

ACS EDI GATEWAY, INC.

ANSI ASC X12N V5010 270/271

BENEFIT ELIGIBILITY INQUIRY/RESPONSE

COLORADO MEDICAL ASSISTANCE PROGRAM

DEPARTMENT OF HEALTH CARE POLICY AND FINANCING (DHCPF)

COMPANION GUIDE

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Chapter 1 Introduction

Scope

This Companion Guide is intended for trading partner use in conjunction with the ASC X12N/005010X279 ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 (TR3), Health Care Eligibility Benefit Inquiry and Response (270/271). The ANSI ASC X12N TR3s can be accessed at http://www.wpc-edi.com/. This guide outlines the procedures necessary for engaging in Electronic Data Interchange (EDI) with ACS EDI Gateway, Inc. and specifies data clarification where applicable.

Overview

ACS EDI Gateway, Inc., a leader in health care technology, provides EDI gateway services to providers enrolled in contracted health care plans. Our electronic transactions acquisition services provide an array of tools that allow you to:

- Easily submit all of your transactions to one source
- Submit transactions twenty-four hours a day, seven days a week
- Receive confirmation of receipt of each file transferred

Health care plans that participate with ACS EDI Gateway, Inc. are referred to as payers. Transactions are accepted electronically and processed. As an EDI gateway service, we provide connectivity to various health care plans and states where ACS EDI Gateway, Inc. is the fiscal agent, third-party administrator, or contracted clearinghouse.



Chapter 2 Transmission Methods

Trading partners are offered the following transmission methods:

Asynchronous Dial-Up

ACS EDI Gateway provides an interactive, menu-driven Host Data Exchange System (HDE) that allows you to upload your transaction files and receive immediate confirmation of the status of your transfer. The HDE can be accessed using a standard modem and supports modem speeds of up to 56,000 BPS. Transaction transmission is available twenty-four hours a day, seven days a week. This availability is subject to scheduled and unscheduled downtime. It is operational policy to schedule preventative maintenance periods on weekends whenever possible.

Communication Protocols

ACS currently supports the following asynchronous dial-up communication options:

XMODEM, YMODEM, ZMODEM, Kermit

Teleprocessing Requirements

The general specifications for asynchronous dial-up communication with ACS are:

Telecommunications	Hayes-compatible 2400-56K
	BPS asynchronous modem.

File Format ASCII text data.

Compression Techniques PKZIP will compress one or more files into a single ZIP

archive.

WINZIP will compress one or more files into a single ZIP archive.

ACS accepts transmission with any of the above compression techniques, as well as non-compression files.

Data Format 8 data bit, 1stop bit, no parity,

full duplex.

Transmission ProtocolZMODEM uses 128 byte to 1024 byte variable packets and



a 16-bit or 32-bit Cyclical Redundancy Check (CRC).

XMODEM uses 128 byte blocks and a 16-bit CRC.

YMODEM uses 1024 byte blocks and a 16-bit CRC.

KERMIT can be accepted if X, Y, or ZMODEM capabilities are not available with your communication software.

Teleprocessing Settings

ASCII Sending Send line ends with line feeds

(should not be set).

Echo typed characters locally

(should not be set).

Line delay 0 milliseconds.

Character delay 0 milliseconds.

ASCII Receiving Append line feeds to incoming

line ends should not be

checked.

Wrap lines that exceed terminal

width.

Terminal Emulation VT100 or Auto.

Transmission Procedures

SUBMITTER

HOST SYSTEM

1. Dials ACS Host

Answers call, negotiates a common baud rate, and sends to the trading partner:

"Please enter your Login=>"

2. Enters Login Name <CR>

Receives User Name (Login Name) and sends to the trading partner:

"Please enter your password=>"

3. Enters Password <CR>

Receives Login and verifies if trading partner is an authorized user:

Sends HOST selection menu followed by a user prompt:

"Please Select from the Menu Options Below =>"

4. Enters Desired Selection <CR>

#1. Electronic File

Submission: Assigns and sends the transmission file name then waits for ZMODEM (by default) file transfer to be initiated by the trading partner.

