

Electronic Data Interchange

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Electronic connections: Exchanging data and health care information efficiently and cost-effectively

Pennsylvania Blue Shield provides you the convenience and cost savings of electronic data interchange (EDI) through its electronic commerce division, Highmark EDI Services. Highmark EDI Services provides:

- Streamlined claims filing.
- Access to an interactive website packed with data and information.
- A claims clearinghouse.
- Information on patient eligibility.
- Reports on your claims that help you track their status.

Saving money, increasing effectiveness through EDI

Everyone has a stake in health care cost containment. Health care professionals, patients, insurance companies and state and federal government are all affected by the high price of maintaining good health.

Fortunately, technology can help simplify business operations and thus, cut costs. EDI makes electronic communications a viable method of streamlining claims processing and eliminating wasted time and money.

EDI is the computer-to-computer delivery of information. This technology is not new. Each time you make an ATM deposit or withdrawal or make a purchase with a bank or department store credit card, an EDI transaction takes place. EDI transactions provide convenience, efficiency and transactional record management.

Because of the inherent speed and cost-effectiveness, electronic transactions and online communications are integral to today's business world. Electronic transactions between health care professionals and insurers are essential to maintain efficiency, and are, in fact, encouraged by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Blue Shield's new and existing EDI claim and inquiry products and services are designed to bring these benefits to your health care business transactions.

Highmark EDI Services offers electronic services

DataStream is Highmark EDI Services' efficient and cost-effective electronic claims clearinghouse. Through electronic claims submission and DataStream you may:

- Submit all Blue Shield claims and encounters.
- Submit virtually all primary claims from other commercial payers.
- Receive online reports that enhance your ability to track and monitor your claims.

The DataStream Equation

cost savings + time savings = electronic claims submission

CareConnect is an interactive online service, linking health care professionals to large information databases and reference materials through the World Wide Web.

Highmark EDI Services' Internet website, **www.careconnect.com**, provides a broad range of information requested daily by health care professionals and health care software vendors.

CareConnect.com

CareConnect.com is your online customer service representative. CareConnect provides electronic and paper billers direct access to pertinent databases and valuable reference material.

Eligibility provides valuable patient information about effective and cancellation dates, other dependants listed on the contract, etc. Eligibility is also available for Security 65 and 65 Special.

Claim status allows you to review claim payment, claim rejection or pending claims.

Here's how to gain access to CareConnect for claim status and eligibility information:

- **On the Web:** enroll online or download the form, CareConnect Network Application, from our website at www.careconnect.com.
- **Fax:** Call (800) 992-0246. At the voice prompt select Option 1, and enter document No. 300, CareConnect Network Application.

CareConnect.com provides numerous reference materials to assist the professional provider. Included are the *LINK*, *PRN* and Noteworthy articles. In addition, the site offers links to other health care websites.

DataStream: Electronic claims submission is faster, more economical than paper

How electronic claims submission works

All it takes is a desk-top PC, the proper software and a dedicated telephone line.

Instead of printing, bundling and sending paper claims through the mail, you simply enter and store claim data in your office computer, through a practice management system. Then, as often as you wish, you dial a toll-free number and transmit the claim information to Highmark EDI Services.

Electronic claim submission benefits

Electronic claim submission saves your office time and money. Both are precious commodities in today's fast-paced, technologically advanced world. Some benefits of electronic claims submission are:

Faster claim payment

Blue Shield's claim processing system places a higher priority on claims filed electronically. Electronic claims will typically process in seven to 14 calendar days, whereas paper claims will process in 21 to 27 calendar days.

These payment targets are in compliance with timely claims payment regulations defined by Act 68 of 1998 (Article II: the Provision For Quality Health Care Accountability and Protection) and reflect processing of claims that do not require manual intervention or investigation.

Cost effective

Electronic claim submission increases staff productivity by speeding claim preparation and delivery. Many of the paper claim processes are eliminated such as form printing, bundling, postage and mailing.

Many errors experienced in the keying and processing of paper claim forms are reduced or eliminated. Electronic claim submission means greater claim acceptance rates and reduced staff time in claim research and resubmissions.

Convenient and confidential

Electronic submission provides the added benefit of both claim preparation and delivery at your convenience. Postal service hours of operation or delays do not limit your productivity. Electronic claims can be submitted 24 hours a day, seven days a week, 365 days a year.

It is safe, immediate and direct to Blue Shield without any human intervention. EDI security standards are in place to ensure your claim data remains confidential and secure.

Claim record management

DataStream provides EDI online reports, enhancing your ability to track and monitor your claim transactions. These include:

- **Confirmation/Acknowledgement report**

This report is available immediately after transmission of the claim file. It verifies that DataStream received your claim file and indicates the file was “accepted” or “rejected” for further claim editing.

