Washington State Medicaid

Health Care Eligibility Benefit Inquiry and Response 270/271 HIPAA Transaction Standard Companion Guide

Refers to the ASC X12N 270/271Technical Report Type 3 Guide (Version 005010X279A1)

CORE v5010 Companion Guide: Version 1.0

September 2019

WASHINGTON STATE MEDICAID CORE COMPANION GUIDE

2019 WA State Medicaid Companion Guide Preface

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This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Washington State Medicaid. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

Contents

1   INTRODUCTION

The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA, Title II) includes requirements that national standards be established for electronic health care transactions, and national identifiers for providers, health plans, and employers. This requires Washington State Health Care Authority (HCA) to adopt standards to support the electronic exchange of administrative and financial health care transactions between covered entities (health care providers, health plans, and healthcare clearinghouses).

The intent of these standards is to improve the efficiency and effectiveness of the nation's health care system by encouraging widespread use of electronic data interchange standards in health care. The intent of the law is that all electronic transactions for which standards are specified must be conducted according to the standards. These standards were developed by processes that included significant public and private sector input.

1.1   SCOPE

Companion Guides are used to clarify the exchange of information on HIPAA transactions between the HCA ProviderOne system and its trading partners. HCA defines trading partners as covered entities that either submit or retrieve HIPAA batch transactions to and from ProviderOne.

This Companion Guide provides information about the 270/271 eligibility inquiry and response file that is specific to HCA and HCA trading partners. This Companion Guide is intended for trading partner use in conjunction with the ASC X12 TR3 270/271 Eligibility Inquiry and Response 005010X279A1. The ASC X12 TR3s that detail the full requirements for all HIPAA mandated transactions are available at http://store.x12.org/store/.

1.2   OVERVIEW

The purpose of this document is to introduce and provide information about Washington State Medicaid solution for submitting real-time and batch 270/271 transactions. This document covers how Washington State Medicaid will work with submitters, testing, connectivity, contact information, transaction envelopes/segments, payer specific business rules and limitations, acknowledgements, and trading partner agreements.

1.3   REFERENCES

The ASC X12 TR3s that detail the full requirements for all HIPAA mandated transactions are available at http://store.x12.org/store/

Washington State Medicaid's companion guides and documentation on transactions for Trading Partners is available for download via the web at: http://www.hca.wa.gov/medicaid/hipaa/Pages/index.aspx

The Council for Affordable Quality Healthcare (CAQH) launched the Committee on Operating Rules for Information Exchange (CORE) with the vision of giving providers access to eligibility and benefits information before or at the time of service using the electronic system of their choice for any patient or health plan. http://www.caqh.org/

1.4 ADDITIONAL INFORMATION

1.4.1   Intended Users

Companion Guides are to be used by members/technical staff of trading partners who are responsible for electronic transaction/file exchanges.

1.4.2   Relationship to HIPAA Implementation Guides

Companion Guides are intended to supplement the ASC X12 TR3 HIPAA transactions. Rules for format, content, and field values can be found in the Implementation Guides. This Companion Guide describes the technical interface environment with HCA, including connectivity requirements and protocols, and electronic interchange procedures. This guide also provides specific information on data elements and the values required for transactions sent to or received from HCA.

Companion Guides are intended to supplement rather than replace the ASC X12 TR3 for each transaction set. The information in these documents is not intended to:

- Modify the definition, data condition, or use of any data element or segment in the standard Implementation Guides.

- Add any additional data elements or segments to the defined data set.

- Utilize any code or data values that are not valid in the standard Implementation Guides

- Change the meaning or intent of any implementation specifications in the standard Implementation Guides

2   GETTING STARTED

2.1 Working With Washington State Medicaid

Email: hipaa-help@hca.wa.gov
- All emails result in the assignment of a Ticket Number for problem tracking

Information required for initial email:
- Name

- Phone Number

- Email Address

- 7 digit Provider One ID Number

- NPI

- HIPAA File Name

- Detailed Description of Issue

- HIPAA Transaction

Information required for follow up call(s):
- Assigned Ticket Number

2.2   TRADING PARTNER REGISTRATION

2.2.1   Provider One companion guides and trading partner enrollment package are available for download via the web at
http://www.hca.wa.gov/medicaid/hipaa/Pages/index.aspx

2.2.2   The Trading Partner completes the Trading Partner Agreement (TPA) and submits the signed agreement to HCA.

HCA HIPAA EDI Department
PO Box 45562
Olympia, WA 98504-5562

**For Questions call 1-800-562-3022 **

2.2.3 The trading partner is assigned a Submitter ID, Domain, Logon User ID and password.

2.3   CERTIFICATION AND TESTING OVERVIEW

All trading partners need to complete a TPA and successfully test the submission of their HIPAA transactions before they are allowed to submit HIPAA production transactions. Washington State Medicaid considers a trading partner ready to submit HIPAA production transactions when they have received a positive TA1 and 999 for their submitted HIPAA test transaction.

Trading partners should notify HCA using the contact information referenced in section 5 regarding their successful testing. HCA will then update the trading partners profile to production ready. Once this is completed, trading partners can begin submitting HIPAA production files.

3 TESTING WITH THE PAYER

The trading partner can submit all HIPAA test and production files through the following methods.

