National Government Services, Inc.



CEDI 5010A1 Front End Acknowledgements and Reports Manual December 2024

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Overview

National Government Services, Inc. is the Common Electronic Data Interchange (CEDI) for Durable Medical Equipment (DME) Medicare Administrative Contractor (MAC) electronic transactions. CEDI creates a Transaction Response (TRN) Report as well as the Health Insurance Portability & Accountability Act (HIPAA) X12 5010A1 999, TA1 Interchange Acknowledgement and 277 Claims Acknowledgement (277CA) for transactions received from CEDI Trading Partners.

This manual provides a description of the files and reports returned by CEDI, instructions on what to do when the file is received and examples of the files.

The following files are included in this manual:

- TRN Report
- 999 Acknowledgment File
- TA1 Transaction Acknowledgment
- 277CA File

CEDI Acronyms are listed for reference in the Overview at the beginning of the document.

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List of CEDI Acronyms

ACRONYM	DESCRIPTION		
CCN	Claim Control Number Number assigned to claims accepted by CEDI to be used to track claims processed by the DME MACs *Also referred to as internal control number (ICN)		
CEDI	Common Electronic Data Interchange		
CMS	Centers for Medicare & Medicaid Services		
DIF	DME Information Form A form to support the need of a DME item		
DME	Durable Medical Equipment Medical equipment used at the patient's place of residence contributing to a better quality of life and can be used over an extended period of time		
DME MAC	Durable Medical Equipment Medicare Administrative Contractor		
DMEPOS	Durable Medical Equipment, Prosthetics, Orthotics, and Supplies		
EDI	Electronic Data Interchange		
HCPCS	Healthcare Common Procedure Coding System		
HICN (HIC)	Health Insurance Claim number		
	NOTE: Effective January 1, 2020, the HICN cannot be submitted on claims. The MBI must be submitted as the beneficiary ID.		
HIPAA	Health Insurance Portability and Accountability Act Requires the establishment of national standards for electronic health care transactions and national identifiers for providers, health insurance plans, and employers		
ICN	Internal Control Number *Also known as the claim control number (CCN) and returned on the 277CA produced by CEDI		
MAC	Medicare Administrative Contractor		

ACRONYM	DESCRIPTION		
MBI	Medicare Beneficiary Identifier NOTE: Effective January 1, 2020, only the MBI can be submitted as the beneficiary identifier.		
NPEAST	National Provider Enrollment Eastern Region Assigns the unique Medicare DMPOS PTAN for suppliers in the eastern region		
NPI	National Provider Identifier		
NPWEST	National Provider Enrollment Western Region Assigns the unique Medicare DMPOS PTAN for suppliers in the western region		
PTAN	Provider Transaction Access Number Unique supplier number assigned by the NPEAST or NPWEST		
TA1	X12 Interchange Acknowledgement		
ТР	Trading Partner Submitter who exchanges electronic transactions with CEDI; Also referred to as a submitter or sender		
TP ID	Trading Partner Identifier Unique identifier used by the Trading Partner (submitter/sender) assigned by CEDI		
TRN	Transaction Acknowledgement Report A validation report showing a valid file has been received by CEDI for processing		
X12	X12 Standards Development Committee / X12 Standard Format		

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TRN Report

The TRN Report validates the number of ISA-IEA transactions within a single transmission as well as Trading Partner authorization for submission of the transactions. This is a paired report with the X12 TA1 interchange acknowledgment. If a file rejects on the TRN, it will also be rejected on the TA1. If a file is accepted on the TRN, it will also be accepted on the TA1.

Report name: The report name begins with "TRN" and is followed by the file name and sequence number.

Timeframe: The TRN report is typically delivered immediately back to the Trading Partner. If the TRN is not received within two hours, contact the Common Electronic Data Interchange (CEDI) Help Desk at 1-866-311-9184.

How to read the TRN Report

• Files accepted at the TRN level will show the message

"***No input validation problems***subsequent reports to follow***"

- Files rejected at the TRN level will not display the message shown below.
 - Contact your software vendor and provide the error code and description received
 - Correct the file and resubmit

Accepted TRN Report Example

Transaction Acknowledgement	
Time Stamp = 20080328152700	
File Name = Ansil.Dat	
Trading Partner Id = B08111111	This message indicates the file
Original Filesize = 2519	was accepted at the TRN level
No input validation problemssubsequent rep	ports to follow***
1 envelope processed out of 1 identified	

Field	Description		
Time Stamp	The date and time this report was produced		
File Name	The file name used by the Trading Partner to upload the file to the CEDI Gateway		
Trading Partner ID	The Trading Partner's alpha/numeric ID assigned by CEDI		
Original Filesize	The original size of the file in bytes, the file size must be greater than zero		

999 Acknowledgement File

The X12 999 acknowledgement file reflects the syntactical compliance of the received X12 transaction with the transaction standard. The layout of this transaction can be found in the *X12 999 v5010 Technical Report 3*. The following is provided as a reference for determining the status of the file submitted.

