

Standard companion guide transaction information

Instructions related to transactions
based on Accredited Standards
Committee (ASC) X12
implementation guides (IG),
version 005010

837 – ANSI X12
version
005010X224A1

Companion guide
version number: 5.0



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Preface

Companion guides (CGs) may contain two types of data: instructions for electronic communications with the publishing entity (communication/connectivity instructions) and supplemental information for creating transactions for the publishing entity while ensuring compliance with the associated ASC X12 implementation guide (transaction instructions). Either the communication/connectivity component or the transaction instruction component must be included in every CG. The components may be published as separate documents or as a single document.

The communication/connectivity component is included in the CG when the publishing entity wants to convey the information needed to commence and maintain communication exchange.

The transaction instruction component is included in the CG when the publishing entity wants to clarify the implementation guide instructions for submission of specific electronic transactions. The transaction instruction component content is limited by ASC X12's copyrights and fair use statement.

Transaction instruction (TI)

Background

Overview of HIPAA legislation: The Health Insurance Portability and Accountability Act (HIPAA) of 1996 carries provisions for administrative simplification. This requires the secretary of the Department of Health and Human Services (HHS) to adopt standards to support the electronic exchange of administrative and financial health care transactions primarily between practitioners and plans. HIPAA directs the secretary to adopt standards for transactions to enable health information to be exchanged electronically and to adopt specifications for implementing each standard. HIPAA serves to:

- Create better access to health insurance.
- Limit fraud and abuse.
- Reduce administrative costs.

Compliance according to HIPAA: The HIPAA regulations at 45 CFR 162.915 require that covered entities not enter into a trading partner agreement that would do any of the following:

- Change the definition, data condition or use of a data element or segment in a standard.
- Add data elements or segments to the maximum defined data set.
- Use code or data element(s) that is/are marked “not used” in the standard’s implementation specifications or is/are not in the standard’s implementation specification(s).
- Change the meaning or intent of the standard’s implementation specification(s).

Compliance according to ASC X12: ASC X12 requirements include specific restrictions that prohibit trading partners from:

- Modifying, defining or clarifying content contained in the implementation guide.
- Modifying any requirement contained in the implementation guide.

Intended use

The transaction instruction component of this companion guide must be used in conjunction with an associated ASC X12 implementation guide. The instructions in this companion guide are not intended to be stand-alone requirements. This companion guide conforms to all the requirements of any associated ASC X12 implementation guide and is in conformance with ASC X12's fair use and copyright statements.

Document purpose

The purpose of the Humana companion guide is to define (for directly connected trading partners) the required values for submission 837 — ANSI X12 Health Care Claim: Dental Version 005010X224A1 transaction(s) to Humana.

Humana's companion guide(s) supplement the HIPAA implementation guides and should be used in conjunction with the published HIPAA implementation guides. This document is not intended to convey information that in any way exceeds the requirements or uses of data expressed in the implementation guides. This supplement is solely for the purpose of clarification and facilitation, if implementing 837 transaction(s) with Humana.

Included ASC X12 implementation guide

This table lists the X12N implementation guide for which specific transaction instructions apply and which is included in the instruction tables section of this document.

| Unique ID | Name |
|--------------|---------------------------------|
| 005010X224A1 | Health Care Claim; Dental (837) |

Instruction tables

These tables contain one or more rows for each segment for which a supplemental instruction is needed.

ISA

005010X224A1 Health care claim: Dental

| Loop ID | Reference | Name | Codes | Notes/comments |
|-------------|-----------|-----------------------------------|---------------|----------------------------------|
| Interchange | ISA | Interchange control header | | |
| | ISA05 | Interchange ID qualifier | 14 | "14" D-U-N-S® Number plus suffix |
| | ISA08 | Interchange receiver ID | 0499441430000 | HumanaDental D-U-N-S number |

Interchange control header

Humana requires the use of the D-U-N-S Number, qualifier 14 for ISA05.

Example: ISA*00* *00* *14*1234567890000 *14*0499441430000

*110111*1001*^*00501*000000905*0*P:~

GS

005010X224A1 Health care claim: Dental

| Loop ID | Reference | Name | Codes | Notes/comments |
|------------------|-----------|--------------------------------|---------------|---------------------------|
| Functional group | GS | Functional group header | | HumanaDental requirements |
| | GS02 | Application sender's code | 61101 | 61101 — Fee for service |
| | GS03 | Application receiver's code | 0499441430000 | Humana D-U-N-S number |

Functional group header

Humana requires the use of the Humana payer ID in GS02 and the application receiver code in GS03. The intent is to identify what types of data are being sent, how the trading partner received those data and if there is a fee to be paid for these transactions.

Example

GS * HC*61101*0499441430000*20111107*0850*47234227*X*005010X224A1~

Subscriber information

005010X224A1 Health care claim: Dental

| Loop ID | Reference | Name | Codes | Notes/comments |
|---------|-----------|-------------------------------|-------|--|
| 2010BA | NM1 | Subscriber information | | Humana requirements |
| | NM109 | Subscriber ID | | Humana requires the use of the member identification (ID) number shown on the Humana insurance card. |

Humana requires the use of the member ID number shown on the Humana insurance card.

Example: NM1*IL*1*DOE*JOHN*T***JR*MI*123456789***~

TI additional information

Other resources

ASC X12 TR3 implementation guides: <http://store.x12.org>