
Magellan Complete Care of Virginia

eBusiness User Companion Guide

JUNE 2017

Disclosure Statement

The information in this document is subject to change. Changes will be posted on the Magellan Complete Care of Virginia website located at www.mccofva.com.

Preface

The Health Insurance Portability and Accountability Act (HIPAA) requires covered entities, including health insurance payers, in the United States to comply with the EDI standards for health care as defined in the ANSI Version 5010 Implementation Guides.

The following information is intended to serve as a companion document to the HIPAA ANSI Version 5010 Implementation Guides for the following transactions: ASC X12N 837P, ASC X12N 837I, and ASC X12N 835. The use of this document is solely for the purpose of clarification on electronic transactions with MCCVA.

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1. INTRODUCTION

The Health Insurance Portability and Accountability Act (HIPAA) requires covered entities, including health insurance payers, in the United States to comply with the Electronic Data Interchange (EDI) standards for health care as defined in the ANSI Version 5010 Implementation Guides when exchanging health care information.

1.1 Purpose

The eBusiness user companion guide is intended to provide information regarding the exchange of health care information with Magellan Complete Care of Virginia (MCCVA) and will assist providers/vendors with setup and utilization of EDI tools and services. The following pages offer detailed information on electronic claims submission, reports, electronic remittance advices (ERA), www.mccofva.com, and other data exchange information.

1.2 References

In addition to this guide, users may need to refer to:

- ANSI Version 5010 Implementation Guides which are available on the Washington Publishing website, www.wpc-edi.com. These guides contain the standards and specifications used to exchange health information electronically.

2. GETTING STARTED

Providers may submit claims directly, without the assistance of a third-party, or they may use a vendor such as a clearinghouse or billing agency. All claim files must be formatted in the ANSI-837 Version 5010 format.

2.1 Electronic Filing Options

Direct Submission: Any provider using software capable of creating an ANSI-837 claim may file electronic claims directly to MCCVA. Providers should direct questions regarding the capabilities of software to the software vendor.

Indirect Submission: Providers may utilize a third party vendor such as a clearinghouse or billing agency to submit claims. An approved vendor list is available upon request detailing those trading EDI data with MCCVA.

2.2 Trading Partner Registration

An EDI Trading Partner is any entity (provider, billing service, software vendor, etc.) that transmits electronic data to or receives electronic data from another entity. Any entity trading EDI data with MCCVA must first be set up as a valid trading partner.

While MCCVA will accept HIPAA compliant transactions from any covered entity, HIPAA security mandates require established procedures in order to secure access to data. As a result, MCCVA has a process by which we establish an Electronic Trading Partner relationship:

- First, an Electronic Submitter Profile Form must be submitted.
- eBusiness Enrollment then issues a confirmation letter containing the trading partner ID and the user ID, password and filename required to submit transactions through the MCCVA Secure File Gateway (SFG).

All providers and vendors who choose to submit electronic claims directly must complete the Electronic Profile Form.

An Electronic Profile form must also be completed in the following situations:

- Provider who currently submits through vendor now wants to submit directly.
- When a submitter needs to request access to SFG for a new user due to staffing changes.

Providers changing Tax ID or name should contact eBusiness at 800-424-4524 for the appropriate paperwork.

MCCVA electronic profile forms are available by visiting our website at www.mccofva.com or by contacting eBusiness at 1-800-424-4524.

The completed forms may be emailed to

EDI_Tech_Support@mccofva.com

3. TESTING WITH THE PAYER

For ANSI format and business scenario testing, please contact eBusiness at 1-800-424-4524.

4. CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

MCCVA Secure File Gateway (SFG)

