

ELECTRONIC DATA SERVICES

# EDI Flash

**WPS**  
HEALTH INSURANCE®

**WPS**  
Medicare  
Part A&B

**TRICARE**



Proud to be supporting our Military Community

Fall 2010



## Getting Started with Electronic Claim Filing in Five Easy Steps

Making the decision to send your healthcare claims electronically puts you only five steps away from all the benefits EDI has to offer. Follow the five easy steps below to get started with EDI for your business. Staff at the WPS EDI department are here to help with the process, just a phone call away at 800-782-2680, or email us at [edi@wpsic.com](mailto:edi@wpsic.com).

- Step 1:** Choose your claim filing option
- Step 2:** Choose your submission method
- Step 3:** Register on WTPS
- Step 4:** Complete your EDI agreement form
- Step 5:** Complete testing

### To submit claims electronically you may need:

- Personal Computer
- Modem/telecommunications software or Internet access
- EDI software program

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*(Press CTRL key and click on heading to advance to subject.)*

## WPS Trading Partner System

All providers that choose to submit EDI transactions directly to WPS will need to complete a self-registration process on our WPS Trading Partner System (WTPS) to prepare for transaction testing and production claim submission. WTPS provides around-the-clock self registration capabilities for new EDI trading partners. WTPS also allows our trading partners to monitor the authorized entities, for which they bill, and to monitor and update the transaction types they submit to/receive from WPS.

WTPS is located at the following URL: <https://corpws.wpsic.com/apps/wtps-web/unauth/wtps.do>. After registration has been completed on WTPS, we will send you the appropriate submitter ID and password information to connect to our WPS Bulletin Board System through asynchronous telecommunications (or our secure FTP process if you select that option during registration), along with the appropriate users guide.

Providers without Internet access may register for EDI by contacting us at 1-800-782-2680.

WPS is providing an important new tool for our EDI trading partners. This free service – the WPS Trading Partner System (or WTPS) – provides around-the-clock self-registration capabilities for new EDI trading partners. WTPS also allows our trading partners to monitor the authorized entities, for which they bill, and to monitor and update the transaction types they submit to/receive from WPS.

You can obtain access to this application through the following URL: <https://corp-ws.wpsic.com/apps/wtps-web/unauth/wtps.do>. If you have any questions regarding the WPS Trading Partner System, please contact WPS Electronic Data Services at 800-782-2680.



### How to Register on Triwest.com

The following information will be needed to complete the registration process:

- Identify one person to register as the account administrator
- Have the administrator complete the registration process by providing the following information:

#### PROVIDER REGISTRATION - CREATE USER PROFILE

- To begin registration, enter the required information in the fields below and click Next.
- \* = Required
- To ensure no delays in your payments, do you have your NPI? If no, [click here](#).

First Name:	*	<input type="text"/>	Enter only alpha characters.
Last Name:	*	<input type="text"/>	
Title:	*	<input type="text"/>	
Telephone Number:		( <input type="text"/> ) <input type="text"/> <input type="text"/>	
Tax ID Number:	*	<input type="text"/>	
Physical Address Zip Code:	*	<input type="text"/>	
I am using:	*	<input type="radio"/> License Number <input type="radio"/> Medicare Certification Number <input type="radio"/> National Provider Identifier	
License Number:	*	<input type="text"/>	
Email Address:	*	<input type="text"/>	
Email Address (re-type):	*	<input type="text"/>	

## TRICARE For Life

### TRICARE For Life Electronic Claims Submission

WPS administers the TRICARE For Life program. We are pleased to announce that your TRICARE For Life claims may now be submitted electronically. While most TRICARE For Life claims are electronically crossed from Medicare, some are not – including situations such as the beneficiary having a Medicare Advantage Plan. We also understand that provider's practice management systems/software require claim submission in certain situations (i.e. if claim payments are not received within a certain number of days etc.). When these situations occur, WPS encourages you to take advantage of the benefits of electronic claim submission.

If you are a new clearinghouse/billing service or currently submit your TRICARE West Region claims electronically, please complete the [TRICARE for Life Billing Service/Clearinghouse Contractor Agreement \(PDF\)](#). You will be required to submit a test file of claims that are applicable to your practice (i.e., office visits, x-rays, lab work), so we can ensure your future production claims will process in an efficient manner.

