Department of Veterans Affairs
Office of Community Care Programs

HIPAA Transaction Standard Companion Guide

Refers to the TR3 for Additional Information to Support a Health Care Claim or Encounter (275) Based on ASC X12 005010X210

5010 Master Companion Guide

June 2020
Disclosure Statement

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Preface

This Companion Guide to the v5010 ASC X12N TR3 and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with the Department of Veterans Affairs (VA) Office of Community Care (OCC) health care programs. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N TR3, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N TR3 adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the TR3.
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1. INTRODUCTION

This companion guide is intended to assist in development and deployment of applications transmitting health care claim attachments intending to support health care claim payment and processing by VA OCC health care programs. The companion guide serves as an addendum to any technical documentation supplied by the healthcare clearinghouse when establishing a trading partner agreement.

The VA OCC requires an additional element in addition to TR3 requirements. This element is the NM104 (Patient First Name) of the 1000D loop.

The VA OCC restricts the number of BIN segments within a given transaction to 10 instances.

1.1. SCOPE

This document covers business and technical processes enacted by the VA OCC which vary from expectations governed by the 275x210 TR3 when processing ASC X12 Additional Information to Support a Health Care Claim or Encounter (275) transmissions. This transaction is not to be used for the exchange of Electronic Health Record documents for clinical care or case management in the care of a patient.

1.2. OVERVIEW

This document is intended to supplement the 275 TR3 and any additional Errata guides published by the ASC and any additional companion guide supplied by the contracted healthcare clearinghouse contracted to serve the VA OCC. All requirements or directives in this document are HIPAA compliant and intended to improve facilitation of EDI transmissions and notify trading partners of EDI rules unique to the VA OCC EDI processing and business environment.
1.3. REFERENCES

This companion guide is written to support any companion guide delivered by the contracted healthcare clearinghouse during the interchange on-boarding process. Additionally, this companion guide supports the 275 TR3 and any additional Errata guides published by the ASC.

The 275x210 TR3 can be purchased at http://www.wpc-edi.com/

1.4. ADDITIONAL INFORMATION

1.4.1. Assumptions Regarding the Reader

The VA OCC assumes the reader of this guide has access to the 275 TR3 and a pre-existing agreement with the healthcare clearinghouse contracted to the VA OCC.

VA OCC assumes that any sender of a 275 is sending the corresponding claim with the electronic medical submission (837) as they should be sent as a pair.

1.4.2. Processing of Solicited 275 Communication

The VA OCC does not currently communicate ASC X12 Health Care Claim Request for Additional Information (277) transmissions. Additionally, the VA OCC does not accept and will not process 275 transmissions considered Solicited (the BGN01 segment contains the “11” value).

2. GETTING STARTED

2.1. WORKING WITH VA OCC Health Care Programs

To initiate exchanging EDI with the VA OCC, contact Change Healthcare, the EDI clearinghouse contracted to support the VA OCC.

2.2. TRADING PARTNER REGISTRATION

There is no requirement for registration with the VA OCC to submit 275s. All new EDI partners must engage Change Healthcare, the contracted healthcare clearinghouse for the VA OCC.

Homepage for Change Healthcare: https://www.changehealthcare.com

Homepage for Change Healthcare (Sales): https://www.changehealthcare.com/contact/sales

Contact Phone Number: 1-866-817-3813

2.3. CERTIFICATION AND TESTING OVERVIEW

All certification and testing of a new trading partnership must be coordinated with the healthcare clearinghouse.

3. TESTING WITH THE PAYER

During certification and testing of a new trading partner, a period of initial operating capability (IOC) will be executed, during which several test transactions will be communicated and analyzed for veracity. All payer testing of a new trading partnership must be coordinated with the healthcare clearinghouse.

4. CONNECTIVITY WITH THE PAYER/COMMUNICATIONS PROCESS FLOWS

All EDI communication is to be transmitted via the healthcare clearinghouse.
4.1. TRANSMISSION ADMINISTRATIVE PROCEDURES

All timing and transmission of EDI communication is to be coordinated with the healthcare clearinghouse.

The VA OCC retrieves inbound ASC 275x210 transmissions from the clearinghouse and transmits outbound ASC X12 999 responses once a day after the completion of the retrieval and processing procedures.

