Instructions Related to TA1 Interchange Acknowledgement (TA1) Based on ASC X12 Implementation Guide

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Preface

Companion guides may contain two types of data, instructions for electronic communications with the publishing entity (Communications/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 Communications/Connectivity component or the Transaction Instruction component must be included in every companion guide. The components may be published as separate documents or as a single document.

The Communications/Connectivity component is included in the companion guides when the publishing entity wants to convey the information needed to commence and maintain communication exchange.

The Transaction Instruction component is included in the companion guides 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.

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1 Transaction Instructions Introduction

1.1 Background

1.1.1 Overview of HIPAA Legislation

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) carries provisions for administrative simplification. This requires the Secretary of the federal 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.

1.1.2 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 any data elements or segments to the maximum defined data set.
- Use any code or data elements that are marked "not used" in the standard's implementation specifications or are not in the standard's implementation specification(s).
- Change the meaning or intent of the standard's implementation specification(s).

1.1.3 Compliance According to ASC X12

The ASC X12 requirements include specific restrictions that prohibit trading partners from modifying any:

- Defining, explanatory, or clarifying content contained in the implementation guide.
- Requirement contained in the implementation guide.

1.2 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 documents. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guides and is in conformance with the ASC X12 Implementation Guide's Fair Use and Copyright statements.

1.3 Companion Guide Audience

Companion guides are intended for information technology and/or systems staff who will be coding billing systems or software for compliance with the federal HIPAA.

1.4 Purpose of Companion Guide

The information contained in this companion guide applies to ForwardHealth, which includes the following programs: BadgerCare Plus, Wisconsin Medicaid, SeniorCare, Wisconsin Chronic Disease Program, the Wisconsin Well Woman Program, and Medicaid managed care programs. All of these programs use ForwardHealth interChange for processing.

The companion guides are to be used with HIPAA Implementation Guides and to supplement the requirements in the HIPAA ASC X12 Implementation Guides, without contradicting those requirements. Implementation guides define the national data standards, electronic format, and values for each data element within an electronic transaction. The purpose of the companion guides is to provide trading partners with a guide to communicate ForwardHealth-specific information required to successfully exchange transactions electronically with ForwardHealth.

ForwardHealth will accept and process any HIPAA-compliant transaction; however, a compliant transaction that does not contain ForwardHealth-specific information, though processed, may be denied for payment. For example, a compliant 837 Health Care Claim created without a ForwardHealth member identification number will be processed by ForwardHealth but will be denied payment. For questions regarding appropriate billing procedures, as well as for policy and billing information, providers should refer to their policy-specific area of the ForwardHealth Online Handbook.

Companion guides highlight the data elements significant for ForwardHealth. For transactions created by ForwardHealth, companion guides explain how certain data elements are processed. Refer to the companion guide first if there is a question about how ForwardHealth processes a HIPAA transaction. For further information, contact the ForwardHealth Electronic Data Interchange (EDI) Department at (866) 416-4979.

1.5   National Provider Identifier

As a result of HIPAA, the federal HHS adopted a standard identifier for health care providers. The Final Rule published by the HHS adopted the National Provider Identifier (NPI) as the standard identifier.

The NPI replaces all payer-specific identification numbers (e.g., Medicaid provider numbers) on nationally recognized electronic transactions (also known as standard transactions); therefore, all health care providers are required to obtain an NPI to identify themselves on these transactions. The NPI is the only identification number that will be allowed on these transactions.

ForwardHealth has determined that all providers, except for personal care only providers, specialized medical vehicle providers, and blood banks, are health care providers (per the definitions within the NPI Final Rule) and, therefore, are required to obtain and use an NPI. ForwardHealth requires all health care providers to submit their NPI on electronic transactions.

1.6   Acceptable Characters

All alpha characters used in HIPAA transactions must be in an uppercase format. The HIPAA transactions must not contain any carriage returns nor line feeds; the data must be received in one, continuous stream.

1.7   Acknowledgements

An accepted 999 Implementation Acknowledgement, rejected 999 Implementation Acknowledgement, or rejected TA1 InterChange Acknowledgement will be generated in response to all submitted files. Trading partners are responsible for retrieving acknowledgments from the ForwardHealth Portal to determine the status of their files.

1.8   Examples

See Section 6 of this guide for an example.

2   Included ASC X12 Implementation Guide

This table lists the X12N Implementation Guide(s) for which specific transaction instructions apply and are included in Section 3 of this document.

Unique ID	Name
005010X231A1	TA1 Interchange Acknowledgement

3 Instruction Table

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

Legend
SHADED rows represent "segments" in the X12N implementation guide.
NON-SHADED rows represent "data elements" in the X12N implementation guide.