- **Provider One Web Portal**

  Test URL: https://www.waproviderone.org/edi

  Production URL: https://www.waproviderone.org

- **Secure File Transfer Protocol (SFTP)**

  URL: sftp://ftp.waproviderone.org/

- **Hypertext Transfer protocol (HTTP MIME Multipart)**

  REALTIME (Test URL):

  https://www.waproviderone.org/edi/realtime-httpmultipart

  REALTIME (Production URL):

  https://www.waproviderone.org/realtime-httpmultipart

  BATCH (Test URL):

  https://www.waproviderone.org/edi/batch-httpmultipart

  BATCH (Production URL):

  https://www.waproviderone.org/batch-httpmultipart

- **Simple Object Access Protocol (SOAP + WSDL)**

  REALTIME (Test URL):

  https://www.waproviderone.org/edi/realtime-soap

  REALTIME (Production URL):

  https://www.waproviderone.org/realtime-soap

  BATCH (Test URL):

  https://www.waproviderone.org/edi/batch-soap

  BATCH (Production URL):

  https://www.waproviderone.org/batch-soap

These methods will be discussed in more detail in section 4.

4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

4.1 Process Flows

When the trading partner submits the 270 request by any one of the specified methods the 270 request will be validated using EDI validator (up to levels HIPAA validation level 1 & 2), translated and will be processed. The positive outcome will be the 271 response. Negative outcomes will result in negative TA1 and/or 999 transactions.

4.1.1 Provider One Web Portal

Log into the Provider One Portal, select the appropriate security profile and the following options will be viewable to the user:

Scroll down to the HIPAA heading to manage the submission and retrieval of HIPAA transactions

Select Submit HIPAA Batch Transaction

Click on the Upload link

On the file upload page click on the Browse button to attach HIPAA file from the local file directory. After selecting the file, press OK to start the upload.
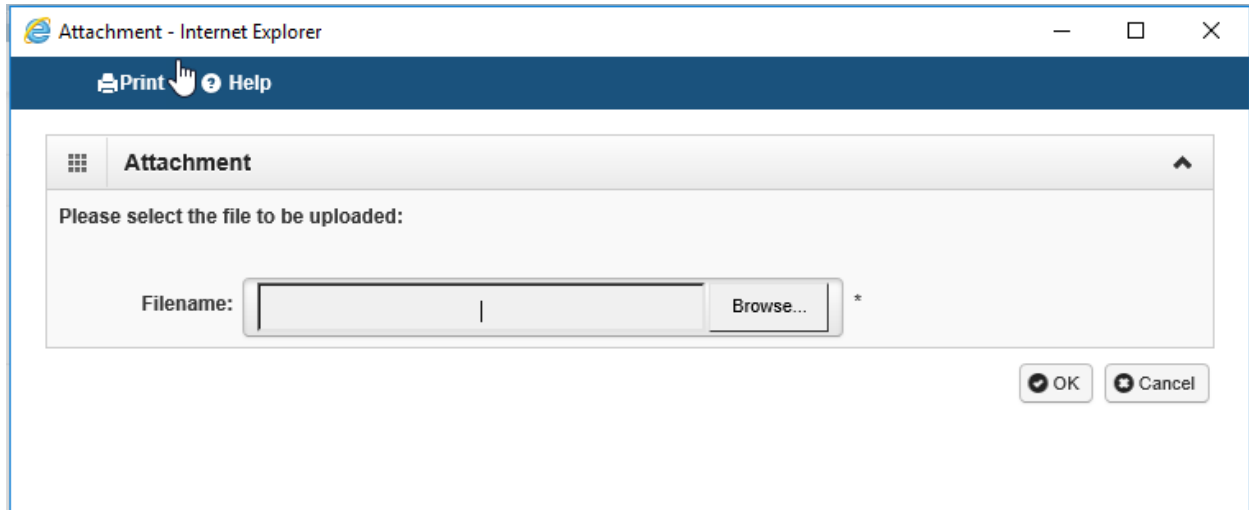
Once the Ok button is selected, a confirmation message is displayed on the screen along with transmission details. This message only means the file was submitted.
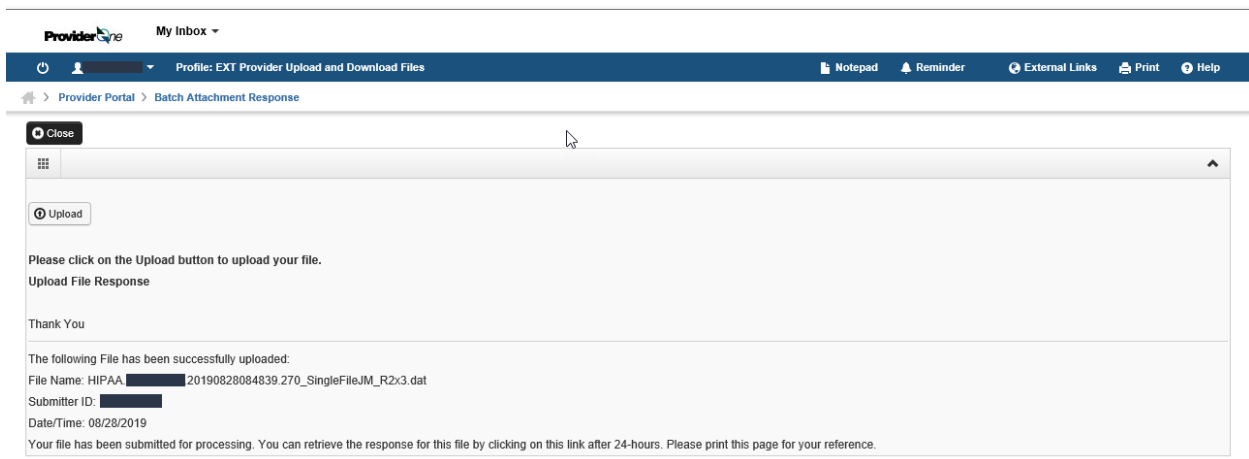
To determine if the file was successfully validated and processed go back to the ProviderOne main page, select Retrieve HIPAA Batch Response, and follow these steps:

- Select 270 from the Transaction Type drop down menu

- There are 3 filter boxes available that contain the following filter criteria that you can use to search for the submitted HIPAA file
  - File Name
  - ProviderOne ID
  - Response Date
  - Upload/Sent Date

- An example of a search would be %Your ProviderOne ID%
  - The % are considered wildcard searches
  - Example: %123456700%

- Click on Go once you've entered all the necessary filters. Keep in mind you can enter up to 3 filters to refine the search of your submitted HIPAA 270 transaction

- All the HIPAA transactions that match your search criteria will return on the page

- Click on the down arrow in the Upload/Sent Date column to sort for the most current files to least current files

- Now look for Accepted or Rejected in the Acknowledgement Status Column.

