

TMHP ELECTRONIC DATA INTERCHANGE (EDI)

CSHCN SERVICES PROGRAM PROVIDER MANUAL

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41.1 TMHP EDI Overview

Providers can submit claims and other requests using paper forms or faster electronic methods. Providers are encouraged to submit claims and other requests electronically. Providers can participate in the most efficient and effective method of submitting requests to TMHP by submitting through the TMHP EDI Gateway. TMHP uses the *Health Insurance Portability and Accountability Act* (HIPAA)-compliant American National Standards Institute or ANSI X12 5010 (if provider has passed 5010 testing) file format through secure socket layer (SSL) and virtual private networking (VPN) connections for maximum security. Providers can access TMHP's electronic services through the TMHP website.

41.2 Advantages of Electronic Services

It's fast. No more waiting by the mailbox or making telephone inquiries; know what's happening to claims in less than 24 hours and receive reimbursement for approved claims within a week. TexMedConnect users can submit individual requests interactively and receive a response immediately.

It's free. All electronic services offered by TMHP are free, including TexMedConnect and its technical support and training.

It's easy. TMHP offers computer-based training (CBT) for TexMedConnect, CSHCN Services Program, and many other topics, as well as a large library of reference materials and manuals on the TMHP website at www.tmhp.com.

It's safe. TMHP EDI services use VPN and SSL connections, just like the U.S. government, banks, and other financial institutions, for maximum security.

It's accurate. TexMedConnect and most third-party vendor software have features that let providers know when they've made a mistake, which means fewer rejected and denied claims. Rejected claims are returned with messages that explain what's wrong, so the claim can be corrected and resubmitted right away. Denied claims appear on the provider's Remittance and Status (R&S) Report along with paid and pending claims.

It's there when it's needed. Electronic services are available day and night; from home, the office, or anywhere in the world.

It makes record keeping and research easy. Not only can TexMedConnect be used to send and receive claims, it can retrieve Electronic Remittance and Status (ER&S) reports, perform claim status inquiries, verify client eligibility, and archive claims. TexMedConnect can generate and print reports on everything it sends, receives, and archives.

41.2.1 Getting Help

Contact the TMHP EDI Help Desk at 1-888-863-3638, which is available Monday through Friday, from 7 a.m. to 7 p.m., Central Time, or visit the TMHP website at www.tmhp.com for more information about EDI services.

The TMHP EDI Help Desk does not provide training or help with billing questions. Providers should contact the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413 for billing and training questions. Information about provider education opportunities is available on the TMHP website at <https://www.tmhp.com/resources/provider-education-and-training>.

41.2.2 Electronic Services Available

The services available through EDI are:

- Eligibility verification (EV)
- Claims submission
- Claim status inquiry (CSI)
- ER&S reports

- Appeals (also known as correction and resubmission)

41.3 Electronic Billing

Providers that want to transition from paper billing to electronic billing should decide how they will submit their claims to TMHP. Providers can use TexMedConnect or vendor software to submit files directly to TMHP or they may use a billing agent (i.e., billing companies or clearinghouses) that submits files on the provider's behalf.

The previously announced dual strategy for EDI claims submissions is now in effect.

Trading partners that have passed ANSI X12 version 5010 testing may submit ANSI X12 version 5010 files.

TMHP no longer accepts ANSI X12 version 4010 files. Effective April 1, 2012, electronic claims that are submitted by providers that are not both compliant and certified will not be accepted by TMHP, and, as a result, will not be adjudicated or paid by the CSHCN Services Program.

It is the responsibility of providers to ensure that their method of submitting electronic claims is both EDI compliant and certified by TMHP.

Note: All CSHCN Services Program electronic claims must include the appropriate benefit code as follows:

- DM3 for CSHCN Services Program home health durable medical equipment (DME) services
- CSN for all other CSHCN Services Program services

TexMedConnect provides a drop-down box that allows the submitter to choose the appropriate combination of provider numbers and benefit code. For CSHCN Services Program submissions, providers must choose the appropriate combination that includes either the CSN or DM3 benefit code.

Providers that use other vendor software must add the appropriate CSHCN Services Program benefit code (i.e., CSN or DM3) in the appropriate field as designated by the software.

41.3.1 Step 1—Choose How Claims Are Submitted

41.3.1.1 TexMedConnect

TexMedConnect is a free, web-based, claims submission application provided by TMHP. Technical support and training for TexMedConnect are also available free from TMHP. Providers can submit claims, eligibility requests, claim status inquiries, appeals, and download ER&S reports (in either PDF or ANSI 835 formats) using TexMedConnect. TexMedConnect can interactively submit individual claims that are processed in seconds. To use TexMedConnect, providers must have Internet access and one of the following Internet browsers:

- Microsoft® Internet Explorer®
- Google Chrome®
- Mozilla Firefox®

Although many TexMedConnect features will work with earlier versions of Microsoft Internet Explorer, TMHP only offers technical support for TexMedConnect when used with Microsoft Internet Explorer 11. A broadband connection is recommended but not required. Providers that use TexMedConnect can find the online instruction manual on the homepage and on the EDI page of the TMHP website at www.tmhp.com.

