Transaction Validation Question Sheet
BPR – Claim Acknowledgement (277CA)

For more detail about any of the questions, see the corresponding BPR page #.
The BPR can be found at
- www.onehealthport.com
- Under the Admin Simp tab select Best Practice Recommendations
- Scroll down to Creating and Receiving the Health Care Claim Acknowledgement (HIPAA 277CA)
- Click on BPR

Report the requested answers & information in the attached Answer Sheet! They do not need to be reported in this Question sheet.

Note: If a claim is rejected due to X12 syntax/format errors and is not accepted into the health plan's system, then the claim may not be included in the 277CA

1. Was the 277CA returned within 1 business day of the 837 being received?

   Yes/No: _____   (BPR- pg 6)

   If no, when was the 837 sent? _____ when was the 277CA received: _____

2. Is every claim submitted in an 837 accounted for on the 999 and/or the 277CA

   Yes/No: _____   (BPR- pg 6)

   If no, what claims were not accounted for on either the 999 or the 277CA? ____
   _____

3. Does each claim on the 277CA contain a valid 'Patient Control Number'?

   Yes/No: _____   (BPR- pg 7)

   If no, for what claims was the 'Patient Control Number' not included? _____
   _____

4. Was the most specific combination(s) of claim status category codes and claim status codes used so that all relevant issues are explained appropriately?

   Yes/No: _____   (BPR – pg. 7)

If no, was issue(s) was not reported on the 277CA AND/OR what issue(s) were inappropriately reported? _____

_____

5. Was the Entity Code returned – if required by the Status Code?

   Yes/No: _____   (BPR – pg. 7)

   If no, for which Status Code was an Entity Code not returned? _____

   _____

6. Was a listing of Claims Accepted and Rejected, along with totals, reported for each Information Receiver?

   Yes/No: _____   (BPR – pg. 7)

   If no, what information was not reported? _____

   _____

Answer Sheet
Transaction Validation Worksheet
BPR – Processing and Reporting Remittance Information

BPR– 77CA: http://www.onehealthport.com/sites/default/files/pdf/BPR_Creating_and_Receiving_the_Health_Care_Claim_Acknowledgement.pdf

Name: _____ Organization: _____

Health Plan Being Validated: _____ Date: _____

Which way does the health plan handle a claim that is rejected because of a "compliance error"?   (1, 2 or 3) _____

1. All 100 claims from the ST-SE will be rejected, reported on the 999[*1] and no 277CA will be sent for that ST-SE loop
2. The one rejected claim will be reported on the 999[*1] and not accounted for on the 277CA, i.e. only 99 claims will appear on the 277CA
3. The one rejected claim will be reported on the 999[*1] and accounted for on the 277CA, i.e. 100 claims will appear on the 277CA

    [*1] - In the case of a rejected claim, the provider may need to utilize the 999 transaction for full understanding of the error and it's placement within the file submitted

Get from health plan

	Identify each 277CA that you will be referencing			
	277CA - #1	**277CA - #2**		
277CA File Name				
Billing Provider NPI				
BHT03 – Transaction ID				
BHT04 - Date				

BPR Capability	Med. Or High Impact	Yes, No, or NA	If 'No'		
			What information is missing or in error? (From Question Sheet)	Which 277CA(s)? Use #1, #2, etc (From table above)	Identifying claim number
1. Was the 277CA returned within 1 business day of the 837 being received?	High				
2. Is every claim submitted in an 837 accounted for on the 999 and/or the 277CA?	High				
3. Does each claim on the 277CA contain a valid 'Patient Control Number'?	High				
4. Was the most specific combination(s) of claim status category codes and claim status codes used so that all relevant issues are explained appropriately?	High				
5. Was the Entity Code returned – if required by the Status Code?	Med*				
6. Was a listing of Claims Accepted and Rejected, along with totals, reported for each Information Receiver and Billing Provider?	Med*				
Other					

| BPR Capability | Med. Or High Impact | Yes, No, or NA | If 'No' | | Identifying claim number |
			What information is missing or in error? (From Question Sheet)	Which 277CA(s)? Use #1, #2, etc (From table above)	

- Required in the TR3

Legend: **High** – The implementation of this Best Practice will have a high level of positive impact on the provider's processing   Med – The implementation of this Best Practice will have a medium level of positive impact on the provider's processing