COMMUNICATIONS/CONNECTIVITY INFORMATION (CCI) COMPANION GUIDE VERSION 3.0

June 2021

DISCLOSURE STATEMENT

This Communications/Connectivity Information (CCI) Companion Document is intended to be a technical document describing the specific technical and procedural requirements for interfaces between AHCCCS and its trading partners. It does not supersede either health plan contracts or the specific procedure manuals for various operational processes. If there are conflicts between this document and either the health plan contracts or operational procedure manuals, the contract or procedure manual will prevail.

Substantial effort has been taken to minimize conflicts or errors; however, AHCCCS, the AHCCCS Information Services Division, or its employees will not be liable or responsible for any errors or expenses resulting from the use of information in this document. If you believe there is an error in this document, please notify the AHCCCS EDI Customer Support immediately at EDICustomerSupport@azahcccs.gov

PREFACE

The CCI Companion Guide to the v5010 ASC X12N Implementation Guides, NCPDP PAH 2.2 Guide, and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with AHCCCS. Transmissions based on this CCI Companion Guide, used in tandem with the v5010 ASC X12N Implementation Guides and NCPDP PAH 2.2 Guide, are compliant with both ASC X12 syntax and those guides. This CCI Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The CCI Companion Guide is not intended to convey information that in any way exceeds the requirements or usage of data expressed in the Implementation Guides.

Table of Contents

1 INTRODUCTION

The CCI Companion Guide must be used in conjunction with an associated ASC X12N Implementation Guide and NCPDP PAH 2.2 Guide. The instructions in this CCI Companion Guide are not intended to be stand-alone requirements documents. This conforms to all the requirements of any associated ASC X12 Implementation Guides and NCPDP PAH 2.2 Guide. It is in conformance with ASC X12's Fair Use and Copyright statements.

1.1 Scope

This document is to be used for the implementation of the ASC X12N transactions and NCPDP PAH 2.2 as mandated under HIPAA and is not intended to replace the TR3.

1.2 Overview

This CCI Companion Guide is intended to supplement the standard HIPAA Implementation Guides. It is a technical document describing the specific technical and procedural requirements for interfaces between AHCCCS and its trading partners. They are intended for technical staff members who are responsible for electronic transaction/file exchanges. This document provides specific information related to the fields and values reported.

1.3 References

For more information regarding the ASC X12N Standards for EDI and to purchase copies of the TR3 documents, consult the ASC X12 store web site at http://store.x12.org/store.

Refer to the NCPDP Post Adjudication Transaction Standard Implementation Guide Version 2.2 (Post Adjudication History [PAH]), Data Dictionary (June 2010), and External Code List (June 2010) for further information on the various segments and fields allowed. Additional information for National Council for Prescription Drug Programs is found at http://www.ncpdp.org/

2 GETTING STARTED

2.1 Working with AHCCCS

The AHCCCS Information Services Division (ISD) EDI Customer Support is the first point of contact for all questions related to submission of electronic transactions and data. The preferred method of contact is email. **(Note: If providing PHI data, please make sure your email is secured)**

All inquiries/requests will result in a Customer Support Ticket Number assignment. Contact information:

Email: servicedesk@azahcccs.gov
Telephone Number: (602) 417-4451
Hours: 7:00 AM – 5:00 PM Arizona Time, Monday through Friday

Information required for initial inquiry:

- Customer Name
- Organization Name
- Customer Email Address
- Customer Telephone Number
- Health Plan ID, Provider ID and/or NPI, Submitter ID (as applicable)
- Transaction Type (835, 837, 270, etc.)
- Applicable ISA/GS Control Numbers
- Detailed information on problem or specific inquiry/request (setup, connectivity, etc.)

2.2 Certification and Testing Overview

Each AHCCCS trading partner is responsible for ensuring that its transactions are compliant with HIPAA mandates based on the types of testing described below.

AHCCCS encourages providers and other entities to use either a third party tool or AHCCCS' Community Manager tool to certify that the entity can produce and accept HIPAA compliant transactions. Success is determined by the ability to pass the seven types of compliance tests listed below. The initial four of the seven types of testing are also used as categories for edits performed by the AHCCCS translator.

The testing types have been developed by the Workgroup for Electronic Data Interchange (WEDI), a private sector organization concerned with implementation of electronic transactions. They are:

1. Integrity Testing: This kind of testing validates the basic syntactical integrity of the provider's EDI file.
2. Implementation Guide - Requirements Testing: This kind of testing involves requirements imposed by the transaction's HIPAA Implementation Guide, including validation of data element values specified in the Guide.
3. Balancing Testing: Balancing verification requires that summary-level data be numerically consistent with corresponding detail level data, as defined in the transaction's Implementation Guide.
4. Inter-Segment Situation Testing: Situation testing validates inter-segment situations specified in the Implementation Guide.
5. External Code Set Testing: This kind of testing validates code set values for HIPAA mandated codes defined and maintained outside of Implementation Guides. HCPCS Procedure Codes and NDC Drug Codes are examples.
6. Product Type or Line of Service Testing: This kind of testing validates specific requirements defined in the Implementation Guide for specialized services such as durable medical equipment (DME).
7. Trading Partner-Specific Testing: Testing of trading partner requirements involves Implementation Guide requirements for transactions to or from Medicare, Medicaid and Indian Health Services. For AHCCCS trading partners, trading partner requirement testing includes testing of the approaches that AHCCCS has taken to accommodate necessary data within HIPAA compliant transactions and code sets.

