

EDI News



New Design for EDI News

EDI News has a brand new look. We hope you like what you see! If you have any suggestions for articles or regular features, please contact us via email at edi@premera.com or 800-435-2715.

Premera Prepares for ICD-10

Compliance Deadline is Oct. 1, 2014

In August 2012, the Centers for Medicare and Medicaid Services (CMS) announced the ICD-10 compliance deadline was delayed from Oct. 1, 2013 to Oct. 1, 2014.

The ICD-10 web page at premera.com/ak/provider offers great information and resources to help you with your ICD-10 transition, including links to CMS.gov where you'll find FAQs, timelines, and ICD-10 implementation guides for practices and small hospitals.

- While ICD-10 implementation impacts processes across Premera, we are well prepared to meet the federal compliance date.
- Our implementation approach allows us the operational capability to respond to any changes to the federal requirements for the mandate.
- We understand this is a significant transition for providers. During the next six months we are preparing our plans for advanced ICD-10 testing with our trading partners (i.e., providers, clearinghouses, billing services).
- We plan to reach out to our trading partners to arrange testing when we've completed our planning.
- Premera is working collaboratively with healthcare providers, associations and other external entities as appropriate to share information about complying with the ICD-10 mandate.

To learn more, visit the ICD-10 page at premera.com/ak/provider.

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Save Time: Send Premera Corrected or Replacement Claims Online

Be sure to include the right information for faster processing of corrected or replacement claims

A corrected claim is simply a correction on a primary Explanation of Benefits (EOB), additional code, or other change. To send a Premera Corrected/Replacement claim electronically, be sure to include the following:

- Use Frequency Code **7** to indicate a 'Replacement of Prior Claim', in Loop 2300, CLM05 - 3 segment
- A free-form note of explanation for the Corrected/Replacement Claim, in Loop 2300 'Claim Note', NTE segment:

- NTE01 must contain 'ADD' for professional claims
- NTE01 must contain 'UPI' for institutional claims
- NTE02 must contain the free-form note indicating the reason for the corrected replacement claim.

Example: NTE*ADD*CORRECTED PROCEDURE
CODE LINE 3

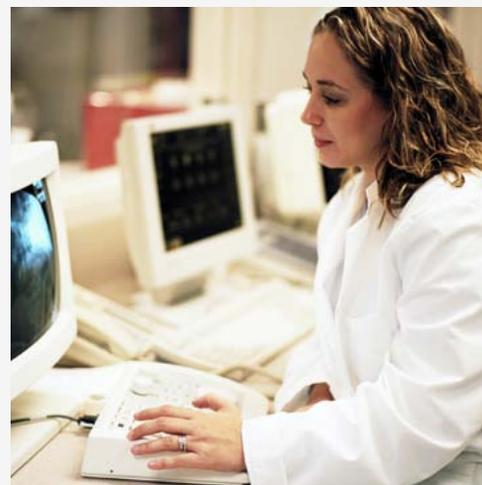
Example: NTE*UPI*REVENUE CODE 0300 UNITS
AND CHARGES CORRECTED

- Provide the initial Premera claim reference number/Claim Number in Loop 2300, REF segment
 - REF01 must contain 'F8' and REF02 must contain the initial Premera claim number
- When sending a Corrected/Replacement Claim you must re-send the claim in its original entirety including the necessary corrections.

Example: REF*F8*1234567890~

Note: Professional providers may need to contact their system vendor to have Frequency Code 7 added for use.

You can find information to submit Corrected/Replacement Claims electronically through the Library EDI web page at premera.com/ak/provider and through the Administrative Simplification web page at onehealthport.com.



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Administration Simplification Best Practice Recommendations (BPRs)

Along with other healthcare payers, providers and state agency subject matter experts, Premera has developed Administrative Simplification Best Practice Recommendations (BPRs) for HIPAA 5010 electronic transactions. You'll find these BPRs at onehealthport.com.