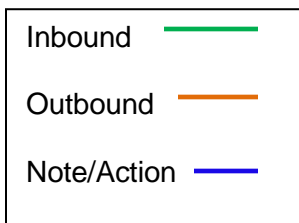
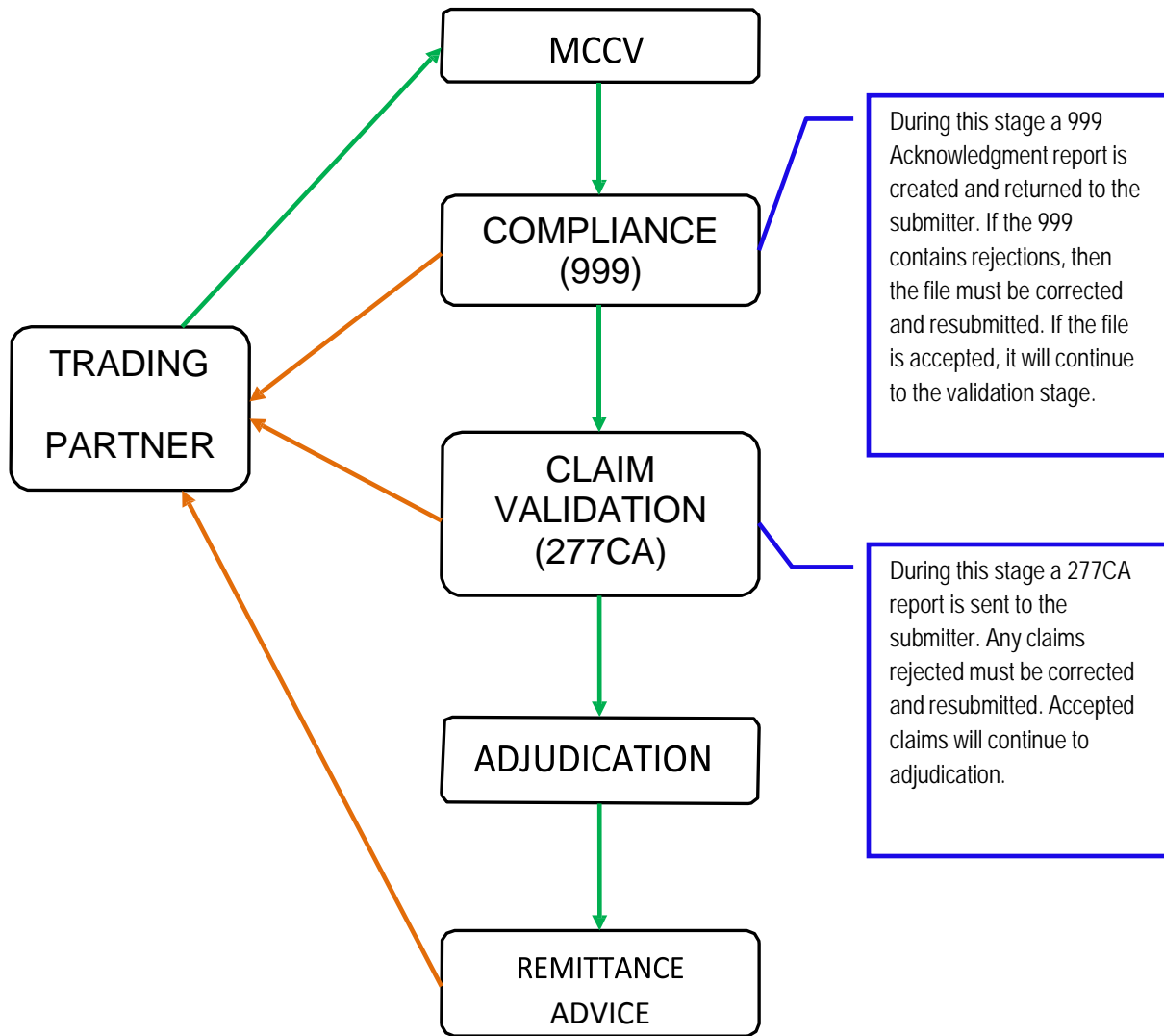
Users can submit electronic claims and download electronic reports using the following secure managed file transfer protocols: HTTPS and SFTP.

- HTTPS Website – Using the MCCVA Secure File Gateway (SFG), users can submit electronic claims and download reports using their web browser. No special software or hardware is required. See section [4.2 Transmission Administrative Procedures](#) for assistance with MCCVA Secure File Gateway.
- SFTP - SFG allows users to automate submitting electronic claims and downloading electronic reports using their own secure FTP client. See section [4.4 Communication Protocol Specifications](#) of this guide for specifics.

MCCVA will work with any vendor or provider that would like to submit electronic claims. All new submitters must complete enrollment procedures before filing claims electronically. For additional information see section [2.2 Trading Partner Registration](#) of this guide or contact the eBusiness Service Center at 800-424-4524, Monday through Thursday 8 a.m. to 6:00 p.m. (EST) and Friday 9 a.m. to 6:00 p.m. (EST).

Note: MCCVA does not charge a fee for processing electronic transactions.

4.1 EDI Claim Process Flow



4.2 Transmission Administrative Procedures

Once Trading Partner registration is complete and a user id and password is obtained, users may transmit EDI claims to MCCVA using the MCCVA Secure File Gateway (SFG). Those who do not use SFTP protocols may connect to SFG using their web browser.

For assistance with SFG, click on the topic you would like to view below.

[Signing into MCCVA File Gateway](#)

[Search Function](#)

[Upload file to](#)

[MCCVA](#)

[Download file from MCCVA](#)

[Change password](#)

[Sign Out](#)

Signing into MCCVA Secure File Gateway (SFG)

