

# Problem Gambling Network

PG NET ELECTRONIC DATA INTERCHANGE (EDI) USER GUIDE

> HEALTH SYSTEMS DIVISION COMPASS PORTFOLIO

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# Introduction

Problem Gambling Services (PGS), which is part of the Health Systems Division (HSD) of the Oregon Health Authority (OHA), began collecting client data via a new data system in the Fall of 2021. The new system, which is known as PG Net, collects client demographic and encounter/claims data. Client demographic data provides information about clients at the beginning of their treatment cycle (such as admission dates, wait time for services, etc.), and encounter data provides information on services/happenings within the treatment episode. The continued collection of this data allows PGS to focus on outcomes and services provided – not just count the number of people served. Ultimately, PGS will be able to provide better data and information to its stakeholders, including the Legislature and other requesters such as County Mental Health Programs and Coordinated Care Organizations.

#### Purpose

The purpose of this PGS File Transfer Specifications for Electronic Health Records document is to inform and explain how the data elements collected will be reported. This document is intended for Behavioral Health Treatment Agencies that are using an Electronic Health Records (EHR) that includes an electronic billing system to send their problem gambling treatment encounter/service information from their system using electronic data interchange (EDI). This guide explains which data elements need to be extracted from their electronic system(s) and how it needs to be formatted and ordered to be acceptable to the PG Net system.

NOTE: This manual only pertains to EDI submission of encounter/service data as that is the only data that can currently be transmitted via this method. Client demographic data at this time needs to be entered manually.

#### Abbreviations used in this document

Abbreviation	Term
OHA	Oregon Health Authority
HSD	Health Systems Division
PGS	Problem Gambling Services
EDI	Electronic Data Interchange
PG Net	Problem Gambling Network
SA	Substance Abuse
МН	Mental Health
PG	Problem Gambling
Тх	Treatment
Dx	Diagnosis

## Process for Data Submission

In order to submit live data to PG Net, a provider must be certified to do so. The following checklist is an overview of the steps involved to become certified.

#### EDI Certification Checklist for Agency/Facility

#### □ Agency/Facility Registration in PGNET

- □ Online registration submission
- □ Received login and password
- □ Request additional users if necessary for PGNET from COMPASS
- PGNET Contact Method Selection
- □ Facility Setup

#### □ File Transfer Certification Process

- Service Files
  - □ Sent first Service Certification file
  - □ Received approval on Service Status Certification file
  - □ Sent second Service Certification file
  - □ Received approval on second Service Certification file
- □ Approval/Certification Received from COMPASS
- □ Agency submitting real time data via EDI

# Agency EDI Certification Process

- 1. Approval/Certification
  - a. OHA will grant EDI approval and provider certification via email.
  - b. Provider will receive instructions via email from OHA on the process of submitting real file submissions.

- 2. Final Information
  - a. Once the agency/facility has received approval and instruction from OHA, the agency/facility can start submitting real data files.
  - b. For assistance, contact COMPASS Support: <u>COMPASS.Support@dhsoha.state.or.us</u>

# EDI-Electronic Data Interchange File Requirements

#### Details of the 837 File

Mapping EDI files to Service Transactions Contents

- Quick References
- Example File
- <u>Service Transaction</u>
- <u>Mapping Service Trans to Compass</u>
- Mapping EDI Segments to Service Trans
  - o ISA Interchange Control Header
  - o GS Functional Group Header
  - <u>ST Transaction Set Header</u>
  - o <u>BHT- Beginning of Hierarchical Transaction</u>
  - o <u>HL Hierarchical Level</u>
  - o <u>NM1 Name Segment</u>
  - o <u>REF Reference</u>
  - o SRB Subscriber
  - o <u>CLM Claim</u>
  - <u>HI Health Care Information (Diagnosis)</u>
  - o <u>SV1 Service</u>
  - DTP Date Time Segment
  - o <u>SE- Transaction Set End</u>
  - <u>GE Functional Group End</u>
  - o <u>IEA Interchange Control End</u>

#### **Quick References**

Beacon Healths 837 Spec CMS Billing Guide 837 State of NY Sparcs 837 Detailed BlueCross NC 837 Guide

## Example File

Batch File Details

#### Facility Name:

Gotham City Hospital (dev)

#### Facility Identifier:

OR-FAC-201

#### **Batch Identifier:**

PG-Encounter-1

1	ISA*00* *00* *ZZ*OR-FAC-201 *ZZ*987654321
T	*210512*0808*^*00501*00000001*1*P*:~
2	GS*HC*OR-FAC-201*OHAPGNet*20210512*0808*31290*X*005010X222A1~
3	ST*837*32225000*005010X222A1~
4	BHT*0019*00*32225*20210608*0808*CH~
5	NM1*41*2*Gotham City Hospital****46*OR-FAC-201~
6	PER*IC*na@na.com~
7	NM1*40*2*OHAPGNet****46*987654321~
8	HL*1**20*1~
9	NM1*85*2*Gotham City Hospital****XX*9998887771~
10	N3*1736 Bruce Drive~
11	N4*Salem*OR*97302~
12	REF*EI*123456789~
13	HL*2*1*22*0~
14	SBR*P*18*****ZZ~
15	NM1*IL*1*Test*EDI****MI*EDITest1~
16	N3*7655 NE Sacramento St.~
17	N4*Portland*OR*97213~

18	DMG*D8*19900101*F~
19	NM1*PR*2*Gotham City Hospital****PI*33~
20	N3*1736 Bruce Drive~
21	N4*Salem*OR*97302~
22	CLM*886222*79.8***02:B:1*Y*A*Y*Y~
23	HI*ABK:F630~
24	NM1*82*1*CRISDENTAL SALEM LLC****XX*1760741078~
25	PRV*PE*PXC*101YM0800X~
26	LX*1~
27	SV1*HC:H2027*79.8*UN*3***1~
28	DTP*472*D8*20210607~
29	REF*6R*886222~
30	SE*28*32225000~
31	GE*1*31290~
32	IEA*1*00000001~
L	

#### ISA - Interchange Control Header

The ISA is different from others. It is a 106-byte fixed-length record. It has a spot for facility ID's but as those are fixed length, truncation is likely, so they are not used.

ISA<sup>1</sup>\*00\* \*00\* \*ZZ\*OR-FAC-201 \*ZZ\*987654321 \*210512\*0808\*^\*00501\*00000001<sup>2</sup>\*1\*P\*:~

- 1. Segment Type
- 2. Control Number Used to prevent resubmission of same file. This should be unique within each submitting facility.

#### GS - Functional Group Header

The GS segment is not used for any data, but its presence is checked for validity of the file overall.

GS1\*HC\*OR-FAC-201\*OHAPGNet\*20210512\*0808\*31290\*X\*005010X222A1~

#### 1. Segment Type

#### ST - Transaction Set Header

The ST segment is not used for any data, but its presence is checked for validity of the file overall.

ST1\*837\*32225000\*005010X222A1~

1. Segment Type

#### BHT- Beginning of Hierarchical Transaction

The BHT segment is a starting point for a set of providers and claims.

BHT<sup>1</sup>\*0019\*00\*32225\*20210608<sup>2</sup>\*0808<sup>3</sup>\*CH~

- 1. Segment Type
- 2. Transaction Set Creation Date Combined with time into the BuildDate.
- 3. Transaction Set Creation Time Combined with date into the BuildDate.

#### HL - Hierarchical Level

The HL segment is not used for any data, but its presence is checked for validity of the file overall.

