
Louisiana Medicaid



HIPAA 5010A General Companion Guide
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1 Introduction

This Companion Guide to the ASC X12N 5010A Implementation Guides adopted under HIPAA clarifies and specifies the data content being requested when data is transmitted electronically to Louisiana Medicaid. Transmissions based on this companion document, used in tandem with the X12N 5010A Implementation Guides, are compliant with both X12N syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N 5010A Implementation Guides 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 Implementation Guides.

1.1 Scope

The HIPAA EDI Transaction Standard Companion Guide explains the procedures necessary for Trading Partners of Louisiana Medicaid to send/transmit Electronic Data Interchange (EDI) transactions. Supported transactions for Louisiana Medicaid Bulletin Board System (BBS) are listed below:

Transaction Name Accepted by the LA Medicaid BBS	Version
Health Care Claim: Dental	ASC X12N 837-005010X224A2
Health Care Claim: Professional	ASC X12N 837-005010X222A1
Health Care Claim: Institutional	ASC X12N 837-005010X223A2
Health Care Claim Payment/ Advice	ASC X12N 835-005010X221A1
Functional Acknowledgement	ASC X12N 999
Interchange Acknowledgement	ASC X12N TA1

This Companion Guide is not intended to replace the X12N Implementation Guides; rather it is intended to be used in conjunction with them. Additionally, the Companion Guide is intended to convey information that is within the framework and structure of the X12N Implementation Guides and not to contradict or exceed them.

1.2 References

This section specifies additional documents useful to the reader.

Washington Publishing Company (WPC) Website - www.wpc-edi.com

All X12N Implementation Guides adopted for use under HIPAA and their corresponding Addenda/Errata can be downloaded from this site.

Centers for Medicare and Medicaid Services (CMS) Website-

<http://www.cms.gov/Versions5010andD0/> The website provides answers to Frequently Asked Questions, links to other HIPAA sites, and information on the law, regulations, and enforcement are located here.

1.3 Additional Information

Specific Companion guides for the 837-I, 837-P, 837-D, & 835 transactions are available for download from within our HIPAA testing service. These companion guides outline specific payer requirements for LA Medicaid.

Please register for an account to gain access to our HIPAA testing service for testing and companion guide downloads. Refer to [HIPAA Testing Service Enrollment](#).

2 Getting Started

2.1 Trading Partner Registration

This section describes how to register as an EDI trading partner with Louisiana Medicaid.

Current Electronic Claim Submitters:

Louisiana Medicaid trading partners who submit electronic claims currently in the old proprietary formats or the HIPAA 4010A1 formats, do not need to do any other registration with Louisiana Medicaid for HIPAA 5010A. Submitter numbers will remain the same. However, if an existing provider is changing Submitters (i.e. using a Clearinghouse) and needs to have their provider number linked to a different submitter ID, an EDI Contract and a Power of Attorney Form is required.

Necessary forms can be found here:

http://www.lamedicaid.com/provweb1/Provider_Enrollment/existingenrollments.htm

NEW Electronic Claim Submitters

Current providers who want to submit electronic claims on their own behalf must complete only the EDI Contract found by selecting the EDI Contract and Power of Attorney link, found above.

Current providers who want to submit electronic claims with a Submitter that is not currently registered with Louisiana Medicaid, must submit the forms found at the 21 EMC Billing Agent link below.

Necessary forms can be found here:

http://www.lamedicaid.com/provweb1/Provider_Enrollment/newenrollments.htm

2.2 HIPAA Testing and Approval Overview

This section provides a general overview of the HIPAA testing and approval process.

- Testing Enrollment
 - A provider's Software Vendor, Billing Agent or Clearinghouse must register for an account with the LA Medicaid HIPAA Testing Service.
Registration link <https://sites.edifecs.com/index.jsp?medicaidla>
- HIPAA Testing Service
 - Submitters will test transactions with a secure, web based testing program for each LA Medicaid claim type they submit.
- MMIS Parallel Testing
 - Parallel HIPAA 4010 transactions along with their corresponding 5010 transactions are compared for appropriate adjudication results.
 - Based on a successful parallel test(s), production approval for HIPAA 5010 transactions is granted.

3 Testing with the Payer

This section contains a detailed description of the testing phase.

The following information will help you enable your software vendor, billing agent or clearinghouse to become HIPAA 5010 approved. Instructions are also provided for those who do not have a software vendor, billing agent or clearinghouse.

Note: *If you currently submit claims electronically to LA Medicaid in the HIPAA 4010 format, your current method **WILL NOT be HIPAA 5010** compliant without modifications by your Software Vendor, Billing Agent or Clearinghouse. The only exception to this statement is for electronic billing of Non-Emergency Medical Transportation and Case Management claims which are exempt from HIPAA, and POS Pharmacy who will be approved through their switch vendors. All other claims are affected.*

From this point on a "Software Vendor," "Billing Agent", or "Clearinghouse" will be referred to collectively as a 'VBC'.

3.1 HIPAA Testing Service Enrollment

The first step toward your HIPAA 5010 readiness is to have your VBC register for an account with our testing service. As a provider who bills electronically, your VBC will be tasked with making your claims HIPAA 5010 ready. Therefore, the VBC must register for an account with our testing service.

(*Some providers develop their own electronic means of submitting claims to LA Medicaid. In this case the provider would be considered the VBC)

To register for an account with our HIPAA testing service, please go to the following link and sign up. <https://sites.edifecs.com/index.jsp?medicaida>

Companion guides for the 837-I, 837-P, and 837-D transactions are available for download from within the HIPAA testing service.

Our testing service is available 24-hours-a-day, 7-days-a-week.

Once your VBC has registered with our HIPAA testing service, advancement toward HIPAA 5010 readiness can begin.