If you are a provider that is new to WPS or that currently submits TRICARE West Region claims electronically, you should complete a [TRICARE For Life Provider agreement \(PDF\)](#) to enroll for electronic claim submission.

If you are a non-Medicare certified provider, you can now submit your claims electronically throughout online Internet claim entry application available at [www.tricare4u.com](http://www.tricare4u.com).



### DON'T FORGET TO SIGN UP FOR EFT

Electronic Funds Transfer allows your TRICARE for Life, WPS Commercial and Medicare Part B payments to be deposited electronically to your bank account.

Electronic Funds Transfer is now available for

**TRICARE West Region Network providers who are filing claims electronically and are receiving electronic remittance advice (ERA.)** This is the preferred method of payment by CMS.

### BENEFITS –

- ✓ Faster communication and payment notification/receipt
- ✓ Faster account reconciliation through electronic posting
- ✓ Automation of follow-up action
- ✓ Paperwork reduction
- ✓ Detailed information
- ✓ No waiting for the mail
- ✓ Elimination of lost checks and Standard Paper Remittances

To get set up for EFT for TRICARE West Region, TRICARE for Life or WPS Commercial you can contact and EDI marketing consultant at 1-800-782-2680 option 4, and Medicare please call: 952-885-2811 or you can download the authorization agreement for Medicare Part B at:

[http://www.wpsic.com/edi/pdf/edi\\_medb\\_eft.pdf](http://www.wpsic.com/edi/pdf/edi_medb_eft.pdf) & the WPS Commercial at [http://www.wpsic.com/edi/pdf/edi\\_wps\\_eft.pdf](http://www.wpsic.com/edi/pdf/edi_wps_eft.pdf) and TRICARE for Life at [http://www.wpsic.com/edi/tricare\\_forlife.shtml](http://www.wpsic.com/edi/tricare_forlife.shtml).

### TRICARE West Region offers Electronic Funds Transfer (EFT) for Network Providers

To receive your TRICARE payments quicker while reducing the amount of paper being used in your daily transactions, the TRICARE West Region and its claims processor, Wisconsin Physicians Service Insurance Corporation (WPS), are now offering Electronic Funds Transfer (EFT) to network providers filing their claims electronically and that utilize Electronic Remittance Advice (ERA).

#### **EFT**

EFT is a process that allows your payment to be deposited directly into your checking or savings account, and eliminates any delays you may encounter with mail procedures. EFT replaces the paper checks you currently receive for TRICARE West Region claim payments.

To be eligible to receive an EFT from TRICARE west region, you need to be a Network provider filing electronically and receive ERAs. An ERA is the electronic equivalent of the paper remittance advice (also known as Explanation of Benefits or EOB) and provides details on how your claims were processed.

In addition, it will be necessary to complete an EFT application form and send it to WPS to begin using EFT.

Once the completed agreement form is received, WPS will complete a pre-note process with your bank and work directly with your office on a smooth conversion to EFT.

#### **ERA**

An ERA provides information on claims payments, deductibles, cost-shares and copays. ERA can help decrease the time spent reconciling accounts receivable, eliminate manual data entry and paper processing, eliminate errors associated with manual posting of paper remittance advices and eliminate the need to store and file paper copies.

When you choose to receive ERAs, your files will be sent to you in the ANSI (American National Standards Institute) X12 835 format, version 4010A1, and can be downloaded from the WPS Bulletin Board System (BBS) or through [WPS's](#) secure FTP process. To make sure you have an opportunity to become accustomed to reconciling reimbursements via ERA, we will also provide paper copies of the EOBs for 45 days before we "Go Green" and stop sending paper copies.

To learn more about TRICARE West Region EFT or ERA, TRICARE West Region and WPS have created frequently asked questions documents with basic questions on both EFT and ERA. You may also contact one of the WPS EDI Marketing Consultants at 1-800-782-2680, option 4; visit the TriWest website at [www.triwest.com/provider](http://www.triwest.com/provider) or visit the WPS website at [http://www.wpsic.com/edi/tricare\\_sub.shtml](http://www.wpsic.com/edi/tricare_sub.shtml).

**TRICARE West Region** also accepts Secondary claims electronically. The paper explanation of benefits from the previous payer does not need to be sent with electronic claims, although certain information from the explanation of benefits will need to be reported within the electronic transaction. For example, the payer amount paid and allowed amount.