HL1\*12\*\*203\*1~

- 1. Segment Type
- 2. Hierarchical Identification Number Not mapped. This is a sequence number for HL segments with a BHT.
- 3. Hierarchical Level Code
  - 20 Used for Provider block or loop, if multiple providers in one file can have more than one.
  - 22 Used for each subscriber (patient) block or loop. These reference back to the HL 20 (using the field just before this one) for the provider they are grouped under.

#### NM1 - Name Segment

This is the first name segment with a block or loop, usually with supplemental loops following (for addresses, aliases, etc.). It uses the Identifier and qualifier code to identify the type of name segment, as there can be multiples with the same block.

NM1<sup>1</sup>\*85<sup>2</sup>\*2<sup>3</sup>\*Gotham City Hospital<sup>4\*5\*6\*7\*8\*</sup>XX<sup>9\*</sup>9998887771<sup>10</sup>~

- 1. Segment Type
- 2. Entity Identification Code
  - 85 for Billing Entity (Provider/Facility)
  - IL for Insured (Patient/Client/Subscriber)
  - 82 for Rendering Provider or Pay-To Provider
     Note: Rendering Provider occurs after the LX segment, and Pay-To
     Provider comes before LX. Example files showed they were used
     interchangeably, so EDI uses the last one found in a set (Rendering
     Provider, but PayTo Provider if rendering provider was not present).
- 3. Entity Type Qualifier
  - 1 for Entity (Business)
  - o 2 for Person
- 4. Entity or Last Name
- 5. First Name
- 6. Middle Name
- 7. Name Prefix (Not Used)
- 8. Name Suffix (Not Used)
- 9. Identification Code Qualifier
  - 24 for EIN (Tax ID) (Not Used)
  - XX for NPI number
- 10. Identification Code Used for NPI number, when qualifier is XX.

#### **REF** - Reference

The REF segment is used for additional information or references. We only use the EI type of the various REF segments.

REF\*EI\*123456789~

- 1. Segment Type
- 2. Reference Identification Qualifier Only use the EI qualified REF.
- 3. Reference Identification When Qualifier is EI, use this for EIN.

#### SRB - Subscriber

While the SRB segment is not used in the EDI processor to gather data from, it is the parent segment (Loop parent) for the NM1 - IL (Insured) segment. Although not required by EDI processor, many of the 837 Tools used to build and check files will require it. The segment should always be present, even in test files which have been trimmed down to just what is required.

#### CLM - Claim

The CLM segment is used for claims, which a service or services are grouped under.

CLM1\*8862222\*79.83\*\*\*02:B:14\*Y\*A\*Y\*Y~

- 1. Segment Type
- 2. Patient Control Number
- 3. Total Claim Charge Amount
- 4. Health Care Service Location (group)
  - 1. Place of Service Code
  - 2. Facility Code Qualifier
  - 3. Claim Frequency Code

#### HI - Health Care Information (Diagnosis)

The HI segment is used for primary and other diagnoses associated with the insured/patient.

HI1\*ABK:F6302-1\*ABF:F4312-2~

- 1. Segment Type
- 2. Health Care Code Info (group) Repeats 1 to 15 times, occurrence referenced directly via SV1 Diagnosis Pointer.
  - 1. Code List Qualifier Code

- ABK = Primark IDC-10
- BK = Primark IDC-9
- ABF = Other IDC-10
- BF = Other IDC-9
- 2. Condition Code
- 3. Many other optional subfields are not typically used or present in files.

#### SV1 - Service

The SV1 segment is used data pertaining to the service or services received. Multiple SV1's within a single Claim (CLM) are possible.

For each SV1/DTP 472 combination in an EDI file, there will be a single Service Transaction intermediate built.

SV11\*HC:H2027:042\*79.83\*UN\*34\*025\*\*1:26~

- 1. Segment Type
- 2. Procedure Code Info (group)
  - 1. Qualifier
  - 2. Procedure Code
  - 3. Modifier Optional, repeats 1 to 4 times
  - 4. Other optional subfields are not typically used or present in files
- 3. Line Item Charge Amount
- 4. Service Unit Count
- 5. Place of Service Code
- 6. Diagnosis Code Pointers (group) 1 to 4 repeating subfields
  - 1. Diagnosis Code Pointer A number pointing to the occurrence of the related Diagnosis Code in the paired HI segment.

#### DTP - Date Time Segment

The DTP segment contains date and/or time information, with the 472 qualifier being the DTP used for service dates pertaining to the SV1.

The 472 DTP also triggers the build of the Service Transaction, as it is the last segment in a series of a Service set, within a claim.

#### DTP\*472\*D8\*20210607~

#### DTP\*472\*RD8\*20210607-20210608~

- 1. Segment Type
- 2. Segment Qualifier We only pull from the 472 version of DTP.
- 3. Date Time Format
  - $\circ$  D8 = 8-Character Date
  - RD8 = Date Range for 8-Character Date (uses dash as separator)
- 4. Date Time For 472's, a single date (start) or a date range (start and end dates).

#### SE- Transaction Set End

The SE segment is used to validate the EDI file.

The counter field should match the count of all segments between the ST and SE, plus the ST and SE as well.

SE1\*282\*32225000~

- 1. Segment Type
- 2. Number of Segments

#### GE - Functional Group End

The GE segment is used to validate the EDI file.

The counter field should match the count of all ST/SE groups in the EDI file.

GE1\*12\*31290~

- 1. Segment Type
- 2. Number of Sets

#### IEA - Interchange Control End

The IEA segment is used to validate the EDI file.

The counter field should match the count of all GS/GE groups in the EDI file.

IEA<sup>1</sup>\*1<sup>2</sup>\*00000001~

- 1. Segment Type
- 2. Number of Groups

#### A sample EDI file might look something like this:

\*ZZ\*OR-FAC-225 \*ZZ\*987654321 ISA\*00\* \*00\* \*210512\*0808\*^\*00501\*111100012\*1\*P\*:~ GS\*\*\*\*\*\*\*\*~ ST\*\*\*~ BHT\*\*\*\*20211021\*0909\*~ HL\*1\*\*20\*~ NM1\*85\*2\*GOTHAM CITY HOSPITAL\*\*\*\*XX\*1234567890~ REF\*\*~ HL\*2\*1\*22\*0~ NM1\*IL\*1\*ARELLANO\*LISA\*LEYLA\*\*\*MI\*Test1475LLA73~ DMG\*D8\*20200622\*M~ NM1\*PR\*2\*HSDG\*\*\*\*\*\*15~ CLM\*00001111\*45\*\*\*02:B:1\*Y\*A\*Y\*Y~ HI\*ABK:F630~ NM1\*82\*1\*ANDERSON\*CRAIG\*\*\*\*XX\*1497000586~ SV1\*HC:HHHHH\*45\*UN\*3\*\*\*1~ DTP\*472\*D8\*20210101~ SE\*16\*32225000~ GE\*1\*31290~ IEA\*1\*00000002~

# EDI-Steps for Uploading and Correcting Service Files

- 1. Go to the PG Net Production Site at <u>https://healthsystems.oha.state.or.us/pgnet.</u>
- 2. Log in as a user and navigate to the PG Net Homepage.

