



Vendor Specification

For Non-covered Transactions

**Supplemental File
Financial**

For Long Term Care



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Section 1 Introduction

1.1 Purpose

This vendor specification describes the components that are related to the supplemental file for the Long Term Care 835 file. The data sets within this file are not covered under the Health Insurance Portability and Accountability Act 1996 (HIPAA). Vendors can utilize this specification to program their applications to handle the data within the file. The information that is incorporated within Financial (FIN, ER&S) layout is supplemental to the HIPAA compliant 835 and is sent from TMHP to the provider with additional information regarding the request.

Please refer to the TMHP Connectivity Guide for specific instructions regarding connectivity options:

<http://www.tmhp.com/File%20Library/File%20Library/EDI/TMHP%20EDI%20Connectivity%20Guide.pdf>

1.2 Contact Information

TMHP EDI Helpdesk

The Electronic Data Interchange (EDI) Helpdesk provides technical assistance only by troubleshooting TMHP EDI issues. Contact your system administrator for assistance with modem, hardware, or telephone line issues.

To reach the TMHP EDI Helpdesk, select one of the following methods:

- Fax 1-512-514-4230 or 1-512-514-4228
- For Medicaid, CSHCN and Family Planning electronic filing issues, call 1-888-863-3638 (or call 1-512-514-4150)
- For Long Term Care issues, call 1-800-626-4117 (Select option 2) (or call 1-512-335-4729)

The TMHP EDI Helpdesk is available *Monday through Friday, 8 a.m. to 5:30 p.m. CST.*



1.3 Security and Privacy Statement

Covered entities were required to implement HIPAA Privacy Regulations no later than April 14, 2003. A covered entity is defined as a health plan, a Healthcare clearinghouse, or a Healthcare provider who transmits any health information in electronic form in connection with a HIPAA transaction. Providers that conduct certain electronic transmissions are responsible for ensuring these privacy regulations are implemented in their business practices. HHSC is a HIPAA Covered Entity. Accordingly, TMHP is operating as a HIPAA Business Associate of HHSC as defined by the federally mandated rules of HIPAA. A business associate is defined as a person or organization that performs a function or activity on behalf of a covered entity, but is not part of the covered entity's workforce.

The privacy regulation has three major purposes:

1. To protect and enhance the rights of consumers by providing them access to their health information and controlling the appropriate use of that information;
2. To improve the quality of Healthcare in the United States by restoring trust in the Healthcare system among consumers, Healthcare professionals and the many organizations and individuals committed to the delivery of Healthcare; and
3. To improve the efficiency and effectiveness of Healthcare delivery by creating a national framework for health privacy and protection.

In accordance with HIPAA privacy regulations, the State of Texas provided a Notice of Privacy Practices to all Texas Medicaid households. As one of the steps in this process, the State of Texas mailed an "Explanation of Medicaid Privacy Rights and a Privacy Notice" to each Medicaid household in March 2003. A copy of the Department of Health and Human Services Privacy Notice is currently available on their website at the following link:

<http://aspe.os.dhhs.gov/admsimp/final/PvcFR01.pdf>.



Section 2 Financial (FIN, ER&S) File Information

2.1 Supplemental Transaction File Information

The FIN supplemental file is sent to the submitter along with an 835 response file when a claim batch transaction is processed at TMHP.

Each batch file sent from CMS/Long Term Care contains the TMHP Custom Header, followed by a Batch File Header, response record(s), and a Batch File Trailer. Each batch consists of a Batch Response Header Record, a number of response record(s), and a Batch Response Trailer Record. A response consists of the Supplemental File Header and the Supplemental File Detail.

2.2 Supplemental Transaction File Layout

File Layout:

TMHP Custom Header
Batch File Header
[0 to n] Batches
Batch File Trailer

Where a Batch is one of the following:

[1] Supplemental Header 61
[1 to n] Supplemental Detail WS

2.3 Table Definitions

2.3.1 Table Headings

The following information will give the definitions of the table headings used in this document.

- Field Name – The name of the data field.
- Field Format – The type of characters allowed in the field.
- From Position – The starting point of the field within the file.
- To Position – The ending point of the field within the file.
- Comments/Valid Values – Additional information or specific data values that will be in a field with in the file.
- Field Length – The character length of the field.
- Data Value – The specific data set value for a given field.

2.3.2 Field Format Column

The following information will give the definitions of abbreviations used in the Field Format column of the tables throughout this document.

- AN – Alpha-Numeric data fields
- Num – Numeric data fields.
- ND1 – Numeric decimal fields with one implied decimal place at the end of the data element. (i.e.: The data element 1500 in a ND1 field would be translated to 150.0).
- ND2 – Numeric decimal fields with two implied decimal places at the end of the data element. (i.e.: The data element 1500 in a ND2 field would be translated to 15.00).



