicare are subject to Centers for Medicare & Medicaid Services (CMS) security policies.

See the CMS Internet-Only Manual (IOM) Publication 100-25, *Information Security Acceptable Risk Safeguards Manual*, Appendix A CMSR High Impact Level Data document (Section SA-9) of located on the CMS website.

CMS' information security policy strictly prohibits the sharing or loaning of Medicare assigned IDs and passwords. Users should take appropriate measures to prevent unauthorized disclosure or modification of assigned IDs and passwords. Violation of this policy will result in revocation of all methods of system access, including but not limited to EDI front-end access or EDC RACF user access. NGS is responsible for notifying all affected providers/suppliers as well as reporting the system revocation to CMS. See the Appendix A CMSR High Impact Level Data document (Section IA-2) located on the CMS website. The password length must be eight (8) characters.

- Passwords must have at least one (1) of these special characters -- @, # or \$ --
- Passwords must start with a letter and must include at least one (1) number.
- You should choose passwords that are easy for you to remember but hard for others to guess. One of the easiest ways to choose a password is to use the first letters of a phrase you can easily remember. For example, "I like to go to the dollar theater" could translate to "IL2GTT\$T." Other examples of acceptable passwords include SPR1NG\$4 and C@nad@01.
- Passwords are case-sensitive.
- You should never write down your passwords or share them with anyone.
- Use of previous 12 passwords is prohibited. Reset passwords cannot be the same as any of the previous 12 passwords.
- EDI submitter ID passwords will expire after 60 days.
- EDI submitter IDs will suspend after 30 days of inactivity.

## **Contact information**

For EDI registration questions or technical questions related to the 277RFI transaction please use the following EDI contact information.

#### 5.1 EDI Customer Service Number

Jurisdiction 6: 877-273-4334Jurisdiction K: 888-379-9132

#### **Hours of Operation**

Monday–Friday, 8:00 a.m.–5:00 p.m. eastern time (ET)

#### **5.2 EDI Technical Assistance Number**

Jurisdiction 6: 877-273-4334Jurisdiction K: 888-379-9132

#### Hours of Operation

Monday–Friday, 8:00 a.m.–5:00 p.m. ET

#### 5.3 Provider Services

Questions related to claims and/or the associated request for additional information should be directed to the Provider Contact Center as follows:

State	IVR Number	Toll-Free Number	Hours Available
Connecticut, Maine, Massachusetts, New Hampshire, New York, Vermont,		888-855-4356 TTY: 866-786-7155	Monday-Friday: 8:00 a.m5:00 p.m. ET Thursdays:
Rhode Island			Closed for training 2:00–4:00 p.m. ET
Illinois, Minnesota, Wisconsin	877-309-4290	877-702-0990 TTY: 888-897-7523	<b>Monday–Friday:</b> 8:00 a.m.–5:00 p.m. CT 9:00 a.m.–6:00 p.m. ET
			Thursdays: Closed for training 2:00–4:00 p.m. ET

### 5.4 Applicable Websites/Email

Questions directed to the EDI Help Desk can also be submitted via the EDI Email Inquiry Form found on the NGS website.

#### Part A/FQHC/HHH Providers

- J6 EDI Email Inquiry Form
- JK EDI Email Inquiry Form

#### Part B Providers

- J6 EDI Email Inquiry Form
- JK EDI Email Inquiry Form

# **Control Segments/Envelopes**

Enveloping information must be as follows:

Interchange control (ISA/IEA), function group (GS/GE) and transaction (ST/SE) envelopes must be used as described in the standard implementation guides. Medicare's expectations for inbound ISAs and a description of data on outbound ISAs are detailed in this chapter.

#### **Delimiters – Outbound Transactions**

NGS recommends the use of the following delimiters in all outbound transactions; trading partners/submitters should contact their local A/B Medicare Administrative Contractor (MAC) or Common Electronic Data Interchange (CEDI) for any deviations. Note that these characters will not be used in data element content within an ISA/IEA Interchange Envelope.

Delimiter	Character Used	Dec Value	Hex Value
Data Element Separator	>	62	3E
Repetition Separator	٨	94	5E
Component Element Separator	+	43	2B
Segment Terminator	~	126	7E

#### **Outbound Data Element Detail and Explanation**

All data elements within the Interchange Envelop (ISA/IEA) must follow X12 syntax rules as defined within the adopted implementation guide.

#### 6.1 ISA-IEA

Reference	Name	Codes	Notes/Comments
ISA	Interchange Control Header		
ISA01	Authorization Information Qualifier	00	NGS will send the value of 00
ISA02	Authorization Information		NGS will send 10 blank spaces
ISA03	Security Information Qualifier	00	NGS will send the value of 00
ISA04	Security Information		NGS will send 10 blank spaces.
ISA05	Interchange ID Qualifier	ZZ	Sender ID qualifier
ISA06	Interchange Sender ID		NGS-specific number. These receiver IDs are also required in the GS02 and in Loop 2100A NM109.
ISA07	Interchange ID Qualifier	ZZ	Receiver ID qualifier
ISA08	Interchange Receiver ID		NGS assigned submitter ID. This is also required in the GS03 and in Loop 2100B NM109.
ISA11	Repetition Separator		Must be present.
ISA14	Acknowledgement Requested	0	NGS will send code value 0.

