

North Dakota MMIS

Companion Guide to the 005010X224A2 Health Care Claim: Dental (837)

North Dakota Medicaid
May 2017

Preface

This Companion Guide to the Accredited Standards Committee (ASC) X12 Technical Report Type 3 (TR3) and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with the North Dakota MMIS.

Transmissions based on this Companion Guide, used in tandem with the v5010 ASC X12N Technical Report Type 3 (TR3), are compliant with both ASC X12N syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the TR3 adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the TR3.

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1 Introduction

This 837D Claim Companion Guide is intended for use by Trading Partners use in conjunction with the ASC X12N 837D National Electronic Data Interchange Technical report Type 3 (TR3). The TR3 can be accessed at <http://store.x12.org/store/healthcare-5010-consolidated-guides>.

This Companion Guide outlines the procedures necessary for engaging in Electronic Data Interchange (EDI) with the North Dakota MMIS and specifies data clarification where applicable. [Section 10 Transaction Specific Information](#) contains provider data clarifications for fields and values that are specific for the ND MMIS.

Transaction specific data will be detailed using a table. Each row on the following table will contain information on the loop, segment, or data element that is specific to the ND MMIS. The table format is as described below:

TR3 Page	Loop ID	Reference	Name	Codes	Length	Notes/Comments
193	2100C	NM1	Subscriber Name			This type of row always exists to indicate that a new segment has begun. It is always shaded at 10% and notes or comments about the segment itself goes in this cell.
195	2100C	NM109	Subscriber Primary Identifier		15	This type of row exists to limit the length of the specified data element.
196	2100C	REF	Subscriber Additional Identification			

TR3 Page	Loop ID	Reference	Name	Codes	Length	Notes/Comments
197	2100C	REF01	Reference Identification Qualifier	18,49,6P,HJ,N6		These are the only codes transmitted by the payer.
			Plan Network Identification Number	N6		This type of row exists when a note for a particular code value is required. For example, this note may say that value N6 is the default. Not populating the first 3 columns makes it clear that the code value belongs to the row immediately above it.
218	2110C	EB	Subscriber Eligibility or Benefit Information			
231	2110C	EB13-1	Product/Service ID Qualifier	AD		This row illustrates how to indicate a component data element in the Reference column and also how to specify that only one code value is applicable.

Scope

This Companion Guide is intended for use by North Dakota Medicaid Trading Partners for the submission of the X12N 837D transactions to North Dakota Medicaid. This Companion Document is to be used in conjunction with the 837D TR3.

ND Medicaid provides connectivity for the flow of medical information and data between medical providers, facilities, vendors, claim payment agencies, clearinghouses and the Front-end Online Transaction Processor (OLTP). Beyond the receipt and delivery of this data, ND Medicaid provides translation to and from ASC X12N standard formats.

The 837 Dental transaction data will be submitted to ND Medicaid for processing and validation of the X12N format(s). Please refer to [Section 4 Connectivity with the North Dakota MMIS](#) for more information regarding transmission methods.

Overview

This Companion Guide is divided into 10 Sections. Each section will describe the process or requirement that each Trading Partner must complete to submit and receive X12N transactions for North Dakota Medicaid.

Each section will provide the needed information of how Trading Partners will be required to complete successful transmissions to the North Dakota Medicaid MMIS.

This Companion Guide will provide contact information for obtaining assistance from the North Dakota Medicaid MMIS. It will provide data clarifications, including North Dakota Medicaid specific data requirements.

References

This document serves as a companion to the ASC X12N Electronic Data Interchange Technical Report Type 3 (TR3) as adopted under HIPAA. These can be accessed at: <http://store.x12.org/store/healthcare-5010-consolidated-guides>

Additional Information

For more information on North Dakota Medicaid EDI services for providers, including provider enrollment and claim transaction information, please visit:

<http://www.nd.gov/dhs>

2 Getting Started

Working with North Dakota Medicaid

We provide availability for transaction transmission and download retrieval 24 hours a day, seven days a week. This availability is subject to scheduled and unanticipated non-scheduled downtime.

Scheduled Downtime

Holiday Schedule

The following days are recognized as official State holidays. Please note that during these days assistance with system issues will be very limited.

- New Year's Day, January 1
- Martin Luther King Day, the 3rd Monday in January
- President's Day, the 3rd Monday in February
- Memorial Day, the last Monday in May
- Independence Day, July 4
- Labor Day, the 1st Monday in September
- Veteran's Day, November 11
- Thanksgiving Day, the 4th Thursday in November
- Christmas Day, December 25
- Every day appointed by the President of the United States, or by the Governor of North Dakota for a public holiday

Routine Maintenance

It is operational policy to schedule preventative maintenance periods on the second Thursday of the month from 09:00PM to 4:00AM CT. Any alteration from this schedule will be noted in the notification message as described below.

For Scheduled downtime, a notification message will be published on the Home screen and login screen.

Scheduled downtime – Home Screen

The screenshot shows the North Dakota MMIS Web Portal Home page. At the top, there is a navigation bar with links for Home, Programs, Member, Provider, Documentation, and Databases. Below the navigation bar is a banner image showing medical professionals and patients. The main content area features several portlets: 'Welcome' (with a maintenance notice for May 2017), 'Provider Registration' (with a login requirement notice), 'Quick Links' (with links for Find a Health Care Provider, Benefits Overview, Provider Enrollment, and Search Health & More), and 'Sign In' (with a login instruction). At the bottom, there is a copyright notice for ©2017 Affiliated Computer Services, Inc. and links for Privacy Policy, Site Map, Terms of Use, Browser Requirements, and Accessibility Compliance.

Scheduled downtime – Login Screen

The screenshot shows the North Dakota MMIS Web Portal Login page. At the top, there is a navigation bar with links for Home, Programs, Member, Provider, Documentation, and Databases. Below the navigation bar is a banner image showing medical professionals and patients. The main content area features several portlets: 'Quick Links' (with links for Enrollment, Provider Manual, FAQ, Billing Manual, Messages & Announcements, and Home), 'Provider's Test Point on Access to Affiliated Health Insurance' (with a maintenance notice for May 2017), and 'Provider' (with a description of the ACS Health Enterprise Portal). On the right side, there is a 'Provider Login' form with fields for User ID and Password, and a 'Forgot User Name or Password?' link. At the bottom, there is a copyright notice for ©2017 Affiliated Computer Services, Inc. and links for Privacy Policy, Site Map, Terms of Use, Browser Requirements, and Accessibility Compliance.

Non-Scheduled Downtime

In the event of a non-scheduled downtime, North Dakota Medicaid will resolve the outage as quickly as possible. A notification message will be displayed near the Sign In portlet of the HOME page and near the Login portlet of the Login screen, as noted below. The

anticipated timeframe for resolution will be noted on the message. Also, the message will state the extent of the disruption, whether it affects the MMIS functionality only, or if it also affects electronic file transfer processing.

In the event that the file transfer processing is affected, trading partners will receive an email notification.

Non – Routine Downtime (MMIS and File Transfer affected)– Home Screen



Non – Routine Downtime (MMIS and File Transfer affected)– login Screen



Non – Routine Downtime (File Transfer affected)– Home Screen



Non – Routine Downtime (File Transfer affected)– login Screen



Unscheduled/Emergency Downtime

North Dakota Medicaid will resolve the outage as expeditiously as possible, for Unscheduled/Emergency Downtime. Along with the MMIS notification messages outlined above, the system sends an email notification to the trading partners.

•

Trading Partner Registration

All entities that send electronic transactions to ND Medicaid for processing and retrieve reports and responses must enroll as EDI Trading Partners. The completed Trading Partner enrollment application provides the ND Customer Service Unit the information necessary to assign a Login Name, Login ID, and Trading Partner ID, which are required to send or retrieve electronic transactions. The Trading Partner enrollment application is available on the North Dakota Medicaid Web site at <https://mmis.nd.gov/portals/wps/portal/ProviderEnrollment>.

Certification and Testing Overview

X12N transaction files are certified by EDIFECS Transaction Manager software. Transaction Manager provides accurate trading partner verification and validation of HIPAA transactions (Type 1 EDI Syntax, Type 2 HIPAA Syntax, and some Type 7 ND Trading Partner Specific). ND Medicaid requires transaction testing with all enrolling Trading Partners .

Once a Trading Partner has successfully enrolled with North Dakota Medicaid, they will be contacted by a ND EDI Specialist. The EDI Specialist will guide the Trading Partner through the testing process.