#2. View Submitter Profile

Allows submitters to view the transaction types for which they are currently enrolled.

#3. Select File Transfer

Protocol: Allows submitters to change the protocol for the current submission only. The protocol may be changed to (K)ermit, (X)Modem, (Y)Modem, or (Z)Modem. Enter the first letter of the protocol that you wish to use. Enter selection [K,X,Y,Z]:



#4. Download Confirmation

Allows submitters to download confirmation reports.

#9. Exit & Disconnect:

Terminates connection.

5. Enters "1" to send file <CR>

Receives ZMODEM (or other designated protocol) file transfer. Upon completion, initiates file confirmation. Sends file confirmation report.

Sends HOST selection menu followed by a user prompt=>

For Transmission Phone numbers please refer to Chapter 6.

Interactive Transmissions

Interactive transmission may be submitted through the State's Provider Web Portal. The State's Provider Web Portal will include a File and Reports Service (FRS) for file and report retrieval. For information on the State's Provider Web Portal, go to the Provider Services Portal section of the Department's Web site at

http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1201542697178

If you have completed the EDI enrollment but have not received your Trading Partner Submitter login information, please call 1-800-237-0757. Otherwise, please complete and submit the EDI enrollment form located at:

http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1201542696393

The State will follow-up on the enrollment process and send you the necessary user name and password for accessing the Web Portal. If you have not received your Web Portal information within two weeks, please call the State Security Administrator line at 303-866-4473.

Batch Interactive Transmissions

If a trading partner submits more than five (5) eligibility verification batches per day, the sixth and all additional batches that day will be processed off cycle. This means that batches in excess of the five (5) will not receive a response within the normal 2-hour period.

The TR3 recommends trading partners limit requests to 99 per batch. Larger size limits will be considered on a "trading partner by trading partner" basis. Trading partners must request permission to submit batches larger than 99. The trading partner must have written permission from DHCPF. Those batches will be processed during off peak hours.

The fiscal agent will monitor the volume of eligibility requests per Trading Partner ID (TP ID) on a weekly basis. TP IDs with high volumes will be identified and their eligibility requests will be processed during off peak hours



Chapter 3 Transmission Responses

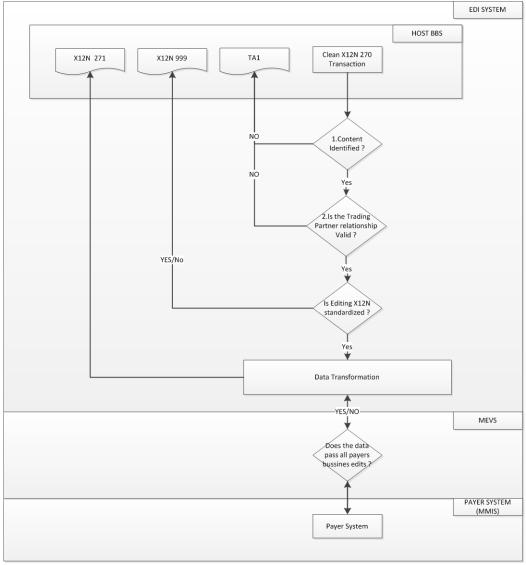
The X12N 270 transaction, requesting benefit eligibility information will be submitted to the ACS EDI Gateway for processing. The ACS clearinghouse validates submission of ANSI X12N format(s). The TA1 Interchange Acknowledgement reports the syntactical analysis of the interchange header and trailer. If the data is corrupt or the trading partner relationship does not exist within the ACS system, the interchange will reject and a TA1 along with the data will be forwarded to an ACS Business Analyst for review and follow-up with the sender.

If the file contains syntactical error(s), a negative X12N 999 Functional Acknowledgement will be generated, reporting the segment(s) and elements(s) where the error(s) occurred. The X12N 999 will be returned to the State's Provider Web Portal for retrieval by the trading partner.

