# DMERC Region A Service Office 1

No. 11, Special Edition The Travelers T July, 1994

# The Travelers Region A DMERC **Opens New Office**

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# Contacts

DME Region A Service Office	(717) 735-9400
Beneficiary Toll-Free Number	(800) 842-2052
Bulletin Board	
Participating Suppliers	(800) 842-5713
Non-Participating Suppliers	(717) 735-9515
Electronic Media Claims	(800) 842-1305
FAX	(717) 735-9510
National Supplier Clearinghouse	(803) 754-3951

Supplier Toll-Free Number

(800) 842-2563

The Region A "DME Medicare News" is published by The Travelers Government Operations DMERC Professional Relations Unit for DMEPOS suppliers in Region A. For further information on this publication, please contact:

#### The Travelers T

Region A DMERC Professional Relations - Outreach P. O. Box 6800 Wilkes-Barre, PA 18773-6800

he Travelers Region A DMERC is moving its operations. Effective August 15, 1994, the DMERC office will be located at 60 East Main Street, Nanticoke. PA 18634-1685. The mailing address for the Region A DMERC will remain the same. Claims and correspondence must be sent to:

> Region A DMERC The Travelers Insurance Group P.O. Box 6800 Wilkes-Barre, PA 18773-6800

The telephone numbers of the DMERC staff will change after the office's relocation to Nanticoke. The next two pages of this newsletter list the new phone numbers for key DMERC staff and service units. These numbers will be in effect on Monday, August 15, 1994.

# Supplier Toll-Free Number to be **Discontinued**

Reginning October 1, 1994, the Supplier Toll-Free Number (800-842-2563) will be no longer in service. Providers may have questions answered on October 1, 1994 by calling the DMERC's Provider Services Unit at (717) 735-9445.

## **EMC Notice**

Fiffective for all electronic claim (EMC) files received on or after Monday, August 8, 1994, an electronic acknowledgment will be available from our bulletin board. As of September 5, 1994, we will no longer call to notify submitters that files have been received nor to identify rejected claims. Submitters will be able to retrieve acknowledgment files directly from our bulletin board.

# Region A DMERC Directory - Alphabetical Effective August 15, 1994

Joanne Quaglia, Editor (717) 735-9400

**Mailing Address:** 

Office Location:

Region A DMERC
The Travelers Insurance Group
P. O. Box 6800
Wilkes-Barre, PA 18773-6800

Telephone: (717) 735-9400 FAX: (717) 735-9402 Region A DMERC
The Travelers Insurance Group
60 East Main Street
Nanticoke, PA 18634-1685

В	N
Vikki Bacso	Joanne Nerbecki
Professional Relations Manager (717) 735-9410	Fraud and Abuse Manager (717) 735-9430
Diane Belles	
Professional Relations	R
Nurse Consultant (717) 735-9411	Geraldine Ram
Mary Boggs	Beneficiary Services Manager (717) 735-9470
Provider Services Manager (717) 735-9450	beneficiary between vitalinger (117) 100 0110
Diane Brendley	S
Human Resources Manager (717) 735-9504	
	Cheryl Snow
C	Mail and Control Manager (717) 735-9590
Beth Chabala	Terrence Southward
Electronic Media Claims Manager (717) 735-9516	Claim Entry Manager (Day) (717) 735-9600
	Doris Spencer
D	Ombudsman: New England (717) 735-9412
William Davis	Martin Szmal
Accounting,	Ombudsman: PA, DE, NJ (717) 735-9414
Medicare Secondary Payor,	_
Resolutions Manager (717) 735-9555	Τ
	Vince Temples
F	Ombudsman: NY(717) 735-9413
Karen Furman	Dwayne Thomas
Pricing,	Claim Entry Manager (Nights) (717) 735-9495
Quality Assurance Manager (717) 735-9420	Mike Tushup
	Claim Entry Manager (Nights) (717) 735-9490
M	
Lon Melonas	V
Training Manager (717) 735-9500	John Van Sicklin
Sherry Melonas	Performance Management Manager (717) 735-9666
Medical Review Manager (717) 735-9540	
<b>5</b> . ,	