  - Accepted means the 270 file will be processed and the 271 will be generated
  - Rejected means the file will not be processed due to errors.
  - Partial means some of the file was processed but not all of it due to errors

The Custom Report is a user friendly report that lets you know what caused the file to reject

Be sure to scroll to the right side of the screen to see all of the transactions available

Custom Report Response File	999 Response File Name	Interchange Control Number	Response File Name	Response Date	Submitted Business Units	Loaded Business Units
PAA████20190828084839.270_SingleFileJM_R2x3.dat.tmp_Audit.html	HIPAA████20190828084839.270_SingleFileJM_R2x3.dat.tmp_GS620183629_999.dat	292541282	Hipaa████0820201909033758.271.O.out	08/28/2019	1	1

g Page: 1

4.1.2 Secure File Transfer Protocol (SFTP)

Trading partners can email hipaa-help@hca.wa.gov for information on establishing connections to the ProviderOne SFTP server.

There are two categories of folders within a Trading Partner's SFTP folders:

- **TEST –** Trading Partners should submit and receive their test files under this root folder
- **PROD –** Trading Partners should submit and receive their production files under this root folder

The following folders are available under the TEST/PROD folders within the SFTP root:

'HIPAA_Inbound' - This folder should be used to drop the HIPAA Inbound files that needs to be submitted to HCA

'HIPAA_Ack' - Trading partner should look for acknowledgements to the files submitted in this folder. TA1, 999 and Custom Reports will be available for all the files submitted by the trading partner

'HIPAA_Outbound' – HIPAA outbound transactions generated by HCA will be available in this folder

'HIPAA_Error' – Any inbound file that is not processed, HIPAA compliant, or is not recognized by ProviderOne will be moved to this folder

'HIPAA Working' – There is no functional use for this folder at this time.

'HIPAA ReadMe' – Important messages regarding password updates, outage information and general SFTP messages will be available within this folder.

Folder structure will appear as:

```
☐ 📁 PROD
        📁 HIPAA_Ack
        📁 HIPAA_Error
        📁 HIPAA_Inbound
        📁 HIPAA_Outbound
        📁 HIPAA_Working
☐ 📁 Test
        📁 HIPAA_Ack
        📁 HIPAA_Error
        📁 HIPAA_Inbound
        📁 HIPAA_Outbound
        📁 HIPAA_Working
```
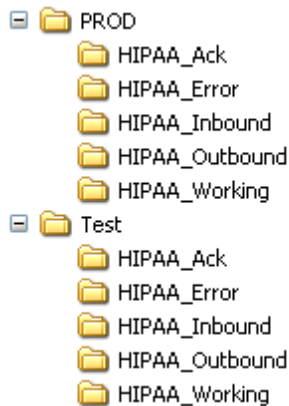
File Naming Convention

HIPAA inbound files need to follow the below file naming convention:

For Inbound transactions:

HIPAA.<TPId>.<datetimestamp>.<originalfilename>.<dat>

Example of file name: HIPAA.123456700.080120142100.270.dat

- <TPId> is the Trading Partner Id
- <datetimestamp> is the date timestamp
- <originalfilename> is the original file name which is submitted by the trading partner.

All HIPAA submitted files MUST BE **.dat** files or they will not be processed

4.1.3 Hypertext Transfer protocol (HTTP MIME Multipart)

Trading partners can send the 270 request [both Real Time and Batch] using HTTP MIME Multipart.

Refer to the example provided in Appendices 3: Transmission Examples

4.1.4 Simple Object Access Protocol (SOAP + WSDL)

Trading partners can send the 270 request [both Real Time and Batch] using SOAP+WSDL.

Refer to the example provided in Appendices 3: Transmission Examples

4.2   TRANSMISSION ADMINISTRATIVE PROCEDURES

Trading partners can send 270/271 transactions to HCA using four methods:

- **Provider One Web Portal**

  Test URL: https://www.waproviderone.org/edi

  Production URL: https://www.waproviderone.org

- **Secure File Transfer Protocol (SFTP)**

  URL: sftp://ftp.waproviderone.org/

- **Hypertext Transfer protocol (HTTP MIME Multipart)**

  REALTIME (Test URL):

  https://www.waproviderone.org/edi/realtime-httpmultipart

  REALTIME (Production URL):

  https://www.waproviderone.org/realtime-httpmultipart

  BATCH (Test URL):

  https://www.waproviderone.org/edi/batch-httpmultipart

  BATCH (Production URL):

  https://www.waproviderone.org/batch-httpmultipart

- **Simple Object Access Protocol (SOAP + WSDL)**

  REALTIME (Test URL):

  https://www.waproviderone.org/edi/realtime-soap

  REALTIME (Production URL):

  https://www.waproviderone.org/realtime-soap

  BATCH (Test URL):

https://www.waproviderone.org/edi/batch-soap

BATCH (Production URL):

https://www.waproviderone.org/batch-soap

4.3 RE-TRANSMISSION PROCEDURE

If the test file generates a negative TA1 or negative 999 acknowledgments, then the submission is unsuccessful and the file is rejected. The trading partner needs to resolve all the errors that are reported on the negative TA1 or negative 999 and resubmit the file for test. Trading partners will continue to test in the testing environment until they receive a positive TA1 and positive 999. Receipt of a positive TA1 and 999 transaction is considered successful testing. Trading partners are allowed to submit production files once they successfully completed testing.

