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**MEDSTAR SELECT / MEDSTAR  
MEDICARE CHOICE**

**HIPAA EDI Companion Guide  
For  
**835**  
**Electronic Remittance Advice File****

Companion Guide Version: 0.1

**Refers to the Implementation Guide Based on X12  
Version 005010X221A1**

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## **Disclosure Statement**

This document is intended to be a companion guide for use in conjunction with the ASCX12N National Electronic Data Interchange Transaction Set Implementation and Addenda Guides. The information in this document is provided for MedStar Select/MedStar Medicare Choice and its associated Trading Partners.

This document contains clarifications as permitted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Standard for Electronic Transactions. This document is not intended to convey information that exceeds the requirements or usages of data expressed in the ASCX12N National Electronic Data Interchange Transaction Set Implementation and Addenda Guides defined by HIPAA.

**This document is not intended, and should not be regarded, as a substitute for the ASCX12N National Electronic Data Interchange Transaction Set Implementation and Addenda Guides.**

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## **Preface**

This companion guide (CG) is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. This companion guide to the ASCX12N National Electronic Data Interchange Transaction Set Implementation and Addenda Guides adopted under HIPAA will clarify and specify MedStar Select/MedStar Medicare Choice communication protocols, business rules and information applicable to the 835 Electronic Remittance Advice transactions. Transmissions based on this companion guide, used in tandem with the X12N Implementation Guides, are compliant with X12 syntax, those guides, and HIPAA.

## **835 Health Care Electronic Remittance Advice Overview**

The 835 Health Care Claim Payment/Advice provides detailed payment information about health care claims submitted to MedStar Select/MedStar Medicare Choice. The 835 Transaction may be returned for Professional and Institutional 837 Claim electronic submissions, as well as paper claims submissions.

### **Eligibility for the 835 Transaction**

In order to receive a 5010 version of the 835 Claim Remittance Advice, submitters of health care claims must:

- Be a participating provider
- Use billing software that allows the translation of a HIPAA compliant 835 Electronic Remittance File.
- If you wish to request a direct interface of an 835 formatted ERA file, please call Provider Services at 855-222-1042 for direction.
- If your billing system transmits claims to MedStar via a clearinghouse please contact your vendor, or clearinghouse, for instructions on how to automate the processing of ERA's in an 835 format.

Information regarding Electronic Funds Transfers and contact Information regarding setting up an 835 submitter account are available by calling Provider Services at 855-222-1042.

### **Frequency of Data Exchange**

MedStar Select/MedStar Medicare Choice sends an 835 ERA batch transaction upon payment release, in response to all processed health care claims.

Submitters should be aware that the 835 Transaction is not a paired transaction to the 837 Health Care Claim. Batch transmissions of the 835 do not directly correlate to batch transmissions of the 837. Response time to any submitted claim can vary, depending upon the processing requirements of the individual claim sent.

# Contact Information

## **Provider Online**

Web: [www.MedStarProvidernetwork.com](http://www.MedStarProvidernetwork.com)

Help Line: 1-800-937-0438

## **Provider Services**

Telephone 1-855-242-1042

Provider Services should be contacted if you have questions regarding the details of a member's benefits. Provider Services is available Monday – Friday 7 a.m. to 7 p.m. Eastern Standard Time.

## 835 ISA Data Requirements

### Sender/Receiver Values

- ISA05 = 33
- ISA06 = 95216
- ISA07 = ZZ
- ISA08 = Submitter tax ID
- ISA12 = 00501
- GS02 = 95216
- GS03 = Submitter tax ID
- GS08 = 005010X221A1

## 835 Remittance Sample

Data Element	Value
Subscriber:	Clark Kent
Insurance ID#:	000000001-01
Payer ID #:	251MS
Primary Payer:	MedStar Select/MedStar Medicare Choice
Receiver:	MedStar Select/MedStar Medicare Choice
EDI #:	95216
Billing Provider:	William J. Line, MD
TAX ID	222222222
Address:	123 Fake St. Pittsburgh, PA 15123
Attending Physician:	William J. Line, MD
Attending Physician NPI:	3333333333
Patient Account Number:	444444
Date of Service:	04/17/2011
Service Line 1	HCPCS: 11301 59
Charge/Pay	\$125/\$71.30
Service Line 2	HCPCS: 99202 25 59
Charge/Pay	\$85/\$66.77
Total Charge/Pay	\$210/\$138.07
Check Number	111111

## Example 835 Data String

The following transmission sample illustrates the file format used for an EDI transaction, which includes delimiters and data segment symbols. The sample includes the ISA (Interchange Control) and GS (Functional Group) portions of a transmission, and only one ST/SE segment. This sample contains a line break after each tilde to provide an easy illustration of where a new data segment begins.

```
ISA*00*      *00*      *33*95216      *ZZ*SUBTAXID#      *110421*1706*^*00501*000001832*0*P*>~
GS*HP*95216* SUBTAXID#*20110421*170626*1797*X*005010X221A1~
ST*835*1797001~
BPR*I*138.07*C*CHK*****20110421~
TRN*1*111111*987654321~
N1*PR*MEDSTAR SELECT/MEDSTAR MEDICARE CHOICE, INC*XV*987654321~
N3*ONE CHATHAM CTR, 112 WASHINGTON PLACE~
N4*PITTSBURGH*PA*15219~
N1*PE*WILLIAM J LINE MD*XX*3333333333 ~
N3*123 FAKE ST~
N4*PITTSBURGH*PA*15123~
REF*TJ*22222222~
LX*1~
CLP*444444*1*210*138.07*0*HM*04995765*11~
NM1*IL*1*KENT*CLARK*S***MI*00000000101~
NM1*82*1*LINE*WILLIAM*J***XX*3333333333~
DTM*232*20110414~
DTM*233*20110414~
SVC*HC>11301>59*125*71.3**1~
DTM*472*20110414~
CAS*CO*45*53.7~
REF*6R*1746P2569B25~
AMT*B6*71.3~
SVC*HC>99202>25*85*66.77**1~
DTM*472*20110414~
CAS*CO*45*18.23~
REF*6R*1747P2569B25~
AMT*B6*66.77~
SE*28*1797001~
GE*1*1797~
IEA*1*000001832~
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