41.3.1.2 Vendor Software

Providers that do not use TexMedConnect must use vendor software to create, submit, and retrieve data files. Providers can use software from any vendor listed in the [Completed Testing](#) link, which is located on the EDI page of the TMHP website at www.tmhp.com. There are hundreds of software vendors with

a wide assortment of services that have been approved to submit electronic files to TMHP. Providers that plan to access TMHP's electronic services with vendor software should contact the vendor for the details of their software requirements. TMHP does not make vendor recommendations or provide any assistance for vendor software. Not all vendor software offers the same features or levels of support. Providers are encouraged to research their software thoroughly to make certain that it meets their needs and that it has completed testing and have been certified by TMHP.

Note: Software vendors should refer to Section 41.6, "Third-Party Vendor Implementation" in this chapter

41.3.1.3 Third-Party Billing Agents

Billing agents are companies or individuals that submit electronic files to TMHP on behalf of the provider. Generally, this means that the provider uses a product that sends billing or other information to the billing agent that processes it and then transmits it to TMHP and other institutions. TMHP has no information on the software or other requirements of billing agents. Providers should contact the billing agent to obtain information about their products and processes. A complete list of billing agents that have completed the testing process and been certified by TMHP can be found on the [Completed Testing](#) link, which is located on the EDI page of the TMHP website at www.tmhp.com. TMHP does not make billing agent recommendations or provide any assistance for billing agent's software or services.

41.3.1.4 Automated Maintenance Process for All Electronic Submitters

All electronic submitters are responsible for the maintenance of their submitter folders. Folders are limited to 7,500 files and cannot contain files older than 30 days. Files that exceed these limits are systematically archived on a daily basis. Providers should review, retrieve, and backup their electronic response files regularly.

Providers must pay a fee for transmission reports that are produced after the 30-day period or as a result of the systematic archive of files over the 7,500 limit. File submitted using EDI version 5010 are limited to a maximum 5,000 transactions per file. Files that have more than 5,000 files will be rejected.

Referto: Section 41.4, "Request for Electronic Transmission Reports" in this chapter.

41.3.2 Step 2—Gaining Access

Providers must setup their software or billing agent services to access the TMHP EDI Gateway. Providers that use billing agents or software vendors should contact those organizations for information on installation, settings, maintenance, and their processes and procedures for exchanging electronic data.

Providers that download the ANSI 835 file through TexMedConnect and providers that use vendor software must request a submitter ID. A submitter ID is necessary for vendor software to access TMHP's electronic services. It serves as an electronic mailbox for the provider and TMHP to exchange data files. To order a submitter ID, providers must call the EDI Help Desk at 1-888-863-3638, which is available Monday through Friday, from 7 a.m. to 7 p.m., Central Time. Providers that use a billing agent do not need a submitter ID. Providers that use TexMedConnect can access the online instruction manual on the EDI webpage of the TMHP website at www.tmhp.com.

41.3.3 Step 3—Training

Providers should contact the TMHP-CSHCN Contact Center at 1-800-568-2413 for assistance with resolving billing issues. Information about training opportunities is available on the TMHP website at <https://www.tmhp.com/resources/provider-education-and-training>. Providers may also use the many reference materials available on the website in the reference materials section.

Referto: Section 1.2.1, "Publications" in Chapter 1, "TMHP and HHSC Contact Information."

The TMHP EDI Help Desk provides technical assistance, but does not provide training.

41.4 Request for Electronic Transmission Reports

Providers are required to retain all claim and electronic file transmission records. Providers must verify that all claims submitted to the CSHCN Services Program or its agent are received and accepted. Providers must also track claims submissions against their claims payments to detect and correct all claim errors.

Referto: Section 2.3, “Provider Responsibilities” in Chapter 2, “Provider Enrollment and Responsibilities” for more information about provider responsibilities and electronic submissions.

When an electronic file transmission record is missing, providers can request copies of the transmission report by contacting the TMHP EDI Help Desk at 1-888-863-3638 and requesting that the electronic transmission report file be reset. The TMHP EDI Help Desk will then reset the file for the production submitter ID provided. Requests for transmission reports that were produced in the previous 30 days are provided at no cost to providers. Requests for transmission reports that were produced more than 30 days before the request cost \$500 plus the 8.25 percent sales tax of \$41.25, which is a total of \$541.25. Providers that hold a tax-exempt certificate are not assessed sales tax. This cost is per transmission report.

41.5 Provider Check Amounts Available Online

Acute care providers can search, view, and print all payment amounts that were issued during the previous year by going to the TMHP website at www.tmhp.com.

