

**BCBSND, BCBSWY, DSC, and VSI  
Trading Partner Agreement Educational Items**

ANSI 4010A1 Version

**837/997, Health Care Claim & COB & Acknowledgment - DSC Educational Items** - Companion Guide items within this document pertain to all ANSI transactions conducted with the following entities: Blue Cross Blue Shield of North Dakota (BCBSND), Blue Cross Blue Shield of Wyoming (BCBSWY), The Dental Services Corporation (DSC), and ND Vision Services, Inc. (VSI). The Health Insurance Portability and Accountability Act (HIPAA) requires that as covered entities, health insurance payers comply with the Electronic Data Interchange (EDI) standards for health care as established by the Secretary of Health and Human Services. The ANSI X12N Implementation Guides have been established as the standards of compliance for electronic transactions. The implementation guides for each transaction are available electronically at www.wpc-edi.com. The items within this document are for clarification and are to accompany the execution of the Trading Partner Agreement. The information in this document is subject to change. This document supplements, but does not contradict any requirements in the ANSI X12N implementation guides.

Item No.	Loop ID - Segment Description and Element Name	Ref Desc	Plan Preferences
1	<b>Claim Models Supported</b>		We will only support the provider to payer claim model. We initially will not support the payer to payer model. Providers must submit their own secondary claims, except for Medicare and Blue on Blue, to other payers.
2	<b>Batch Transactions</b>		We will apply batch files to the system by the next working day.
3	<b>2010AA - Billing Provider Name</b>	<b>NM109</b>	Effective May 23, 2007, the National Provider Identifier (NPI) must be submitted in the NM109 (qualifier NM108 = XX) when segment is required.
4	<b>2010AA - Billing Provider Name Reference Identification</b> Segment: Situational, Element: Required	<b>REF02</b>	When submitting the NPI in NM108/NM109, Dental Service Corporation would like to receive qualifier "SY" (Social Security Number) or "EI" (Employer's Identification number) in order to correctly identify the provider. Prior to May 23, 2007, Dental Service Corporation would like to receive "G2" (Provider Commercial Number) with the pre-assigned provider's clinic number in order to correctly identify the provider.
5	<b>2010AB - Pay-to Provider Name</b>	<b>NM109</b>	Effective May 23, 2007, the National Provider Identifier (NPI) must be submitted in the NM109 (qualifier NM108 = XX) when segment is required.
6	<b>2010AB - Pay-to Provider Name Reference Identification</b> Segment: Situational, Element: Required	<b>REF02</b>	When submitting the NPI in NM108/NM109, Dental Service Corporation would like to receive qualifier "SY" (Social Security Number) or "EI" (Employer's Identification number) in order to correctly identify the provider. Prior to May 23, 2007, Dental Service Corporation would like to receive "G2" (Provider Commercial Number) the provider's pre-assigned clinic number in order to correctly identify the provider.
7	<b>2300, 2320 and 2400 - Reject Negative Values</b>	<b>CLM02, AMT02, SV102, SV104, PS102</b>	Negative values submitted in the following fields will be held and the submitter will be contacted and may result in the claim not being processed: Total Claim Charge Amount (2300 Loop, CLM02), Patient Amount Paid (2300 Loop, AMT02), Payer Paid Amount (2320 Loop, AMT02), Allowed Amount (2320 Loop, AMT02), Line Item Charge Amount (2400 Loop, SV102), Service Unit Count (2400 Loop, SV104), Total Purchased Service Amount (2300 Loop, AMT02), Purchased Service Charge Amount (2400 Loop, PS102)
8	<b>2310A - Referring Provider Name</b>	<b>NM109</b>	Effective May 23, 2007, the National Provider Identifier (NPI) must be submitted in the NM109 (qualifier NM108 = XX) when segment is required.
9	<b>2310A - Referring Provider Name Reference Identification</b> Segment: Situational, Element: Required	<b>REF02</b>	When submitting the NPI in NM108/NM109, Dental Service Corporation would like to receive qualifier "SY" (Social Security Number) or "EI" (Employer's Identification number) in order to correctly identify the provider. Prior to May 23, 2007, Dental Service Corporation would like to receive "G2" (Provider Commercial Number) with the pre-assigned provider's clinic number in order to pay claims at the correct benefit level.
10	<b>2310B - Rendering Provider Name</b>	<b>NM109</b>	To correctly process claims in our system, this segment is required if loop 2420A, NM1 segment is not filled. Effective May 23, 2007, the National Provider Identifier (NPI) must be submitted the NM109 (qualifier NM108 = XX) where NM1 segment is required.