2.3 Test Data and Privacy

AHCCCS believes that, when possible, using real-life production data enhances the overall value of the compliance testing process. If a covered entity elects to use production data in testing, it must ensure that it remains in compliance with all federal and state privacy regulations. Data (e.g., names and identification numbers) that would make it possible to identify particular individuals should be removed or encrypted. AHCCCS expects that patient identifiable information will be encrypted or eliminated from test data submitted to the certification testing system unless the testing system is in compliance with all HIPAA regulations concerning security, privacy, and business associate specifications.

3 TESTING WITH AHCCCS

There are two separate processes for testing with AHCCCS: Foresight Community Manager and file submissions using the Trading Partner's TEST/EDI-IN (SFTP/EFT) directory.

3.1 Community Manager Testing

The Foresight Community Manager test site is a platform for trading partners to conduct EDI testing and validation of electronic data.

All 837 trading partners must satisfy the Community Manager scenario profile/test scenarios assigned to them prior to conducting end to end testing phase.

All 270/271 and 276/277 trading partners must successfully validate at least two 270/276 files in Community Manager prior to conducting end to end processing.

All test files uploaded to Community Manager should be 1MB or less. **There are no Community Manager test requirements for 835 and Web Upload Attachment/275 Transaction trading partners.**

3.2 Trading Partner's file submission at SFTP/FTP TEST/EDI-IN

ISD Testing Mainframe Processing Schedule

EDI TRANSACTION	DAYS	TIME
270/271	Sunday – Saturday	7:00 PM
276	Monday – Friday	8:30 PM
820	Friday	On Demand
835	Friday	On Demand
837 Claims	Monday – Friday	6:30 PM
837 Encounters	Monday – Friday	3:00 PM
NCPDP PAH 2.2	Monday – Friday	6:00 PM

Note: File size limitation - Testing files cannot exceed 500 KB

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4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

4.1 Process flows
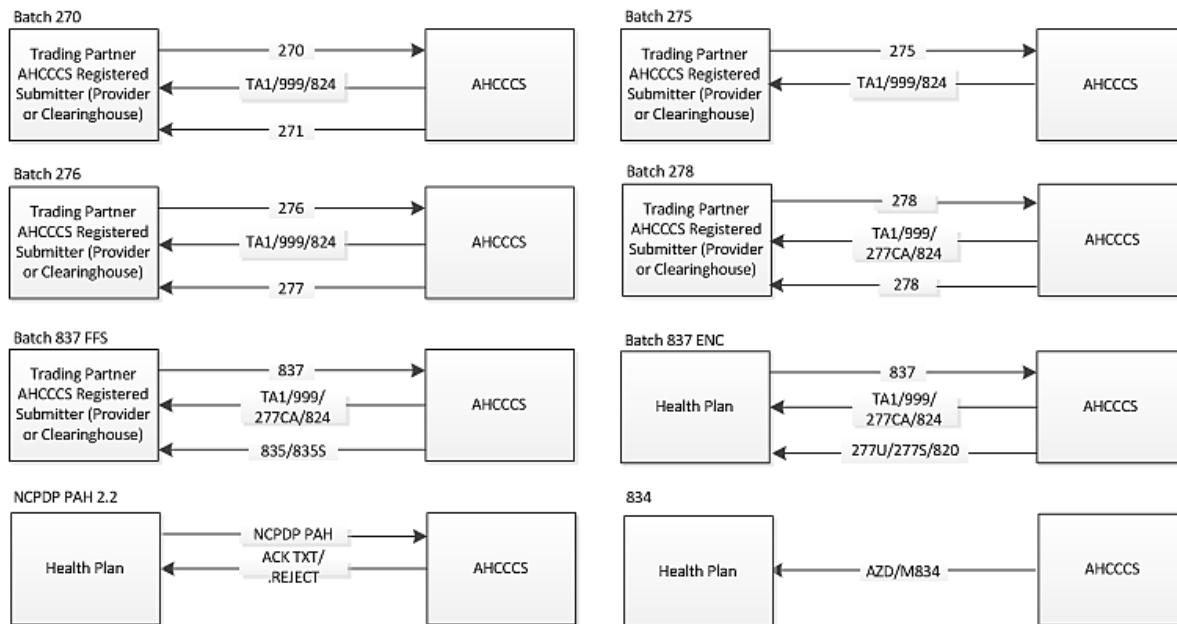
Note: An inbound 837 Fee-For-Service Claims file does not necessarily mean that a trading partner will receive the corresponding 835.

4.2 Transmission Administrative Procedures

Providers can directly connect with AHCCCS or through an AHCCCS certified Clearinghouse.

