



Providers using the  
Premera Clearinghouse  
to send claims to  
WA State DSHS  
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ProviderOne and  
include our ProviderOne  
clearinghouse ID of:  
**1054083.**

## FEATURE Articles

### WA State Department of Social and Health Services (DSHS) Transition to ProviderOne – Update

**W**A State DSHS will transition to a new processing system called ProviderOne at a date not yet determined by DSHS. In preparation for this transition WA State DSHS requests that all clearinghouses sending electronic claims to them register with ProviderOne to obtain a clearinghouse submitter identification number (ID).

Premera has completed this registration. Providers using the Premera Clearinghouse to send claims to WA State DSHS must register with ProviderOne and include our ProviderOne clearinghouse ID of: **1054083.**

Please see detailed information regarding WA State DSHS to ProviderOne at the following link <http://fortress.wa.gov/dshs/maa/ProviderOne/>.

<http://fortress.wa.gov/dshs/maa/ProviderOne/>

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### N.E.I.C. Reports Transitioning to Emdeon Reporting – Delayed

N.E.I.C. reports (R022, R023, R026, R059, R060, R061, etc.) currently mailed by the Premera EDI Team to Trading Partners for claims received (under Carrier Code 0000) and/or destined for a commercial payer through Emdeon will be changing to new Emdeon reports. The Premera Clearinghouse transition from the current N.E.I.C. reports to Emdeon reports has been delayed, as the result of recent Emdeon report modifications made based on provider feedback for improvement.

The new Emdeon reports are expected to be available sometime in June 2009. The Premera EDI Team is working closely with Emdeon on this reporting project. We will follow-up with each Trading Partner on the Emdeon Reporting changes prior to any transition.



## HIPAA Updates

The US Department of Health and Human Services (HHS) has issued the final rule for adoption of both a new HIPAA electronic transaction version and the transition to the ICD-10 coding structure:

### HIPAA 5010

HHS has published the final rule to adopt the 5010 version for the related health claim standard transactions in order to:

Resolve issues that exist within the current 4010A1 version that do not currently support the extended field lengths for the ICD-10 coding structure.

Following are key dates for the transition from version 4010A1 to 5010:

- Payers must be ready to begin Trading Partner testing on January 1, 2011
- Compliance testing completed by October 31, 2011
- Full transition compliance for all parties expected by January 1, 2012

### ICD-10

The industry has been using the International Classification of Diseases coding structure version ICD-9 for many years. The HHS final rule now adopts version ICD-10 to replace ICD-9 for diagnosis and procedures code usage.

ICD-10 coding is to be implemented with Dates of Service beginning:

#### October 1, 2013

While the dates for compliance for both the HIPAA standard electronic transaction version 5010 and for the ICD-10 coding structures appear to be far into the future, they are considered to be very aggressive by the healthcare industry.

You should contact your system vendor or billing agent to find out about their transition plans to meet these compliance dates.

## Corrected/Replacement Claims

**Yes, Premera corrected claims can be sent electronically!**

To send a Premera Corrected/replacement claim electronically (using the ASC X12 837 format) be sure to provide:

- Frequency Code of: 7 to indicate a 'Replacement of Prior Claim', in Loop 2300, CLM05 - 3 segment
- A free-form message with an explanation for the Corrected/Replacement Claim
- (in Loop 2300 'Claim Note', NTE01 must contain 'ADD' and NTE02 must contain the explanation)
- When known, you may provide the initial Premera claim reference number/Claim Number (in Loop 2300, REF01 must contain 'F8' and REF02 must contain the claim number)

For both Professional and Institutional claims Frequency Codes can be found in the National Uniform Billing Specification Manual, which can be obtained at [www.nubc.org](http://www.nubc.org).

## NPI (National Provider Identifier)

Greater than 99% of all Premera claims are received with the NPI as the primary Provider Identifier for all provider records indicated in the claim.

EDI is identifying and contacting providers who are not sending NPI on their claims. This may only pertain to specific providers in an office whose NPI has not yet been registered with Premera.

Please be sure to provide Premera with any updates or changes you have made since you initially registered your NPI list. You may send a spreadsheet with your changes by email to [edi@premera.com](mailto:edi@premera.com) or Fax your NPI updates to EDI at 425-918-4234. The EDI Team will make sure that your NPI updates are made in your provider file records.

