

County Medically Indigent Services Program (CMISP) and Physicians Emergency Medical Services (PEMS)

Testing and Activation Procedures Document for

837- Health Care Claim: Professional

Version 1.5

Released Date: October, 2008

Overview

Intent

This document is intended for the technical staff of all payers, providers, or clearinghouses and their agents that are responsible for HIPAA EDI compliance for the 837 Health Care Claim Professional. All providers that wish to submit Professional/CMS 1500 claims electronically (837s) should utilize the Sacramento County DHHS 837 – Health Care Claim: Professional Companion Guide.

EDI Transmission Times

8a.m. to 5p.m., Monday – Friday (except County holidays)

Response Transactions

Documentation regarding the following transactions is in Appendix B of the 837 Implementation Guides.

- TA1 Interchange Acknowledgement Segment the translator checks for the presence and validity in the ISA/IEA outer envelope of the interchange. The translator returns a TA1 Application Acknowledgement Segment to the claim submitter if the ISA14 is valued with a "1".
- 997 Functional Acknowledgement Transactions will be generated for each provider that submits transactions to DHHS the Functional Acknowledgment (997) is the translator's first response to receiving an HIPAA EDI file. The 997-informs the 837P submitter that the transmission arrived and is accepted or rejected.

Testing Procedures

System Testing

Each DHHS trading partner is responsible for ensuring that its transactions are HIPAA compliant based on the levels of testing described below <u>before</u> submitting a test file to DHHS:

Level 1 - Integrity Testing

This type of testing validates the basic syntactical integrity of the provider's EDI file.

Level 2 – Implementation Guide – Requirements Testing

This type of testing involves requirements imposed by the transaction's HIPAA Implementation Guide (Guide), including validation of data element values specified in the Guide.

Any error detected in Level 1 through Level 2 by the translator will result in the entire batch being rejected.

Level 7 – Trading Partner-Specific Testing

Testing of trading partner requirements involves the Implementation Guide and the DHHS Companion Guide. For DHHS trading partners, trading partner requirement testing includes testing of the approaches that DHHS has taken to accommodate necessary data within HIPAA compliant transactions and code sets.

DHHS believes that, when possible, using real-life production data enhances the overall value of the compliance testing process. DHHS and its trading partners will maintain compliance with HIPAA regulations concerning security and privacy.

Prior to testing, billing providers wanting to exchange information electronically with Sacramento County Department of Health and Human Services (DHHS) must submit the EDI – Trading Partner Registration Form.

Testing and Approval Process

The following test procedures will be used for testing and approval for each electronic submission type or transaction.

- Submit the file by email to <u>EDI-Dropbox@saccounty.net</u>. Zip using WINZIP 9.0 or greater and use password protection. The password will be sent to you upon completion of your EDI enrollment process.
- 2. This submission must be approved and pass all levels of validation testing before proceeding to the next step.
- 3. Submit average file billing transaction.

4. Approval is based on passing level 1-2 and level 7 edits in the test environment. Approved billing providers will be notified by formal documentation via email, providers must sign the letter indicating agreement to production terms and the projected 1st production date and return the letter to:

DHHS EDI Team – C/O Jerry Matsumoto 7001A East Parkway, Suite 200, Sacramento, CA 95823

Phone # 916-875-7170

Email: <u>EDI-Dropbox@SacCounty.net</u>

Fax to: 916-391-0762

Attention: DHHS EDI Team

Please note that receipt of file by email is a temporary mode. DHHS is looking potential solutions for this temporary mode. DHHS will keep its trading partners informed of any progress made in a proposed solution.

Test submissions should contain a cross section of claim type data that can be expected in a production environment. The test file must consist a minimum of 10 claims for each type to be billed. A maximum of 5,000 claims per ST- SE is allowed for testing. The test procedure must be completed for each applicable claim type.

Claims contained on the test file will not be processed for payment. To test, submitters should use data from previously adjudicated claims. Submitters cannot send claims for adjudication until receiving written notification from the DHHS stating they are in "Active" status and are authorized for EDI billing.

Retesting

In instances where data does not meet minimum standards of acceptability, the HIPAA file validation report will inform the submitter of the data elements in error. The submitter must make the necessary correction(s) and submit a new file for retesting. Additional testing is required until the claims file passes all applicable edits.

File Naming Convention

The WinZip file will be named in accordance with Sac County Naming standards:

[987456_ Mode_837P_MMDDCCYY_XX]

Example: 987456_T_837P_01012008_01

[Vendor No + Transaction Mode: T (Test) or P (Production) +Transaction Type +Transmission Date +Sequence Number]

The sequence number should be start at "01" and increment by one if multiple files are submitted on the same day. Re-use the original file name on corrected files re-submitted on the same day.

Technical Assistance and Help (For Testing and Activation Only)

Contact E-mail: <u>EDI-Dropbox@SacCounty.net</u>

Contact: Jerry Matsumoto

Contact Phone: 916-875-7170

Contact Hours: Monday – Friday, 8:00 a.m. to 5:00 p.m. (except County

holidays)

Information required when requesting assistance:

Provider/Organization name
 Reason for call

Name of contact person • Transaction Name/Number

Telephone number of caller
 Documentation of problem