



HIPAA Batch Electronic Data Interchange (EDI) Companion Guides

→ [EDI Guide](#)

Complete guide to submitting and receiving American National Standards Institute (ANSI) Accredited Standards Committee (ASC) X12N Health Care Insurance electronic transactions through the Availity Health Information Network, as adopted for use by Health Insurance Portability and Accountability Act (HIPAA) regulations.

Availity currently supports the 270/271 Eligibility, 278 Authorization/Referral, 276/277 Claim Status, 837 Claims and 835 Remittance Advice transactions. In addition to interchange segment specifications and sender and receiver identifications, this guide also covers transaction acknowledgements, batch reporting and batched response transactions that you will receive when submitting your batch EDI transactions through the Availity Health Information Network.

→ [Availity CMS-1500 Quick Reference Guide for Electronic Data Elements](#)

Response files can be confusing and contain references to electronic data elements that users may not easily recognize. This document helps you “translate” the ANSI X12 837 Professional format field references into more familiar paper claim fields that you see in your practice management software.

→ [Workers' Compensation Companion Guide](#)

Describes the processing flow of Workers' Compensation claims.

→ [HIPAA and EDI Glossary and Acronyms](#)

For general reference use only.

→ [HIPAA EDI External Code Sources](#)

Outlines Availity's policy for external HIPAA code sets, and lists approved acquisition sources.