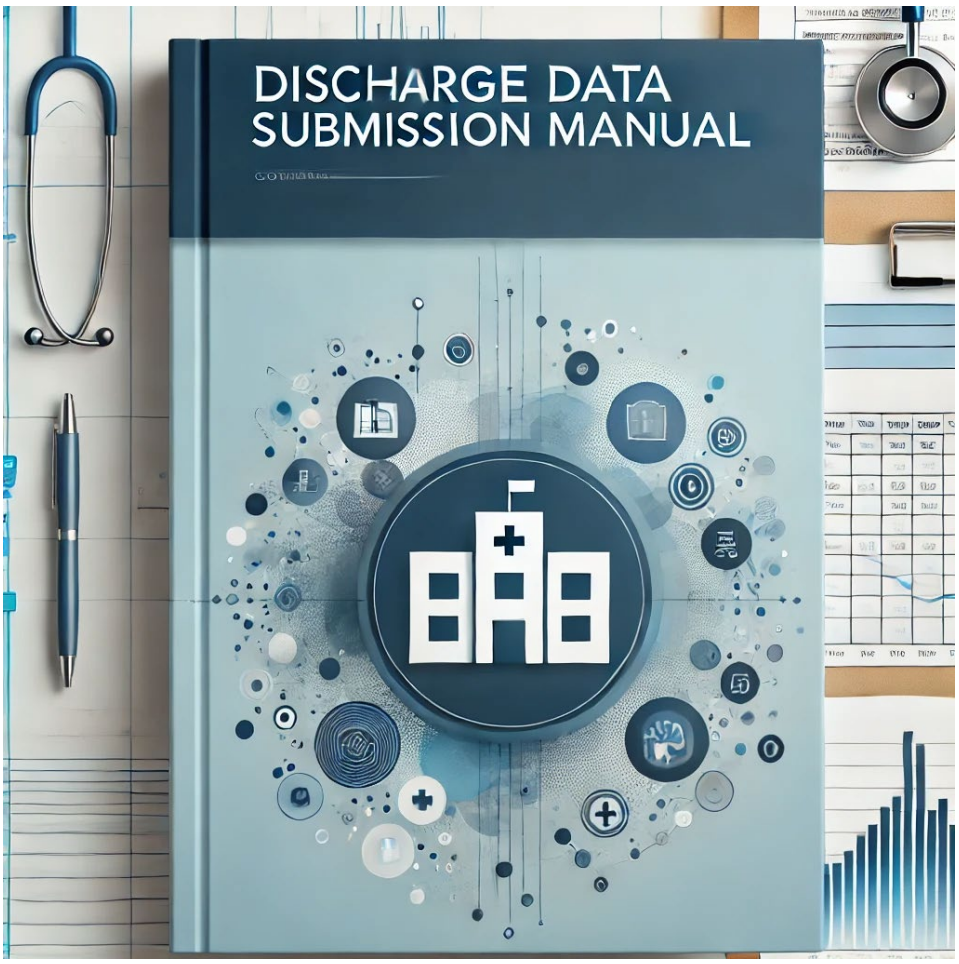
Discharge Data Submission Manual

Instructions Related to 837 Health Care Claim/Encounter Requirements and Companion Guide/Technical Specifications



JANUARY 1, 2025

WHA INFORMATION CENTER

5510 Research Park Drive, Fitchburg, WI 53711

WHAIC Staff and Contact Information

(608) 274-1820 (Madison area)

(800) 231-8340 (Toll Free)

WHA Information Center Staff:

Brian Competente

WHAIC Vice President and Privacy Officer

WHAIC Data Submissions and General Questions

Cindy Case, Director, Data Management and Integrity

Heather Scambler, Program Specialist (WIpop and Surveys)

Justin Flory, Healthcare Application Developer

Website: whainfocenter@wha.org

NOTICE:

The template is Copyright © 2011 by the Workgroup for Electronic Data Interchange (WEDI) and the Data Interchange Standards Association (DISA), on behalf of the Accredited Standards Committee (ASC) X12. All rights reserved. It may be freely redistributed in its entirety provided that this copyright notice is not removed. It may not be sold for profit or used in commercial documents without the written permission of the copyright holder. This template document is provided "as is" without any express or implied warranty. Not that the copyright on the underlying ASC X12 Standards is held by DISA on behalf of ASC X12.