3 Testing with the North Dakota MMIS

Before submitting production files to ND Medicaid, the Trading Partner must submit two valid test files for each transaction type. If the Trading Partner has received a test status of “Pass”, then ND Medicaid will contact the Trading Partner and update the Trading Partner status to Production.

These tests verify a Trading Partner’s ability to submit a specific transaction type containing valid data in the required format. Trading Partners are encouraged to include a minimum of 10 unique claims per test file to ensure more comprehensive testing.

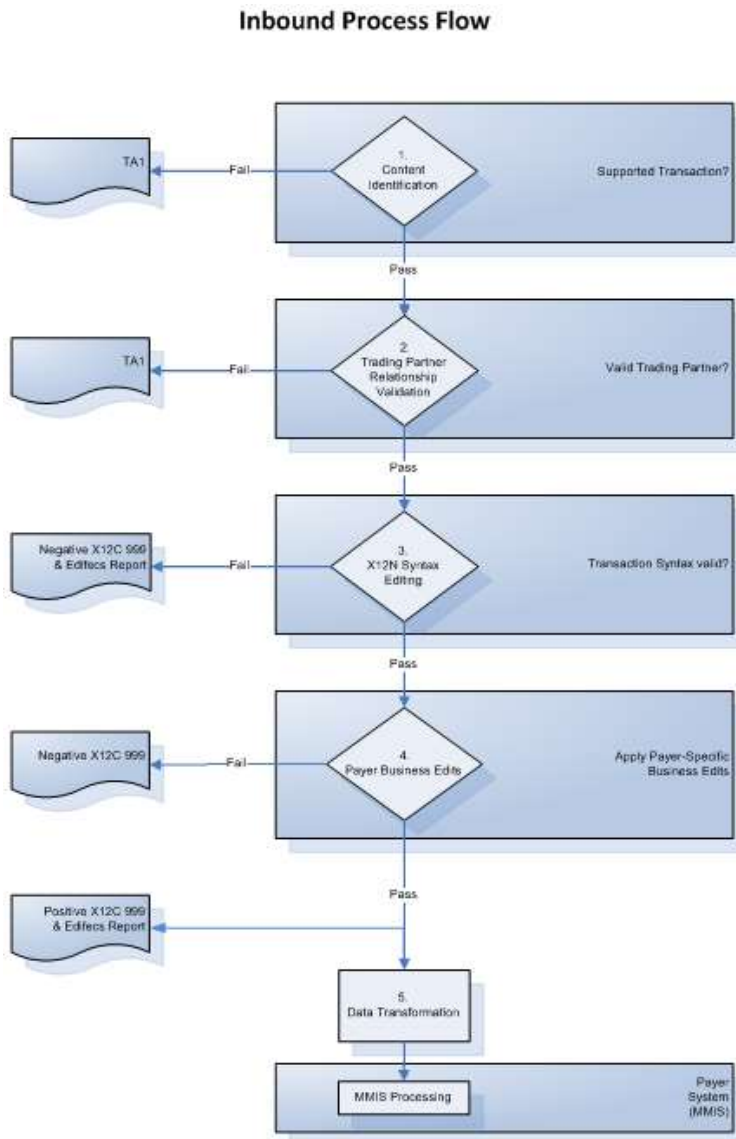
For each file submission, the Trading Partner will receive an X12C 999 response file and an Edifecs Error Report in the trading partner’s mailbox. The X12C 999 contains ACCEPT, REJECT or PARTIAL status. Should Trading Partners receive a test status of “REJECT” or “PARTIAL”, then the Trading Partner should review the error(s) using the EDIFECS Error Report. The Trading Partner should correct and resubmit their test file until it receives a status of “ACCEPT”. If Trading Partners require further assistance with

testing or resolving errors, please contact the ND Customer Service Unit by email at NDMMISED@nd.gov, or call 701-328-4043 or 1-800-755-2604 (option 1).

4 Connectivity with the North Dakota MMIS

Process Flows

Editing and Validation Flow Diagram



Legend:

1. **Content Identification:** Data identification is attempted. If the data can be identified, it is then checked for Trading Partner Relationship Validation.
2. **Trading Partner Relationship Validation:** The Trading Partner information is validated. If the Trading Partner relationship is valid, the data will be passed for X12N syntax validation.
3. **X12N Syntax Validation:** A determination will be made as to whether the data is ASC X12N. An X12C 999 (Implementation Acknowledgement) will be sent to the mailbox of the submitter. The X12C 999 contains **ACCEPT, REJECT or PARTIAL** status. If the file contained syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported in the X12C 999, and will be further detailed in the EDIFECs Report..
4. **Payer Business Edits:** If the data passes X12N syntax validation, payer business edits, such as the NPI "check digit" validation" will be performed. Any errors found will be returned in an X12C 999, with details explaining the segment(s) and element(s) where the error(s) occurred. The X12C 999 will be sent to the Mailbox System for submitter retrieval.
5. **Data Transformation:** Inbound X12N data is translated to XML format, and passed to the North Dakota MMIS for processing.

Transmission Administration Procedures

Enrolled North Dakota Trading Partners will submit X12N 837 Dental transaction data to ND Medicaid for processing. ND Medicaid validates submission of X12N format(s). The TA1 Interchange Acknowledgement reports the syntactical analysis of the interchange header and trailer. If the data (Interchange Envelope) is invalid, the file will be rejected. A TA1 will be delivered to the Trading Partner mailbox and a copy forwarded to the Trading Partner Support Specialist for review. If the Trading Partner/Transaction Type relationship does not exist in the Trading Partner Management Database (a missing or invalid Trading Partner ID), then a TA1 will not be generated because the relationship does not exist within the ND Medicaid EDIFECs Trading Partner Management Database.. A report of the TA1 will be generated and delivered to the Trading Partner Support Specialist for additional review.

An X12C 999 Implementation Acknowledgement is generated when a file has passed the interchange header and trailer validation. A negative X12C 999 is generated if the file contains one or more Type 1 or Type 2 EDI or HIPAA Syntax errors or Type 7 ND Trading Partner Specific errors. The segment(s) and element(s) where the error(s) occurred will be reported to the submitter in the X12C 999 response.

If you have questions or require assistance with your TA1 or X12C 999 please contact the Customer Service Unit by email at NDMMISED@nd.gov, or call 701-328-4043 or 800-755-2604 (option 1).

Re-Transmission Procedures

Transmission/Production Issues

When file transmission or technical production issues occur, which could require the re-submission of files, please contact the ND Customer Service Unit by email at NDMMISED@nd.gov, or call 701-328-4043 or 800-755-2604 (option 1).

Please have the following information available when calling the ND Customer Service Unit regarding transmission and production issues.

- Trading Partner ID
- Web Portal Login Name (if using the Web Portal)
- Enterprise Managed File Transfer (if using Secure FTP)

Communication Protocol Specifications

North Dakota Trading Partners can submit X12N files and download files such as the X12N 835, X12N 277CA, TA1, and X12C 999 via the ND Health Enterprise MMIS Web Portal and Secure FTP.

Web Portal

The Web Portal method allows a Trading Partner to initiate the submission of a batch file for processing by ND Medicaid. A Trading Partner must be an authenticated portal user who is either an active North Dakota Provider, or an authorized representative of the Provider. The Trading Partner accesses the Web Portal via a Web browser and is prompted for a login and password. Trading Partners may select files for upload from their PC or work environment using the “Browse” function. All 837 files submitted must meet the ASC X12N 837 standard.

Note: All files submitted via the Web Portal must be less than 10MB. The File Name can be a maximum of 80 Characters. A “space” is not allowed in the file name. An “underscore” may be used in the file name instead of a space.

Web Portal Upload Procedures

1. In your Web browser, log on to the **North Dakota MMIS Health Enterprise Portal** at <https://mmis.nd.gov/portals/wps/portal/EnterpriseHome>.
2. From the **EDI** menu, select **Upload X12**.



North Dakota MMIS Web Portal

A screenshot of the North Dakota MMIS Web Portal navigation menu. The menu is a horizontal bar with several items: Home, Member, Provider, Claims, EDI, Authorizations, My Account, and FES. The EDI item is expanded, showing a dropdown menu with three options: Upload X12, File Retrieval Mailbox, and Upload NCPDP Batch Claims. Below the main menu, there are two buttons: Quick Links and Provider Message Center.

3. Navigate to the file you wish to upload using the Browse button, or type the path and filename into the File Information field.

