

### **Table of Contents**

| Overview: Reports                               | 2  |
|---|----|
| Step 1: Saving the Acknowledgement Files        | 2  |
| Step 2: Reading the 999 Acknowledgment Files    |    |
| Step 3: Reading the 277CA Files.                | 6  |
| Step 4: Understanding the Edits                 | 9  |
| Locating the Edit Information                   | 9  |
| Understanding the Codes                         | 10 |
| Using the Tool                                  | 11 |
| Results   | 13 |
| Appendix A: Adjusting Archived Reports Settings | 14 |





### **Overview: Reports**

PC-ACE sends claim files in the 5010A1 file format. Both an X12 999 Acknowledgment and an X12 277CA (Claim Acknowledgment) will be returned in response to version 5010A1 claim files. These acknowledgments will need to be translated by the PC-ACE software to make them readable.

### **Step 1: Saving the Acknowledgement Files**

In order for PC-ACE to read 999 or 277CA files, they must be saved into the proper subdirectory within the WINPCACE folder.

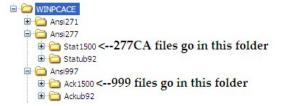
To access the PC-ACE subdirectory, open "This PC" (Windows 10) icon located on either your desktop or "Start" menu and open "Local Disk (C:\)" drive and the "WINPCACE" folder. (C:\WINPCACE\).

277CA files need to be placed in the folder "ANSI277" and in the sub-folder "Stat1500".

C:\WINPCACE\Ansi277\Stat1500

999 files need to be placed in the folder "Ansi997" and in the sub-folder "Ack1500".

C:\WINPCACE\Ansi997\Ack1500



The files can be dragged and dropped into this folder or saved directly to these folders when downloading.

**Note**: If you are unsure where the files are currently being saved when downloaded, you may need to contact your Network Service Vendor for assistance in identifying the folder.

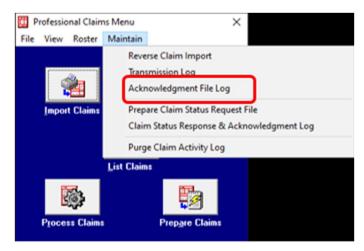
### Step 2: Reading the 999 Acknowledgment Files

Once the files have been moved to the proper folder location, open the PC-ACE software and go to the "Professional Claims Menu".

Select the "Maintain" menu item.







Choose "Acknowledgement File Log" as indicated above in order to read the 999.

The following screen will display.



This is a listing of all currently imported 999 files.

**Note:** Once the "Acknowledgement File Log" screen is opened, the 999 file originally saved in the C:\WINPCACE\Ansi997\Ack1500 folder is removed. The last column gives the "Archive File" name, which is the name of the imported copy of the 999 stored in a subdirectory of the Ack1500 folder named "Archive." (See Appendix A for instructions on how to adjust the length of time archived copies are maintained on your system.)

From the "Acknowledgement File Log" screen, select the 999 file you want to display and select "View Report."

The following report will display.





#### ABILITY | PC-ACE® ANSI-997/999 ACKNOWLEDGMENT REPORT

File Date/Time: 07/10/2023 17:16:00 Serial No: 000004

```
Acknowledgment Created (GS04/05): 07/10/2023 17:16
Sender Code (GS02):
                                      PCACEV
Receiver Code (GS03):
                                      TEST5010
Ack Transaction Set Control No (ST02): 0001
Prepare Serial Number:
                                     000004
Group Control Number (AK102):
                                     4001
Version/Release/Industry Code (AK103): 005010X222A1
Transaction Set Control Number (AK202): 000000001
Implementation Convention Ref (AK203): 005010X222A1
Segment In Error (IK301): HI Occurrence: 22 Loop: 2300
Segment Error Code: 8 - Segment Has Data Element Errors
 Business Unit Identifier (CTX01): CLM01: 989876765454 (ANSI-837)
Field In Error (IK401): HI01; 2
Data Element Reference Number (IK402): 1271
Data Element Error: 1 - Required data element missing
Transaction Set Status (IK501):
                                     R - Rejected
Transaction Set Syntax Errors (IK502-IK506):
 5 - One or More Segments in Error
Functional Group Status (AK901):
                                     R - Rejected
Transaction Sets Included (AK902):
Transaction Sets Received (AK903):
Transaction Sets Accepted (AK904):
```

The sample above is the 999 for a test claim with missing diagnosis codes. Since at least one (1) diagnosis code is required for Medicare DME claims, the entire file was rejected on the 999.

(This report can be printed; however, the icon for printing is not displayed in the screenshot above.)