← → C Ω ⊡ DHS-OHA Favorites ▲ API Time	https://healthsystems.ohastate.or.cu/ppret/Home 🖒 🎓 🚱 🤹 … e& Atenda. 🗅 CAP 🐵 Coix 🖞 DHS Pints Philos Di FORUS 🖞 FS-Cak Di FS-M-Previous Ver Di family Services Mas Di Language Services Di MMS 🧧 Microsoft Identity Di ONE Worker Portal Di OR-Kdos Verser Di OR-Kdos Verse
Health	PG Net Welcome: Katy Sollenberger Viealth Systems Your Role: SystemAdminRGNet
Home	
Home	PG NET
Facility Information	Welcome to PG Net, Oregon's problem gambling treatment data collection system. The successfulness of any evaluation effort is primarily based on the ability to consistently collect data from clients and concerned others. Although participation in the follow-up portion of our system evaluation is 'voluntary', the collection of admission and discharge data from all participants
Person Information	is considered a standard element and contractual requirement to our system in order to ensure continuity of evaluation capabilities state-wide.
Batch Information	The data that you collect and submit allows our system to conduct ongoing evaluation efforts in the following areas: • Directs policy and practice in the design and implementation of a system of excellence to serve Oregonians with problem pambling treatment needs.
Survey Information	Provides analysis of client utilizing services throughout the state.     Determines effectiveness of the services throughout the state.
User Management	Identifies correlations among treatments offered and client demographics as they relate to treatment success.     Measures treatment cost/utilization factors as they apply to treatment success.
Log Out	Tracks contract compliance to performance standards/metrics as defined in contract language.
	For more information on this system, resources and tools, visit OHA's Problem Gambling Services web page.

3. Click the "Facility Information" tab on the left side margin.

Health	PG Net Health Systems	Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
the : Facility Search		
Home	Facility Search	
Facility Information Person Information	Facility Name or ID:     Includes       Address Line 1:     Includes	
Batch Information	County:	
Survey Information	Zip Code:	
User Management	Include Only Actives?  Search Clear	
	Fecility Search Results:	

4. If the user has access to more than one facility, the user may need to search for the correct facility. To do so, type all or part of the facility name in the "Facility Name or ID" search box and click the Search button. Results will appear at the bottom of the screen. Click on the name of the facility for which the user would like to submit data.

Health	PG Net Health Systems	Welcome: KATY SOLLENBERGER Your Role: SystemAdminPGNet
Home : Facility Search		
Home	Facility Search	
Facility Information	Facility Name or ID: gotham Includes	
Person Information	Address Line 1: Includes	
Batch Information	County:	
Survey Information	Zip Code:	
User Management	Include Only Actives?  Search Clear	
Log Out		
	Facility Search Results: Cotham City Hospital 1736 Bruce Dive	
	SALEM CR 97301	
	OHA   DHS   Oregon.gov	Release-935_Build_20220322.1

5. On the Facility Summary screen, look for the "Make Home Facility" button. If it is present, click it to be able to make changes within this facility. If the "Make Home Facility" button is not visible, skip this step.

Health Authority	PG Net Health Systems					Welcome: KATY SOLLENBERGER Your Role: SystemAdminPGNet
Home : Facility Search : Facility S	Summary					
Home	Gotham Cit	y Hospital		-		
Facility Information	1736 Bruce Drive SALEM, OR 97301			Мар	Satellite	
Person Information	State Identifier:	OR-FAC-201	View Facility Details			_
Batch Information	NPI: EIN:	N/A N/A	Make Home Facility	5	ChargePoin Charging Station	
Survey Information	Status: Web Site:	Active				T.
User Management	Description:					+
Log Out	Active Gamblin	g Clients:	Show All Clients	Google		Kashaard abartauta Man data 2002 Jarma of Lina
	def. Abc	Client Nbr: 123456	Email:			Regularu anoricuta i inapidata ezozzi i renna ori ose
		Admission Date:	Discharge Date: N/A	Providers		
	OR 97209	1/1/2021 Encounters: 0	Phone:	AGEN JAC	KR	^
	Dog, Platinum	Client Nbr: 123456	Email:	NPI: 19029	: AGEN JACK R 50362	
		Admission Date:	Discharge Date: N/A	ALRAUGH	IFFFREV SMITH	

6. When two buttons in the middle of the screen, labeled "View EDI Submissions" and "Submit Claim File," are visible, the user is ready to submit and manage EDI submissions.

Health	PG Net Health Systems				Welcome: KATY SOLLENBERGER Your Role: SystemAdminPGNet
Home : Facility Search : Facility S	iummary				
Home	Gotham City	/ Hospital			
Facility Information	1736 Bruce Drive SALEM, OR 97301			Map Satellite	[2]
Person Information	State	OR-FAC-201	View Facility Details	l l	
Batch Information	NPI:	N/A	Undo Home Facility	ChargePoin	
Survey Information	EIN: Status: Web Site:	N/A Active	View EDI Submissions		<u>.</u>
User Management	Description:		Submit Bub The		+
Log Out	Active Gambling	Clients:	Show All Clients	Google	exhaud abortours Man data 20022 Terms of Use
Home Facility Set	def Abc	Client Nbr: 123456 Admission Date:	Email: Discharge Date: N/A	Providers:	governe encriteauxe miliegi veise te 2022 Territa UT Obe
Gotham City Hospital		1/1/2021		AGEN JACK R	
1736 Bruce Drive SALEM, OR 97301	UK 97209	Encounters: 0 Client Nhr: 123456	Phone:	Description: AGEN JACK R	-

7. To submit a file, click the "Submit Data File" button on the Facility Summary screen.



8. There are two options for uploading a file. The user can drag the file from their file folder, or the user can click in the box and select a file.

Health	PG Net Health Systems	Welcome: KATY SOLLENBERGER Your Role: SystemAdminPGNet
Home Facility Search   Facility S	ummary - 1 Facility UploadFile	
Home	Gotham City Hospital	
Facility Information	1736 Bruce Drive SALEM, OR 97301	Service Files Upload
Person Information	To submit X12 837P formatted files, drag and drop files into the box below or click in the box to upload.	
Batch Information		
Survey Information	To upload service files, click here or drag and drop files.	
User Management		
Log Out	Back to Facility Summary	
Home Facility Set		
Gotham City Hospital		
1736 Bruce Drive SALEM, OR 97301		
	OHA   DHS   Oregon.gov	Release-935_Build_20220322.1

9. To upload, the system will open the file folders and select the file, click on open and the file will be placed into the system.

	is PC → Desktop			0 0 0	earch Desktop		Work items - b X	
					0 <b>-</b>			tã t≞ t⊕ 📳
Irganize View fold	er ^				8== • []		Family Services Ma 🕒 Language Servi	ices 🗋 MMIS
📥 OneDrive - Orego 🦳	Name	Status	Date modified	Туре	Size			
This DC	ACR Client deletion	0	3/17/2022 8:06 AM	Text Document	1 KB			Welcome: KATY SOLLENBERG
	ACR PT MERGE	0	3/8/2022 3:01 PM	Text Document	1 KB			Your Role: SystemAdminPGN
J SD Objects	ADOS Ticket breakup for sprints	0	3/16/2022 2:31 PM	Text Document	1 KB			
Desktop	GOTHAM_testing_wrong_DIAG	0	3/25/2022 9:07 AM	Text Document	1 KB			
Documents	GOTHAM_testing_wrong_NPI	0	3/21/2022 2:18 PM	Text Document	1 KB			
Downloads	Health Analytics Requests	0	3/7/2022 3:42 PM	Text Document	1 KB			
👌 Music	PGnet ADOS Tickets	0	3/15/2022 3:37 PM	Text Document	1 KB			Constant Film Under d
E Pictures	PGNET EDI BAD DIAG	0	3/25/2022 10:26 AM	Text Document	1 KB			Service Files Opload
Videos	PGNet EDI	0	3/14/2022 11:16 AM	Text Document	1 KB			
OSDisk (C:)	PGNet Notes	0	3/4/2022 1:54 PM	Text Document	1 KB			
🛫 OR0272813 (H:)							bload	
🛫 Shared (I:)							Joud.	
🛫 Shared (S:)								
Network							d drop files	
File n	ame:			Custo	m files	~	la arop mes.	
	[1					-		
					pen Can	cei	a.	
og Out								
/g our	Back to Facility Summ	ary						
Home Facility Se	et							
Gotham City Hosp	lital							
1736 Bruce Drive								
SALEM, OR 97301								