The MCCVA Secure File Gateway (SFG) is located at

<https://mccofva-mftweb.sharedhealth.com>

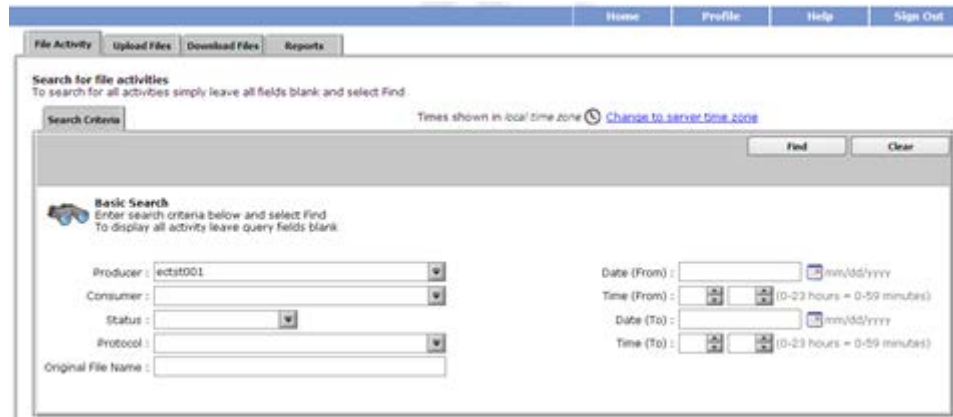
Sign in using the ID and password from your confirmation letter.



The image shows a web browser window titled "Please sign in". Inside the window, there are two input fields: "User ID:" and "Password:". Below these fields is a "Sign In" button.

Search Function

When you first login to MCCVA Secure File Gateway (SFG), you will be directed to the “Search Criteria” page where you can search for files that you’ve submitted to MCCVA. When you submit a file, you are the producer. In the “Producer” drop down box, select your user id. You can use the additional fields to narrow your search.



Upload file to MCCVA

To upload a file, select the “Upload Files” tab at the top of the page. In the “Mailbox Path” drop-down, select your “Inbox.” (Do not choose any other option or your files will not be sent to MCCVA.)



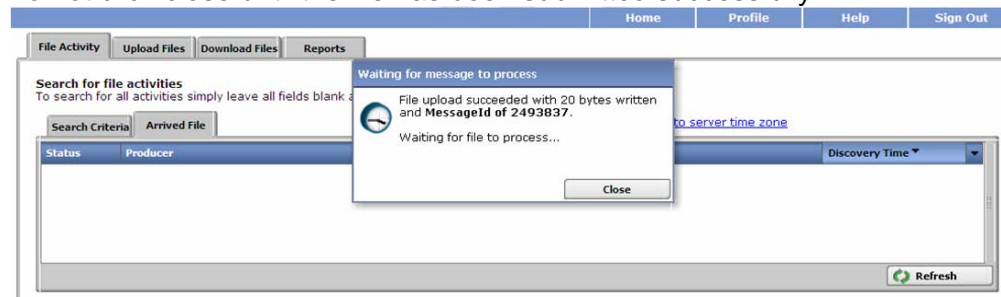
In the “File:” field, click "Browse" and locate the file that you want to send to MCCVA.



Once you have selected the file you want to upload, click the “Send” button.
 (If your filename does not match the *MAILBOX.S12* naming convention, you can change your filename by entering a new one into the “Rename File to:” field.)



Wait for the "Waiting for messages to process" message to display “File upload succeeded with x bytes written and MessageID of xxxxxxx.”
 Do not click close until the file has been submitted successfully.



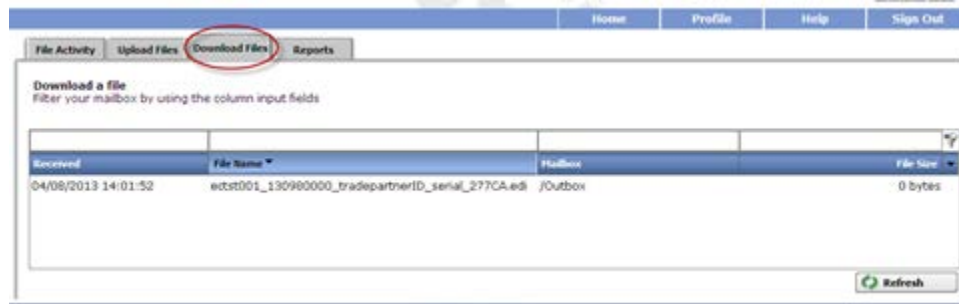
After files have been submitted successfully, they will appear under the “Arrived File” tab.
 (You may need to select “Search Criteria” tab, and search for submitted files to refresh the data.)



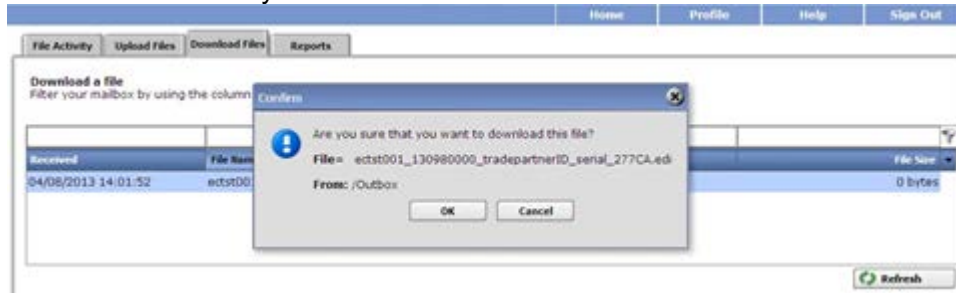
Downloading a file from MCCVA

To download a file from SFG, click on the “Download File” tab at the top left side of the page. In the frame you will see a listing of your files to download. Click on the name of the file that you want to download.