If the file passes syntax validation, and the X12N 270 Request has processed, the ACS clearinghouse will return an X12N 271 Response transaction containing benefit eligibility information via the State's Provider Web Portal.

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Editing and Validation Flow Diagram



LEGEND:

- Content Identification: Data identification is attempted. If the data is corrupt or intended for another resource, a TA1
 (Interchange Acknowledgement) will be forwarded to the ACS clearinghouse call center for review and follow-up with the
 submitter. If the data can be identified, it is then checked for Trading Partner Relationship Validation.
- 2. **Trading Partner Relationship Validation:** The trading partner information is validated. If the trading partner information is invalid, a TA1 (Interchange Acknowledgement) will be forwarded to the ACS clearinghouse call center for review and follow-up with the submitter. If the trading partner relationship is valid, the data will passed for X12N syntax validation.
- 3. **X12N Syntax Validation:** A determination will be made as to whether the data is ANSI ASC X12N. A X12N 999 (Functional Acknowledgement) will be returned to the submitter. The X12N 999 contains **ACCEPT** or **REJECT** information. If the file contained syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported. If the data passes X12N syntax validation, payer business edits will be performed.
- Payer Business Edits: Front-end editing of the data will occur. If the data passes this level, it will proceed to the payer system for processing. If the data fails payer business editing, an AAA segment is returned with the appropriate error code.
- 5. **Data Processed:** The data is processed. An ANSI ASC X12N 271 will be returned to the File and Report Service for submitter pickup.



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Transmission Errors and Reports

HIPAA not only gave the health care community the ability to standardize transactions, but also the ability to standardize front-end edits and the acceptance/rejection reports associated with the edits. The acceptance/rejection reports pertain to precision within EDI transaction format syntax and transaction TR3 compliance. When a report is generated, the type of report returned is dependent on the edit level that is invalid.

A transaction contains three levels where edits are present. The edit level the error occurs in designates rejection of an entire batch or a single file.

The three levels are:

- Interchange Level Errors
 - ISA and IEA
- Functional Group Level Results
 - o GS and GE
- Transaction Set Level Syntax Results
 - o ST and SE

In the description below, the three levels and their affiliated acceptance/rejection reports are discussed.

Interchange Level Errors and TA1 Rejection Report

This edit is enforced by interchange level problems. These edits check the ISA and IEA level segments and the data content within these segments, which consist of the header and footer batch information. Any X12N syntax error that occurs at this level will result in the entire transaction being rejected. These rejections are reported on a TA1. In some cases, an error in the GS and GE can initiate a TA1 rejection. This will occur if the GS and GE envelope cannot be identified.

TA1-Interchange Acknowledgement

A TA1 is an ANSI ASC X12N Interchange Acknowledgement segment used to report receipt of individual interchange envelopes. An interchange envelope contains the sender, receiver, and data type information within the header. The TA1 reports the syntactical analysis of the interchange header and trailer. If invalid (e.g., the data is corrupt or the trading partner relationship does not exist within the ACS system) the interchange will reject and a TA1, along with the data, will be forwarded to the ACS EDI Gateway technical support for review and follow-up with the submitter.

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EXAMPLE:

The transaction was built with incorrect Interchange Control Number at the end of the transaction. Control Number for IEA02 does not match with ISA11

ISA* 00* * 00* * ZZ* TradingP.ID* ZZ*100000* 110907* 0728* ^* 00501* **000000136*** 1* T*:~

GS*HS*TradingP.ID*77016*20110907*0728*20*X*005010X0279A1~

ST*270*0001*005010X279A1~
BHT*0022*13*16784*20110907*0728~
HL*1**20*1~
NM1*PR*2*CO Medical Assistance*****PI*77016~
HL*2*1*21*1~
NM1*1P*1*TEST*HARPREET****XX*0123456789~
HL*3*2*22*0~
NM1*IL*1******MI*A123456~
DMG*D8*20090101~
DTP*291*RD8*20110801-20110907~
EQ*30~
SE*12*0001~

