

Encounter Data Reporting - Post Adjudication File

Field Definition	Type	Length	From	To	Comments
EC-NUM	X	12	1	12	Encounter CRN (Claim Reference Number)
FORM-TYPE	X	1	13	13	Form Type
FUNDING TYPE	X	30	14	43	<p> SPT - VBPCContract ID VB1 - E-Prescribe DAP SUD - SUD Fund CRI - NTXIX/XXI Crisis SMI - NTXIX/XXI SMI MHB - MHBG SED/SMI SAB - SABG MAT - MAT-PDOA STR - Opioid STR CTY - County VB2 - IC DAP VBD - DRG DAP VBO - Other Hosp/IP DAP VBN - NH DAP VB3 - BH OP DAP 1 VB4 - BH OP DAP 2 VB5 - BH OP DAP 3 VB6 - Dental DAP EVV - EVV DAP ASI - APSI PSI - PSI </p> <p> <i>Change for 10/119 to use a 3 digit value to designate the Project Identifier.</i> </p> <p> <i>If more than one Project Identifier applies</i> </p>

					<p>please list both separated by a “/”.</p> <p>Project Identifiers in red are new for 10/1/19 reporting all others in black should have been reported under previous reporting requirements.</p>
HP-ID	X	6	44	49	Health Plan ID
REND-PR-NPI	X	10	50	59	Rendering/Service Provider NPI
Filler	X	21	60	80	blank - for future use

Production files should be placed into SFTP directory: **XXX/PROD/IN** where XXX is the MCO folder

File Naming convention:

AZSP**123456**.YYYYMMDD.STRUCTRCT.HHMM.999

123456 = Health Plan ID

YYYYMMDD - Date (ex. 20160426)

HHMM = hour & Minute (ex. 2214)

999 - 001, 002, etc. (multiple files)

Ex. AZSP010122.20160426.STRUCTCT.1645.001

Note – Applicable to all form types.