

---

# 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

## Standard Companion Guide (CG) Transaction Information

Effective January 1, 2023

IEHP Instructions related to Implementation Guides (IG) based

On X12 Version 005010X223A2  
Health Care Claim: Professional (837)

Companion Guide Version Number: 1. 0  
2023

This document Copyright © 2023 by Inland Empire Health Plan (IEHP) . All rights reserved. It may be freely redistributed in its entirety provided that this copyright notice is not removed. It may not be sold for profit or used in commercial documents without the written permission of the copyright holder. This document is provided “as is” without any express or implied warranty. Note that the copyright on the underlying ASC X12 Standards is held by IEHP on behalf of ASC X12.

2023 © Companion Guide copyright by Inland Empire Health

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### Introduction

The Purpose of the Companion Guide:

This document will outline a definitive statement of what Submitters must provide in their ANSI ASC X12N 837I Health Care Claims files.

This document does not outline the technical interface environment, including connectivity requirements and protocols.

This document is to describe and provide you with specific Loops, Segments and Data Elements that are required to exchange X12N 837I transactions with IEHP and which are specific to IEHP.

The Transaction Instruction component of this companion guide must be used in conjunction with an associated ASC X12 TR3. The instructions in this companion guide are not intended to be stand-alone requirements documents. This companion guide conforms to all the requirements of any associated ASC X12 TR3's and is in conformance with ASC X12's Fair Use and Copyright statements.

### Definitions:

<b>Loop ID</b>	The Implementation Guide's identifier for a data loop within a transaction; the data loop consists of specific segments as identified in the HIPAA ANSI standard.
<b>Segment ID</b>	The Implementation Guide's identifier for a data segment.
<b>Element ID</b>	The Implementation Guide's identifier for a data element within a segment.
<b>Element Name</b>	A data element name as shown in the Implementation Guide. When the industry name differs from the Data Element Dictionary name, the more descriptive industry name is used.
<b>Element Definition / Length</b>	How the data element is defined in the Implementation Guide. For ISA and IEA Segments only, fields are of fixed lengths and are present whether or not they are populated. For this reason, field lengths are provided in this column after element definitions.

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

<b>Valid Values</b>	The valid values from the Implementation Guide that are used by IEHP.
<b>Definition/Format</b>	Definitions of valid values used by IEHP and additional information about IEHP data element requirements.

### **Intended Use**

You will see changes to the IEHP 837 Claims Companion Guide (CG) however, we would like to stress there is no change in how you complete your 837 files.

Per the X12 organization which oversees the X12 837 transaction data, elements which are in both the Companion Guide (CG) and 837 Implementation Guide (IG) had to be removed from the Companion Guide (CG) and will be reflected only in the Implementation Guide (IG).

For example, the Billing Provider address data at Loop ID 2300 Segment 2010AA was removed from the Companion Guide (CG) but is still reflected in the Implementation Guide (IG) and is required.

Implementation Guides (IG) / TR3 available for purchase from the X12 website at <https://x12.org>.

### **File Size Limitations**

ISA/ IEA transaction sets should not exceed 5,000 claims.

### **Test File Location**

Submitter ID/ 5010/Misdirect/Test/Outbound

### **Production Location**

Submitter ID/5010/Misdirect/Outbound

### **Image Location**

Submitter ID /5010/Misdirect/Images-

Claims that were sent to IEHP as paper claims, the accompanying TIF files are named in the REF\*D9 segment of the claim.

### **Contact Information**

For further questions regarding claims submissions, please email [edispecialist@iehp.org](mailto:edispecialist@iehp.org).

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### Implementation

The below instructions are expected to be used in parallel with the Technical Report Type 3 (TR3) Implementation Guide (IG). The table does not represent all of the fields necessary for a successful transaction. The following loops and segments are elements that IEHP would like you to pay special attention to when creating this electronic transaction.

### ISA Segment - Interchange Control Header

Ref Des.	Name	Code/Definition	Length
ISA01	Authorization Information Qualifier	No Authorization Sent "00"	2/2
ISA02	Authorization Information	(Filled with spaces)	10/10
ISA03	Security Information Qualifier	No Security Information "00"	2/2
ISA04	Security Information	(Filled with Spaces)	10/10
ISA05	Interchange ID Qualifier (Sender)	Mutually Defined "ZZ"	2/2
ISA06	Interchange Sender ID	IEHP Sender ID "00303"	15/15
ISA07	Interchange ID Qualifier (Receiver)	Mutually Defined "ZZ"	2/2
ISA08	Interchange Receiver ID	IPA's 5 Digit Payer ID	15/15
ISA11	Repetition Separator	Carat "^" Repetition Separator	1/1
ISA12	Interchange Control Version Number	00501 Version	5/5
ISA13	Interchange Control Number	Must be identical to IEA02	9/9
ISA14	Acknowledgment Requested	1 = Interchange acknowledgment Requested (TA1).	1/1
ISA15	Interchange Usage Indicator	T = Test, P = Production	1/1
ISA16	Component Element Separator	Component Element Terminator Colon ":"	1/1