ST* 270*0001*005010X279A1~
BHT*0022*13*16784*20110907*0728~
HL*1**20*1~
NM1*PR*2*CO Medical Assistance*****PI*77016~
HL*2*1*21*1~
NM1*1P*1*TEST*HARPREET****XX*0123456789~
HL*3*2*22*0~
NM1*IL*1******MI*A123456~
DMG*D8*20090101~
DTP*291*RD8*20110801-20110907~
EQ*30~
SE*12*0001~

GE*1*20~

IEA *1*000001036~

For additional information regarding the TA1, please refer to Appendix B in the ANSI ASC X12N 270/271 Implementation Guide.



Functional Group Level Errors and 999 Rejection Report

ACS clearinghouse validates submission of ANSI ASC X12N format(s). An ANSI ASC X12N 999, or Functional Acknowledgement, is generated when an EDI file, e.g., an ANSI ASC X12N file that has passed the header and trailer check, passes through the clearinghouse. The X12N 999 **REJECT** is generated if the file contained syntactical errors. The segment(s) and element(s) where the error(s) occurred will be reported. For an example of this report, please see the ANSI ASC X12N 270/271 TR3. Trading Partner Agreement between ACS EDI Gateway and the trading partners requires this method of acknowledgement.

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EXAMPLE:

The transaction was built with incorrect Total Number of transaction sets at the Functional Group Trailer. GE01 should be 2 as Functional Group contains two GS to GE transactions.

ISA* 00* * 00* * ZZ* TradingP.ID* ZZ*100000* 110907* 0728* ^* 00501* 000000136* 1* T*:~

GS*HS*TradingP.ID*77016*20110907*0728* 20*X*005010X279A1~

ST*270*0001*005010X279A1~
BHT*0022*13*16784*20110907*0728~
HL*1**20*1~
NM1*PR*2*CO Medical Assistance*****PI*77016~
HL*2*1*21*1~
NM1*1P*1*TEST*HARPREET****XX*0123456789~
HL*3*2*22*0~
NM1*IL*1******MI*A123456~
DMG*D8*20090101~
DTP*291*RD8*20110801-20110907~
EQ*30~
SE*12*0001~

ST*270*0001*005010X279A1~
BHT*0022*13*16784*20110907*0728~
HL*1**20*1~
NM1*PR*2*CO Medical Assistance*****PI*77016~
HL*2*1*21*1~
NM1*1P*1*TEST*HARPREET****XX*0123456789~
HL*3*2*22*0~
NM1*IL*1******MI*A123456~
DMG*D8*20090101~
DTP*291*RD8*20110801-20110907~
EQ*30~
SE*12*0001~

GE*1*1~

IEA *1*00000136~

For additional information regarding the TA1, please refer to Appendix B in the ANSI ASC X12N 207/271 Implementation Guide.



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Transaction Set Level Syntax Results and X12N 999 Rejection Report

This edit is enforced by transaction set level syntax problems for all transactions within each functional group. These edits check the ST and SE level segments and the data content within these segments. These segments consist of the entire detailed information within a transaction. Any X12N syntax error that occurs at this level *will result in the entire transaction being rejected.* However, if the *functional group* consists of additional transaction sets without errors, these will be processed. The rejections are reported on an X12N 999.

X12N 999-Functional Acknowledgement

ACS clearinghouse validates submission of ANSI ASC X12N format(s). An ANSI ASC X12N 999, or Functional Acknowledgement, is generated when an EDI file, e.g., an ANSI ASC X12N file that has passed the header and trailer check, passes through the clearinghouse. The X12N 999 contains **ACCEPT** or **REJECT** information; if the file contained syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported. For an example of this report, please see the ANSI ASC X12N 270/271 TR3. Trading Partner Agreement between ACS EDI Gateway and the trading partners requires this method of acknowledgement.

