

CareFirst BlueCross BlueShield*
CareFirst BlueChoice, Inc.*
HIPAA 270/271
Transactions & Code Sets
Companion Guide (Version 1.03)
To the HIPAA X12 Implementation Guide
(Version 004010A1)

September 25, 2008

*For purposes of this document only, CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc. will be referred herein as CareFirst.

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1. Introduction

Under the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the Secretary of the Department of Health and Human Services (HHS) is directed to adopt standards to support the electronic exchange of administrative and financial health care transactions. The purpose of the Administrative Simplification portion of HIPAA is enable health information to be exchanged electronically and to adopt standards for those transactions.

1.1 Scope

This companion guide is intended for CareFirst Trading Partners interested in exchanging HIPAA compliant X12 eligibility information (270/271 transactions) with CareFirst. It is intended to be used **in conjunction with** X12N Implementation Guides and is not intended to contradict or exceed X12 standards. It contains information about specific CareFirst requirements for processing the 270/271 X12 transactions.

All instructions in this document are written using information known at the time of publication and are subject to change. The most current version of the guide is available on the CareFirst Web site (<http://www.carefirst.com>).

1.2 Overview

This Companion Guide is issued in an effort to provide the trading partners of CareFirst with the most up-to-date information related to standard transactions. Any and all information in this guide is subject to change at any time without notice.

This Companion Guide is applicable to all lines of business within CareFirst.

This document is designed to assist both technical and business areas of trading partners who wish to exchange HIPAA standard 270/271 transactions with CareFirst, Inc. It contains specifications for the transactions, contact information, and other information that is helpful.

All instructions in this document are written using information known at the time of publication and will change as necessary to provide the most up-to-date information. The most up-to-date version of the Companion Guide is available on the CareFirst Web site (<http://www.carefirst.com>).

Please be sure to use the most current version of the Companion Guide available at the CareFirst Web site. CareFirst is not responsible for the performance of software outside of its installations.

1.3 References

This companion guide is an adjunct to the *National Electronic Data Interchange Transaction Set Implementation Guide Health Care Eligibility Benefit Inquiry and Response 270/271 ASC X12N270/271 (004010X092A1)*.

1.4 Additional Information

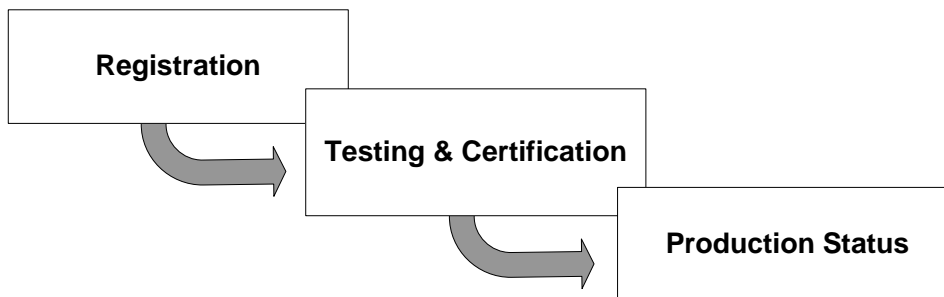
Please be sure to always use the most current version of the companion guide available at (<http://www.carefirst.com>).

Always feel free to contact CareFirst as described in Section 5.

2. Getting Started

2.1 Working with CareFirst

In general, there are three steps to submitting standard 270/271 transactions to the CareFirst production environment.



CareFirst accepts X12 standard transactions from any HIPAA covered entity with which it has an agreement. Prior to approving the exchange of the 270/271 Transactions, the transactions are tested according to a specific test plan. Results are verified by both parties. Once test results are verified and approved, CareFirst advises the candidate about submitting requests to the production environment.

A submitter is typically a company that has Trading Partner status with CareFirst and is acting on behalf of a group of HIPAA covered entities (e.g., a service bureau or clearinghouse) or is a provider or a group health plan which has an agreement with CareFirst.

All potential CareFirst submitters must contact the EDI Operations Support Group (refer to the CareFirst Contact Information in Section 5) to initiate action and authorization and to receive the necessary information for proceeding.

2.2 Trading Partner Registration

To register to submit electronic transactions a Trading partner must contact CareFirst according to the instructions in Section 5.