IMPORTANT: You should receive 2 reports for every claim file that is successfully submitted to MCCVA, a 999 Acknowledgement report and a 277CA Claim Acknowledgment. For more information on reports, see section [8. ACKNOWLEDGEMENTS AND REPORTS](#).

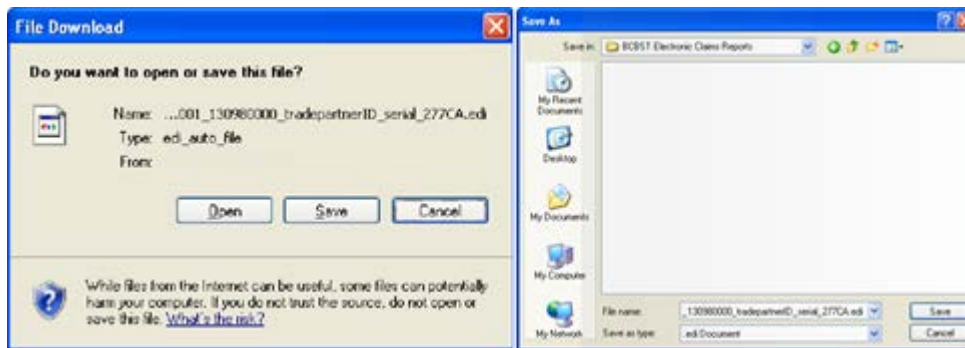


Click “OK” to confirm your download.



A “File Download” box will appear. Click “Save”.

Browse to the destination on your computer where you would like to save the file. Click “Save”.



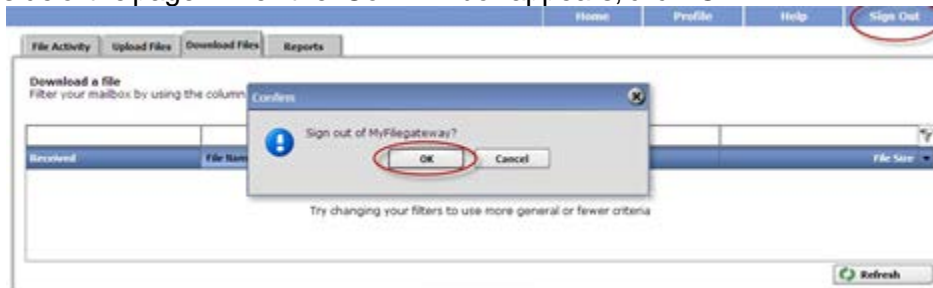
Change Password

To change your password, click on the "Profile" tab at the top right hand side of the page. Then click on the "Password" tab at the top left hand side. You will need to enter your current password and then type your new password twice. Click "Save" when complete.



Sign Out

When your file transfers are complete, click the "Sign Out" tab at the top right hand side of the page. When the "Confirm" box appears, click "OK".



4.3 Re-Transmission Procedure

Submitters can retransmit files at their discretion; however, we strongly suggest submitters review their 999 acknowledgement reports for compliance errors prior to resubmission. Re-transmission of accepted claims could result in rejections for duplicate claims on the 277CA report. Any other rejected claims should be corrected and resubmitted immediately to ensure timely filing.

4.4 Communication Protocol Specifications

HTTPS Website - <https://mccofva-mftweb.sharedhealth.com>

SFTP Server - mccofva-mftsftp.sharedhealth.com

SFTP Connection Setup:

Address : mccofva-mftsftp.sharedhealth.com

Inbound Port: 1022

Current Authentication:
Password

Mailbox Directory Structure:
-/Inbox
-/Outbox

We currently only support password authentication.

4.5 Passwords

Passwords expire every 45 days and must be changed using the MCCVA File Gateway website. See the [Change Password](#) section for specific instructions.

Passwords must be at least 8 characters long and are required to contain a numeral, capital and lowercase letter, and at least one of the following characters: !, @, #, \$, %, ^, &, or *.

5. CONTACT INFORMATION

For Questions About	Contact	Telephone Number Fax Number E-mail Address Hours of Operation
<p>Technical Support – EDI Connectivity, format specifications, electronic claims submission and/or claim acknowledgement reports, electronic remittance advice, EFT, or any additional technical questions or assistance.</p>	<p>eBusiness Service Center</p>	<p>800-424-4524 EDI_Tech_Support@mccofva.com Mon-Thurs: 8 a.m. to 6:00 p.m. (EST) Fri: 9 a.m. to 6:00 p.m. (EST)</p>

6. CONTROL SEGMENTS/ENVELOPES

Interchange Control (ISA/IEA) and Function Group (GS/GE) envelopes must be used as described in the national implementation guides. MCCVA's expectations for inbound ISA & GS and a description of data elements are detailed in this section.