4.4 COMMUNICATION PROTOCOL SPECIFICATIONS

Trading partners can submit HIPAA transactions to HCA using the following four methods:

- Secure File Transfer Protocol (SFTP)
- ProviderOne Web Portal

- Hypertext Transfer protocol (HTTP MIME Multipart)
- Simple Object Access Protocol (SOAP + WSDL)

4.5 PASSWORDS

Washington State Medicaid requires every trading partner to have a valid login credentials to submit 270/271 transaction through all four submission methods available.

If you have forgotten your login credentials (login id and password) please use the email below to have this information reset.

- SFTP – hipaa-help@hca.wa.gov

- ProviderOne Web Portal – provideronesecurity@hca.wa.gov

- Hypertext Transfer Protocol (HTTP MIME Multipart) – provideronesecurity@hca.wa.gov

- Simple Object Access Protocol (SOAP + WSDL) – provideronesecurity@hca.wa.gov

5   CONTACT INFORMATION

5.1   EDI CUSTOMER SERVICE AND TECHNICAL ASSISTANCE

Email: hipaa-help@hca.wa.gov

- All emails result in the assignment of a Ticket Number for problem tracking

- Information required for initial email:
    - Name

    - Phone Number

    - Email Address

    - 7 digit ProviderOne ID Number

    - NPI

    - HIPAA File Name

    - Detailed Description of Issue

    - HIPAA Transaction

- Information required for follow up call(s):
    - Assigned Ticket Number

5.2   PROVIDER SERVICE NUMBER

1-800-562-3022

5.3   APPLICABLE WEBSITES/E-MAIL

HIPAA website: http://www.hca.wa.gov/medicaid/hipaa/Pages/index.aspx

6   CONTROL SEGMENTS/ENVELOPES

6.1   Interchange Control Structure(ISA-IEA)

Washington State Medicaid uses the below custom values for the ISA header of the 270 transaction request. The IEA segment does not require any custom values. In addition, refer to the ASC X12 270/271 technical report type 3 guide.

270 ISA Segment Rules

Page	Loop	Segment	Data Element	Element Name	Comments
Interchange Control Header					
App.C	Envelope	ISA	01	Authorization Information Qualifier	Please use '00'
App.C	Envelope	ISA	03	Security Information Qualifier	Please use '00'
App.C	Envelope	ISA	05	Interchange ID Qualifier	Please use 'ZZ'
App.C	Envelope	ISA	06	Interchange Sender ID	Please use the 9-digit ProviderOne Trading Partner ID followed by spaces
App.C	Envelope	ISA	07	Interchange ID Qualifier	Please use 'ZZ'
App.C	Envelope	ISA	08	Interchange Receiver ID	Please use '77045' followed by spaces
App.C	Envelope	ISA	11	Interchange Control Standards Identifier	Please use '^'

				Component Element Separator	
App.C	Envelope	ISA	16		Please use ':'

6.2 Functional Group Structure (GS-GE)

Washington State Medicaid 270/271 transaction uses the below custom values of GS segment of the 270 transaction request. GE segment does not require any custom values. In addition, refer to the ASC X12 270/271 technical report type 3 guide.

Functional Group Header					
App.C	Envelope	GS	02	Application Sender's Code	Please use the 9-digit ProviderOne Trading Partner ID
App.C	Envelope	GS	03	Application Receiver's Code	Please use '77045'

6.3 Transaction Set Header/Trailer (ST-SE)

Washington State Medicaid 270/271 transaction does not expect any custom values for ST-SE segment of 270 Request. In addition to this, refer to the ASC X12 270/271 technical report type 3 guide.

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

7.1 General Information

HIPAA standards are specified in the Implementation Guide for each mandated transaction and modified by authorized Addenda. Currently, the 270/271 transaction has one Addendum. This Addendum has been adopted as final and is incorporated into HCA requirements.

An overview of requirements specific to the transaction can be found in the 270/271 Implementation Guide. Implementation Guides contain information related to:

- Format and content of interchanges and functional groups

- Format and content of the header, detailer and trailer segments specific to the transaction

- Code sets and values authorized for use in the transaction

- Allowed exceptions to specific transaction requirements

Transmission sizes are limited based on two factors:

- Number of Segments/Records allowed by HCA

- HCA file size limitations

HCA limits the size of the transaction (ST-SE envelope) to a maximum of 5,000 repeats of Loop 2000C in the 270 transaction.

Batch Daily Maximum

HCA will limit the number of batch eligibility inquiries to a maximum of 100,000 subscribers per day per trading partner. HCA will also monitor validity of transaction submissions, and assess if inquiries are resulting in an appropriate number of corresponding Medicaid claims submissions. HCA reserves the right to terminate the Trading Partner Agreement with the Submitter if HCA determines that these stipulations have been violated by the Submitter.

Real-Time Daily Maximum

HCA limits the number of real-time eligibility inquiries to a maximum of 25,000 per day per trading partner. HCA will also monitor validity of transaction submissions, and assess if inquiries are resulting in an appropriate number of corresponding Medicaid claims submissions. HCA reserves the right to terminate the Trading Partner Agreement with the Submitter if HCA determines that these stipulations have been violated by the Submitter.

HCA will continually examine the performance of the system in regards to real-time eligibility inquiries and will consider increasing the daily maximum on a monthly basis.

7.2 Data Format

Delimiters

The ProviderOne will use the following delimiters on outbound transactions:

- Data element separator - Asterisk (*)

- Sub-element Separator - colon (:)

- Segment Terminator - Tilde (~)

7.3 Data Interchange Conventions

HCA accepts 270 transaction files with single ISA/IEA and GS/GE envelopes. 270 transactions (with their limit of 5,000 repeats of Loop 2000C within an ST/SE envelop), can have multiple ST/SE envelops within the same GS/GE envelope.