- **Submission Summary reports**

After the DataStream editing process is complete, you are able to verify through the Submission Summary reports that your claims were accepted and forwarded to the payer for claim processing. These reports also identify claims that did not pass or were rejected by the editing process due to data errors. The rejected claim data must be corrected and the claim resubmitted electronically for acceptance into the payer’s processing system.

These reports are available approximately 24 hours after your submission. The submission summary reports should be retrieved after every claim file transmission because they provide valuable, detailed analysis of your claim file.

A complete listing of the claim edit rejection codes and report examples can be found at www.careconnect.com in the specifications and DataStream sections, respectively.

Electronic Remittance Advice

Electronic Remittance Advice (ERA) is essentially an electronic version of a paper Explanation of Benefits notice. When ERA is combined with an Accounts Receivable System (ARS), it provides an efficient method of reconciling your patients’ accounts. Your software vendor can advise you on your system’s ERA and ARS capabilities.

It provides financial information relating to claim payment and denial. ERA will help you reduce costs and improve office efficiency. Its benefits are:

- **Eliminates posting errors**

Little to no manual intervention, depending on the AR system, is necessary with electronic remittance posting. Errors associated with manual keying of payment data are eliminated. The ERA files are balanced to the penny and match your Blue Shield payment (check).

- **Reduces posting time**

The ERA file allows you to electronically post payments to your AR system in a matter of minutes or hours instead of days. Actual posting time is dependent on the practice size and AR system. Electronic remittance posting allows your staff more time to attend to patient needs, instead of administrative tasks.

- **Accelerates payment process**

Electronic posting accelerates your ability to perform secondary billing of non-contractual financial liabilities. ERA is available online Monday through Friday and can generally be retrieved before

the paper EOB arrives in the mail. This means you can start your posting and secondary billing processes upon receipt of the electronic file.

Electronic remittance data

The electronic remittance file provides pertinent financial and patient account information necessary for posting ease. Some of the data elements contained on the report include:

- Check number, issue date and amount
- Payer and payee names and organizational numbers
- Patient's name, insured identification number, type of contractual coverage
- Claim and service patient account numbers for precise procedure matching and posting
- Submitted and changed (if applicable) procedure codes
- Service allowed and paid amounts
- Service level provider contractual financial liabilities
- Patient financial liabilities (deductible, copays, coinsurance)
- Standardized code values for denied services, as well as provider and patient liabilities

System operation hours

The DataStream system is accessible seven days a week, 24 hours a day. Claim files can be submitted once or multiple times per day or week. You control the claim transmittal and report retrieval schedule that is convenient with your office hours.

Getting started with DataStream

Two EDI options

1. Practice management system vendor — Purchase a complete system from a reputable vendor. Complete system solutions typically include the hardware (personal computer, monitor, modem and printer) and the software, which includes electronic claims submission and possibly accounts receivable posting capabilities. Terms and conditions of each system vary from vendor to vendor.
2. Billing service — Health care professionals can outsource their electronic claim submission to private billing services. Terms and conditions vary from billing service to billing service.

EDI Partners listing

The EDI Partners program is a listing of companies that offer electronic claim submission. If you are considering purchasing a new practice management system, this is a valuable tool. The EDI Partners program listing is located on the Highmark EDI Services website at www.careconnect.com or is available through our fax-back service (document 501).

Making the transition from the traditional, slow world of paper to electronic claims can be daunting. However, by choosing the right EDI vendor or billing service, you will have professional help toward your goal of a more streamlined and efficient office.

There are numerous things to consider when selecting an EDI vendor. List your needs, determine your budget and talk to others in your specialty who are using EDI.

Highmark EDI Services offers the following suggestions when considering a vendor:

- Do they charge extra for electronic claim capabilities? Is the transmission direct, or through an intermediary such as a clearinghouse?

- Do they offer electronic claims submission of Blue Shield claims? Is this capability offered with the basic electronic claims submission module at no additional charge?
- Does the software capture and print the electronic reports provided by Highmark EDI Services?
- Are the insurance companies to whom you submit part of the electronic package, and at what cost?
- Do they offer clearinghouse capabilities?
- How is installation and training conducted?
- Ask about training on the software and is there on-going education provided. Is system help available (online or through paper manuals)?
- How much additional office software is included (word processing, e-mail)?
- Do they offer Internet access?
- Can you get a list of their clients in your specialty? Call the vendor and ask about their software, hardware and support. Do they offer toll-free support? What is the average turnaround time for a service call?
- What is the cost of the system? What features are standard with the system?
- When there are changes in Highmark EDI Services reporting requirements, how long will it take to update your software and how is it updated? What is the cost of normal updates, customization requests and annual maintenance fees?
- What hardware is included (Pentium PCs, modems, terminals)?
- Are you getting color monitors or black and white?
- Is the workstation a “dumb terminal” or a PC?
- Will the system automatically bill for copay after the insurance pays you?
- What other services do they offer (free conversion, loaner hardware)?
- Do they provide remittance advice information? Is there a fee for this package?
- What computer operating systems do they support?