Following is a table to provide more information on how to read the above report.

| Report Field            | Description                           |
|-------------------------|---------------------------------------|
| File Date/Time          | Date the file was created             |
| Acknowledgement Created | Date the acknowledgement was returned |
| Sender Code             | DME MAC Payer ID                      |





| Report Field                                     | Description  |  |  |  |
|--|--|--|--|--|
| Receiver Code                                    | Trading Partner/Submitter ID   |  |  |  |
| Ack Transaction Set Control No                   | Control number used to identify the transaction set  |  |  |  |
| Prepare Serial Number                            | Serial number the software gave your file when it was prepared   |  |  |  |
| Group Control Number                             | Control number used to identify the related Functional Group   |  |  |  |
| Version/Release/Industry Code                    | Transmission version & release identification code   |  |  |  |
| Transaction Set Control Number                   | Control number used to identify the related transaction set  |  |  |  |
| Implementation Convention Ref                    | Additional transmission format identification  |  |  |  |
| Segment in Error (If applicable) Occurrence Loop | Identifies where the error occurred in the claim file,<br>Segment of the error, occurrence of the error and the<br>loop it occurred. |  |  |  |
| Segment Error Code (If applicable)               | Error Code and Description   |  |  |  |
| Business Unit Identifier (If applicable)         | Patient's control number which received the error. Not all errors will give this information.  |  |  |  |
| Transaction Set Status                           | Indicates if the transaction set was accepted or rejected  |  |  |  |
| Transaction Set Syntax Errors (If applicable)    | Error code and description (if the set was rejected).  |  |  |  |
| Functional Group Status                          | Status of functional group (accepted, rejected, received a warning, or received a partial rejection).                                |  |  |  |
| Transaction Sets Included                        | Number of transaction sets in the file.  |  |  |  |
| Transaction Sets Received                        | Number of transaction sets received in the file.   |  |  |  |
| Transaction Sets Accepted                        | Number of transaction sets accepted in the file.   |  |  |  |

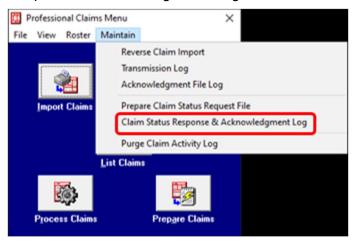


Last Revision: July 12, 2023 Page 5 of 15

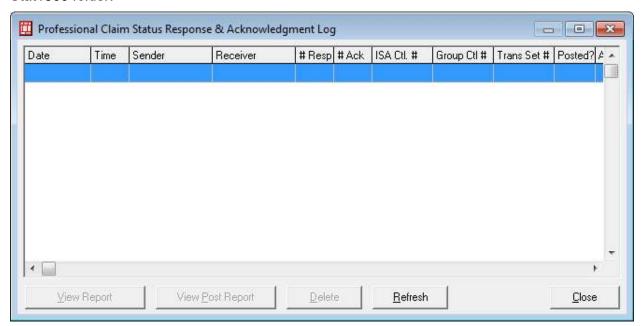


### **Step 3: Reading the 277CA Files**

To read the 277CA, from the "Professional Claim Menu", select "Maintain" and "Claim Status Response & Acknowledgement Log".



The "Claim Status Response & Acknowledgement Log" screen will display. This screen works exactly like the screen for the 999s, including the "Archive File" and subdirectory within the Stat1500 folder.



Select a file and select "View Report" to display a printable copy of the 277CA.

The following example is Page 1 of a thirteen (13) page report.





#### ABILITY | PC-ACE® ANSI-277 CLAIM ACKNOWLEDGMENT REPORT

File Date/Time: 07/10/2023 17:25:00

Acknowledgement Created (GS04/05): 07/10/2023 17:25

Sender Code (GS02): PCACEV
Receiver Code (GS03): TEST5010

\*\*\* Transmission Acknowledgement # 1 \*\*\*

Information Source ID: 17013 Name: DME MAC JURISDICTION B

Transmission Receipt Control #: 2023071017255749722

Receipt Date: 07/10/2023 Process Date: 07/10/2023

\*\*\* Information Receiver Acknowledgement # 1 \*\*\*

Information Source ID: 17013 Name: DME MAC JURISDICTION B

Receiver Name: SUBMITTER NAME ID: TEST5010

Receiver Info:

Receiver Trace #: 000004

Total Accepted Quantity: 4

Total Rejected Quantity: 4

Total Accepted Amount: \$790.00

Total Rejected Amount: \$1,000.00

Receiver Status:

Status Date: 07/10/2023

Total Submitted Charges: \$1,790.00

Acknowledgement #1:

Category: Al - Acknowledgement/Receipt-The claim/encounter has been

received. This does not mean that the claim has been

accepted for adjudication.

