UCare

HIPAA Transaction Standard Companion
Guide 276/277 Health Care Claim Status
Inquiry and Response

VERSION: 3
DATE: 04/01/2021

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.
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.

UCare is committed to maintaining the integrity and security of health care data in accordance with applicable laws and regulations. This material contains confidential, propriety information. Unauthorized use or disclosure of the information is strictly prohibited. The information in the document is furnished for UCare and Trading Partner use only. Changes are periodically made to the information in this document, these changes in the product and/or program described in the publication at any time.

Disclosure of beneficiary claim status data is restricted under the provisions of the Privacy Act of 1974 and the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The Provider Beneficiary transaction is to be used for conducting UCare business only.

Please note:
The 277 responses returned by the 276/277 application should not be interpreted as a guarantee of payment. Payment of benefits remains subject to all health benefit plan terms, limits, conditions, exclusions and the member's claim status at the time services are rendered. Please refer to x12.org for data placement.

Table of Contents

Chapter 1: Introduction

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with UCare. Transmissions based on this Companion Guide, used in conjunction with the v5010 ASC X12N Implementation Guides, 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 Implementation Guides adopted for use under HIPAA. This Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

Scope

This Companion Guide is intended to describe to UCare trading partners the content and format of the Claim Status 276/277 transaction set in the electronic data interchange (EDI) environment. The 276 transaction is used to request claim status and the 277 transaction is used to respond with status information for the specified claim.

Overview

The purpose of this document is to provide information for conducting HIPAA-compliant electronic 276/277 transaction exchanges with UCare.

References

ASC X12 publishes implementation guides, known as Technical Reports Type 3 (TR3s), that define the data contents and compliance requirements for the health care implementation of the ASC X12N/005010 transaction sets. Following are the TR3s referenced in this guide:

- **ASC X12N/005010X212 Health Care Claim Status Request and Response (276/277) Consolidated Guide** and
- **Associated errata**, herein after v5010 276, v5010 277 and TR3s.

You are expected to comply with the requirements set forth in the TR3s. You can purchase these guides from the ASC X12 store at http://store.x12.org/.

NOTE:

Entities subject to Minnesota Statutes, section 62J.536 and related rules must follow the data content and other transaction- specific information of the Minnesota Uniform Companion Guide for the 276/277 Implementation. A copy of the Minnesota Uniform Companion Guide is available at no charge from the Minnesota Department of Health at: https://www.health.state.mn.us/facilities/ehealth/auc/index.html

Additional Information
- Both real-time and batch 276 inquiries are supported through this transaction.
- This transaction supports inquiries for UCare members only.

Chapter 2: Getting Started

Working with UCare

UCare offers the 276/277 EDI transaction set through Change Healthcare Payer Connectivity Services (PCS) clearinghouse. This guide includes the instructions you will need to establish a connection with PCS to begin exchanging standard 276/277 transactions.

Trading Partner Registration

Before submitting/receiving a 276/277 transaction, you and/or your clearinghouse must register as a trading partner with PCS. This will require some technical effort on your part to be able to exchange real-time transactions. Please have your clearinghouse contact PCS directly at:

> **CONTACT INFO:** PCS Support
> **PHONE:** 1-877-411-7271
> **EMAIL:** chc_pcssupport@changehealthcare.com

Changes begin with PCS creating access credentials with your clearinghouse. The submitter ID and receiver ID (ISA06/08) used for electronic claims submission will also be used as the submitter ID values for real-time claim status transactions. Submitters do have the ability to test the claim status transactions.

Certification and Testing Overview

UCare recommends submitting at least one test file to ensure connectivity and data transfer is successful with PCS; however, testing is not required. If you are interested in testing, you may contact PCS Support 1-877-411-7271 or chc_pcssupport@changehealthcare.com. This companion guide will serve as an aid in completing the testing process.

Testing with the Payer/Communications

Testing can begin once the necessary provisioning is completed between the clearinghouse and PCS and connectivity information is provided to the submitter.

Chapter 3: Connectivity with the Payer/Communications

System Availability and Downtime

PCS is generally available 24 hours a day, 7 days a week for 276/277 transaction exchange. To allow for periodic maintenance, PCS will schedule downtime during which 276/277 transactions may be unavailable. PCS will send out appropriate notification when downtime is scheduled.

> **CONTACT INFO:** PCS Support
> **PHONE:** 1-877-411-7271
> **EMAIL:** chc_pcssupport@changehealthcare.com

Process Flows

This section outlines the processes associated with submitting and receiving 276/277 transactions with UCare, via PCS.

```
                    276 Inquiry
 ┌─────────────────┐  ──────────►  ┌─────────────────┐
 │ Provider/Provider│              │   PCS (UCare's   │
 │  Clearinghouse   │              │ contracted vendor)│
 │                  │  ◄──────────  │                  │
 └─────────────────┘              └─────────────────┘
            TA1 or 999
         and/or 277 Response
```

Transmission Administrative Procedures

Real time 276 requests must contain a single member inquiry for each transaction. In addition, UCare only allows a single transaction to be contained within a submission as follows:

- One interchange (ISA-IEA) per transmission
- One functional group (GS-GE) per transmission
- One transaction set (ST-SE) per transmission

Batch 276 requests are limited to 99 ST/SE groupings per transaction. Each batch inquiry must be in its own ST/SE.