### 6.2 GS-GE

Functional group (GS-GE) codes are transaction specific. The following are NGS rules related to processing of the functional groups.

Reference	Name	Codes	Notes/Comments
GS01	Functional Identifier Code	HN	ID assigned to 277 heath care claim request for additional information transaction.
GS02	Application Sender Code		Sender ID NGS contractor code.
GS03	Application Receiver's Code		Receiver ID submitter number assigned by NGS.
GS08	Version Identifier Code		GS08 value will be 006020X313.

#### 6.3 Transaction Detail

Reference	Name	Codes	Notes/Comments
BHT01	Hierarchical Structure Code	0085	Order of HL segments
BHT02	Transaction Set Purpose Code	48	Suspended
ВНТ06	Transaction Type Code	RQ	Request
2100C NM102	Entity Type Qualifier	2	This value will always be a 2 (nonperson entity).
2100C NM109	Provider Identifier		This value will always be the billing provider NPI
2100D NM109	Patient Identification Number	(HICN/MBI)	Part B will include Xs in the first 5 positions as shown on the additional development letter.
2200D TRN02	Patient Control Number	(ICN/DCN)	This value will be the ICN/DCN of the claim. If responding electronically this value must be returned in the X12 275 transaction.
2200D STC	Claim Status Information Segment		This segment may be repeated to support multiple questions from the letter.
2200D STC01-1	Health Care Claim Status Category Code	(Claim Status Request Category Codes)	

Reference	Name	Codes	Notes/Comments
2200D STC01-2	Health Care Claim Status Code	(See Appendix A for the list of possible LOINC codes and descriptions)	LOINC code that defines the information being requested.
2200D STC01-4	Code List Qualifier Code	LOI	Indicates STC01-2 is a LOINC code.
2200D STC02	Status Information Effective Date	(Date from the letter)	Date the additional development request was generated.
2200D STC10-2	Health Care Claim Status Code	(See Appendix A for the list of possible LOINC codes and descriptions)	LOINC modifier codes which further define the request.
2200D STC10-4	Code List Qualifier Code	LOI	Indicates STC10-2 is a LOINC code.
2200D STC11-2	Health Care Claim Status Code	(See Appendix A for the list of possible LOINC codes and descriptions)	LOINC modifier codes which further define the request.
2200D REF	Provider's Assigned Claim Identifier	(Patient Account Number submitted on the claim)	
2200D REF	Institutional Bill Type Identification	(Type of Bill submitted on the claim)	Part A only when submitted on the claim.
2200D REF	Medical Record Identification	(Medical Record Number)	Part A only when submitted on the claim.
2200D REF	Claim Identifier Number for Transmission Intermediaries		N/A

Reference	Name	Codes	Notes/Comments
2200D REF	Property and Casualty Claim Number		This segment will not be included in the 277RFI transaction.
2200D REF02	Case Reference Identifier	(Case Reference Number)	NGS Case reference number
2200D REF	Attachment Request Tracking Identifier		This segment will not be included in the 277RFI transaction.
2200D REF	Prior Attachment Request Tracking Identifier		This segment will not be included in the 277RFI transaction.
2200D DTP	Service Date		This segment will be available for Part A.
			For Part B, this segment may not be included in the 277RFI transaction if the date of service is not included on the additional development request. In addition, only the first date of service on the claim will be included. Note: The request is for the entire claim.
2200D DTP03	Response Due Date		This is the date that the response must be received by NGS.
2210D PER02	Payer Contact	(Payer Contact Name)	If responding electronically, this information must be returned in the Loop 1000A PER segment of the 275 transaction.
2210D N3	Payer Response Contact Address		If responding by mail, the documentation should be mailed to this address.
2210D N4	Payer Response Contact City, State and ZIP		If responding by mail, the documentation should be mailed to this address.
2220D SVC Loop	Service Line Information Loop		This loop will not be included in the 277RFI transaction. All requests will be at the claim level.

# **Additional Trading Partner Information**

While NGS EDI gateway is available 24 hours a day, seven days a week, NGS schedules regular maintenance for Sundays. Access to the EDI gateway may be interrupted while maintenance is performed.

#### 7.1 Implementation Checklist

- Existing NGS trading partner with network service vendor connectivity and submitter ID established
- Software to support the translation of the 277RFI v6020 transaction
- Enroll for the 277RFI transaction

### 7.2 Transmission Examples

See appendix for example of the 277RFI.

