



## **Companion Guide**

**Health Care Claim Status Inquiry and Response**

**276/277 Companion Guide**

**Refers to the ASC X12N 276/277  
Technical Report Type 3 Guide  
(Version 005010X212)**

**December 2012**

## **Preface**

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Centene Health Plan. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

## Table of Contents

<b>1 INTRODUCTION</b> .....	<b>4</b>
Scope .....	4
Overview .....	4
References.....	4
<b>2 GETTING STARTED</b> .....	<b>4</b>
Working with Centene Health Plan .....	4
Trading Partner Registration.....	4
<b>3 TESTING WITH THE PAYER</b> .....	<b>4</b>
<b>4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS</b> .....	<b>5</b>
System Availability .....	5
Communication protocol specifications .....	5
Transmission Administrative Procedures .....	5
Re-Transmission Procedure .....	5
<b>5 CONTACT INFORMATION</b> .....	<b>6</b>
EDI Assistance .....	6
<b>6 CONTROL SEGMENTS/ENVELOPES</b> .....	<b>6</b>
ISA-IEA .....	6
GS-GE .....	8
ST-SE .....	10
<b>7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS</b> .....	<b>11</b>
<b>8 ACKNOWLEDGEMENTS AND/OR REPORTS</b> .....	<b>11</b>
<b>9 TRADING PARTNER AGREEMENTS</b> .....	<b>11</b>
Trading Partners .....	11
<b>10 TRANSACTION SPECIFIC INFORMATION</b> .....	<b>12</b>
<b>11 Appendix</b> .....	<b>14</b>
Revision History .....	14

# Centene Health Plan Companion Guide 276 / 277

---

## 1 INTRODUCTION

### SCOPE

This Companion Guide has been designed to describe to Centene's trading partners the format and data content of the Claim Status 276/277 transaction set in the Electronic Data Interchange (EDI) environment. The 276 transaction is used to request claim status and the 277 transaction is used to respond with the information for the specified claim.

### OVERVIEW

The Council for Affordable and Quality Healthcare (CAQH) created the Committee on Operating Rules for Information Exchange (CORE). This committee established a common set of operating rules for health care systems which allow providers and other health Centene has implemented the operating rules for CORE Phase I and Phase II.

### REFERENCES

The ASC X12N 276/277 (version 005010X212) Technical Report Type 3 guide for Health Care Claim Status Inquiry and Response has been established as the standard for claim status transactions.

## 2 GETTING STARTED

### WORKING WITH CENTENE

Direct connection to Centene for the purpose of 276/277 0005010A1Claim Status Inquiry and Response transaction submission is available via Centene hosted web service.

### TRADING PARTNER REGISTRATION

All trading partners who wish to submit Claim Status transactions to Centene via the ASC X12 276 (Version 005010x212) and receive corresponding EDI responses (277) must contact [EDIBA@Centene.com](mailto:EDIBA@Centene.com).

## 3 TESTING WITH THE PAYER

### 3.1 Testing with Centene

X12 276 requests will be checked for proper X12 276 structures via "envelope test validation". This insures the transaction request is complete and formatted as a real-time transaction. Failures of envelope tests can generate a 999 response back to the sender.

Centene provides testing support Monday through Friday, 8:30AM to 4:00PM EST.

### 3.1 Ramp Management

Centene employs Edifecs Ramp Management for Trading Partner self-testing. Edifecs Ramp Management through Centene is self-service. Users can register and upload test files for automatic verification.

## 4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

### SYSTEM AVAILABILITY AND DOWNTIME

The 276/277 is generally available 24 hours a day, 7 days a week. To allow for maintenance, the 276/277 transactions may be unavailable on Wednesdays from 1pm - 2pm CST.

### COMMUNICATION PROTOCOL SPECIFICATIONS

Protocol Family: HTTP  
Application Protocol: HTTPS  
HTTP Language: HTML  
HTTP Method: POST  
HTML element for "X12 transaction data": payload  
Production Form URL for Real Time Claim Status Inquiry Submission:

For Webservice:

WSDL  
<https://rt-edi.centene.com/corertservice/Core?wsdl>  
Endpoint:  
<https://rt-edi.centene.com/corertservice/Core>

For HTTP MIME:

<https://rt-edi.centene.com/corertweb/coreRequest>

### TRANSMISSION ADMINISTRATIVE PROCEDURES

Real-time 276 requests must only contain one claim status request. The response to an inquiry in real time will be provided within 20 seconds or less via the 999 or 277.

Real-time 276 requests must contain only one claim status request per transaction. The following responses to the inquiry will be provided within 20 seconds: 999 reject or 277.