# **DMERC Region A Directory - Functional**

General	Medical Review
General Information	Manager
If Not Listed Below(717) 735-9400	Sherry Melonas
FAX	
Supplier Toll-Free Number (800) 842-2563	Medicare Secondary Payor
Managers	Manager William Davis(717) 735-9555
District Manager	William Bavis ((11) 100 0000
Connie Parry	National Supplier Clearinghouse
Assistant District Manager	NSC (803) 754-3951
Steve Crittenden	
Accounting	Performance Management
Accounting	Manager (717) 707 0000
Manager William Davis(717) 735-9555	John Van Sicklin (717) 735-9666
(11) 100 ccc	Pricing
Beneficiary Services	Manager
Manager	Karen Furman
Geraldine Ram	
General Information	Professional Relations
Local	Manager
101111001111111111111111111111111111111	Vikki Bacso(717) 735-9410
Claim Entry	Nurse Consultant Diane Belles
Manager, Day	Ombudsmen (717) 733-3411
Terrence Southward	Doris Spencer (New England) (717) 735-9412
Managers, Night	Martin Szmal (Delaware,
Dwayne Thomas	New Jersey, Pennsylvania) (717) 735-9414 Vince Temples (New York) (717) 735-9413
Mile Tubliap(11) 100 0100	vince rempies (rew Tork) (717) 700 0410
Electronic Media Claims	Provider Services
Manager	Manager
Beth Chabala	Mary Boggs(717) 735-9450
Bulletin Board Participating Suppliers(800) 842-5713	General Information (717) 725 0445
Non-Participating Suppliers (717) 735-9515	Local (717) 735-9445
EMC Helpline (800) 842-1305	Quality Assurance
FAX(717) 735-9510	Manager
	Karen Furman
Fraud and Abuse	
Manager Joanne Nerbecki	Resolutions
Joanne Iverbecki (717) 753-3430	Manager William Davis(717) 735-9555
Human Resources	willian Davis(117) 733-9333
Manager	Training
Diane Brendley	Manager
	Lon Melonas
Mail & Control	
Manager Cheryl Snow(717) 735-9590	
Cheryi 5how	

# **EMC Electronic Claim Acknowledgment**

Each time The Travelers successfully receives an electronic file of claims, an electronic acknowledgment will be available to the submitter. The acknowledgment will contain submitter identification information and the number of claims and charges submitted, accepted, and rejected. For each claim rejected, edit error messages will be included (see below).

Each electronic claim acknowledgment record contains a total of 4000 characters. Up to 25 edit messages can be returned per record. If 25 or less edit messages are generated, only one acknowledgment record will be returned to the submitter. If more than 25 edit messages are generated, more than one record will be sent.

# **Specifications**

This is intended as a reference to be used to interpret The Travelers electronic claim acknowledgment. This reference addresses only Medicare Part B and Commercial claim-specific information.

Field Number:		tions n:To:	PIC - Field Length:	Field Name/Description:
01	01	16	X(16)	SUBMITTER ID Submitter ID number contained in the EMC transmission. (NSF AA0-02.0)
02	17	22	X(06)	PROCESS DATE The date the EMC file was processed at The Travelers. Format is YYMMDD, where:     YY = Year     MM= Month     DD = Day
03	23	30	X(08)	PROCESS TIME The time of day that the EMC file was processed at The Travelers. Format is HHMMSSZZ, where: HH= Hours MM = Minutes SS = Seconds ZZ = Hundreds of a second
04	31	36	X(06)	FILLER
05	37	41	X(05)	CARRIER NUMBER The five position carrier ID number from the EMC transmission. (NSF AA0-17.0)
06	42	57	X(16)	SUBMITTER CODE Submitter ID number contained in the EMC transmission. Same as field # 01.0.
07	58	63	X(06)	SUBMISSION NUMBER The unique number assigned by the submitter's system to identify the EMC file. (NSF AA0-05.0)
08	64	71	X(08)	SUBMITTER CREATE DATE The date the file was created by the submitter. (NSF AA0-15.0)

09	72	79	X(08)	SUBMISSION TIME Submitter's time stamp on the EMC file. (NSF AA0-16.0)
10	80	83	X(04)	TEST/PRODUCTION INDICATOR Code used by the submitter to indicate whether the EMC file was for test or production. Values are: TEST or PROD. (NSF AA0-21.0)
11	84	86	9(03)	RECORD SEQUENCE NUMBER Unique sequence number used to identify how many confirmation records are sent as part of the this acknowledgment. Begins at 001 and increases by one after each set of 215 edit messages sent back to the submitter.
12	87	88	X(02)	REGION INDICATOR Internal code used by The Travelers to identify submitted files. Will be set to "MC" for commercial submissions.
13	89	89	X(01)	EMC MEDIUM A code used to indicate the telecommunications method of transmission for this EMC file. Values:  A = Asynch S = Supertracks N = NDM I = Advantis
14	90	100	9(09)V99	CHARGES SUBMITTED The total amount of charges received in this EMC file. Format is \$\$\$\$\$\$.cc, implied decimal point.
15	101	109	9(09)	CLAIMS SUBMITTED  The number of claims received in this EMC file. The total number of claims received in this EMC file. Maximum value is 99999999999999999999999999999999999
16	110	120	9(09)V99	CHARGES ACCEPTED The amount of charges from this file that were accepted for processing. Format is \$\$\$\$\$\$.cc, implied decimal point.
17	121	129	9(09)	CLAIMS ACCEPTED The number of claims received in this EMC file that were accepted for processing. Maximum value is 9999999999.
18	130	140	9(09)V99	CHARGES REJECTED  The amount of charges from this file that were rejected because of errors.  Format is \$\$\$\$\$\$.cc, implied decimal point.
19	141	149	9(09)	CLAIMS REJECTED The number of claims received in this EMC file that were rejected because of errors. Maximum value is 999999999.
20	150	189	X(40)	EMC CONTACT The name of The Travelers' EMC unit to be contacted for further information regarding this EMC confirmation.
21	190	199	X(10)	EMC CONTACT PHONE NUMBER The telephone number of The Travelers' EMC unit.
22	200	350	X(151)	FILLER

