



HIPAA Transaction Standard Companion Guide
835 (ERA) Electronic Remittance Advice
Health Care Claim Payment/Advice

VERSION: 4
DATE: 11/01/2024

Disclosure Statement

This document is intended to be a companion guide for use in conjunction with the ASCX12N National Electronic Data Interchange Transaction Set Implementation and Addenda Guides. This document contains clarifications as permitted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Standard for Electronic Transactions. This document is not intended to convey information that exceeds the requirements or usages of data expressed in the ASCX12N National Electronic Data Interchange Transaction Set Implementation and Addenda Guides defined by HIPAA.

Aspirus Health Plan is committed to maintaining the integrity and security of health care data in accordance with applicable laws and regulations. This material contains confidential, propriety information. Unauthorized use or disclosure of the information is strictly prohibited. The information in the document is furnished for Aspirus Health Plan and Trading Partner use only. Changes are periodically made to the information in this document, these changes in the product and/or program described in the publication at any time.

Disclosure of beneficiary data is restricted under the provisions of the Privacy Act of 1974 and the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The Provider Beneficiary transaction is to be used for conducting Aspirus Health Plan business only.

Please note:

Payment of benefits remains subject to all health benefit plan terms, limits, conditions, exclusions, and the member's eligibility at the time services are rendered.

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Introduction

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Aspirus Health Plan. Transmissions based on this companion guide, used in conjunction 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. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

Scope

This Companion Guide is intended to describe to Aspirus Health Plan trading partners the content for the ASC/X12N 835 5010 transaction with Aspirus Health Plan. This Companion guide is designed to assist those who receive Electronic Remittance Advice (ERA) and/or payments in the 835 formats from Aspirus Health Plan. This guide is intended to supplement information from the ASC X12 Technical Reports Type 3 (TR3s).

References

ASC X12 publishes implementation guides, known as Technical Reports Type 3 (TR3s), which define the data contents and compliance requirements for the health care implementation of the ASC X12N/005010 transaction sets. Following are the Interchange Technical Report Type 3 (TR3s) referenced in this guide:

- **ASC X12N/005010X221A1 Health Care Payment/Advice (835) Companion Guide** and
- **Associated errata**, hereinafter 005010X221A1 TR3s.

You are expected to comply with the requirements set forth in the TR3s. You can purchase these guides from the ASC X12 store at www.x12.org

Additional Information

This transaction supports Electronic Remittance Advice (ERA) and/or payments in the 835 formats for Aspirus Health Plan. This Companion Guide assumes that you, the reader, are a representative of the Trading Partner or Provider, and that as such, you understand basic X12 structure, looping, and standard data requirements as set forth in the TR3 for each transaction set you wish to exchange.

This Companion Guide also assumes that:

- You have an EDI interface that supports the transaction sets the Trading Partner wishes to exchange.
- You have resources to develop a connection between your interface and choice of trading partner.

Getting Started

Trading Partner Registration

Before receiving an 835 transaction

- *First you must register with your clearinghouse to receive 835 transactions, before completing the Aspirus Health Plan application.*
- *Once the clearing house agreement is completed then submit the application for 835 transactions with Aspirus Health Plan.*

Claims & Billing – Aspirus Health Plan – Medicare



Aspirus Health Plan's payer ID: 36483

CONTACT INFO:

For additional questions contact Aspirus Health Plan Provider Services:

Phone: (855) 931-4852

Days/Times: Monday - Friday, 8:00 a.m. – 5:00 p.m. CST

Information about the Health Care Claim Payment Advice (835) Transaction

Adjustment

As defined in the 005010X221A1 TR3, “the term adjustment refers to changes to the amount paid on a claim, service or remittance advice versus the original submitted charge/bill. Adjustment does not refer to changing or correcting a previous adjudication of a claim.”

CARC and RARC Updates/Changes

National organizations are responsible for maintenance of CARC and RARC and periodically add, delete, or make other changes to these codes. This Guide and Appendix incorporate by reference any changes adopted by national organizations with responsibilities for these codes.

CARC are updated (additions, deletions, changes) three times/year by the Joint Claim Adjustment Reason/Health Care Claim Status Reason Code Maintenance Committee. These updates are published at www.x12.org.

RARC are maintained by the federal Centers for Medicare & Medicaid Services (CMS). Updates to the Remark Codes (additions, changes, deletions) are published at www.x12.org.

Relationship and Importance of Accurate Balanced 835 Transaction for 837 Coordination of Benefits COB

It is necessary that the 835 transactions balance, contain accurate information, and utilize active CARC, RARC or NCPDP reject codes. After the receipt and posting of the 835 payment and/or adjustment data, this data must be used in 837 Coordination of Benefits (COB) situations. When submitting COB claims to secondary/tertiary payers, the provider needs to populate the appropriate 837 segments with the prior payer’s payment and/or adjustment data. If this data is inaccurate, or does not balance, then the subsequent 835 payment and remittance advice from the secondary/tertiary payer may be delayed, or inaccurate.

General Notes

Data Contents and Specifications

This section describes the use of the Interchange Control segments (ISA, IEA). These segments mark the beginning and ending of an interchange. This segment includes a description of the expected sender and receiver codes and delimiters. The first element delimiter in the ISA segment is an Asterisk (*) which will be used as the delimiter throughout the transaction. The final character in the ISA segment is a Tilde (~) which will be used as the delimiter for each segment in the transaction.

Aspirus Health Plan, via Change Healthcare, has provided connectivity that complies with the Committee on Operating Rules for Information Exchange (CORE) Safe Harbor principle (§5 Safe Harbor) according to the CORE Connectivity Phase II Rule 270. Submitters may contact Change Healthcare for specification details.

Contact Information

CONTACT INFO:

For additional questions contact Aspirus Health Plan Provider Services:

Phone: (855) 931-4852

Days/Times: Monday - Friday, 8:00 a.m. – 5:00 p.m. CST

Trading Partner Agreements

Trading Partners

An EDI trading partner is defined as any Aspirus Health Plan customer (provider, billing service, software vendor, employer group, financial institution, etc.) that transmits electronic data to, or receives electronic data from Aspirus Health Plan, or from a Aspirus Health Plan contracted entity.

To ensure the integrity of the electronic transaction process, payers have EDI trading partner agreements that accompany the standard implementation guide. The trading partner agreement is related to the electronic exchange of information, whether the agreement is with an entity or part of a larger agreement. For example, a trading partner agreement may specify the roles and responsibilities of each party to the agreement in conducting standard transactions.

As Aspirus Health Plan will be directly exchanging 835 data with Availity, the existing trading partner agreement between Aspirus Health Plan and Availity will cover the data being passed and shared. It may be necessary for those originating these transactions to complete trading partner agreements with Availity.