# Story

As a billing clerk at a VA Medical Center (VAMC) or Consolidated Patient Account Center (CPAC), I need to be able to electronically transmit the data for a dental claim to the Financial Services Center (FSC) so they can then submit a dental claim compliant with the X12n 00501-X224 Health Care claim: Dental (837D) standard to the HCCH for submission to third party payers.

**Assumptions**

1. The data required by a biller to complete a bill for Dental services will be available to the biller for manual entry into a claim
2. VistA will provide the non-X12n data element VAMC Site/Div ID to the clearinghouse so they can create their claims reports that they return to VistA

# Acceptance Criteria

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| No. | Criteria |
| 1 | The IB System will create a proprietary 837D transmission with the data necessary to send to FSC a transaction that can be mapped to a X12n 00501-X224 Health Care claim: Dental (837D) when a user authorizes a dental claim |
| 2 | The IB System will place the proprietary 837D transaction in the extract queue |
| 3 | The IB System will transmit a proprietary 837D transaction to FSC at the times designated in the IB Site Parameters option |
| 4 | The IB System will provide the ability for a user to manually transmit a proprietary 837D transmission to FSC on demand |
| 5 | The IB System will provide the ability for a user to view the data that was transmitted in the most recent transmission of a specified dental claim |

# Constraints

1. The Financial Services Center (FSC) must do corresponding development of an 837D transaction
2. Change Health Care must do corresponding development to include dental claims in the reports they return to VistA
3. Candidates for IOC sites must include sites that provide Dental Services to their billable Veterans

# Risks

n/a