The requested information on Trading Partner Information Form (see Section 11) must be filled out by the Trading Partner and emailed to the Operations Support Group address listed in Section 5.

2.3 Testing & Certification Overview

CareFirst requires all potential submitters to participate in testing to ensure that transactions produce the desired results. CareFirst supplies the test data and access information to the test system. Successful completion and validation is an indication that all systems can properly submit and receive the transactions.

2.4 Production Status

The EDI Operations Support Group will advise the new submitter when all conditions are satisfied and submission of production transactions can begin. At that time a production certificate of trust will be issued by CareFirst to the trading partner.

3. Testing

CareFirst requires all potential submitters to participate in testing to ensure that transactions produce the desired results. Successful completion and validation is an indication that all systems can properly submit and receive the transactions.

The CareFirst EDI Operations Support Group coordinates the testing activities and provides a detailed test plan and test data. Additional test cases may be added by the submitter.

The URL for submitting test transactions is:

<https://webapptt.carefirst.com/TIBCO/EDI-X12>.

NOTE: there are different URL's for test and production transactions.

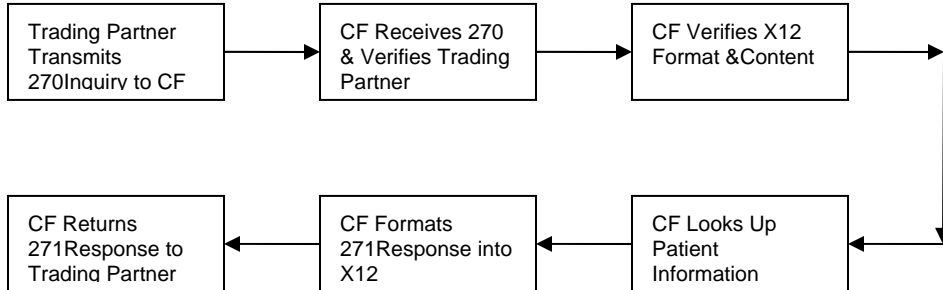
Test time is available from 9 AM to 5PM ET M - F.

A listing of test 270 requests and expected 271 responses used during testing is to be provided to the CareFirst test coordinator for review and validation as well as the test data. The successful completion of testing is to be verified and approved by the EDI Operations Group.

Security is verified with a certificate of trust attached to each transaction and verification of submitting IP address (es). CareFirst will provide a certificate of trust to the submitting trading partner. A separate certificate will be available for testing. A production certificate will be issued at the successful completion of testing. The Trading Partner must provide the IP address (es) used for both testing and production submission of transactions.

4. Connectivity/Communications

4.1 Process Flows



The above illustrates the basic flow of the 270 Inquiry and 271 Response transactions.

4.2 Transmission Administrative Procedures

4.2.1 Schedule, Availability and Downtime Notification

CareFirst production systems are available from Mon – Sun 5:00 am to 1:30 am (ET), including holidays. There are no regularly scheduled downtimes except as indicated in the prior statement.

CareFirst Systems' planned downtime will be communicated to all Trading Partners via an email message sent at least one week prior to the event. The following is an example of the message to be sent to announce planned downtime.

To: Trading Partners

From: CareFirst B2B Gateway

The CareFirst B2B Gateway will be unavailable on xx/xx/xxxx from x am to x pm for scheduled maintenance.

This outage will affect the following transactions: 270/271, 276/277.

We apologize for any inconvenience.

CareFirst Systems' unplanned downtime will be communicated to Trading Partners via an email as soon as practicable. A second email will be dispatched when the system becomes available.

To: Trading Partners

From: CareFirst B2B Gateway

The CareFirst B2B Gateway is unavailable at this time due to a system outage.

This outage affects the following transactions: 270/271, 276/277.

We apologize for any inconvenience.

A follow-up email will be sent when the system is once again available.

4.2.2 Re-Transmission Procedures

When a 270 inquiry transaction receives a reject code by CareFirst it must be corrected and re-submitted by the provider.

4.3 Communication Protocol Specifications

CareFirst receives and transmits transactions using HTTP/S.

The URL for submitting production transactions to CareFirst is <https://webapp.carefirst.com/TIBCO/EDI-X12>. NOTE: there are different URL's for test and production transactions.