999 Acknowledgement File Name: The file name is

"999.filename_00001.datetime.sequencenumber" if accepted and

"999.filename.datetime.sequencenumber_00001" if rejected

- where date is the system date when the 999 was generated (in format CCYYMMDD)
- where time is the system time when the 999 was generated (in format HHMMSS)

Timeframe: The 999 is typically delivered immediately back to the Trading Partner. If the 999 is not received within two hours, contact the Common Electronic Data Interchange (CEDI) Help Desk at 1-866-311-9184.

What to do when a 999 Acknowledgement File is Received

- Determine if the file is accepted or rejected. The key values in the 999 transaction are found in the data elements of the IK5 and AK9 segments: (See example reports on the following page.)
 - IK5* = 'A' (Accepted), 'R' (Rejected) or 'E' (Accepted with Errors)
 - AK9* = 'A' (Accepted), 'R' (Rejected), 'P' (Partial Rejection), or 'E' (Accepted with Errors)
- If a Rejection or Partial Rejection is received on the 999:
 - Contact your software vendor and provide the information in the IK3, CTX and IK4 segments if the information is available
 - Correct the file and resubmit
 - Partial 999 rejections and 999s with an accepted with error status will still populate IK3 segments for claims which did not pass these checks and will create a 277CA with the accepted claims and the claims with warnings.
 - Rejected claims on the 999 will not be included on the 277CA file and will **not** be delivered to a DME MAC Jurisdiction. It is the Trading Partner's responsibility to monitor the 999 for rejections, correct the rejections and resubmit to CEDI.

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Example of an Accepted 999 acknowledgement file

ISA*00* *00* *ZZ*19003 *ZZ*B08000000 *110513*1126*^*00501*133101468*0*P*:~ GS*FA*PCACEV3.0*B08000000*20110513*1126*133101510*X*005010X231A1~ ST*999*0001*005010X231A1~ AK1*HC*1001*005010X222A1~ AK2*837*00000001*005010X222A1~ IK5*A~ AK9*A*1*1*1~ SE*4*0001~ GE*1*133101510~

Example of a Rejected 999 acknowledgement file

IEA*1*133101468~

IEA*1*143101596~

ISA*00* *00* *ZZ*19003 *ZZ*B08000000 *110523*1036*^*00501*143101596*0*P*:~ GS*FA*PCACEV3.0*B08000000*20110523*1036*143101648*X*005010X231A1~ ST*999*0001*005010X231A1~ AK1*HC*1001*005010X222A1~ AK2*837*00000001*005010X222A1~ Error information is located in IK3*SV1*29*2400*8~ the IK3 and IK4 segments if CTX*CLM01:BENE1~ available for the type of error received. The CTX identifies the IK4*1:2*234*1~ patient's PCN (patient control IK5*R*5~ number) for the claim in error. R = Rejected AK9*R*1*1*0~ Check IK5 and AK9 SE*9*0001~ GE*1*143101648~

277 Claim Acknowledgement (277CA) File

The 277Claim Acknowledgement (277CA) explains the status of a Trading Partner's X12 837 Professional claims file (837P). Edits for electronic data interchange (EDI) enrollment, implementation edits, and business level edits will be reflected in the 277CA. The layout of this transaction can be found in the *X12 277 Health Care Claim Acknowledgment v5010 Technical Report 3*.

File Name: The file name is "277CA.filename_00001.datetime.sequencenumber"

- where date is the system date when the 277CA was generated (in format CCYYMMDD)
- where time is the system time when the 277CA was generated (in form HHMMSS)

Timeframe: The 277CA is typically delivered back to the Trading Partner within 30 minutes; however, the size of the claims file will determine how long it takes to produce the 277CA. If the 277CA is not received within four hours, contact the CEDI Help Desk at 1-866-311-9184.

Claims which are rejected on the 277CA will **not** be delivered to a DME MAC Jurisdiction. It is the Trading Partner's responsibility to monitor the 277CA for rejected claims, correct the claims, and resubmit them to CEDI.