10. In the example below, the file has been successfully uploaded. When successful, a check mark appears briefly over the top of the file, and there is no error message.

	https://healthsystems-training.oha.state.or.us/pgnet/Facility/UploadFile/79	合 合 🖷 🙁 …
🛅 DHS-OHA Favorites  🖺 API Ti	me & Attenda 💾 CAPI 🍙 Citrix 🎦 DHS Printers 🎦 EDMS 🎦 FORMS 🎦 FS Calc 🎦 FSM - Previous Ver	Family Services Ma     Language Services     MMIS
Health	PG Net Health Systems	Welcome: KATY SOLLENBERGER Your Role: SystemAdminPGNet
ome : Facility Search : Facility S Home	Gotham City Hospital	
Facility Information	1736 Bruce Drive SALEM, OR 97301	Service Files Upload
Person Information	To submit X12 837P formatted files, drag and drop files into the box below or click in the box	to upload.
Batch Information	- B	
Survey Information	0.5 KB	
User Management	GOTHAM_tes	
Log Out		
Home Facility Set	Back to Facility Summary	
Gotham City Hospital		
1736 Bruce Drive SALEM, OR 97301		
	OHA   DHS   Oregon.gov	Release-935_Build_20220322.1

- 11. If the file has **not** uploaded successfully, an X will appear over the file along with an error message.
- 12. Once the user has completed the upload, return to the Facility Summary screen by clicking the "Back to Facility Summary" button.

$\leftarrow$ $\rightarrow$ C $\Diamond$	10	£ €			
🛅 DHS-OHA Favorites 🛛 API Tir	ne & Attenda 🖒 CAPI 🄞 Citrix 🖒 DHS Printers 🖒 EDMS 🖒 FORMS 🏠 FS Calc 🖒 FSM - Previous Ver 🖒 Family Services Ma 🖒 Language Services	C MM	;		>
Health Authority	PG Net W Health Systems Yo	lcome: K ur Role: S	ATY SOL ystemAc	LENBER IminPGI	GER Net
Home	Gotham City Hospital		110000		1.001
Facility Information	1736 Bruce Drive SALEM, OR 97301	Service	e Files	Uploa	d
Person Information	To submit X12.837P formatted files, drag and drop files into the box below or click in the box to upload				
Batch Information					
Survey Information	0.5 КВ				
User Management	GOTHAM_tes				
Log Out					
Home Facility Set	Back to Facility Summary				
Gotham City Hospital					
1736 Bruce Drive SALEM, OR 97301					
	OHA   DHS   Oregon.gov F	elease-93	5_Build	202203	22.1

13. The user can view the EDI submission by clicking on the View EDI Submission button.

ome Facility Search Facility Sun	imary				
Home	Gotham City Hospit	tal		Map Satellite	
Person Information	SALEM, OR 97301 State Identifier: O	R-FAC-201	View Facility Details		
atch Information	EIN: 12 Status: Ac	13456789 13456789	Undo Home Facility	ChargePoin Charging Station	
urvey Information Jser Management	Web Site: Description:		Submit Data File		
og Out	Active Gambling Clients:		Show All Clients 🗌	Google	
Home Facility Set	Arellano, Lisa Leyla 2223 Concord Lane Terrebonne, OR 97756	Client Nbr: Test1475LLA73 Admission Date: 4/15/2020 Encounters: 11	Email: lisaarellano80@domain.com Discharge Date: N/A Phone: (971) 373-3473	Providers:	Keyboard shortouts Map data @202
SALEM, OR 97301	Banks, Paulina Michelle	Client Nbr: Test5560PMB79	Email: paulinabanks93@domain.com Discharge Date: N/A	ANDERSON, CRAIG D Description: ANDERSON, CRAIG D NPI: 1497965586	🐻 Rem
	Sutherlin, OR 97479	Encounters: 31	Phone: (503) 555-2832	AREFORD, CHARLES	
	Black, Quentin Tanner	Client Nbr: Test1173QTB63	Email: quentinblack14@domain.com	Description: AREFORD, CHARLES NPI: 1720168941	🛅 <u>Rem</u>
	6881 Orchard Drive Gold Hill, OR 97525	Admission Date: 4/27/2021 Encounters: 3	Discharge Date: N/A Phone: (541) 756-7497	BARTLETT, CRYSTAL M Description: BARTLETT, CRYSTAL M	
	Booker Xiomara Cassandra	Client Nbr: Test3946XCB65	Email:	NPI: 1467719773	a Rem

14. From this screen the user can look at the batch files. Notice the date of submission and that the system will put the last submission at the top of the list. Additionally, the system will rename the file as a PG Encounter- [number]. The numbers are not

sequential by facility but by the system as a whole. If needed, use any or all of the three search fields to locate specific files.

15. Click on a "Source File" link to view the file information that was submitted.

ome : Facility Search : Facility Summ	nary : Treatment Episode Summary : Batch Explorer		
Home 🖑	Batch Explorer		
Facility Information			
Person Information	Batch Status:	~	
Batch Information	From Date: mm/dd/yyyy		
Survey Information	in Date. [mm/dd/yyyy	Search Clear	
User Management			
Log Out	Batch Explorer Results:		19 Batches Found
	Gotham City Hospital	Services Reported 1	Submission Date 2/21/2022
Home Facility Set	Status: Contains Errors	Errors Found: 2	Source File
Gotham City Hospital	Gotham City Hospital		
Gotham City Hospital	PG-Encounter-157	Services Reported: 1	Submission Date: 3/15/2022
1736 Bruce Drive SALEM, OR 97301	Status: Accepted	Errors Found: 1	Source File
	Gotham City Hospital		
	PG-Encounter-156	Services Reported: 1	Submission Date: 3/15/2022
	Status: Accepted	Errors Found: 0	Source File
	Gotham City Hospital		
	PG-Encounter-153	Services Reported: 66	Submission Date: 3/14/2022
	Status: Contains Errors	Errors Found: 69	Source File
	Gotham City Hospital		
	PG-Encounter-152	Services Reported: 0	Submission Date: 3/14/2022
	Status: Failed	Errors Found: 1	Source File
	Gotham City Hospital		
	PG-Encounter-151	Services Reported: 66	Submission Date: 3/14/2022
	Statur Contains Surve	From Found 69	SLOreana anu

16. The example below show	vs a file after it was s	submitted.
----------------------------	--------------------------	------------