4.4 Passwords

Logon and passwords are replaced by the use of security certificates and verification of submitting IP addresses. The Trading Partner must submit the certificate supplied by CareFirst with every transaction. There are separate certificates for test and production.

CareFirst security is maintained on three levels:

1. Verification of a certificate of trust attached to each transaction
2. Verification of the IP address submitting the transaction (supplied by the submitter)
3. Verification of the Trading Partner Id (in the ISA segment) supplied by CareFirst.

5. CareFirst Contact Information

5.1 EDI Customer Service

All inquiries and comments regarding initiation, set-up, testing, and submission of HIPAA transactions should be directed to hipaa.partner@carefirst.com.

Support for all EDI Transactions is provided by the EDI Support Hotline during normal business hours at 410-998-4599 or at hipaa.partner@carefirst.com.

5.2 EDI Technical Assistance

All inquiries and comments regarding initiation, set-up, testing, and submission of HIPAA transactions should be directed to hipaa.partner@carefirst.com.

Support for all EDI Transactions is provided by the EDI Support Hotline during normal business hours at 410-998-4599 or at hipaa.partner@carefirst.com.

5.3 Provider Service Number

All inquiries and comments regarding initiation, set-up, testing, and submission of HIPAA transactions should be directed to hipaa.partner@carefirst.com.

Support for all EDI Transactions is provided by the EDI Support Hotline during normal business hours at 410-998-4599 or at hipaa.partner@carefirst.com.

5.4 Applicable Web-sites/E-mail

All inquiries and comments regarding initiation, set-up, testing, and submission of HIPAA transactions should be directed to hipaa.partner@carefirst.com.

Support for all EDI Transactions is provided by the EDI Support Hotline during normal business hours at 410-998-4599 or at hipaa.partner@carefirst.com.

The most current version of this companion guide is available at (<http://www.carefirst.com>).

6. Control Segments/Envelope

6.1 ISA-IEA

6.1.1 The 270 Eligibility/Benefit Inquiry

This section describes the values required by CareFirst in the ISA and IEA segments.

IG Page	Reference	X12 Element Name	Length	Notes/Comments
B.3	ISA01	Authorization Information Qualifier	2	Must be "00"
B.4	ISA03	Security Information Qualifier	2	Must be "00"
B.4	ISA05	Interchange ID Qualifier	2	Must be "ZZ" (Federal Tax ID)
B.4	ISA06	Interchange Sender ID	15	Must be Trading Partner ID (supplied by CareFirst)
B.4	ISA07	Interchange ID Qualifier	2	Must be "ZZ"
B.5	ISA08	Interchange Receiver ID	15	Must be "070" or "080" or "190"
B.5	ISA12	Interchange Control Version	9	Must be "00401"
B.6	ISA14	Acknowledgement Indicator	1	Must be "0"
B.6	ISA15	Usage Indicator	1	Must be "T" or "P" NOTE: test system rejects P; Production system rejects T.
B.6	ISA16	Component Element Separator	1	Must be "^" OR ","

6.1.2 The 271 Response

This section describes the values returned by CareFirst in the ISA and IEA segments.

IG Page	Reference	X12 Element Name	Length	Notes/Comments
B.3	ISA01	Authorization Information Qualifier	2	"00"
B.4	ISA03	Security Information Qualifier	2	"00"
B.4	ISA05	Interchange ID Qualifier	2	"ZZ"
B.4	ISA06	Interchange Sender ID	15	"070" or "080" or "190"

IG Page	Reference	X12 Element Name	Length	Notes/Comments
B.4	ISA07	Interchange ID Qualifier	2	"ZZ"
B.5	ISA08	Interchange Receiver ID	15	Trading Partner ID (from 270)

6.2 GS-GE

6.2.1 The 270 Eligibility/Benefit Inquiry

This section describes the values required by CareFirst in the GS and GE segments.

IG Page	Reference	X12 Element Name	Length	Notes/Comments
B.8	GS02	Application Sender's Code	2/15	Must be sender's Federal Tax ID appended with "R".
B.8	GS03	Application Receiver's Code	9	Must be "RFDCA"
B.9	GS08	Version/ Release/ Industry Identifier Code		Must be "004010X092A1".

6.2.2 The 271 Response

This section describes the values returned by CareFirst in the GS and GE segments.