Additional questions for a billing service:

- How frequently do they submit your claims to the carriers involved?
- What kind of tracking reports do they offer to their clients?
- Do they provide credit and collection services?

Enrolling in DataStream

Whether you select a practice management system or a billing service, the next step is to enroll as a DataStream electronic claim submitter.

How to obtain the enrollment forms

On the Web: Enroll online from our website at www.careconnect.com under “Sign up.”

Fax: Call (800) 992-0246. At the voice prompt select Option 1, enter the appropriate document number (See document numbers noted below.) and at the next prompt, enter your fax number (including area code).

Follow these easy steps to enroll:

Step 1: Complete the Electronic Commerce Agreement (not applicable when enrolling online) and DataStream Subscription Application.

Electronic Commerce Agreement

This signed agreement will be used as your “signature on file” in order to validate future requests for electronic claim submission and inquiries. (Document 101, Electronic Commerce Agreement)

DataStream Subscription Application

This application provides Highmark EDI Services both general and specific information about your practice. Application instructions are included. A Keystone Health Plan addendum is also attached. The addendum must be completed for authorization to submit Keystone Health Plan (Central and East) claims and encounters electronically. (Document 102, DataStream Subscription Application)

Step 2: Mail both forms, with original signatures, to Highmark EDI Services (address is on forms).

Step 3: Upon receiving your completed forms, Highmark EDI Services will process your request, verify that you have a valid Blue Shield billing provider number and assign you a source number (the source number identifies you as an electronic biller).

Step 4: Within five to 10 business days you should receive an authorization letter in the mail listing your assigned electronic source number, login identification and toll-free transmission telephone number.

Testing

Although testing is not required, we strongly recommend new electronic billers transmit test claims before submitting production electronic claims. If you decide to test, a minimum of 10 test claims should be transmitted.

Every test transmission is reviewed by a Highmark EDI Services testing analyst. Upon completion of their review, you will receive written correspondence to notify you that either your test has been approved for production or that the test was not approved.

If your test was not approved, we will indicate where adjustments need to be performed and request that another test file be transmitted to ensure that problems have been resolved prior to moving you into production.

Where to find support

The Highmark EDI Services support staff is comprised of trained personnel dedicated to supporting electronic communications. They provide information and assistance with questions or problems you encounter with any aspect of DataStream or CareConnect.

Support is free and staff is available Monday through Friday from 8 a.m. to 5 p.m. EST. To reach the Highmark EDI Services support staff through the Internet, send an e-mail to **edi.support@careconnect.com**. To contact a support analyst by phone, call (800) 992-0246. To save time when calling, be prepared to provide your electronic source number, provider number and log-on identification to the support analyst.

Using the Highmark EDI Services fax-back service, you can request forms and documentation relating to DataStream and CareConnect at any time and have them promptly sent to your fax machine. This service is free and is available 24 hours a day, seven days a week at (800) 992-0246 (choose Option 1). Within minutes of your request, the information is on its way to your fax machine.

For current electronic billers

Changes in your office

As an electronic biller, you will need to notify Highmark EDI Services of some changes that take place at your office.

- **Address changes**

You must report address changes for your provider number to Provider Data Services (to update your provider number, address) and Highmark EDI Services (to update your electronic source number, address). Send your updates to:

- | | |
|---------------------------|----------------------------|
| ▪ Provider Data Services | ▪ Highmark EDI Services |
| PO Box 898842 | 150 Corporate Center Drive |
| Camp Hill, Pa. 17089-8842 | Camp Hill, Pa. 17011 |
| Fax: (717) 731-2896 | Fax: (717) 730-1753 |

- **Changes in physician staff**

Please complete the DataStream Subscription Application if you need to add a new provider to your billing source number (but only if the new provider will receive checks directly from Blue Shield).

Additionally, please notify us when a provider leaves your practice so that he or she can be deleted from your electronic billing source number. You can fax this change to Highmark EDI Services at (717) 730-1753.

- **System changes**

Any changes in the software or hardware of your office computer system should be reported to our support department. These changes could affect your ability to bill electronically.

Any changes to the information completed on your initial authorization form should be reported immediately to Highmark EDI Services. You can fax these changes to Highmark EDI Services at (717) 730-1753.