6.1 ISA-IEA

ISA - Interchange Control Header (Inbound)

Loop ID	Reference	Name	Codes	Notes/Comments
ISA		Interchange Control Header		
	ISA01	Authorization Information Qualifier	00	Always 00
	ISA02	Authorization Information		This element must be filled with spaces.
	ISA03	Security Information Qualifier	00	Always 00
	ISA04	Security Information		This element must be filled with spaces.
	ISA05	Interchange ID Qualifier	ZZ	
	ISA06	Interchange Sender ID		Trading Partner Agreement ID
	ISA07	Interchange ID Qualifier	ZZ	
	ISA08	Interchange Receiver ID	MCCVA	Always MCCVA
	ISA09	Interchange Date		The date format is YYMMDD.
	ISA10	Interchange Time		The time format is HHMM.
	ISA11	Repetition Separator		This value must be different than the data element separator, component element separator, and the segment terminator
	ISA12	Interchange Control Version Number	00501	
	ISA13	Interchange Control Number		This must be unique for each submitted interchange.
	ISA14	Acknowledgment Requested	0 or 1	0 -- No Interchange Acknowledgment Requested 1-- Interchange Acknowledgment Requested (TA1)
	ISA15	Interchange Usage Indicator	P or T	P-Production Data T-Test Data
	ISA16	Component Element Separator		This value must be different than the data element separator and the segment terminator

6.2 GS-GE

GS – Functional Group Header (Inbound)

Loop ID	Reference	Name	Codes	Notes/Comments
GS		Functional Group Header		
	GS01	Functional Identifier Code	HC	837 Transactions
	GS02	Application Sender's Code		Trading Partner Agreement ID; must match ISA06
	GS03	Application Receiver's Code	MCCVA	Always MCCVA
	GS04	Group Creation Date		Date expressed as CCYYMMDD where CC represents the first two digits of the calendar year.
	GS05	Group Creation Time		The format is HHMM.
	GS06	Group Control Number		This must be unique.
	GS07	Responsible Agency Code	X	Accredited Standards Committee X12
	GS08	Version / Release / Industry Identifier Code		Must match TP agreement form.

7. PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

7.1 File naming convention

When submitting files electronically, the file type must be “.S12” and the transaction filename should comply with the following naming convention:

MAILBOX_NAME.S12

MAILBOX_NAME corresponds to the actual mailbox name assigned to the trading partner. The mailbox name is returned to the trading partner in the confirmation letter.

The only characters allowed within a filename are letters, numbers, and underscores.

7.2 Payer ID

The MCCVA electronic payer ID is MCCVA.

7.3 Submitting Corrected Claims Electronically

Providers are encouraged to share the following guidelines with their electronic vendor to assist in the submission of Corrected Claims to Magellan Complete Care of Virginia in the ANSI-837 Version 5010 Professional and Institutional electronic formats.

ANSI-837 Version 5010 (Professional & Institutional)

Both items listed below must be completed for an ANSI-837 Version 5010 claim to be considered a corrected claim.

1. The claim frequency type code [Loop 2300 | CLM5-3] must indicate one of the following qualifier codes:

- "7" – REPLACEMENT (Replacement of Prior Claim)
- "8" – VOID (Void/Cancel of Prior Claim)

2. The original reference number, or ICN/DCN, [Loop 2300 | REF02] must include the original claim number issued to the claim being corrected. The original claim number can be found on the remittance advice.

- REF01 must contain "F8"
- REF02 must contain the original MCCVA claim number
Example: REF*F8*ESV123456789~

3. In the free-form claim notes [Loop 2300 | NTE02], include the explanation for the corrected/replacement claim.

- NTE01 must contain "ADD"
- NTE02 must contain the free-form note indicating the reason for the corrected replacement claim.
Example: NTE*ADD*CORRECTED PROCEDURE CODE ON LINE 3

7.4 Submitting Secondary Claims Electronically

To ensure that secondary/tertiary claims are paid appropriately, the coordination of benefits (COB) information must be submitted in compliance with ANSI Version 5010 standards.

COB information may include the following:

LOOP ID 2320 - OTHER SUBSCRIBER INFORMATION
LOOP ID 2330A - OTHER SUBSCRIBER NAME
LOOP ID 2330B - OTHER PAYER NAME
LOOP ID 2330C - OTHER PAYER REFERRING PROVIDER
LOOP ID 2330D - OTHER PAYER RENDERING PROVIDER
LOOP ID 2330E - OTHER PAYER SERVICE FACILITYLOCATION
LOOP ID 2330F - OTHER PAYER SUPERVISING PROVIDER
LOOP ID 2430 - LINE ADJUDICATION INFORMATION

Minimum requirements for submitting electronic secondary claims include the following:

Payer Responsibility Sequence Number Code [Loop 2320 | SBR01]

Submit code identifying the payer's sequence of responsibility for payment. When more than one payer exists, a unique value must be used for each payer.