7.4 Pre-Query and Post-Query validation

7.4.1 Pre-Query validation

Washington State Medicaid's 270/271 transaction will perform a pre-query validation to make sure the required Subscribe data elements are preset prior to routing the information to Eligibility and Benefit system.

For Subscriber request below data elements can be submitted:

2100C/NM109 Subscriber ID (Client ID) and

2100C/NM103 Subscriber Last Name and

2100C/NM104 Subscriber First Name and

2100C/DMG Subscriber Date of Birth (DOB)

2100C/REF Social Security Number (SSN)

Below are the applicable client eligibility search options

1. Client ID
2. Full Name, DOB
3. Full Name, SSN
4. SSN, DOB
5. Client ID, Full Name, DOB
6. Client ID, Last Name, DOB
7. Client ID, Last Name

AAA error codes will be sent out as defined in the CORE guidelines. Multiple

AAA segments can be returned based on invalid or missing data elements.

7.4.2 Post-Query validation

Once the Pre-Query validation is completed a Post Query validation will be performed.

During Post Query validation, the system will match the below mentioned Subscriber elements against the Washington State Medicaid's Eligibility and Benefit's System

2100C/NM109 Subscriber ID (Client ID) and

2100C/NM103 Subscriber Last Name and

2100C/NM104 Subscriber First Name and

2100C/DMG Subscriber DOB and

2100C/REF SSN

If a proper match is found the system will return an Eligibility Response otherwise AAA error codes will be sent out as defined in the CORE guidelines. Multiple AAA segments can be returned based on the missing or invalid data elements.

7.5 Last Name Normalization

Washington State Medicaid will use the below rules to normalize the submitted last name on the 270 request.

Character Strings to be removed during Name Normalization

JR, SR, I, II, III, IV, V, RN, MD, MR, MS, DR, MRS, PHD, REV, ESQ

Punctuation Values Used as Delimiters in Last Name

Space, comma, forward slash, and apostrophe

All special characters within the basic character set are ignored:
"!", """, "&", "'", "(", ")", "*", "+", ",", "-", ".", "/", ":", ";", "?", "=" and space – Consider removing the " in this list.

If the un-normalized stored last name does not match the un-normalized submitted last name then INS segment will be returned with an appropriate code along with the corrected last name.

7.6 HIPAA Service Types and Financial Information

Washington State Medicaid will support both Generic and Explicit inquiries. Washington State Medicaid does not support patient financial responsibilities for co-insurance, co-payment, deductible, and will return zero financial responsibility information.

7.7 Rejected Transmissions and Transactions

270 transactions will be rejected if the file does not meet HIPAA standards for syntax, data integrity and structure (Strategic National Implementation Process (SNIP) type 1 and 2). Additionally, the transactions will be validated against HCA defined custom rules (SNIP type 7) as specified in the Transaction Specification section. Non-compliance of the custom rules will result in rejection of the transaction.

8 ACKNOWLEDGEMENTS AND/OR REPORTS

8.1 Acknowledgement Procedures

Once the file is submitted by the trading partner and is successfully received by the ProviderOne system, a response in the form of TA1 and 999 acknowledgment transactions will be returned to the trading partner. The ProviderOne system generates positive TA1 and positive 999 acknowledgements, if the submitted HIPAA file meets HIPAA standards related to syntax and data integrity. For files, which do not meet the HIPAA standards a negative TA1 and/or negative 999 are generated and sent to the trading partner.

- **Custom Report**

  The Custom Report is a user friendly report that lets submitters know what caused the file to reject. It is the equivalent of a user friendly 999 report.

- **999**

  999 will be generated to indicate the status of a functional group and transaction set.

- **TA1**

  TA1 will be generated to indicate the status of Interchange Control Group.

In case of SOAP + WSDL or HTTP MIME Multipart (real time) 999 or TA1 acknowledgements will only be returned if errors exist within the file. If there are no errors then the 999 and TA1 will not be generated.

9   TRADING PARTNER AGREEMENTS

Trading partner agreements are used to establish and document the relationship between HCA and covered entities.

1. ProviderOne trading partner enrollment package is available for download via the web at http://www.hca.wa.gov/medicaid/hipaa/Pages/index.aspx

2. The Trading Partner completes the Trading Partner Agreement and submits the signed agreement to HCA.

Submit to:

HCA HIPAA EDI Department
PO Box 45562
Olympia, WA 98504-5562

For Questions call 1-800-562-3022

3. Once the agreement is processed the trading partner is assigned a Submitter ID, Domain, Logon User ID and password.

10   TRANSACTION SPECIFIC INFORMATION

This section describes how ASC X12N Implementation Guides (IGs) adopted under HIPAA will be detailed with the use of a table. The tables contain a row for each segment that Washington State Medicaid has something additional, over and above, the information in the IGs. That information can:

1. Limit the repeat of loops or segments
2. Limit the length of a simple data element
3. Specify a sub-set of the IGs internal code listings
4. Clarify the use of loops, segments, composite and simple data elements
5. Any other information tied directly to a loop, segment, composite or simple data element pertinent to trading electronically with Washington State Medicaid Health Plan

The following table specifies the columns and suggested use of the rows for the detailed description of the transaction set companion guides.