The features of the online check amount include:

- The ability to search information up to 1 year before the date of the search.
- All results are displayed on a single screen.
- All results can be printed on a single report.

The 52 weeks of reimbursement payment information includes the:

- Payment date
- Payee name
- Payment amount
- Program for which payment was issued
- Hold amount
- Payment status

Providers must have or must create a Provider Administrator account to view their payment amounts online. Providers can then grant “View Payment Amounts” security permission to the office staff of their choice. Providers can access their check amounts by clicking **My Account** and then **View Payment Amounts**.

Provider check amounts will continue to be available through the Automated Inquiry System (AIS) telephone line and on Electronic Remittance and Status (ER&S) Reports.

41.6 Third-Party Vendor Implementation

TMHP requires all software vendors and billing agents to complete EDI testing before granting access to the production server. Vendors that wish to begin testing may either call the EDI Help Desk at 1-888-863-3638 or visit the EDIFECS testing site at <https://editesting.tmhp.com/index.jsp> and use the *TMHP Support* link. An EDIFECS account is created for the vendor to begin testing EDI formats. After the successful completion of EDIFECS testing and the submission of a Trading Partner Agreement, vendors must complete end-to-end testing on the TMHP test server. Software vendors and billing agents

must be partnered with at least one Texas provider before a test submitter ID can be issued. When end-to-end testing has been completed, the billing organization or agent is added to the EDI Submitter List. Providers and billing agents may then order production submitter IDs for use with the vendor software.

41.6.1 EDI Version 5010 Claims Response and Electronic Remittance & Status (R&S) Files

41.6.1.1 Batch ID Included in Filename for 227CA Claims Response File

The Batch ID (BID) is located in the file name of the returned 227CA response. The 227CA claims response file does not include the batch ID within the file.

Note: When calling the EDI helpdesk for assistance, providers should have the 227CA filename available so the EDI Helpdesk can provide assistance.

41.6.1.2 Setting up the 835 File (ER&S)

After completing the EDI 5010 testing and certification process, providers need to submit a request to establish their ER&S report for their new submitter ID. Acute care providers must submit the Electronic Remittance and Status (ER&S) Agreement, which is available on the TMHP website at www.tmhp.com. Providers should fax the completed forms to (512) 506-7808. The process for setting up the ER&S report for EDI 5010 depends upon the designated recipient.

41.6.1.3 Trading Partners Who Submit 837 Files and Receive 835 Files

The trading partner must complete the appropriate 835 form and submit it to TMHP.

The 835 form must contain the trading partner’s EDI 5010 submitter ID and Texas Provider Identifier (TPI).

41.6.1.4 Trading Partners Who Have a Clearinghouse or Third Party Submit Their Claims but Receive Their Own 835 Files

Each provider that uses a clearinghouse or third-party biller to submit claims must submit their own updated 835 form. A clearinghouse or third-party biller may not submit 835 forms on behalf of the trading partners for which it submits claims.

To be able to receive 835 files directly, providers must first request an EDI 5010 submitter ID to be used for accessing their 835 files. After the EDI 5010 submitter ID is received, providers must complete the appropriate 835 form and submit it to TMHP.

The 835 form must contain the provider’s EDI 5010 submitter ID and TPI.

41.6.1.5 Clearinghouses or Third-Party Billers That Submit Transactions and Receive the 835 Files on Behalf of Trading Partners

Each provider that uses a clearinghouse or third-party biller to submit claims must submit their own updated 835 form. Even if a clearinghouse or third-party biller receives 835 files for its trading partners, it may not submit 835 forms on behalf of the trading partner for which it submits claims.

The 835 form must contain the clearinghouse or third-party biller’s EDI 5010 submitter ID and the provider’s TPI.

41.7 Supported File Types

TMHP EDI supports the following electronic HIPAA-compliant ANSI ASC X12 5010 transaction types:

Electronic Transaction Types	
270	Eligibility request
271	Eligibility response

Electronic Transaction Types	
276	Claim status inquiry
277	Claim status inquiry response
835	ER&S report
837D	Dental claims
837I	Institutional claims
837P	Professional claims

41.8 Forms

The following forms are available on the TMHP website:

- [Claim Status Inquiry \(CSI\) Authorization](#)
- [Electronic Funds Transfer \(EFT\) Notification](#)

Note: Photocopy these forms and retain the originals for reuse. Forms are also available at www.tmhp.com.

Referto: Section 5.8, “Reimbursement” in Chapter 5, “Claims Filing, Third-Party Resources, and Reimbursement.”

41.9 TMHP-CSHCN Services Program Contact Center

The TMHP-CSHCN Services Program Contact Center at 1-800-568-2413 is available Monday through Friday from 7 a.m. to 7 p.m., Central Time, and is the main point of contact for the CSHCN Services Program provider community.