4.2. RE-TRANSMISSION PROCEDURE

Retransmissions of EDI, regardless of cause, should be performed within the bounds of coordination with your healthcare clearinghouse. The VA OCC will process all re-transmissions the same as original transmissions.

4.3. COMMUNICATION PROTOCOL SPECIFICATIONS

All communication should be coordinated with the clearinghouse contracted to the VA OCC.

5. CONTACT INFORMATION EDI CUSTOMER SERVICE

5.1. EDI TECHNICAL ASSISTANCE

All EDI technical assistance should be coordinated with the clearinghouse contracted to the VA OCC.

Change Healthcare support:
https://www.changehealthcare.com/support/product-support
5.2. VETERANS HEALTH ADMINISTRATION (VHA) CUSTOMER SERVICE NUMBER

Our Customer Call Center can be reached at 800-733-8387, Monday–Friday, 8:05 a.m. to 7:30 p.m. Eastern Standard Time (EST), while our Interactive Voice Response (IVR) System is available 24 hours a day, seven days a week at 800-733-8387.

Additionally, Veteran Care in the Community can be reached via this phone number: 1-877-881-7618

5.3. APPLICABLE WEBSITES/E-MAIL

Homepage for Change Healthcare: https://www.changehealthcare.com
Homepage for the Department of Veterans Affairs: https://www.VA.gov
Homepage for the VA OCC: https://www.VA.gov/communitycare
Email Group for the VHA OCC Payer EDI Team: VHAOCCPayerEDIquestions@va.gov

6. CONTROL SEGMENTS AND ENVELOPES

Any specific requirements for dealing with ISA-IEA, GS-GE, or ST-SE needs to be coordinated through Change Healthcare.

7. PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

A list of available payers and their identification code (for use in ISA07 and GS03) follows:

12115 – FEE Professional and Institutional Health Care Claims
12116 – FEE Dental Health Care Claims
84146 – CHAMPVA Professional and Institutional Health Care Claims
84147 – CHAMPVA Dental Health Care Claims

8. ACKNOWLEDGEMENTS AND/OR REPORTS

The VA OCC provides no additional acknowledgements or reports beyond an X12 999 transaction in response to the X12 Additional Information to Support a Health Care Claim or Encounter (275).

9. TRADING PARTNER AGREEMENTS

All trading partner agreements are to be coordinated through our contracted healthcare clearinghouse.
## 10. TRANSACTION SPECIFIC INFORMATION

<table>
<thead>
<tr>
<th>Page #</th>
<th>Loop ID</th>
<th>Reference</th>
<th>Name</th>
<th>Codes</th>
<th>Length</th>
<th>Notes/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>44</td>
<td>-</td>
<td>BGN</td>
<td>Beginning Segment</td>
<td>BGN01 – 02</td>
<td></td>
<td>VA OCC does not accept and will not process 275 transmissions considered Solicited (the BGN01 segment contains the &quot;11&quot; value).</td>
</tr>
<tr>
<td>53</td>
<td>1000C</td>
<td>NM1</td>
<td>Provider Name Information</td>
<td>NM1 – Billing Provider Information</td>
<td></td>
<td>The VA OCC does not produce 277 Request for Additional Information (RFAI) and does not process Solicited 275 transactions. This loop must contain the billing provider information.</td>
</tr>
<tr>
<td>63</td>
<td>1000D</td>
<td>NM1</td>
<td>Patient Name</td>
<td>NM104-Name First</td>
<td></td>
<td>The VA OCC requires the patients first name on all 275 transmissions</td>
</tr>
<tr>
<td>73</td>
<td>2000A</td>
<td>TRN</td>
<td>Attachment Control Number</td>
<td>TRN01 – 1</td>
<td>TRN02 – Attachment Control Number</td>
<td>The VA OCC does not produce 277 RFAI and does not process Solicited 275 transactions. The TRN01 must be 1 - Current Transaction Trade Numbers and TRN02 must be the Attachment Control Number. TRN02 must equal PWK06 in loop 2300 of the associated claim 837.</td>
</tr>
<tr>
<td>89</td>
<td>2100B</td>
<td>CAT</td>
<td>Category of Patient Information Service</td>
<td>CAT02 – HL, IA, MB, TX</td>
<td></td>
<td>The VA OCC currently accepts all values of Report Transmission Code (CAT02).</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>HL – Health Industry Level 7 Interface Standards (HL/7) Format</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>To be used when communicating CDA formatted XML documentation attachments.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>IA – Electronic Image</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>To be used when communicating an image in BASE64 within the BIN02 segment.</td>
</tr>
<tr>
<td>93</td>
<td>2110B</td>
<td>BIN</td>
<td>Binary Data Segment</td>
<td>BIN02</td>
<td></td>
<td>The VA OCC will accept a single 275 attachment per 837 claim. (1 LX (2000A Loop) per ST-SE transaction). The VA OCC will accept a transaction batch if all BIN segments contain attachments less than 64 megabytes. When receiving an attachment in Clinical Document Architecture (CDA) format, the VA OCC expects the entire attachment to be base64 encoded.</td>
</tr>
</tbody>
</table>
11. APPENDICES

