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2006 Revised American National Standards Institute (ANSI) X12N 837 Institutional Health Care Claim Companion Document

Keywords

MM4379, CR4379, R2170TN, 2006, revised, ANSI, American, National, Standards, Institute, X12N 837, institutional, health, care, claim, companion, document

Provider Types Affected

Providers and physicians who bill Medicare Fiscal Intermediaries (FIs), including Regional Home Health Intermediaries (RHHIs), for services

Key Points

- The effective date of the instruction and the implementation date is June 29, 2006.
- The ANSI X12N 837 Institutional Health Care Claim Companion Document is being updated to add National Provider Identifier (NPI) and other information.
- This companion document is a set of statements that supplements the X12N 837 Institutional Implementation Guide, and clarifies Medicare contractor expectations regarding data submission, processing, and adjudication.
- It will be available through the affected providers' Medicare FI or RHHI via their newsletter and website. Information will also be provided via listserv communication for those who subscribe to their Medicare FI's or RHHI's listserv.
- The information contained in the companion document to the Health Insurance Portability and Accountability Act (HIPAA) X12N 837 institutional claim is intended solely for clarification. It describes specific requirements for processing data in your Medicare FI/RHHI's system.
- The information in the companion document is subject to change, and any changes will be communicated to the affected providers' in their FI's or RHHI's provider news bulletin and on their website.
- Please note that the companion document supplements, but does not contradict, any requirements in the X12N 837 Institutional Implementation Guide. The descriptions provided in the guide will also

indicate whether the specific information is required, optional, or situational (e.g., relevant specifically to RHHIs).

The key changes to the X12N 837 Institutional Implementation Guide include the following:

- Addition of a new statement indicating “The National Provider Identifier (NPI) must be submitted in the NM109 segment (NM108 = XX);”
- Revision to the code set statement providing an updated URL for Washington Publishing Company (WPC) code sets (<http://www.wpc-edi.com>);
- Medicare conversion of all lowercase characters submitted on an inbound 837 file to uppercase and, consequently, only uppercase characters will be sent for coordination of benefits purposes;
- A requirement that all 837 claim data submitted must use the basic character set as defined in Appendix A of the 837 Institutional Implementation Guide;
- A reminder that Medicare does not require taxonomy codes in order to adjudicate claims, but valid taxonomy codes will be accepted; [Valid codes are published at <http://www.wpc-edi.com/codes/taxonomy> on the WPC website. Claims submitted with taxonomy codes that are not valid will be rejected.]
- A requirement that all dates submitted on an incoming 837 must be valid calendar dates in the appropriate format based on the respective qualifier or the claim will be rejected;
- Negative values submitted in CLM02 (Total Submitted Charges may not be processed and may cause claim to be rejected); and
- Addition of an LIN03 statement, “The format for National Drug Codes (NDC) is 5-4-2 [11 positions]. Claims that contain NDC codes in any other format will be rejected.”

Important Links

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4379.pdf>

Additional information about electronic transactions and code sets standards can be found at http://www.cms.hhs.gov/TransactionCodeSetsStands/01_Overview.asp#TopOfPage on the CMS website.

The implementation guides for each X12 transaction adopted as a HIPAA standard are available electronically at <http://www.wpc-edi.com> on the WPC website.

CR4379 is the official instruction issued to the FI/RHHI regarding changes mentioned in this article. CR4379 may be found at <http://www.cms.hhs.gov/Transmittals/downloads/R2170TN.pdf> on the CMS website.

Please refer the affected providers to their local FI/RHHI if they have questions about this issue. To find the FI/RHHI toll-free phone number, go to <http://www.cms.hhs.gov/apps/contacts/> on the CMS website.