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EXAMPLE:

The following example was built with incorrect Payer ID. The Payer ID for Colorado Medical Assistance Programs is 77016.

ISA* 00* * 00* * ZZ* TradingP.ID* ZZ*100000* 110907* 0728* ^* 00501* 000000136* 1* T*:~

GS*HS*TradingP.ID*77016*20110907*0728* 20*X*005010X279A1~

ST*270*0001*005010X279A1~
BHT*0022*13*16784*20110907*0728~
HL*1**20*1~
NM1*PR*2*CO Medical Assistance*****PI*77028~
HL*2*1*21*1~
NM1*1P*1*TEST*HARPREET****XX*0123456789~
HL*3*2*22*0~
NM1*IL*1******MI*A123456~
DMG*D8*20090101~
DTP*291*RD8*20110801-20110907~
EQ*30~
SE*12*0001~
GE*1*20~

IEA *1*00000136~

For additional information regarding the X12N 999, please refer to Appendix B in the ANSI ASC X12N 270/271 Implementation Guide.



Chapter 4 Data Retrieval Methods

File and Reports Services

The State's Provider Web Portal will include a File and Reports Service for file and report retrieval. Billing Agents and clearinghouses will have the option of retrieving the transaction responses and reports themselves and/or allowing each individual provider the option of retrieval. The trading partner will access the system using a login and password assigned to them. For information on the State's Provider Web Portal, go to http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1201542697178



Chapter 5 Testing

Completion of the testing process must occur prior to electronic submission to ACS EDI Gateway. Assistance from EDI Support Unit representatives is available throughout this process. Each test transmission is inspected thoroughly to ensure no format errors are present. Testing is conducted to verify the integrity of the format, not the integrity of the data; however, in order to simulate a production environment, we request that you send real transmission data. The number of test transmissions required depends on the number of format errors on a transmission and the relative severity of these errors. Additional testing may be required in the future to verify any changes made to ACS's system. Also, changes to the ANSI formats may require additional testing.

In order to expedite testing, ACS EDI Gateway requires providers to submit all X12N test transactions to EDIFECS prior to submitting them to ACS EDI Gateway. The EDIFECS service is free to providers for Colorado Medical Assistance Programs to certify X12N readiness. EDIFECS offers submission and rapid result turn-around 24 hours a day, 7 days a week. For more information, providers can log on to the Colorado specific EDIFECS service at http://www.hipaadesk.com/. During Pilot Submitter Testing an EDI Support Unit representative may be contacted at 1-800-237-0757 to answer questions related to EDIFECS, testing, enrollment, and companion guides.

Pilot Submitter Testing Procedure

After the initial phone interview with the pilot submitter, the EDI Support Unit representative will direct the pilot submitter to the EDIFECS website where the submitter may deliver their X12N test files for analysis. Each test file will be analyzed based on the seven types of testing defined by WEDI SNIP. The submitter will be required to address any errors discovered by EDIFECS during this interrogation before moving on to the next stage of testing with the clearinghouse. After EDIFECS has approved each test file for a particular pilot submitter, the EDI Support Unit representative will schedule a communications test with them. They will also work with them to verify connectivity with both the EDI Gateway and the Host Data Exchange (HDE) following successful completion of this test effort, a testing schedule will be established for each pilot submitter.

Upon receipt of the test files, the EDI Support Unit representative will track each file through the clearinghouse to ensure that all data is transformed properly, and all functions within the EDI Gateway are working as designed. The EDI Support Unit representative will advise the pilot submitter of any problems with the content of the test file, as well as, any problems within the clearinghouse that are discovered during this test phase. If issues are discovered that require a change within the clearinghouse, a second round of testing will be scheduled with that pilot submitter. The timeframe for retest will be dependent on the complexity of the change needed, as well as consideration for the appropriate amount of time needed for unit, systems, and regression testing.