The additional content within the template (and the derivative work) is copyright © 2017-2020 Wisconsin Hospital Association Information Center LLC. All rights reserved.

Preface:

This Companion Guide (CG) contains two types of data: Instructions for electronic communications with WHAIC and **supplemental information for creating transactions for statutorily required data submissions** while ensuring compliance with the associated ASCX12 IG (Transaction Instructions).

Disclaimer:

WHAIC strives to make the information in this document as current and accurate as possible at the time of writing and distribution. WHAIC makes no claims, promises, or guarantees about the accuracy, completeness, or adequacy of the contents of this document. The manual and contents contained herein are for educational purposes only and do not purport to provide legal advice or advice on constructing an 837claim file.

This document provides only the segments, loops and elements which are relevant to WHAIC data collection specifications as defined by the WI State Statute and mapped / defined by a field in WIpop. **This document is not intended to serve as a complete 837 reference, and not all requirements for a valid 837 file are specified**. Elements not mentioned in this document will be discarded by WHAIC prior to the file processing in WIpop, if supplied. For more information: http://store.x12.org/store/healthcare-5010-original-guides or http://www.wpc-edi.com

ABOUT US

WHA Information Center (WHAIC) is dedicated to collecting, analyzing and disseminating complete, accurate and timely discharge data and reports about charges, utilization, and quality of care provided by Wisconsin hospitals, ambulatory surgery centers and other healthcare providers.

WHAIC is a wholly owned subsidiary of the **Wisconsin Hospital Association** and was incorporated on October 1, 2003. WHAIC began collecting data in January 2004 under contract with the Wisconsin Department of Administration.

The WHAIC Web site contains the latest information about WHAIC, hospital and ASC data reporting process, and other data collection events and publications. The WHAIC website also contains a Resource Tab related to Wisconsin legislation and your responsibilities to submit data. Chapter 153, Admin Code 120

As a subsidiary to the Wisconsin Hospital Association (WHA) we encourage all WHAIC data submitters to utilize the resources available to them as member hospitals and participate in educational opportunities and events such as Advocacy Day, Educational Webinars as well as other events located on the WHA website.

In addition to collecting discharge data, WHAIC staff also collects and posts hospital rate increases, Milwaukee County Hospital Utilization Data, hospital's annual and fiscal data, uncompensated care data, and other system survey information.

We Can Help You...

- Quickly turn data into actionable insights for timely and reliable decision-making with our visualization tools, dashboards, reports, and custom analytics.
- Leverage your existing data platform and analytics investment by providing our raw data sets in easy-to-use formats.
- Realize the benefits of a dedicated data program with tools and services that supplement your existing resources and infrastructure – even if you have none.
- Analyze data to evaluate health care services, patient populations, utilization, staffing, financial and market performance and much more.