The 837 professional and institutional implementation guides provide instructions for submitting secondary claims electronically. The website address for the WPS TRICARE West Region companion guide is: [www.wpsic.com/edi/edi\\_home.shtml](http://www.wpsic.com/edi/edi_home.shtml).

Thank you for your cooperation with eliminating duplicate claim submissions to WPS.

Please do not send any WPS TRICARE For Life claims in with your TRICARE West Region file since they crossover electronically from Medicare.



### **WPS Provider Corner**

#### **WPS Commercial**

#### **New for 2010**

There is a new feature on the Provider Corner called ICES, Claims Editing System. WPS Commercial providers can use this tool to see how a claim will potentially process once it gets to the WPS System.

When using your username and password to enter the WPS provider corner on the WPSIC.com website you will see an exciting addition.

WPS now provides an on-line tool for providers to simulate code combinations and the ability to view edit results and rationale.

Providers will be able to enter procedure codes, modifiers, diagnosis codes, date of service, patient gender, date of birth and place of service parameters, in order to review results specific to the procedure codes being queried.

The results and rationale will be displayed and can be downloaded as a PDF. This allows greater transparency of the code combination edits being utilized at WPS.

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### **Secondary Claims**

#### **WPS & TRICARE**

Good news – when WPS is the secondary payer to Medicare, we will now automatically receive claims from Medicare Parts A and B.

How can you be sure a claim crossed over from Medicare to WPS? Your Medicare remittance advice should report a remark code of MA18, which states the claim information is also being forwarded to the patient's supplemental insurer.

If you feel a claim should have crossed over from Medicare but did not, please call the WPS Customer Service at 1-888-253-2694 to investigate.

As a reminder, when WPS is secondary to a payer other than Medicare, please send these claims to us electronically. Your practice management system vendor or clearinghouse should be able to assist you with electronic submission for these claims.

Please contact us with any feedback and suggestions you have at 800-765-4977. Coding combinations and results do not guarantee payment of claims. For benefit and coverage questions please contact the WPS Customer Service Department  
800-765-4977

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## Eligibility/Claim Status

### WPS Commercial

**WPS PROVIDER CORNER** is the Wisconsin Physicians Service Providers' Look up System for patient eligibility and claim status via the Internet. WPS PROVIDER CORNER is a real-time product. WPS PROVIDER CORNER is designed to enable immediate provider access to patient eligibility (with health benefit descriptions) and claim status information for WPS Commercial through the Internet.

This service is designed to benefit all providers who are submitting their claims to WPS. There is no cost to the provider for this service! WPS PROVIDER CORNER requires a browser with 128-bit encryption software. This secures the WPS PROVIDER CORNER site from outside access. You are given a user name and password when our office receives your signed enrollment.

Simply download a copy of the WPS PROVIDER CORNER agreement from our web site at [https://www.wpsic.com/edi/tools\\_p.shtml?mm=3](https://www.wpsic.com/edi/tools_p.shtml?mm=3) and mail, fax or e-mail your completed form to: WPS Electronic Data Services, P. O. Box 8128, Madison, WI 53708, Fax - 1-608-223-3824 or [EDI@wpsic.com](mailto:EDI@wpsic.com).

### WPS COMMERCIAL ELECTRONIC REMITTANCE NOTICE (ERA) CHANGE

WPS Commercial has recently made programming changes to restructure the implementation of check and EOB runs for both providers and subscribers so that all groups run through a common process. This change also affected the Electronic Remittance Notice (ERA), streamlining the volume of files providers receive.

This 'streamlining' affected how your checks were 'enveloped' to you. Rather than sending multiple envelopes (ISA-IEA) containing your check and payment information, all checks to the same submitter have been merged together into one envelope. Each check continues to be separated out within that envelope (ST-SE), with the 1000A N1 segment defining who payment is from, currently either Wisconsin Physicians Service, or Health Insurance Risk Sharing Plan (HIRSP)

WPS will soon further define this difference by including a REF segment at the 1000A segment. This REF segment will detail the specific 'group' for which payment is being made. For example, if the payment was for our MCDA group, 1000A REF 02 would contain the value of 'MCDA'.