A screenshot of the "Upload X12" web page. The page has a blue header with the text "Upload X12" and "Print | Help". Below the header, there is a section titled "File Information" with a text input field and a "Browse..." button. At the bottom right of the form, there are "Search" and "Reset" buttons.

4. Click **Submit**. Information on the file submitted is displayed in the **Upload Completed** screen.

A screenshot of the "Upload X12 Complete" confirmation screen. The screen has a blue header with the text "Upload X12 Complete" and "Print | Help". Below the header, there is a message: "File was successfully received and is being processed. Please check for a confirmation report in your mailbox." At the bottom right, there are two buttons: "Upload Another File" and "Message Center".

5. To retrieve the file confirmation, click on the **Message Center** button to go to your mailbox.

Web Portal Data Retrieval Procedures

The Web Portal allows a Trading Partner to initiate file retrieval. Once logged into the Provider Homepage, multiple functions such as File Retrieval are available.

Downloading Files from the Web Portal

1. In your Web browser, log on to the **North Dakota MMIS Health Enterprise Portal** at <https://mmis.nd.gov/portals/wps/portal/EnterpriseHome>
2. From the **EDI** menu, select **File Retrieval Mailbox**.



North Dakota MMIS Web Portal

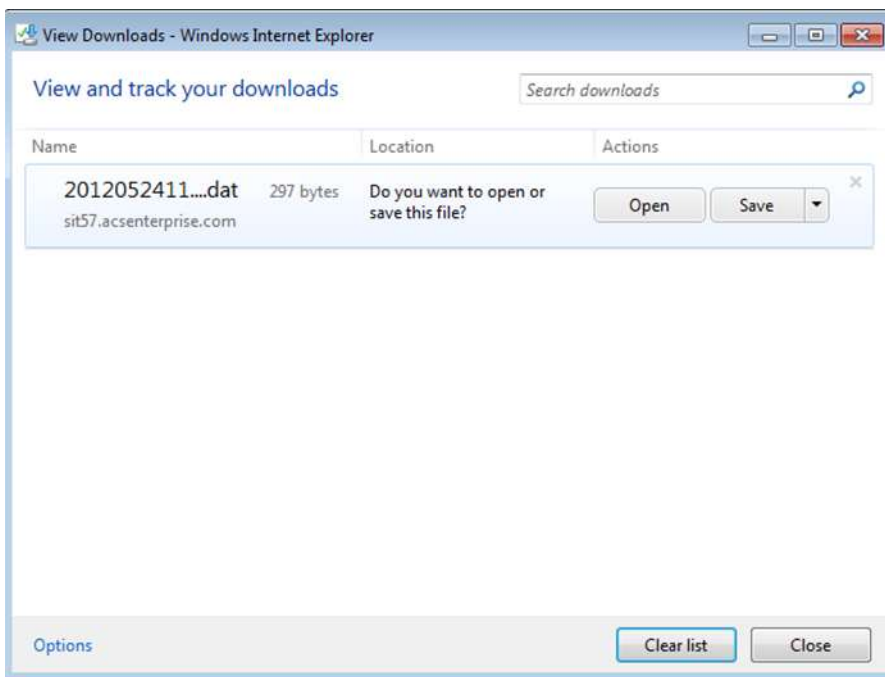
3. Select the **X12** radio button; select a file type; and if desired, enter beginning and end dates for the search.

4. Click the **Search** button. The **Results** view displays files matching the search criteria. From the **Results** view, click the Creation Date of the file for downloads.

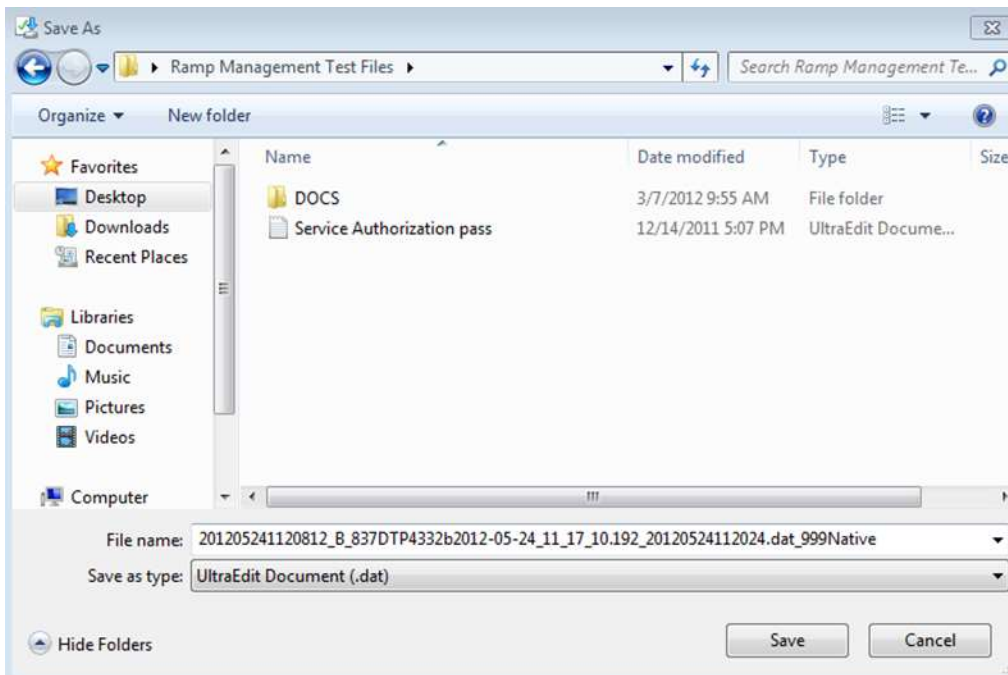
Note: After the first time selecting the files, the **Show All** box needs to be checked to retrieve them again

Creation Date	Filename	File Size
Sep 06, 2012	201209061025750_B_201209061025538_B_270_TP045_20120906102509_20120906102509.dat_999Native.dat	296
Sep 06, 2012	201209061025818_B_201209061025729_B_278_TP045_2_20120906102510_20120906102514.dat_999Native.dat	279
Sep 06, 2012	201209061025766_B_201209061025683_B_276_TP045_2_20120906102510_20120906102510.dat_999Native.dat	279
Sep 06, 2012	201209061025251_B_201209061025184_B_837ITP045_20120906102511_20120906102511.dat_999Native.dat	296
Sep 06, 2012	201209061025849_B_201209061025822_B_837D_TP045_2_20120906102510_20120906102514.dat_999Native.dat	333
Sep 06, 2012	201209060745844_B_201209060745662_B_WhiteSpaceInpnt_20120906074505_20120906074505.dat_999Native.dat	318
Sep 06, 2012	201209060740935_B_201209060740475_B_InvalidProv_20120906074006_20120906074006.dat_999Native.dat	296
Sep 06, 2012	201209060720439_B_201209060720133_B_ProfInvalid_20120906072004_20120906072004.dat_999Native.dat	296
Sep 06, 2012	201209060715584_B_201209060715210_B_FInpnt_20120906071508_20120906071508.dat_999Native.dat	318
Sep 06, 2012	201209060428407_B_201209060428037_B_201209050839111_B_201209050839339_B_Prof_McarInst_20120905083915_20120905083922.dat_20120906042817_20120906042817.dat_999Native.dat	296

5. Click **Save**, to save the file to your PC



6. Specify a path for download, and click **Save** again.



ND Enterprise Managed File Transfer

ND Enterprise Managed File Transfer (MFT), or commonly referred to as Secure FTP is an appropriate alternative to the North Dakota Web Portal for large files (i.e. files in excess of 10MB each). MFT setup is separate from Trading Partner Enrollment, but still coordinated through the North Dakota Customer Service Unit. Trading partners may use MFT for submission and retrieval of files. Note that ND Medicaid staff will not provide technical support for applications other than MFT.

Note: File Name is a maximum of 128 Characters. A “space” is not allowed in the inbound file name. An “underscore” may be used in the inbound file name instead of a space.

Secure FTP Setup and Support

Upon successful Trading Partner enrollment, a Trading Partner MFT account will be created. Trading Partners set up for submission and/or retrieval of files via the MFT mechanism will receive connectivity details from the Customer Service Unit once setup is complete. This information will include login credentials, policies concerning passwords, file retention, and basic information on site navigation. The ND Enterprise Managed File Transfer secured website is <https://mft.nd.gov/>.

If the Trading Partner requires support (i.e. account becomes locked or experiences connectivity issues), the Trading Partner should contact the ND Customer Service Unit by email at NDMMISED@nd.gov, or call 701-328-4043 or 800-755-2604 (option 1).

