

# CA-MMIS 835 Companion Guide

005010X221A1 Health Care Claim:  
Payment/Advice (835) HIPAA Transaction

California Medicaid Management Information System (CA-MMIS)

Refers to the Implementation Guide

Based on ASC X12 Version 005010 and the CORE V5010 Master  
Companion Guide Template

V 1.4

November 2024

# Preface

This companion guide to the v5010 Accredited Standards Committee (ASC) X12N Implementation Guides and associated errata adopted under Health Insurance Portability and Accountability Act (HIPAA) clarifies and specifies the data content when exchanging electronically with the California Medicaid Management Information System (CA-MMIS) Health Plan.

Transmissions based on this companion guide, used in tandem 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 ASC X12N Implementation Guides.

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## Introduction

This 835 Claim Payment and Remittance Advice Companion Guide is intended for use by Trading Partners in conjunction with the ASC X12N 835 National Electronic Data Interchange Technical Report Type 3 (TR3). The TR3 can be purchased at:

<http://store.x12.org/store/healthcare-5010-consolidated-guides>

This companion guide outlines the procedures necessary for engaging in Electronic Data Interchange (EDI) with the CA-MMIS and specifies data clarification where applicable. Section 10, Transaction Specific Information, contains provider data clarifications for fields and values that are specific to CA-MMIS.

Transaction specific data will be detailed using a table. Each row on the table will contain information on the loop, segment, or data element that is specific to CA-MMIS. The table format is as follows:

- TR3 Page
- Loop ID
- Reference
- Name
- Codes
- Length
- Notes/Comments

## Scope

This companion guide is intended for use by Medi-Cal Trading Partners for the submission of X12N 835 transactions to CA-MMIS. This companion guide is to be used in conjunction with the 835 TR3.

CA-MMIS provides connectivity for the flow of medical information and data between medical providers, facilities, vendors, claim payment agencies, clearinghouses, and the Front-end Online Transaction Processor (OLTP). Beyond the receipt and delivery of this data, CA-MMIS provides translation to and from ASC X12N standard formats.

Refer to Section 4, Connectivity with CA-MMIS, for process flows.

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## Overview

This companion guide is divided into 10 sections. Each section describes the process or requirement that each Trading Partner must complete in order to submit and receive X12N 835 transactions for CA-MMIS.

This companion guide provides contact information for obtaining assistance from Medi-Cal, and provides data clarifications, including CA-MMIS specific data requirements.

## References

This document serves as a companion to the ASC X12N Electronic Data Interchange TR3 as adopted under HIPAA.

These can be purchased at: <http://store.x12.org/store/>

## Additional Information

For more information on CA-MMIS EDI services for providers, including provider enrollment and claim transaction information, visit: <http://www.medi-cal.ca.gov>.

# Getting Started

## Working with CA-MMIS

CA-MMIS is available for transaction transmission and download retrieval 22 hours a day, seven days-a-week. This availability is subject to scheduled maintenance downtime. It is operational policy to schedule preventative maintenance periods from 12:01 a.m. to 2:00 a.m. Pacific Time (PT).

The following days are recognized as official State holidays.

**Note:** Assistance with any system issues will be very limited on these days.

- New Year's Day, January 1
- Martin Luther King Day, the third Monday in January
- Presidents Day, the third Monday in February
- Memorial Day, the last Monday in May
- Independence Day, July 4
- Labor Day, the first Monday in September
- Veterans Day, November 11
- Thanksgiving Day, the fourth Thursday in November
- Christmas Day, December 25
- Every day appointed by the President of the United States, or by the Governor of California as a public holiday

## Trading Partner Registration

All entities that exchange electronic transactions with CA-MMIS must enroll as EDI Trading Partners. The Computer Media Claim (CMC) Help Desk will evaluate and provide the first level approval of the Trading Partner enrollment application and generates User ID (Login ID), Trading Partner ID and One-time password and sent to Trading Partners through electronic notification/Letters. Using the credentials, the Trading Partner will Login to complete the registration and testing process with Health Enterprise System for the requested transactions to send or retrieve electronic transactions. The Trading Partner enrollment application is available on the Medi-Cal Provider website at:

<http://www.medi-cal.ca.gov>

# Trading Partner Certification and Testing Overview

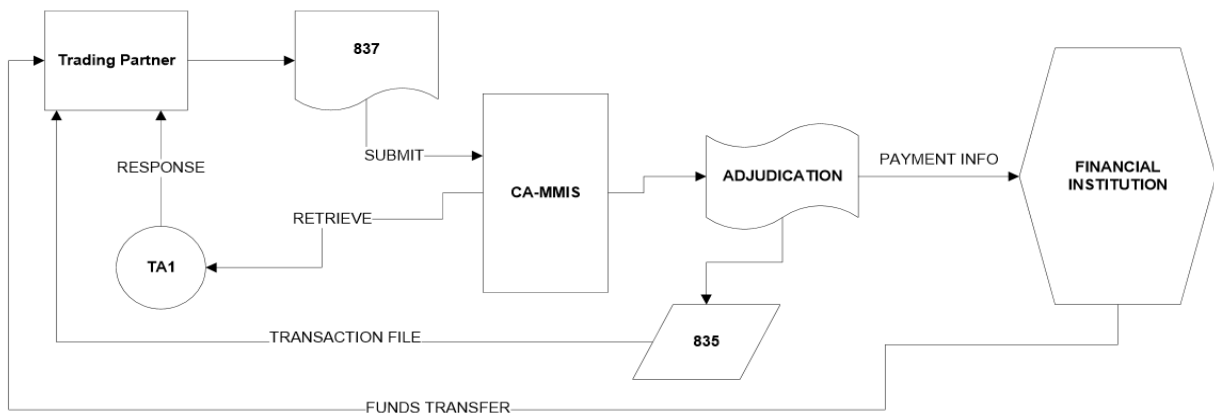
There is no 835 Partner Certification and Testing phase required for 835 transactions.

## Testing and Certification Requirements

There are no testing and certification requirements required for 835 transactions.

## Connectivity with the CA-MMIS

### Process Flows



### Legend:

#### Claim Submission

- Trading Partner submits 837P to CA-MMIS
- TA1 Response sent in acknowledgement of successful 837P receipt

#### Receipt of Funds and 835 Transaction File

- Payment information transmits to financial institution after claim adjudication
- If payment is confirmed, funds are transferred to Trading Partner's account
- Following adjudication of claim, 835 Transaction File shall be transmitted to Trading Partner with transaction details Transmission Administrative Procedures

# Transmission Administrative Procedures

Please see Section 5 (Contact Information) for assistance regarding transmission/production issues.

## Re-Transmission Procedure

### Transmission/Production Issues

Please see Section 5 (Contact Information) for assistance regarding transmission/production issues.

### Passwords

There are no re-transmission passwords required to complete 835 transactions.

## Contact Information

### Telephone Support Center

The CMC Help Desk assists users with questions about electronic submissions, and specializes in the following:

- Provides information on available transaction services
- Creates user accounts for file submission for approved Trading Partners
- Verifies receipt of electronic transmissions
- Provides assistance to Trading Partners experiencing transmission difficulties

The CMC Help Desk is available to all Medi-Cal Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Pacific Time, at the following numbers:

Toll Free: 1 (800) 541-5555 (option 4, 2, 1)

Local: (916) 636-1200 (option 4, 2, 1)

### Applicable Websites

Please visit <http://www.medi-cal.ca.gov> for CA-MMIS provider and Trading Partner services information, including Trading Partner enrollment information, Frequently Asked Questions (FAQs), manuals, and related documentation.



