

Electronic Data Interchange (EDI) EDI Claim Confirmation Report

Recent upgrades to Blue Shield of California's electronic data interchange (EDI) system offer improved reporting to claims trading partners.

Learn more about improved reporting for claims trading partners who submit claims directly to Blue Shield of California using EDI transactions.

- Improved EDI Claim Confirmation Report offers more information in an easy-to-read format
- New EDI Claim Confirmation Report includes:
 - File level detail reports
 - Interchange level detail reports
 - Transaction level detail reports
 - Claim level detail reports

Upgrades to Blue Shield's electronic data interchange system offers our direct EDI easy to read, detailed EDI claim confirmation reports.

Detailed EDI Claim Confirmation Report is Available

Blue Shield of California upgraded its Electronic Data Interchange (EDI) system in April, 2010.

Trading partners who submit electronic claims directly to Blue Shield of California using EDI will receive an improved EDI Claim Confirmation report. The new report replaces the former EDI Submitter Report.

Added benefits for the EDI Claim Confirmation report include:

- Easier to read format
- More detailed information (e.g.: claim destination)
- Break-out of accepted and rejected claims for easier identification
- Identification of claims that need to be routed to Anthem Blue Cross of California for processing

Blue Shield will offer additional EDI reporting functionality beginning August 2010:

- Real-time system monitoring
- Expanded self-service capabilities
- Best-in-class tools for peak performance

Understanding EDI Claim Confirmation Report

EDI Claim Confirmation reports generate immediately after electronic claims are received.

Reports are posted in the submitters FTP folder.

In addition to reporting the total number of claims and the total billed amount received by Blue Shield, Claim Confirmation reports provide detailed breakdowns of the number and billed amount of claims that were both accepted and rejected.

Date Range: 1/4/2010 12:00:00 AM - 2/17/2010 12:00:00 PM

File Name : ABC637P02012010175712_1810.837

	# Interchanges	# Batches (ST/SE)	Accepted Claims		Rejected Claims		Received Claims	
			Count	Total	Count	Total	Count	Total
Report Totals:	1	5	5	\$3,511.01	0	\$0.00	5	\$3,511.01

1

2

3

4

5

6

1. Name file was submitted under
2. Report Totals for the file
3. Number of Interchanges
4. Number of Transaction Sets (ST-SE)
5. Total number of accepted claims & dollar amount
6. Total number of rejected claims & dollar amount
7. Total number of received claims & dollar amount

File Level Detail

EDI Claim Confirmation Report - File Level Detail

Detailed breakdowns for each file transmitted are found in the File Level Detail.

Transmission ID		137317							
File Name		ABC837P02012010175712_1810.837							
Receipt Date		01/08/2010 17:00:00							
Format Types		837PX12							
		# Interchanges	# Batches (ST/SE)	Accepted Claims		Rejected Claims		Received Claims	
				Count	Total	Count	Total	Count	Total
File Totals:		1	5	5	\$3,511.01	0	\$0.00	5	\$3,511.01

1. Transmission ID set by Blue Shield
2. Name file was submitted under
3. Date & time file was received by Blue Shield
4. Transaction Type identified
5. Total number of files received
6. Number of interchanges in file
7. Number of transaction sets in file (ST/SE)
8. Total number of accepted claims & dollar amount
9. Total number of rejected claims & dollar amount
10. Total number of received claims & dollar amount

EDI Claim Confirmation Report – Interchange Detail

Detailed breakdowns of the number of Interchanges submitted in a file are identified in the Interchange Level Detail

Interchange ID	117217							
Control Number	900225226							
Sender ID	TRADINGPARTNER							
Interchange Date & Time	01/02/2010 17:57:00							
Usage Indicator	Test Data							
			Accepted Claims		Rejected Claims		Received Claims	
	# Batches (ST/SE)	Count	Total	Count	Total	Count	Total	
Interchange Totals:	5	5	\$3,511.01	0	\$0.00	5	\$3,511.01	

1. Interchange ID Number
2. Control Number (ISA13)
3. Sender ID (ISA06)
4. Interchange Date & Time (ISA09)
5. Number of transaction sets in file (ST/SE)
6. Total number of accepted claims & dollar amount
7. Total number of rejected claims & dollar amount
8. Total number of received claims & dollar amount

EDI Claim Confirmation Report – Transaction Detail

Detailed breakdowns of the number of transactions submitted in a file are identified in the Transaction Level Detail