The following data items occur 25 times for each claim which was rejected. They point to specific claims and indicate specific edit messages.

Field Number:	Positions From: To		Field Name/Description:
23	351 36	2 X(12)	INSURED ID NUMBER The insured's identification number. Can be (NSF DA0-18.0) either the SSN or HICN.
24	363 37	9 X(17)	PATIENT CONTROL NUMBER The unique patient control number used to identify claims for this patient. (NSF CA0-03.0)
25	380 39	6 X(17)	FILLER
26	397 41	1 X15)	EMC PROVIDER ID Code used to identify the provider submitting this claim. Can be either the EMC Biller Code or the Provider Tax ID number. (NSF BA0-02.0)
27	412 41	5 X(04)	BATCH NUMBER Sequential number assigned by the submitter to each batch of claims. (NSF BA0-04.0)
28	416 42	1 X(06)	SEQUENCE NUMBER The Travelers internally generated number.
29	422 42	4 X(03)	LINE NUMBER The Travelers internally generated number.
30	425 42	6 X(02)	EDIT SEQUENCE NUMBER The Travelers internally generated number.
31	427 42	9 X(03)	RECORD ID The record identifier that this edit message pertains to.
32	430 43	6 X(07)	EDIT MESSAGE CODE The code that identifies the edit message pertaining to this record. See EMC CLAIM REJECT ERROR CODES documentation for details.
33	437 44	4 X(08)	SERVICE FROM DATE The service from date that this edit message pertains to.
34	445 45	2 X(08)	SERVICE TO DATE The service to date that this edit message pertains to.
35	453 46	7 X(15)	INPUT FIELD The submitted input field value that this edit message pertains to.
36	468 48	2 X(15)	COMPUTED FIELD The computed or expected value, if applicable, for the specific input field that this edit message pertains to.
37	483 49	6 X(14)	FILLER

#### **Bulletin Board**

The electronic acknowledgment file will be available from the Region A DMERC's electronic bulletin Board. The electronic bulletin board is available at these numbers:

Non-Participating Suppliers . . . . . . (717) 735-9515 Participating Suppliers . . . . . . (800) 842-5713

The electronic acknowledgment is available under the bulletin board's menu option <G>, System Support Files. Electronic claim files received before 1:00 P.M. each day will be processed during that night. The electronic acknowledgment will be available on the bulletin board by 8:00 A.M. on the following day.

#### **Example**

P.M.	
$\square$ Claims are processed Monday night.	4
☐ Electronic acknowledgment is available on the bulletin board by 8:00 A.M. on Tuesday.	he
☐ Electronic claims received Monday after 1:00 P are processed Tuesday night.	.М.

☐ Electronic acknowledgment is available on the

☐ Electronic claim file received Monday before 1:00

Electronic acknowledgments will remain on the bulletin board for 10 working days. However, space on the bulletin board is limited. Please retrieve the files promptly. New files will not overlay uncollected acknowledgments from prior days.

bulletin board by 8:00 A.M. on Wednesday.

Paper acknowledgments will continue to be available for a period of time.

### **Additional Documentation**

In addition to the actual transmittals, the following documentation files are also available under the bulletin board's menu option < G >, System Support Files:

☐ Electronic Claim Acknowledgment
☐ File Format Explanation (in Word for Windows)
$\square$ Error Code Explanation (in Word for Windows)
☐ File Format Explanation (in ASCII)
☐ Error Code Explanation (in ASCII)

The File Format Explanation Document is approximately seven pages in length. The Error Code Explanation Document is approximately 45 pages in length.

# **Edit Error Messages**

Claim records received electronically are edited to ensure the record is formatted correctly, required fields are present, and acceptable values and codes have been used. Claim records containing errors are rejected with an explanatory error code. The description of each error code can be obtained from our bulletin board (see above). Rejected claims do not enter the system and must be corrected and resubmitted.

Claim records which pass these "front-end" edits enter our system and receive further editing and may suspend for manual review and development for a variety of reasons, including medical or utilization, secondary payor, pricing, etc. The suspension of any claim record for these reasons occurs after the electronic acknowledgment has been created and is *not* reflected on the acknowledgment.