## Trading Partner Information Update Request

Please contact an EDI representative to ensure we have your current email address, and whenever you update your software vendor, billing service, billing staff, office address or Tax ID. We need to keep our records up-to-date to prevent delivery disruption of your 835 Electronic Remittance Advise (ERA) and electronic reports.

Also, if you wish to delete or add access for your billing staff to our Secure Transport (ST) [www.connectiva.com](http://www.connectiva.com) secure web-site please call the EDI Team at 1-800-435-2715 or fax your changes to 425-918-4234.

## EDI Notification Process Reminder

If your contact information has changed please be sure to email the EDI Team at [edi@premera.com](mailto:edi@premera.com) or call us at 1-800-435-2715 so that we can update our notification distribution. We use this list to improve EDI communications with our Trading Partners. Be sure to include all email addresses and telephone numbers, with the related Tax ID, and EDI Submitter ID.

[EDI@Premera.com](mailto:EDI@Premera.com)

## Emdeon Payor Listing Update

We encourage you to review and/or obtain the most recent payor listing directly from Emdeon on a monthly basis at: [www.emdeon.com](http://www.emdeon.com). Here is how to access and view this information:

- ▶ Page down to (Payor Lists) on right hand side
- ▶ Click on arrow button > Medical/Hospital Payers
- ▶ Claims Payor List:
  - ‘Please Select a Product’ arrow down to Direct Submitter
  - ‘Payor Type’ arrow down to Commercial
  - ‘Payor Name’ enter name of payor
- ▶ Click on View List at the bottom of the page scroll down for payor ID number.

Any payor ID that includes alpha and numeric values with the exception of Tricare (SCW10) and HMA

(TH049) defaults to zeros and will reject at Emdeon. Questions regarding the listing should be directed to the Emdeon Payor List Help Line at 1-800-933-6869 or their help desk at 1-800-845-6592.

## Clearinghouse Reports

Downloading the various clearinghouse reports from Secure Transport (ST) will help you avoid lost claims and eligibility errors. The reports contain rejected claim information. Verifying these reports against your office reports ensures accurate tracking of your claims. Please remember the following key points:

- Reports are only available online via ST.
- Retrieving (downloading) your reports regularly ensures notification that we have received your claims and alerts you to claim rejections.
- Rejected claims are not processed; they must be corrected and re-billed.

## Electronic Claim Transaction Report (BCWARPT) – Availability

These reports are available for all electronic claim submitters regardless of claim format.

On-line reports are available after 6 a.m. each day and contain claims processed as follows:

- Files received by 3 p.m. Monday through Friday are processed in that day's cycle with the reports available the following morning.
- Files received after 3 p.m. are processed the next business day with the reports available the following business day.

## These reports are your only notification of claim receipt or any rejections.

Six generations of reports are available:

## The most recent transmission report is named 'BCWARPT'.

Older previous transmission reports are named 'BCWARPT1' through 'BCWARPT6'.

(For each report file there is a compressed (.EXE) and an uncompressed version.)

To assist in claim reconciliation the PROCESS NOTES/CH TRACKING NO field on this report includes and reports back the unique claim number when sent by a clearinghouse or other billing agent in the HIPAA 837 professional claim transaction in Loop 2300, REF\*D9 segment.

The first part of this field is for Process Notes when applicable to display \*REJECTED\* when a claim rejects in the EDI validation process. Following the \*REJECTED\* message in position 12 of the column (or in position 12 of the column when the claim is not rejected) is the CH Tracking Number. The CH TRACKING NO is a fixed 20 position field.

## 837 Transaction Error Report (ANSI X12 Submitter):

The '837 Transaction Error Report' was developed to report claims that reject in the HIPAA validation process. This report provides detailed information regarding the HIPAA validation errors. Claims rejected at this level do not appear on any other report and must be corrected and re-transmitted.

To correctly balance files transmitted to our Clearinghouse you will need to reference both the Electronic Claim transaction report (BCWARPT) and the 837 Transaction Error Report to reflect a full accounting of the claims transmitted to Premera. For assistance, please contact an EDI Representative.

To assist in claim reconciliation the CH Tracking Number field on this report includes and reports back the unique claim number when sent by a clearinghouse or other billing agent in the HIPAA 837 professional claim transaction in Loop 2300, REF\*D9 segment. Up to 20 characters will be displayed in this new field.

