## Capitol Dental 5010 Submitter Profile Check List

The following field values are required to submit <u>CAPITOL DENTAL</u> X12 837 Dental claims to PH Tech. Effective Jan 01, 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 "DENTAL"

11. 1000A – NM109 [Business Tax ID]

12. 1000B – NM103 "PHTECH"

13. 1000B – NM108 "46"

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

15. 2010BB – NM103 "CAPITOL DENTAL"

16. 2010BB – NM108 "PI"

17. 2010BB – NM109 "122627"

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

1. 2430 – SVD02 \$[amt paid by other insurer]

2. 2430 – CAS01 "PR"

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

4. 2430 – SVD02 \$[amt paid by other insurer]