Health	PG Net Health Systems				
lome : Batch FileDetails					
Home	Batch File Details				
Facility Information	Facility Name: Gotham City Hospital				
Person Information	Facility Identifier:     OR-FAC-201       Batch Identifier:     PG-Encounter-227				
Batch Information					
Survey Information	1 ISA*00* *00* *ZZ*0R-FAC-225 *ZZ*987654321 *210512*0808*^*00501*111100012*1*P*:~ 2 GS				
User Management	3 ST***~ 4 BHT****20211021*0909*~				
Log Out	5 HL*1**20*~ 6 NM1*85*2*G0TH4M_CTTY_HOSPTT4I *****XX*1234567890~				
Home Facility Set	7 REF**~ 8 HL*2*1*22*0~				
Gotham City Hospital	9 SBR********~ 10 NM1*IL*1*ARELLANO*LISA*LEYLA***MI*Test1475LLA73~				
SALEM, OR 97301	11 DMG*D8*20200622*M~				
	12/NM1*PK*2*H5DG*****15~ 13/CLM*00001111*45***02:B:1*Y*A*Y*Y~				
	14HI*ABK:F630~				
	15 NM1*82*1*ANDERSON*CRAIG****XX*1497000586~				
	16 SV1*HC:HHHHH+*45*UN*3***1~				
	17 DTP*472*D8*20210101~				
	18 SE*16*32225000~				
	19 GE*1*31290~				
	20 IEA*1*00000002~				
	OHA   DHS   Oregon.gov				

17. Use the links in the banner bar at the top of the page to move back to the Batch Explorer section, or use the navigation links on the left to navigate to other PG Net screens.

Health	PG Net Health Systems					
Iome : Batch FileDetails						
Home	Batch File Details					
Facility Information	Facility Name: Gotham City Hospital					
Person Information	Facility Identifier:     OR-FAC-201       Batch Identifier:     PG-Encounter-227					
Batch Information						
Survey Information	2 GS*******~					
User Management	3 ST***~ 4 BHT***20211021*0909*~					
Log Out	5 HL*1**20*~ 6 N#************************************					
Home Facility Set	7 Rt+~ 8 HL*2*1*22*0~					
Gotham City Hospital	9 SBR******~~					
1736 Bruce Drive	10NM1*IL*1*ARELLANO*LISA*LEYLA***MI*Test1475LLA73~					
SALEM, OR 97301	11 DMG*D8*20206622*M~					
	12 NM1*PR*2*HSDG******15~					
	13CLM*00001111=45***02:8:1*Y*A*Y*Y~					
	14 HI*AB: F630~					
	15NM1*82*1*ANDERSON*CRAIG****XX*1497000586~					
	16 SV1*HC:HHHHH+45*UN*3***1~					
	1/01P*4/2*08*20210101~					
	1855-10-52225000~					
	190E_1_21730~					
	501 EV- 7.00000005%					

18. Click the "PG Encounter" number link to review a file's status.

lity Information for the second secon	Batch Status: From Date: mm/dd/yyyy To Date: mm/dd/yyyy	v Fr	
erson Information fraction fra	Batch Status: From Date: mm/dd/yyyy To Date: mm/dd/yyyy	v Fr	
latch Information	From Date: mm/dd/yyyy To Date: mm/dd/yyyy		
atch Information	To Date: mm/dd/yyyy		
urvey Information	lo Date: [mm/dd/yyyy		
		Search Clear	
Jser Management			
og Out	atch Explorer Results:		19 Batches Found
G	otham City Hospital		
	3-Encounter-227	Services Reported: 1	Submission Date: 3/21/2022
Home Facility Set	atus: Contains Errors	Errors Found: 2	Source File
Gotham City Hospital	otham City Hospital	0	0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
1736 Bruce Drive	a-Encounter-15/	Services Reported: 1	Submission Date: 3/15/2022
SALEM, OR 97301	atus: Accepted	Errors round. 1	Sourcerine
	S-Encounter-156	Services Reported: 1	Submission Date: 3/15/2022
St	atus: Accepted	Errors Found: 0	Source File
G	otham City Hospital		
PC	S-Encounter-153	Services Reported: 66	Submission Date: 3/14/2022
St	atus: Contains Errors	Errors Found: 69	Source File
G	otham City Hospital		
PC	G-Encounter-152	Services Reported: 0	Submission Date: 3/14/2022
St	atus: Failed	Errors Found: 1	Source File
G	otham City Hospital		
PC	<u>3-Encounter-151</u>	Services Reported: 66	Submission Date: 3/14/2022

19. This page shows how many errors were reported for the selected file as a whole. There can be more than one error for each individual client. The services reported are the number of individual services, so the number of errors can be greater than the number of services reported. For a list of all common errors, see appendix B.

Health	PG Net Health Systems					Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
Home (Batch FileDetails) (Batch S	ummary					
Home	Gotham City Hos	pital				
Facility Information	1736 Bruce Drive SALEM, OR 97301			Errors Found: Patient ID: Test1475LLA73 - NPI not found for the	Service Date: 1/1/2021	2
Person Information	Batch Number:	PG-Encounter-227	View Batch Header	Gambling Case Number facility or valid Specialty Type. ValidationError	Critical	
Batch Information	Submission Date: Control Number:	3/21/2022 111100012	View Source File	Patient ID: Test1475LLA73 - Service Type is invalid. ForeignKeyError	Service Date: 1/1/2021 Critical	
Survey Information	Batch Status: Start Time:	Contains Errors 3/21/2022 3:38:25 PM				
User Management	End Time:	3/21/2022 3:38:25 PM				
Log Out	Service Reported:		1			
Home Facility Set	Claim: 00001111 Patient ID: Test147511 473	Status: Contains Errors	Posted: N/A			
Gotham City Hospital	Procedure: HHHHH	Units: 3	Billed: 45.00 @ Review			
1736 Bruce Drive SALEM, DR 97301						
			OHA   DHS   Oregon.gov			Release-935_Build_20220322.1

20. Click on an individual claim number to see the details of a claim. For this example, there is no matching client data in PG Net. This client would need to be entered into the system; then those submissions would need to be resubmitted via EDI or entered manually.

Health	PG Net Health Systems				Welcome: Katy Sollenberger Your Role: ContributorPGNet
Nome : Facility Summary : Batch I Home	Batch Details				
Person Information	Facility Name: Batch Number: Batch Status:	Gotham City Hospital PG-Encounter-249 Contains Errors			
Home Facility Set Gotham City Hospital 1750-000 Shine Salatin, on 9780	Service Date: Case Number: Service Provider: Place Of Service: Procedure Code: Modifier: Units: Billed Amount Diagnosis Code: Tack to Batch Summary	1/1/2021 Тест14775LLA73 1497000586 2 ННННН 3 45.00 <b>Primary:</b> F630	Errors Found: Patient ID. Test14775LLA73 not found. MatchWoFound Patient ID. Test14775LLA73 - Service Type is invalid. ForeignKeyError	Service Date: 1/1/2021 Critical Service Date: 1/1/2021 Critical	2

