

To:
 All Providers
 HMOs and Other
 Managed Care
 Programs

Announcing Wisconsin Medicaid's companion documents for the HIPAA-compliant 837 health care claim or adjustment transactions

The Wisconsin Medicaid companion documents for the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA)-compliant 837 health care claim or adjustment transactions are now available from Wisconsin Medicaid. These companion documents provide information on Wisconsin Medicaid's 837 transaction requirements for dental, institutional, and professional services.

A future *Wisconsin Medicaid and BadgerCare Update* will notify providers of the implementation dates.

837 electronic transaction companion documents for dental, institutional, and professional services

The Wisconsin Medicaid companion documents for the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA)-compliant 837 health care claim transactions are now available from Wisconsin Medicaid. Companion documents provide Wisconsin Medicaid-specific information that should be used with the national HIPAA Implementation Guides. Implementation Guides define the electronic format and values for each data element within an electronic transaction. These companion documents provide information about Wisconsin Medicaid's 837 transaction requirements for

dental, institutional, and professional services. Companion documents will be effective with the implementation of HIPAA. A future *Wisconsin Medicaid and BadgerCare Update* will notify providers of the implementation dates.

Companion documents have been published for each transaction service type. The following table lists the format standards for providers who submit 837 electronic transactions to Wisconsin Medicaid.

Type of transaction	Format standards
Dental health care claim or adjustment (837D)	Accredited Standards Committee (ASC) X12N 837 — Health Care Claim: Dental
Institutional health care claim or adjustment (837I)	ASC X12N 837 — Health Care Claim: Institutional
Professional health care claim or adjustment (837P)	ASC X12N 837 — Health Care Claim: Professional

Paper claim forms determine which electronic transaction providers should use

Providers determine the appropriate electronic transaction (837D, 837I, or 837P) based on which paper claim form they would have used to submit claims to Wisconsin Medicaid for

provided services. The following table lists the paper claim and its electronic transaction equivalent.

Paper claim submitted for billed services	Equivalent electronic transaction
CMS 1500*	837P
UB-92	837I
ADA 2000	837D
* With the implementation of HIPAA, nurses in independent practice (NIP) will submit claims on the UB-92 claim form instead of the CMS 1500. A future <i>Wisconsin Medicaid and BadgerCare Update</i> to NIP will address claim submission using the UB-92.	

Note: Retail pharmacy claims require the use of the National Council for Prescription Drug Programs (NCPDP) electronic format for drugs and biologics. Future *Updates* will address retail pharmacy claims and the NCPDP format.

Providers should refer to HIPAA service-specific *Updates* for claim form instructions.

Obtaining information

Companion documents are available on the Wisconsin Medicaid Web site at www.dhfs.state.wi.us/medicaid/. For paper copies of companion documents, call Provider Services at (800) 947-9627 or (608) 221-9883. Providers should indicate to the correspondent the specific 837 companion document they want.

National HIPAA Implementation Guides may be downloaded from Washington Publishing Company at www.wpc-edi.com/hipaa/HIPAA_40.asp. To obtain the CD-ROM version call Washington Publishing Company at (800) 972-4334.

Information regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service information and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care HIPAA-related changes, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

Providers should refer to HIPAA service-specific *Updates* for claim form instructions.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at www.dhfs.state.wi.us/medicaid/.