HEALTHSHARE OF OREGON CCOE
5010 Submitter Profile Check List- PRO

The following field values are required to submit **HSO CCOE** 5010X12 837 Professional claims to PH Tech. Effective September 1, 2012

1. ISA01   "00" (always)

2. ISA02   [blank]

3. ISA03   "00" (always)

4. ISA04   [blank]

5. ISA05   "ZZ" (always)

6. ISA06   [Business Tax ID]

7. ISA07   "ZZ" (always)

8. ISA08   "931211733" (PHTECH Tax ID)

9. GS02   [Business Tax ID]
NOTE: (other GS02 values are acceptable if specific application routing is necessary).

10. GS03   "MHO"

11. 1000A – NM109   [Business Tax ID]

12. 1000B – NM103   "PHTECH"

13. 1000B – NM108   "46"

14. 1000B – NM109   "931211733" (PHTECH Tax ID)

15. 2010BB – NM103   "HSO CCO" additional characters denoting county are allowed.
i.e.   "HSO CCO MULT" "HSO CCO WASH" "HSO CCO CLACK"

16. 2010BB – NM108   "PI"

17. 2010BB – NM109   "500647169"

For secondary claims from <u>Medicare</u>, include the other payer amount paid and patient responsibility information in the 2430 Loop – "Line Adjudication Information."

18. 2430 – SVD02 $[amt paid by other insurer]

19. 2430 – CAS01   "PR"

20. 2430 – CAS03, 06, 09 $[patient responsibility amt]

For secondary claims, include the other payer amount paid information in the 2430 Loop – "Line Adjudication Information."

21. 2430 – SVD02 $[amt paid by other insurer]