Passwords

Log in Credentials: In order to receive your authorized user log in credentials all Trading Partners, regardless of submission method, must be enrolled with ND Medicaid and approved as Trading Partners on the ND Health Enterprise MMIS. Log in credentials include names/ids and passwords, that will be required for the submission of transactions to ND Medicaid.

Trading Partner ID: The Trading Partner ID links the Trading Partner to their transaction data and is the ND Health Enterprise MMIS’s internal key to accessing their Trading Partner information. Please have this number available each time you contact the ND Customer Service Unit by email at NDMMISED@nd.gov, or call 701-328-4043 or 1-800-755-2604 (option 1).

The following login credentials are issued depending on the chosen communication method.

Web Portal User ID/Password: This Web Portal User ID allows Trading Partners access to the North Dakota MMIS Health Enterprise Portal for functions that include file

submission and file retrieval. The ND Customer Service Unit also uses the logon name to access Web Portal data submissions.

Managed File Transfer ID/Password: These are the login credentials for the ND Medicaid Grab-It site. These allow FTP Trading Partners to access assigned folders for file submission or to retrieve responses. The ND Customer Service Unit also uses this secure FTP ID to reference your Grab-It data submissions.

5 Contact Information

EDI Customer Service

The ND Customer Service Unit is available to all ND Medicaid Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Central Time, at the following numbers:

Toll Free: (800) 755-2604 (option 1)

Local: (701) 328-4043

EDI Technical Assistance

The ND Customer Service Unit assists users with questions about electronic submissions. The ND Customer Service Unit is available to all North Dakota Medicaid Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Central Time, at **(800) 755-2604 (option 1)** or **(701) 328-4043**. The Customer Service Unit specializes in the following:

- Provides information on available services
- Creates user accounts for file submission for approved Trading Partners
- Verifies receipt of electronic transmissions
- Provides assistance to Trading Partners experiencing transmission difficulties

Provider Services Number

The ND Customer Service Unit is available to all ND Medicaid Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Central Time, at **(800) 755-2604 (option 1)** or **(701) 328-4043**.

Applicable Web site/E-mail

Please visit <http://www.nd.gov/dhs> for ND Medicaid provider and Trading Partner services information, including Trading Partner enrollment information, FAQs, manuals and related documentation.

6 Control Segments/ Envelopes

ISA-IEA

ND Medicaid will read the Interchange Control Segments to validate the Interchange Envelope of each ASC X12 file received for processing. If the Interchange Envelope is invalid, the Trading Partner will receive a TA1 Interchange Acknowledgement. In the event a TA1 is generated, the TA1 will be delivered to the Trading Partner Mailbox. The ISA table provides sender and receiver codes, authorization and delimiter information.

GS-GE

ND Medicaid permits Trading Partners to submit single or multiple functional groups within an X12 file. If the X12 file contains multiple functional groups, ND Medicaid will split a file containing multiple functional groups in several files for processing. As a result, the Trading Partner will receive multiple X12C 999 Implementation Acknowledgments.

ST-SE

ND Medicaid will require a unique Transaction Set Control Number in the ST02. The ST02 value should match the SE02 value. Should a file contain multiple ST to SE Transaction Sets, each transaction set control number may not be duplicated within the same interchange (ISA to IEA).

7 North Dakota Medicaid Specific Business Rules and Limitations

Many of the data elements detailed in this Companion Guide reflect North Dakota business requirements, but still meet the standard requirements in the ASC X12N TR3. Inclusion of a “business-required” data field, as defined by this Companion Guide, will aid in the delivery of a positive response from the North Dakota Health Enterprise MMIS. For more information regarding North Dakota specific billing requirements, consult the applicable ND Medicaid provider billing manual, which can be downloaded from the North Dakota Medicaid Web site at: <http://www.nd.gov/dhs>

Note on decimal/amount fields: Even though the X12N transaction defines Amount fields as having an 18-byte maximum, there is an additional HIPAA rule that limits all decimal fields to a maximum of 10 characters, including the two implied or reported decimal places. Accordingly, for all decimal or amount fields:

- “123456789012” is not an acceptable amount, because it is greater than 10 bytes.
- “12345678.90” is acceptable because the number of digits is not greater than 10; the decimal point itself is not limited by the rule.
- However, “1234567890” is not acceptable because the X12N engine assumes that a decimal point and succeeding zeroes are implied so that the actual number being communicated is “1234567890.00”, which is greater than 10 bytes.
- The 10-byte limitation applies to all decimal or amount fields, including AMT segments, but also including any other fields that hold amounts or decimals, such as 837 SV207, CAS03, CAS06, CAS09, CAS12, CAS15, CAS18, HI01-5, HI02-5, HCP02 and HCP03, etc.

For all fields not listed in these bullets, follow the guidelines in the ASC X12N Electronic Data Interchange Technical Report Type 3 (TR3), available at <http://store.x12.org/store/healthcare-5010-consolidated-guides>.

8 Acknowledgements and/or Reports

Transmission Errors and Reports

Each file submission will create an acceptance or rejection report. The rejection reports which are generated depend on the severity of the error and the level where the error occurs. For submissions with errors, the result may be the rejection of an entire file or a single claim.

Transmission Errors

Transmission Errors can occur when there are errors in the ISA segment. The ISA is part of the Interchange Control. A transmission error will occur when the ISA and/or GS Sender and Receiver information is not submitted correctly or does not pass the Edifecs Trading Partner Validation process. When the file is unable to be recognized, an audit report will be generated and posted to the Trading Partner mailbox. If the Trading Partner is unable to be identified in either the ISA or GS, the audit report will still generate and post to a mailbox created for the Trading Partner ID found in the inbound file. The Trading Partner should use the audit report to correct and resubmit their X12 file.

- Example: Leading spaces before the start of the data makes the file unrecognizable. Compliance Check expects "ISA" in the first three spaces.

EDIFICS Audit Report

Error Report

Powered by Edifecs

Executed Thursday, March 13, 2014 01:16:42 PM (GMT)
 C:\Edifecs\EServer\profiles\Enterprise_NorthDakota_837_835_Batch\workspace\E0222F50-261B-4150-BF69-1A434F7F65E7

This report shows the results of a submitted data file validated against a guideline. If there are errors, you must fix the application that created the data file and then generate and submit a new data file.

Report Summary	Error Severity Summary	File Information
Failed 1 Error(s)	Rejecting Normal:1	Interchange Received: 1 Interchange Accepted: 0

1 Interchange						
Interchange Status: Rejected						
FunctionalGroup Received: 1 FunctionalGroup Accepted: 0		Sender ID: ND1746 Receiver ID: ND00994 Control Number: 800065404 Date: 130501		Sender Qualifier: ZZ Receiver Qualifier: ZZ Version: 00501 Time: 1230		
1.1 FunctionalGroup						
FunctionalGroup Status: Rejected						
TransactionSets Received: 1 TransactionSets Accepted: 0		Sender ID: ND1746 Control Number: 131210002 Date: 20130501		Receiver ID: ND00994 Version: 005010X223A2 Time: 1230		
1.1.1 Transaction						
Transaction Status: Rejected						
Provider Received: 1 Provider Accepted: 0		Control Number: 0001		Transaction ID: 837		
#	Error ID	Error	Error Data	SNIP Type	Severity	Guideline Properties
1	0x810005	The number of submitted segments in your file is 46. Number of included segments (SE01) has a value of 47. Please review the specification and re-submit a test. This error was detected at: Segment Count: 46 Element Count: 1 Characters: 1335 through 1337 Business Message: The values are not equal. Business path: SE/96	SE* 47 *0001	1	Normal	ID: 96 IID: 54430 Name: Number of Included Segments Standard Option: Mandatory User Option: Must Use Max Use: 1 Min Length: 1 Max Length: 10 Type: Numeric with implied decimal

Report Inventory

The three acceptance/rejection reports are:

- TA1 Interchange Acknowledgement
- X12C 999 Implementation Acknowledgement
- EDIFECs Error Report

TA1 Interchange Acknowledgement Rejection Report

The ISA and GS segments contain the header and trailer information within the Interchange (ISA-IEA) and Functional Group (GS-GE) envelopes. Some ISA-IEA and GS-GE problems will result in the entire submission being rejected resulting in the generation of a TA1 to be delivered to the Trading Partner mailbox. If the Trading Partner relationship does not exist (a missing or invalid Trading Partner ID), a TA1 will not be generated because the relationship does not exist within the ND Medicaid Trading Partner Management Database (TPMS).