In addition, LA Medicaid will communicate with all the VBCs primarily through the HIPAA testing service so register early to ensure they are getting all the information they need.

3.2 HIPAA Testing Service

Once your VBC has registered with our HIPAA testing service, access is immediately available.

The testing service is a secure web based application that requires an Internet connection and a web browser.

The testing service will have everything a VBC needs to test for HIPAA 5010 readiness with LA Medicaid. Companion Guides for the 837I, 837P, and 837D transactions and other necessary and useful documentation will be available for download from within the HIPAA testing service.

There are several testing programs in the HIPAA testing service that correspond with LA Medicaid claim types. They can be accessed from the “Public Programs” dropdown. VBCs can select and complete the appropriate testing programs for each file type that the VBC submits.

Each testing program includes several tasks that must all be performed successfully to complete HIPAA testing. The testing service provides file validation to make sure the files will be accepted into the next phase which is parallel testing.

Upon completing the HIPAA testing the VBC will begin MMIS Parallel Testing.

3.3 MMIS Parallel Testing

Please refer to the section on [Connectivity with the Payer / Communications](#) for instructions on how to gain access to our test HIPAA Bulletin Board System (BBS).

Parallel testing will compare a current HIPAA 4010 EDI file with a parallel HIPAA 5010 EDI file, both utilizing the same data. Generally, the 4010 and the 5010 EDI file should adjudicate the same.

Listed below are the Parallel testing requirements:

1. Submitter must have an active submitter ID with Louisiana Medicaid.
2. Upload a copy of a production HIPAA 4010 EDI file with the ISA15 set to “T” for test. The EDI copy must be uploaded within 7 days from the original submission to production. If your most recent production file is older than 7 days, use the most recent file submitted.
3. Upload a parallel HIPAA 5010 EDI file with the ISA15 set to “T” for test that was constructed using the same production data as the copy of the original production HIPAA 4010 EDI file. Do Not Submit a 5010 file with claims that are different from the 4010 file submitted. The HIPAA 4010 file copy should not be more than 7 days older than the original production EDI file. The adjudication results for each file will be compared to determine identical adjudication of the two files. Any discrepancies will need to be resolved between the submitter and the EDI Unit. The EDI Unit can be contacted by email LA5010@molinahealthcare.com or call 225.216.6303
4. For each file that is uploaded, two claims processing reports (CP06 & CP090) will be posted to the BBS for download.
 - The CP090 report will contain any errors/denials (*Error/denial code descriptions are available for download from within HIPAA testing service*).
 - The CP06 report will contain the detail payment information with a summary.

The reports based on the 4010 file and the 5010 file should be compared. The goal is for the HIPAA 4010 file and the 5010 to process the same.

Any discrepancies will need to be resolved with the EDI Unit. They can be contacted by email LA5010@molinahealthcare.com or call 225.216.6303

5. A member of the EDI Unit gives production approval. Approval is based on the success of a parallel test. Once approved, the submitter will be given access to the production HIPAA BBS for 5010 transactions.

4 Connectivity with the Payer / Communications

4.1 Supported Transactions

4.1.1 The HIPAA EDI BBS supports the following transactions:

Transaction Name	Version
Health Care Claim: Dental	ASC X12N 837-005010X224A2
Health Care Claim: Professional	ASC X12N 837-005010X222A1
Health Care Claim: Institutional	ASC X12N 837-005010X223A2
Health Care Claim Payment/ Advice	ASC X12N 835-005010X221A1
Functional Acknowledgement	ASC X12N 999
Interchange Acknowledgement	ASC X12N TA1

4.2 Submitter IDs & Passwords

4.2.1 New Submitter or Changing Submitter

Requests for a new submitter ID or requests to change a submitter ID must both be directed to Molina Medicaid Solutions Provider Enrollment at (225) 216-6370. Make these requests early so the submitter ID will be ready for parallel testing and production approval.

Note: A Submitter ID is required before a password can be issued for parallel testing. Refer to the section on [Trading Partner Registration](#) for obtaining a Submitter ID. The HIPAA Testing Service can be used without a LA Medicaid submitter ID, but requires a user ID and password. Parallel testing REQUIRES a LA Medicaid submitter ID and a password.

4.2.2 HIPAA Testing Service

The User ID and Password for the Louisiana Medicaid HIPAA Testing Service is created by the user at the time they register for an account with the HIPAA testing service. Please refer to the section on [HIPAA Testing Service Enrollment](#).

4.2.3 Test HIPAA Bulletin Board System (BBS) for Parallel Testing

All providers and submitters who currently send electronic claims to LA Medicaid can use their existing production Submitter IDs and passwords for the Test HIPAA BBS for parallel testing.

If you do not have a password, please contact the EDI unit by email LA5010@molinahealthcare.com or call 225.216.6303

4.2.4 Production HIPAA Bulletin Board System (BBS)

Submitter ID and Password for accessing the Production HIPAA Bulletin Board are the same as for the Test HIPAA Bulletin Board. The Production bulletin board will be updated to accept HIPAA 5010 transactions after production approval is given by the EDI unit.

