



Provider Enrollment for EDI Services

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DISCLAIMER

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- This presentation is not intended to represent legal advice.
- The content is point-in-time information, which is subject to revision.
- If you have questions regarding specific information shared during this presentation, please send them to info@x12.org
- Visit www.x12.org for additional details about X12



ABOUT X12

- Established by the American National Standards Institute (ANSI) more than 35 years ago
- Develops, establishes and maintains Electronic Data Interchange (EDI) standards, technical reports type 3 (TR3) as well as Extensible Markup Language (XML) schemas which drive business processes globally
- X12 membership includes providers, technologists, and business process experts across all industries which range from health care insurance, transportation, finance, logistics, supply chain management and other industries
- For more information about what we do and how you can become a member, visit us at www.x12.org

ABOUT 006020X305 (838)

- Our purpose for the standardized exchange is to eliminate any challenges with redundancies
 - Reduce costs for Provider Electronic Data Interchange (EDI) Enrollment,
 - Potential administrative cost savings with EDI; standards have been developed and work effectively when implemented across all organizations
 - Replace the current manual processes which streamlines EDI Enrollment requests and responses
 - Today, the enrollment process used in EDI is proprietary, manual and varies across all organizations
 - Manual processes slow down or cause downstream problems and
 - Adversely impact business operations for the healthcare industry trading partners

ABOUT 006020X305 (838) CONTINUED

- Standard information and requirements for Enrollments
 - Facilitate a smooth transaction, uniformity for implementation is critical
- Opportunities for improvement, automating the enrollment processes allows for
 - Expediting the processes which standardizes and
 - Reduces number of potential errors
 - Increases trading partners satisfaction with efficiency and minimize manual rework

VALUE PROPOSITION

- Standardization
 - Leverages existing standardization efforts currently identified by the federal and other state mandated regulatory initiatives
 - Scalability, greater amounts of data and information can be exchanged efficiently and expeditiously
 - Storage, EDI transactions reduce or even eliminate physical storage
- Error Reduction
- Simplified Updates, on-going updates and enrollment modifications for providers will be managed electronically
- Reduction in Paperwork
 - Reduced resource requirements that support multiple manual processes currently in place



BUSINESS USAGE

- 838 006020X305 TR3 version supports trading partner, EDI vendors, clearinghouses and may include:
 - Individual providers, clinicians, groups of individuals,
 - Labs, pharma,
 - Institutions, facilities, hospitals,
 - NPI eligible and atypical providers
 - Health plans and payers,
 - Health Information Exchange (HIE), Health Insurance Exchange (HIX),
 - Property and Casualty Payers and associated entities
 - Agents, for example clearinghouses, billing services and vendors
- 838 006020X305 TR3 version is designed to also support the data necessary for a payer to initiate the adjudication of an EDI enrollment
 - Communicates the status of the process back to the submitter
 - Supports enrollment in all provider and payer transactions

GENERAL BUSINESS USAGE

- Enrollment request and response identified four parties, entities:
 - Payer-entity being asked to take action for the EDI transaction relationship and
 - Identified in the transaction when the payer is the receiver or
 - Identified in the transaction when the payer is not the receiver
 - Provider-entity that initiates the action for the EDI transactions relationship with a payer

GENERAL BUSINESS USAGE CONTINUED

Enrollment request and response identified four parties, entities:

- Receiver-entity that is receiving the action request or response to the action request
 - Receiver may be a payer or
 - Receiver may be a business associate of either the payer or provider for example, clearinghouse or vendor
- Submitter-entity that sends the action request and receives the response/answer to take the action request
 - Submitter may be a provider or
 - Submitter may be a business associate of either the payer or provider for example, clearinghouse or vendor

GENERAL BUSINESS USAGE CONTINUED

- Other entities or locations identified:
 - Provider Authorized Agent-a person who is authorized to enter EDI relationships with intermediaries and payers
 - Financial Institution-a provider's financial institution for receipt of Electronic Funds Transfers (EFTs)
 - Physical Address-physical address of the provider when not the same as the provider's mailing address



GENERAL BUSINESS USAGE CONTINUED

- Other entities or locations identified:
 - Requesting Provider Address on File-response, the payer or a receiver supply a corrected provider address when the address for the provider is in the payer's infrastructure is different than the address reported in the request
 - Provider Software Vendor-request will identify the vendor of software, version of the software and product name generating, communicating or consuming the requested EDI transaction
 - Information is present only when the provider uses commercial software to support related transaction and
 - Payer requires information for on-boarding purposes

WORKFLOW

- Multiple requests can be sent in a single file
 - Each enrollment request must be uniquely identified by a trace number
 - Each transaction can be received, acted upon and traced independently
 - Each party/entity must ensure they assign a unique transaction ID between parties
 - Facilitation point to point communication
 - Each request transaction sent will contain the sender's unique trace ID and
 - Each response will contain the request sender's unique trace ID and
 - Receiver's unique trace ID

WORKFLOW CONTINUED

- Multiple requests can be sent in a single file and
 - Point to Point sender/receiver trace IDs and
 - Transaction requires an end to end set of unique trace IDs, for example
 - Provider trace ID sent to the enrolling payer and
 - Payer trace ID sent back to the Provider independent of the number of intermediaries involved



Requests

- Request is a provider application to add, change, verify or delete EDI enrollment with a payer
 - Responses will be at the request level and
 - Each request will have at least 1 response returned
- Request is capable of requesting EDI or EFT transactions in test and/or production infrastructures

Four types of actions possible:

- Add-use to request a new service
- Change-use to modify details of an existing service, for example:
 - Changing bank accounts or
 - Banks for EFT
 - Changing sender/receiver identifiers
 - Changing infrastructures from test to production of existing enrollment record
- Delete-use to cancel an existing service
- Verify-use to confirm current status of a provider and
 - Their associated enrollment transaction information

Responses

- Is a status from the receiver to sender on the status of the request
 - Each response will correspond to a single request and
 - Each request will have at least 1 response returned

Responses continued

- This 838 TR3 supports a variety of responses:
 - An acknowledgement of receipt of a specific request from the receiver to a sender
 - Detailed receipt of the transaction request and
 - Results from the receiver of the request
 - Verification of Provider enrollment status
 - Instructions on how to follow up completion of the request
 - Approval of request
 - Denial of request
 - Request is pended

Responses Continued

- Detailed information related to the request:
 - Payer contact information
 - Effective date
 - Website address
 - Provider/Submitter trace number
 - Payer Assigned trace number
 - Return the sender ID to use at a per transaction level
 - Incomplete Information Received
 - Infrastructure (test or production)
 - Support for the requested transaction
 - Messaging to support denied request
 - Whether or not there will be a subsequent electronic responses related to the original request

NEXT STEPS

Q&A

- When will the 838 TR3 be available for ingestion?
- Is the comment period over? Or When will the comment period begin?
- When will the next version of the 838 TR3 be available since this version is 006020305?
- What is the health plan/payer estimated implementation timeframe?
- How do I become involved with the 838 TR3 X12N WG15?

Closing comments



Questions?



Thank You

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