# Control Segments/Envelopes

## ISA-IEA

### ASC X12N 835 Health Care Claim Payment/Advice

| TR3 Page | Loop ID | Reference | Name                       | Codes | Length | Notes/Comments                           |
|----------|---------|-----------|----------------------------|-------|--------|--|
| N/A      | Header  | ISA       | Interchange Control Header | N/A   | N/A    | N/A                                      |
| N/A      | N/A     | ISA06     | Interchange Sender ID      | N/A   | N/A    | CA-MMIS will populate this segment with: |

## GS-GE

### ASC X12N 835 Health Care Claim Payment/Advice

| TR3 Page | Loop ID | Reference | Name                      | Codes | Length | Notes/Comments                           |
|----------|---------|-----------|---------------------------|-------|--------|--|
| N/A      | Header  | GS        | Functional GroupHeader    | N/A   | N/A    | N/A                                      |
| N/A      | N/A     | GS02      | Application Sender's Code | N/A   | N/A    | CA-MMIS will populate this segment with: |

## ST-SE

There are no special requirements for the ST-SE control segment.

# CA-MMIS Specific Business Rules and Limitations

## CA-MMIS Specific

Many of the data elements detailed in this companion guide reflect California business requirements, but still meet the standard requirements in the ASC X12N TR3. Inclusion of a business-required data field, as defined by this companion guide, will aid in the delivery of a positive response from CA-MMIS. For more information regarding California-specific billing requirements, consult the applicable CA-MMIS provider billing manual, which can be downloaded from the Medi-Cal Provider website at: <http://www.medi-cal.ca.gov>.

## Acknowledgements and/or Reports

### Transmission Errors and Reports

There are no transmission errors and reports provided for 835 transactions.

### Report Inventory

Users will not receive a report inventory with the 835 transactions.

## Trading Partner Agreements

Prior to engaging in EDI with the California MMIS Enterprise, prospective Trading Partners must complete a Trading Partner enrollment package, which includes a Trading Partner Signature Agreement Form that requires an original signature/Electronic Signature (if they submit online). Please follow all enrollment instructions and mail the signed Trading Partner Agreement Form to CA-MMIS, along with any other required documents to complete the enrollment application process.

Please find all California Provider/Trading Partner Enrollment information at:

<http://www.medi-cal.ca.gov>

The mailing address is:

Conduent  
CMC Unit  
P.O. Box 15508  
Sacramento, CA 95852-1508

## Trading Partners

In simple terms, an EDI Trading Partner is defined as any provider or agent acting on behalf of a provider that transmits electronic transaction data to or receives electronic transaction data from a health plan.

There are two different types of Trading Partners that participate in Medi-Cal:

- Vendors, Billing Agents, Clearinghouses and Switch Vendors who engage in EDI which may include claims and eligibility inquiries on behalf of enrolled CA Title XIX providers. These Trading Partners are not enrolled providers, their only interaction with the CA-MMIS is to submit and retrieve electronic data files.
- Providers re-enrolling under the Title XIX Program who use their own software programs to engage in EDI with the CA-MMIS. Some providers may use the CA-MMIS online file upload and retrieval features via the California MMIS Health Enterprise Portal.

# Transaction Specific Information

This section contains data clarifications, including California-specific data requirements.

## ASC X12N 835 Health Care Claim Payment/Advice

| TR3 Page | Loop ID | Reference | Name                      | Codes  | Length | Notes/Comments   |
|----------|---------|-----------|---------------------------|--------|--------|--|
| N/A      | Header  | BPR       | Financial Information     | N/A    | N/A    | N/A  |
| N/A      | Header  | BPR01     | Transaction Handling Code | I<br>H | N/A    | CA-MMIS will populate this data element with the value shown in the codes column<br><br>This transaction contains remittance information only. CA-MMIS will always send the remittance information separately from the payment |
| N/A      | N/A     | BPR03     | Credit/Debit Flag Code    | C      | N/A    | CA-MMIS will populate this data element with the code value shown in the codes column  |
| N/A      | N/A     | BPR04     | Payment Method Code       | ACH    | N/A    | CA-MMIS will populate this data element with one of the values shown in the codes column   |
| N/A      | N/A     | BPR05     | Payment Format Code       | CHK    | N/A    | Data Elements BPR05 thru BPR15 are only populated when BPR04 is ACH  |