4.3 HIPAA Bulletin Board Dial-up Phone Numbers

4.3.1 Test

Dial **225.927.4123** to access the test bulletin board system

To upload the following types of files to Test: Select (A) SEND FILES

- 837 Institutional
- 837 Dental
- 837 Professional
- Proprietary claims files(if applicable) for parallel testing

To download the following types of files: Select (B) RECEIVE FILES

- TA1 Interchange Acknowledgement
- 997 / 999 Functional Acknowledgement
- 835 Payment Advice
- Testing Reports (CP06 & CP090 Reports for parallel testing)

4.3.2 Production

Dial **225.927.4326** to access the production bulletin board system. (Please do not try to use the production line for testing)

To upload the following types of files to Production: Select (A) SEND FILES

- 837 Institutional
- 837 Dental
- 837 Professional

To download the following type of files: Select (B) RECEIVE FILES

- TA1 Interchange Acknowledgement
- 997 / 999 Functional Acknowledgement
- 835 Payment Advice

4.4 Communication protocol specifications

4.4.1 Dial-Up Requirements

- Windows
 - Dial-up Software that uses an asynchronous modem supporting Z-Modem protocol and a minimum baud rate of 9600 kbps
- Unix
 - Molina will accept the BLAST protocol for asynchronous transmission at 14.4, 9.6, 4.8, 2.4 and 1.2 kbps.

4.5 File Naming Conventions

This section describes how files should be named for files uploaded to the BBS

4.5.1 Production and Test File Names

In order to complete parallel testing, two files must be uploaded to the Test HIPAA BBS. One will be a copy of a production HIPAA 4010 EDI file with the same name. The other file will be a HIPAA 5010 EDI parallel file using the same data as the production copy of the HIPAA 4010 EDI file. Both files will have the same name.

The file names for test are in the table below.

Please replace the sample submitter number 4599999 with your own LA Medicaid submitter number.

Transaction.	Claim Type	Name	File Extension	Sample file name
837D	11	Adult Dental	DNA	H4599999.DNA
837D	10	Dental-EPSDT	DNE	H4599999.DNE
837P	09	Durable Medical Equip.	DME	H4599999.DME
837P	04	Physician, Pediatric Day Health Care	PHY	H4599999.PHY
837P	05	Rehabilitation	REH	H4599999.REH
837P	07	Ambulance Transportation	TRA	H4599999.TRA
837P	13	KIDMED/EPSDT	KID	H4599999.KID
837I	01 & 03	Hospital IP/OP	UB9	H4599999.UB9
837I	06	Home Health	HOM	H4599999.HOM
837I	16	Adult Day Health Care	ADC	H4599999.ADC
837I	02	LTC, ICF/DD, SNF, Hospice	LTC	H4599999.LTC

4.6 File Transmission Procedures

4.6.1 How to Connect and Login to the Louisiana EDI BBS

- To login to the Louisiana EDI BBS, submitters must first have a valid Submitter ID and Password, see [Trading Partner Registration](#)
- Configure the dialup software to dial the Louisiana EDI BBS using the appropriate phone numbers from the [Bulletin Board Dial-Up Phone Numbers](#) section.

(Please See Appendix A for screen shots of underlined items below)

- Once connected to the BBS, submitters should see the [BBS Login Screen](#) (see Appendix A for screen prints)
- Once connected to the [BBS Login Screen](#), submitters must enter a valid Submitter ID and Password. Enter a Submitter ID and press the [Enter] Key. Then type the corresponding password and press the [Enter] key.
- At this point, press the [Y] key to complete the authentication process or press the [N] key to exit.

- The [BBS Main Menu](#) should appear.

4.6.2 **How to Submit a File to the Louisiana EDI BBS**

- Login to the Louisiana EDI BBS using your Submitter ID and Password.
- At the [BBS Main Menu](#) press the [A] key to select the Send File(s) option of the Main Menu.
- The [BBS File Upload](#) screen will display
- An open dialog screen should appear. If it does not, then manually start the upload process. Consult your dial-up software documentation for details. Usually, there will be an option to upload/download through your software.
- After the file is uploaded to the BBS, the [BBS File Upload Review Y/N](#) will display.
- If you want to review the files and their edits, press the [Y] key and the [BBS File Uploaded Review Y](#) screen will display a list of uploaded files. To bypass the file review screen press the [N] key, you will be redirected back to the BBS Main Menu.

4.6.3 **How to Receive Responses and Download Files**

- Login to the BBS.
- From the [BBS Main Menu](#), press the [B] key to retrieve files. The [BBS File Download Selection Screen](#) will display.
- Select a file type to download from the [BBS File Download Selection Screen](#).
- The [BBS File Download List](#) will display a list of files available for download.
- Select the file to download. The [BBS File Download Screen Step 1 of 2](#) screen will display giving a choice to compress the files before download. Choose [Y] to compress the file or [N] to download the file uncompressed.
- The [BBS Receive File Step 2 of 2](#) screen will be displayed. A “Browse for Folder” dialog should be display on entry into the screen. Select a target location to download your file. If the dialog box is not displayed, manually start the download process. Consult you Dial-up Software documentation for details.
- After the selected file or files are downloaded, the screen will navigate back to the [BBS File Download Selection Screen](#).

4.6.4 BBS Error Codes

Below are the descriptions of all the error codes returned by the BBS for an invalid TA1

