Electronic billing guide: Chapter 7 – EFT and claim status

7.1 - Electronic funds transfer (EFT)

EFT is the quick and easy way to have Medicare payments deposited directly into your bank account. It eliminates paperwork and saves time by reducing routine banking.

CMS require that all providers/suppliers enrolling in Medicare or making changes to their enrollment file use EFT.

The EFT Authorization Agreement (Form CMS-588) and a form completion tutorial is available on the Novitas Solutions Enrollment Center ([JH](http://www.novitas-solutions.com/webcenter/spaces/Enrollment_JH)) ([JL](http://www.novitas-solutions.com/webcenter/spaces/Enrollment_JL)).

Note: EFT is available to both paper and electronic billers.

7.2 - Claim status inquiry and response (276/277)

Novitas Solutions EDI supports American National Standards Institute (ANSI) Accredited Standards Committee (ASC) Technical Report 3 (TR3) X12N 276/277 transaction set. This transaction set allows you to submit Medicare Part B claim status inquiries in a batch mode, and receive an electronic claim status response from Novitas Solutions the next day.

The ANSI ASC TR3 X12N 276/277 implementation guides can be downloaded, for a fee, from the [X12 website](https://x12.org/products/technical-reports). See the Standard Companion Guide Health Care Claim: Status Request and Response (276/277) ([JH](http://www.novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName%3A00200306)) ([JL](http://www.novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName%3A00200303)) guide for assistance with setting up the transaction.

Providers who prefer to obtain claim status data in an EDI format but do not have software that supports these transactions, may contract with a clearinghouse to transmit the information on their behalf. However, be aware that you will be charged a fee by the clearinghouse for this service. Providers may also receive claim status on individual claims immediately using Novitasphere, Novitas Solutions free web-based portal.

Providers, agents, and clearinghouses are not required to test the 276/277 transaction set prior to its use. However, users are required to enroll for the transaction prior to use. Providers who have a Clearinghouse or billing service check status on their behalf must be linked to the Clearinghouse or billing service's Submitter ID. If you do plan to test, you must contact the Novitas Solutions EDI help desk (JH) (JL) to schedule a testing date.

All electronic claim status inquiries and responses must be transmitted in the most current ANSI version. All other electronic claim status formats and versions will be discontinued. This does not include claim status requests via the interactive voice response (IVR) unit, an IVR fax of pending and finalized claims, or customer service telephone lines. These inquiries remain toll free.