AHCCCS Secured File Transfer Protocol/Electronic File Transfer (SFTP/EFT):
https://sftp.statemedicaid.us

With the exception of Web Upload Attachment (275), each trading partner must establish an SFTP/EFT user account in order to exchange electronic data with AHCCCS. To setup an SFTP/EFT user account, the Electronic Data Exchange Request and External User Affirmation Statement forms must be completed for each individual user accessing SFTP/EFT. Please be sure to indicate the transaction(s) you will be exchanging with AHCCCS on the Electronic Data Exchange Request form. You can obtain these forms and instructions at: https://www.azahcccs.gov/PlansProviders/ISDresources.html

It is recommended that trading partners initiate the SFTP/EFT account setup as soon as possible. Trading partners may conduct Community Manager testing of the 270/271, 276/277 and 837 transactions pending their SFTP/EFT account setup.

Clearinghouse

If your software vendor cannot connect directly to AHCCCS, the following information will assist you with connecting through a third party AHCCCS registered clearinghouse:

- Contact your software vendor to see if they are affiliated with a clearinghouse. Some software vendors will require that the provider/submitter connect through a designated clearinghouse.
- The third party clearinghouse is responsible for assisting the provider/submitter with EDI file submissions to AHCCCS.

4.3 ISA13 Interchange Control Number

The trading partner assigns the Interchange Control Number in the rightmost six characters of this 9 character field. ISA13 must be **unique** within all transmissions (i.e. files) submitted to AHCCCS. The Interchange Control Number is used by AHCCCS for tracking purposes in order to guard against duplicate file submissions. ISA13 must also be identical to the Control Number in the Interchange Trailer element IEA02

4.4 Re-Transmission Procedure

1) Correct your data
2) Re-increment the ISA13 Interchange Control Number
3) Resubmit the file

4.5 File Renaming Process

There is a file renaming process for the following inbound transactions: 270, 276 and 278. For example:

AZD270-pppppp-yymmdd-nnnnnnnnn.999/.824/TA1
• pppppp is the 6-digit AHCCCS Provider ID (pos 1-6 of element GS02 in the 270 file)
• yymmdd is the process date
• nnnnnnnnn is element ISA13 Interchange Control Number from the 270 file

4.6 File Size/Length and Volume Limits (Inbound Transmissions)

- A file cannot exceed 75 MB

- No spaces in the filename

- 270: The number of requests on a 270 cannot exceed 10,000 requests per file

- 275: The web upload attachment file cannot exceed 64 MB

- 276: The number of requests on a 276 cannot exceed 10,000 requests per file

- 837 Encounters: The filename cannot exceed 29 characters

- NCPCP PAH 2.2: The filename cannot exceed 29 characters

- NCPDP PAH 2.2 file record must be a length of 3700. The file should be in DOS format with CR/LF at the end of each 3700 byte record

4.7 AHCCCS User accounts

All users who have access to the AHCCCS computer network and data are bound by applicable laws, rules and AHCCCS directives, including but not limited to, AHCCCS Administrative Policies and Procedures, AHCCCS Privacy and Security Policies (HIPAA), ARS 13-2316, ARS 41-770, and ARS 38-448.

5 CONTACT INFORMATION

5.1 Customer Support/Technical Assistance

The AHCCCS Information Services Division Customer Support Center is the first point of contact for all questions related to submission of electronic transactions and data. The preferred method of contact is email. **Note**: **If providing PHI data, please make sure your email is secured.**

All inquiries/requests will result in a Customer Support Ticket Number assignment. Contact information:

Email: servicedesk@azahcccs.gov
Telephone Number: (602) 417-4451
Hours: 7:00 AM – 5:00 PM Arizona Time, Monday through Friday, excluding the following holidays:

- New Year's Day
- Martin Luther King Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Veteran's Day
- Columbus Day
- Thanksgiving Day
- Christmas Day

Information required for initial inquiry:
- Customer Name
- Organization Name
- Customer Email Address
- Customer Telephone Number
- Health Plan ID, Provider ID and/or NPI, Submitter ID (as applicable)
- Transaction Type (835, 837, 270, etc.)
- Applicable IS/GS Control Numbers
- Detailed information on problem or specific inquiry/request (setup, connectivity, etc.)

Information required for follow up inquiry:
- Service Request/Incident Number assigned by ISD Customer Support

5.2. Health Plan Customer Support

If you are a Health Plan/Contractor, the first point of contact for encounter assistance or training should be through AHCCCSEncounters@azahcccs.gov

Questions regarding Transaction Insight account/log on issues, validation and/or translation should be emailed to: AHCCCSTIEncounters@azahcccs.gov

5.3 System Availability

AHCCCS SFTP/EFT is available Monday to Sunday from 12:00 am to 11:59 pm (Arizona Time)

5.4 Production File Processing Schedule

Production Mainframe Processing Schedule (Arizona Time):

EDI TRANSACTION	DAYS	START TIME *
270	Monday – Sunday	11:00 PM
276	Monday – Sunday	11:00 PM
820	Monday - Friday	12:30 PM
834	Monday – Sunday	8:30 PM
835	Thursday	6:00 PM
837 Claims	Monday – Friday	6:30 PM
837 Encounters **	Monday – Friday	5:00 AM
NCPDP PAH 2.2	Monday – Friday	5:00 AM

Note:

*   Start Time is subject to change depending on system resources and volume of files being processed. This could impact the availability of the 834 or 271/277 response files.