Edit #	Edit Description
0	BBS Edit - Valid File
1	TA1 Edit 001 - The Interchange Control Number in the Header and Trailer Do Not Match. The Value From the Header is Used in the Acknowledgment.
2	TA1 Edit 002 - This Standard as Noted in the Control Standards Identifier is Not Supported.
3	TA1 Edit 003 - This Version of the Controls is Not Supported
4	TA1 Edit 004 - The Segment Terminator is Invalid
5	TA1 Edit 005 - Invalid Interchange ID Qualifier for Sender
6	TA1 Edit 006 - Invalid Interchange Sender ID
7	TA1 Edit 007 - Invalid Interchange ID Qualifier for Receiver
8	TA1 Edit 008 - Invalid Interchange Receiver ID
9	TA1 Edit 009 - Unknown Interchange Receiver ID
10	TA1 Edit 010 - Invalid Authorization Information Qualifier Value
11	TA1 Edit 011 - Invalid Authorization Information Value
12	TA1 Edit 012 - Invalid Security Information Qualifier Value
13	TA1 Edit 013 - Invalid Security Information Value
14	TA1 Edit 014 - Invalid Interchange Date Value
15	TA1 Edit 015 - Invalid Interchange Time Value
16	TA1 Edit 016 - Invalid Interchange Standards Identifier Value
17	TA1 Edit 017 - Invalid Interchange Version ID Value
18	TA1 Edit 018 - Invalid Interchange Control Number Value
19	TA1 Edit 019 - Invalid Acknowledgment Requested Value
20	TA1 Edit 020 - Invalid Test Indicator Value
21	TA1 Edit 021 - Invalid Number of Included Groups Value
22	TA1 Edit 022 - Invalid Control Structure
23	TA1 Edit 023 - Improper (Premature) End-of-File (Transmission)
24	TA1 Edit 024 - Invalid Interchange Content (e.g., Invalid GS Segment)
25	TA1 Edit 025 - Duplicate Interchange Control Number
26	TA1 Edit 026 - Invalid Data Element Separator
27	TA1 Edit 027 - Invalid Component Element Separator
28	TA1 Edit 028 - Invalid Delivery Date in Deferred Delivery Request
29	TA1 Edit 029 - Invalid Delivery Time in Deferred Delivery Request
30	TA1 Edit 030 - Invalid Delivery Time Code in Deferred Delivery Request
31	TA1 Edit 031 - Invalid Grade of Service Code
90	BBS Edit - Invalid File Extension
91	BBS Edit - Invalid ISA Segment
92	BBS Edit - Invalid TA1
93	BBS Edit - Partially Received File
94	BBS Edit - More than one ST/SE Segment per file is NOT Allowed
95	BBS Edit - File Received
96	BBS Edit - Compressed File Received
97	BBS Edit - Compressed File within a Compress File
98	BBS Edit - Invalid TXN Type for File Extension
99	BBS Edit - Invalid File Naming Convention

4.6.5 Requesting an 835

Parallel files sent to the test BBS will automatically generate 835s. The 4010 parallel 837 will generate a 4010 835 based on the submitted test file data. The 5010 parallel 837 will generate a 5010 835 based on the submitted test file data. VBC s should download and evaluate the 835s.

Pharmacy submitters will automatically get a test 5010 835 posted weekly to the test BBS based on the previous weeks production data. Pharmacy submitters can access the test BBS to download their test 5010 835.

Submitters must authorize the EDI Dept to migrate from the 4010 835 to the 5010 835 in production. Please contact the EDI Unit by email LA5010@molinahealthcare.com or call 225.216.6303 when you are ready to migrate.

Alert: The change from 4010 835 to 5010 835 is mutually exclusive. The 5010 835 will replace the 4010 835. Both cannot be generated in production. Once the switch is made to the 5010 835 in production you cannot be switched back to the 4010 835.

In addition, the switch is performed at the submitter level. Therefore, all the providers who are linked to the submitter get their payment advice on a 5010 835. So, the submitter requesting the 5010 835 in production must be certain that all of their providers are prepared to handle the 5010 835, or are not concerned with receiving it.

5 Contact information

5.1 EDI Customer Service and Technical Assistance

If you have questions regarding HIPAA EDI testing and support, please contact the EDI Unit by email LA5010@molinahealthcare.com or call 225.216.6303

5.2 Provider Service

For detailed information concerning the payment of claims, please contact Molina Medicaid Solutions Provider Relations @ 225.924.5040 or 800.473.2783

For enrollment as a new electronic submitter for Louisiana Medicaid, or to change submitter numbers, please contact Molina Medicaid Solutions Provider Enrollment at 225.216.6370

6 Payer Specific Business Rules and Limitations

This information is available in the specific companion guides for the 837 P, 837 I, 873 D, & 835 transactions.

The companion guides are available for download from within the HIPAA Desk Testing Service. Refer to the section on [HIPAA Desk Testing Service Enrollment](#).

6.1 ST-SE

Only one ST-SE transaction loop is permitted per file.

7 Acknowledgements and or Reports

This section contains information and examples on any applicable payer acknowledgements

7.1 Valid EDI Delimiters for Louisiana Medicaid

Definition	ASCII	Decimal	Hexadecimal
Segment Separator	~	126	7E
Element Separator	*	42	2A
Repetition Separator	^	94	5E
Compound Element Separator	:	58	3A

7.2 TA1 Interchange Acknowledgement

The TA1 will be available on the BBS immediately after submission of an 837. Please note that LA Medicaid sends the TA1 report separate from the 999-Functional Acknowledgement.

This segment acknowledges the receipt of an X12 interchange header and trailer from a previous interchange. If the header/trailer pair was received correctly, the TA1 reflects a valid interchange, regardless of the validity of the contents of the data included inside the header/trailer envelope. The validity of the data contained within the actual transaction will be acknowledged in the 999.

TA1

Interchange Acknowledgement

Pos:	Max: 1
Not Defined - Mandatory	
Loop: N/A	Elements: 5

User Option (Usage): Required

Example: TA1*000568426*030615*0200*A*000~

Element Summary:

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
TA101	I12	Interchange Control Number <i>LA Medicaid: Will be the Interchange Control Number of the original Transaction being acknowledged.</i>	M	N0	9/9
TA102	I08	Interchange Date <i>LA Medicaid: Will be the date of the original Transaction being acknowledged. YYYYMMDD</i>	M	DT	6/6
TA103	I09	Interchange Time <i>LA Medicaid: Will be the time of the original Transaction being acknowledged. HHMM</i>	M	TM	4/4
TA104	I17	Interchange Acknowledgement Code <i>LA Medicaid: This will indicate if the envelopes are Accepted with no errors, Accepted with errors, or Rejected due to errors. See Implementation Guide for valid values.</i>	M	ID	1/1
TA105	I18	Interchange Note Code <i>LA Medicaid: This will display the error code indicating the error with the Interchange Control Structure. See Implementation Guide for valid values.</i>	M	ID	3/3

7.3 999 Functional Acknowledgement

The Functional Acknowledgement (999) transaction is used to report the results of the syntactical analysis of the functional groups of transaction sets, the 999 reports the extent to which the syntax complies with the standards for transaction sets and functional groups. The 999 is available within 24 hours of receipt of the file.

