

Oregon DHS Companion Guide for 835 Fee For Service Payment/Advice

The objectives of this document are:

*To clarify what information is being returned by the Dept. Of Human Services (OR-DHS)
where the guide indicates that the choice is dependent on the Payer.

This Companion Guide supplements the 835 Payment/Advice Implementation Guide Version 004010X091A1.

Every effort has been made to prevent errors in this document. However, if there is a discrepancy
between this document and the Implementation guide, the Implementation Guide is the final authority.

In the examples given in this Companion Guide, a lowercase "b" denotes a blank space.

ISA - Interchange Control Header - B3

Usage: Required

Segment Max Use within Loop: 1

Example: ISA*00*bbbbbbbb*00*bbbbbbbb*ZZ*ORDHSOMAPbbbb*ZZ*tp123456bbbb*010801*1452*U*00401*00000001*0*T*::~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
ISA01	Authorization Information Qualifier	R	2/2	ID	00	
ISA03	Security Information Qualifier	R	2/2	ID	00	
ISA05	Interchange ID Qualifier	R	2/2	ID	ZZ	
ISA06	Interchange Sender ID	R	15/15	AN	ORDHSOMAP	Spaces are inserted <u>after</u> data to meet 15-byte field requirement.
ISA07	Interchange ID Qualifier	R	2/2	ID	ZZ	
ISA08	Interchange Receiver ID	R	15/15	AN		The Trading Partner number (tp##### (lowercase "tp")) assigned by OR-DHS at the beginning of Business-To-Business (B2B) Testing, used for B2B Testing and Production. Spaces are inserted <u>after</u> data to meet 15-byte field requirement.

GS - Functional Group Header - B8

Usage: Required

Example: GS*HP*ORDHSOMAP*tp123456*20030701*1452*00000001*X*004010X091A1~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
GS02	Application Sender's Code	R	2/15	AN	ORDHSOMAP	
GS03	Application Receiver's Code	R	2/15	AN		The trading partner number (tp##### (lowercase "tp")) assigned by OR-DHS at the beginning of Business-To-Business (B2B) Testing, used for B2B Testing and Production.

BPR -- Financial Information - page 44

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: 1
Loop ID: None

Example: BPR*I*150000*C*CHK*****20030711*~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
BPR01	Transaction Handling Code	R	1/2	ID	I H	I= Remittance Information only H= Notification Only
BPR03	Credit or Debit Flag Code	R	1/1	ID	C	Credit
BPR04	Payment Method Code	R	3/3	ID	CHK NON	CHK= Check NON= Non Payment Data

TRN -- Reassociation Trace Number - page 52

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: 1

Example: TRN*1*12345*1930592162~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
TRN01	Trace Type Code	R	1/1	ID	1	
TRN02	Check or EFT Trace Number	R	1/30	AN		Check or EFT Number
TRN03	Payer Identifier	R	10/10	AN	1930592162	OR-DHS Federal Tax ID Number preceded by a "1".

N1 -- Payer Identification - page 62

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: 1
Loop ID: 1000A

Example: N1*PR*OR DHS OMAP~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
N102	Payer Name	S	1/60	AN	OR DHS OMAP	

N3 -- Payer Address - page 64

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: 1
Loop ID: 1000A

Example: N3*500 SUMMER STREET NE~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
N301	Payer Address Line	R	1/55	AN	500 SUMMER STREET NE	

N4 -- Payer City, State, Zip Code - 65

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: 1
Loop ID: 1000A

Example: N4*SALEM*OR*973100315~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
N401	Payer City Name	R	2/30	AN	SALEM	
N402	Payer State Code	R	2/2	ID	OR	
N403	Payer Postal Zone or Zip Code	R	3/15	ID	973010315	

N1 -- Payee Identification - page 72

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: 1
Loop ID: 1000B

Example: N1*PE*ANY HOSPITAL*FI*121236~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
N103	Identification Code Qualifier	R	1/2	ID	FI	

REF -- Payee Additional Identification - page 77

Usage: Situational
Segment Max Use within Loop: >1
Loop Repeat: 1
Loop ID: 1000B

Example: REF*PQ*123456~

			ATTRIBUTES			
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
REF02	Additional Payee Identifier	R	1/30	AN		Should match value in PLB01 if the PLB segment is used.

LX -- Header Number - page 79

Usage: Situational
Segment Max Use within Loop: 1
Loop Repeat: > 1
Loop ID: 2000

Example: LX*1~

			ATTRIBUTES			
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
LX01	Assigned Number	R	1/6	N		The number will be incremented by 1 for each claim (CLP loop) within the ST/SE envelope.

CLP -- Claim Payment Information - page 89

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: >1
Loop ID: 2100

Example: CLP*7722337*1*211366.97*138018.4**MC*4004365123456~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
CLP01	Patient Control Number	R	1/38	AN		Patient Account Number if sent on claim.
CLP02	Claim Status Code	R	1/2	ID		1 = Processed as Primary 2 = Processed as Secondary 3 = Processed as Tertiary 4 = Denied 22 = Reversal of Previous Payment
CLP04	Claim Payment Amount	R	1/18	R		The Actual Provider Payment amount.
CLP05	Patient Responsibility Amount	S	1/18	R		The patient's co-pay amount.
CLP06	Claim Filing Indicator Code	R	1/2	ID	MC	
CLP07	Payer Claim Control Number	S	1/30	AN		OR-DHS ICN assigned.

