How to Upload Documents and the NEMT Trip Report Using the EDI Solutions Portal

Update: September 3, 2025
DFSM Provider Education and Training Team

ARIZONA
HEALTH CARE COST
CONTAINMENT SYSTEM

EDI Solutions Portal

To access the AHCCCS Solutions Center, navigate to: https://servicenow.azahcccs.gov/gsp.

There are two options to attach documents to a claim:
o   Create a PAPERWORK (PWK) number during the initial claim submission, or,
o   Use the AHCCCS 12-digit claim number as the attachment number.

How the PWK process works:
•   The provider submits an electronic claim (an 837 transaction) and includes a PWK segment. The PWK segment contains codes indicating that supporting documentation will be sent separately. The PWK segment provides "linkage" between an electronic claim and documentation a provider submits.

Billing companies and clearinghouses may be eligible to become a 275 Trading Partner, to exchange electronic data information with AHCCCS. The 275 transaction is a HIPAA-compliant electronic attachment used to send supplemental medical documentation that supports an electronic claim (837). Check with your billing / clearinghouse for additional information.

Getting Started

- Submit the claim first and create the PWK attachment number.
- Have all necessary documents easily accessible and available for upload.
- Combine all documents together and upload as a "Single" file.

https://servicenow.azahcccs.gov/gsp.

Web Upload Attachment Submission Form

There are (5) five sections that must be completed to successfully submit the documents.

Web Upload Attachment

Claim Information

Member Information

Provider Information

Web Upload Attachment

It is important to complete all fields that have a Red *asterisk, these are required data fields.

EDI Solutions Portal

Once you have logged into EDI Solutions,

➢ Click the dropdown arrow next to **Claim Attachments,**

➢ Select the option "**Upload Attachment**".

This will direct you to the **Web Upload Attachment Submission Form!**
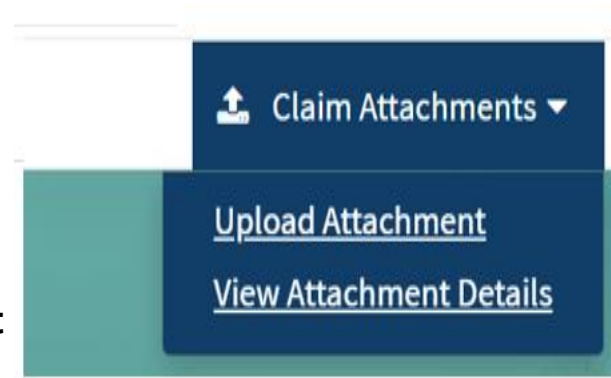
(Section 1) Completing the Web Upload Attachment (PWK) Number

Web Upload Attachment

Payer Claim Control Number *

Provider NPI *

AHCCCS Provider ID *

Or

Claim Number should not exceed 50 characters(bytes)

Enter a 10 digit NPI

Enter a 6 digit Provider ID

1. **Payer Claim Control Number,** if a PWK number is created during the initial claim submission, enter the PWK number in this field. The easiest format for the PWK is to use the AHCCCS member ID and the date of service i.e. A12345678090525 – do not include the slashes.

2. **Provider NPI** - if the claim was submitted using the NPI number, enter the NPI in this field.   The NPI is the primary provider identifier.

3. **AHCCCS Provider ID** - if the claim was submitted using the 6-digit number *ONLY*, enter the 6 digit in this field.
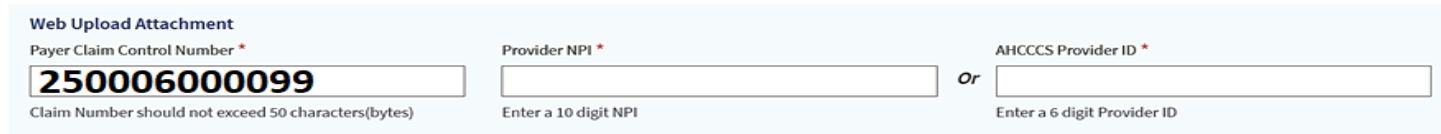
Important Note – do not interchange the NPI and the 6- digit ID number, as this will result in the documents not being linked to the claim. If this occurs, you will need to upload the documents again using the provider number that matches the claim submission.

Example: During the first submission, the provider establishes a PWK number to upload the necessary documents. The claim and its documents are received. The claim is denied due to the assessment and treatment plan are missing.

