

# Frequently Asked Questions

## Provider EDI Services

Question	Answer																								
<b>What is HIPAA and how does it apply to EDI transactions?</b>	The Health Insurance Portability and Accountability Act of 1996 (HIPAA), is a federal regulation that, among other provisions, mandates national standards for electronic health care transactions. The transactions adopted under HIPAA for Electronic Data Interchange (EDI) of health care data include, for example, claims and eligibility. Transaction standards are defined by the Accredited Standards Committee X12 (ASC X12) and are administered and enforced by the Centers for Medicare & Medicaid Services (CMS).																								
<b>How does EDI apply to me?</b>	HIPAA names certain types of organizations as covered entities, including health plans, health care clearinghouses, and certain health care providers. Under HIPAA, covered entities that conduct any of the adopted standard transactions must adhere to the content and format requirements of each transaction. The current standards version is 5010.																								
<b>How do I conduct EDI transactions with AmeriHealth?</b>	Highmark, Inc. (Highmark) provides the Highmark Gateway to handle EDI transactions on behalf of AmeriHealth. Any entity that conducts EDI transactions directly with the Highmark Gateway is called a trading partner. You may register as a new trading partner or contract with a third party that has an existing trading partner relationship with Highmark, such as a billing service or clearinghouse.																								
<b>What EDI transactions does AmeriHealth support for providers?</b>	<p>AmeriHealth supports the following transaction formats via the Highmark Gateway:</p> <table border="1"> <thead> <tr> <th>Number</th> <th>Name</th> <th>Version</th> </tr> </thead> <tbody> <tr> <td>837I</td> <td>Health Care Claim (Institutional)</td> <td>005010X223A2</td> </tr> <tr> <td>837P</td> <td>Health Care Claim (Professional)</td> <td>005010X222A1</td> </tr> <tr> <td>835</td> <td>Health Care Claim Payment/Advice</td> <td>005010X221A1</td> </tr> <tr> <td>999</td> <td>Functional Acknowledgment</td> <td>005010X231A1</td> </tr> <tr> <td>U277<sup>1</sup></td> <td>Unsolicited Claim Acknowledgment</td> <td>005010XIBC</td> </tr> <tr> <td>277CA</td> <td>Health Care Claim Acknowledgment</td> <td>005010X214</td> </tr> <tr> <td>270/271</td> <td>Health Care Eligibility/Benefit Request and Response</td> <td>005010X279A1</td> </tr> </tbody> </table>	Number	Name	Version	837I	Health Care Claim (Institutional)	005010X223A2	837P	Health Care Claim (Professional)	005010X222A1	835	Health Care Claim Payment/Advice	005010X221A1	999	Functional Acknowledgment	005010X231A1	U277 <sup>1</sup>	Unsolicited Claim Acknowledgment	005010XIBC	277CA	Health Care Claim Acknowledgment	005010X214	270/271	Health Care Eligibility/Benefit Request and Response	005010X279A1
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	<sup>1</sup> The U277 is a non-standard claim acknowledgment. Please consult the appropriate AmeriHealth <i>HIPAA Transaction Standard Companion Guide</i> for more information about the transaction and its usage relative to the 277CA.																								

<b>Is EFT an EDI transaction?</b>	<p>Electronic Funds Transfer (EFT) is not an EDI transaction adopted under HIPAA. However, health plans are required to support EFT under the Patient Protection and Affordable Care Act (PPACA). Registration for EFT may be completed on the NaviNet<sup>®</sup> web portal, the AmeriHealth secure online provider portal.</p> <p>For more information about how to register for EFT, visit the AmeriHealth Support Home on the NaviNet Support site. Go to AmeriHealth NaviNet Plan Central and select the <i>Help</i> option from the top menu. Once on the NaviNet Support site, select the <i>Health Plan Support</i> tab, and choose <i>AmeriHealth</i> from the list of health plans.</p> <p>If you are not yet NaviNet-enabled, go to <a href="http://www.navinet.net">www.navinet.net</a> to sign up. If you are a non-participating provider, call 215-640-7410 to inquire about registration.</p>
<b>Do I need to use my NPI to conduct EDI transactions?</b>	<p>Yes. All providers who are eligible for a National Provider Identifier (NPI) are required to use their NPI on EDI transactions. All NPIs used on claims must be registered with AmeriHealth. Furthermore, your billing provider NPI must be affiliated with the entity that submits your electronic claims.</p> <p>Please contact your billing software vendor, clearinghouse vendor, or third-party billing service for instructions on how to affiliate your NPI. If you are a new trading partner or already know your vendor's trading partner number, go to the <a href="#">Trading Partner Business Center</a> to affiliate your NPI.</p> <p>Go to <a href="http://www.amerihealth.com/npi">www.amerihealth.com/npi</a> to learn more about the AmeriHealth guidelines on use of the NPI.</p>
<b>Do I need to register as a trading partner?</b>	<p>Whether you register as a trading partner depends on how you intend to do business with AmeriHealth. Many third-party vendors, such as billing services and clearinghouses, are existing trading partners and do not require separate registration. If you are not using a third-party intermediary or if your vendor does not maintain its own trading partner relationship, you will need to register as a new trading partner. Go to the <a href="#">Trading Partner Business Center</a> to sign up.</p>
<b>What if I'm already a trading partner with Highmark?</b>	<p>If you are currently a trading partner with the Highmark Gateway and conduct EDI transactions for payers other than AmeriHealth, you must register a new trading partner profile for AmeriHealth business.</p>
<b>What payer ID should I use to submit electronic claims?</b>	<p>AmeriHealth maintains multiple payer IDs to represent different product lines. Use the links below for detailed information about professional and facility payer ID codes:</p> <ul style="list-style-type: none"> <li>• <a href="#">Professional Payer IDs (PDF)</a></li> <li>• <a href="#">Facility Payer IDs (PDF)</a></li> </ul>
<b>Does AmeriHealth provide instructions for conducting EDI transactions?</b>	<p>The AmeriHealth HIPAA Transaction Standard Companion Guides provide specific technical requirements for sending and receiving transactions. These guides, as well as sample transactions, are available in the Resources area of the <a href="#">Trading Partner Business Center</a>.</p>