CONTENTS

About Us 4

1. Data Submission with a HIPAA Complaint 837 claims file format 8

1.1 Background and Overview of HIPAA Legislation 8

1.2 Intended Audience and Use 8

1.3 References information 9

1.4 Communication with External Sources and Data Set Release/Caveats 9

2. Discharge Data Collection Overview ..... - 10 -

2.1 Discharge Data Parameters and Limitations ..... - 11 -

2.2 Inpatient Discharge Records (INP) ..... - 11 -

2.3 Outpatient (Ambulatory) Surgery Records (OPS) POS = 1 ..... - 12 -

2.4 Emergency Room/Department Records (ER/ED) POS = 2 ..... - 13 -

2.5 Observation Records (OBS) POS = 3 ..... - 13 -

2.6 Other Hospital Outpatient Records (OHO) POS 4-6 ..... - 13 -

2.7 Provider-based location (PBL) ID ..... - 14 -

3. WIpop Access and Data Submission ..... - 15 -

3.1 Access to WIpop ..... - 15 -

3.2 Inactive Account Policy ..... - 18 -

3.3 Security of Data Submission ..... - 18 -

3.4 Testing HIPAA Compliant 837 File ..... - 18 -

3.5 How to Submit Data in WIpop ..... - 18 -

3.6 Request an Extension ..... - 22 -

4. Specific Business Rules, Mapping and Limitations ..... - 23 -

4.1 Unique (Encrypted) Case Identifier (UCID) ..... - 23 -

4.2 Race and Ethnicity ..... - 23 -

4.3 Expected Source of Payment/Payer Mapping ..... - 23 -

4.4 Type of Bill (TOB) ..... - 24 -

4.5 Revenue Codes ..... - 24 -

4.6 External Cause of Injury (ECI) Codes ..... - 25 -

4.7 Language ..... - 25 -

5. 837 Data Submission and Technical Requirements ..... - 27 -

5.1 Interchange Control Header (ISA06) ..... - 27 -

5.2 WHAIC 837 File Handler and De-Identification Program ..... - 27 -
5.3 Delimiters in the Segment of the file ..... - 28 -
5.4 Special Characters in the Claims Data ..... - 28 -
5.5 Mapping Rules and 837 File Specifications ..... - 28 -
5.6 **837I** (Hospital) Institutional Claims Data Specifications ..... - 29 -
5.7 837P (ASC) Professional Claim Submissions - Freestanding ASC (FASC) ..... - 45 -
A. Interchange Control Header (ISA06) ..... - 45 -
B. Delimiters in the Segment of the file ..... - 45 -
C. 837P (ASC) Professional Claim Submissions - ASCs ..... - 46 -
5.8 837R (Hospital) Reporting Claim Submissions ..... - 54 -
6. Batch Details, Validation and Affirmation Process 67
6.1 File (Batch) Failures 67
- Removing Duplicates from File Submission 67
6.2 Batch File Edits 68
6.3 Correcting Edits 69
6.4 Data Validation (Obtaining and viewing reports) 69
6.5 Affirmation Statement 71
6.6 How to Create/Run a Report 71
6.7 Batch File Alerts 72
7. APPENDICES 74
7.1 Facility List (Hospital and ASCs) 74
7.2 Race and Ethnicity Codes 82
7.3 Language Codes 85
7.4 Expected Source of Payment and 837 Payer Mapping 87
- 7.4.1. Claim Filing Indicator Code 90
- 7.4.2. Payer ID number 92
- 7.3.3 Alerts 94
7.5 Type of Bill (TOB) 98
7.6 Place of Service (POS) or Type of Encounter **Hierarchy** 101
7.7 WIPOP Coding Guidelines and Definitions for Data Submission 103
- 7.7.2 Revenue Codes 105
7.8 Point of Origin for Admission or Visit 120
- 7.8.1 Priority (Type) of Admission or Visit 121
- 7.8.2 Code Structure for Newborns 121

7.9 Patient Discharge Status Codes 123
7.10 Edit Codes and Descriptions 126
- 7.10.1 Alert Codes 138
7.11 WIpop Registration 141
WIpop Roles 143
7.12 Data Dictionary 144
7.13 Manual Data Entry Instructions 151
7.14 Marital Status Codes 153
7.15 Terms, Acronyms, and Definitions 154
7.16 Frequently Asked Questions (FAQ) 157
- EDI Health Care Claim Transaction set (837) 160
7.17 Changes to this document 170

1. DATA SUBMISSION WITH A HIPAA COMPLAINT 837 CLAIMS FILE FORMAT

Wisconsin Hospital Association Information Center (WHAIC) collects data from **Medicare Certified Wisconsin Hospitals and Freestanding Ambulatory Surgery Centers.**

Pursuant to Chapter 153, Wisconsin Statutes , the WHAIC has been authorized by the Wisconsin Department of Administration to collect and report hospital and freestanding ambulatory surgery center data. WHAIC collects data quarterly and produces public use data sets, custom data sets and four annual publications.

Chapter 153 of the Wisconsin Statutes directs what information must be submitted to WHAIC. In 2016 sections of the statute were updated when the Wisconsin Health Care Data Modernization Act was passed. The Health Care Data Modernization Act removed outdated provisions in Chapter 153 and included an opportunity to bring Chapter 153 into greater alignment with the national ANSI 837 standard.

Hospitals and FASC, herein referred to as ("facilities") must submit data in a modified HIPAA Complaint 837 claims file format. Data collection is based on valid HIPAA ASC X12 837I and 837P transactions (including 837R – Reporting) electronic data interface reporting (EDI) format.

