

**Oregon ASC Data Coordinator Manual**  
**Update History Table**

<b>Date</b>	<b>Update Type</b>	<b>Page Numbers</b>
06/13/11	<ul style="list-style-type: none"> <li>• Verbiage updated for use of XX8 process to delete previously submitted records</li> <li>• Accident State code 99 added for foreign countries</li> <li>• Loop designation updated for 1<sup>st</sup> Individual Payer ID in 837 5010 specs</li> <li>• Verbiage added noting CPTs/HCPCs only to be reported in SV2 segment in 837 as of 4/01/11 cases</li> <li>• Entire Error Code Reference Sheet reformatted</li> <li>• New error message added to Error Code Reference Sheet</li> <li>• Glossary and Common Terminology reference sheets updated with current reference items</li> <li>• Errata designation updated to A2 in header example in 837 5010 Appendix</li> <li>• DTP typo correct in outpatient record description in 837 5010 Appendix</li> <li>• Segment example updated for qualifier on Other Clinician in 837 5010 Appendix</li> </ul>	<ul style="list-style-type: none"> <li>• 11, 53</li> <li>• 38, 53</li> <li>• 51</li> <li>• 59</li> <li>• 85-100</li> <li>• 96</li> <li>• 149-152</li> <li>• 164</li> <li>• 169</li> <li>• 172</li> </ul>
02/25/11	<ul style="list-style-type: none"> <li>• Removal of outpatient categorization</li> <li>• Flat File Format: Former outpatient procedure fields 1-25 replaced with filler fields per new reporting requirements <ul style="list-style-type: none"> <li>✓ Elements #s 22-34, 135-172 now filler</li> <li>✓ Send CPTs/HCPCs only in Service Line Items = element #s 203-246</li> <li>✓ (Note: 837 format was already updated for this change in last manual release)</li> </ul> </li> <li>• Flat File Format: duplicate display of element 180 removed</li> <li>• Error Code Reference Sheet Updated <ul style="list-style-type: none"> <li>✓ New error message verbiage added</li> <li>✓ Existing error verbiage updated</li> <li>✓ Element #s and Segment #s updated</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• 11</li> <li>• 27, 33, 34</li> <li>• 36</li> <li>• 85-100</li> </ul>

	<ul style="list-style-type: none"> <li>to match new numbering in specs</li> <li>837 5010 Appendix: removed HI*BP segment from outpatient record example, as is no longer allowed on 5010</li> </ul>	<ul style="list-style-type: none"> <li>169</li> </ul>
10/15/10	<ul style="list-style-type: none"> <li>Late Load processing information updated</li> <li>File specs updated to reflect the following changes: <ul style="list-style-type: none"> <li>✓ Bill Types 830 added</li> <li>✓ Principal Dx cannot be repeated in Other Dx fields</li> </ul> </li> <li>837 specs updated for new 5010 version <ul style="list-style-type: none"> <li>✓ <b>Please pay special attention to the new Qualifiers for use with ICD-10 diagnoses</b></li> <li>✓ <a href="#">Look for an upcoming webinar on the changes for the 837 5010</a></li> </ul> </li> <li>System requirements &amp; browser setting changes</li> <li>Error Code Reference Sheet updated to reflect the following changes: <ul style="list-style-type: none"> <li>✓ Principal Dx cannot be repeated in Other Dx fields – new edit added</li> </ul> </li> <li>AdHoc System screen changes and explanations of flag abbreviations added</li> <li>837 5010 Appendix added</li> </ul>	<ul style="list-style-type: none"> <li>6</li> <li>24-49, 54-63</li> <li>54-63</li> <li>63-67</li> <li>89-102</li> <li>141, 142, 144</li> <li>165-174</li> </ul>
04/12/10	<ul style="list-style-type: none"> <li><a href="http://www.compdatainfo.com">www.compdatainfo.com</a> website summary added</li> <li>Outpatient Surgery range updated</li> <li>Data Submission Highlights updated</li> <li>File specs updated to reflect the following changes: <ul style="list-style-type: none"> <li>✓ Added non-covered charges to charge fields</li> <li>✓ MLN #s referenced for NEVs</li> </ul> </li> <li>COMPdata system requirements updated</li> <li>Feedback report overview &amp; resources page updated</li> <li>Potential Duplicate Report added</li> <li>Recap updated for NEVs</li> <li>DQSR charity and worker's comp. payer additions</li> <li>AdHoc screen and report updates</li> <li>867 Appendix updated for non-covered charges</li> </ul>	<ul style="list-style-type: none"> <li>5</li> <li>11</li> <li>12</li> <li>24-48, 52-61</li> <li>66</li> <li>80</li> <li>81, 106-107</li> <li>82-83</li> <li>116-118</li> <li>139-146</li> <li>160</li> </ul>
01/14/10	<ul style="list-style-type: none"> <li>Nationally deleted T-Codes and G-codes</li> </ul>	<ul style="list-style-type: none"> <li>11</li> </ul>