ISA

Interchange Control Header

Pos:	Max: 1
Not Defined - Mandatory	
Loop: N/A	Elements: 16

Element Summary: ISA/GS-These segments are the same as the inbound 837 with the exception of **the Sender/Receiver Codes are reversed**, as Louisiana has now become the Sender. Also, the GS01 is now 'FA'-Functional Acknowledgment, rather than 'HC'-Health Care Claim.

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
ISA01	I01	Authorization Information Qualifier LA Medicaid: '00' will be used for this element	M	ID	2/2
ISA02	I02	Authorization Information LA Medicaid: Spaces will be used	M	AN	10/10
ISA03	I03	Security Information Qualifier LA Medicaid: '00' will be used for this element	M	ID	2/2
ISA04	I04	Security Information LA Medicaid: Spaces will be used	M	AN	10/10
ISA05	I05	Interchange ID Qualifier LA Medicaid: 'ZZ' will be used for this element	M	ID	2/2
ISA06	I06	Interchange Sender ID LA Medicaid: 'LA-DHH-MEDICAID' will be used for this element	M	AN	15/15
ISA07	I05	Interchange ID Qualifier LA Medicaid: 'ZZ' will be used for this element	M	ID	2/2
ISA08	I07	Interchange Receiver ID LA Medicaid: Will be the 7 digit Molina assigned submitter ID (i.e. 450XXXX) followed by spaces	M	AN	15/15
ISA09	I08	Interchange Date LA Medicaid: The date format is YYMMDD	M	DT	6/6
ISA10	I09	Interchange Time LA Medicaid: The time format is HHMM	M	TM	4/4
ISA11	I10	Repetition Separator LA Medicaid: ^	M	ID	1/1
ISA12	I11	Interchange Control Version Number LA Medicaid: Will be 00501 for this element	M	ID	5/5
ISA13	I12	Interchange Control Number LA Medicaid: Will be identical to the interchange trailer IEA02. Will be unique for every transmission.	M	N0	9/9
ISA14	I13	Acknowledgment Requested LA Medicaid: Will be 1 for this element	M	ID	1/1
ISA15	I14	Usage Indicator LA Medicaid: T = Test Data P = Production Data	M	ID	1/1
ISA16	I15	Component Element Separator LA Medicaid: +	M		1/1

GS**Functional Group Header**

Pos:	Max: 1
Not Defined - Mandatory	
Loop: N/A	Elements: 8

Element Summary:

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
GS01	479	Functional Identifier Code <i>LA Medicaid: Will be the value 'FA' for this element</i>	M	ID	2/2
GS02	142	Application Sender's Code <i>LA Medicaid: Will be 'LA-DHH-MEDICAID' for this element</i>	M	AN	2/15
GS03	124	Application Receiver's Code <i>LA Medicaid: Will be identical to the value in ISA06</i>	M	AN	2/15
GS04	373	Date <i>LA Medicaid: The date format is CCYYMMDD</i>	M	DT	8/8
GS05	337	Time <i>LA Medicaid: The time format is HHMM</i>	M	TM	4/8
GS06	28	Group Control Number <i>LA Medicaid: Assigned and maintained by the sender</i>	M	N0	1/9
GS07	455	Responsible Agency Code <i>LA Medicaid: Will be the value X for this element</i>	M	ID	½
GS08	480	Version / Release / Industry Identifier Code <i>LA Medicaid: Will be the value of the transaction version being validated by the 999</i>	M	AN	1/12

ST**TRANSACTION SET HEADER**

Pos: 0100	Max: 1
Heading - Mandatory	
Loop: N/A	Elements: 3

Element Summary: ST-This segment identifies the start of the Transaction. The only difference between this ST and the 837 ST is the ST01 identifies the transaction as 997.

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
	143	Transaction Set Identifier Code <i>LA Medicaid: '999' will be used in the element</i>	M	ID	3/3

SE**Transaction Set Trailer**

Pos: 1000	Max: 1
Heading - Mandatory	
Loop: N/A	Elements: 2

Element Summary:

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
AK901	715	Functional Group Acknowledge Code	M	ID	1/1
AK902	97	Number of Transaction Sets Included	M	N0	1/6

GE

Functional Group Trailer

Pos:	Max: 1
Not Defined - Mandatory	
Loop: N/A	Elements: 2

Element Summary:

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
GE01	97	Number of Transaction Sets Included <i>LA Medicaid: Number of transactions sets included</i>	M	N0	1/6
GE02	28	Group Control Number <i>LA Medicaid: Will be identical to the value in GS06</i>	M	N0	1/9

IEA

Interchange Control Trailer

Pos:	Max: 1
Not Defined - Mandatory	
Loop: N/A	Elements: 2

Element Summary:

<u>Ref</u>	<u>Id</u>	<u>Element Name</u>	<u>Req</u>	<u>Type</u>	<u>Min/Max</u>
IEA01	I16	Number of Included Functional Groups <i>LA Medicaid: Number of included functional groups</i>	M	N0	1/5
IEA02	I12	Interchange Control Number <i>LA Medicaid: Will be identical to the value in ISA13</i>	M	N0	9/9

8 Appendix A – BBS Screen Shots

8.1 BBS Login Screen

Screen Description: This screen allows a Submitter to login to the Louisiana EDI BBS.

```
Wildcat! Interactive Net Server (c) 1998-2002 Santronics Software, Inc.
Registration number: 09-3184 v5.6.450 (Nov 14 2002) Node: 2
Connected with Local. Ansi detected.

You are connected to Louisiana EDI BBS:
      Node: 2
      Version: 1.1
      Baud Rate: Local          (must be >= 9600)
      Protocol: No default      (must be ZMODEM)

Enter Trading Parter ID: 4509999

Enter Password: [*****] ]
```

Once you have logged in to the BBS the following message will be displayed. Press **[Y]** to continue or **[N]** to logoff.

```
Press [Y] to continue or [N] to logoff... █
```

Once authentication is complete, the BBS will navigate to the [BBS Main Menu](#).