Example Sequence Number Codes:

- P - Primary
- S - Secondary
- T - Tertiary

Payer Paid Amount [Loop ID 2320 | AMT02]

Submit primary payer's total paid amount.

CAS Adjustment Information [Loop 2320 or 2430 | CAS]

Submit other payer claim adjustment (CAS) group and reason codes with the corresponding monetary amounts.

Example CAS Group Codes:

- CO - Contractual Obligations
- PR - Patient Responsibility

Example Claim Adjustment Reason Codes (CARC):

- 1 - Deductible
- 2 - Coinsurance

Claim Check or Remittance Date [Loop 2330B | DTP (573)]

Submit other payer check or remittance date.

Additional Helpful Information

- The primary payer paid amount represents the actual paid amount of the other payer (located on the 835 ERA, loop 2100 | CLP04).
- Claim adjustment (CAS) segments explain any variance between the paid amount and the total charge. CAS information may apply to the entire claim (located in the 835 ERA, loop 2100 | CAS) or each line item (located in the 835 ERA, loop 2110 | CAS).
- A complete list of claim adjustment group and reason codes can be found at www.wpc-edi.com.
- Amounts must balance (Payer payment = Sum of payment amounts – Sum of adjustment amounts).
- MCCVA strongly recommends sending claim payment information at the line level if that data is available.

8. ACKNOWLEDGEMENT AND REPORTS

MCCVA will return a 999 Implementation Acknowledgment report to submitters to indicate if the file was accepted and compliant. Entities submitting electronic claims to MCCVA are responsible for reviewing acknowledgement reports, correcting errors, and resubmitting claims when necessary.

Additionally, MCCVA returns a 277CA Claim Acknowledgment report indicating individual claims that have been rejected. It is vital that submitters and providers review these reports to determine if all claims have been accepted. Any rejected claims must be corrected and resubmitted.

All reports can be retrieved electronically from the submitter's electronic mailbox using the MCCVA Secure File Gateway. For more information on how to retrieve files, see section [4. CONNECTIVITY WITH THE PAYER/COMMUNICATIONS](#).

8.1 Implementation Acknowledgement For Health Care Insurance (999)

The 999 report is generated for all transactions received with a valid interchange. It informs the submitter that the file arrived at MCCVA and includes information about the syntactical quality of the file and implementation guide compliance. **This report does not serve as proof of timely filing.**

The 999 is not easily readable in its native format and may require the use of translating software to assist users in understanding rejections.

Below is an example of a 999 Acknowledgement report for a compliant file.

```
ISA*00*      *00*      *ZZ*MCCVA      *ZZ*123456789 *121228*1440*^*00501*000056543*0*P*
GS*FA*MCCVA*123456789*20121228*1440*56543*X*005010X231A1
ST*999*1    *005010X231A1
AK1*HC*56543*005010X222A1
AK2*837*000000001*005010X222A1
IK5*A
AK9*A*1*1*1 SE*6*1
GE*1*56543
IEA*1*000056543
```

How can I tell if my file was accepted or rejected?

- A Transaction Set Acknowledgement Code (IK501) of “A” indicates that the batch transaction passed compliance and was accepted. For this Transaction Set Acknowledgement Code (IK501) the Functional Group Acknowledgment Code (AK901) will have a value of “A”-Accepted.

```
IK5*A
AK9*A*1*1*1
```

- A Transaction Set Acknowledgement Code (IK501) of “E” indicates that the batch transaction set was partially accepted; the claims or inquiries that passed compliance were accepted for processing. For this Transaction Set Acknowledgement Code (IK501) the Functional Group Acknowledgement Code (AK901) will have a value either of “E” – Accepted, but errors were noted or “P” – Partially Accepted, At Least One Transaction Set Was rejected.

```
IK5*E
AK9*E*1*1*1
or
AK9*P*1*1*1
```

- A Transaction Set Acknowledgement Code (IK501) of “R” indicates that the entire batch transaction was rejected as non-compliant. For this Transaction Set Acknowledgement Code (IK501) the Functional Group Acknowledgement Code (AK901) will have a value of “R” – Rejected.

```
IK5*R
AK9*R*1*1*1
```

*****A rejection on the 999 Acknowledgment indicates that one or more of your claims are not in a compliant format. The claim(s) will not be considered received and must be corrected and resubmitted.**

8.2 Health Care Claim Acknowledgement (277CA)

The ANSI Version 5010 Health Care Claim Acknowledgment (277CA) is a business application level acknowledgment for the ANSI Version 5010 Health Care Claim (837) transaction(s). This report acknowledges the validity and acceptability of claims prior to adjudication and is performed to quickly inform providers of claims containing incorrectly formatted data or missing information. Because the report is returned to the submitter within moments of submission, claims can be corrected and resubmitted more quickly.