	<p>removed from Outpatient Surgery (OS) range</p> <ul style="list-style-type: none"> <li>• Conversion of <a href="http://www.compdataorg/three_links">www.compdataorg/three_links</a> URL to simplified <a href="http://www.compdata.org">www.compdata.org</a> URL</li> <li>• Updated clinician qualifier for 837 file format</li> <li>• Feedback Report retrieval screen prints updated</li> </ul>	<ul style="list-style-type: none"> <li>• 12, 14, 63, 65, 124, 125, 138</li> <li>• 60</li> <li>• 131-132</li> </ul>
12/01/09	<ul style="list-style-type: none"> <li>• T-Code Outpatient Surgery (OS) range changes</li> <li>• Facility NPI info updated in 837 segment specs and example</li> <li>• NPI Excel file upload option removed from EFT instructions</li> <li>• Newly updated Error Code Reference Sheet</li> <li>• Updates for new DQSR and DSVR date selection functionality</li> </ul>	<ul style="list-style-type: none"> <li>• 11</li> <li>• 52</li> <li>• 69, 70, 72, 74, 76</li> <li>• 87-100</li> <li>• 132-133</li> </ul>
07/16/09	<ul style="list-style-type: none"> <li>• Update to Three Links URL</li> <li>• Changes to system selection screens</li> <li>• Additional information regarding reporting of facility Tax ID</li> <li>• Updates to 837 segment examples in format specs</li> <li>• Updates to COMPdata software installation instructions</li> <li>• Additional information regarding special character use in file names</li> <li>• Newly updated Error Code Reference Sheet</li> <li>• Self Pay sub-category added to DQSR display</li> <li>• Section added regarding new AdHoc Report function</li> <li>• New 837 appendix added</li> </ul>	<ul style="list-style-type: none"> <li>• 14, 120, 121</li> <li>• 15, 20, 122, 131</li> <li>• 38, 52</li> <li>• 52-61</li> <li>• 63-67</li> <li>• 71</li> <li>• 85-96</li> <li>• 110-112</li> <li>• 133-142</li> <li>• 146-155</li> </ul>
02/11/09	<ul style="list-style-type: none"> <li>• 838 process moved and clarified</li> <li>• Outpatient surgical range code addition</li> <li>• Data submission highlights section updated and moved</li> <li>• New online count entry section</li> <li>• URL typo correction for data element 184</li> <li>• Outpatient service line item and charge clarification</li> <li>• 837 element separator information</li> <li>• Clinician mismatch verbiage removed</li> <li>• Feedback system screen changes</li> </ul>	<ul style="list-style-type: none"> <li>• 7</li> <li>• 11</li> <li>• 12</li> <li>• 13 – 21</li> <li>• 39</li> <li>• 29, 42, 61</li> <li>• 52</li> <li>• 78, 79, 120, 127</li> <li>• 118 - 127</li> </ul>

09/30/08	<ul style="list-style-type: none"> <li>• EFT site screen changes</li> <li>• 837 File Format REF segment addition</li> </ul>	<ul style="list-style-type: none"> <li>• 57 - 65</li> <li>• 40</li> </ul>
07/09/08	<ul style="list-style-type: none"> <li>• Instruction and Definition sections of Flat File specs</li> <li>• 837 File Format specs added for vendors</li> </ul>	<ul style="list-style-type: none"> <li>• 12 – 36</li> <li>• 40 - 49</li> </ul>
04/22/08	<ul style="list-style-type: none"> <li>• Single field characters on Expanded Flat File Format</li> <li>• 837 Format loop and POA coding for E-Codes</li> <li>• 837 Format loop for Race and Ethnicity</li> <li>• 837 Format loop for Outpatient Procedures / Service Line Items</li> <li>• Late Load Policy</li> </ul>	<ul style="list-style-type: none"> <li>• 47, 86</li> <li>• 100, 101, 102, 103</li> <li>• 92</li> <li>• 103</li> <li>• 6</li> </ul>