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### GS Segment - Functional Group Header

Ref Desc	Name	Code/Definition	Length
GS01	Functional Identifier Code	Health Care Claim "HC"	2/2
GS02	Application Sender's Code	IEHP Sender ID "00303"	2/15
GS03	Application Receiver's Code	IPA's 5 Digit Payer ID	2/15
GS06	Group Control Number	<p>Must be unique within a single transmission that is, within a single ISA to IEA enveloping structure.</p> <p>GS06 should be unique within all transmission over a period to be determined by the Sender.</p>	1/9

### BHT – Beginning of Hierarchical Transaction

Ref Desc	Name	Code/Definition	Length
BHT06	Transaction Type Code	Charging "CH"	2/2

### Loop 1000A- NM1- Submitter Name Information

Ref Desc	Name	Code/Definition	Length
NM101	Entity Identifier Code	41=Submitter	2/3
NM102	Entity Type Qualifier	2= Non-Person Entity	1/1
NM103	Name Last or Organization Name	IEHP	1/60
NM109	Sender Primary Identifier Check ID List	IEHP Sender ID "00303"	2/80

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### Loop 1000A -PER- Submitter EDI Contact Information

Ref Desc	Name	Code/Definition	Length
PER03	Communication Number Qualifier	“EM” Electronic Mail	2/2
PER04	Communication Number	Email Address “edi@iehp.org”	2/2

### Loop 1000B -NM1- Receiver Name Information

Ref Desc	Name	Code/Definition	Length
NM102	Entity Type Qualifier	Non-Person Entity “2”	1/1
NM103	Name Last or Organization Name	IPA’s Name	1/60
NM109	Identification Code	IPA’s 5 Digit Payer ID	2/80

### Loop 2010AA -NM1- Billing Provider Name Information

Ref Des.	Name	Code/Definition	Length
NM108	Identification Code Qualifier	National Provider Identifier (NPI) “XX”	1/2
NM109	Billing Provider Identifier	Billing Provider Identifier (NPI)	2/80

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### Loop 2010AA-N4- Billing Provider City, State, Zip Code Information

Ref Des.	Name	Code/Definition	Length
N403	Postal Code	If the last (4) digits are not available, IEHP will populate with “9998”	2/30

### Loop 2010BA –NM1- Subscriber Name Information

Ref Des.	Name	Code/Definition	Length
NM108	Subscriber ID Qualifier	MI = Member Identification Number	1/2
NM109	Identification Code	IEHP-14-digit IEHP ID, Client Identification Number (CIN) or the Medicare Beneficiary Identifier (MBI) (MBI is for Dual Choice members only)	2/80

### Loop 2010BB -NM1- Payer Name

Ref Des.	Name	Code/Definition	Length
NM103	Payer Name	IPA’s Name	1 /60
NM109	Payer Identifier	IPA’s Payer ID	2/8

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### Loop 2300 - DTP Segment – Repricer Received Date

Ref Des.	Name	Code/Definition	Length
DTP01	Date/Time Qualifier	Received “050”	3/3
DTP02	Date Time Period Format Qualifier	D8=CCYYMMDD	1/35
DTP03	Date Time Period	The date the claim was received by IEHP	1/35

### Loop 2300 -REF- Claim Identifier for Transmission Intermediaries

Ref Des.	Name	Code/Definition	Length
REF01	Reference Identification Qualifier	Original Reference Number “D9”	2/3
REF02	Payer Claim Control Number	The DCN that was submitted on claim	1/50

### Loop 2300 – NTE – Claim Note

Ref Des.	Name	Code/Definition	Length
NTE01	Note Reference Code	ADD	3/3
NTE02	Description	IEHP MISDIRECT	1/80

---

## 17. IEHP MISDIRECTED OUTBOUND PROFESSIONAL CLAIMS COMPANION GUIDE

---

### Reference

**IEHP's website where the EDI manual and other resources are located:**

<https://ww3.iehp.org/en/providers/provider-manuals>

X12 Implementation guides (TR3) can be purchased from this site:

<https://x12.org>

Workgroup for Electronic Data Interchange in Healthcare:

<http://www.wedi.org>

### Contact Information:

**EDI Department Group Email Address:**

[EDISpecialist@iehp.org](mailto:EDISpecialist@iehp.org)