21. For batches that are ready to be viewed, click the small eye icon or the claim link to review the file.

Health	PG Net Health Systems					Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
Home : Batch FileDetails : Batch Sun	amary					
Home Facility Information	Gotham City Hos	pital		Errors Found: Claim number 11156739070 has been submitted on a	Service Date: 3/31/2021	69
Person Information	Batch Number:	PG-Encounter-153	View Batch Header	transaction before. EDI032	Error	
Batch Information	Submission Date: Control Number: Batch Type:	3/14/2022 000380009 PG Net Encounter Process	View Source File	Claim number 11156735840 has been submitted on a transaction before.	Service Date: 8/5/2021	
Survey Information	Batch Status: Start Time:	Contains Errors 3/14/2022 10:53:25 AM		Claim number 11156738110 has been submitted on a transaction before	Error Service Date: 6/28/2021	
User Management	End Time:	3/14/2022 10:53:27 AM		EDI032	Error	
Log Out	Service Reported:		66	Patient ID: Test1475LLA73 - Invalid Diagnosis code. ForeignKeyError	Service Date: 2/18/2021 Critical	
Home Facility Set	Claim: <u>11156735480</u> Patient ID: Test1173QTB63 Procedure: H0004	Status: Contains Errors Service Date: 8/20/2021	Posted: N/A Place: 11 Billed: 34.58 @ Penjew	Guent ID: Test1475LLA73 - Service Type is invalid. ForeignKeyError	Service Date: 4/13/2021 Critical	
Gotnam City Hospital 1796 Bruce Drive SALEM, OR 97301	Claim: <u>11156740710</u> Patient ID: Test5560PMB79 Procedure: T1016	Status: Accepted Service Date: 8/18/2021 Units: 2	Posted: <u>OR-PG-Encounter-S724</u> Place: 11 Billed: 51.58	Patient ID: lest14/SLLA/3 - Invalid Diagnosis code. ForeignKeyError	Service Date: 4/13/2021 Critical	
	Claim: <u>11156735630</u> Patient ID: Test3946XCB65 Procedure: H0004	Status: Contains Errors Service Date: 8/18/2021 Units: 2	Posted: N/A Place: 11 Billed: 63.84 <b>@</b> . <u>Review</u>			
	Claim: 11156736750 Patient ID: Test6200SNB49 Procedure: 90832	Status: Contains Errors Service Date: 8/17/2021 Units: 1	Posted: N/A Place: 11 Billed: 74.17 <b>© Review</b>			
	Claim: <u>11156740570</u> Patient ID: Test5560PMB79 Procedure: T1016	Status: Accepted Service Date: 8/16/2021 Units: 4	Posted: <u>OR-PG-Encounter-S723</u> Place: 11 Billed: 103.16			
	Claim- 11156734760	Statue: Contains From	Postad: N/A			

22. The file details and an error message will display. For this example, the NPI for the provider is invalid, or the provider had not been added to the facility

Health	PG Net Health Systems			Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
Home : Batch FileDetails : Batch Sun	nmary I Encounter Correct			
Home	Gambling Encounter Bat	ch Correction Form		
Facility Information	Arellano, Lisa		Gotham City Hospital	
Person Information	Client Number: Test1475LLA73 2223 Concord Lane		FacilityID: OR-FAC-201 1736 Bruce Drive	
Batch Information	Terrebonne, OR 97756		SALEM, OR 97301	
Survey Information	Rendering Provider NPI (149700     Batch Service Type (HHHHH) is i	0586) is invalid. nvalid.		
User Management	Service Date*	01/01/2021	Ŧ	Status: Not Submitted None
Log Out	Counselor*	Select a Service Provider	~	0.00 x 3
1	1	The Counselor field is required.		\$0.00
Home Facility Set	Place of Service Type*	02- Telehealth	~ L	Denied \$45.00
2736 Bruce Drive	Service Type*	Select a Service Type	~	
SALEM, OR 97301		The Service Type field is required.		
	Modifier		~	
	Units*	3		
	Billed*	45.00		
	Diagnostic Codes			
	Primary *	F63.0 - Gambling disorder	~	
	Secondary		~	
	Informational			Release 935 Ruild 20220322 1

23. Navigate to the Facility Summary screen, add the missing provider, return to this screen, and update the erroneous field. For invalid procedure code errors see Appendix C

Health	PG Net Health Systems			Welcome: Katy Sollenberger Your Role: SystemAdminPGNe
Home : Batch FileDetails : Batch Sum	mary : Encounter Correct			
Home	Gambling Encounter Bat	ch Correction Form		
Facility Information	Arellano, Lisa		Gotham City Hospital	
Person Information	Client Number: Test1475LLA73 2223 Concord Lane		FacilityID: OR-FAC-201 1736 Bruce Drive	
Batch Information	Terrebonne, OR 97756		SALEM, OR 97301	
Survey Information	Rendering Provider NPI (149700     Batch Service Type (HHHHH) is in	0586) is invalid. nvalid.		
User Management	te*	01/01/2021	E.	Status: Not Submitted None
Log Out	Counselor*	Select a Service Provider	~	0.00 x 3
Home Facility Set	Place of Service Type*	Select a Service Provider ANDERSON, CRAIG D - NPI: 1497965586 AREFORD, CHARLES - NPI: 1720168941		\$0.00 Denied \$45.00
Gotham City Hospital 1736 Bruce Drive SALEM, OR 97301	Service Type*	BARTLETT, CRYS <sup>14</sup> AL M - NPI: 1467719773 BARTLETT, CRYSTAL M - NPI: 1467719773 BALIGHMAN, JARED - NPI: 1508248006		
	Modifier	DOWNHILL, JACK - NPI: 1467522813 DRAGULIN, MARIA - NPI: 1245609502		
	Units*	JOHNSTON, KELLY - NPI: 1144301557 LANCELIN, REBEKAH R - NPI: 1700289915		
	Billed*	ROBINSON, JORDAN J - NPI: 1326185117 SPOFFORD, SARAH F - NPI: 1184992984		
	Diagnostic Codes	STEPHENS, CAROL L - NPI: 1649649211		
	Primary *	TREASURE, LISSA M - NPI: 1174098826 VALDIVIA, GLORIA - NPI: 1972086718		
	Secondary	VANDIVER, ROBERT F - NPI: 1457444390	~	

24. When finished, click the Save button.

Health	PG Net Health Systems			Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
User Management	Service Date*	01/01/2021		H0004- Individual Gambling Counseling and
Log Out	Counselor*	ANDERSON, CRAIG D - NPI: 1497965586	~	therapy 26.60
Home Facility Set	Place of Service Type*	02- Telehealth	~	x 3 \$79.80
Gotham City Hospital	Service Type*	H0004- Individual Gambling Counseling and therapy	~	
1736 Bruce Drive SALEM, OR 97301	Modifier		~	
	Units*	3		
	Billed*	79.80		
	Diagnostic Codes			
	Primary *	F63.0 - Gambling disorder	~	
	Secondary		~	
	Informational		~	
	Informational	$\sim$	~	
	[	Back to Treatment Summary		
		OHA   DHS   Oregon.gov		Release-935_Build_20220322.1

25. When successful, a very brief message will appear at the top of the screen to indicate that the encounter record has successfully saved.

Health	PG Net Health Systems				Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
Home : Batch FileDetails : Batch !	Summary : Encounter Correct	Encounter Edit			
Home	S Encounter	record successfully saved.			8
Facility Information	Gambling En	counter Entry			
Person Information	Arellano, Lisa		Gotham City Hospit	al	
Batch Information	Client Number: Test 2223 Concord Lane	1475LLA73	FacilityID: OR-FAC-201 1736 Bruce Drive		
Survey Information	Terrebonne, OR 977	756	SALEM, OR 97301		
User Management	Service Date*	01/01/2021			
Log Out	Identifier* Counselor*	OR-PG-Encounter-S748 ANDERSON, CRAIG D - NPI: 149	7965586 🗸	Status: Accepted H0004- Individual Gambling Counseling and	
Home Facility Set	Place of Service Type*	02- Telehealth	~	therapy 26.60 x 3	
1736 Bruce Drive	Service Type*	H0004- Individual Gambling Cou	nseling and 😽	\$79.80	]
and the state	Modifier		~		
	Units*	3			
		OHA	DHS   Oregon.gov		Release-935_Build_20220322.1

26. When the claim has been corrected and saved, return to the Batch Summary screen. The claim is now corrected and appears with a white background (white service records have been successfully corrected).

