

Standard companion guide transaction information

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

835 – ANSI X12
version
005010X221A1

Companion guide
version number: 4.1
Sept. 5, 2017



Table of contents

Preface	3
Transaction instruction (TI).....	4
Background.....	4
Overview of HIPAA legislation	4
Compliance according to HIPAA	4
Compliance according to ASC X12	4
Intended use.....	5
Document purpose.....	5
Included ASC X12 implementation guide	6
Instruction tables	7
005010X221A1 health care claim payment advice	7
TI additional information.....	8
Business scenarios	8
ASO check suppression.....	8
Overpayment recovery.....	8
Other resources	8
ACS X12 TR3 implementation guides	8
TI change summary	9

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 communications/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 health care providers 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, explanatory 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 of 835 ANSI X12 Health Care Claim Payment/Advice Version 005010X221A1 transaction(s) to Humana.

Humana's companion guide(s) supplement the HIPAA implementation guides and should be used in conjunction with them. This document is not intended to convey information that in any way exceeds the requirements or uses of data expressed in the implementation guide. It is solely for the purpose of clarification and facilitation if implementing 835 transaction(s) with Humana.

Included ASC X12 implementation guide

This table lists the X12N implementation guide for which specific transaction instructions apply and which are included in Section 3 of this document.

Unique ID	Name
005010X221A1	Health care claim payment/advice (835)

Instruction tables

005010X221A1 health care claim payment advice

Loop ID	Reference	Name	Codes	Notes/comments
	PLB	Provider Level Adjustment		
	PLB03-1	Provider Level Adjustment	PI	This code will be used when issuing a remittance for claims related to administrative-services-only (ASO) payment suppression. It only applies when the claim is for an ASO member who is associated with a provider who has elected the payment suppression.
	PLB03-1	Provider Level Adjustment	WO	This code will be used for overpayment recovery. Humana will send the patient account number from the provider's system along with the Humana claim number.

TI additional information

Business scenarios

Example

005010X221A1 (835)

ASO check suppression

Humana Health Plan processes a claim for an ASO employer group when it is the provider of services and has elected for payment suppression.

Category 1

This segment will notify providers of remittance relating to claims processed when the payment suppression logic was applied.

Example

PLB*1912014564*20111231*PI:ASO CHECK SUPPRESSION OFFSET*2105.3~

Overpayment recovery

Example

005010X221A1 (835)

Category 1

This segment will notify providers of overpayment recovery.

Example

PLB*1234567893*20111231*WO:P1482565/104786204*109.63

Other resources

ACS X12 TR3 implementation guides

<http://store.x12.org>

TI change summary

The Humana 835 4010X091 version did not include the use of PLB03-1 identifier “PI.” The 835 5010X221A1 does include the PLB03-1 identifier of “PI” to identify ASO suppressed payment remittance(s).