**What are the HIPAA standard external code sets?**

There are numerous coding sets that have been designated as standard or acceptable for use in EDI transactions. HIPAA regulations specify under what circumstance each type of coding is required. External code sets include, but are not limited to, the following:

- ICD-9-CM Volume 1 and 2: Diagnosis Coding<sup>2</sup>
- ICD-9-CM Volume 3: Inpatient Hospital Service Coding<sup>2</sup>
- PT-4: Physician Services Coding
- CDT-3: Dental Services Coding
- CPCS Level II: Other Health Related Services Coding
- NDC: National Drug Codes

<sup>2</sup>These code sets will be replaced by [ICD-10](#).

**How will I know that AmeriHealth received my electronic claims?**

Claims submitted to the Highmark Gateway are validated to ensure use of correct communication protocols as well as compliance with HIPAA standards. An acknowledgment in the form of a TA1 or 999 transaction is issued to the trading partner to communicate the results of the validation. If validation fails, none of the claims contained in the transaction set are accepted for processing. It is the responsibility of the trading partner to resolve any errors, communicating with providers as needed, and resubmit rejected transaction sets. Note that a single electronic claim file may contain multiple transaction sets.

**What other reporting is available for claims?**

Claims that receive a functional acknowledgment indicating acceptance are then validated to ensure they adhere to AmeriHealth business rules. An acknowledgment in the form of a U277 or 277CA is issued to the trading partner to communicate the results of the validation. Rejections are issued on an individual claims basis at this level of validation, rather than a transaction set basis. Rejected claims must be corrected and resubmitted, and accepted claims are forwarded for adjudication. If the trading partner is a third-party service provider, the acknowledgments must be made available to the appropriate billing staff for review.

**Does AmeriHealth accept paper claims?**

EDI transactions are a powerful tool for increasing office productivity and improving cash flow. Electronic claims submission is often faster and less expensive than paper submission. Many billing issues are identified and communicated more quickly, which can reduce time-consuming phone inquiries and aging accounts receivable.

AmeriHealth accepts paper claims; however, be advised that paper submissions typically are not effective for resolving submission issues encountered with electronic claims. Mailing addresses for paper claims can be found on the following documents:

- [Professional Payer IDs \(PDF\)](#)
- [Facility Payer IDs \(PDF\)](#)

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**Where can I find more information about HIPAA?**

EDI transactions are addressed under the Transactions and Code Sets Rule of the Administrative Simplification provisions under HIPAA. Read more about [HIPAA](#) from CMS.

Administrative Simplification provisions also include the HIPAA Privacy and Security Rules, which include regulations for the use and disclosure of Protected Health Information (PHI). The Office for Civil Rights enforces the HIPAA Privacy and Security Rules. Learn more from the [U.S. Department of Health and Human Services](#).

If you believe that AmeriHealth has violated your (or someone else's) health information privacy rights or committed another violation of the Privacy, Security, or Breach Notification Rules, you may [file a complaint](#).

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**What if I have more questions?**

The [Trading Partner Business Center](#) provides many resources for conducting EDI transactions successfully. For any inquiries related to your trading partner set-up or issues with sending and receiving EDI transactions, contact Highmark EDI Operations at 1-800-992-0246. Highmark EDI Operations is available Monday through Friday from 8 a.m. to 5 p.m. ET.

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