Health	PG Net Health Systems				Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
a di	SALEINI, UK 97501			found for the Gambling Case Number	
Person Information	Batch Number:	PG-Encounter-227	View Batch Header	facility or valid Specialty Type.	Critical
Batch Information	Submission Date:	3/21/2022	View Source File	Patient ID: Test1475LLA73 - Service	Service Date: 1/1/2021
Survey Information	Control Number:	111100012		Type is invalid. ForeignKeyError	Critical
User Management	Batch Type: Batch Status:	PG Net Encounter Process Accepted			
Log Out	Start Time: End Time:	3/21/2022 3:38:25 PM 3/21/2022 3:38:25 PM			
Home Facility Set					
Gotham City Hospital	Service Reporte	.d:	1		
1736 Bruce Drive SALEM, OR 97301	Claim: 00001111	Status: Corrected	Posted: <u>OR-PG-</u> Encounter-S748		
	Patient ID: Test1475LLA73	Service Date: 1/1/2021	Place: 2		
	Procedure: HHHH	H Units: 3	Billed: 45.00		
	Correction: Procedure: H0004 Modifier: N/A	Units: 3	Billed: 79.80		
			OHA   DHS   Oregon.gov		Release-935_Build_20220322.1

27. Claims that are yellow have been accepted from the original submission. Claims in salmon need attention and have not been successfully submitted.

Health P	PG Net Health Systems					Welcome: Katy Sollenberger Your Role: SystemAdminPGNe
ome : Batch FileDelails : Batch Sum	тагу					
Home	Gotham City Hosp	bital		Errors Found:		69
Facility Information	SALEM, OR 97301			Claim number 11156739070 has been submitted on a transaction before.	Service Date: 3/31/2021	<u>^</u>
Person Information	Batch Number:	PG-Encounter-153	View Batch Header	ED1032	Error	
Batch Information	Control Number: Batch Type:	000380009 PG Net Encounter Process	View Source File	Claim number 11156735840 has been submitted on a transaction before.	Service Date: 8/5/2021	
Survey Information	Batch Status: Start Time:	Contains Errors 3/14/2022 10:53:25 AM		Claim number 11156738110 has been submitted on a transaction before	Error Service Date: 6/28/2021	
User Management	End Time:	3/14/2022 10:53:27 AM		EDI032	Error	
Log Out	Service Reported:		66	Patient ID: Test1475LLA73 - Invalid Diagnosis code. ForeignKeyError	Service Date: 2/18/2021 Critical	
Home Facility Set	Modifier: N/A	onnar 1		Patient ID: Test1475LLA73 - Service Type is invalid. ForeignKeyError	Service Date: 4/13/2021 Critical	
Gotham City Hospital	Claim: 11156738770 Patient ID: Test6984AGB69 Procedure: T0001	Status: Accepted Service Date: 8/26/2021 Units: 8	Posted: <u>OR-PG-Encounter-S736</u> Place: 11 Billed: 212.80	Patient ID: Test1475LLA73 - Invalid Diagnosis code. ForeignKeyError	Service Date: 4/13/2021 Critical	
SALETH, DO PODU	Claim: <u>11156736480</u> Patient ID: Test1173QTB63 Procedure: H0004	Status: Contains Errors Service Date: 8/20/2021 Units: 1	Posted: N/A Place: 11 Billed: 34.58 @ Review			
	Claim: <u>11156740710</u> Patient ID: Test5560PMB79 Procedure: T1016	Status: Accepted Service Date: 8/18/2021 Units: 2	Posted: <u>OR-PG-Encounter-S724</u> Place: 11 Billed: 51.58			
	Claim: <u>11156735630</u> Patient ID: Test3946XCB65 Procedure: H0004	Status: Contains Errors Service Date: 8/18/2021 Units: 2	Posted: N/A Place: 11 Billed: 63.84 <b>@</b> . <u>Review</u>			
	Claim: 11156736750 Patient ID: Test6200SNB49	Status: Contains Errors Service Date: 8/17/2021	Posted: N/A Place: 11			
			OHA   DHS   Oregon.g	jov:		Release-935_Build_20220322.

28. When all claims within a file have been corrected and accepted, the batch status will display a "Accepted" in green.

Health	PG Net Health Systems				Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
Home : Batch FileDetails : Batch S	Summary				
Home	Gotham City	Hospital			
Facility Information	1736 Bruce Drive SALEM, OR 97301			Errors Found: No Error to Display	0
Person Information	Batch Number:	PG-Encounter-156	View Batch Header		
Batch Information	Submission	3/15/2022	View Source File		
Survey Information	Date: Control	10000012		N	
User Management	Batch Type:	PG Net Encounter Process		hŝ	
Log Out	Start Time: End Time:	3/15/2022 4:21:07 PM 3/15/2022 4:21:08 PM			
Home Facility Set					
Gotham City Hospital	Service Reported	:	1		
1736 Bruce Drive SALEM, OR 97301	Claim: 00000001	Status: Accepted	Posted: <u>OR-PG-</u> Encounter-S739		
	Patient ID:	Service Date: 1/1/2021	Place: 2		
	Procedure: H2027	Units: 3	Billed: 45.00		
			OHA   DHS   Oregon.gov		Release-935_Build_20220322.1

29. A message may appear for some claims about an invalid diagnosis code. Typically, this will mean that one of the secondary or informational diagnosis codes submitted with the service is not available in the PG Net system. In this case, click on the "Review" button. The invalid diagnosis will not appear. To fix or resubmit, click the Save button. The claim should now be accepted.

Health	PG Net Health Systems				Welcome: Katy Sollenberger Your Role: SystemAdminPGNet
Home : Batch Explorer Batch Sum	mary				
Home	Gotham City Hos	spital			
Facility Information	1736 Bruce Drive SALEM, OR 97301			Errors Found: Patient ID: Test1475LLA73 - A diagnosis code of F630,	1 Service Date: 1/1/2021
Person Information	Batch Number: Submission Date:	PG-Encounter-243 3/25/2022	View Batch Header	F6389, or Z630 is required. ValidationError	Critical
Batch Information	Control Number: Batch Type:	101233012 PG Net Encounter Process	View Source File		
Survey Information	Batch Status:	Contains Errors			
User Management	End Time:	3/25/2022 10:11:08 AM			
Log Out	Service Reported:		1		
Home Facility Set	Claim: 000013211	Status: Contains Errors	Posted: N/A		
Gotham City Hospital	Patient ID: rest14/5LLA73 Procedure: H2027	Service Date: 1/1/2021 Units: 3	Place: 2 Billed: 45.00 O Review		
178 Broc Dra 24250, 07 9733			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
			OHA   DHS   Oregor	rgov	Release-935_Build_20220322.1

# Appendix B- List of Common Batch Errors

BatchErrorCode	BatchErrorMessage
BatchFormat	The Submitted File has Formatting Errors
DuplicateData	There are duplicate values in the data.
EDI001	EDI File was not found at the specified path.
EDI002	Not a valid EDI X12 formatted file or missing header.
EDI003	Not a valid EDI X12 formatted file or missing footer.
ED1004	Invalid element separator specified for X12 files. Only * is supported.
EDI005	Invalid sub-element separator specified for X12 files. Only : is supported.
EDI006	Invalid end of segment specified for X12 files. Only ~ is supported.
ED1007	The number of generated service transactions does not match the count of SV1 segments.
EDI008	Unhandled BuildServiceTran error in claim starting on line {0}.
ED1009	Number of segments does not match count on SE segment on line {0}.
EDI010	Number of transaction sets does not match count on GE segment on line {0}.
EDI011	Number of groups does not match count on IEA segment.
EDI012	Invalid number of elements for segment type {0} on line {1}.
EDI013	Invalid segment type {0} found on line {1}.
EDI014	Required BHT segment(s) missing from EDI file.
EDI015	Missing a NM1 type 85 segment (billing facility) in the BHT group.
EDI016	Missing HL segments (subscriber/patient groups) in the BHT group.

