

The Oregon DHS MMIS Companion Guide for 835 Fee For Service Payment/Advice (Remittance Advice)

The objectives of this document are:

*To clarify what information is being returned by the Dept. Of Human Services (OR-DHS)
where the guide indicates that the choice is dependent on the Payer.

This Companion Guide supplements the 835 Payment/Advice Implementation Guide Version 004010X091A1.

Every effort has been made to prevent errors in this document. However, if there is a discrepancy between this document and the Implementation Guide, the Implementation Guide is the final authority.

In the examples given in this Companion Guide, a lowercase "b" denotes a blank space.

ISA - Interchange Control Header - B3

Usage: Required

Segment Max Use within Transmission: 1

Example: ISA*00*bbbbbbbb*00*bbbbbbbb*ZZ*ORDHSbbbbbbbb*ZZ*TP123456bbbb*010801*1452*U*00401*000000001*0*P*:-

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
ISA01	Authorization Information Qualifier	R	2/2	ID	00	
ISA03	Security Information Qualifier	R	2/2	ID	00	
ISA05	Interchange ID Qualifier	R	2/2	ID	ZZ	
ISA06	Interchange Sender ID	R	15/15	AN	ORDHS	Spaces are inserted <u>after</u> data to meet 15-byte field requirement.
ISA07	Interchange ID Qualifier	R	2/2	ID	ZZ	
ISA08	Interchange Receiver ID	R	15/15	AN		The Trading Partner number (TP##### (upper-case "TP")) assigned by OR-DHS at the beginning of Business-To-Business (B2B) Testing, used for B2B Testing and Production. Spaces are inserted <u>after</u> data to meet 15-byte field requirement.

GS - Functional Group Header - B8

Usage: Required

Segment Max Use within Transmission >1

Example: GS*HP*ORDHS*TP123456*20030701*1452*000000001*X*004010X091A1~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
GS02	Application Sender's Code	R	2/15	AN	ORDHS	
GS03	Application Receiver's Code	R	2/15	AN		The trading partner number (TP##### (upper-case "TP")) assigned by OR-DHS at the beginning of Business-To-Business (B2B) Testing, used for B2B Testing and Production.

BPR -- Financial Information - page 44

Usage: Required

Segment Max Use within Loop: 1

Loop Repeat: 1

Loop ID: None

Example: BPR*I*150000*C*CHK*****20030711*~

Example: BPR*I*755*C*ACH*CCP*01*123000220*DA*300010020*1930592162**01*123456789*DA*987654321*20080503~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
BPR01	Transaction Handling Code	R	1/2	ID	I H	I= Remittance Information only H= Notification Only
BPR03	Credit or Debit Flag Code	R	1/1	ID	C	Credit
BPR04	Payment Method Code	R	3/3	ID		ACH = receiving payment by Electronic Funds Transfer. CHK = receiving payment by check.
BPR05	Payment Format Code	S	1/10	ID	CCP	If BPR04 = ACH, otherwise left blank.
BPR06	Depository Financial Institution Identification (DFI) Number Qualifier	S	2/2	ID	01	If BPR04 = ACH, otherwise left blank.
BPR07	Originating Depository Financial Institution (DFI) Identifier	S	3/12	AN	123000220	If BPR04 = ACH, otherwise left blank.
BPR08	Account Number Qualifier	S	1/3	ID	DA	If BPR04 = ACH, otherwise left blank.
BPR09	Sender Bank Account Number	S	1/35	AN	300010020	If BPR04 = ACH, otherwise left blank.
BPR10	Originating Company Identifier	S	10/10	AN	1930592162	If BPR04 = ACH, OR-DHS Federal Tax ID number preceded by a one (1) with no hyphen, otherwise left blank.
BPR12	Depository Financial Institution (DFI) Identification Number Qualifier	S	2/2	ID	01	If BPR04 = ACH, otherwise left blank.
BPR13	Receiving Depository Financial Institution (DFI) Identifier	S	3/12	AN		If BPR04 = ACH, ABA number (9-digit Transit Routing Number including self-check digit) of the financial institution receiving the transaction, otherwise left blank.
BPR14	Account Number Qualifier	S	1/3	ID	DA	If BPR04 = ACH, otherwise left blank.
BPR15	Receiver Bank Account Number	S	1/35	AN		If BPR04 = ACH, Bank Account Number of the financial institution receiving the transaction, otherwise left blank.
BPR16	Check Issue or EFT Effective Date	R	8/8	DT		If BPR04 = ACH, date EFT created. If BPR04 = CHK, check date.

TRN -- Reassociation Trace Number - page 52

Usage: Required

Segment Max Use within Loop: 1

Loop Repeat: 1

Example: TRN*1*12345*1930592162~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
TRN01	Trace Type Code	R	1/1	ID	1	
TRN02	Check or EFT Trace Number	R	1/30	AN		Check or EFT Number
TRN03	Payer Identifier	R	10/10	AN	1930592162	OR-DHS Federal Tax ID Number preceded by a "1".