3.1   005010X231A1 — TA1 Interchange Acknowledgement

Loop ID	Reference	Name	Codes	Notes/Comments
	ISA	Interchange Control Header		The ISA is a fixed-length record with fixed-length elements.
	ISA01	Authorization Information Qualifier	00	Enter the value "00" — No Authorization Information Present
	ISA05	Interchange ID (Sender) Qualifier	ZZ	This field will contain a value of "ZZ" to indicate mutually defined.
	ISA06	Interchange Sender ID	WISC_DHFS	This field will contain "WISC_DHFS".
	ISA07	Interchange ID (Receiver) Qualifier	ZZ	This element contains a value of "ZZ" — mutually defined.
	ISA08	Interchange Receiver ID		This element is the nine-digit numeric Trading Partner identification number assigned by ForwardHealth interChange.
	ISA11	Repetition Separator	^	The repetition separator is a delimiter separating repeated occurrences of a data element or composite data; it is not a data element. This field will contain a caret..
	ISA13	Interchange Control Number		This element contains a distinct tracking number for this file.
	ISA14	Acknowledgment Requested	0	Enter the value "0" — No Interchange Acknowledgment requested.
	TA1	Interchange Acknowledgement		A TA1 will only be sent to identify interchange level errors.
	TA101	Interchange Control Number		This is the value in ISA13 from the interchange to which this TA1 is responding.
	TA102	Interchange Date		This element contains the date from ISA09 for the interchange on which it is reporting.
	TA103	Interchange Time		This element contains the time from the ISA10 for the interchange on which it is reporting.

Loop ID	Reference	Name	Codes	Notes/Comments
	TA104	Interchange Acknowledgment Code	R	Enter the value "R" — The Transmitted Interchange Control Structure Header and Trailer are Rejected Because of Errors. This element indicates the status of the interchange control structure. The only value used is "R", indicating that ISA, IEA, GS/GE interchange had critical errors and the exchange was not accepted. Correct error and resend.
	TA105	Interchange Note Code	001, 002, 003, 004, 005, 006, 007, 008, 009, 010, 011, 012, 013, 014, 015, 016, 017, 018, 019, 020, 021, 022, 023, 024, 025, 026, 027, 028, 029, 030, 031	Code indicating the status of the receipt of the interchange control structure: • "001" — The Interchange Control Number in the Header and Trailer Do Not Match. The Value from the Header is used in the Acknowledgment. • "002" — This Standard as Noted in the Control Standards Identifier is Not Supported. • "003" — This Version of the Control is Not Supported. • "004" — The Segment Terminator is Invalid. • "005" — Invalid Interchange ID Qualifier for Sender. • "006" — Invalid Interchange Sender ID. • "007" — Invalid Interchange ID Qualifier for Receiver. • "008" — Invalid Interchange Receiver ID. • "009" — Unknown Interchange Receiver ID. • "010" — Invalid Authorization Information Qualifier Value. • "011" — Invalid Authorization Information Value. • "012" — Invalid Security Information Qualifier Value. • "013" — Invalid Security Information Value. • "014" — Invalid Interchange Date Value. • "015" — Invalid Interchange Time Value. • "016" — Invalid Interchange Standards Identifier Value. • "017" — Invalid Interchange Version ID Value. • "018" – Invalid Interchange Control Number Value • "019" — Invalid Acknowledgment Requested

Loop ID	Reference	Name	Codes	Notes/Comments
				Value.
				• "020" — Invalid Test Indicator Value.
				• "021" — Invalid Number of Included Groups Value.
				• "022" — Invalid Control Structure.
				• "023" — Improper (Premature) End-of-File (Transmission).
				• "024" — Invalid Interchange Content (e.g., Invalid GS Segment).
				• "025" — Duplicate Interchange Control Number.
				• "026" — Invalid Data Element Separator.
				• "027" — Invalid Component Element Separator.
				• "028" — Invalid Delivery Date in Deferred Delivery Request.
				• "029" — Invalid Delivery Time in Deferred Delivery Request.
				• "030" — Invalid Delivery Time Code in Deferred Delivery Request.
				• "031" — Invalid Grade of Service Code.

4 Transaction Information Additional Information

4.1 Business Scenarios

4.2 Payer-Specific Business Rules and Limitations

4.2.1 Scheduled Maintenance

ForwardHealth recycles the real-time servers every night between 00:00 a.m. to 01:00 a.m. Central Standard Time (CST). Real-time processing is not available during this period.

ForwardHealth schedules regular maintenance every Sunday from 00:00 a.m. to 04:00 a.m. CST. Real-time processing is not available during this period.

4.3 Frequently Asked Questions

N/A

4.4 Other Resources

Washington Publishing Company (WPC) at *www.wpc-edi.com/*.
ASC X12 at *www.x12.org/*.

For further information about how ForwardHealth interChange processes a HIPAA transaction, contact the ForwardHealth EDI Department at (866) 416-4979.

5 Transaction Instructions Change Summary

None.

6 Transaction Instructions Appendix A

6.1 TAI Example

The following is an example of a 270 Health Care Eligibility Benefit Inquiry sent with an invalid Usage Indicator (ISA15).

```
ISA*00*        *00*        *ZZ*WISC_DHFS      *ZZ*100000325
*101006*1321*U*00401*000000001*0*P*:~
TA1*000000001*101006*1323*R*020~
IEA*1*000000001~
```