Claims accepted on the 277CA will be assigned a claim control number (CCN) – reported on the 277CA – and delivered to the appropriate DME MAC Jurisdiction based on the beneficiary's state code submitted on the claim.

Note: Chapter 5 has information for the CMN Reject Report (RPT) generated by the DME MACs and returned to Trading Partners through CEDI.

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277CA – Claim Acknowledgement Example

NM1*41*2*SUBMITTERNAME*****46*B08000000~

TRN*2*000001~

STC*A1:19:PR*20110506*\	WQ*1418~	QTY*90 = Total Accepted Claims
QTY*90*1~		QTY*AA = Total Rejected Claims
QTY*AA*1~		AMT*YU = Total dollar amount of accepted claims
AMT*YU*1065~		AMT*YY = Total dollar amount of rejected claims
AMT*YY*353~		

3 2 19 1

NM1*85*2*BILLINGPROVIDER****XX*1234567891~

TD	NI*1	1 *∩~

TRN*1*0~ STC*A1:19:85**WQ*1418~ QTY*QA*1~	STC*A1:19:85 = accepted billing provider information and claim information will be provided. A rejected billing provider, no claim information will be provided.
QTY*QC*1~	OTY = Total accepted and rejected claims
AMT*YU*1065~	AMT = Total dollar amount of accepted and rejected claims
AMT*YY*353~	

~

HL*4*3*PT*

TRN*2*RENE1~

NM1*QC*1*PATIENT*BENE****MI*

STC*A1:19:QC*20110506*WQ*1065~	STC*A1:19:QC = patient claim was accepted
REF*1K*1900311129800002000~	REF*1K = CCN/ICN number
DTP*472*RD8*20110201-20110501~	The first five(5) digits are the Jurisdiction payer ID.

HL*5*3*PT~

NM1*QC*1*BENEFICIARY*PATIENT****MI*

TRN*2*BENE2~

STC*A3:247*20110506*U*275~ DTP*472*RD8*20110416-20110516~ SVC*HC:V2020:RT*75*****1~

STC*A7:510**U******A7:187~ REF*FJ*002H00000000205052011~

DTP*472*D8*20110516~

STC*A3:247 = charge line rejection Additional edit information should be provided for clarification on the error. DTP*472 is the claims date of service that received the error. If a charge line rejection is received, additional information about the charge line will be provided (SVC*HC) will additional rejection codes (STC*A7:510 and A7:187). Check these codes for more information.

Using Unique Control / Reference Numbers

CEDI recommends the use of unique numbering for several enveloping control / reference numbers built into the version 5010A1 837P claim transactions. Using unique numbering for the ISA13, ST02, and BHT03 data elements on the inbound 837P claims will allow CEDI Trading Partners to easily match submitted claims with the acknowledgement transactions (TA1, 999, and 277CA).

Examples of those pairing include:

- 837P ISA13 is mapped to the TA1 response transaction and located in the TA101 data element
 - The Technical Reference 3 (TR3) guide for the TA1 (X12 TA1 TR3) states for TA101: "This is the value in ISA13 from the interchange to which this TA1 is responding."
- 837P ST02 is mapped to the 999 response in the 2000 AK202 data element
 - The TR3 guide for the 999 (X12 999 TR3) states for AK202: "Use the value in ST02 from the transaction set to which this 999 transaction set is responding."
- 837P BHT03 is mapped to the 277CA response in the 2200B TRN02 data element
 - The TR3 guide for the 277CA (X12 277CA TR3) states for TRN02: "This element contains the value submitted in the BHT03 data element from the 837."

Understanding the Edit Codes

The edit codes received on the 277CA are the Claims Status Category Codes and Claims Status Codes. These codes can be found on the Washington Publishing Company Web site at http://www.wpc-edi.com.

The 837P edits returned on the 999 and 277CA files are maintained by CMS and are posted to the CEDI Web site at the following link: https://www.ngscedi.com/frontend.

Edits for DME X12 837 Professional claims will be updated quarterly by CMS with any changes noted on the Change Log. The edit code descriptions provided on the spreadsheet will help determine what action to take to correct the error.

In addition to the CMS Edit Spreadsheet, CEDI has provided a user friendly 277CA Edit Lookup Tool to provide further clarification regarding edit codes received.

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How to Look Up Error Codes Using the CEDI 277CA Edit Lookup Tool

The CEDI 277CA Edit Lookup Tool provides easy to understand descriptions associated with the edit codes returned on the 277CA. Each STC segment starts a new edit combination; however, one (1) STC may have more than one (1) edit combination. Make sure you have all of the edit information in order for the tool to return accurate information.