Section 3 TMHP Custom Header & Batch File Information

The TMHP Custom Header and the Batch File Information is used to facilitate transmission of data. The first record in each file delivered to or sent by CMS/Long Term Care will be a TMHP Custom Header. It enables TMHP to route and process the files correctly. The same mapping is used for all TMHP supplemental formats.

3.1 TMHP Custom Header

Field Name	Field Format	From Position	To Position	Comments/Valid Values
HEADER ID	AN	01	08	<i>EDS-ECMS</i>
HEADER ID VERSION	AN	09	10	<i>1B</i>
TRANSACTION TYPE	AN	11	18	<i>TX2CLM10</i> Batch long request or <i>TX2CLMS0</i> Batch short request
TRANSACTION TYPE VERSION	AN	19	22	
SENDER ID ASSIGNER	AN	23	25	
SENDER ID	AN	26	45	Assigned by TMHP
RECEIVER ID ASSIGNER	AN	46	48	
RECEIVER ID	AN	49	68	
Sending USER ID	AN	69	76	
Sending USER PASSWORD	AN	77	84	
Sending DEVICE ID	AN	85	92	
Sending DEVICE PASSWORD	AN	93	100	
SERVICE LEVEL PASSWORD	AN	100	103	
TEST PROD INDICATOR	AN	104	104	<i>T</i> = Test <i>P</i> = Product
CONTRACT LOGO	AN	105	108	
BUSINESS ORG LOGO	AN	109	112	
CREATE DATE	AN	113	120	The date field should use the CCYYMMDD format.
CREATE TIME	AN	121	124	The time field should use the HHMM format.
BATCH ID	AN	125	154	



3.2 Batch File Header

Field Name	Field Format	From Position	To Position	Comments/Valid Values
RECORD ID	AN	01	02	Value 05
SUBMITTER TRANSMISSION NUMBER	AN	03	08	
VERSION NUMBER	AN	09	13	

3.3 Batch File Trailer

Field Name	Field Format	From Position	To Position	Comments/Valid Values
RECORD ID	AN	01	02	Value 95
SUBMITTER TRANSMISSION NUMBER	AN	03	08	
BATCH COUNT	AN	09	14	
MESSAGE SEGMENT COUNT	AN	15	16	



Section 4 Response Record Details

The supplemental file will contain a header segment and a detail segment. The data sets in the FIN (ER&S) supplemental file are not covered under HIPAA rules and regulation. The following tables will identify the types of data that will be returned to the submitter as well as the location and the type of data set in the file.

4.1 Supplemental Header

ER&S PROVIDER PAYMENT SUMMARY RECORD					
Field Name	Field Length	Data Value	Field Format	From Position	To Position
Record ID	2	VALUE 61	AN	1	2
Submitter ID	9		Num	3	11
Provider Number	9		NN	12	20
Period Begin Date	8		AN	21	28
Period End Date	8		AN	29	36
Expedited Payment Total Amount	12		ND2	37	48
Expedited Payment Total Withheld to Date	12		ND2	49	60
Administrative Payment Total Amount	12		ND2	73	84
Administrative Payment Total Withheld to Date	12		ND2	85	96
Provider Total Deduction Total Amount	12		ND2	109	120
Provider Total Deduction Total Withheld to Date	12		ND2	121	132
Provider Monthly Deduction Total Amount	12		ND2	145	156
Provider Monthly Deduction Total Withheld to Date	12		ND2	157	168
Expedited Payment Total Withheld This R&S	12		ND2	61	72
Administrative Payment Total Withheld This R&S	12		ND2	97	108
Provider Total Deduction Total Withheld This R&S	12		ND2	133	144
Provider Monthly Deduction Total Withheld This R&S	12		ND2	169	180
Total Approved To Pay Year To Date Positive Indicator	1		AN	181	181
Total Approved To Pay Year To Date	12		ND2	182	193
ER&S PROVIDER WARRANT SUMMARY SEGMENT (<i>Note:</i> Multiple WS segments for each 61 record)					



Field Name	Field Length	Data Value	Field Format	From Position	To Position
Segment ID	2	VALUE WS	AN	1	2
Warrant Number/Direct Deposit Number	9		AN	3	11
Warrant Date/Direct Deposit Date	8		AN	12	19
Warrant Amount	12		ND2	20	31
Warrant Status	1		AN	32	32



Appendix A TA1 Response File

A TA1 file is received when the transaction format cannot be recognized. Please verify that the transaction format is correctly constructed and resubmit the file. If you continue to receive a TA1 file, please contact the EDI Helpdesk.