IG Page	Reference	X12 Element Name	Length	Notes/Comments
B.8	GS02	Application Sender's Code	2/15	"RFDCA"
B.8	GS03	Application Receiver's Code	9	Federal Tax ID/CareFirst ID

6.3 ST-SE

6.3.1 The 270 Eligibility/Benefit Inquiry

CareFirst requires standard HIPAA values in the ST and SE segments.

IG Page	Reference	X12 Element Name	Length	Notes/Comments
36	ST01	Transaction Set Identifier Code	3/3	Must be "270"

6.3.2 The 271 Response

CareFirst returns standard HIPAA values in the ST and SE segments.

7. CareFirst Specific Business Rules and Limitations

CareFirst supports only real time 270 inquiry and 271 response transactions.

A real time transaction is limited to one patient per inquiry.

The submitter of a 270 in real-time will receive only one acknowledgement/response from CareFirst: a TA1 (error); a 997 (error); or a 271.

7.1 Error Conditions

1. A TA1 acknowledgement is returned when there is a transmission or envelope error (other than a timeout).
2. A 997 acknowledgement is returned when there is a HIPAA or an X12 compliance error. The Trading Partner should correct the error and resubmit the transaction.
3. A 271 with an AAA segment is returned when there is a data error or when the system is unavailable. The Trading Partner should correct the error and resubmit the transaction.

7.2 CORE Level of Certification

At this time (September 2008) CareFirst is preparing for CORE Level I Certification as specified by the Committee for Affordable Quality Healthcare (CAQH). CareFirst has also sent a vote of approval for the CORE Phase II Rules. Additional information is available at www.caqh.org.

8. Acknowledgements and/or Reports

The TA1 Interchange Acknowledgement is used to indicate a rejection (aka a negative acknowledgement) of the ISA/IEA Interchange containing the 270 Eligibility Benefit Inquiry Request.

If the 270 passes ISA/IEA compliance checking, but an error is found during the validation of the Functional Group(s) or Transaction Set(s) within a Functional Group, a 997 Functional Acknowledgement indicates a rejection (negative acknowledgement). If there are no errors a 997 is not be returned.

If the 270 complies with the X12 standard syntax requirements, then the 271 Eligibility Inquiry Response is returned to the submitter.

The AAA segments in the 271 are used to report business level error situations.

The submitter of a 270 in real-time will receive only one acknowledgement/response from CareFirst: a TA1 (error); a 997 (error); or a 271.

8.1 Report Inventory

There are no reports regarding the 270/271 transactions available to trading partners.

9. Trading Partner Agreements

9.1 Trading Partners

All inquiries and comments regarding trading partner relationships with CareFirst should be addressed by contacting CareFirst using the information in Section 5.

10. Transaction Information

10.1 The 270 Eligibility/Benefit Inquiry

This section describes the values required by CareFirst in the NM segments.

IG Page	Loop ID	Reference	X12 Element Name	Codes	Length	Notes/Comments
44	2100A	NM101	Entity Identifier Code	Must be "PR"	2	Payor
46	2100A	NM108	Identification Code Qualifier	Must be "PI"	2	Payor Identification
46	2100A	NM109	Information Source Primary Identifier		6	Must be "190" or "080" or "070"
50	2100B	NM101	Entity Identifier Code	Must be: "1P" (provider) or "80" (hospital) or "FA" (facility) or "GP" (gateway provider)	2	
52	2100B	NM108	Identification Code Qualifier	Must be "XX" or "FI"	2	Health Care Financing Administration National Provider Identifier OR Federal Taxpayer's Identification Number
52	2100B	NM109	Information Receiver Primary Identifier		2/80	Must be provider's National Provider id
73	2100C	NM108	Identification Code Qualifier	Must be "MI"	2	Member Identification Number
73	2100C	NM109	Subscriber Primary Identifier		3/17	REQUIRED; including 1-3 Character Alphanumeric Prefix shown on ID Card

This section describes the values required by CareFirst in the REF segment of the 2100B Information Receiver Name Loop. Please note that this REF Segment is only required when NM1 Segment is missing Federal Taxpayer's Identification Number.

