



# Alaska Health Enterprise Companion Guides

News Update | August 22, 2013

## Alaska Medicaid Health Enterprise Companion Guides Are Now Available

Good News. The Alaska Enterprise Companion Guides are now available for the 837D, 837I, and 837P X12 transactions. These documents are intended for provider/trading partner use in conjunction with the ASC X12N National EDI Transaction Set Implementation Guides. The Alaska Enterprise Companion Guides contain data clarifications, including Alaska-specific data requirements for each transaction. Inclusion of a "business-required" data field, as defined by this Companion Guide, will aid in the delivery of a positive response from Alaska Medicaid Health Enterprise.

The Alaska Health Enterprise Companion Guides are available at the Alaska Medicaid website: [http://www.medicaidalaska.com/companion\\_guides.shtml](http://www.medicaidalaska.com/companion_guides.shtml)

### Additional Certification Testing Details

Enterprise Testing has begun and is in full swing. Below you will find a few helpful details that will assist you in your testing.

- It is extremely important that you send accurate billing and servicing address information that matches the Alaska Medical Assistance provider enrollment record. If the billing and servicing zip codes on your test file do not match enrollment, your test may fail.
- NPI is the primary method for identifying providers; however, if additional information is needed to identify the provider, the system will also use the taxonomy code and the zip code.
- Transportation Claims will need to be submitted via the external web portal or 837P and not sent through EDI as a proprietary file.
- **Zip Code +4:** You will now receive a warning when submitting 0000 or 9999 as the plus four zip (all transactions). Zip codes can be found at <http://zip4.usps.com>. If you cannot find the code you are looking for, you can call the United States postal service and they should be able to assist you with that information.
- **Non-Specific Procedure Codes Require a Description:** The 5010 versions of the institutional and professional TR3s mandate that, when claims use non-specific procedure codes, a corresponding description of the service is required. If the corresponding non-specific procedure code description is not submitted, the transaction will fail compliance. (837D, 837I and 837P)
- **Dental Procedure Code Quantity:** If SV306 is not sent, the system assumes that the procedure was performed only once. If the value 1 is sent, the transaction will fail.