

# Providence Pace CA OR WA 5010 Submitter Profile Check List – INST

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The following field values are required to submit **Providence Pace CA OR WA 5010 X12 837** Institutional claims to Ayin Health Solutions. Effective April 1, 2023 for California. July 1, 2024 Oregon and Washington Added.

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|--------------------|--|
| 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” (AYIN Tax ID)  |
| 9. GS02            | [Business Tax ID]  |
| 10. GS03           | “CIM5”   |
| 11. 1000A – NM109  | [Business Tax ID]  |
| 12. 1000B – NM103  | “AYIN”   |
| 13. 1000B – NM108  | “46”   |
| 14. 1000B – NM109  | “931211733” (AYIN Tax ID)  |
| 15. 2010BB – NM103 | “Providence Pace” Clearinghouse pass through value provider submits. |
| 16. 2010BB – NM108 | “PI”   |
| 17. 2010BB – NM109 | “PRPACE” Clearinghouse use agreed upon payer id.                     |

For secondary claims, include the other payer amount paid and patient responsibility information in the 2430 Loop – “Line Adjudication Information.”

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|--------------------------|---------------------------------|
| 18. 2430 – SVD02         | [\$amt paid by other insurer]   |
| 19. 2430 – CAS01         | “PR”                            |
| 20. 2430 – CAS03, 06, 09 | [\$[patient responsibility amt] |