## 997 (Functional Acknowledgement – ANSI X12 Submitters):

- The 997 is found in the ST Download Directory.
- It is the responsibility of each provider office to download their 997 after every file transmission.
- The 997 is available within one hour of transmitting the file
- If any portion of your file does not pass HIPAA validation or contains other errors, all or part of the file may be rejected and reported on the 997.
- Contact your software vendor for assistance in interpreting this report.

The following are other payor reports available to you in your ST Download Directory:

## Nordian Medicare Reports

### The Nordian report file names are:

'Claims Confirmation Report'      'Batch Detail Control Listing'

### CHNORA.NEW

(Uncompressed version)

### CHNORB.NEW

(Uncompressed version)

### CHNORA.EXE

(Compressed version)

### CHNORB.EXE

(Compressed version)

Additional (archived) generations of the on-line reports will be available from previous transmissions, and will be numbered from most recent to oldest, such as:

**CHNORA.1** through **CHNORA.99** (Uncompressed version)

**CHNORA1.EXE** through **CHNORA99.EXE** (Compressed version)

**Availity Reports**

(Includes WA Regence Blue Shield and Asuris NW Health, Idaho Blue Shield and Idaho Welfare)

**Availity Batch Report file names are:**

**CHAVAI.NEW** (Uncompressed version)

**CHAVAI.EXE** (Compressed version)

Additional (archived) generations of the on-line reports will be available from previous transmissions, and will be numbered from most recent to oldest, such as:

**CHAVAI.1** through **CHAVAI.6**

(previous uncompressed report versions)

**CHAVAI1.exe** through **CHAVAI6.exe**

(previous compressed report versions)

**A NEW Availity "Delayed Payer Report" is now available to provide further payer validation information.**

This report provides claim warning and rejections that are not reported in the Availity Batch Report.

**Availity Delayed Payer Report file names are:**

**CHAVDP.NEW** (Uncompressed version)

**CHAVDP.EXE** (Compressed version)

Additional (archived) generations of the on-line reports will be available from previous transmissions, and will be numbered from most recent to oldest, such as:

**CHAVDP.1** through **CHAVDP.6** (Uncompressed)

**CHAVDP1.exe** through **CHAVDP6.exe** for (Compressed)

**Please use the following steps to download your response report files:**

**Secure Transport (ST) users:**

1. Go to your Download Directory
2. Highlight the appropriate report file
3. Select Download
4. Report file will be downloaded to the appropriate report directory on your PC

**ST is available 7 days a week, 24 hours a day**

**How to Contact EDI**

If you have questions or wish to obtain information about any of the articles in this newsletter, please call one of the EDI representatives listed below:

**Phone hours: 8 a.m. – 5:00 p.m. (PST), M-F**  
**Toll-free 1-800-435-2715**

**Select Option 1 for Seattle – (Mountlake Terrace) office**

**Select Option 2 for Spokane office**

**Select Option 3 for Bend office**

► **Fax numbers:**

Seattle – (Mountlake Terrace)

office: 425-918-4234

Spokane office: 509-252-7794

Bend office: 541-318-2337

► **Questions or problems:**

E-mail the EDI department at

[EDI@premera.com](mailto:EDI@premera.com).

► **Premera health plan information:**

Use our Web site at [www.premera.com](http://www.premera.com).