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The next stage of pilot submitter testing will occur after all issues have been resolved and all test files have been successfully executed by a particular pilot submitter. At this point, the test file will be run through the clearinghouse and delivered on through to the Colorado Medicaid Management Information System (MMIS) for processing. The Colorado MMIS testing team will provide feedback to EDI Support Unit representative who will in turn keep pilot submitters updated on the status of their test files.

The EDI Support Unit representative will also verify that the pilot submitter does not have any additional questions or concerns before completing the test.

General Testing Procedures for the Trading Partners

Trading partner testing is designed to ensure transactions submitted to ACS EDI Gateway are properly formatted and may be processed through the ACS clearinghouse system to the Colorado MMIS.

Software vendors are required to test all transactions supported by their products successfully before distributing their products for use. Trading partners that elect to use an approved software vendor are exempt from testing.

Trading partner testing will consist of a combination of ACS clearinghouse error checks by an EDI Support Unit representative. These tests verify a trading partner's ability to submit a specific transaction type containing valid data in the required format. Once all tests are passed, the partner is approved for production.



Chapter 6 Payer Specific Data

EDI Support

ACS has an Electronic Data Interchange (EDI) Support Unit to assist providers and trading partners with their questions and concerns about EDI. The following is a list of services that are provided by the EDI Support Unit:

- Assistance with enrollment
- Explanation of the various EDI submission methods
- Assistance with EDI transmission problems
- Assistance with approved Software Vendor verification

The EDI Support Unit is available to all Colorado Medical Assistance Programs clients and providers Monday through Friday from 8:00 a.m. to 5:00 p.m. MT at 1-800-237-0757.

Enrollment Information

Any entity sending an electronic eligibility verification request to ACS EDI Gateway for processing where reports and responses will be delivered must complete a Provider Enrollment package or Submitter Enrollment package. This package provides the information necessary to assign a Logon Name, Logon ID, and Trading Partner ID, which are required to submit electronic eligibility verification request submission. You may obtain an enrollment package by contacting ACS State Healthcare at 1-800-237-0757 or by downloading it from our website at http://www.colorado.gov/cs/Satellite/HCPF/HCPF/1201542696393.

Acrobat Reader supports this form. It must be printed, completed and mailed or faxed to the appropriate address /fax number listed on the form.

Transmission Telephone Number

ACS provides availability for electronic transmission 24 hours a day, 7 days a week. There are no restrictions on the number or frequency of transmissions. The transmission telephone numbers are 1.800.334.2832 or 1.800.334.4650.

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Tracking Transmission/Production Problems

Please have the following information available when calling the EDI Support Unit regarding transmission and production issues.

Trading Partner ID: Your Trading Partner ID is our key to accessing your trading partner information. Please have this number available each time you contact the EDI Support Unit.

Logon Name and Logon User ID: These allow asynchronous trading partners access to the host system for eligibility verification request submission. The EDI Support Unit uses this information to reference your submitted data.

Highlights

To promote efficient, accurate electronic eligibility verification request submission processing, please note:

- Each user is assigned an ACS EDI Trading Partner ID.
- Logon User IDs (passwords) are nine characters.
- All dates are in the CCYYMMDD format.
- All date/times are in the CCYYMMDDHHMM format.
- The same phone number will be used for transmitting test and production.
- Colorado Medical Assistance Programs Provider IDs are eight characters long.
- The ACS EDI-assigned Payer ID for Colorado Medical Assistance Programs is 77016. Transmissions without this value in the appropriate fields will not be processed.



Chapter 7 X12N 270/271 Benefit Eligibility Inquiry/Response Transactions - V5010.A1

This section contains data clarifications. The clarifications include:

- Identifiers to use when a national standard has not been adopted (and),
- Parameters in the TR3 that provide options

The following are access methods supported by Colorado Medical Assistance Programs:

- 1. Access by Client ID for subscriber and DOB (Preferred Method)
- 2. Access by Last Name, First Name and DOB
- 3. Access by Social Security Number, First Name and Last Name
- Access by Social Security Number and DOB

Many of the data clarifications included in this Companion Guide represent business requirements, not standardization requirements. Inclusion of "Business-Required" clarifications may contribute to more efficient transaction processing.