11.1. IMPLEMENTATION CHECKLIST

Refer to implementation instructions provided by the healthcare clearinghouse.

11.2. BUSINESS SCENARIOS

11.2.1. X12 275 Claim Transmissions

11.2.1.1. 275 Claim Attachment receipt process

See below for the process followed by the VA OCC starting on receipt of a 275 transaction.
11.2.1.2. Unable to find matching 837 health care claim on receipt of 275 Claim Attachment Transaction

When VA OCC receives a 275 claim attachment transaction and a matching 837 health care claim is not available, VA OCC will attempt to rematch the claim attachment to all incoming claims for up to 7 days. If a matching claim is received within that 7 day period, the claim attachment will be successfully matched and support payment determination.

If a matching health care claim is not received within those 7 days, the claim attachment will be considered orphaned and will not be used to support payment of any associated claim received thereafter.

Any provider resubmitting a claim that has been denied or rejected previously must transmit any 275 claim attachment previously submitted alongside the resubmitted 837 healthcare claim.

11.2.1.3. Receipt of 275 Claim Attachment Transaction with more than 1 attachment per claim

The VA OCC accepts up to 10 BIN segments per 275 transaction per claim (1 LX (2000A Loop) per ST-SE transaction).

11.2.1.4. Receipt of 275 Claim Attachment Transaction with attachment larger than 64 megabytes

The VA OCC will reject any 275 transaction containing a single attachment larger than 64 megabytes. The VA advises that the submitter must break these larger than 64 megabyte documents into attachments smaller than 64 megabytes and submit them in sequential order within a single 275 transaction.

11.2.1.5. BIN Segment Rules

Accepted Content Types

<table>
<thead>
<tr>
<th>File Type</th>
<th>Content Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acrobat (pdf)</td>
<td>application/pdf</td>
</tr>
<tr>
<td>Bitmap (bmp)</td>
<td>image/bmp</td>
</tr>
<tr>
<td>Graphic interchange format (gif)</td>
<td>image/gif</td>
</tr>
<tr>
<td>JPEG image (jpg)</td>
<td>image/jpg</td>
</tr>
<tr>
<td>Tagged Image File (tif)</td>
<td>image/tif</td>
</tr>
<tr>
<td>XML text (ex: CDA)</td>
<td>text/xml</td>
</tr>
</tbody>
</table>

Binary:

When your BIN segment contains a binary attachment, VA OCC expects a set of headers describing the attachment to appear prior to the Base64 representation of the attachment. Every line of the header should terminate with a semi-colon.

Example Binary Segment: Example Binary Segment:

```
BIN*186413*MIME-Version: 1.0
Content-Type: application/pdf
Content-Transfer-Encoding: base64
Content-Disposition: attachment; filename=filenamegoeshere.pdf

Mime-Version: 1.0
Content-Type: application/octet-stream
Content-Transfer-Encoding: base64
Anticipated Mime-Versions: 1.0
Anticipated Content-Types:
```
Clinical Document Architecture (CDA):

When receiving an attachment in Clinical Document Architecture (CDA) format, VA OCC expects the attachment to be Base64 encoded.