There are three (3) types of codes returned in the STC segment:

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

STC Segment Examples:

1. STC*A7:562:85**U*1983~

A7 = CSCC 562 = CSC 85 = EIC

STC*A7:507**U~ (Note: In this example, only CSCC and CSC codes are returned.)
A7= CSCC

507 = CSC

STC*A8:562:85**U*1983*****A8:128:85 (Note: In this example, the same CSCC code (A8) starts both edits reported in the STC segment and will only be entered once in the 277 CA Lookup tool. However, there are two CSC codes (562 and 128) reported and both must be entered in the 277CA Lookup Tool to pull the correct results

A8 = CSCC 562 = CSC 128 = CSC 85 = EIC

Access the CEDI 277CA Edit Lookup Tool

To access the CEDI 277CA Edit Lookup Tool, select "277CA Edit Lookup Tool" under Self-Service Tools on the CEDI Web site main page.



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

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. However, the CSCC and the first CSC fields are required.

From the STC Segment in the 277CA: STC*A7:507**U~

Enter this information in the Lookup tool, and select "Search":

A7 = CSCC

507 = CSC

5010A1 277CA Reject Code Lookup Tool



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From the STC segment in the 277CA: **STC*A8:562:85**U*1983*****A8:128:85** Enter this information in the Lookup tool and select "Search":

A8 = CSCC 562 = CSC 128 = CSC 85 = EIC

Notice the repeating codes are not used.

5010A1 277CA Reject Code Lookup Tool

CSCC *	A8
CSC *	562
csc	128
csc	
EIC	85
Search Rese	t

How to Look Up Error Codes Using the CMS 5010 Spreadsheet

Locate your error codes in the STC segment or reported on your 277CA.

Example:

STC*A7:507*20120101*U*950~

A7 = Claim Category Status Code (CCSC)

507 = Claims Status Code (CSC)

Open the CMS 5010 Edit Spreadsheet.

Once the spreadsheet is open, select the column labeled "Disposition/Error Code".

Select the drop-down button in the field.

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	5010 Values	v	TA1/ 999/ 277C	Accep t/Reje cl 🖵	Disposition / Error Code 💌	Proposed 5010 Edits
			TA1	R	TA105: 024 "Invalid Interchange Content".	TSA must be present.
		2	TAI	R	TA105: 022 Invalid Control Structure	Only one iteration of ISA is allowed -OR-
č		9	2 8	13	Tõ 105- 023 Improper	

Select "Text Filters", then select "Contains"



Type the Claim Status Code (Example 507)

Custom AutoFilter		2 🔀
Show rows where: Disposition / Error Co	le	
contains	507	×
<u>And</u> ○ <u>Or</u>		
	✓	×
Use ? to represent any si Use * to represent any si	ngle character aries of characters	OK Cancel

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The spreadsheet will then sort all the descriptions involving the error (Example 507).

•	TA1/ 999/ 2770 A	Accept/ Reject	Disposition / Error Code
	277	с	CSCC A7: "Acknowledgement /Rejected for Invalid Information" CSC 507: <mark>"HCPCS"</mark>
	277	с	CSCC A7: "Acknowledgement / <u>Rejected</u> for Invalid Information" CSC 507: <mark>"</mark> HCPCS"
	277	с	CSCC A7: "Acknowledgement /Rejected for Invalid Information" ICSC 507: THCPCS"
	277	с	CSCC A8: Acknowledgement / Rejected for relational field in error. CSC 218: "NDC number" CSC 507: "HCPCS"
	277	с	CSCC A8: Acknowledgement / Rejected for relational field in error. CSC 218: "NDC number" CSC 507: "HCPCS"
			CSCC A7: "Acknowledgement /Rejected for Invalid Information"

Look for the error code with the correct combination of edits. There may be more than one explanation for the edit combination you received. However, if additional edits are present, this will not represent the same edit received on the 277CA. For example, the first three edits in the screen shot above would be caused by the A7:507 edit but the fourth edit combination displayed, A8:218:507, is not the same error as A7:507.

Refer to the edit logic in the column **Proposed 5010A1 Edit CEDI**. This will provide suggested explanations for the error. Review all possible explanations, make the correction required, and resend the claim for processing.

To search for another error code, go to the column labeled "Disposition/Error Code".



Select the drop down button and select the "Clear Filter from Disposition/Err...".

Once it has been cleared, go back to the beginning and repeat.