

EDI FREQUENTLY ASKED QUESTIONS

GETTING STARTED – ELECTRONIC CLAIMS SUBMISSION

Are we required to submit our claims electronically?

- Current efforts are strongly focused on increasing the rate and percentage of electronic submissions from all of our providers and trading partners.
- Highmark encourages electronic claims submission for its many advantages over paper claim submissions but does not require providers to submit their claims electronically.

What are the advantages to submitting claims electronically?

- Claims should be received and processed faster than going through the U.S. Postal System.
- There is an immediate acknowledgment of file receipt (999) and acceptance or rejection of each claim into the adjudication system (277CA) is returned within 24 hours.
- There are no postage fees or other costs associated with printing and mailing the paper claims.
- There is less time spent by office staff on claim submissions.
- Practices should receive payment more quickly.

What Practice Management System (PMS) software packages does Highmark recommend and what companies offer these packages?

- Highmark does not recommend a particular PMS software package or software vendor.

BECOMING ELECTRONICALLY ENABLED

How do I get started?

- Our EDI Trading Partner website is dedicated to helping you become electronically enabled. Click on the appropriate regional link to access EDI Services:
 - Pennsylvania: www.highmark.com/edi
 - Delaware: highmark.com/bcbsde
 - West Virginia: www.highmark.com/edi-wv
- This website will help you get started applying for and requesting a Trading Partner ID.
- EDI Operations is a department within Highmark dedicated to assisting you with any questions.

How do I contact EDI Operations?

- You can contact EDI Operations by phone, Monday through Friday from 8 a.m. to 4:30 p.m. at: **1-800-992-0246**
- You can also contact them via the applicable websites above.

Is the EDI Transaction Application available on the website?

- Yes, this application is located on the website.
- Click on the **Sign-Up** section and review the instructions. The application is available as part of the start-up process.

Continued on next page

EDI FREQUENTLY ASKED QUESTIONS, *Continued*

ELECTRONICALLY-ENABLED PROVIDERS
<p>Note: The following questions are applicable if you directly submit electronic claims using your own Trading Partner ID (i.e., you do not submit through a billing service or a clearinghouse).</p>
<p>Are there any types of claims that cannot be electronically submitted?</p>
<ul style="list-style-type: none"> All medical and surgical claims, including secondary claims, can be submitted electronically to Highmark.
<p>I am electronically enabled. When I have attachments that I send to Highmark, should I submit the claim via paper or electronically?</p>
<ul style="list-style-type: none"> You should transmit the claim electronically to Highmark using transmission codes in the PWK segment, Loop 2300 – Claim Information to provide detail related to the supplemental information that you are sending for the claim.
<ul style="list-style-type: none"> You should review the specifications in the <i>EDI Reference Guide</i> or work with your Practice Management Software vendor to ensure that the PWK segment is available and properly configured to work with Highmark processing guidelines.
<p>How do I indicate that I am sending attachments when electronically submitting the claim?</p>
<ul style="list-style-type: none"> There are multiple transmission codes within the PWK segment to provide details related to the supplemental information that you are sending for the claim. Specifications for the PWK Segment can be found in the <i>EDI Reference Guide</i>.
<p>I submitted electronically but my claims are being rejected. Why?</p>
<ul style="list-style-type: none"> There are numerous reasons for claim rejections.
<ul style="list-style-type: none"> Trading Partners should work with their PMS software vendor and/or EDI Operations to determine the cause for rejection.
<ul style="list-style-type: none"> EDI Operations can assist you with the analysis of the acknowledgment transactions provided by Highmark throughout the electronic claim submission process.
<p>If my electronic claim submission is being rejected, should I drop to a paper submission?</p>
<ul style="list-style-type: none"> No, you should not drop rejected electronic claims to paper. Highmark aligned its electronic and paper submission processing guidelines. Dropping rejected electronically submitted claims to paper will only result in the same rejection unless a correction to the claim (based on the corresponding rejection code) is made.

Continued on next page

EDI FREQUENTLY ASKED QUESTIONS, *Continued*

EDI REPORTS FOR ELECTRONICALLY-ENABLED PROVIDERS
How can I review the status of my electronically submitted claims?
<ul style="list-style-type: none"> • Highmark provides a 999 Implementation Acknowledgment for Health Care Insurance transaction which advises whether the file was accepted or rejected.
<ul style="list-style-type: none"> • Highmark provides a 277 Claim Acknowledgment (277CA) transaction that is used to acknowledge receipt of claim submissions, including the acceptance or rejection of each claim.
<ul style="list-style-type: none"> • Highmark provides the 276/277 Claim Status Request and Response transaction for verifying status on claims accepted into the adjudication system.
How can I receive the 277CA transaction?
<ul style="list-style-type: none"> • Highmark produces the 277CA transaction for all electronic submitters for use by PMS software vendors. For Version 5010, all PMS software vendors must program their systems to retrieve and accept the 005010X214 277 Health Care Claim Acknowledgment (277CA).
<ul style="list-style-type: none"> • You should refer to the EDI Trading Partner website and talk to your PMS software vendor to determine the necessary data requirements to electronically receive the 277 Claim Acknowledgment transaction.
How do I obtain a printable version of the 277CA transaction?
<ul style="list-style-type: none"> • You should have a discussion with your PMS vendor to determine if they have the capability to create a printable report based on the 005010X214 277 Health Care Claim Acknowledgment (277CA).