### RE-TRANSMISSION PROCEDURE

A duplicate transaction may be sent no sooner than 90 seconds after the original attempt was sent by the user if the HTTP post reply message is not received within the 60 second response period.

If no response is received after the second attempt, the provider's system should submit no more than 5 duplicate transactions within the next 15 minutes.

If the additional attempts result in the same timeout termination, the provider's system should notify the provider to contact Centene directly at [ediba@centene.com](mailto:ediba@centene.com) to determine if system availability problems exist or if there are known Internet traffic constraints causing the delay.

# Centene Health Plan Companion Guide 276 / 277

## 5 CONTACT INFORMATION

### EDI Assistance

Most questions can be answered by referencing this Companion Guide. If you have additional questions related to Centene's Claim Status Inquiry transaction, contact [ediba@centene.com](mailto:ediba@centene.com).

## 6 CONTROL SEGMENTS/ENVELOPES

### ISA-IEA

This section describes the use of the Interchange Control segments, ISA and IEA. These segments mark the beginning and ending of an interchange. The ISA segment has a fixed length and all the elements within this segment must be populated. This segment includes a description of the expected sender and receiver codes and delimiters. The first element delimiter in the ISA segment is an Asterisk (\*) which will be used as the delimiter throughout the transaction. The final character in the ISA segment is a Tilde (~) will be used as the delimiter for each segment in the transaction.

### 276:

Segment ID	Element ID	Name	Code	Definition of Code / Notes
ISA				
	ISA01	Authorization Information Qualifier	'00'	No Authorization Information Present
	ISA02	Authorization Information	10 'spaces'	Authorization Information
	ISA03	Security Information Qualifier	'00'	No Security Information Present
	ISA04	Security Information	10 'spaces'	No Security Information Note: Value should always be 'spaces'
	ISA05	Interchange ID Qualifier of Sender	'01', 'ZZ', '30', or '33'	Will be used for 277 Receiver Qualifier
	ISA06	Interchange Sender ID	<Sender ID>	Interchange Sender ID
	ISA07	Interchange ID Qualifier of Receiver	'ZZ'	U.S. Federal Tax Identification Number
	ISA08	Interchange Receiver ID	421406317	Interchange Receiver ID for Centene
	ISA09	Interchange Date	YYMMDD	Date of the interchange
	ISA10	Interchange Time	HHMM	Time of the interchange
	ISA11	Interchange Control Standards Identifier	'^'	U.S. EDI Community of ASC X12, TDCC and UCS
	ISA12	Interchange Control Version Number	'00501'	
	ISA13	Interchange Control Number		Must be identical to IEA02
	ISA14	Acknowledgement Requested	'0'	No acknowledgement requested
	ISA15	Usage Indicator	'P'	'P': Production Data

## Centene Health Plan Companion Guide 276 / 277

	ISA16	Component Element Separator	:	Component element separator is a delimiter and not a data element
IEA		Interchange Control Trailer Segment		
	IEA01	Number of Included Functional Groups	'1'	Functional Group count
	IEA02	Interchange Control Number		Identical to ISA13

### 277:

Segment ID	Element ID	Name	Code	Definition of Code / Notes
ISA		Interchange Control Header Segment		
	ISA01	Authorization Information Qualifier	'00'	No Authorization Information Present
	ISA02	Authorization Information	10 'spaces'	Authorization Information
	ISA03	Security Information Qualifier	'00'	No Security Information Present
	ISA04	Security Information	10 'spaces'	No Security Information Note: Value should always be 'spaces'
	ISA05	Interchange ID Qualifier of Sender	'ZZ'	U.S. Federal Tax Identification Number
	ISA06	Interchange Sender ID	421406317	Interchange Sender ID
	ISA07	Interchange ID Qualifier of Receiver	'01', 'ZZ', '30', or '33'	Same as 276 Sender Qualifier
	ISA08	Interchange Receiver ID		Interchange Receiver ID for Centene
	ISA09	Interchange Date	YYMMDD	Date of the interchange
	ISA10	Interchange Time	HHMM	Time of the interchange
	ISA11	Interchange Control Standards Identifier	'A'	U.S. EDI Community of ASC X12, TDCC and UCS
	ISA12	Interchange Control Version Number	'00501'	
	ISA13	Interchange Control Number		Identical to IEA02
	ISA14	Acknowledgment Requested	'0'	No Acknowledgement Requested
	ISA15	Usage Indicator	'P'	'P': Production Data
	ISA16	Component Element Separator	:	Component element separator is a delimiter and not a data element

## Centene Health Plan Companion Guide 276 / 277

IEA		Interchange Control Trailer Segment		
	IEA01	Number of Included Functional Groups	'1'	Functional Group count
	IEA02	Interchange Control Number		Identical to ISA13

### GS-GE

This section describes Centene's use of the functional group control segments. It includes a description of expected application sender and receiver codes. Also included in this section is a description concerning how Centene expects functional groups to be sent and how Centene will send functional groups. These discussions will describe how similar transaction sets will be packaged and Centene's use of functional group control numbers.