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## ASC X12N 835 Health Care Claim Payment/Advice (Continued)

| TR3 Page | Loop ID | Reference | Name                           | Codes                                     | Length | Notes/Comments   |
|----------|---------|-----------|--------------------------------|---|--------|--|
| N/A      | Header  | TRN       | Reassociation Trace Number     | N/A                                       | N/A    | N/A  |
| N/A      | N/A     | N/A       | Reference Identification       | 2<br>4<br>5<br>6<br>7<br>A<br>M<br>N<br>L | N/A    | CA-MMIS will send this information to identify the financial program payment association.<br><br>CA-MMIS will populate this data element with one of the values shown in the code's column |
| N/A      | Header  | TRN04     | Foreign Currency Information   | N/A                                       | N/A    | All CA-MMIS payments are made in US dollars  |
| N/A      | 1000A   | CUR       | Payer Name                     | N/A                                       | N/A    | N/A  |
| N/A      | 1000A   | N1        | Payer Name                     | N/A                                       | N/A    | CA-MMIS will populate this data element with:  |
| N/A      | 1000A   | N102      | Payer Address                  | N/A                                       | N/A    | N/A  |
| N/A      | 1000A   | N3        | Address Information            | N/A                                       | N/A    | State of California Department of Health Care Services   |
| N/A      | N/A     | N301      | Address Information            | N/A                                       | N/A    | N/A  |
| N/A      | 1000A   | N302      | Payer City, State and ZIP Code | N/A                                       | N/A    | CA-MMIS will populate this data element with: Sacramento   |
| N/A      | 1000A   | N4        | City Name                      | N/A                                       | N/A    | N/A  |
| N/A      | N/A     | N402      | State or Province Code         | N/A                                       | N/A    | CA-MMIS will populate this data element with: CA   |

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## ASC X12N 835 Health Care Claim Payment/Advice (Continued)

| TR3 Page | Loop ID | Reference | Name                                | Codes                  | Length | Notes/Comments  |
|----------|---------|-----------|-------------------------------------|------------------------|--------|---|
| N/A      | N/A     | N403      | Postal Code                         | N/A                    | N/A    | CA-MMIS will populate this data element with: 942347320   |
| N/A      | N/A     | N/A       | N/A                                 | N/A                    | N/A    | N/A   |
| N/A      | 1000A   | PER       | Payer Technical Contact Information | N/A                    | N/A    | N/A   |
| N/A      | 1000A   | PER02     | Payer Contact Name                  | N/A                    | N/A    | CA-MMIS will populate this data element with:<br><br>State of California Department of Health Care Services |
| N/A      | N/A     | PER04     | Payer Contact Communication Number  | N/A                    | N/A    | CA-MMIS will populate this data element with: 8005415555  |
| N/A      | N/A     | PER06     | Payer Contact Communication Number  | N/A                    | N/A    | CA-MMIS will populate this data element with: www.medi-cal.ca.gov   |
| N/A      | 1000B   | N1        | Payee Identification                | N/A                    | N/A    | N/A   |
| N/A      | 1000B   | N103      | Identification Code Qualifier       | XX FI                  | N/A    | CA-MMIS will populate this data element with one of the values shown in the codes column                    |
| N/A      | 2100    | CLP       | Claims Payment Information          | N/A                    | N/A    | N/A   |
| N/A      | 2100    | CLP02     | Claim Status Code                   | 1<br>2<br>3<br>4<br>22 | N/A    | CA-MMIS will populate this data element with one of the values shown in the codes column                    |