		①	②		③		④	
		Transaction Control #	Accepted Claims		Rejected Claims		Received Claims	
			Count	Total	Count	Total	Count	Total
Transaction Totals:		000000001	1	\$600.00	0	\$0.00	1	\$600.00
		⑤ Provider #	Accepted Claims		Rejected Claims		Received Claims	
			Count	Total	Count	Total	Count	Total
Provider		NATIONWIDE MEDICAL INC	1	⑥ \$600.00	0	⑦ \$0.00	1	⑧ \$600.00
Provider #		1234567890						

1. Transaction Control Number
2. Total number of accepted claims & dollar amount
3. Total number of rejected claims & dollar amount
4. Total number of received claims & dollar amount
5. Provider name & number
6. Total number of accepted claims & dollar amount
7. Total number of rejected claims & dollar amount
8. Total number of received claims & dollar amount

EDI Claim Confirmation Report – Claim Level Detail

Claim level detail is broken out separately for both accepted & rejected claims.

1. Provider name & number
2. Interchange number
3. Transaction control number
4. Patient Information
5. Claim information
6. Error ID number
7. Error Description

Accepted Claims

Provider	NATIONWIDE MEDICAL INC	Interchange	900225226			
Provider #	1234567890	Transaction Control #	000000001			
Patient Name	Subscriber ID	Patient Acct	Stmnt Begin Dt	Stmnt End Dt	Total Charge	Claim Destination
WOOD JACQUELYN	R12345678	871147	10/14/2009	10/14/2009	\$600.00	RTMS

Error ID	Error Value	Error Description
918128	CLM*871147*600.00***12>>1*Y*A*Y*Y*B~PWW*OZ*AA~REF*F8*09365212873~REF*D9*0809365012730~NTE*ADD*	This is where the error description will be found

Rejected Claims - The following claims have not been accepted. These claims must be corrected and resubmitted.

Provider	QUACH HUNG T	Interchange	120000012			
Provider #	5566998877	Transaction Control #	000000001			
Patient Name	Subscriber ID	Patient Acct	Stmnt Begin Dt	Stmnt End Dt	Total Charge	Claim Destination
JAMES BRYSON	J000002222	000300026366	08/22/2009	08/22/2009	\$600.00	RTMS

Error ID	Error Value	Error Description
918128	CLM*000300026366*600***24>>1*Y*A*Y*Y*B*****P~□DTP*435*D8*20090822~□REF*F5*N~REF*EA*CP2IPM5D6YF0~□	This is where the error description will be found
8454236	EA	Element REF03 (Description) is present. This Element is marked as 'Excluded' and therefore must not be present in the data. Segment REF is defined in the guideline at position 180. This error was detected at Segment Count: 24 Element Count: 3 Characters: 964 through 966

Naming convention for the Claims Confirmation Report.

Claims Confirmation Report Naming Convention

With the introduction of our new Claims Confirmation Report comes new naming conventions. This report will be generated in pdf format.

<<SubmitterID>>_PRClaimConfirmation_<<Sequence#>>CCYYMMDD_HHMMSS.pdf

Easier identification of TA1 report with new file naming convention.

TA1 Report File Naming Convention Changes

Along with the updates of our EDI system, we have changed the file naming convention of the TA1 Report for easier identification.

Prior to the new EDI system, TA1 reports were named exactly the same as a 997 report:

997_SubmitterName_PROF_DDHHMMSS.997

997_SubmitterName_INST_DDHHMMSS.997

In order to provide clarification on the type of file being sent we have changed the file naming convention as follows:

TA1_SubmitterName_PROF_DDHHMMSS.TA1

TA1_SubmitterName_INST_DDHHMMSS.TA1

Electronic Data Interchange (EDI)

Electronic Claims Confirmation Reports

Blue Shield of California is committed to making it easier for our business partners to do business with us electronically. 2010 upgrades to our EDI systems are designed to help Blue Shield of California better meet the demands of trading partners and providers who either now support or are in the process of preparing to support real-time claims submission, processing and payment.

Our current state-of-the-art EDI system is widely used by payers across the country to support high volume exchanges for both batch and real-time electronic transactions.

If you have further questions about EDI reports or would like to sign up to exchange EDI transactions directly with Blue Shield of California, please contact the EDI Help Desk.

Email: edi_bsc@blueshieldca.com

Phone: 800-480-1221

Fax: 530-351-6150