8.2 BBS Main Menu

Screen Description: The Louisiana EDI BBS Main Menu is the main entry point of the BBS.



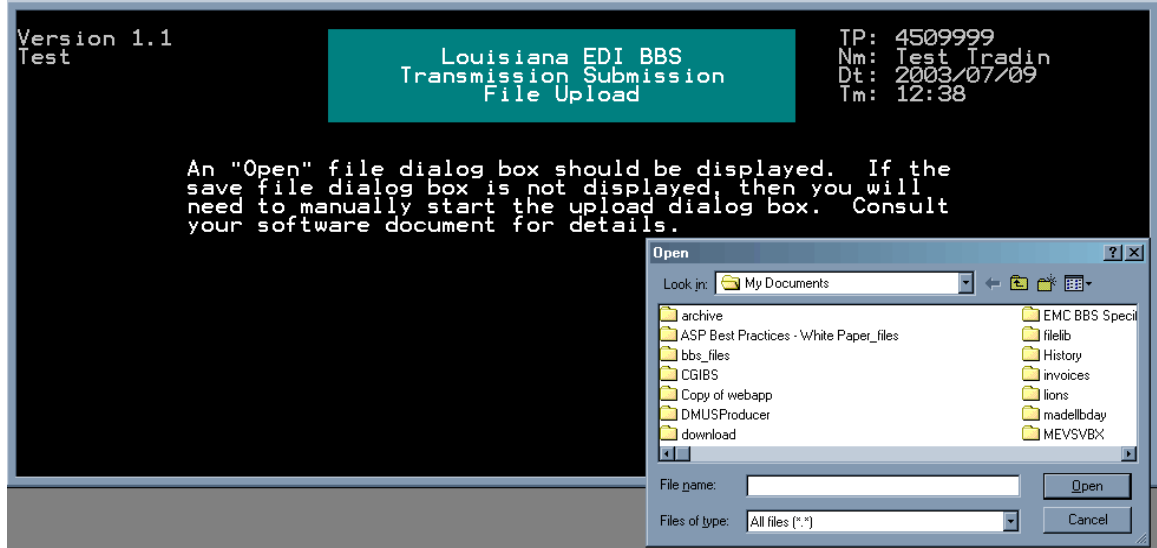
Screen Options

Option	Name	Description
A	Send File(s)	This option navigates to the File Upload Dialog.
B	Receive File(s)	This option navigates to the Transmission Retrieval screen, where Submitters can download response files from the Louisiana EDI BBS
Q	Logoff	This option allows a Submitter to logoff from the Louisiana EDI BBS.

Note: In the upper left hand corner of the screen, the version number and region appears. Before attempting to upload claims, verify that you are in the correct region.

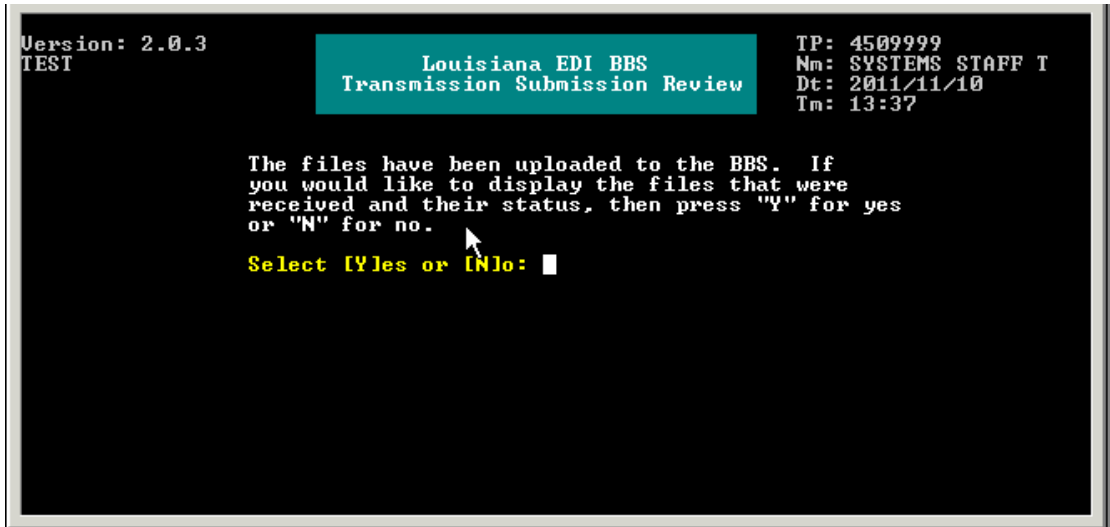
8.3 BBS File Upload

Screen Description: The Transmission Submission File Upload Dialog allows users to upload a file to the Louisiana EDI BBS. Once a Submitter navigates to the screen, an Open File dialog screen should be displayed allowing a file to be uploaded. If the Open File dialog screen does not display, then the upload process must be started manually. Consult the dialup software for details.