### 276:

Segment ID	Element ID	Name	Code	Definition of Code / Notes
GS		Functional Group Header		
	GS01	Functional Identifier Code	'HR'	Claim Status Inquiry (276)
	GS02	Application Sender's Code		Code identifying party sending transmission; codes agreed to by trading partners.
	GS03	Application Receiver's Code	421406317	Code identifying party receiving transmission; Value should always be CENTENE.
	GS04	Date	CCYYMMDD	Date of functional group creation
	GS05	Time	HHMM	Creation time
	GS06	Group Control Number		Identical to GE02
	GS07	Responsible Agency Code	'X'	Accredited Standards Committee X12. Value should always be 'X'.
	GS08	Version / Release / Industry Identifier Code	'005010X212'	Health Care Claim Status Inquiry and Response 276/277 Implementation Guide version



## Centene Health Plan Companion Guide 276 / 277

GE		Functional Group Trailer		
	GE01	Number of Transaction Sets Included	'1'	Number of transactions included
	GE02	Group Control Number		Identical to GS06

**277:**

Segment ID	Element ID	Name	Code	Definition of Code / Notes
GS		Functional Group Header		
	GS01	Functional Identifier Code	'HN'	Claim Status Inquiry (277)
	GS02	Application Sender's Code	421406317	Code identifying party sending transmission; value should always be
	GS03	Application Receiver's Code	<Receiver Code>	Application Receiver Code for Clearinghouse
	GS04	Date	CCYYMMDD	Date of functional group creation
	GS05	Time	HHMM	Creation time
	GS06	Group Control Number		Identical to GE02
	GS07	Responsible Agency Code	'X'	Accredited Standards Committee X12. Value should always be 'X'.
	GS08	Version / Release / Industry Identifier Code	'005010X212'	Health Care Claim Status Inquiry and Response 276/277 Implementation Guide version
GE		Functional Group Trailer		
	GE01	Number of Transaction Sets Included	'1'	Transaction Count; value should always be '1'
	GE02	Group Control Number		Identical to GS06.

## Centene Health Plan Companion Guide 276 / 277

### ST-SE

This section indicates the beginning and the ending of a transaction set and provides the count of the transmitted segments including the beginning (ST) and ending (SE) segments. These segments also provide a Transaction Set Control Number which must be identical in each segment.

276:

Segment ID	Element ID	Name	Code	Definition of Code / Notes
ST		Transaction Set Header		
	ST01	Transaction Set Identifier Code	'276'	Claim Status Inquiry
	ST02	Transaction Set Control Number		Transaction Set Control Number. The transaction set control numbers in ST02 and SE02 must be identical.
SE		Transaction Set Trailer		
	SE01	Transaction Segment Count	<Total Segments>	Total number of segments included in a transaction set including ST and SE segments.
	SE02	Transaction Set Control Number		Transaction Set Control Number. The transaction set control numbers in ST02 and SE02 must be identical.

277:

Segment ID	Element ID	Name	Code	Definition of Code / Notes
ST		Transaction Set Header		
	ST01	Transaction Set Identifier Code	'277'	Claim Status Information
	ST02	Transaction Set Control Number		Transaction Set Control Number assigned by Centene. The transaction set control numbers in ST02 and SE02 must be identical.
SE		Transaction Set Trailer		
	SE01	Transaction Segment Count	<Total Segments>	Total number of segments included in a transaction set including ST and SE segments.
	SE02	Transaction Set Control Number		Transaction Set Control Number assigned by Centene. The transaction set control numbers in ST02 and SE02 must be identical.

# Centene Health Plan Companion Guide 276 / 277

---

## 7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

Centene is in the process of becoming CORE Phase II certified. 277 responses will comply with CORE Phase II requirements.

### 276 Request:

The 276 inquiry must include the patient's member ID number (Medicaid ID or SSN), last name, first name, date of birth, Claim Service Date, and Claim Number.

Centene processes all alpha characters, dashes, spaces, apostrophes, or periods. No other special characters are processed.

### 277 Response:

A 276 inquiry containing multiple TRN segments are not accepted by Centene. This will result in a 277 with the following value: E0:681 (Multiple claim status requests cannot be processed in real time).