**Mountlake Terrace office** Direct Lines

Lynnette Boulch 425-918-4218

Lenea Dyer 425-918-3505

Liza Franzen 425-918-3128

Linda Hunt 425-918-3294

Rowena Solomon 425-918-4983

Dana Thomas 425-918-5129

**Spokane office:**

Toll-free 1-800-572-5256

Beth Passmore 509-252-7842

Eric Gilbert 509-252-7471

Shari Johnson 509-252-7488

**Bend office:**

Darcina (Darci) Simms 541-318-2007

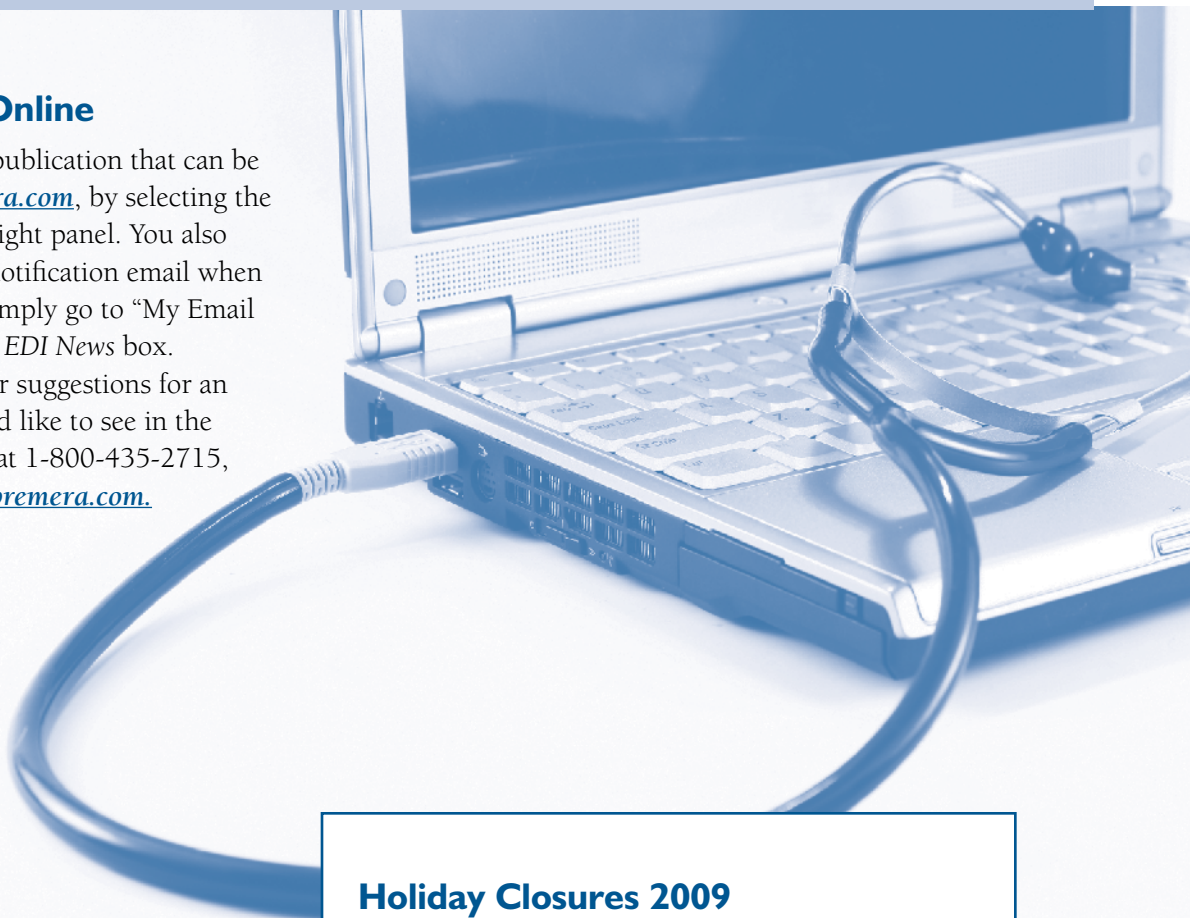
Lynnette Boulch 425-918-4218

Please post or circulate this newsletter in your office

## EDI News Available Online

**E**DI News is an on-line publication that can be viewed at [www.premera.com](http://www.premera.com), by selecting the Providers link on the right panel. You also have the option to receive a notification email when a new edition is published, simply go to "My Email Subscriptions" and check the EDI News box.

For comments, question or suggestions for an article or topic that you would like to see in the EDI News, call the EDI Team at 1-800-435-2715, or send us an e-mail at [edi@premera.com](mailto:edi@premera.com).



## Holiday Closures 2009

### Premera will be closed on the following dates:

- Friday, July 3 – (Day before Independence Day)
- Monday, September 7 – (Labor Day)
- Thursday, November 26 – (Thanksgiving Day)
- Friday, November 27 – (Day after Thanksgiving)
- Thursday, December 24 – (Day before Christmas)
- Friday, December 25 – (Christmas Day)

## EDI News – Online: [www.premera.com](http://www.premera.com)

EDI News is produced quarterly to provide important information related to Electronic claims processing for the office billing staff, billing services and software vendors from Premera. Please keep this newsletter for future reference.

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The EDI team is dedicated to providing, excellent service.

