Updates to Availity Gateway
Improve Processing Experience

Updates were made to the Availity® Gateway to decrease claim holds and allow for a more seamless processing experience. These changes became effective with the September 21 release.

Previously, when we received incomplete or inaccurate data, delays in processing time may have occurred as we gathered the correct data through time-consuming administrative activities (i.e., sending letters, denial Explanation of Benefits, etc.). These latest electronic claim edits will enable you and your trading partners to identify and resolve the data issues before the claim enters our system.

If you are already including the data below in your claims, these changes may be transparent. If a claim does not pass the edits, you will receive a message on your Electronic Batch Report (EBR) with details on steps to take to correctly submit the claim. **You or your trading partner may want to validate the information below is included on your electronic claims submissions.**

1. ddrESRD
   - **Edit message:** “The procedure code billed should be reported with a quantity of one per month.”
   - This edit applies to professional claims.
   - This edit will fail on claims containing a quantity greater than one billed with an End Stage Renal Disease procedure code – 90951 through 90966.
   - Check loop/segment 2400 SV104 to confirm the quantity billed is correct and 2400 SV101-2 to confirm the procedure code.

2. ddruSNDR
   - **Edit message:** “Sender code “xxxxx” is invalid. Check Loop/Segment 1000A/NM109.
   - This edit applies to both professional and institutional claims.
   - The claim will fail the edit if the value submitted in 1000A NM109 is not exactly five characters in length and has an alpha character followed by four numerics. Example: A0000.

If you are unable to remediate by using your EBR, contact Availity at 800-282-4548.

1 Availity, LLC is a multi-payer joint venture company. Visit availity.com to register.