11.3. TRANSMISSION EXAMPLES

In this section are examples of 275 transmissions.

NOTE: ALL BASE64 STRINGS HAVE BEEN REMOVED DUE TO LENGTH. TRANSACTIONS HAVE INCLUDED CARRIAGE RETURNS AFTER THE SEGMENT TERMINATOR (~) FOR FORMATTING PURPOSES.

Transaction 1 – A single transaction including 2 attachments applied at the claim level (no REF*FJ segments within loop 2000A LX. Attachments are in TIFF file format.

ISA*00* **00** *ZZ*133052274 *ZZ*1211500001 *180502*0700*$00501*00000049*1*T*:~
GS*PI*133052274*121150001*20180502*070005*49*X*005010X210~
ST*275*0001*005010X210E1~
BGN*02*986808A3908*20180425~
NM1*PR*2*VETERANS ADMINISTRATION*****PI*12115~
NM1*41*2*HEALTH CARE CLEARINGHOUSE*****46*999999999~
NM1*1P*2*EXAMPLE PROVIDER *****XX*999999999~
NX1*1P~
N3*1231 MAIN STREET~
N4*NEW YORK*NY*10025~
NM1*QC*1*AAABB*CHPVAABB****MI*666666118~
REF*EJ*16918691V3908~
REF*D9*EP042918618923007~
DTP*472*D8*20171001~
LX*1~
TRN*1*16918691V3908_986807_01~
DTP*368*D8*20180425~
CAT*AE*I~
EFI*05~
BIN*24669*Mime-Version: 1.0
999 Response:
Expect to receive an Acknowledgement Report from the healthcare clearinghouse.

Transaction 2 – A single transaction including an attachment applied at the claim level (no REF*FJ segments within loop 2000A LX. Attachments are in PDF format.)
ISA*00* *00* *ZZ*133052274 *ZZ*121150001 *180502*0600*$*00501*00000048*T*:~
GS*PI*133052274*841460001*20180502*060008*48*X*005010X210~
ST*275*0001*005010X210E1~
BGN*02*986808A3908*20180425~
NM1*PR*2*VA HEALTH ADMINISTRATION CHAMPVA*****PI*84146~
NM1*41*2*HEALTH CARE CLEARINGHOUSE******46*999999999~
NM1*1P*2*EXAMPLE PROVIDER******XX*999999999~
NX1*1P~
N3*123 FAKE ST~
N4*NEW YORK*NY*10025~
NM1*QC*1*AAABA*CHPVAABA*****MI*666666115~
REF*EJ*10728596V3908~
REF*D9*EP042918618923006~
DTP*472*D8*20160317~
999 Response:
Expect to receive an Acknowledgement Report from healthcare clearinghouse.

11.4. FREQUENTLY ASKED QUESTIONS

11.4.1. What file types are supported by the VA OCC for transmission within the BIN segment?

The following file types will be accepted:

- Acrobat (pdf)
- Bitmap (bmp)
- Graphic interchange format (gif)
- JPEG image (jpg)
- Portable network graphics (png)
- Tagged Image File (tif)
- XML text (ex: CDA)

12. CHANGE SUMMARY

<table>
<thead>
<tr>
<th>Creation Date</th>
<th>Version No.</th>
<th>Description/Comments</th>
</tr>
</thead>
<tbody>
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<td>01/10/2020</td>
<td>1.00</td>
<td>Updates Made</td>
</tr>
<tr>
<td>07/16/2018</td>
<td>1.0</td>
<td>Finalized Version</td>
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<tr>
<td>07/16/2018</td>
<td>0.6</td>
<td>Updated after review with Change Healthcare representatives</td>
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<tr>
<td>07/09/2018</td>
<td>0.5</td>
<td>Updated to include rules summary table in Section 1,</td>
</tr>
<tr>
<td>05/15/2018</td>
<td>0.4</td>
<td>Updated based on further review</td>
</tr>
<tr>
<td>05/11/2018</td>
<td>0.3</td>
<td>Updated based on comments from EDI Team</td>
</tr>
<tr>
<td>05/10/2018</td>
<td>0.2</td>
<td>Initial Draft</td>
</tr>
</tbody>
</table>