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## ASC X12N 835 Health Care Claim Payment/Advice (Continued)

| TR3 Page | Loop ID | Reference | Name                               | Codes          | Length | Notes/Comments   |
|----------|---------|-----------|------------------------------------|----------------|--------|--|
| N/A      | N/A     | CLP06     | Claim Filing Indicator Code        | MC             | N/A    | CA-MMIS will populate this data element with value shown in codes column                 |
| N/A      | 2100    | NM1       | Service Provider Name              | N/A            | N/A    | N/A  |
| N/A      | 2100    | NM108     | Identification Code Qualifier      | XX<br>MC       | N/A    | CA-MMIS will populate this data element with one of the values shown in the codes column |
| N/A      | 2100    | NM1       | Corrected Priority Payer Name      | N/A            | N/A    | N/A  |
| N/A      | 2100    | NM108     | Identification Code Qualifier      | PI             | N/A    | CA-MMIS will populate this data element with value shown in codes column                 |
| N/A      | 2110    | SVC       | Service Payment Information        | N/A            | N/A    | N/A  |
| N/A      | 2110    | SVC01-1   | Product/Service ID Qualifier       | NU<br>HC<br>N4 | N/A    | CA-MMIS will populate this data element with one of the values shown in the codes column |
| N/A      | 2110    | REF       | Rendering Provider Information     | N/A            | N/A    | N/A  |
| N/A      | 2110    | REF01     | Reference Identification Qualifier | 1D             | N/A    | CA-MMIS will populate this data element with value shown in the codes column             |
| N/A      | 2110    | AMT       | Service Supplemental Amount        | N/A            | N/A    | N/A  |

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## ASC X12N 835 Health Care Claim Payment/Advice (Continued)

| TR3<br>Page | Loop ID | Reference | Name                     | Codes   | Length | Notes/Comments  |
|-------------|---------|-----------|--------------------------|---------|--------|---|
| N/A         | 2110    | AMT01     | Amount<br>Qualifier Code | T<br>T2 | N/A    | CA-MMIS will<br>populate this data<br>element with<br>values shown in<br>the codes column |



# Appendices

## A. Implementation Checklist

There is no Implementation Checklist provided for the 835 transactions.

## B. Business Scenarios

Contact the California CMC Help Desk to discuss your specific EDI related business needs with Medi-Cal, should they not be covered in this guide or other available California Medicaid X12N transaction companion guides.

## C. Transmission Examples

Please contact the California CMC Help Desk for transmission examples.

## D. Other Resources

- <https://files.medi-cal.ca.gov/pubsdoco/signup.aspx>
- [https://files.medi-cal.ca.gov/pubsdoco/CTM\\_manual.aspx](https://files.medi-cal.ca.gov/pubsdoco/CTM_manual.aspx)
- [https://files.medi-cal.ca.gov/pubsdoco/Manuals\\_menu.aspx](https://files.medi-cal.ca.gov/pubsdoco/Manuals_menu.aspx)
- <http://www.wpc-edi.com/>

## E. Frequently Asked Questions

For current Provider and Trading Partner FAQs, please visit the following page:

<https://he.medi-cal.ca.gov/portals/wps/portal/EnterpriseHome>

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## F. Change Summary

| Version Number | Date              | Description                       | Notes/Comments   |
|----------------|-------------------|-----------------------------------|--|
| 1.0            | March 20, 2015    | Initial Document for              | Document reformatted to meet CAQH CORE standard Companion guide format (Phase I CORE Req. 152).                                    |
| 1.1            | October 8, 2015   | Deliverables                      | Requested re-write of Section 2 and deletion of large part of Section 3.   |
| 1.2            | March 18, 2016    | Updates to sections 2, 4, and 10. | System availability and downtime.<br>Process flow added to connectivity.<br>Updated transaction handling and payment method codes. |
| 1.3            | June 2021         | N/A                               | N/A  |
| 1.4            | November 20, 2024 | SDN 23036                         | Updated DHCS logo  |