CAS -- Claim Adjustment - Page 95

Usage: Situational
Segment Max Use within Loop: 99
Loop Repeat: >1
Loop ID: 2100

Example: CAS*PR*1*793~

NOTE: DHS will create up to two (2) CAS (Claim and Service adjustment) segments at the Claim level.

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
CAS02	Adjustment Reason Code	M	1/5	ID		Delete/Adjustment Reason Code from 837.

NM1 -- Patient Name - page 102

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: >1
Loop ID: 2100

Example: NM1*QC*1*SHEPARD*SAM*O***MR*12345678~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
NM108	Identification Code Qualifier	S	1/2	ID	MR	
NM109	Patient Identifier	S	2/80	AN		Patient's 8-digit prime number as it appears on the OMAP medical care identification card.

REF -- Other Claim Related Identification - page 126

Usage: Situational
Segment Max Use within Loop: 99
Loop Repeat: >1
Loop ID: 2100

Example: REF*G1*4004365123456~

ATTRIBUTES						
ELEMENT	Element Name	USE	Min/Max	Data Type	Codes/Values	Comments
REF01	Reference Identification Qualifier	R	2/3	ID		F8 = ICN XRF sent by provider. G1 = Prior Authorization Number

DTM -- Claim Date - page 130

Usage: Situational
Segment Max Use within Loop: 4
Loop Repeat: >1
Loop ID: 2100

Example: DTM*233*19960916~

ATTRIBUTES						
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
DTM01	Date Time Qualifier	R	3/3	ID		232 = Claim Statement Period Start 233 = Claim Statement Period End

SVC -- Service Payment Information - page 139

Usage: Situational
Segment Max Use within Loop: 1
Loop Repeat: 999
Loop ID: 2110

Example: SVC*HC:99214*100*80~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
SVC01-2	Procedure Code	R	1/48	AN		Procedure Code "T2026" indicates a capitation service to PCCM providers.
SVC01-3	Procedure Modifier	S	2/2	AN		OR-DHS will return the first 2 Modifier Codes (if sent on claim).
SVC01-4	Procedure Modifier	S	2/2	AN		OR-DHS will return the first 2 Modifier Codes (if sent on claim).
SVC03	Line Item Provider Payment Amount	R	1/18	R		DRG claim transactions do not detail the paid amounts. To balance the 835, DHS will report the line item charge amount for 837 I inpatient DRG type transactions.

DTM -- Service Date - page 146

Usage: Situational
Segment Max Use within Loop: 3
Loop Repeat: 999
Loop ID: 2110

Example: DTM*472*19961031~

NOTE: OR-DHS processes up to two repeats.

CAS -- Service Adjustment - page 148

Usage: Situational
Segment Max Use within Loop: 99
Loop Repeat: 999
Loop ID: 2110

Example: CAS*CO*A2*20*88~

NOTE: DHS will create up to two (2) CAS (Claim and Service adjustment) segments at the service level. Each CAS segment has one Claim Adjustment Group Code and up to six (6) instances of Adjustment Reason Code, Monetary Amount, and Quantity.

REF -- Service Identification - page 154

Usage: Situational
Segment Max Use within Loop: 7
Loop Repeat: 999
Loop ID: 2110

Example: REF*6R*100~

NOTE: OR-DHS processes one repeat.

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
REF01	Reference Identification Qualifier	R	2/3	ID	6R	

REF -- Rendering Provider Information - page 156

Usage: Situational
Segment Max Use within Loop: 10
Loop Repeat: 10
Loop ID: 2110

Example: REF*1D*123456~

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
REF01	Reference Identification Qualifier	R	2/3	ID		1D = Medicaid Provider Number 1G = Provider UPIN Number

LQ -- Health Care Remark Codes - page 162

Usage: Situational
Segment Max Use within Loop: 99
Loop Repeat: 999
Loop ID: 2110

Example: LQ*HE*12345~

NOTE: OR-DHS will return up to 8 instances of the LQ (Health Care Remark Codes) segment. Each segment allows one (1) Remark Code.

		ATTRIBUTES				
ELEMENT	NAME	USE	Min/Max	Data Type	Codes/Values	Comments
LQ01	Code List Qualifier Code	R	1/3	ID	HE	

PLB -- Provider Adjustment - page 164

Usage: Situational

Segment Repeat: >1

Loop ID: None

Example: PLB*123456*19960930*WO:9876514*1.27~

NOTE: OR-DHS processes up to two repeats.

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
PLB01	Provider Identifier	R	1/30	AN		Billing Provider Number.
PLB03-1	Adjustment Reason Code	R	2/2	ID		OR-DHS uses: 72 = Authorized Return CS = Adjustment WO = Overpayment Recovery
PLB04	Provider Adjustment Amount	R	1/18	R		Adjusted amount of provider's remittance.