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Wellmark Blue Cross and Blue Shield

HIPAA Transaction Standard
Companion Guide

Section 2, 837 Professional

Refers to the X12N Technical Report Type 3 ANSI Version 5010A1

Version Number: 1.0

[Introduction](#)

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This *Companion Guide* is a work in progress. Wellmark reserves the right to make changes to this *Companion Guide* at any time without notice. Changes appear in blue text and may be accompanied by a yellow note in the margin.

November 01, 2011

1 Introduction

Wellmark places high priority on making it easy for you to do business with us. Electronic claims submission is one way we can do this. Electronic claims facilitate the transfer of information from your organization to ours in a standard data format. This Section 2-837P of the *Wellmark Companion Guide* provides information about the American National Standards Institute (ANSI) 837 Professional Health Care Claims transaction, Version 5010A1. This transaction is the accepted standard of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Section 1 of the *Wellmark Companion Guide* provides further information about the process of sending electronic transactions to Wellmark.

The *Wellmark Companion Guide* is to be used alongside the *HIPAA 837I Technical Report Type 3 (TR3)*, which provides comprehensive information needed to create an ANSI 837P transaction. The *Wellmark Companion Guide* does not change the specifications of the *HIPAA TR3*; rather, it is intended to clarify the areas where the technical report document provides options or choices to be made. The *HIPAA-TR3* can be downloaded from the following Internet address: http://www.wpc-edi.com/hipaa/HIPAA_40.asp.

The purpose of HIPAA-AS is to standardize transactions as much as possible. However, transactions may have some data elements that are treated differently by different payers. There may be some instances where the submitter is required to transmit data to us that we do not require to conduct business. In these instances, we may store the data sent to us, but we may not use the data for our business purposes.

Billing the Appropriate 837 Version

There are four versions of the 837 transaction:

- 837I (Institutional)
- 837P (Professional)
- 837D (Dental)
- 837COB (Coordination of Benefits claims in all three of the above versions are now accepted by Wellmark. See the *Wellmark 837 Coordination of Benefits Companion guide* for additional information.)

Please review the chart on the next page to verify that the 837P is the form you should use when filing claims to Wellmark based on your provider type. In general, practitioners bill using the 837P, facilities use the 837I, and dentists use the 837D.

837 Professional Transaction Version	Iowa	South Dakota
Advanced Registered Nurse Practitioner	X	X
- Certified Registered Nurse Anesthetist	X	X
- Nurse Practitioner	X	X
- Certified Nurse Midwife	X	X
- Certified Clinical Nurse Specialist	X	X
Ambulance Services	X	X
Community Mental Health Center	X	X
Dentists	X	X
Doctor of Chiropractic	X	X
Doctor of Osteopathic Medicine	X	X
Freestanding Magnetic Resonance Imaging Facility	X	X
Freestanding (FS) Radiology Center	X	X
-FS CT Scan Center	X	X
-FS Mammography Center	X	X
-FS PET Scan Center	X	X
-FS Portable X-Ray	X	X
-FS Radiation Oncology Center	X	X
-FS Radiology Center	X	X
-FS Ultrasound Center	X	X
Home Infusion Therapy Provider	X	X
Home Medical Equipment Supplies & Services Provider	X	X
Independent Laboratory	X	X
Medical Doctor	X	X
Occupational Therapist	X	X
Optometrist	X	X
Oral /Maxillofacial Pathologist	X	X
Oral Surgeon	X	X
Orthotics and Prosthetics Supplier	X	X
Physical Therapist	X	X
Physician Assistant	X	X
Podiatrist	X	X
Psychologist (PhD, PsyD, EdD)	X	X
Qualified Mental Health Provider		X
Social Worker (LISW, LCSW)	X	
-Private Independent Practice (PIP)		X

1. Dentists may file 837P when submitting claims for Wellmark members with accidental injuries involving the teeth.

See the 837I or 837D if your provider type is not listed above.

LEGEND for Wellmark Matrix for the 837P**SHADED** rows represent “segments”; **NON-SHADED** rows represent “data elements.”

“Loop – specific” comments are found in the first segment of the loop.