Sign Up Today for Electronic Transactions

Premera accepts electronic claims directly or via selected vendors. Sending your claims electronically has several advantages:

- Less time spent on claims prep
- Cost savings through prevention of loss and potential delay
- Detailed claim acceptance and rejection reporting
- Faster claims processing and response times
- Professional staff to assist you

If you are interested in getting started in an exchange of electronic transactions such as Eligibility Benefits Inquiry & Response, Dental, Professional or Facility Claims, or Claim Status Request and Response, visit the EDI page at premera.com/ak/provider. You can also link to onehealthport.com to find Administrative Simplification Tools and much more.

Update Your Contact Info

To update your contact information, email us at edi@premera.com or call 800-435-2715. Include your phone, TIN and EDI submitter ID.

Sign up for electronic transactions at premera.com/ak/provider.

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Electronic Confirmation Reports Help Avoid Lost Claims, Eligibility Errors

Downloading and reviewing your online confirmation reports from your Secure Transport (ST) download directory can help you avoid lost claims and eligibility errors and you can view rejected claim information. Verifying the reports against your office reports ensures accurate claim tracking.

Here are some key points to remember to effectively use the reports:

- Reports are only available online via Secure Transport.
- Downloading your reports regularly ensures that we have received your claims and alerts you to claim rejections.
- Rejected claims are not processed; they must be corrected and re-billed.

When Premera receives your electronic claims file, we acknowledge receipt in two different ways:

- Functional Acknowledgement returned immediately via computer.
- Electronic Claims Transaction Report returned same day via staff.

Secure Transport users should follow these steps to download response and report files:

1. Go to your download directory
2. Highlight the appropriate report file
3. Select download
4. Report file is then downloaded to the appropriate report directory on your PC

Once you view or download a report or transaction from the download directory, it will automatically move to an archive folder. You can continue to view reports and transactions within the archive folder for 30 days. After 30 days they will be automatically deleted.

connectiva.com

To delete or add access to our Secure Transport website, connectiva.com, call 800-435-2715 or fax 425-918-4234.

2013 Company Closures

Friday, May 24

Monday, May 27

Thursday, July 4

Monday, Sept. 2

Thursday, Nov. 28

Friday, Nov. 29

Tuesday, Dec. 24

Wednesday, Dec. 25

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Electronic Confirmation Reports (Continued)

EDI Report File Naming Convention

The EDI response reports and transactions are posted to your Secure Transport download directory. Here is a list of each report or transaction name and its file name:

999 Functional Acknowledgement
File name: 999_GSXXXXXXXXXX_YYMMDDSSNNN

Electronic Claims Transaction Report
File name: 837RPT_YYYYMMDDHHMMSSNNN

835 Electronic Remittance Advice
File name: 835_YYYYMMDDHHMMSSNNN

271 Eligibility & Benefit Response
File name: 271_YYYYMMDDHHMMSSNNN

277 Claim Status Response
File name: 277_YYYYMMDDHHMMSSNNN

278 Review Response
File name: 278_YYYYMMDDHHMMSSNNN

Electronic Claims Transaction Report
File name: 837RPT_YYYYMMDD HHMMSSNNN

This report displays all claims that were sent in your 837 electronic claims file. The report is sent out on the same business day to your Secure Transport download directory. The file name extension will be either '.pdf' or '.txt' depending on your current report format.

Note: The YYYYMMDD is the date stamp; HHMMSSNNN is the time stamp in HH/hours, MM/minutes, SS/seconds and NNN/microseconds.

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.

Share the
knowledge.

Please post and share
this newsletter with
co-workers in your
office.

Contact EDI

If you have questions or wish to obtain information about any of the articles in this newsletter, please call the EDI Team, 8 a.m.–5 p.m. (PST), M–F.

800-435-2715

Questions or problems:

Email the EDI Team at
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Find Premera health plan
information at premera.com.

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providing excellent service.*

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