EDI017	Missing a NM1 type IL segment (insured/patient) in the HL group on line {0}.
EDI018	Missing a CLM segment (claim) in the HL group on line {0}.
EDI019	Missing a HI segment (diagnosis) in the CLM (claim) group on line {0}.
EDI020	Missing a SV1 segment (service) in the CLM (claim) group on line {0}.
EDI021	Missing a DTP type 472 segment (service date) in the SV1 (service) group on line {0}.
EDI022	Missing NM1 type 82 segment (rendering by/provided by) in the CLM (claim) group on line {0}.
EDI023	Invalid date or time on BHT segment on line {0}. Proper formats are yyyyMMdd and HHmm.
EDI024	Invalid total claim charge amount on CLM segment on line {0}.
EDI025	Invalid numeric for diagnosis pointer (index) on SV1 segment on line {0}.
EDI026	Custom Invalid numeric in line item charge amount on SV1 segment on line {0}.
EDI027	Invalid numeric in unit count on SV1 segment on line {0}.
EDI028	Invalid service start date on services DTP segment on line {0}.
EDI029	Invalid service end date on services DTP segment on line {0}.
EDI030	The NPI or EIN facility from file, does not match the facility which uploaded the file.
EDI031	Control number check, batch was sucessfully processed before.
FieldNull	The field is necessary for processing and it has no value.
ForeignKeyError	Value violates FK constraint.
GEN001	Generic error for when conditions do not match any existing error code (Fallback code)
MatchNotFound	Batch value has no corresponding match in Compass.
NET001	.Net Exception Encountered.
SQL001	Database SQL Exception Encountered.
ValidationError	The field data failed our validation rules.

# Appendix C- List PG Net Procedure Codes

In PG Net, there are 2 different types of Procedure codes, the *Per Occurrence* code, and the *Actual Cost* code.

#### Per Occurrence Codes

For *Per Occurrence* codes, enter the number of units (number of occurrences) and the amount billed. *Per Occurrence* codes will only provide credit to the amount that OHA allows for the code. If the amount billed is greater than the allowable amount, the remainder of what was billed will show as Denied.

Service Date*	09/01/2021		
Counselor*	Select a Service Provider	~	Status: Not
Place of Service Type*	Select a Place of Service Type	~	H0032- Gambling Service Plan Dev
Service Type*	H0032- Gambling Service Plan Development	~	
Modifier		~	
Units*	1		
Billed*	106.40		

Code	Description
H0001	Problem Gambling Assessment
H0001HF	Assessment Complexity – Co-Occurring Substance Use Disorders and Problem Gambling
90785	Assessment Complexity Add On, per 15 min
H0001HE	Assessment Complexity – Co-Occurring Mental Health & Problem Gambling Assessment
H0001HH	Assessment Complexity – Co-Occurring Mental Health, SUD and Problem Gambling Assessment
H0032	Gambling Service Plan Development
H0032HF	Gambling/SUDs Service Plan Development
H0032HE	Gambling/Co-Occurring MH Service Plan Development
H0032HH	Gambling/Co-Occurring MH/SUD Service Plan Development
T1023	Behavioral Health Screening, per 15 min
H0004	Individual Gambling Counseling and therapy, per 15 min
H0004TF	Intensive Outpatient Gambling Treatment Individual Gambling Counseling, per 15 minutes
H0004HF	Co-Occurring Gambling and SUD's counseling and therapy, per 15 minutes

H0004HE	Co-Occurring Gambling / Mental Health Counseling and therapy, per 15 minutes
H0004HH	Co-Occurring Gambling / SUD/ Mental Health Counseling and therapy, per 15 minutes
H0005	Gambling Treatment counseling, group per 15 min
H0005HF	SUD's group per 15 minutes
H0005HE	Mental Health Group Counseling per 15 minutes
H0005TF	Intensive Outpatient Gambling Treatment counseling group, per 15 minutes
90846	Family Psychotherapy (without the patient present), per service. Service must be longer than 26 minutes.
90847	Family Psychotherapy (conjoint psychotherapy) with the patient present, per service. Service must be longer than 26 minutes.
90849	Multiple-family group psychotherapy, per service. Service must be longer than 26 minutes.
90792	Psychiatric Diagnostic Interview, with medication services
90832	Psychotherapy, with patient and/or family member, per 30 minutes
90837	Psychotherapy, with patient and/or family member, per 60 minutes
96131	Psychological Testing with interpretation and report, per hour
90833	Medication Management, 30 minutes
90836	Medication Management, 45 minutes
90838	Medication Management, 60 minutes
H2027	Individual counseling continuing care, per 15 min
G2100	Continuing Care Group Services, per 15 min for gambler and/or family member
H0038	Peer Delivered Services, per 15 min
H2013	Psychiatric health facility service, per diem Josephine County Respite Services
H0012	Problem Gambling Respite services; acute/sub-acute (residential addiction program), per diem for Baker County Respite Services

H0019	Residential gambling treatment service, per diem for Marion County Bridgeway Residential Program Only. For occupied beds only
H0019RB	Residential gambling treatment service, per diem for Marion County Bridgeway Residential Program only. For reserved beds only.
T1016	Case management, per 15 min
T1013	Sign language/oral interpreter service, per 15 min
99203	Eval &management-physical health visit-new patient, 30 minutes max length
99213	Evaluation and management physical health visit, established patient, 15 minutes maximum length
E0001	Engagement referral/consultation services, per 15 minutes
E0011	Engagement with referral, 7 minutes or less. Per Occurrence
G2012	Engagement with current client, per occurrence 0-15 minutes.
D0001	Program Development, per 15 min
P0001	Pathways. Referral Pathway Activities per 15 min
T0001	Training Time, Per 15 minutes

#### Actual Cost Codes

For the Actual Cost codes, enter the amount billed rounded up to the next whole dollar amount in the number of units and the amount billed.

Counselor*	ANDERSON, CRAIG D - NPI: 1497965586
Place of Service Type*	02- Telehealth
Service Type*	G0035- Training Costs
Modifier	
Units*	62
Billed*	61.52
Diagnostic Codes	
Primary *	F63.0 - Gambling disorder
Secondary	
Informational	
Informational	
	Back to Treatment Summary Save Save and Add New

Code	Description
G0035	Training Costs
G0030	Mileage
F0001	Flex: Non-traditional Services or Activities
F0005	Flex: Nutrition for Events
F0006	Flex: Temporary Housing