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
74	1000A	NM1	Submitter Name			
75		NM109	Identification Code		9	Use leading zero's to make a 9-digit code
79	1000B	NM1	Receiver Name			
80		NM109	Identification Code		5	Wellmark Receiver ID-88848
87	2010AA	NM1	Billing Provider Name			
89		NM108	Identification Code Qualifier	XX		
90		NM109	Identification Code		10	National Provider Identifier (NPI) as assigned by NPPES <i>Your NPI must be reported to Wellmark prior to submission of claims. Claims will not be processed for reimbursement until the NPI has been communicated to Wellmark and loaded to Wellmark's Provider System.</i>
91	2010AA	N3	Billing Provider Address			
91		N301	Address Information		9	Provider must submit a street address, do not submit PO Box in Address 1. <i>Wellmark utilizes the provider's billing/accounting address from Wellmark's provider files to remit claims payment.</i> <i>When the provider does not have a contract with Wellmark and the claim is a Medicare Crossover claim, Wellmark will use the billing provider address on the incoming claim record to remit payment.</i>
92	2010AA	N4	Billing Provider City, State, Zip Code			
93		N403	Postal Code		9	Providers must submit the 9-digit zip code <i>When the last 4-digits are unknown, Wellmark will accept 9998 as gap fill.</i>

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
94	2010AA	REF	Billing Provider Tax Identification			
94		REF01	Reference Identification Qualifier	EI SY		EI- Employer's Identification Number (TIN) SY- Social Security Number (SSN)
94		REF02	Reference Identification		9	Provider submit 9-digit TIN/SSN <i>Wellmark uses the billing provider TIN along with the claim service dates and the reported NPI to positively identify the billing provider.</i>
103	2010AB	N3	Pay To Address-Address			
103		N301	Address Information			<i>Wellmark utilizes the provider's billing/accounting address from Wellmark's provider files to remit claims payment.</i> <i>When the provider does not have a contract with Wellmark and the claim is a Medicare Crossover claim, Wellmark will use the billing provider address (loop 2010AA) on the incoming claim record to remit payment.</i>
105	2000B	SBR	Subscriber Information			
107		SBR09	Claim Filing Indicator Code	BL	2	BL - Blue Cross/Blue Shield
127	2010BA	DMG	Subscriber Demographic Information			
128		DMG03	Gender Code	M F	1	Submit when the subscriber is also the patient. <i>Wellmark does not recognize "U" for "unknown."</i>
133	2010BB	NM1	Payer Name			
134		NM108	Identification Code Qualifier	PI		
134		NM109	Identification Code		5	Wellmark Receiver ID-88848
152	2010CA	DMG	Patient Demographic Information			
153		DMG03	Gender Code	M F	1	Submit when the patient is different than the subscriber. <i>Wellmark does not recognize "U" for "unknown."</i>
157	2300	CLM	Claim Information			
159		CLM02	Monetary Amount			Total Claim Charge Amount: <i>Wellmark requires the total billed charge to be greater than zero.</i>
164	2300	DTP	Date-Onset of Current Illness/Symptom			
164		DTP01	Date / Time Qualifier	431		<i>Wellmark requires for medical emergencies to be reported within 72 hours of onset.</i>
164		DTP03	Date Time Period			Format: CCYYMMDD

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
168	2300	DTP	Date- Accident			
168		DTP01	Date/Time Qualifier	439		<i>Wellmark requires for accidental injuries to be reported within 72 hours of the injury.</i>
168		DTP03	Date Time Period			Format: CCYYMMDD
262	2310B	NM1	Rendering Provider Name			
264		NM108	Identification Code Qualifier	XX		
264		NM109	Identification Code		10	National Provider Identifier (NPI) as assigned by NPPES <i>Wellmark uses the billing provider TIN along with the claim service dates and the provider's reported NPI to positively identify the Rendering provider.</i>
351	2400	SV1				
354		SV102	Monetary Amount			<i>Wellmark requires the service line billed charge to be greater than zero.</i>

For More Billing Information

Check out the *Wellmark Provider Guide* and the *Practitioner Guide* or other specialty guides found under Guides on the Provider page at http://www.wellmark.com/e_business/provider/provider.htm.