## 8 ACKNOWLEDGEMENTS AND/OR REPORTS

276 Claim Status Requests submitted to Centene must be HIPAA compliant.

Centene will issue a 999 Acknowledgment for Health Care Insurance (005010X231A1) when a 276 request fails validation of WEDI SNIP Type 4 HIPAA edits.

Centene does not return positive acknowledgments for successful 276 requests (the 277 acts as the acknowledgment).

The purpose of the 999 Acknowledgment (Reject) is to identify critical errors within the 276 request based on the ASC X12N 276 (version 005010X212) Technical Report Type 3 guide. The submitter should review the 999 to determine what errors occurred.

## 9 TRADING PARTNER AGREEMENTS

To initiate the evaluation process for potentially becoming a Trading Partner with Centene, please contact us at EDIBA@Centene.com.

In your request, please include the following information:

- Company Name and Address
- Primary and Alternate Contact Information (Email Address and Phone Numbers)
- Supported Transactions (Current Environment)
- Proposed Transactions
- Current Compliance Levels (HIPAA/ANSI, etc.)

### TRADING PARTNERS

An EDI Trading Partner is defined as any Centene customer (provider, billing service, software vendor, etc.) that transmits to, or receives electronic data from Centene.

The EDI Trading Partner Agreement is located within Ramp Manager. The Trading Partner Agreement is related to the electronic exchange of information, whether the agreement is an entity or a part of a larger agreement, between each party to the agreement.

# Centene Health Plan Companion Guide 276 / 277

## 10 TRANSACTION SPECIFIC INFORMATION

A Transaction Loop is a group of related segments. Centene specific values are required for the elements which comprise the segments for the 276/277 Transaction Loops. The following section identifies these loops, their segments and their required element values:

- Loop 2100C (276) – Provider Name
- Loop 2100D (276) – Subscriber Name
- Loop 2200D (276) – Claim Status Tracking Number
  
- Loop 2100A (277) – Payer Name
- Loop 2100B (277) – Information Receiver
- Loop 2100D (277) – Subscriber Name
- Loop 2200B (277) – Information Receiver Status Information

### Loop 2100C (276) - Provider Name

Loop	Segment	Element	Name	Code	Definition of Code
2100C	NM1	NM101	Entity Identifier Code	'1P'	Payer
2100C	NM1	NM102	Entity Type Qualifier	'2'	Non-person entity
2100C	NM1	NM103	Organization Name		Provider Last or Organization Name
2100C	NM1	NM108	Identification Code Qualifier	'FI', 'XX', 'SV'	FI: TIN XX: NPI SV: Service Provider Number
2100C	NM1	NM109	Identification Code		Provider Identifier

### Loop 2100D (276) - Subscriber Name

Loop	Segment	Element	Name	Code	Definition of Code
2100D	NM1	NM108	Identification Code Qualifier	'MI'	MI: Member Identification Number

### Loop 2200D (276) - Claim Status Tracking Number

Loop	Segment	Element	Name	Code	Definition of Code
2200D	REF	REF01	Reference Identification Qualifier	1K	Payer Claim Number Qualifier
2200D	REF	REF02	Reference Identification		Payer Claim Control number – Required for search.
2200D	DTP	DTP01	Date/Time Qualifier	'472'	Date of Service
2200D	DTP	DTP02	Date Time Period Format Qualifier		D8 – Date expressed in CCYMMDD RD8 – Range of Dates CCYMMDD-CCYMMDD
2200D	DTP	DTP03	Date Time Period		Claim Service Date

## Centene Health Plan Companion Guide 276 / 277

---

### Loop 2100A (277) - Payer Name

Loop	Segment	Element	Name	Code(s)	Definition of Code
2100A	NM1	NM101	Entity Identifier Code	'PR'	Payer
2100A	NM1	NM102	Information Source Name	'2'	Non-Person Entity
2100A	NM1	NM108	Identification Code Qualifier	'PI'	Payer Identification Qualifier
2100A	NM1	NM109	Identification Code		68068 = Cenpatico 68069 = Centene Medical

### Loop 2100B (277) - Information Receiver

Loop	Segment	Element	Name	Code(s)	Definition of Code
2100B	NM1	NM109	Identification Code		Information on 276 transaction is sent back on 277 transaction.

### Loop 2200B (277) - Information Receiver Status Information

Loop	Segment	Element	Name	Code(s)	Definition of Code
2200B	STC	STC01-1	Health Care Claim Status – Industry Code		Health Care Claim Status Category 507 code.
2200B	STC	STC01-2	Status Code		Category 508 codes.

## Appendix

### Revision History

Revision Number	Date	Section	Notes
1.1	01/30/13	4 - CONNECTIVITY WITH THE PAYER/COMMUNICATIONS	Added system downtime
		7 - PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS	Added special character verbiage