The 277CA acknowledges receipt of claims and contains an electronic control number (ECTN) that can be used as proof of timely filing. The 277CA is not easily readable in its native format. Many offices use their own software or third-party services (i.e. clearinghouses) to assist in translating the 277CA report.

Below is an example of a 277CA Claims Acknowledgement.

```

ISA*00*      *00*      *ZZ*MCCVA      *ZZ*123456789      *121228*0946*^*00501*236300098*0*P*:
GS*HN*MCCVA*123456789*20121228*0946*236300098*X*005010X214
ST*277*0001*005010X214
BHT*0085*08*123630200-236300098*20121228*09460956*TH
HL*1**20*1
NM1*PR*2*MAGELLAN COMPLETE CARE OF VIRGINIA*****46*MCCVA
TRN*1*12363020000098000056544
DTP*050*D8*20121228
DTP*009*D8*20121228
HL*2*1*21*1
NM1*41*2*John Doe*****46*1234567890
TRN*2*56544X1
STC*A1:19:PR*20121228*WQ*426
QTY*90*2
AMT*YU*426HL*3*2*19*1
NM1*85*1*John Doe*K***XX*1234567890
TRN*1*0
STC*A1:19:PR**WQ*426
QTY*QA*2
AMT*YU*426HL*4*3*PT
NM1*QC*1*DOE*SALLY*J***MI*ESV123456789
TRN*2*RED137233
STC*A2:20:PR*20121228*WQ*60
REF*1K*12345P67890
DTP*472*RD8*20120919-20120919
HL*5*3*PT
NM1*QC*1*DOE*JANE*L***MI*ESV123456789
TRN*2*RED138610
STC*A2:20:PR*20121228*WQ*366
REF*1K*12345P67890
DTP*472*RD8*20121109-20121109
SE*32*0001
GE*1*236300098
IEA*1*236300098

```

How do I read the 277CA report?

All 277CA Acknowledgments are returned to the entity who submitted the claim transaction. If you submit claims using a vendor, that clearinghouse or billing agency will translate the reports and make them available to you. If you submit directly, then you are responsible for translating your own reports.

9. TRADING PARTNER AGREEMENTS

Trading Partner Agreement Forms are available upon request.
Please contact eBusiness at 800-424-4524.

10. TRANSACTION SPECIFIC INFORMATION

MCCVA accepts of ANSI Version 5010 electronic transactions

10.1 Health Care Claim: Professional, Institutional

The ANSI-837 Version 5010 transactions are used to electronically transfer and exchange health care claim billing and encounter information for the following:

- ANSI Version 5010 837P — (Professional Claims).
- ANSI Version 5010 837I — (Institutional Claims)

Example of 837P (Professional Claim)

```

ISA*00*      *00*      *ZZ*123456789  *ZZ*MCCVA  *130116*0146*A*00501*000056817*1*P*:
GS*HC*123456789*MCCVA*20130116*0146*56817*X*005010X222A1
ST*837*000000001*005010X222A1
BHT*0019*00*56817X1*20130116*0146*CH
NM1*41*2*SUBMITTER*****46*123456789
PER*IC*JOE CONTACT*TE*123456789
NM1*40*2*MAGELLAN COMPLETE CARE OF VIRGINIA*****46*MCCVA
HL*1**20*1
NM1*85*1*JOE SMITH, M.D.***XX*0123456789
N3*ADDRESS
N4*CITY*ST*12345 REF*EI*123456789
HL*2*1*22*0 SBR*P*18*93949*****MC
NM1*IL*1*MARY*MEMBER***MI*ABC123456789
N3*ADDRESS
N4*CITY*ST*123456789
DMG*D8*19990721*M
NM1*PR*2*MCC OF VA *****PI*MCCVA
N3*1 CAMERON HILL STE 0002
N4*CHATTANOOGA*TN*374020002
CLM*ADV20314*52***11:B:7*Y*A*Y*Y
HI*BK:2809 LX*1
SV1*HC:80053:QW::::CMP-322000*28*UN*1***1
DTP*472*D8*20110103
REF*6R*257993
SE*32*000000001
GE*1*56817
IEA*1*000056817
    
```

11. ELECTRONIC PAYMENT AND ADVICE

11.1 Electronic Funds Transfer (EFT)

The EFT process will allow you to have your payments electronically transferred to your bank account.

What Are The Benefits?

Payments deposited earlier

A more secure payment process

Reduced administrative costs

Less paper storage

How Do I Get Started?

Magellan Complete Care of Virginia is pleased to be part of a new CAQH solution that enables providers to enroll in electronic funds transfer (EFT) and electronic remittance advice (ERA) with multiple payers through a single online process at no cost to the provider. The CAQH EFT/ERA enrollment tool offers providers a single point of entry for enrollment in electronic payments with multiple payers, including Magellan Complete Care of Virginia. The CAQH solution will facilitate compliance with the 2014 EFT/ERA mandate under the Affordable Care Act, eliminate administrative redundancies and create significant time and cost savings. Visit <https://solutions.caqh.org> to sign up today.

