

Managed Dental Care 5010 Submitter Profile Check List

The following field values are required to submit **MANAGED DENTAL CARE 5010** X12 837 Dental claims to PH Tech. Effective Jan 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 “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 “MANAGED DENTAL”
16. 2010BB – NM108 “PI”
17. 2010BB – NM109 “122544”

For secondary claims from Medicare, 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”
3. 2430 – CAS03, 06, 09 \$[patient responsibility amt]

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]