A report of the TA1 will be generated daily and delivered to the ND Customer Service Unit for additional review. For additional information regarding the TA1, please refer to the ASC X12C 999 (v005010X231A1) Electronic Data Interchange Technical Report Type 3 (TR3).

The TA1 Interchange Acknowledgement Report may result from various sources:

- The submitted file is not recognized as an X12N file due to file corruption or data errors in the ISA-IEA or GS-GE envelopes.
- The submitted file has errors that would prevent the translation engine from uniquely identifying the file, transaction type, or submitter.
- The ISA01 contains a value other than 00 or 03.

Interchange-Level Errors and the TA1 Rejection Report

Envelope data and/or format issues may make it impossible to identify the ISA-IEA envelope will result in a TA1 Interchange Acknowledgement rejection of the entire submission.

An example of an Interchange-Level error that will result in a TA1:

- The Header Interchange Control Number in ISA13 (“014640000”) does not match the Trailer Interchange Control Number in IEA02 (“014640001”). The interchange envelope cannot be validated when the ISA13 and IEA02 do not contain the same values.

```
ISA*00*                *00*                *ZZ*654321*ZZ*NDDHSMED
*120719*1249*^*00501*014640000*1*T*:~
GS*HC*ND0012345*NDDHSMED*20120719*16265868*900000001*X*005010X224A2~
```

ST*837*319162942*005010X224A2~
 BHT*0019*00*319162942*20120719*162943*CH~
 NM1*41*1*SMITH*JOHN*A***46*ND0012345~
 PER*IC*TIFFANY L. JOHNSON*TE*9125551212*EX*111*FX*9125551313~
 NM1*40*2*ND MEDICAID*****46*NDDHSMED~
 HL*1**20*1~
 PRV*BI*PXC*193200000X~
 NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
 N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
 N4*BILLING CITY*ND*033011234~
 REF*EI*591234567~
 HL*2*1*22*0~
 SBR*P*18*****MC~
 NM1*IL*1*DOE*JOHN****MI*11102228198~
 N3*366 S. PALM ST*APT 102~
 N4*JESUP*ND*033014567~
 DMG*D8*19941209*M~
 NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
 N3*P.O. BOX 5000~
 N4*MCRAE*ND*033015000~
 CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
 DTP*472*D8*20120715~
 PWK*DA*BM***AC*8234756111022281982012071220120712~
 REF*9F*1234567890~
 REF*F8*13574258963412874~
 NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
 PRV*RF*PXC*193200000X~
 NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
 PRV*PE*PXC*193300000X~
 LX*1~
 SV3*AD:D0150*39.33*11***1~
 DTP*472*D8*20120715~
 LX*2~
 SV3*AD:D1120*32.08*11***1~
 DTP*472*D8*20120715~
 LX*3~
 SV3*AD:D1203*17.59*11***1~
 DTP*472*D8*20120715~
 LX*4~
 SV3*AD:D0330*56.92*11***1~
 DTP*472*D8*20120715~
 LX*5~
 SV3*AD:D0274*33.12*11***1~
 DTP*472*D8*20120715~
 SE*45*319162942~
 GE*1*900000001~
 IEA*1*014640001~

Functional Group Level Errors and the TA1 Rejection Report

When the ISA-IEA and GS-GE envelopes are identifiable but the Trading Partner is not authorized for the transaction, the entire submission is rejected with a TA1.

Example of a Functional-Group-Level error that will result in a TA1 rejection:

- If an invalid Receiver ID is transmitted in the GS.

```
ISA*00*                *00*                *ZZ*ND0012345          *ZZ*NDDHSMED
*120719*1249*^*00501*01464000*1*P*::~~
GS*HC*ND0012345*02600068*20120719*16265868*900000001*X*005010X224A2~
ST*837*319162942*005010X224A2~
  BHT*0019*00*319162942*20120719*162943*CH~
  NM1*41*1*SMITH*JOHN*A***46*ND0012345~
  PER*IC*TIFANY L. JOHNSON*TE*9125551212*EX*111*FX*9125551313~
  NM1*40*2*ND MEDICAID*****46*NDDHSMED~
  HL*1**20*1~
  PRV*BI*PXC*193200000X~
  NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
  N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
  N4*BILLING CITY*ND*033011234~
  REF*EI*591234567~
  HL*2*1*22*0~
  SBR*P*18*****MC~
  NM1*IL*1*DOE*JOHN****MI*11102228198~
  N3*366 S. PALM ST*APT 102~
  N4*JESUP*ND*033014567~
  DMG*D8*19941209*M~
  NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
  N3*P.O. BOX 5000~
  N4*MCRAE*ND*033015000~
  CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
  DTP*472*D8*20120715~
  PWK*DA*BM***AC*8234756111022281982012071220120712~
  REF*9F*1234567890~
  REF*F8*13574258963412874~
  NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
  PRV*RF*PXC*193200000X~
  NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
  PRV*PE*PXC*193300000X~
  LX*1~
  SV3*AD:D0150*39.33*11***1~
  DTP*472*D8*20120715~
  LX*2~
  SV3*AD:D1120*32.08*11***1~
  DTP*472*D8*20120715~
  LX*3~
  SV3*AD:D1203*17.59*11***1~
  DTP*472*D8*20120715~
  LX*4~
  SV3*AD:D0330*56.92*11***1~
  DTP*472*D8*20120715~
  LX*5~
  SV3*AD:D0274*33.12*11***1~
  DTP*472*D8*20120715~
  SE*45*319162942~
  GE*1*900000001~
  IEA*1*01464000~
```

X12C 999 Implementation Acknowledgment

If the file, envelope, and submitter are recognized, the file is passed through Compliance Check to determine the syntactical validity of the X12N submission. An X12C 999 Implementation Acknowledgement is generated for all files that receive an accepted TA1. If errors are found, a rejected or partial X12C 999 will be generated. If the Trading Partner receives a rejected or partial X12C 999, the Trading Partner will review, correct and resubmit. For additional information regarding the X12C 999, please refer to the ASC X12C 999 (v005010X231A1) TR3. If the Trading Partner requires additional assistance with the X12C 999, please contact the Customer Service Unit.

Interchange Level Errors and the X12C 999 Implementation Acknowledgement

If the Interchange Header is recognizable and all elements are the proper length, but the header contains syntactically invalid data, such as invalid qualifiers or data relationships, an X12C 999 will be generated.

Example of an Interchange-Level error that will result in an X12C 999:

- “K” is technically a valid repetition separator. An accepted TA1 will be produced. However, if “K” is used anywhere in the file, it will be classified as a repetition separator and it will fail as a syntax error on the X12C 999. ND Medicaid recommends using a caret (^) as the repetition separator.

```
ISA*00*                *00*                *xx*ND0012345          *ZZ*NDDHSMED
*120719*1249*K*00501*014640000*1*T*:~
GS*HC*ND0012345*NDDHSMED*20120719*16265868*900000001*X*005010X224A2~
ST*837*319162942*005010X224A2~
  BHT*0019*00*319162942*20120719*162943*CH~
  NM1*41*1*SMITH*JOHN*K***46*ND0012345~
  PER*IC*TIFFANY L. JOHNSON*TE*9125551212*EX*111*FX*9125551313~
  NM1*40*2*ND MEDICAID*****46*NDDHSMED~
  HL*1**20*1~
  PRV*BI*PXC*193200000X~
  NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
  N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
  N4*BILLING CITY*ND*033011234~
  REF*EI*591234567~
  HL*2*1*22*0~
  SBR*P*18*****MC~
  NM1*IL*1*DOE*JOHN***MI*11102228198~
  N3*366 S. PALM ST*APT 102~
  N4*JESUP*ND*033014567~
  DMG*D8*19941209*M~
  NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
  N3*P.O. BOX 5000~
  N4*MCRAE*ND*033015000~
  CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
  DTP*472*D8*20120715~
  PWK*DA*BM***AC*8234756111022281982012071220120712~
  REF*9F*1234567890~
  REF*F8*13574258963412874~
  NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
  PRV*RF*PXC*193200000X~
  NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
  PRV*PE*PXC*193300000X~
  LX*1~
```



```

SV3*AD:D0150*39.33*11***1~
DTP*472*D8*20120715~
LX*2~
SV3*AD:D1120*32.08*11***1~
DTP*472*D8*20120715~
LX*3~
SV3*AD:D1203*17.59*11***1~
DTP*472*D8*20120715~
LX*4~
SV3*AD:D0330*56.92*11***1~
DTP*472*D8*20120715~
LX*5~
SV3*AD:D0274*33.12*11***1~
DTP*472*D8*20120715~
SE*45*319162942~
GE*1*900000001~
IEA*1*014640000~

```

Functional Group Level Errors and the X12C 999 Implementation Acknowledgement

When the GS and GE segments are identifiable and the Trading Partner is authorized for the transaction, but a syntactical error is identified in the GS or GE segments, the entire functional group (from GS to GE) is rejected with an X12C 999.