8.4 BBS File Upload Review Y/N

Screen Description: The File Upload Review dialog screen allows Submitters to choose whether or not to review the files they have submitted and any edits that the file received.



Screen Options

Option	Name	Description
Y	Yes	This option navigates to the Louisiana BBS File Upload Review.
N	No	This option navigates to the Louisiana EDI BBS Main Menu.

8.5 BBS File Uploaded Review Y

Screen Description: This screen displays the files that were uploaded to the Louisiana EDI BBS. Once this screen is displayed press the [ENTER] key to navigate to the Louisiana EDI BBS Main Menu.



8.6 BBS File Download Selection Screen

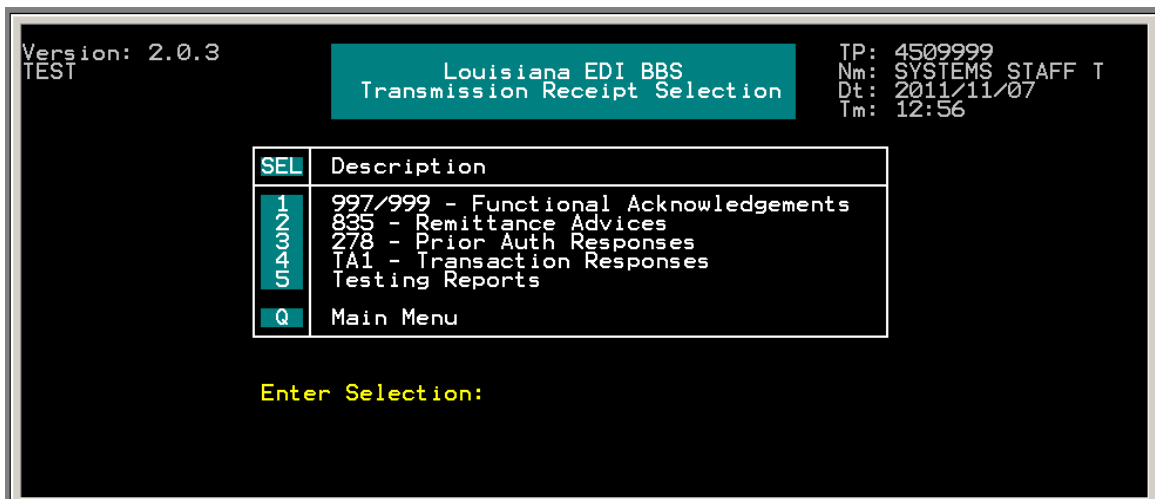
Screen Description: This screen allows Submitters to navigate to the File Download areas where the Responses can be downloaded.

Note: This screen differs depending on the Region. An image for each region is displayed below.

Screen Sample - **Production**



Screen Sample – **Test**



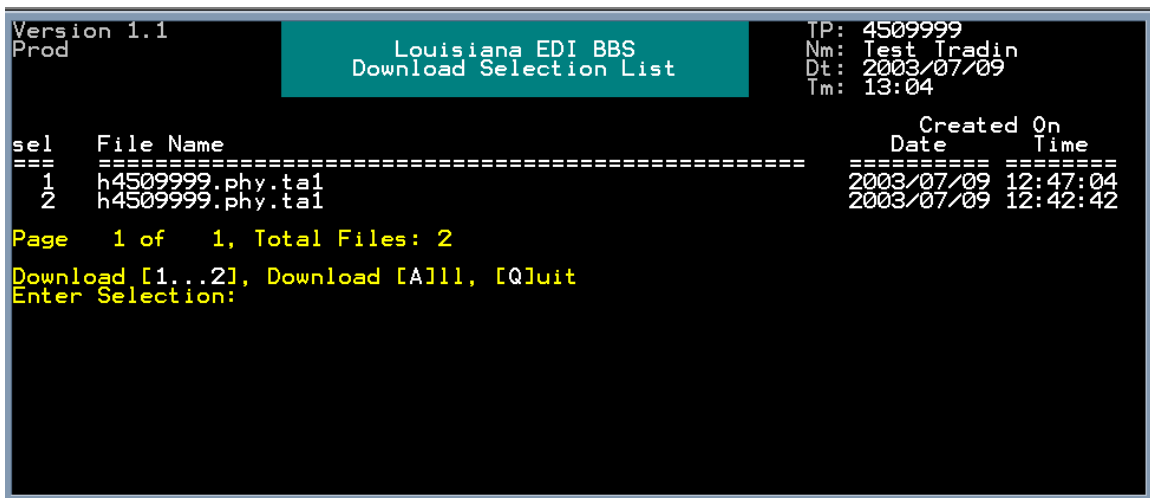
Screen Options

Option	Name	Description
1	997/999 – Functional Acknowledgements	This option navigates to the File download screen where Submitters can download 997s for 4010 test files or 999 response for 5010 test files from the Louisiana EDI BBS.
2	835 – Remittance Advice	This option navigates to the File Download screen where Submitters can download 835 response files from the Louisiana EDI BBS.
3	278 – Prior Auth Responses	This option navigates to the File Download where submitters can download 278 response files from the Louisiana EDI BBS.

4	TA1 – Responses	This option navigates to the File Download screen where Submitters can download TA1 response files from the Louisiana EDI BBS.
5	Testing Reports (Test Only)	This option navigates to the File Download screen where Submitters can download Test Reports from the Louisiana EDI BBS.
Q	Quit	This option navigates to the Louisiana EDI BBS Main Menu.

8.7 BBS File Download List

Screen Description: This screen allows users to view and download of Response Files that reside on the Louisiana EDI BBS. Since there can be multiple files stored for a Submitter on the BBS, the files can be listed on several pages. The screen allows Submitters to scroll up or down pages of file listings.

