



# Claims Status Inquiry and Response

Please provide the following information to set up the 276/277 Claims Status inquiry and response.

Provider Name

Tax ID(s)

NPI(s)

Business Contact

Phone

Email

Technical Contact

Phone

Email

Please work with your technology staff to obtain any required software from an appropriate vendor. Your technology staff will need the information below.

**Group Health Cooperative:**

- Tax ID: 396252984
- NPI: 1295800738

**Group Health Cooperative Values:**

Receiver ID Qualifier: ISA 07 'ZZ'  
 Receiver ID: ISA 08 396252984  
 Receiver's Code: GS 03 GHC

**File transmission through the Group Health Cooperative SFTP site:**

- Must be able to submit a standard X12 276 formatted file & must be able to ingest an X12 277 formatted file in return.
- SFTP connection: <https://sftp.group-health.com>
  - o Connection set up form will be sent to the Business contact.
- If file level encryption is also required:
  - o PGP encryption key will be provided to the Technical contact email address.

Please fax completed form to: EDI Operations Fax: 715.552.3500