270 Eligibility Inquiry

Page	Loop	Segment	Data Element	Element Name	Comments
Interchange Control Header					
App.C	Envelope	ISA	01	Authorization Information Qualifier	Please use '00'
App.C	Envelope	ISA	03	Security Information Qualifier	Please use '00'
App.C	Envelope	ISA	05	Interchange ID Qualifier	Please use 'ZZ'
App.C	Envelope	ISA	06	Interchange Sender ID	Please use the 9-digit ProviderOne Trading Partner ID followed by spaces
App.C	Envelope	ISA	07	Interchange ID Qualifier	Please use 'ZZ'

App.C	Envelope	ISA	08	Interchange Receiver ID	Please use '77045' followed by spaces
App.C	Envelope	ISA	16	Component Element Separator	Please use ':'
Functional Group Header					
App.C	Envelope	GS	02	Application Sender's Code	Please use the 9-digit ProviderOne Trading Partner ID
App.C	Envelope	GS	03	Application Receiver's Code	Please use '77045'
Information Source Name					
70	2100A	NM1	03	Name Last or Organization Name	Please use 'WA State DSHS'
71	2100A	NM1	09	Identification Code	Please use '77045'
Information Receiver Name					
77	2100B	NM1	08	Identification Code Qualifier	Please use 'SV' for non healthcare providers/submitters Please use 'XX' for healthcare providers
79	2100B	NM1	09	Identification Code	Please enter 9 digit ProviderOne ID if NM108 = 'SV'

					Please enter NPI if NM108 = 'XX'
Subscriber Level					
NOTE: A maximum of 5,000 subscriber loops per ST-SE segment can be processed in batch mode					
Subscriber Name					
93	2100C	NM1	03	Name Last or Organization Name	Please enter Last Name of Subscriber Will be used in search options 2, 3 5, 6, 7
93	2100C	NM1	04	Name First	Please enter First Name of Subscriber Will be used in search options 2, 3, 5
96	2100C	NM1	09	Identification Code	Please enter ProviderOne Client ID Will be used in search options 1, 5, 6, 7
Subscriber Additional Identification					

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98	2100C	REF	01	Reference Identification Qualifier	Please use 'SY'
99	2100C	REF	02	Reference Identification	Please enter Social Security Number of subscriber Will be used in search option 3, 4
Subscriber Demographic Information					
108	2100C	DMG	02	Date Time Period	Please enter Date of Birth of subscriber Will be used in search option 2, 4, 5, 6
Subscriber Date					
123	2100C	DTP	03	Date Time Period	Note: 1. The date of service may not specify a date more than 4 years prior to the date of inquiry 2. If a range of dates is specified, the range may not be for a period greater than two years

				Subscriber Eligibility Or Benefit Inquiry Information	
					HCA supports all of the mandated CORE service type codes listed below. 1, 2, 4, 5, 6, 7, 8, 12, 13, 18, 20, 30, 33, 35, 40, 42, 45, 47, 48, 50, 51, 52, 53, 62, 65, 68, 73, 76, 78, 80, 81, 82, 86, 88, 93, 98, 99, A0, A3, A6, A7, A8, AD, AE, AF, AG, AI, AL, BG, BH, MH, UC An inquiry submitted with a service type code other than those listed above (excluding 30) will be treated as a generic inquiry
125	2110C	EQ	01	Service Type Code	

271 Eligibility Inquiry Response

Page	Loop	Segment	Data Element	Element Name	Comments
- **Interchange Control Header**					
App.C	Envelope	ISA	01	Authorization Information Qualifier	Receive '00'
App.C	Envelope	ISA	03	Security Information Qualifier	Receive '00'
App.C	Envelope	ISA	05	Interchange ID Qualifier	Receive 'ZZ'
App.C	Envelope	ISA	06	Interchange Sender ID	Receive '77045' followed by spaces
App.C	Envelope	ISA	07	Interchange ID Qualifier	Receive 'ZZ'
App.C	Envelope	ISA	08	Interchange Receiver ID	Receive ProviderOne ID followed by spaces
App.C	Envelope	ISA	11	Interchange Control Standards Identifier	Receive '^'
App.C	Envelope	ISA	16	Component Element Separator	Receive ':'
Functional Group Header					
App.C	Envelope	GS	02	Application Sender's Code	Receive '77045'

App.C	Envelope	GS	03	Application Receiver's Code	Receive ProviderOne ID
Information Source Name					
219	2100A	NM1	03	Name Last or Organization Name	Receive 'WA State DSHS'
220	2100A	NM1	09	Identification Code	Receive '77045'
Information Source Contact Information					
222	2100A	PER	02	Name	Receive 'WA State DSHS Provider Relations'
223	2100A	PER	04	Communication Number	Receive '8005623022'
Information Receiver Name					
234	2100B	NM1	08	Identification Code Qualifier	Receive 'XX' for healthcare providers otherwise Receive 'SV' for non-healthcare providers/submitters
235	2100B	NM1	09	Identification Code	Receive NPI of healthcare providers if NM108 = XX otherwise Receive ProviderOne ID of non-healthcare providers/submitters if NM108 = SV

				Subscriber Name	
252	2100C	NM1	09	Identification Code	Receive ProviderOne Client ID
Subscriber Address					
258	2100C	N3	02	Address Information	Receive WA State County Code
Subscriber Date					
284	2100C	DTP	02	Date Time Period Format Qualifier	Receive Qualifier from 270
284	2100C	DTP	03	Date Time Period	Receive Eligibility Date Time Period from 270
Subscriber Eligibility Or Benefit Inquiry Information					
293	2110C	EB	03	Service Type Code	For generic inquiries HCA will return the 12 mandated service type codes For specific inquiries HCA will return the service type code from the 270
299	2110C	EB	05	Plan Coverage Description	HCA may return the following information in this data element: - Benefit Service Package (BSP) Description

					- Recipient Aid Category (RAC) Description - Development Disability Information - Children with Special Health Care Needs Information - Assignment Type Assignment Type is in relation to restricted client information
300	2110C	EB	07	Monetary Amount	If EB01=Y, then receive Total Spend down If EB01 = A, B, C, then receive zero '0'
Message Text					
23	2110C	MSG	01	Free-Form Message Text	HCA may return the following information in this data element: - Retro Eligibility - EMER Liability - Remaining EMER - Spend Down Status - Remaining Spend down

					-Delayed Certification - Receive Message "This is the client's eligibility as of this date, based on information available at this time" for Medicaid - Receive Message "We believe this information to be correct, but you must verify eligibility and coverage with the specified payor" for TPL and Medicare

APPENDICES

This section contains one or more appendices.

