



## Emergency Transportation Providers: 837 Professional Claim Submission

OMAP  
HIPAA  
Bulletin

7

During the October and November OMAP Provider Trainings OMAP Trainers met several emergency transportation providers with questions on what elements they need to send to OMAP on the new, 837 Professional electronic claims.

HIPAA Bulletin 7 is intended to provide emergency transportation providers with the information necessary to successfully submit emergency transportation claims to OMAP in the 837 Professional format. The Medical Transportation Rulebook and Supplemental Information outline most of the information in this bulletin. You may Access them at:

<<http://www.dhs.state.or.us/policy/healthplan/guides/medtrans/main.html>>.

The rules for billing are the same for electronic data interchange (EDI) as on paper (except TOS), and you will need to use some different codes when submitting in the 837 Professional format. If you need a list of current HIPAA-compliant codes, please see the Washington Publishing Web site, <[http://www.wpc-edi.com/Default\\_40.asp](http://www.wpc-edi.com/Default_40.asp)>. You will click on HIPAA and the Code Lists.

### Diagnosis Codes

OMAP does not request or require a diagnosis code on an emergency transportation claim. However, if you include a diagnosis code that does not pair with that service on the Prioritized List, then the system will deny the claim.

### Place of Service (POS)

Ambulance providers should include a POS on their 837 Professional claims for emergency transportation services. You will need to send OMAP HIPAA-compliant POS codes indicating where the client was picked up. For emergency services, you would use either one of the following codes:

**41 Ambulance Land**

A land vehicle specifically designed, equipped and staffed lifesaving and transporting the sick or injured.

**42 Ambulance Air or Water**

An air or water vehicle specifically designed, equipped and staffed for lifesaving and transporting the sick or injured.

## **Modifiers/Destination Codes**

The 837 Professional transaction requires you to continue to send modifiers on your claims (as appropriate). The combination of modifier (or lack of) and procedure code is very important. This combination of codes will determine which TOS OMAP's system will assign.

In the current format, a one-digit OMAP destination code was used to indicate where a client was picked up and dropped them off. The OMAP destination codes are not HIPAA-compliant. Therefore, you will need to use the appropriate HCPCS modifier to indicate the client's pick-up point and another code for the destination. The HCPCS book lists the modifiers in code range A0000-A0999. You will need to use two one-digit codes to create one modifier. The combination of two codes will indicate the pick-up and drop-off points.

## **Emergency Flag**

Please make sure to indicate in your 837 Transaction whether the claim is an emergency transport or not. You will indicate this in the appropriate loop (please see Implementation Guide) also available at the Washington Publishing Co. Web site.

## **Coordination of Benefits (COB)**

The 837 Professional transaction will allow you to send secondary payer claims within this transaction. Therefore, if you have a claim that Medicare, or any other insurer, has paid as primary, you can use your 837 Professional transaction to report the other insurance and bill OMAP as secondary. If you are not currently sending COB/secondary claims to OMAP in the 837 Professional transaction and you want more information, please contact the EDI Registration and Testing Team at [dhs.hipaatesting@state.or.us](mailto:dhs.hipaatesting@state.or.us) or 503-947-5347.

## **Correcting electronic claims**

OMAP does not currently process adjustments electronically. If you need to adjust a claim that you submitted and OMAP processed, you will need to send a paper OMAP 1036 Individual Adjustment form. Instructions and sample forms are in your Supplemental Information booklet on the Medical Transportation rules Web page, <http://www.dhs.state.or.us/policy/healthplan/guides/medtrans/main.html>.

If OMAP denied your claim incorrectly, however, you can correct the information and resend a new claim electronically.

## **Trading Partner Agreement (TPA)**

If you have not already done so, you will need to complete DHS' TPA to identify the 837 claims transaction(s) you wish to submit and who will be submitting them. This agreement is available on our Web site at:

<[http://egov.oregon.gov/DHS/admin/hipaa/testing\\_reg.shtml#packets](http://egov.oregon.gov/DHS/admin/hipaa/testing_reg.shtml#packets)>.

If you have questions, please contact the EDI Registration and Testing Team at 503-947-5347 or <[dhs.hipaatesting@state.or.us](mailto:dhs.hipaatesting@state.or.us)>.