** **On deadline days (Thursday), encounter file(s) must arrive at AHCCCS by 6:00 PM**. Please do not wait until the last minute to send encounter files, which could result in missing the encounter cycle, due to other transactions being processed.

5.5 Provider Service Number

Please refer to the AHCCCS Contacts for more information:

https://www.azahcccs.gov/shared/AHCCCScontacts.html

5.6 Applicable Websites

- AHCCCS Website: https://www.azahcccs.gov

- AHCCCS Electronic Data Interchange (EDI) Technical Documents:
  https://www.azahcccs.gov/Resources/EDI/EDItechnicaldocuments.html

- AHCCCS EDI email notifications/updates sign up form:
  https://visitor.r20.constantcontact.com/manage/optin?v=001YVFzdwcJnTCjxhymZCzqm9rGeGhOIGK_c68
  j79SkAuymNF8Z8wgww-9elFoFBWx3wTuzeaSCSGJq_c4h7M6GoBKoL9j_ryvwwyFKBqC6CQ8%3D

- AHCCCS Encounter Manual:
  https://www.azahcccs.gov/PlansProviders/HealthPlans/encountermanual.html

- AHCCCS Fee-For-Service Provider Manual:
  https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/providermanual.html

- AHCCCS IHS/Tribal Provider Billing Manual
  https://www.azahcccs.gov/PlansProviders/RatesAndBilling/ProviderManuals/IHStribalbillingManu
  al.html

- AHCCCS Online Provider Website:
  https://www.azahcccs.gov/PlansProviders/CurrentProviders/AHCCCSonline.html

- AHCCCS SFTP/EFT: https://sftp.statemedicaid.us

- AHCCCS Data Access Forms for Electronic Data Exchange Request/External User Affirmation
  Statement: https://www.azahcccs.gov/PlansProviders/ISDresources.html

- Centers for Medicare & Medicaid Services (CMS) HIPAA Code Sets:
  https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/Code-
  Sets/index.html

- Committee on Operating Rules for Information Exchange (CAQH CORE): http://www.caqh.org

- Foresight Community Manager - Trading Partner Testing Site:
  https://tradingpartnertesting.azahcccs.gov

- Foresight Transaction Insight Portal - Production (Web Upload Attachment/275 Transaction and
  Health Plan Transaction Insight users): https://tiwebprd.statemedicaid.us

- Foresight Transaction Insight Portal - Test (Web Upload Attachment/275 Transaction and Health
  Plan Transaction Insight Users): https://tiwebtst.statemedicaid.us

- National Council for Prescription Drug Programs (NCPDP): http://ncpdp.org

- Washington Publishing Company (WPC): http://www.wpc-edi.com

- Workgroup for Electronic Data Interchange (WEDI): http://www.wedi.org

- X12: http://www.x12.org

6 CONTROL SEGMENTS/ENVELOPES

6.1 ISA-IEA

Transactions transmitted during a session or as a batch are identified by an interchange header segment (ISA) and trailer segment (IEA) which forms the envelope enclosing the transmission. Each ISA marks the beginning of the transmission and provides sender and receiver identification.

Note: **Only one set of ISA/IEA is accepted by AHCCCS**

6.2 GS-GE

EDI transactions of a similar nature and destined for one trading partner may be gathered into a functional group, identified by a functional group header segment (GS) and a functional group trailer segment (GE). Each GS segment marks the beginning of a functional group. There can be many functional groups within an interchange envelope.

6.3 ST-SE

The beginning of each individual transaction is identified using a transaction set header segment (ST). The end of every transaction is marked by a transaction set trailer segment (SE).

Note: **There can be multiple ST/SE sets within GS/GE**

7 ACKNOWLEDGEMENTS AND REPORTS

AHCCCS will respond to all transactions with the creation of the standard Acknowledgement response files as defined in the HIPAA Implementation Guides. This table and description are included only to clarify what will be returned as a response from AHCCCS.

Transaction Set	Interchange	Functional Group/Transaction Set Syntax/IG Conformance	Pre-Application Validation Business Edits	Application/ Processing
270 Inbound*	TA1	999	824	271
275 Inbound	TA1	999	824	N/A
276 Inbound*	TA1	999	824	277
278 Inbound	TA1	999	824	278
834 Inbound	TA1	999	824	834
837 FFS Inbound*	TA1	999	277 824	835/Paper Remit
837 ENC Inbound*	TA1	999	277 824	277U
NCPDP PAH 2.2	N/A	N/A	N/A	N/A

*Note: For these transactions, EDI system will not reject the whole file but will be split to good/bad records.   An acknowledgement is produced accordingly, and the good documents will continue for further processing.

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7.1 TA1 Interchange Acknowledgement

The TA1 acknowledgment is used by AHCCCS to notify the Trading Partners of problems found only in the envelope of the X12 interchange control structure.

7.2 999 Implementation Acknowledgement for Health Care Insurance

The 999 Functional Acknowledgement is used by AHCCCS to acknowledge receipt of functional group that has passed translator edits. It also reports functional group that has failed translator edits or standard syntax errors.

7.3 277CA Health Care Claim Acknowledgement

The 277CA is an acknowledgement to an 837 claim/encounter transaction at the pre-adjudication stage. This transaction identifies claims/encounters that are accepted or rejected for adjudication.