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Item No.	Loop ID - Segment Description and Element Name	Ref Desc	Plan Preferences
11	<b>2310B - Rendering Provider Name Reference Identification</b> Segment: Situational, Element: Required	<b>REF02</b>	To correctly process claims in our system, this segment is required if loop 2420A, REF01 segment is not filled. When submitting the NPI in NM108/NM109, Dental Service Corporation would like to receive qualifier "SY" (Social Security Number) or "EI" (Employer's Identification number) in order to correctly identify the provider. Prior to May 23, 2007, Dental Service Corporation would like to receive "G2" (Provider Commercial Number) with the pre-assigned provider's clinic number in order to pay claims at the correct benefit level.
12	<b>2400 - Line Counter Monetary Amount</b> Segment: Required, Element: Required	<b>SV302</b>	Receive claims of less than \$100,000.00. Any claims greater than this amount would be returned.
13	<b>2420A - Rendering Provider Name</b>	<b>NM109</b>	To correctly process claims in our system, this segment is required if loop 2310B, NM1 segment is not filled. Effective May 23, 2007, the National Provider Identifier (NPI) must be submitted the NM109 (qualifier NM108 = XX) when segment is required.
14	<b>2420A - Rendering Provider Name Reference Identification</b> Segment: Situational, Element: Required	<b>REF02</b>	To correctly process claims in our system, this segment is required if loop 2310B, REF01 segment is not filled. When submitting the NPI in NM108/NM109, Dental Service Corporation would like to receive qualifier "SY" (Social Security Number) or "EI" (Employer's Identification number) in order to correctly identify the provider. Prior to May 23, 2007, Dental Service Corporation would like to receive "G2" (Provider Commercial Number) with the pre-assigned provider's clinic number in order to pay claims at the correct benefit level.
15	<b>None - 997 Capability</b>	<b>None</b>	ND Dental Services Corp. may reject an interchange (transmission) submitted with more than 9,999 loops
16	<b>Envelopes - Multiple Transactions within an Interchange</b>	<b>ISA, GS, GE, IEA</b>	ND Dental Services Corp. will handle multiple GS-GE's within one ISA-IEA.
17	<b>Envelopes - Envelope Segments</b>	<b>ISA, GS, ST, SE, GE, IEA</b>	ND Dental Services Corp. will edit data submitted within the envelope segments (ISA, GS, ST, SE, GE, and IEA) beyond the requirements defined in the Dental Implementation Guide. (EX. GS03 should only include the following values: 0015 - North Dakota Dental Service Corp., 0001 - North Dakota Blue Shield)
18	<b>Envelopes - Application receiver's code</b>	<b>GS03</b>	ND Dental Services Corp. may reject an interchange (transmission) that is submitted with an invalid value in GS03 (Application Receivers Code) based on the carrier definition. (EX. GS03 should only include the following values: 0015 - North Dakota Dental Service Corp., 0001 - North Dakota Blue Shield)
19	<b>All - 9999 Segments per Loop</b>	<b>All</b>	ND Dental Services Corp. may reject an interchange (transmission) submitted with more than 9,999 segments per loop.
20	<b>2300 - 5000 CLM Segments</b>	<b>CLM Segment</b>	ND Dental Services Corp. may reject and interchange (transmission) with more than 5,000 CLM segments (claims) submitted per transaction.
21	<b>2300 - Total Submitted Charges</b>	<b>CLM02</b>	Total submitted charges (CLM02) must equal the sum of the line item charge amounts (SV102)
22	<b>Envelopes - Claim or Encounter Indicator</b>	<b>BHT06</b>	Claim or Encounter Indicator (BHT06) must equal 'CH' (Chargeable).
23	<b>Currency</b>		Currency must be U.S. currency.