The WHAIC WIpop (Wisconsin Inpatient and Outpatient) Data Submission Manual and Technical Specification Guide follows the national ANSI 837 standards and provides specifications for the submission of inpatient and outpatient hospital data, and FASC data to the WHAIC. Failure to comply with the requirements outlined in the Statutes, or submission deadlines as referenced in this Companion Guide, may result in a non-compliance letter to the Wisconsin Department of Administration and may include significant penalties and forfeitures.

The Statute also states facilities that use a third-party vendor shall provide a copy of the trading partner agreement if the service of a third-party vendor is used to prepare and submit patient claims/records to WHAIC. As per *Wisconsin Administrative Code DHS 120.12 (5) (b) 6 (a) and 120.13(2) (d) 1. "To ensure confidentiality, hospitals and freestanding ambulatory surgery centers using qualified vendors to submit data shall provide to [WHAIC] **an original trading partner agreement that has been signed and notarized by the qualified vendor and the hospital or ambulatory surgery center**. 2. Hospitals and [ASC] shall be accountable for their qualified vendor's failure to submit and edit data in the formats required by [WHAIC]".*

1.1 Background and Overview of HIPAA Legislation

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 carries provisions for administrative simplification. This requires the Secretary of the Department of Health and Human Services (HHS) to adopt standards to support the electronic exchange of administrative and financial health care transactions primarily between health care providers and plans. HIPAA directs the Secretary to adopt standards for transactions to enable health information to be exchanged electronically and to adopt specifications for implementing each standard HIPAA serves to:

Create better access to health insurance.
Limit fraud and abuse.
Reduce administrative costs.

The HIPAA regulations at 45 CFR 162.915 require that covered entities not enter into a trading partner agreement that would do any of the following:

- Change the definition, data condition, or use of a data element or segment in a standard.
- Add any data elements or segments to the maximum defined data set.
- Use any code or data elements that are marked "not used" in the standard's implementation specifications or are not in the standard's implementation specification(s).
- Change the meaning or intent of the standard's implementation specification(s).

1.2 Intended Audience and Use

The intended audience for this document is hospitals and ASCs that are required to submit discharge data to WHAIC in the correct EDI format.

Compliance according to ASC X12 requirements include specific restrictions that prohibit trading partners from:

- ✓ Modifying any defining, explanatory, or clarifying content in the implementation guide.
- ✓ Modifying any requirement contained in the implementation guide.

The Transaction Instruction component of this companion guide must be used in conjunction with an associated ASC X12 Implementation Guide. The instructions in this companion guide are **not intended to be stand-alone requirements documents**. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guides and is in conformance with ASC X12's Fair Use and Copyright statements.

1.3 References information

The WHAIC 837 claims file format used to submit discharge data into WIpop draws from the American National Standards Institutes (ANSI) standards and the Accredited Standards Committee X12, National Electronic Data Interchange Transaction Set Implementation Guide, Health Care Claim: For more information: http://store.x12.org/store/healthcare-5010-original-guides or http://www.wpc-edi.com

- 837 Institutional Health Care Claim – ASC X12N 837 (005010X223A2)
- 837 Professional Health Care Claim – ASC X12N 837 (005010X222A1)
- 837 Reporting Health Care Claim – ASC X12 837 (005010X225A2)

Only the sections required by the State of Wisconsin Statutory Requirements as defined in Chapter 153 and collected by WHAIC or situational ANSI 837 Institutional and Professional Guide sections are reproduced in this manual.

1.4 Communication with External Sources and Data Set Release/Caveats

If you or a representative from your facility receives inquiries or questions about the data, data sets, or publications we produce, refer the external party to the WHAIC Vice President or Director of Operations. WHAIC would like the opportunity to address any questions your facility may receive from an external party (newspaper, insurance company, researcher, or other news outlet, etc.)

We do not re-issue quarterly data sets to correct errors once the data sets have been made public. We maintain a comprehensive list of caveats to the data sets that informs data users of any data submission errors that were brought to light after the data sets were released. The caveats are intended to explain any changes in data or omissions and include as much detail as possible about the type of error, the facility involved, the quarter involved, and, if possible, a summary of the correct data. Exceptions to this general policy may be made when the error is a result of our own internal processing or transformation of raw data into data sets, in recognition of our warranty to data consumers that the data is an accurate reflection of the data submitted to us.

Data that is caveated or misrepresented is not added or corrected in other data sources provided by WHAIC such as KAAVIO, PricePoint, Check Point or any of the publications.