A summary level as well as an individual claim/encounter level pre-adjudication status is included in the 277CA.

7.4 824 Applications Reporting for Insurance

The 824 acknowledgement is used by AHCCCS to report syntactical problems or data structure errors.

7.5 Acknowledgement File Name Examples:

Each of the acknowledgement reports will have the file extension corresponding to the type of transaction. For example, a 999 acknowledgement will end with .999. A variety of extensions will be used in the following examples solely to demonstrate this. One exception to this is the NCPDP PAH 2.2 file acknowledgement. Acknowledgement Examples:

- **837 Claims (FFS)**
  AZCx.12345.CCYYMMDDHHMMSSss.originalFilename.TXT
  AZCP837.12345.2017030917595346.SI10910003213226.999

- **837 Encounters (ENC)**
  AZEx_HP123456_CCYYMMDDHHMMSSmm_originalFilename.TXT
  AZED_HP123456_2017032014210416_A987654321.277

- **270**
  AZDxxx.123456.YYMMDD.ISA13of270.TXT
  AZD270.123456.170315.000150861.999

- **276**
  AZDxxx-123456-YYMMDD-ISA13of276.TXT
  AZD276-123456-170523-000025272.824

- **278**
  AZI278-123456-YYMMDD-ISA13of278.TXT
  AZI278-123456-170523-000025272.824

- **NCPDP PAH 2.2 Acknowledgements**

  Correct files that are accepted will simply add "ACK" to the first section of the filename. For Example:
  AZEN**ACK**_HP123456_2016052617290989_**AZNCPDP1100070401052316.002.TXT (this is the original filename)**

  Incorrect files that are rejected will also add the "ACK" to the first section of the filename and add the word REJECT to the end of the filename just before the extension. For Example:
  AZENACK_HP123456_2016060216105814_2016052319580898NCPDP.**REJECT**.TXT

8 TRADING PARTNER AGREEMENT (TPA)

8.1 Trading Partner/AHCCCS TPA

An EDI Trading Partner is defined as any AHCCCS customer (provider, billing service, clearinghouse, software vendor, employer group, financial institution, etc.) that transmits to, or receives electronic data from AHCCCS.

The Trading Partner Agreement is related to the electronic exchange of information, whether the agreement is an entity or a part of a larger agreement, between each party to the agreement.

The electronic AHCCCS TPA (see Appendix 1) that each trading partner is required to accept is executed from the Community Manager (CM) web portal. Only an authorized individual for the provider can accept the electronic TPA as it is a contractual agreement between the provider and AHCCCS.

For clarification purposes, the authorized individual must be someone from within the provider's own organization that has the authority to accept the electronic TPA executed from the CM web portal. **The provider's CM account activation cannot be done by the provider's clearinghouse/software vendor/billing service.**

9 TRANSMISSION GUIDELINES

9.1 AHCCCS Delimiters

Inbound Delimiters

- AHCCCS will accept any delimiter for inbound transactions as defined in Section B of the TR3.
- **Important!** The use of asterisk *****, colon **:**, caret **^**, and tilde **~** other than as a delimiter is expressly prohibited.

Outbound Delimiters

- AHCCCS will use the following delimiters on outbound transactions:

Delimiters Character	Purpose
Left Rounded Bracket (**{**)	Used to separate elements within a segment
Pipe (**|**)	Used for composite elements
Tilde (**~**)	Represents the end of a segment

9.2 Secured File Transfer Protocol/Electronic File Transfer (SFTP/EFT) Directory Structure

Provider ID or Health Plan ID/Environment/Type and Direction

- XXXXXX or XXX – AHCCCS Provider ID or three byte Health Plan Identifier
  - **Environment**
    - **DEV** is for internal AHCCCS development staff
    - **TEST** is for sending/receiving test files
    - **PROD** is for sending/receiving production files
    - **OTHER** is for sending/receiving large files that cannot be sent in an email or contains PHI.

  - **Type and Direction**
    - **EDI-IN** is for sending HIPAA X12 and NCPDP PAH 2.2 transaction files only
    - **EDI-OUT** is for receiving HIPAA X12 and NCPDP PAH 2.2 response files
    - **IN** is for sending proprietary files
    - **OUT** is for receiving proprietary files

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10. CHANGE SUMMARY:

#	Location & Section	Revision
1.0		• Original Version
2.0	4.1 Process Flow 5.1 Production File Processing Schedule	• Effective 8/1/2018, RBHAs will no longer transmit Inbound 834 files to the EDI-IN. Any reference to Inbound 834 has been removed.
3.0	2.1 Working with AHCCCS 5.1 EDI Customer Support/Technical Assistance Appendix 2: Frequently Asked Questions (FAQs)	• Replaced EDICustomerSupport@azahcccs.gov to servicedesk@azahcccs.gov

APPENDICES

Appendix 1: Electronic Trading Partner Agreement

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM
TRADING PARTNER AGREEMENT

THIS AGREEMENT is entered into between Arizona Health Care Cost Containment System Administration (AHCCCSA) and _____, a covered entity ("TRADING PARTNER") who transmits any health information in electronic form in connection with a transaction covered by 45 CFR Parts 160 and 162.

