



Division of TennCare IS Policy Manual

Revised – 09/24/2018

Policy No: BTC-Pol-Enc-200711-001	
Subject: Claims and Encounters File Naming Standard	
Approval: Encounter Data Policy Workgroup	Date: 1/18/2008

PURPOSE: To clarify the Division of TennCare’s compliance expectations regarding the file naming standard for encounter claims.

POLICY: The Division of TennCare shall require the submitters to send TennCare Encounter files that follow the naming standards detailed below. Files that do not follow this naming standard as well as files that have a duplicate name from previously submitted files will not be acquired by the scripts on the SFTP server.

CTYP | MCC | YYMMDD | YYMMDD | A | T | SS

CTYP = Claim Type: i837, p837, d837, CLME

MCC = Managed Care Contractor (MCC)/DSNP/PACE assigned three position identifier

YYMMDD = 2 digit year, 2 digit month, and 2 digit day of the beginning payment cycle date

YYMMDD = 2 digit year, 2 digit month, and 2 digit day of the ending payment cycle date

A = Letter of file sent; ex. a = 1st new day file; b = Continuation of 1st file (see usage clarification for details)

T = File type; ex. n = New (aka Original); r = Replacement; f = Data Fix; v = Void; e = Edifecs; s = School Based File

SS = Sequence number of file

Once a file has been correctly named, the file must be zipped and contain a “.zip” extension. The automated scripts at TennCare will only pickup files that are named with a “.zip” extension. The internal file name within the zip archive should match the external file name with an extension of .txt or .dat. Multiple files within a zip archive are not allowed. The files must be posted with read/write permissions so the scripts can acquire them for processing.

Examples of the file structure are detailed below.

File Details	File Name
New File	p837004180130180206an01
Continuation of First File Submissions	p837004180130180206bn01
Resubmission of a Rejected File	p837004180130180206ar02
Resubmission of a Rejected ar02 File	p837004180130180206ar03
Submission of file containing only Edifecs Rejects	p837004180130180206ae02
Resubmission of a Rejected ae02 File	p837004180130180206ar03
Void File	p837004180130180206av01
Resubmission of a Rejected av01 File	p837004180130180206ar02

Justification for naming standard

By listing the date of begin and end payment cycle dates, users can quickly see from the file name what dates the Encounters were paid by the submitters. Additionally, by the use of alpha characters to represent the existence of multiple files of the same claim type sent for the same payment cycle date, it is easy to see when there is more than one file for the same payment cycle. By the use of the file type, it will help understand what type of file should be expected that's been submitted.

Usage Clarification

1. All characters in filenames are lowercase except for "CLME" and the DSNPs abbreviated name.
2. The beginning payment date is the oldest payment date for any encounter within the file.
3. The ending payment date is the newest payment date for any encounter within the file.
4. The Payment Cycle Date ranges on a file are not intended to have any type of meaning other than to indicate the first and last payment dates of a claim within a file and should be the same for a file that contains only 1 payment date.
5. File type "n" is for new (original) files. Submissions start with a sequence number of 01 and roll upward for each subsequent submission of the same transaction file. If a file is submitted with the same beginning and ending payment cycle dates as a previously submitted file that it has no relation with, then the increment should go up by 1. (ex. p837004180130180206an01 and p837004180130180206an02)
6. The size limitations for 837D, 837P and 837I files cannot exceed 250,000 encounters per file or 0.5 GB in size before being zipped.
7. The size limitations for NCPDP files cannot exceed 350,000 encounters or 1.25 GB in size before being zipped.

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8. File type “b” is used when an initial file exceeds the limitations as stated previously in subsection 6 and 7. The first set of encounters will be placed in a separate file with the maximum limitations allowed as mentioned in subsection 6 and 7. The remaining amount will be placed in a file where the payment cycle dates are the same but will substitute “a” with “b” indicating a continuation of the 1st file.
9. File type “r” is for replacement of original files that were rejected by TennCare or not picked up by SFTP regardless of file type.
10. File type “v” is for files that contain only void encounters. A rejected or non-compliant void file should be resubmitted with the “r” file type and its sequence number is rolled upward by 1 for each subsequent submission.
11. File type “f” is for files that contain data fixes requested by TennCare or identified by the submitter and agreed upon by TennCare. A rejected or non-compliant fix file should be resubmitted with the “r” file type and its sequence number is rolled upward by 1 for each subsequent submission.
12. File type “e” is for files that contain data fixes as a result of Edifecs processing. A rejected or non-compliant file should be resubmitted with the “r” file type and its sequence number is rolled upward by 1 for each subsequent submission. Edifecs resubmissions may also be sent in a new day file.
13. File type “s” is for School Based Files. This file type is for use only by the Dental Benefit Manager (DBM). Reference the School Based Encounter File policy for further clarification. A rejected or non-compliant School Based file should be resubmitted with the “r” file type and its sequence number is rolled upward by 1 for each subsequent submission.
14. If a file is rejected, the replacement file name and new transmittal log must have the original payment cycle dates.

POLICY EXCEPTIONS:

None

REFERENCE DOCUMENTS:

TennCare HIPAA Companion Guides
ASC 837 TR3

OFFICES OF PRIMARY RESPONSIBILITY:

- TennCare IS Division—to ensure that transactions are submitted to TennCare in the approved format
- Information Systems Management Contractor – to process transactions through the TCMIS system
- Claim and Encounter submitters - to follow transaction requirements