11.2 Electronic Remittance Advice

MCCVA provides Electronic Remittance Advices (ERAs) in the ANSI Version 5010 format. ERA advices are not easily readable while in ANSI Version 5010 format. Contact your software vendor if you would like to know if your software can translate or automatically post account information from the ERA.

Below is an example of an ANSI-835 Version 5010 electronic remittance advice.

```

ISA*00*      *00*      *ZZ*MCCVA   *ZZ*1234567   *130128*0657*^*00501*003338278*0*P*:
GS*HP*MCCVA*1234567*20130128*0037*1*X*005010X221A1
ST*835*0001
BPR*I*15*C*CHK*****20130130
TRN*1*19012345*1999999999
DTM*405*20130130
N1*PR*MCCVA
N3*1 Cameron Hill Circle
N4*Chattanooga*TN*37402
PER*BL*eBusiness Service
Center*EM*ecommm_techsupport@mccva.com*TE*8004244524*EX*7
N1*PE*John Doe*K*XX*1234567890
N3*111 First Avenue
N4*Knoxville*TN*37916
REF*TJ*621231123
LX*0
CLP*160123*22*-135*0*0*12*ESVZT0CD7G66*11*1
NM1*QC*1*SMITH*MATT*JM
NM1*IL*1*SMITH*KIM****MI*ESV123456789
NM1*74*1***E***C*999631123
REF*CE*NETWORK
REF*1L*115598
DTM*050*20121205
SVC*HC:92014*-135*0**0**-1
DTM*472*20121109
CAS*PR*22*-135
REF*6R*1
CLP*160321*2*135*15**12*ESVHT9CD7G01*11*1
NM1*QC*1*SMITH*MATT*M
NM1*IL*1*SMITH*KIM****MI*ESV123456789
NM1*74*1***E***C*912333456
MOA***MA67
REF*F8*ESVPT5CD4G66
REF*CE*NETWORK
REF*1L*115598
DTM*050*20121205
AMT*AU*135
SVC*HC:92014*135*15**1
DTM*472*20121109
CAS*OA*23*120
AMT*B6*135
SE*39*0001
GE*1*1
IEA*1*003338278

```

ERA files can be downloaded using the MCCVA Secure File Gateway (SFG). For more information on using SFG, please see section [4. CONNECTIVITY WITH THE PAYER/COMMUNICATIONS](#).

Each ERA is placed in the SFG mailbox using the following file naming convention:

Example: 123456789_ESV_201204100101_14152256_835.edi

123456789 = Trading Partner ID

ESV = Line of business designation (internal use only)

20120410 = File creation date (CCYYMMDD format)

14152256 = File creation time (HHMMSSDD format)

835 = Transaction type (e.g., 835 remittance advice)

.edi = ERA file extension

Providers should contact their vendor prior to requesting ERAs to ensure their vendor can support translation of the ERA. Detailed ANSI Version 5010 specifications for the ERA are available at www.wpc-edi.com.

Appendices

1. Checklist
(Please see Appendix 1 page 33)
2. Business Scenarios
No Business Scenarios at this time.
3. Transmission Examples
No additional transmission examples at this time.
4. Frequently Asked Questions
No FAQs at this time
5. Change Summary
No changes at this time

Appendix 1

Implementation Checklist

To ensure that you have followed the necessary steps as a Trading Partner of MCCVA, use the checklist below:

- Read, become familiar with, and share the Trading Partner Agreement with your legal advisor and staff before you begin transmitting claims to determine if you will be able to meet the conditions and requirements. (Refer to **9. Trading Partner Agreement**)
- Share the eBusiness User Companion Guide with your internal programming staff or systems vendor.
- Decide upon the electronic claim submission method-- direct or indirect submission. Verify with your clearinghouse or software vendor that their system or software is capable of submitting claims in ANSI-837 Version 5010. (Refer to **2.1 Electronic Filing Options**)
- Select your communication protocol from the listing in **4. Connectivity With The Payer.**
- Understand the process that occurs when submitting claims files to our adjudication system by reviewing **4.1 Process Flows.** You also need to review **8. Acknowledgement and Reports** to understand the reports you will be responsible for reviewing after each claim submission.
- Discuss with your software vendor, clearinghouse, or billing service, their ability to retrieve and interpret the MCCVA response reports from the ANSI-837 claim submission. (Refer to **8. Acknowledgement and Reports**)
- Complete the applicable Trading Partner Agreement in **2.2 Trading Partner Registration.** This is required prior to being able to exchange EDI data with MCCVA.
- Once trading partner registration is complete, a confirmation of registration will be mailed. Direct submitters will receive a user ID and password for SFG and should become familiar with **4. Connectivity With The Payer.**