The TRADING PARTNER agrees to perform functions or activities that are subject to transaction standards and WHEREAS, the TRADING PARTNER agrees to conduct these transactions according to this agreement.

NOW THEREFORE, the TRADING PARTNER and AHCCCSA agree as follows:

1) **Definitions.** The following terms shall have the meaning ascribed to them in this section.

    a) **Agreement** shall refer to this document.

    b) **Third Party** shall refer to parties authorized to exchange EDI transactions on the provider's behalf.

    c) **Trading Partner Agreement** shall mean the AHCCCSA TRADING PARTNER AGREEMENT.

    d) **Covered Entity** means a health plan, a health care clearinghouse, or a health care provider who transmits any health information in electronic form in connection with a transaction covered by 45 CFR Parts 160 and162.

    e) **AHCCCSA** shall mean the Medicaid agency of Arizona.

    f) **Transactions** shall mean the electronic exchange of information between two parties to carry out financial or administrative activities related to health care as defined by 45 CFR Part 160.103.

    g) **Individual** shall mean the person who has the authority to act on behalf of the TRADING PARTNER to execute this agreement.

h) **Information** shall mean any "health information" provided and/or made available by AHCCCSA to the TRADING PARTNER, and has the same meaning as the term "health information," as defined by 45 CFR Part 160.103.

i) **Parties** shall mean AHCCCSA and the TRADING PARTNER.

2) **Term.** The term of this Agreement shall commence as of the date it is electronically accepted.

3) **TRADING PARTNER Obligations:**

a) **Third Party Agreement.** The TRADING PARTNER understands and agrees that it is responsible for the conduct of a THIRD PARTY in the THIRD PARTY'S performance related to this Agreement. The TRADING PARTNER agrees to inform the THIRD PARTY of the terms of this Agreement. Notwithstanding the lack of specific mention, any obligation or requirement contained in this Agreement that is imposed on the TRADING PARTNER will be construed as an obligation and requirement that is also imposed on its THIRD PARTY.

b) **No Changes, Additions or Unauthorized Uses.** The TRADING PARTNER hereby agrees that for the Information, it will not change any definition, data condition, or use of a data element or segment. The TRADING PARTNER also agrees it will not add data elements or segments to the maximum defined data set, or use any code or data elements that are either marked "not used" in the Implementation Guide or are not in the specifications.

c) **Transfer of Obligations.** The TRADING PARTNER must immediately inform AHCCCSA of any proposed mergers, acquisitions or changes in the ownership of the TRADING PARTNER. AHCCCSA reserves the right to require the merged entity, the acquiring entity, or the new owners to submit a new TRADING PARTNER Agreement if the merger, acquisition, or change in ownership may reasonably be expected to impact AHCCCSA's or TRADING PARTNER'S ability to comply with the TRADING PARTNER Agreement.

d) **Companion Documents.** AHCCCSA makes available Companion Documents which serve as a supplement to the standard electronic transaction description. They contain specific instructions for conducting each transaction. The TRADING PARTNER agrees to conform and comply with the requirements set forth in these Companion Documents.

4) **Adequate Testing.** The TRADING PARTNER agrees that it will cooperate with AHCCCSA in testing processes. TRADING PARTNER agrees to adequately test business rules appropriate to its types and specialties.

5) **Deficiencies.** The TRADING PARTNER agrees to be responsible for incorrect data, including errors, omissions, deletions or erroneous data submitted by the TRADING PARTNER, and that it will correct Transaction errors or deficiencies identified by AHCCCSA.

6) **Code Set Retention.** Both Parties understand and agree to maintain code sets being processed or used in this Agreement for at least the current contract year, state fiscal year, or any appeal period, whichever is longer.

7) **Privacy:**

a) **Protected Health Information (PHI).** AHCCCSA and the TRADING PARTNER will comply with all applicable State and Federal privacy statutes and regulations concerning the treatment of PHI.

b) **Notice of Unauthorized Disclosures and Uses.** AHCCCSA and the TRADING PARTNER will promptly notify the other Party of any unlawful or unauthorized use or disclosure of PHI which disclosure may have an impact on the other Party that comes to the Party's attention and will cooperate with the other Party in the event that any litigation arises concerning the unlawful or unauthorized disclosure or use of PHI.

c) **Injunctive Relief.** AHCCCSA retains all rights to seek injunctive relief to prevent or stop the unauthorized use or disclosure of PHI by TRADING PARTNER, its THIRD PARTY, or any agent, or contractor that received PHI from TRADING PARTNER.

8) **Security:**

a) **Data Security.** AHCCCSA and the TRADING PARTNER will maintain reasonable security procedures to prevent unauthorized access to data, data transmissions, security access codes, backup files, and source documents. Each Party will immediately notify the other Party of any unauthorized attempt to obtain access to or otherwise tamper with data, data transmissions, security access codes, backup files, source documents or the other Party's operating system which attempt may have an impact on the other Party.

b) **Systems Security.** AHCCCSA and the TRADING PARTNER will develop, implement, and maintain appropriate security measures for its own systems. AHCCCSA and the TRADING PARTNER will document and keep current its security measures.