*Please note the page numbers listed below in each of the tables represent the corresponding page number in the ANSI ASC X12N TR3 for this transaction.

*The ANSI ASC X12N 270/271 TR3 recommends that trading partners limit requests to 99 per batch. X12 larger size limits will be considered on a "trading partner by trading partner" basis. Transactions with greater than 99 per batch may be processed at off-peak hours. In these cases, the responses will be processed overnight and will be available the following day.

X12N 270 Eligibility Request

*The below mentioned Loops, Segments and Data Elements are for Colorado Medicaid specifically. For additional information regarding the X12 5010 format, please refer to the TR3 implementation guide.

*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
C.4	Interchange Control Header	ISA	01	Enter '00'
C.4	Interchange Control Header	ISA	02	This data element should be blank
C.4	Interchange Control Header	ISA	03	Enter '00'
C.4	Interchange Control Header	ISA	04	This data element should be blank



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*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
C.4	Interchange Control Header	ISA	05	Enter 'ZZ'
C.4	Interchange Control Header	ISA	06	Enter your ACS EDI Trading Partner ID
C.5	Interchange Control Header	ISA	07	Enter 'ZZ'
C.5	Interchange Control Header	ISA	08	Enter '100000'
C.5	Interchange Control Header	ISA	11	Enter 'A' (Interchange Control Standards Identifier)
C.5	Interchange Control Header	ISA	13	Enter Interchange Control Number
C.7	Functional Group Header	GS	02	Your ACS EDI Trading Partner ID will be returned on the 271 transaction
C.7	Functional Group Header	GS	03	'77016' will be returned on the 271 transaction
64	Header	BHT	02	Enter '13' (
69	2100A	NM1	01	Enter 'PR' (
70	2100A	NM1	02	Enter '2')
70	2100A	NM1	03	Enter 'CO Medical Assistance Programs
71	2100A	NM1	80	Enter 'PI' ()
71	2100A	NM1	09	Enter '77016'
78	2100B	NM1	09	For Non-Healthcare Providers (Non-Covered Entities) enter the following value: Enter the 8-digit Colorado Medical Assistance Programs Provider ID assigned
89	2000C	HL	04	Enter '0' The client is always the patient; therefore, the dependent level will not be utilized.
96	2100C	NM1	09	Enter the 7-digit Colorado Medical Assistance Programs Client ID number.



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*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
99	2100C	REF	02	Please send the client's 9-digit social security number. Colorado Medical Assistance Programs will utilize a client's SSN as search criteria and can ensure an accurate match.
108	2100C	DMG	02	Colorado Medical Assistance Programs requires the client's date of birth as search criteria for processing eligibility requests.
125	2100C	DTP	01	Enter '291'
125-130	2110C	EQ	01	Enter '30' (Colorado Medical Assistance Programs will only support this level of inquiry. If other codes are submitted, the response will be the same as submission of a type "30" request.

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*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
C.4	Interchange Control Header	ISA	01	'00' will be returned.
C.4	Interchange Control Header	ISA	02	This data element will be blank.
C.4	Interchange Control Header	ISA	03	'00' will be returned.
C.4	Interchange Control Header	ISA	04	This data element will be blank.
C.4	Interchange Control Header	ISA	05	'ZZ' will be returned on the 271 transaction.
C.4	Interchange Control Header	ISA	06	'100000' will be returned on the 271 transaction.
C.5	Interchange Control Header	ISA	07	'ZZ' will be returned on the 271 transaction.
C.5	Interchange Control Header	ISA	08	Your ACS EDI Trading Partner ID will be returned on the 271 transaction.
C.5	Interchange Control Header	ISA	11	Enter 'A' (Interchange Control Standards Identifier)
C.7	Functional Group Header	GS	03	'77016' will be returned.
216	2000A	AAA	03	Colorado Medical Assistance Programs will return one of the following Reject Reason Codes: '04' '41' '42' '79'
216-217	2000A	AAA	04	Colorado Medical Assistance Programs will return one of the following Follow-up Action Codes: 'C' 'N' 'P'