Listed below are the current groups that will be reported in the 1000A REF segment. This list will change as various group based payments are added.

### 1000A REF 02 Values

- WPS
- HIRSP
- HIRSP Federal
- CCCW
- MCDA
- BLTS Groups

While you may not need to code to this level, we hope that the addition of this segment will assist you with any programming changes you may need.

### HIRSP Offset Notification

Effective November 1, 2010, the Health Insurance Risk Sharing Pool (HIRSP), will begin offsetting provider payments for unpaid refund requests. Providers will continue to be sent an initial request letter asking for payment to be made within 30 days. If there is no response, the next available HIRSP payment made to the provider will be 'offset'. This includes both paper check and electronic payments. The PRA – Provider Remittance Advice or ERA - Electronic Remittance Advice will contain information related to the customer for which the offset is being taken.

The offset amount within the ERA can be found in the PLB segment. To identify the offset, PLB03-1 will contain the value of 'WO' (Overpayment Recovery), and PLB03-2 will contain the Patient Account Number of the claim being offset.



## Are You Preparing for 5010?

### Medicare

5010 is an electronic data interchange version of the ANSI X12 formats for all HIPAA financial and administrative transactions for claims, remittance advice, eligibility, and claim status query and response transaction, plan enrollment, and referral authorization transactions. 5010 is for all covered entities (health care provider that conducts certain electronic transactions, clearinghouse or health plan). 5010 is not just for Medicare.

It is important to identify the differences between the current 4010A1 formats and the 5010 formats. You, your vendor and/or clearinghouse should perform a 4010A1 to 5010 gap analysis. You should identify: new content, deleted content, modified content and impact to business needs. Communicate and coordinate with your staff as well as your vendor, clearinghouse and payers to insure all impacts are identified early. Know your vendor's schedule. Know your trading partner's schedule. Test both internally and externally.

5010 Affects the following Business Processes:

- Claims (837 Institutional, Professional, and Dental)
- Claim Status (276/277)
- Claim Payment (835)
- Enrollment (834)
- Premium Payment (820)
- Eligibility (270/271)
- Referrals and Prior Authorizations (278)
- Claims Acknowledgements (277CA)
- Acknowledgement for Health Care Insurance (999)

**Medicare Schedule:** Medicare contractors will begin testing with submitters as early as January 2011. The 5010 formats must be used as of January 2012. It is important that you begin your 5010 preparations and discuss your readiness with your vendor and/or clearinghouse. Medicare will conduct the 837, 276/277, 277CA and 999 transactions in the 5010 format.

Medicare does not anticipate any extension on the 2012 compliance date. January 2012 is quickly approaching. You should start now to ensure a successful implantation. If you fail to prepare, it will be business and cash flow that will be affected.



### 5010 & 9-digit Code Reminder

As healthcare providers and billers prepare for the ANSI X12 version change from 4010 to 5010, the change in zip code requirements for 5010 could be easily overlooked.

The full nine digit zip code (zip + 4) must be provided in the 837 claim transactions at the billing provider and service facility level as these should represent the physical location of services.

If the 4-digit extension of your location is unknown, please contact your local United States Post Service for the 4-digit location id of your site. The United States Postal Service also offers an on-line search feature to obtain this information.

Just go to <http://zip4.usps.com/zip4/welcome.jsp> and enter the appropriate information for your location to determine what the 4-digit extension of your zip code is.

There is no default value assigned in lieu of the 4-digit extension, so obtaining this information is necessary for billing electronically in the x12 5010 .

Below is the element amongst multiple segments in which the 9-digit zip code is required.

Segment N4, element 03 (**N403**)  
Element name of **Postal Code**  
Data element number 116

**Professional • 837 • 005010X222**  
2010AA segment • N4 - BILLING PROVIDER CITY, STATE, ZIP CODE

2310C • N4 - SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE

2420C • N4 - SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE

**Institutional • 837 • 005010X223**  
2010AA • N4 - BILLING PROVIDER CITY, STATE, ZIP CODE

2310E • N4 - SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE

## We Are Now Partnered With Emdeon... Go Paperless!

### WPS Commercial

If you are currently a user of Emdeon, please feel free to include WPS for utilization of their website to access your WPS Provider Remittance Advice (PRA). You may also wish to go 'paperless' and see an actual image of the PRA as well as set up electronic funds transfer (EFT) to receive your payment more quickly.