Status: 19 - Entity acknowledges receipt of claim/encounter. Usage:

This code requires use of an Entity Code.

Entity: PR - Payer

\*\*\* Provider of Service Acknowledgement # 1 \*\*\*

Information Source ID: 17013 Name: DME MAC JURISDICTION B

Receiver Name: SUBMITTER NAME ID: TEST5010



Last Revision: July 12, 2023 Page 7 of 15



Below is a table to provide more information on how to read the above report.

| File Information                       | Description   |  |  |  |  |
|--|---|--|--|--|--|
| File Date/Time                         | Date of submitted file  |  |  |  |  |
| Acknowledgement Created                | Date the acknowledgement was created  |  |  |  |  |
| Sender Code                            | Payer ID used to create the file  |  |  |  |  |
| Receiver Code                          | Trading Partner/Submitter ID  |  |  |  |  |
| Transmission Acknowledgement #         | Number of the Transmission Acknowledgement in the file                                |  |  |  |  |
| Information Source ID/Name             | DME MAC Jurisdiction ID and Name in the file  |  |  |  |  |
| Transmission Receipt Control #         | Control Number for the transmission   |  |  |  |  |
| Receipt Date                           | Date the file was received  |  |  |  |  |
| Process Date                           | Date the file was processed   |  |  |  |  |
| Information Receiver Acknowledgement # | Number of the receiver information provided in the file                               |  |  |  |  |
| Information Source ID/Name             | DME MAC Jurisdiction ID and Name in the file  |  |  |  |  |
| Receiver Name/ID                       | The name and Trading Partner/Submitter ID of the file submitter                       |  |  |  |  |
| Receiver Info                          | Information about this transaction set  |  |  |  |  |
| Receiver Trace #                       | Control number used to identify the transaction set                                   |  |  |  |  |
| Total Accepted Quantity                | Total of claims accepted in the set   |  |  |  |  |
| Total Rejected Quantity                | Total of claims rejected in the set   |  |  |  |  |
| Total Accepted Amount                  | Total charge amount accepted in the set   |  |  |  |  |
| Total Rejected Amount                  | Total charge amount rejected in the set   |  |  |  |  |
| Receiver Status                        | General information   |  |  |  |  |
| Status Date                            | Date the file was received  |  |  |  |  |
| Total Submitted Charges                | Total charge amount submitted in the set  |  |  |  |  |
| Acknowledgement #                      | Edit number being communicated  |  |  |  |  |
| Category                               | Code indicating the type of edit received and description                             |  |  |  |  |
| Status                                 | More detailed information about the edit – this can be accompanied by an Entity Code. |  |  |  |  |





| File Information                         | Description  |
|--|--|
| Provider of Service<br>Acknowledgement # | Number of the billing provider being referred to in the file |
| Information Source<br>ID/Name            | DME MAC Jurisdiction ID and Name in the file                 |
| Received Name/ID                         | The name and Trading Partner/Submitter ID of the file        |

<sup>\*\*\*</sup> Billing Provider and Patient Information will be laid out in a similar fashion. \*\*\*

Accepted claims will be assigned an Internal Claim Number (ICN), also referred to as a Claim Control Number (CCN), for tracking the claim at the DME MAC Jurisdiction. The ICN will consist of the Payer ID for the DME MAC Jurisdiction which will process the claim in the first 5 numbers followed by the ICN used for tracking the claim.

ICN: 180032029800003000

Payer ID: 18003 -- ICN/: 2029800003000

### **Step 4: Understanding the Edits**

The CEDI 277CA Edit Lookup Tool on the NGS CEDI Web site provides easy-to-understand descriptions associated with the edit code(s) returned on the 277CA for 5010A1 claims. The tool allows you to enter the error codes reported on the 277CA and receive back the possible explanations for the cause of the edit.

#### Locating the Edit Information

Locate your error codes reported on your 277CA file.

In PC-ACE, you will look for a rejected acknowledgement.

```
Acknowledgement #1: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as specified in the Status details and has been rejected.

Status: 507 - HCPCS
```

Rejected acknowledgements on a single charge line may be individual rejection codes or may need to be combined. Make sure you have all of the edit information in order for the tool to return accurate information.

#### **Individual Edits:**





Acknowledgement #1: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as

specified in the Status details and has been rejected.

Status: 698 - Form Type Identification

Acknowledgement #2: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as

specified in the Status details and has been rejected.

Status: 699 - Question/Response from Supporting Documentation Form

#### **Combination Edit:**

Acknowledgement #1: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as

specified in the Status details and has been rejected.

Status: 510 - Future date. Note: At least one other status code

is required to identify the data element in error.

Acknowledgement #2: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as

specified in the Status details and has been rejected.

Status: 187 - Date(s) of service.