Example of Functional Group Level Error that will result in an X12C 999:

- The transaction was built with incorrect Total Number of transaction sets at the Functional Group Trailer. GE01 should be 2 because the Functional Group contains two ST to SE transaction sets.

```

ISA*00*          *00*          *ZZ*ND0012345          *ZZ*NDDHSMED
*120719*1249*^*00501*014640000*1*T*:~
GS*HC*ND0012345*NDDHSMED*20120719*16265868*900000001*X*005010X224A2~
ST*837*319162942*005010X224A2~
BHT*0019*00*319162942*20120719*162943*CH~
NM1*41*1*SMITH*JOHN*A***46*ND0012345~
PER*IC*TIFFANY L. JOHNSON*TE*9125551212*EX*111*FX*9125551313~
NM1*40*2*ND MEDICAID*****46*NDDHSMED~
HL*1**20*1~
PRV*BI*PXC*193200000X~
NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
N4*BILLING CITY*ND*033011234~
REF*EI*591234567~
HL*2*1*22*0~
SBR*P*18*****MC~
NM1*IL*1*DOE*JOHN****MI*11102228198~
N3*366 S. PALM ST*APT 102~
N4*JESUP*ND*033014567~
DMG*D8*19941209*M~
NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
N3*P.O. BOX 5000~
N4*MCRAE*ND*033015000~
CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
DTP*472*D8*20121115~
PWK*DA*BM***AC*8234756111022281982012071220120712~
REF*9F*1234567890~
REF*F8*13574258963412874~
NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~

```

PRV*RF*PXC*193200000X~
NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
PRV*PE*PXC*193300000X~
LX*1~
SV3*AD:D0150*39.33*11***1~
DTP*472*D8*20120715~
LX*2~
SV3*AD:D1120*32.08*11***1~
DTP*472*D8*20120715~
LX*3~
SV3*AD:D1203*17.59*11***1~
DTP*472*D8*20120715~
LX*4~
SV3*AD:D0330*56.92*11***1~
DTP*472*D8*20120715~
LX*5~
SV3*AD:D0274*33.12*11***1~
DTP*472*D8*20120715~

SE*45*0001~

ST*837*0002*005010X224A2~~

BHT*0019*00*319162942*20120719*162943*CH~
NM1*41*1*SMITH*JOHN*A***46*ND0012345~
PER*IC*TIFANY L. JOHNSON*TE*9125551212*EX*111*FX*9125551313~
NM1*40*2*ND MEDICAID*****46*NDDHSMED~
HL*1**20*1~
PRV*BI*PXC*193200000X~
NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
N4*BILLING CITY*ND*033011234~
REF*EI*591234567~
HL*2*1*22*0~
SBR*P*18*****MC~
NM1*IL*1*DOE*JOHN****MI*11102228198~
N3*366 S. PALM ST*APT 102~
N4*JESUP*ND*033014567~
DMG*D8*19941209*M~
NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
N3*P.O. BOX 5000~
N4*MCRAE*ND*033015000~
CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
DTP*472*D8*20120715~
PWK*DA*BM***AC*8234756111022281982012071220120712~
REF*G1*12345678~
REF*9F*1234567890~
REF*F8*13574258963412874~
NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
PRV*RF*PXC*193200000X~
NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
PRV*PE*PXC*193300000X~
LX*1~
SV3*AD:D0150*39.33*11***1~
DTP*472*D8*20120715~
LX*2~
SV3*AD:D1120*32.08*11***1~
DTP*472*D8*20120715~
LX*3~
SV3*AD:D1203*17.59*11***1~
DTP*472*D8*20120715~
LX*4~
SV3*AD:D0330*56.92*11***1~
DTP*472*D8*20120715~
LX*5~
SV3*AD:D0274*33.12*11***1~
DTP*472*D8*20120715~

SE*46*319162943~
GE*1*900000001~
IEA*1*014640000~

Transaction Set Level Errors and the X12C 999

If an error is identified within the Submitter, Receiver, or Provider loops, the entire Transaction Set (ST and SE segments and all segments in between) is rejected with an X12C 999. However, if the functional group consists of additional transactions without errors, the other transactions will be processed.

Example of a Transaction Set Level Error:

- The following example contains an invalid Payer ID of 77101. The Payer ID for ND Medicaid is NDDHSMED.

```
ISA*00*          *00*          *ZZ*ND0012345          *ZZ*NDDHSMED
*120719*1249*^*00501*014640000*1*T*:~
GS*HC*ND0012345*NDDHSMED*20120719*16265868*900000001*X*005010X224A2~
ST*837*319162942*005010X224A2~
  BHT*0019*00*319162942*20120719*162943*CH~
  NM1*41*1*SMITH*JOHN*A***46*ND0012345~
  PER*IC*TIFFANY L. JOHNSON*TE*9125551212*EX*111*FX*9125551313~
  NM1*40*2*ND MEDICAID*****46*77101~
  HL*1**20*1~
  PRV*BI*PXC*193200000X~
  NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
  N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
  N4*BILLING CITY*ND*033011234~
  REF*EI*591234567~
  HL*2*1*22*0~
  SBR*P*18*****MC~
  NM1*IL*1*DOE*JOHN***MI*11102228198~
  N3*366 S. PALM ST*APT 102~
  N4*JESUP*ND*033014567~
  DMG*D8*19941209*M~
  NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
  N3*P.O. BOX 5000~
  N4*MCRAE*ND*033015000~
  CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
  DTP*472*D8*20120715~
  PWK*DA*BM***AC*8234756111022281982012071220120712~
  REF*9F*1234567890~
  REF*F8*13574258963412874~
  NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
  PRV*RF*PXC*193200000X~
  NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
  PRV*PE*PXC*193300000X~
  LX*1~
  SV3*AD:D0150*39.33*11***1~
  DTP*472*D8*20120715~
  LX*2~
  SV3*AD:D1120*32.08*11***1~
  DTP*472*D8*20120715~
  LX*3~
  SV3*AD:D1203*17.59*11***1~
  DTP*472*D8*20120715~
  LX*4~
  SV3*AD:D0330*56.92*11***1~
  DTP*472*D8*20120715~
```

```

LX*5~
SV3*AD:D0274*33.12*11***1~
DTP*472*D8*20120715~
SE*45*319162942~
GE*1*900000001~
IEA*1*014640000~

```

Claim-Level Errors and the X12C 999

In a case where header, submitter, receiver, provider, and subscriber loops are all valid, but an error occurs in a single claim, only the claim containing the error is rejected.

Example of a Claim-Level Error:

- In the following example, the Segment ID "REN" is not a valid X12N 837 segment. The highlighted claim (CLM and subsidiary segments) would be rejected with an X12C 999. The claim above it would be passed on for processing.

```

ISA*00*          *00*          *ZZ*ND0012345          *ZZ*NDDHSMED
*120719*1249*^*00501*014640000*1*T*:~
GS*HC*ND0012345*NDDHSMED*20120719*16265868*900000001*X*005010X224A2~
ST*837*319162942*005010X224A2~
BHT*0019*00*319162942*20120719*162943*CH~
NM1*41*1*SMITH*JOHN*A***46*ND0012345~
PER*IC*TIFFANY JOHNSON*TE*9125551212*EX*111*FX*9125551313~
NM1*40*2*ND MEDICAID*****46*NDDHSMED~
HL*1**20*1~
PRV*BI*PXC*193200000X~
NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
N4*BILLING CITY*ND*033011234~
REF*EI*591234567~
HL*2*1*22*0~
SBR*P*18*****MC~
NM1*IL*1*DOE*JOHN***MI*11102228198~
N3*366 S. PALM ST*APT 102~
N4*JESUP*ND*033014567~
DMG*D8*19941209*M~
NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
N3*P.O. BOX 5000~
N4*MCRAE*ND*033015000~
CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
DTP*472*D8*20120715~
PWK*DA*BM***AC*8234756111022281982012071220120712~
REF*G1*12345678~
REF*9F*1234567890~
REF*F8*13574258963412874~
NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
PRV*RF*PXC*193200000X~
NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
RV*PE*PXC*193300000X~
LX*1~
SV3*AD:D0150*39.33*11***1~
DTP*472*D8*20120715~
LX*2~
SV3*AD:D1120*32.08*11***1~
DTP*472*D8*20120715~
LX*3~
SV3*AD:D1203*17.59*11***1~
DTP*472*D8*20120715~
LX*4~

