

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 1.3

June 2021

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.

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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

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Trading Partner Certification and Testing Overview

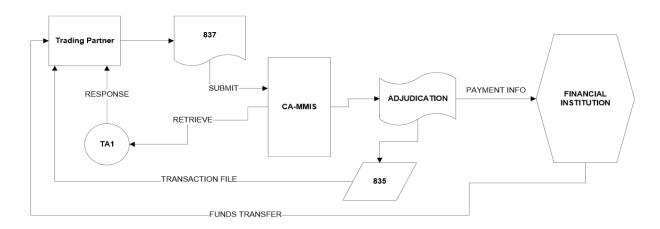
There is no 835 Partner Certification and Testing phase required for 835 transactions.

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

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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.

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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.

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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.

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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 H	N/A	CA-MMIS will populate this data element with the value shown in the codes column 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	С	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

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 4 5 6 7 A M N L	N/A	CA-MMIS will send this information to identify the financial program payment association. 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:

TR3	Loop ID	Reference	Name	Codes	Length	Notes/Comments
Page 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: 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 2 3 4 22	N/A	CA-MMIS will populate this data element with one of the values shown in the codes column

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 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 HC 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

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

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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/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

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. Process flow added to connectivity. Updated transaction handling and payment method codes.