

Oregon DHS 837 Companion Document Addendum for OR-DHS Internal Agencies

The objectives of this document are:

- *To clarify what information is needed by Dept. of Human Services (OR-DHS) of those agencies internal to OR-DHS.

- *To point out preferred selections for data elements where multiple alternatives exist.

This Companion Guide supplements all 837 Companion Guides for OR-DHS internal agencies only.

In order to create an OR-DHS HIPAA compliant transaction, you must first meet the requirements of the

Implementation Guide and then incorporate the payer (OR-DHS) specific requirements, except where noted in this document, which supercedes the published 837 companion guides.

OR-DHS processes all alpha characters in upper case (except ISA06 and GS02). Do not use special characters.

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.

IMPORTANT NOTE: When determining the delimiters to use/send, please take data content, communication protocols, and industry standards into account. If transmission or transaction errors can be traced to the choice of a delimiter, trading partners will be notified, and the use of that delimiter will be prohibited. For example: When the EBCDIC character for <new line> is used as a delimiter, if it is converted to ASCII, it becomes two characters - <carriage return> and <line feed>. Systems using ASCII characters then encounter extra, non-conforming characters, and reject the transmission.

NM1 -- Submitter Name - page 67

Usage: Required

Segment Max Use within Loop: 1

Loop ID: 1000A

Example: NM1*41*2*Jaun Orez*****46*DHSCWSTCM~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
NM109	Submitter Identifier	R	2/80	AN		<p>If you are a business partner submitting Public Health Laboratory claims, use DHSHDXPHL.</p> <p>If you are a business partner submitting Mental Health State Institution claims, use DHMSI.</p> <p>If you are a business partner submitting Mental Health Waivered Service encounter data, use DHSMWS.</p> <p>If you are a business partner submitting targeted case management (TCM) claims, use the following: DHSCWSTCM for Child Welfare, DHSSSSTCM for Self Sufficiency, or DHSHDXTCM for Health Division.</p> <p>These submitter ID's are extremely important and are needed to process your claims correctly.</p>