#### 7.3 Trading Partner Agreement

EDI trading partner agreements ensure the integrity of the electronic transaction process. The trading partner agreement is related to the electronic exchange of information, whether the agreement is an entity or a part of a larger agreement, between each party to the agreement.

For the purposes of the health care claim request for additional information initiative, the provider must be an active NGS EDI trading partner with an EDI enrollment agreement already on file.

# **Trading Partner Information Change Summary**

Version	Date	Section(s) changed	Change Summary
1.0		All	Initial Draft

# **Appendices**

#### 9.1 LOINC Codes

The following LOINC codes could possibly be included in the 277RFI transaction.

LOINC Code	LOINC Code Description
11503-0	Medical Records
18682-5	Ambulance Claims Attachment
53243-2	Advanced Bene Notice
11514-7	Chiropractic Records Total Encounter
18804-5	Three months or fewer before start of date of service (LOINC

LOINC Code	LOINC Code Description
	modifier)
18842-5	Discharge Summary
11485-0	Anesthesia Records
19002-5	Physical Therapy Service Attachment
18594-2	Psychiatric Service Attachment
11504-8	Provider Unspecified Operation Note
11526-1	Pathology Study
52035-3	Home Health Claims
18826-8	Occupational Therapy Service Attachment
11807-7	30 days before start date of service (LOINC modifier)
18824-3	Cardiac Service Attachment
29206-0	Speech Therapy Service Attachment

#### Sample Part A 277RFI

ISA\*00\* \*00\* \*ZZ\*14011 \*ZZ\*TEST277RFI

\*180416\*1316\*^\*00602\*804040002\*0\*P\*:~

GS\*HN\*14011\*TEST277RFI\*20180416\*13164324\*804040002\*X\*006020X313~

ST\*277\*00000001\*006020X313~

BHT\*0085\*48\*20180404\*20180416\*13164324\*RQ~

HL\*1\*\*20\*1~

NM1\*PR\*2\*NATIONAL GOVERNMENT SERVICES\*\*\*\*\*PI\*14011~

PER\*IC\*\*UR\*NGSMEDICARE.COM~

HL\*2\*1\*21\*1~

NM1\*41\*2\*277RFI TESTING TP ID\*\*\*\*\*46\*TEST277RFI~

HL\*3\*2\*19\*1~

NM1\*1P\*2\*RHODE ISLAND HOSPITAL\*\*\*\*XX\*1222222222~

HL\*4\*3\*PT~

NM1\*QC\*1\*SMITH\*MARY\*\*\*\*MI\*022333444A~

TRN\*1\*21877766666555RIA~

STC\*R4:55555-5::LOI\*20180322~

STC\*R4:53243-2::LOI\*20180322~

REF\*BLT\*131~

REF\*EA\*20001178380~

REF\*3H\*1401121807800147919RIA0PR~

DTP\*472\*RD8\*20170823-20170828~

DTP\*106\*D8\*20180506~

PWK\*OZ~

PER\*RE\*MEDICAL REVIEW~

N3\*CLAIMS-PART A/RHHI\*P.O. BOX 7091~

N4\*INDIANAPOLIS\*IN\*462077091~

SE\*23\*00000001~

GE\*1\*804040002~

IEA\*1\*804040002~

#### Sample Part B 277RFI File

ISA\*00\* \*00\* \*ZZ\*14312 \*ZZ\*TEST277RFI

\*180424\*1143\*^\*00602\*804180001\*0\*P\*:~

GS\*HN\*14312\*TEST277RFI\*20180424\*11433976\*804180001\*X\*006020X313~

ST\*277\*000000001\*006020X313~

BHT\*0085\*48\*20180418\*20180424\*11433976\*RQ~

HL\*1\*\*20\*1~

NM1\*PR\*2\*NATIONAL GOVERNMENT SERVICES\*\*\*\*\*PI\*14312~

PER\*IC\*\*UR\*NGSMEDICARE.COM~

HL\*2\*1\*21\*1~

NM1\*41\*2\*277RFI TESTING TP ID\*\*\*\*\*46\*TEST277RFI~

HL\*3\*2\*19\*1~

NM1\*1P\*2\*DARTMOUTH-HITCHCOCK CLINIC\*\*\*\*XX\*1223344444~

HL\*4\*3\*PT~

NM1\*QC\*1\*JONES\*CHRISTINE\*A\*\*\*MI\*XXXXX2222A~

TRN\*1\*22180890467404~

STC\*R4:11503-3::LOI\*20180403\*\*\*\*\*\*\*R4:18804-5::LOI\*R4:53243-2::LOI~

REF\*X1\*P842490201~

REF\*3H\*14312000002218089046740PR~

DTP\*472\*D8\*20171103~

DTP\*106\*D8\*20180518~

PWK\*OZ~

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N4\*INDIANAPOLIS\*IN\*462066474~

SE\*22\*00000001~

GE\*1\*804180001~

IEA\*1\*804180001~