N1--Payer Identification - page 62

Usage: Required

Segment Max Use within Loop: 1

Loop Repeat: 1

Loop ID: 1000A

Example: N1*PR*OR DHS~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
N102	Payer Name	S	1/60	AN	OR DHS	

N3 -- Payer Address - page 64

Usage: Required

Segment Max Use within Loop: 1

Loop Repeat: 1

Loop ID: 1000A

Example: N3*500 SUMMER STREET NE~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
N301	Payer Address Line	R	1/55	AN	500 SUMMER STREET NE	

N4 -- Payer City, State, Zip Code - 65

Usage: Required
 Segment Max Use within Loop: 1
 Loop Repeat: 1
 Loop ID: 1000A
 Example: N4*SALEM*OR*973010315~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
N401	Payer City Name	R	2/30	AN	SALEM	
N402	Payer State Code	R	2/2	ID	OR	
N403	Payer Postal Zone or Zip Code	R	3/15	ID	973010315	

REF -- Payee Additional Identification - page 77

Usage: Situational
 Segment Max Use within Loop: >1
 Loop Repeat: 1
 Loop ID: 1000B
 Example: REF*TJ*123456789~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
REF01	Reference Identification Qualifier	R	2/3	ID	TJ	Federal Tax ID number. See IG for additional information.
REF02	Additional Payee Identifier	R	1/30	AN		Tax payer identification N104.

CLP -- Claim Payment Information - page 89

Usage: Required
 Segment Max Use within Loop: 1
 Loop Repeat: >1
 Loop ID: 2100
 Example: CLP*7722337*1*211366.97*138018.4**MC*4004365123456~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
CLP01	Patient Control Number	R	1/38	AN		Patient Account Number if sent on claim.
CLP02	Claim Status Code	R	1/2	ID		1 = Processed as Primary 2 = Processed as Secondary 3 = Processed as Tertiary 4 = Denied 22 = Reversal of Previous Payment
CLP04	Claim Payment Amount	R	1/18	R		The Actual Provider Payment amount.
CLP05	Patient Responsibility Amount	S	1/18	R		The patient's co-pay amount.
CLP06	Claim Filing Indicator Code	R	1/2	ID	MC	
CLP07	Payer Claim Control Number	S	1/30	AN		OR-DHS ICN assigned.

NM1 -- Patient Name - page 102

Usage: Required

Segment Max Use within Loop: 1

Loop Repeat: >1

Loop ID: 2100

Example: NM1*QC*1*SHEPARD*SAM*O***MR*12345678~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
NM108	Identification Code Qualifier	S	1/2	ID	MR	
NM109	Patient Identifier	S	2/80	AN		Patient's 8-digit prime number as it appears on the DMAP medical care identification card.

REF -- Other Claim Related Identification - page 126

Usage: Situational

Segment Max Use within Loop: 99

Loop Repeat: >1

Loop ID: 2100

Example: REF*F8*4004365123456~

ELEMENT	Element Name	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
REF01	Reference Identification Qualifier	R	2/3	ID	F8, G1	F8 = Original ICN Sent by Provider G1 = Prior Authorization Number

DTM -- Claim Date - page 130

Usage: Situational

Segment Max Use within Loop: 4

Loop Repeat: >1

Loop ID: 2100

Example: DTM*233*20071127~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
DTM01	Date Time Qualifier	R	3/3	ID		232 = Claim Statement Period Start 233 = Claim Statement Period End

SVC -- Service Payment Information - page 139

Usage: Situational
 Segment Max Use within Loop: 1
 Loop Repeat: 999
 Loop ID: 2110
 Example: SVC*HC:99214*100*80~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
SVC01-2	Procedure Code	R	1/48	AN		Procedure Code "T2026" indicates a capitation service to PCM providers.
SVC03	Line Item Provider Payment Amount	R	1/18	R		DRG claim transactions do not detail the paid amounts. To balance the 835, DHS will report the line item charge amount for 837 I inpatient DRG type transactions.

REF -- Rendering Provider Information - page 156

Usage: Situational
 Segment Max Use within Loop: 10
 Loop Repeat: 10
 Loop ID: 2110
 Example: REF*HPI*1234567890~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
REF01	Reference Identification Qualifier	R	2/3	ID		HPI = Health Care Financing Administration National Provider Identifier

LQ -- Health Care Remark Codes - page 162

Usage: Situational
 Segment Max Use within Loop: 99
 Loop Repeat: 999
 Loop ID: 2110
 Example: LQ*HE*12345~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
LQ01	Code List Qualifier Code	R	1/3	ID	HE	

PLB -- Provider Adjustment - page 164

Usage: Situational

Segment Repeat: >1

Loop ID: None

Example: PLB*123456*19960930*WO:9876514*1.27~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
PLB03-1	Adjustment Reason Code	R	2/2	ID		OR-DHS uses: 72 = Authorized Return CS = Adjustment WO = Overpayment Recovery
PLB04	Provider Adjustment Amount	R	1/18	R		Adjusted amount of provider's remittance.