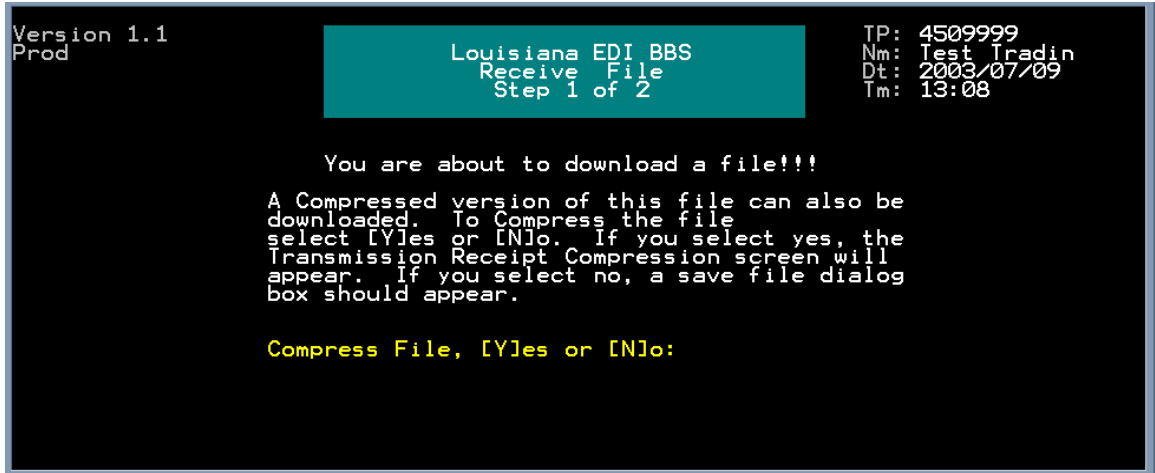


Screen Options

Option	Name	Description
P	Previous (Page)	This option scrolls to the previous page of files.
N	Next (Page)	This option scrolls to the next page of files.
1 thru 10	Download (file) [1...10]	This option allows Submitters to download a single file. After a user selects this option a Compress Dialog screen will be displayed allowing a user to compress the file before downloading.
A	Download All	This option allows a user to download all of the files from the particular download area. The files will be compressed and stored in a compressed file archive.
Q	Quit	Navigates to the BBS File Download Selection Screen.

8.8 BBS File Download Screen Step 1 of 2

Screen Description: This screen allows users to choose whether the file to be downloaded is to be compressed. Once the selection is made, the Louisiana EDI BBS Receive File Step 2 of 2 screen will start the download process.

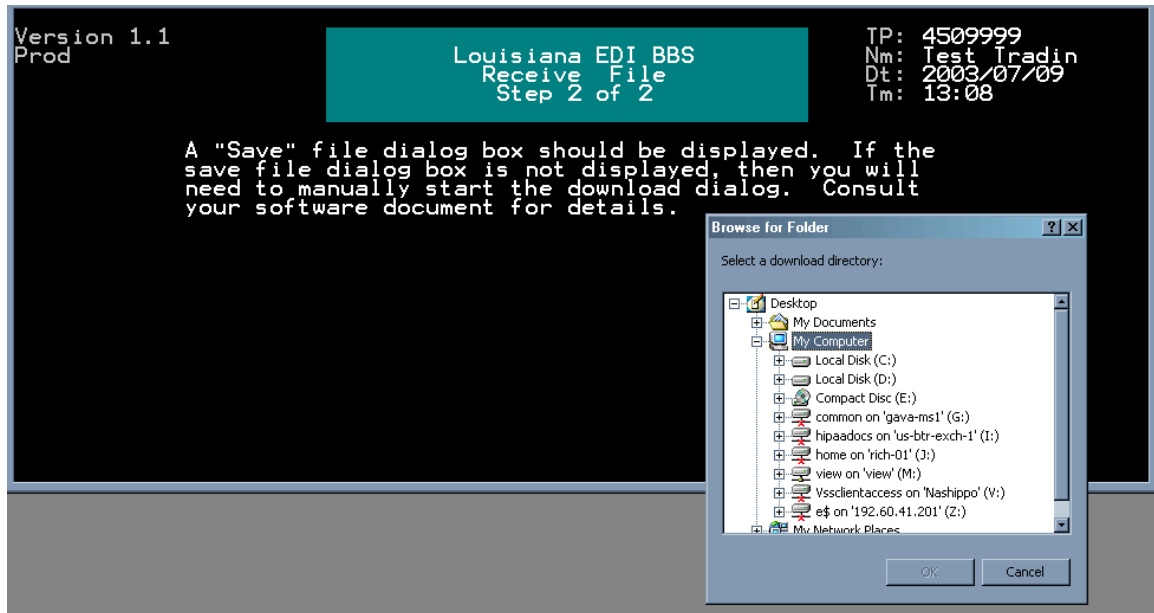


Screen Options

Option	Name	Description
Y	Yes	Compress the selected file or files before downloading.
N	No	Do not compress the selected file or files before downloading.

8.9 BBS Receive File Step 2 of 2

Screen Description: This screen allows users to select where to download the selected file or files to their computer. On entry into this screen, a "Browse for Folder" dialog appears. Some dialup software many require that the downloading of a file be manually started.



Screen Options

Option	Name	Description
P	Previous (Page)	This option scrolls to the previous page of files.
N	Next (Page)	This option scrolls to the next page of files.
1 thru 10	Download (file) [1...10]	This option allows a Submitter to download a single file. After a user selects this option a Compress Dialog screen will be displayed allowing a user to compress the file before downloading.
A	Download All	This option allows a user to download all of the files from the particular download area. The files will be compressed and stored in a compressed file archive.
Q	Quit	Navigates to the Louisiana EDI BBS Main Menu.