IG Page	Loop ID	Reference	X12 Element Name	Codes	Length	Notes/Comments
54	2100B	REF01	Reference Identification Qualifier	Must be "TJ"	2	Federal Taxpayer's Identification Number. This is required when input values for NM108 and NM109 element contains National Provider Identification data.
56	2100B	REF02	Reference Identification		1/30	Must be "Federal Taxpayer's ID"

This section describes the values required by CareFirst in the DTP segment.

IG Page	Loop ID	Reference	X12 Element Name	Codes	Length	Notes/Comments
88 & 130	2100C & 2100D	DTP01	Date/Time Qualifier	Must be "307"	3	Eligibility. Any other value responded to as a 307.
88 & 130	2100C & 2100D	DTP02	Date Time Period Format Qualifier	Must be "D8"	3	Date expressed in CCYYMMDD. When "RD8" is sent as a qualifier CareFirst will use the From Date as DOS to search for eligibility. The Through Date is ignored.
88 & 130	2100C & 2100D	DTP03	Date Time Period		35	If this element is missing, then current date is used as DOS to search for eligibility.

Only the first EQ segment is processed for a response. Any subsequent EQ segment is returned with an MSG segment indicating it has not been processed.

Because of CareFirst's membership structure, search capability and instructions in the implementation guide the INS segment is not required. If an INS segment is included in the request transaction an error transaction (997) is generated.

10.2 The 271 Response

The following describes the CareFirst utilization of segments and elements when there is some type of uniqueness or restriction. All other values comply with HIPAA regulations.

This section describes the values returned by CareFirst in the NM segments.

IG Page	Loop ID	Reference	X12 Element Name	Codes	Length	Notes/Comments
163	2100A	NM101	Entity Identifier Code	"PR"	2	Payor
163	2100A	NM102	Entity Type Qualifier	"2"	1	
163	2100A	NM103	Entity Description		30	"CareFirst BlueCross BlueShield"
163	2100A	NM108	Identification Code Qualifier	"PI"	2	
163	2100A	NM109	Information Source Primary Identifier		6	"190" or "080" or "070"
178	2100B	NM101	Entity Identifier Code	"1P" (provider) or "80" (hospital) or "FA" (facility) or "GP" (gateway provider)	2	From the 270
178	2100B	NM108	Identification Code Qualifier	"XX"	2	Health Care Financing Administration National Provider Identifier
178	2100B	NM109	Information Receiver Primary Identifier		2/80	Provider's National Provider Id From the 270
195	2100C	NM108	Identification Code Qualifier	"MI"	2	Member Identification Number

This section describes the values returned by CareFirst in the REF segment.

IG Page	Loop ID	Reference	X12 Element Name	Codes	Length	Notes/Comments
75	2110A	REF01	Reference Identification Qualifier	"18"	2/3	Plan Number
75	2110A	REF02	Reference Identification		1/30	One of the following: 070 – Delaware 080 – National Capitol Area (DC) 190 – Maryland 690 – MD NASCO 580 – NCA NASCO FEP – Federal Employee Program OOA – Out of Area
75	2110B	REF01	Reference Identification Qualifier	"TJ"	2/3	Reference Identification Qualifier
75	2110B	REF02	Reference Identification		1/30	Federal Taxpayer's Identification Number

There can be multiple EB segments.

If the 270 request specifies a particular service type in EQ01 (Service Type Code), the eligibility and benefit information in the 271 EB Segment(s) returned pertain to that service type. A response to a service type can contain references to multiple services covered/coinsured by CareFirst that pertain to the requested service type.

If the 270 request specifies a service type of "60" (General Benefits) in EQ01 (Service Type Code), only patient demographic and active/inactive medical status is returned in the EB Segment.

If the 270 request specifies a service type of "30" (Health Benefit Plan Coverage) in EQ01 or if the service type requested is not supported, the following information is returned on the EB Segment(s):

1. The patient's eligibility status for service types that are covered.
2. The Co-pay, coinsurance and base contract deductible amounts (in and out of network) for the covered services.

There can be multiple MSG segments in every response.

11. Trading Partner Information

Trading Partner Name:	
Primary EDI Support Contact:	
Primary EDI Support Contact Phone #:	
Primary EDI Support Contact Email:	
Primary EDI Support Contact Address: City: State, Zip:	
IP Address(es) Submitting Transactions:	