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*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
227-228	2100A	AAA	03	Colorado Medical Assistance Programs will return one of the following Reject Reason Codes: '79' '80' 'T4'
228	2100A	AAA	04	Colorado Medical Assistance Programs will return one of the following Follow-up Action Codes: 'C' 'Y'
238	2100B	AAA	01	'Y" will be populated on 271 response
239	2100B	AAA	03	Colorado Medical Assistance Programs will return one of the following Reject Reason Codes: '51 '50'
239-240	2100B	AAA	04	'N'
245	2000C	HL	04	Colorado Medical Assistance Programs assigns each client with his or her own identification number. '0 or '1' code will be returned on 271 response.
249	2100C	NM1	01	'IL' will be returned on 271
250	2100C	NM1	02	'1' Will be returned on 271
251	2100C	NM1	08	Colorado Medical Assistance Programs will return 'MI',
252	2100C	NM1	09	Colorado Medical Assistance Programs will return the client ID number as found in Medicaid's eligibility files. If the X12N 271 is returned with the AAA segment, then the client ID that was received on the X12N 270 will be returned.
257	2100C	N3		Colorado Medical Assistance Programs will return the client's address information as found in Medicaid's eligibility files.
260	2100C	N4		Colorado Medical Assistance Programs will return the client's city/state/zip information as found in Medicaid's eligibility files.



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*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
263-264	2100C	AAA	03	Colorado Medical Assistance Programs will return one of the following Reject Reason Codes: '56' '58' -'63' -'75' -'76' -
264	2100C	AAA	04	Colorado Medical Assistance Programs will return one of the following Follow-up Action Codes: 'C' 'N'
268	2100C	DMG		Colorado Medical Assistance Programs will return the client's demographic information as found in Medicaid's eligibility files.
283-284	2100C	DTP	01	First iteration of the segment will return code '356'. Second iteration of the segment will return code '357' –.
291-292	2110C	EB	01	Colorado Medical Assistance Programs will return one of the following codes to identify the eligibility information: '1' '6' 'B' 'L' 'MC' 'R' 'V' 'N'
292-293	2110C	EB	02	Colorado Medical Assistance Programs will return Coverage Level Code ' IND '.
293-298	2110C	ЕВ	03	Colorado Medical Assistance Programs will return one of the following TPL Service Type Codes: '5' '18' '35' '42' '48' '50' '56' '68' '81' '88' '96' 'A4' 'A7' 'AG'



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*PAGE	LOOP	SEGMENT	DATA ELEMENT	COMMENTS
298-299	2110C	EB04	04	Colorado Medical Assistance Programs will return the following Insurance Type Codes: 'MC' 'OT'
315-316	2110C	REF	01	Colorado Medical Assistance Programs will return 'IG' or 'F6', Insurance Policy Number or Medicare coverage and to identify the TPL policy number if the code 'R' was used in the EB01 to identify the Other Carrier ID Information.
330	2120C	NM1	01	Colorado Medical Assistance Programs will return one of the following Entity Identifier Codes in cases where a client carries TPL or has a PCP, PHP or BHO '13' '1P' 'P3' 'PR'
331	2120C	NM1	02	Colorado Medical Assistance Programs will return one of the following Entity Identifier Codes in cases where a client carries TPL or has a PCP, PHP or MHASA '1' '2'



Revision History

VERSION NUMBER	CHECK OUT DATE	CHECK IN DATE	OWNER OF UPDATE	DESCRIPTION/LOCATION OF CHANGE