```

SV3*AD:D0330*56.92*11***1~
 DTP*472*D8*20120715~
 LX*5~
 SV3*AD:D0274*33.12*11***1~
 DTP*472*D8*20120715~
 SE*46*0001~
 ST*837*0002*005010X224A2~
 BHT*0019*00*319162942*20120719*162943*CH~
 NM1*41*1*SMITH*JOHN*A***46*ND0012345~
 PER*IC*TIFFANY JOHNSON*TE*9125551212*EX*111*FX*9125551313~
 NM1*40*2*ND MEDICAID*****46*NDDHSMED~
 HL*1**20*1~
 PRV*BI*PXC*193200000X~
 NM1*85*1*BILLING*PROVIDER*X***XX*1104922392~
 N3*2010AA ADDRESS LINE 1*2010AA ADDRESS LINE 2~
 N4*BILLING CITY*ND*033011234~
 REF*EI*591234567~
 HL*2*1*22*0~
 SBR*P*18*****MC~
 NM1*IL*1*DOE*JOHN***MI*11102228198~
 N3*366 S. PALM ST*APT 102~
 N4*JESUP*ND*033014567~
 DMG*D8*19941209*M~
 NM1*PR*2*ND MEDICAID*****PI*NDDHSMED~
 N3*P.O. BOX 5000~
 N4*MCRAE*ND*033015000~
 CLM*KERRC*257.00***11:B:1*Y*A*Y*Y~
 DTP*472*D8*20120715~
 PWK*DA*BM**AC*8234756111022281982012071220120712~
 REN*9F*1234567890~
 REF*F8*13574258963412874~
 NM1*DN*1*REFERRING*PROVIDER*X***XX*1104922392~
 PRV*RF*PXC*193200000X~
 NM1*82*1*RENDERING*PROVIDER*A***XX*1234567890~
 PRV*PE*PXC*193300000X~
 LX*1~
 SV3*AD:D0150*39.33*11***1~
 DTP*472*D8*20120715~
 LX*2~
 SV3*AD:D1120*32.08*11***1~
 DTP*472*D8*20120715~
 LX*3~
 SV3*AD:D1203*17.59*11***1~
 DTP*472*D8*20120715~
 LX*4~
 SV3*AD:D0330*56.92*11***1~
 DTP*472*D8*20120715~
 LX*5~
 SV3*AD:D0274*33.12*11***1~
 DTP*472*D8*20120715~
 SE*46*0002~
 GE*2*900000001~
 IEA*1*014640000~

EDIFECs Error Report

Every X12N transaction that does not receive a TA1 or X12C 999 transaction rejection will pass through the EDIFECs Compliance Check engine. EDIFECs generates a full report of all Loops, Segments, Elements, along with the data contained within them, and explanations of the errors, if any. This report is especially useful in troubleshooting errors

when it is combined with the X12C 999. The EDIFECS reports will be available to Trading Partners in their mailbox.

Below is an abbreviated sample Error Report that shows the level of detail contained in the EDIFECS Error Report. Note that the invalid data is shown in **bold type**, and the full explanation of the error is given in the “Error Message” column.

Sample EDIFECS Error Report		
Error Report		
Submitted: Sunday, August 26, 2012 11:59:05 (Central Time)		
Guideline: Spec7.ecs		
Data File: I:\CustomerImplementation\North Dakota\Test Data\837\X12s only\837D – Test		
This report shows the results of a submitted data file validated against a guideline. If there are errors, you must fix the application that created the data file and then generate and submit a new data file.		
Summary Report		
Total Errors: 6		
Total Warnings: 0		
Total Information: 0		
Error Count by WEDI SNIP		
SNIP Type	SNIP Name	Counts
0	System	0
1	EDI Syntax	1 Errors 0 Warnings 0 Information
2	HIPAA Syntax	5 Errors 0 Warnings 0 Information

Sample EDIFECS Error Report					
# Error ID	Error Message	Error Data	SNIP Type	Severity	Guideline Properties
1 0x8100 24	Element ISA07 (Interchange ID Qualifier) does not contain a valid identification code: 'PP' is not allowed. Segment ISA is defined in the guideline at position N/A. This error was detected at: Segment Count: 1 Element Count: 7 Characters: 51 through 53 An invalid code value was encountered.	ISA*00* *00* *ZZ*820000514 * PP *NDDHSMED *101206*1013*^* 00501*00000024 8*0*T*:	2 – HIPAA Syntax	Normal	Element: ISA07 Name: Interchange ID Qualifier ID: I05 Standard: Mandatory Option: Type: ID Min Length: 2 Max Length: 2 User Option: Required
2 0x8100 24	Element NM108 (Identification Code Qualifier) does not	NM1*85*2*MAN CHESTER HEALTH	2 – HIPAA Syntax	Normal	Element: NM108 Name: Identification

Sample EDIFICS Error Report

# Error ID	Error Message	Error Data	SNIP Type	Severity	Guideline Properties
	<p>contain a valid identification code: 'XY' is not allowed. Segment NM1 is defined in the guideline at position 015.</p> <p>This error was detected at: Segment Count: 11 Element Count: 8 Characters: 443 through 445</p> <p>An invalid code value was encountered.</p>	<p>DEPARTMENT** *** XY *1174783468</p>			<p>Code Qualifier ID: 66 Standard Option: Conditional Type: ID Min Length: 1 Max Length: 2 User Option: Required</p>
3 0x8100 3C	<p>Element DMG02 (Date Time Period) contains a lexical format rule – the data in this element did not match the rule. The lexical format pattern specified in the guideline is CCYMMDD. Segment DMG is defined in the guideline at position 032.</p> <p>This error was detected at: Segment Count: 26 Element Count: 2 Characters: 893 through 902</p> <p>A lexical format mismatch occurred.</p>	<p>DMG*D8* 201201271 *M</p>	2 – HIPAA Syntax	Normal	<p>Element: DMG02 Name: Date Time Period ID: 1251 Standard Option: Conditional Type: AN Min Length: 1 Max Length: 35 User Option: Required</p>
4 0x3939 3D2	<p>Value of element N403 is incorrect. It should be formatted as 5 or 9 digits for US Zip Code. Segment N4 is defined in the guideline at position 030.</p> <p>This error was detected at: Segment Count: 29 Element Count: 3 Character: 970 through 982</p> <p>ZIP Code is invalid in Payer City/State/ZIP Code.</p>	<p>N4*MC RAE*ND* 310550000000</p>	2 – HIPAA Syntax	Normal	<p>Element: N403 Name: Postal Code ID: 116 Standard Option: Optional Type: ID Min Length: 3 Max Length: 15 User Option: Required</p>
5 0x8100 24	<p>Element REF01 (Reference Identification Qualifier) does not contain a valid</p>	<p>REF* XX *99999999</p>	2 – HIPAA Syntax	Normal	<p>Element: REF01 Name: Reference Identification Qualifier</p>

Sample EDIFECs Error Report						
#	Error ID	Error Message	Error Data	SNIP Type	Severity	Guideline Properties
		<p>identification code: 'XX' is not allowed. Segment REF is defined in the guideline at position 271.</p> <p>This error was detected at: Segment Count: 39 Element Count: 1 Characters: 1256 through 1258</p> <p>An invalid code value was encountered.</p>				<p>ID: 128 Standard: Mandatory Option: Type: ID Min Length: 2 Max Length: 3 User Option: Required</p>
6	0x810005	<p>Element SE02 (Transaction Set Control Number) has a value of '1001'. The expected value was '10011'. Segment SE is defined in the guideline at position 555.</p> <p>This error was detected at: Segment Count: 87 Element Count: 2 Characters: 2238 through 2242</p> <p>The values are not equal.</p>	SE*85* 1001	1 – EDI Syntax	Normal	<p>Element: SE02 Name: Transaction Set Control Number ID: 329 Standard: Mandatory Option: Type: AN Min Length: 4 Max Length: 9 User Option: Required</p>

9 Trading Partner Agreements

Prior to engaging in EDI with the North Dakota MMIS Enterprise, prospective Trading Partners must complete a Trading Partner enrollment package, which includes a Trading Partner Signature Agreement Form that requires an original signature. Please follow all enrollment instructions and mail the signed Trading Partner Agreement Form to ND Medicaid, along with any other required documents to complete the enrollment application process.