If you would like to get set up for EFT, or discontinue receiving paper PRA copies, please contact the WPS Electronic Services Department at 1-800-782-2680, Option 4.

If you are not currently using Emdeon, you may wish to explore this option further at [www.emdeon.com](http://www.emdeon.com). This will allow you to view an image on your WSPProvider Remittance Advice (PRA) real-time.



### Has your office moved or changed address?

If so, please contact WPS Member Services for WPS Commercial at:

In-state	1-800-765-4977
Out-of-state	1-800-356-8051

Or, you may fax the change to: 608-223-5861.

### TRICARE West Region Non-Network Providers

Non-Network providers should contact the TRICARE Customer Service number at 1-888-874-9378.

### TRICARE West Region Network Providers

Network providers will need to contact their Network subcontractor for their state. If you have questions regarding whom your Network subcontractor might be please contact 1-800-782-2680 option 4 for assistance.

### Attention: Paper Claim Submitters

Is your office taking advantage of faster payments by filing your WPS Commercial, TRICARE and Medicare claims electronically? The statistics show an average processing time for paper claims was 9.8 days versus 4.8 days for electronic claims for Commercial claims, for Medicare 28 days versus 14 for electronic and for the TRICARE Western Region 11 days versus 2 for electronic claims.

Some additional benefits of electronic filing are ERA (Electronic Remittance Advice) and EFT (Electronic Funds Transfer).

For additional Information and enrollment materials, please contact one of our EDI Marketing Consultants at: 1-800-782-2680

- Option 4 TRICARE & WPS Commercial
- Option 8 Medicare

Or visit our web site at:

[https://www.wpsic.com/edi/get\\_started\\_p.shtml?mm=3](https://www.wpsic.com/edi/get_started_p.shtml?mm=3).



### EDI FAQ

- Q: My Clearinghouse rejected my claim, what can I do to fix it?**
- A: *The provider would have to contact the Clearinghouse for any Clearinghouse rejection; if the Clearinghouse rejects the claim WPS never received the claim.*
- Q: My claim was rejected for "Out of Jurisdiction zip not found on zip file."**
- A: *The claim was not sent to Triwest for the TRICARE West Region, it was sent to the North or South region, where the claim error's out for the sponsor's zip code not being listed in either of these regions. Either the provider has an incorrect payer id, or the Clearinghouse sent the claim in error.*

**Q: Where can I get a list of clearinghouses and/or billing services that are HIPAA compliant and will be submitting claims in my area?**

**A:** *We have a publication on our EDI website called the "EDI Connection." This can be found at the following website address:  
[http://www.wpsic.com/edi/publ\\_sub.shtml](http://www.wpsic.com/edi/publ_sub.shtml)*

**Q: If I'm currently submitting my WPS Commercial claims to WPS, can I submit my family care claims together in the same format using the same submission method?**

**A:** *Yes, however, the only additional information required on your family care claims is the service authorization number. Note: only one service code can be sent w/ one service auth per claim)*

**Q: If I choose the same submission method with my WPS Commercial claims, as my family care claims, am I required to complete a new enrollment agreement?**

**A:** *No, there is no additional enrollment process necessary and no new enrollment agreement to complete.*

**Q: Where can I find out more about EDI, and get help in determining the best electronic claims filing option for my office.**

**A:** *You can contact the WPS EDI Department by phone at 1-800-782-2680 Option 4, by fax at (608) 223-3824 or by mail at: WPS Electronic Data Services, P.O. Box 8128, Madison, WI 53708-8128. You can also visit our TRICARE EDI web site at [http://www.wpsic.com/edi/edi\\_home.shtml](http://www.wpsic.com/edi/edi_home.shtml).*

**Q: If I sign up for both ERA and EFT, when can I expect to see my EOB and when will my check be deposited in the bank?**

**A:** *If you are set-up for both ERA and EFT, you should receive your ERA in approximately two days prior to receiving your EFT. The ERA's are automatically sent the day of or the day after the claim processes. It takes **two days** for our bank to process the transfer to your bank account.*



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*If you have any questions regarding this publication please contact WPS Electronic Data Services at 1-800-782-2680:*

*Option 4 for TRICARE & WPS Commercial & Option 8 for Medicare.*