If a claim is denied for additional information, _you must use the claim reference number (CRN/ICN) when uploading the required documents_. This applies even if the original document upload was tied to a PWK number. Remember that any subsequent uploads are treated as separate from the original upload, and the CRN must be used as the attachment number. *Complete all fields.

Web Upload Attachment

Payer Claim Control Number *	Provider NPI *		AHCCCS Provider ID *
250006000099		Or	
Claim Number should not exceed 50 characters(bytes)	Enter a 10 digit NPI		Enter a 6 digit Provider ID

 The CRN is entered in the **Payer Claim Control Number** field as shown below. _Do not include the line numbers such as 001 or 002, this will cause the linking to fail, and you will have to upload the documents again._

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Section 2   Completing the Claim Section

Claim

Medical Record Identification Number

MRIN should not exceed 50 characters(bytes)

Patient Control Number

Enter maximum of 20 characters(bytes)

Date of Service

mm/dd/yyyy

MM/DD/YYYY

1.   Enter the **Medical Record Number** (max of 20 characters).

2.   Enter the **Patient Control Number** (max of 20 characters*).*

3.   Enter the first **Date of Service** from the claim (MM/DD/YYYY).

(Section 3)   Completing the Provider Section

Provider

Provider First Name

Name should not exceed 50 characters

Provider Last Name

Name should not exceed 50 characters

Provider Address

Address should not exceed 100 characters

Provider City

City should not exceed 50 characters

Provider State

Provider Zip Code

Enter a 5 digit Zip Code

1. Provider First Name
2. Provider Last Name
3. Provider Address   - (Service address)
4. Provider City   - (City where the service was rendered)
5. Provider State   - (Select the state)
6. Provider Zip Code - (Enter the 5-digit zip code)

(Section 4) Completing the AHCCCS Member Information

Member

AHCCCS Member ID	AHCCCS Member First Name	AHCCCS Member Last Name
Enter 9 digits, starts with 'A' and 8 numeric	Name should not exceed 50 characters	Name should not exceed 50 characters

1. Enter the AHCCCS Member ID, (example A12345678)
2. AHCCCS Member First Name,
3. AHCCCS Member Last Name

The Member ID is made up of 9 characters, starting with an uppercase 'A', followed by 8 numbers.

If the 'A' is lower case, the documents will not connect to the claim, and you will have to upload the documents again.

(Section 5) Completing the Web Upload Attachment

Web Upload Attachment

Upload Attachment(.pdf, .doc, .docx, .png, .jpeg, .jpg, .bmp, .gif, .tiff, .tif, .xlsx, .xls) *

Maximum upload file size:64MB

Upload and Submit

1. Click Upload and Submit – you will be directed to your computer content.
2. Select the appropriate document file. *Remember to upload all records as a single file.
3. You should receive the message "Save Successful".

Document Upload Completed

- Once you have uploaded the file and completed the information, then click on Submit.

- If there are no issues with your submission, then you should receive the message: **Saved Successfully**

EDI Portal Upload Attachment
How to View Attachment Details

- Users can view attachment details via the portal, navigate to 'Claim Attachments" and click on 'View Attachments Details.

- If you need to see your attachment submission, you can go to Claim Attachments, View Attachments Details.

- You also have the option to **Export the data**. Click on Export to CSV, which will download the file to your Downloads folder.

How to View the Attachment Details of the Upload

To view the confirmation of the document upload, at the top of the page, select **View Attachment Details**

WEB Upload Attachment Submission Form

- Click on Upload File. Find and select your file and click Open
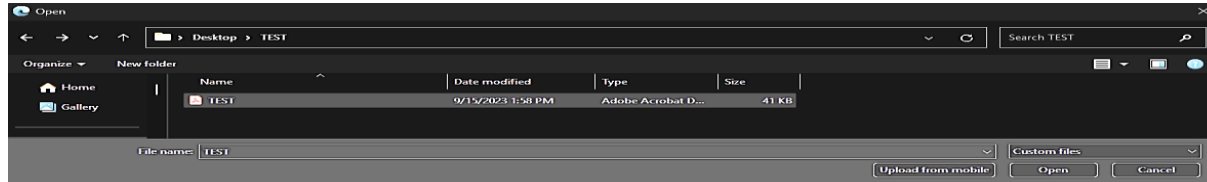
- If successful, you will then see your uploaded file.

Thank You.