1   Implementation Checklist

This appendix contains all necessary steps for going live.

2   Business Scenarios

- Generic Inquiry
- Explicit Inquiry
- Patient Financial Information
- Patient Last Name Normalization
- AAA Error Codes
- Real Time Mode
- Batch Mode
- HIPAA Validation

3   Transmission Examples

The following is an example of a Real time request message using the HTTP MIME Multipart envelope method. The HTTP Header is shown in blue. The remainder of the request is the body of the MIME Multipart message.

Sample HTTP Real-Time Request:

```
POST http://gdwaedi01.cns-inc.com:10817/ecams/multipart HTTP/1.1
Content-Type: multipart/form-data; boundary====1375899894585===
Cache-Control: no-cache
Pragma: no-cache
User-Agent: Java/1.6.0_45
Host: gdwaedi01.cns-inc.com:10817
Accept: text/html, image/gif, image/jpeg, *; q=.2, */*; q=.2
Connection: keep-alive
Content-Length: 1879

--===1375899894585===
Content-Disposition: form-data; name="PayloadType"
Content-Type: text/plain; charset=UTF-8

X12_270_Request_005010X279A1
--===1375899894585===
Content-Disposition: form-data; name="ProcessingMode"
Content-Type: text/plain; charset=UTF-8

RealTime
--===1375899894585===
Content-Disposition: form-data; name="PayloadID"
Content-Type: text/plain; charset=UTF-8

0536799f-c69c-4ad3-a1e2-a0bf6a1d6c10
--===1375899894585===
Content-Disposition: form-data; name="TimeStamp"
Content-Type: text/plain; charset=UTF-8

2013-08-07T14:24:54Z
--===1375899894585===
Content-Disposition: form-data; name="UserName"
Content-Type: text/plain; charset=UTF-8

supuser
--===1375899894585===
Content-Disposition: form-data; name="Password"
Content-Type: text/plain; charset=UTF-8

dshs123$
--===1375899894585===
Content-Disposition: form-data; name="SenderID"
```

```
Content-Type: text/plain; charset=UTF-8

201007700
--===1375899894585===
Content-Disposition: form-data; name="ReceiverID"
Content-Type: text/plain; charset=UTF-8

77045
--===1375899894585===
Content-Disposition: form-data; name="CORERuleVersion"
Content-Type: text/plain; charset=UTF-8

2.2.0
--===1375899894585===
Content-Disposition: form-data; name="Payload"
Content-Type: text/plain; charset=UTF-8


ISA*00*          *00*          *ZZ*ProviderID      *ZZ*77045
*130721*0940*^*00501*130721027*1*P*:~GS*HS*ProviderID*77045*20130721*0940*130721027*X*005010X2
79A1~ST*270*0001*005010X279A1~BHT*0022*13*123456*20130721*0940~HL*1**20*1~NM1*PR*2*WA STATE
DSHS*****PI*77045~HL*2*1*21*1~NM1*1P*2*DEACONESS MEDICAL
CENTER*****XX*1356528269~HL*3*2*22*0~TRN*1*EDMS-
92653*97092327A0*130721027~NM1*IL*1*lastname*FirstName****MI*MemberID~REF*SY*SSN~DMG*D8*DOB~DT
P*291*RD8*20120601-20130720~EQ*30~SE*14*0001~GE*1*130721027~IEA*1*130721027~


--===1375899894585===--
```

The following is an example of a Real time response message using the HTTP MIME Multipart envelope method. The portion of the response below that is colored in blue is the HTTP Header. The remainder of the response is the body of the MIME Multipart message.

Sample HTTP Real-Time Response

```
HTTP/1.1 200 OK
Date: Wed, 07 Aug 2013 18:24:54 GMT
Content-Type: multipart/form-data; boundary=rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Transfer-Encoding: chunked
Server: Jetty(7.5.4.v20111024)
CA
--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="PayloadType"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

X12_271_Response_005010X279A1
BA

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="ProcessingMode"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

RealTime
D1

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="PayloadID"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

0536799f-c69c-4ad3-a1e2-a0bf6a1d6c10
C6

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="TimeStamp"
```

```
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

2013-08-07T14:24:59-04:00
B1

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="SenderID"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

77045
B7

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="ReceiverID"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

201007700
B8

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="CORERuleVersion"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

2.2.0
55C

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="Payload"
Content-Type: application/octet-stream
Content-Transfer-Encoding: binary

ISA*00*          *00*          *ZZ*77045          *ZZ*ProviderID
*130807*1421*^*00501*130721027*0*P*:~GS*HB*77045*ProviderID*20130807*1421*130721027*X*005010X2
79A1~ST*271*0001*005010X279A1~BHT*0022*11*123456*20130807*142141~HL*1**20*1~NM1*PR*2*WA STATE
DSHS*****PI*77045~PER*IC*WA State DSHS Provider
Relations*TE*8005623022~HL*2*1*21*1~NM1*1P*2*DEACONESS MEDICAL
CENTER*****XX*1356528269~HL*3*2*22*0~TRN*2*EDMS-
92653*97092327A0*130721027~NM1*IL*1*LastName*FirstName*G***MI*MemberID~REF*SY*SSN~N3*CY*018-
KITSAP~DMG***F~DTP*307*RD8*20120601-
20130720~EB*1*IND*1^30^33^35^47^48^50^86^88^98^AL^MH^UC*MC*RAC=1045/BSP=CNP~REF*NQ*015715159~R
EF*6P*G02*6P - ACES Coverage Group Code~DTP*356*D8*20080801~DTP*357*D8*29991231~MSG*This is
the Client's eligibility as of this date, based on information available at this
time~EB*A*IND*30*MC*RAC=1045/BSP=CNP***0~EB*B*IND*30*MC*RAC=1045/BSP=CNP**0~EB*C*IND*30*MC*RAC
=1045/BSP=CNP**0~EB*MC*IND**HM~DTP*193*D8*20100601~DTP*194*D8*29991231~LS*2120~NM1*Y2*2*Austin
Armstrong*****PI*105021001~PER*IC*AUSTIN
ARMSTRONG*TE*9998311843~LE*2120~SE*35*0001~GE*1*130721027~IEA*1*130721027~

B4

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="ErrorCode"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit

Success
B0

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq
Content-Disposition: form-data; name="ErrorMessage"
Content-Type: text/plain; charset=US-ASCII
Content-Transfer-Encoding: 8bit


2E

--rpDEKCWmhzFZTYtMdJDxrTVXSjCoJSLCT7Z3Eq--

0
```