9) **Termination of Agreement.** The TRADING PARTNER agrees that AHCCCSA has the right to immediately terminate this Agreement if AHCCCSA determines that the TRADING PARTNER or its THIRD PARTY has violated any terms of this Agreement

10) **Choice of Law.** This Agreement shall be governed by the law of the State of Arizona.

11) **Liability.** AHCCCSA shall not be responsible to TRADING PARTNER nor anyone else for any damages caused by delay, rejection, error, omission, deletion, erroneous input, loss or any misadventure affecting transactions.

12) **Binding Nature and Assignment.** This Agreement shall be binding on the Parties hereto and their successors and assigns, but neither Party may assign this Agreement without the prior written consent of the other, which consent shall not be unreasonably withheld.

13) **Notices.** Whenever under this Agreement one Party is required to give notice to the other, such notice shall be deemed given if mailed by First Class United States mail, postage prepaid, and addressed as follows:

   AHCCCSA
   Information Services Division
   801 E. Jefferson

MD 2800
Phoenix, AZ 85034

14) **Electronic Claims Submission.** For each electronic claim submission, the TRADING PARTNER certifies that the claim information is true, accurate, and complete.

I understand that payment of claims (including claims submitted electronically) will be from Federal and State funds, and that any falsification, or concealment of a material fact, may be prosecuted under Federal and State laws (42 CFR 455.18).

15) **Acceptance of Agreement.** By clicking on "I Accept the Terms of the Agreement," the TRADING PARTNER agrees to the terms and conditions of this TRADING PARTNER Agreement, and that the individual accepting the agreement has the authority to act on behalf of the TRADING PARTNER and to bind it to the terms and conditions of this TRADING PARTNER Agreement.

ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM

Appendix 2: Frequently Asked Questions (FAQs)

Q: What are the different types of batch EDI transactions AHCCCS exchanges?

A: The following are the EDI transactions AHCCCS exchanges:

- 270   005010X279A1 Eligibility, Coverage, or Benefit Inquiry
- 271   005010X279A1 Eligibility, Coverage, or Benefit Information
- 275   005010X210 Additional Information to Support a Health Care Claim or Encounter (275)
- 276   005010X212 Health Care Claim Status Request
- 277   005010X212 Health Care Claim Status Response
- 277CA***** 005010X214 Health Care Claim Acknowledgement
- 277U   003070X070 Health Care Payer Unsolicited Claim Status
- 278   005010X217 Health Care Services Request/Response
- 820   005010X218 Payroll Deducted and Other Group Premium Payment for Insurance Products
- 824*****   005010 Application Reporting for Insurance
- 834   005010X220A1 Benefit Enrollment and Maintenance
- 835   005010X221A1 Health Care Claim Payment/Advice
- 837P   005010X222A1 Health Care Claim: Professional
- 837I   005010X223A2 Health Care Claim: Institutional
- 837D   005010X224A2 Health Care Claim: Dental
- 999*****   005010x231A1 Implementation Acknowledgement for Health Care Insurance
- NCPDP PAH 2.2 - report post adjudicated pharmacy encounters
- TA1*****

   *Note: AHCCCS does not provide a Companion Guide for these transactions as they follow what is identified in the TR3.

Q: Does AHCCCS provide Real-Time 270/271 processing?

A: AHCCCS has opted to contract with the following vendors to provide the real-time 270/271 transactions:

- Dorado Systems, Inc.
- Emdeon (Change Healthcare)
- Passport Health Communications, Inc.
- TransUnion Healthcare, Inc.

Q: Does AHCCCS provide Real-Time 276/277 processing?

A: AHCCCS is in the process of determining the best system approach using the limited resources available and have no update as it pertains to real-time 276/277 transactions to provide at this time. It is AHCCCS' intent to have the real-time 276/277 exchanged with the same vendors outlined above.

Q: How do I get setup with AHCCCS so our office/clearinghouse (if applicable) can begin exchanging electronic transactions?

A: You will need to email servicedesk@azahcccs.gov and provide the following information:

- Customer Name
- Organization Name
- Customer Email Address
- Customer Telephone Number
- 6-digit AHCCCS Provider ID and/or NPI
- Clearinghouse (if applicable)

Note: As long as the clearinghouse is an AHCCCS certified trading partner for Electronic Claim Submission (ECS) or **837** transactions, they can submit electronic claims for any AHCCCS registered provider; **there is no additional ECS setup requirement for the provider or the clearinghouse to fulfill as far as AHCCCS is concerned.**

Q: Our clearinghouse sent a request to be setup for 835, 270/271, 276/277. Why was the ticket closed without being setup?

A: A request for setup must come from an authorized individual from within the provider organization; **it cannot be initiated by the provider's clearinghouse/software vendor/billing service.** Please have an authorized individual for the provider submit a request for setup with (name of clearinghouse) to servicedesk@azahcccs.gov. A ticket will be opened on the provider's behalf and assigned to the ISD EDI Team to get the process started.

The authorized individual for the provider must be someone within the provider's own organization that has the authority to accept the electronic TPA executed from the Community Manager (CM) web portal. Only the provider can accept the TPA (see Appendix 1) as it is a contractual agreement between the provider and AHCCCS.

Q: When can I start submitting transactions in production?

