

EASTERN OREGON CCO 5010

Submitter Profile Check List- INST

The following field values are required to submit EO CCO 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 | “EO CCO” |
| 16. 2010BB – NM108 | “PP” |
| 17. 2010BB – NM109 | “218747” |

For secondary claims from Medicare, 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] |
|------------------|------------------------------|