Sample SOAP Real-Time Request

```
<soap:Envelope xmlns:soap="http://www.w3.org/2003/05/soap-envelope"
xmlns:cor="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
  <soap:Header/>
  <soap:Body>
    <cor:COREEnvelopeRealTimeRequest>
      <PayloadType>X12_270_Request_005010X279A1</PayloadType>
        <ProcessingMode>RealTime</ProcessingMode>
        <PayloadID>${=java.util.UUID.randomUUID()}</PayloadID>
        <TimeStamp>${=new java.text.SimpleDateFormat("yyyy-MM-dd'T'HH:mm:ss'Z'").format(new Date())}</TimeStamp>
      <SenderID>201007700</SenderID>
      <ReceiverID>77045</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload> ISA*00*        *00*        *ZZ*ProviderID     *ZZ*77045
*130721*0940*^*00501*130721027*1*P*:~GS*HS*ProviderID*77045*20130721*0940*130721027*X*005010X279A1~ST*270*
0001*005010X279A1~BHT*0022*13*123456*20130721*0940~HL*1**20*1~NM1*PR*2*WA STATE
DSHS*****PI*77045~HL*2*1*21*1~NM1*1P*2*DEACONESS MEDICAL
CENTER*****XX*1356528269~HL*3*2*22*0~TRN*1*EDMS-
92653*97092327A0*130721027~NM1*IL*1*lastname*FirstName****MI*MemberID~REF*SY*SSN~DMG*D8*DOB~DTP*291*
RD8*20120601-20130720~EQ*30~SE*14*0001~GE*1*130721027~IEA*1*130721027~
</Payload>
    </cor:COREEnvelopeRealTimeRequest>
  </soap:Body>
</soap:Envelope>
```

Sample SOAP Real-Time Response

```
<env:Envelope xmlns:env="http://www.w3.org/2003/05/soap-envelope">
  <env:Header/>
  <env:Body>
    <core:COREEnvelopeRealTimeResponse xmlns:core="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
      <PayloadType>X12_271_Response_005010X279A1</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>0a26f896-2949-4c8d-ae61-394037c59cd7</PayloadID>
      <TimeStamp>2013-08-07T11:43:33-07:00</TimeStamp>
      <SenderID>77045</SenderID>
      <ReceiverID>201007700</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload> ISA*00*        *00*        *ZZ*77045          *ZZ*ProviderID
*130807*1421*^*00501*130721027*0*P*:~GS*HB*77045*ProviderID*20130807*1421*130721027*X*005010X279A1~ST*271*
0001*005010X279A1~BHT*0022*11*123456*20130807*142141~HL*1**20*1~NM1*PR*2*WA STATE
DSHS*****PI*77045~PER*IC*WA State DSHS Provider Relations*TE*8005623022~HL*2*1*21*1~NM1*1P*2*DEACONESS
MEDICAL CENTER*****XX*1356528269~HL*3*2*22*0~TRN*2*EDMS-
92653*97092327A0*130721027~NM1*IL*1*LastName*FirstName*G***MI*MemberID~REF*SY*SSN~N3*CY*018-
KITSAP~DMG***F~DTP*307*RD8*20120601-
20130720~EB*1*IND*1^30^33^35^47^48^50^86^88^98^AL^MH^UC*MC*RAC=1045/BSP=CNP~REF*NQ*015715159~REF*6
P*G02*6P - ACES Coverage Group Code~DTP*356*D8*20080801~DTP*357*D8*29991231~MSG*This is the Client's eligibility
as of this date, based on information available at this
time~EB*A*IND*30*MC*RAC=1045/BSP=CNP***0~EB*B*IND*30*MC*RAC=1045/BSP=CNP**0~EB*C*IND*30*MC*RAC
=1045/BSP=CNP**0~EB*MC*IND**HM~DTP*193*D8*20100601~DTP*194*D8*29991231~LS*2120~NM1*Y2*2*Austin
```

Armstrong*****PI*105021001~PER*IC*AUSTIN
ARMSTRONG*TE*9998311843~LE*2120~SE*35*0001~GE*1*130721027~IEA*1*130721027~
</Payload>
        <ErrorCode>Success</ErrorCode>
        <ErrorMessage/>
    </core:COREEnvelopeRealTimeResponse>
  </env:Body>
</env:Envelope>

4   Frequently Asked Questions

Refer CAQH CORE FAQ:

http://www.caqh.org/pdf/COREFAQsPartC.pdf

5   Change Summary

Version	Date	Description of Changes
1.0	August 25, 2014	Initial Draft
1.0	August 28, 2019	Update Screen Prints and Websites