Re-Transmission Procedure

All X12 file submissions are pre-screened upon receipt to determine if the interchange control header (ISA) or interchange control trailer (IEA) segments are readable. If errors are found, a TA1 response transaction will be sent to notify the trading partner the file could not be processed.

If the transaction submission passes the ISA/IEA pre-screening above, it is then checked for ASC X12 syntax and HIPAA-compliance errors. If there are errors found when the compliance check is complete, a 999 will be sent to the trading partner informing them that the transaction has failed the compliance check. The following notifications will be sent if a transmission is unable to be completed:

Acknowledgements	Description
ASC X12 **TA1** v005010X231A1 (HIPAA)	Response to the X12 transactions where errors are encountered in the outer envelopes (ISA/IEA and GS/GE segments)
ASC X12 **999** v005010X231A1 (HIPAA)	Functional Acknowledgement: A negative 999 is sent in case of compliance issues.

To receive a 277 response, errors must be corrected, and the 276-inquiry resent.

Communication Protocol Specifications

UCare, via PCS, has provided connectivity that complies with the Committee on Operating Rules for Information Exchange (CORE) Safe Harbor principle (§5 Safe Harbor) according to the CORE Connectivity Phase II Rule 270. Submitters may contact PCS for specification details.

Passwords

As a secure connection between PCS and UCare has already been established, any passwords to protect the security of the data would need to be established between the trading partner and PCS. PCS requires each interchange submitter ID to be accompanied with a unique password for security reasons.

Chapter 4: Contact Information

EDI Customer Service

For inquiries related to 276/277 transaction setup and testing, please contact PCS customer support directly:

        Phone: 1-877-411-7271
        Days/Times: Monday – Friday, 8:00 a.m. – 5:00 p.m. CST
        Email: chc_pcssupport@changehealthcare.com

EDI Technical Assistance

Once provisioned by PCS and actively using the 276/277 transaction, you may contact PCS customer support directly for EDI technical assistance:

        Phone: 1-877-411-7271
        Days/Times: Monday – Friday, 8:00 a.m. – 5:00 p.m. CST
        Email: chc_pcssupport@changehealthcare.com

UCare Provider Service

If you require more details about claim status beyond what was provided in your 277 response, please log into UCare's provider portal.

Providers can also contact UCare's Provider Assistance Center (PAC) for more detailed claim status information. Please note that PAC representatives cannot assist with the interpretation of error reports received from PCS/their clearinghouse. These questions must be directed to PCS as noted above.

        Phone: 612-676-3300 or 1-888-531-1493 toll free
        Days/Times: Monday - Friday, 8:00 a.m. – 5:00 p.m. CST
        Email: Contracted providers may also contact UCare via secure email on the UCare Provider Portal

Chapter 5: Payer Specific Business Rules and Limitations

This section describes UCare-specific rules associated with the 276/277 transaction. It is important to review these as they may differ from rules and limitations required by other payers. UCare's trading partners must adhere to the following business rules and limitations for submitting transactions:

- For real time transactions:

    o Submitted inquiries must include information for only one claim per transaction.
    o Only one transaction should be submitted per functional group.
    o Only one functional group should be submitted per interchange.

- The 276 inquiry must include the UCare Member ID, first name, last name, date of birth, Claim Service Date, and Claim Number (listed on 277CA). See below for required 276 loops, segment and element values.

- Member data should always be sent in the Subscriber Loop of the transaction (2xxxD loops); UCare will not accept Dependent Loops (2xxxE loops).

- Claim status responses only provide the status of claims that are not yet in a paid state or have been paid within the past 30 days from the inquiry date.

- Claim status is only available for medical claims through UCare. (excluding Pharmacy and Dental)

Chapter 6: Trading Partner Agreements

Trading Partners

An EDI trading partner is defined as any UCare customer (provider, billing service, software vendor, employer group, financial institution, etc.) that transmits electronic data to, or receives electronic data from UCare, or from an UCare-contracted entity.

To ensure the integrity of the electronic transaction process, payers have EDI trading partner agreements that accompany the standard implementation guide. The trading partner agreement is related to the electronic exchange of information, whether the agreement is with an entity or part of a larger agreement. For example, a trading partner agreement may specify the roles and responsibilities of each party to the agreement in conducting standard transactions.

As UCare will be directly exchanging 276/277 data with PCS, the existing trading partner agreement between UCare and PCS will cover the data being passed and shared. It may be necessary for those originating these transactions to complete trading partner agreements with PCS. Please refer to the *Trading Partner Registration* in section 2 of this Companion Guide for additional direction and contact information.

Chapter 7: Acknowledgement and/or Reports

UCare (PCS) processes the following ASCX12 HIPAA acknowledgements for Claim Status Requests when there is an issue with processing the 276 requests.

- TA1 (X12) when the ISA-IEA envelope cannot be processed
- 999 when submitted 276 does not pass Level 2 HIPAA validation
- 277 is returned in all other cases to indicate the claim status

APPENDIX

Revision History

Revision Number	Date	Section	Notes
2	01/01/2021		Original document
3	04/01/2021		Updated language to point to x12.org for data placement