**Medical Billing EDI Development**

1. **Q:** What is the difference between EDI 837 and EDI 835?  
   **A:** EDI 837 is for healthcare claims, while EDI 835 is for payment remittance.
2. **Q:** How would you validate an EDI file?  
   **A:** Use EDI parsers and validators to ensure compliance with HIPAA standards.
3. **Q:** What is the difference between X12 and HL7?  
   **A:** X12 is for healthcare transactions, while HL7 is for clinical data exchange.
4. **Q:** How would you implement an EDI 837 parser?  
   **A:** Use libraries or write custom code to parse and validate claim data.
5. **Q:** What is the difference between EDI 270 and EDI 271?  
   **A:** EDI 270 is for eligibility inquiries, while EDI 271 is for eligibility responses.
6. **Q:** How would you handle EDI file encryption?  
   **A:** Use protocols like SFTP or AS2 for secure file transfer.
7. **Q:** What is the difference between EDI 834 and EDI 820?  
   **A:** EDI 834 is for enrollment data, while EDI 820 is for payment orders.
8. **Q:** How would you implement an EDI 835 generator?  
   **A:** Use templates or libraries to create payment remittance files.
9. **Q:** What is the difference between EDI 276 and EDI 277?  
   **A:** EDI 276 is for claim status inquiries, while EDI 277 is for claim status responses.
10. **Q:** How would you handle EDI file compression?  
    **A:** Use formats like ZIP or GZIP to compress EDI files for transfer.
11. **Q:** What is the difference between EDI 278 and EDI 275?  
    **A:** EDI 278 is for prior authorization, while EDI 275 is for patient information.
12. **Q:** How would you implement an EDI 270/271 transaction?  
    **A:** Use EDI standards to create and parse eligibility inquiry and response files.