Please find all North Dakota Provider/Trading Partner Enrollment information at: <https://mmis.nd.gov/portals/wps/portal/ProviderEnrollment>

The mailing address is:

North Dakota Department of Human Services
600 East Boulevard Avenue, Dept 325
Bismarck, ND 58505-0250
Attn: Customer Service

Trading Partners

In simple terms, an EDI Trading Partner is defined as any provider or agent acting on behalf of a provider that transmits electronic transaction data to or receives electronic transaction data from a health plan.

There are two different types of Trading Partners for the North Dakota Medicaid:

First, there are Vendors, Billing Agents, Clearinghouses and Switch Vendors who engage in Electronic Data Interchange (EDI) which may include claims and eligibility inquiries on behalf of enrolled ND Title XIX providers. These Trading Partners are not enrolled providers, their only interaction with the MMIS is to submit and retrieve electronic data files.

Second, there are providers re-enrolling under the Title XIX Program who use their own software programs to engage in Electronic Data Interchange (EDI) with the North Dakota Medicaid. Some providers may use the MMIS online file upload and retrieval features via the North Dakota MMIS Health Enterprise Portal.

10 Transaction Specific Information

This section contains data clarifications, including North Dakota-specific data requirements. For additional guidance on the use of business rules, please see [Section 7 North Dakota Medicaid Specific Business Rules and Limitations](#).

ASC X12N 837D Health Care Claim: Dental

TR3 Page	Loop ID	Reference	Name	Codes	Length	Notes/Comments
C.3	N/A	ISA	Interchange Control Header			
C.4	N/A	ISA05	Interchange ID Qualifier	ZZ		
C.4	N/A	ISA06	Interchange Sender ID			Trading Partner ID assigned by North Dakota Medicaid
C.5	N/A	ISA07	Interchange ID Qualifier	ZZ		
C.5	N/A	ISA08	Interchange Receiver ID	NDDHSM ED		
C.7	N/A	GS	Functional Group Header			
C.7	N/A	GS02	Application Sender's Code			Trading Partner ID assigned by North Dakota Medicaid

66	N/A	BHT	Beginning of Hierarchical Transaction			
67	N/A	BHT06	Transaction Type Code	CH		
69	1000A	NM1	Submitter Name			
70	1000A	NM109	Submitter Identifier			Trading Partner ID assigned by North Dakota Medicaid
74	1000B	NM1	Receiver Name			
75	1000B	NM103	Name Last or Organization Name	North Dakota Medicaid		
75	1000B	NM109	Identification Code	NDDHSM ED		
78	2000A	PRV	Billing Provider Specialty Information			This segment is required.
78	2000A	PRV03	Reference Identification			Enter the Billing Provider's Taxonomy Code. See www.nd.gov/dhs/mmis for appropriate codes.
111	2000B	SBR	Subscriber Information			
111	2000B	SBR01	Payer Responsibility Sequence Number	A,B,C,D, E,F,G,H, P,S,T		U is not accepted

			Code			
113	2000B	SBR09	Claim Filing Indicator Code	MC		
114	2010BA	NM1	Subscriber Name			
116	2010BA	NM109	Identification Code	ND Medicaid Recipient ID		
124	2010BB	NM1	Payer Name			
125	2010BB	NM103	Name Last or Organization Name	North Dakota Medicaid		
125	2010BB	NM109	Identification Code	NDDHSM ED		
168	2300	REF	Payer Claim Control Number			
168	2300	REF02	Reference Identification			<p>Required when CLM05-3 (Claim Frequency Code) indicates this claim is a replacement or void to a previously adjudicated claim. If not required, do not send.</p> <p>If replacing a claim that was originally processed in the ND Health Enterprise MMIS, Enter the 17-digit TCN for the previously processed claim.</p>

						<p>If replacing a claim that was originally processed in the ND Legacy MMIS insert the century code in the 3rd and 4th positions of the ICN. Enter the resulting 15-digit ICN for the previously processed claim. Example: Legacy ICN: 1015015320010 Replaced Legacy ICN: 10<u>20</u>15015320010</p>
193	2310A	PRV	Referring Provider Specialty Information			Situational – this segment required only if the 2310A loop is required.
193	2310A	PRV03	Reference Identification			Enter the Referring Provider's Taxonomy Code. See www.nd.gov/dhs/mmis for appropriate codes.
199	2310B	PRV	Rendering Provider Specialty Information			Situational – this segment required only if the 2310B loop is required.
199	2310B	PRV03	Reference Identification			Enter the Rendering Provider's Taxonomy Code. See www.nd.gov/dhs/mmis

						mis for appropriate codes.
213	2310D	PRV	Assistant Surgeon Specialty Information			Situational – this segment required only if the 2310D loop is required.
213	2310D	PRV03	Reference Identification			Enter the Assistant Surgeon’s Taxonomy Code. See www.nd.gov/dhs/mis for appropriate codes.
221	2320	SBR	Other Subscriber Information			
222	2320	SBR01	Payer Responsibility Sequence Number Code	A,B,C,D, E,F,G,H, P,S,T		U is not accepted
319	2420A	PRV	Rendering Provider Specialty Information			Situational – this segment required only if the 2420A loop is required.
319	2420A	PRV03	Reference Identification			Enter the Rendering Provider’s Taxonomy Code. See www.nd.gov/dhs/mis for appropriate codes.
325	2420B	PRV	Assistant Surgeon Specialty Information			Situational – this segment required only if the 2420B loop is required.

325	2420B	PRV03	Reference Identificatio n			Enter the Assistant Surgeon's Taxonomy Code. See www.nd.gov/dhs/mis for appropriate codes.
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Appendices

Implementation Checklist

The North Dakota Customer Service Unit assists new Trading Partners with enrollment and testing. The following checklist will help trading partners to begin exchanging information with ND Medicaid.

Trading Partner Checklist			
	Task	Responsibility	Completed Date
<input type="checkbox"/>	Review Trading Partner Enrollment Toolkit at: http://www.nd.gov/dhs/info/mmis.html	Trading Partner	
<input type="checkbox"/>	Enroll in the new MMIS as a Trading Partner at: https://mmis.nd.gov/portals/wps/portal/ProviderEnrollment	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Exchange Contact information for Business, Technical and/or Data contacts. (Name, Phone number, Email address and Mailing Address)	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Confirm X12 Transaction selections	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Establish Standard ISA and GS information	Trading Partner and ND Medicaid	

<input type="checkbox"/>	Determine communication method	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Establish a schedule for testing	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Complete the testing for all selected X12 Transactions	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Promote Trading Partner to Production status	Trading Partner and ND Medicaid	
<input type="checkbox"/>	Production cut-over	ND Medicaid	
<input type="checkbox"/>	Begin sending X12 transactions to new MMIS for processing	Trading Partner	

Business Scenarios

Please contact the ND Customer Service Unit to discuss your specific EDI related business needs, should they not be covered in this guide or other available ND Medicaid X12N transaction companion guides.

Transmission Examples

Please contact the ND Customer Service Unit for transmission examples beyond the samples already provided in this guide.

Frequently Asked Questions

For current Provider and Trading Partner FAQs, please visit the following page:
<https://mmis.nd.gov/portals/wps/portal/ProviderFaq>

Change Summary

Version	Date	Description	Description of Changes
1.0	03/10/2014	Initial Document for Deliverables	Document reformatted to meet CAQH CORE standard companion guide format (Phase I CORE Req. 152).
1.1	10/26/2014	Change ND ID	Change ND ID from ND00994 to NDDHSMED
1.2	05/15/2015	Added requirement for provider taxonomy codes. Further defined format of referenced original ICN/TCN for replacement/void claims.	<p>Provider Taxonomy Codes are required (PRV) when the provider loop is required. This affects 2000A, 2310A, 2310B, 2310D, 2420A, and 2420B.</p> <p>Loop/segment 2300-REF02.</p> <p>If replacing an original claim processed in HE MMIS, then use 17-digit TCN.</p> <p>If replacing/voiding an original claim processed in legacy MMIS, insert the century code in positions 3 and 4 of the ICN and enter the 15-digit ICN.</p>
1.3	05/25/2017	Updates related to HIPAA Operating Rules requirements	Updated System Availability section