A: For 837, 270/271, 276/277 transactions, the trading partner will not be moved to production until they have successfully satisfied the AHCCCS required Community Manager testing phase and end-to-end testing phase.

Q: What is the payer ID for AZ MEDICAID/AHCCCS?

A: Payer ID's are created by vendors/clearinghouses; it is how they enumerate payers within their system so that claims are routed to the appropriate payer. It is part of the claim submission process between the provider and the clearinghouse. **AHCCCS would not have this type of information**. The payer ID for AHCCCS could be enumerated differently by the many different clearinghouses we exchange electronic transactions with. You would need to reference the Payer ID list made available on the clearinghouse website to find the appropriate payer ID.

COMMUNICATIONS/CONNECTIVITY INFORMATION (CCI) COMPANION GUIDE VERSION 3.0

Q: How long are files kept in the SFTP/EFT EDI-OUT directory?

A: The files are kept for only **90 days**.

Q: Why can't I see the file I just uploaded in the EDI-IN directory?

A: Files are swept immediately out of the EDI-IN directory on the AHCCCS SFTP/EFT server, which can lead a trading partner to question whether the transmission was successful or not. The best thing to do is to check the EDI-OUT directory for an acknowledgement shortly afterwards. Should it be identified that no acknowledgements are received for a file transmission, which could indicate that there is a problem, you can email servicedesk@azahcccs.gov to inquire status of your file submission.

Q: Does AHCCCS accept NON-TEXT/EDI files, such as ZIP, CSV, PDF, or MS Office (such as Word, Excel, etc.) in the EDI-IN folder?

A: AHCCCS does not accept NON-TEXT/EDI files uploaded to the EDI-IN folder.   Non-Text/EDI files uploaded to the EDI-IN folder are immediately rejected/not processed. **There will be no notification to Trading Partner for this error.**

FAQs: Electronic Remittance Advice (ERA)/835

Q: We do not have an IT department; how can we view/print the 835 file?

A: The 835 files are in HIPAA mandated X12 format, and are not human readable. You may be able to use **Medicare Remit Easy Print (MREP)** software. MREP is free software that gives providers a tool to view and print an ERA in a human readable format, and it can be downloaded from the CMS website at: http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/AccesstoDataApplication/MedicareRemitEasyPrint.html

Reference the document **Download Instructions for Local PC Easy Print** for instructions on how to download and install MREP on your PC.

Q: What is the difference between 835 and 835S?

A: Filenames that start with **AZD835** are the electronic remittance advice files. Filenames that start with **AZS835** are the supplemental electronic remittance advice files, which **cannot be viewed using the MREP** software as they are already in what is considered a human readable format. This supplemental file provides additional claim adjudication information not available within the 835 Transaction. The payment date is in the file naming convention **(YYMMDD)** and can be found right after the Provider ID/Pay To Code of **119794-01.**

June 2021 / Revision 3.0

Additional information on the 835 Supplemental File:
https://www.azahcccs.gov/Shared/Downloads/EDI/CompanionDocuments/AZ_835_CG_201210v2_1.pdf

Q: Is there any reason a provider cannot be set up to receive 835/ERA?

A: Information important to note is that an AHCCCS registered provider would receive a remittance advice from AHCCCS as a result of Fee-For-Service (FFS) claims adjudication. To further explain, AHCCCS reimburses providers for services in only two ways:

1) Our AHCCCS contracted health plans directly reimburse providers who subcontract with them or provide services to their enrolled recipients. Each contracted health plan is considered the payer, and providers would submit the claims for health plan enrolled recipients directly to the health plan.

2) AHCCCS reimburses providers on a FFS basis for services rendered to recipients eligible for AHCCCS or ALTCS but not enrolled with an AHCCCS contracted health plan. The FFS population includes recipients in the FES program, recipients enrolled in Indian Health Services (IHS), or on reservation Native Americans enrolled with a tribal contractor. AHCCCS is considered the payer, and providers would submit the FFS claims directly to AHCCCS.

On claims for AHCCCS recipients enrolled with one of our contracted health plans, you would want to contact the health plan regarding their ERA setup requirements. A list of the AHCCCS contracted health plans can be found on the AHCCCS external website at:

https://azweb.statemedicaid.us/HealthPlanLinksNet/HPLinks.aspx

Q: Our billing service requested that our office be set up with 835/ERA, why was their customer support ticket closed?

A: The request for ERA setup must come from an authorized individual within the provider's organization; **it cannot be initiated by the provider's clearinghouse, software vendor or billing service.** Please have an authorized individual within the provider office submit a request for ERA setup to **servicedesk@azahcccs.gov.** The email is to include the AHCCCS assigned 6-digit provider ID and/or NPI information and request that the ERA be retrieved. Please specify if provider will be retrieving their own 835 or provide the name of the Clearinghouse.

For clarification purposes, the authorized individual for the provider must be someone within the provider's organization that has the authority to accept the electronic Trading Partner Agreement (TPA) executed from the Community Manager (CM) web portal. Only the provider can accept the TPA as it is a contractual agreement between the provider and AHCCCS. **The provider's CM account activation cannot be done by the provider's clearinghouse/software vendor/billing service.**

AHCCCS
Arizona Health Care Cost Containment System