#### **Understanding the Codes**

These are three (3) types of codes returned in an edit on the 277CA:

- Claim Status Category Code (CSCC)
- Claim Status Codes (CSCs)
- Entity Identifer Code (EIC)

Not all of these types of codes will be returned in all edit rejections.

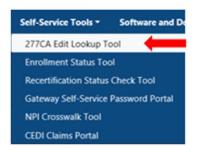
If you are combining edit codes, the Claim Status Category Code (CSCC) and Entity Identifier Codes (EICs) will only be entered into the tool once. A combination edit will have multiple Claim Status Codes (CSCs). All Status codes must be entered into the edit tool to pull the correct results.





#### **Using the Tool**

To use the CEDI 277CA Edit Lookup Tool, select "277CA Edit Lookup Tool" under Self-Service Tools on the CEDI Web site <a href="https://www.ngscedi.com">https://www.ngscedi.com</a>.



Enter the edit information into the 5010A1 277CA Reject Code Lookup Tool.

#### Example 1:

Information from the 277CA acknowledgement file:

```
Acknowledgement #1: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as specified in the Status details and has been rejected.

Status: 510 - Future date. Note: At least one other status code is required to identify the data element in error.

Acknowledgement #2: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as specified in the Status details and has been rejected.

Status: 187 - Date(s) of service.
```

With this code, the below information would be entered into the edit tool:

```
A7 = Category / CSCC
510 = Status / CSC
187 = Status / CSC
```

Notice the repeating edits would not be used.



### 5010A1 277CA Reject Code Lookup Tool

| CSCC * | A7    |
|--------|-------|
| CSC *  | 510   |
| CSC    | 187   |
| CSC    |       |
| EIC    |       |
|        |       |
| Search | Reset |

The CSCC and the first CSC fields are required. However, it is okay to leave the second and third CSC fields as well as the EIC field blank if the code being researched does not contain these types of codes.

#### Example 2:

Information from the 277CA acknowledgement file:

```
Acknowledgement #1: (Rejected)

Category: A7 - Acknowledgement/Rejected for Invalid Information

- The claim/encounter has invalid information as specified in the Status details and has been rejected.

Status: 507 - HCPCS
```

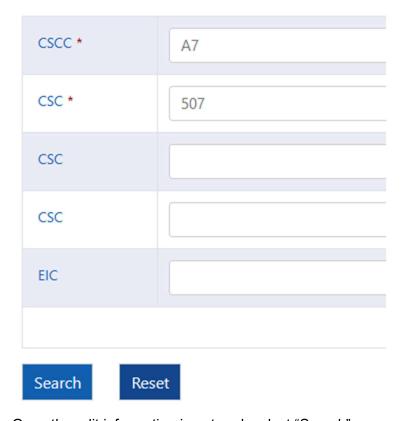
With this code, the below information would be entered into the edit tool:

```
A7 = Category / CSCC
507 = Status / CSC
```





### 5010A1 277CA Reject Code Lookup Tool



Once the edit information is entered, select "Search".

#### **Results**

The results will be returned below the search fields and will display all possibilities for the cause of the edit.





| EDIT Code                 | cscc | CSC | csc | csc | EIC | DESCRIPTION   |
|---------------------------|------|-----|-----|-----|-----|---|
| X222.416.2400.HCP10.020   | A7   | 507 |     |     |     | When Product or Service ID Qualifier = "HC", Procedure Code must be a valid HCPCS Code on the Date of Service when DTP01 = "472". Questions regarding the correct procedure code and/or modifier to submit on a claim should be directed to the DME MAC where the claim would be processed based on the patient's state code in the address provided on the claim.  |
| X222.351.2400.5V101-2.020 | A7   | 507 |     |     |     | The Procedure Code must be a valid HCPCS<br>Code for the Service Date. (DTP01 = "472")  |
| X222.351.2400.5V101-2.030 | A7   | 507 |     |     |     | The HCPCS must be valid for the date of service and the modifiers attached must be a valid combination. Verify that all required modifiers are sent if modifiers are required. Questions regarding the correct procedure code and/or modifier to submit on a claim should be directed to the DME MAC where the claim would be processed based on the patient's state code in the address provided on the claim. |

Note there may be more than one cause for the same edit combinations but not all explanations may have caused the edit. CEDI recommends reading through the possible causes to determine which reason caused the edit to be returned on the 277CA.

### **Appendix A: Adjusting Archived Reports Settings**

The length of time archived copies of 999 and 277CA files are kept can be adjusted. From the main menu of PC-ACE, go to "File", "Preferences", and click the "Misc" tab.

You can adjust the first two fields to indicate how long you would like to keep the archived reports.

The duration has been set to 1000 days in the example below.





