



**HIPAA Transaction  
Standard Companion Guide**

**Health Care Eligibility Benefit  
Inquiry and Response (270/271)  
ASC X12N/005010X279A1**

**February 2015**

### **Disclosure Statement**

Disclosure, distribution and copying of this guide is permitted, however, changes to items found in this guide may occur at any time without notice.

The intended purpose and use of this guide is to provide information in reference to the Health Care Eligibility Benefit Inquiry and Response transaction (270/271).

Due to the copyright protection of the 5010 Implementation Guides (TR3), Utah Medicaid will not publish items found on the ASC X12 Implementation Guides (TR3), other than to convey Utah Medicaid's system limitations and usage iterations.

## **Preface**

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronic health data with Utah 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.

The Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. It is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

This Companion Guide will provide information regarding the exchange of Electronic Data Interchange (EDI) transaction with Utah Medicaid regarding eligibility inquiry and response. It also includes information about EDI enrollment, testing, and customer support.

Utah Medicaid is publishing this Companion Guide to clarify, supplement, and further define specific data content requirements to be used in conjunction with, and not in place of the ASCX12N TR3 mandated by HIPAA. The Companion Guide can be accessed at <https://health.utah.gov/hipaa/guides.htm>.

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## 1 INTRODUCTION

The Health Insurance Portability and Accountability Act (HIPAA) require all entities exchanging health data to comply with the Electronic Data Interchange (EDI) standards for healthcare as established by the Secretary of Health and Human Services. The Accredited Standards Committees (ASC) X12 Standards for Electronic Data Interchange Technical Report Type 3 (TR3) are the standard of compliance. The TR3s are published by the Washington Publishing Company (WPC) and are available at <http://www.wpc-edi.com/>.

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 due to Utah Medicaid’s system limitation and business needs may require additional information in addition to or 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, and composite or simple data element pertinent to trading electronically with Utah Medicaid.

In addition to the row for each segment, one or more additional rows are used to describe Utah Medicaid’s usage for composite and simple data elements and for any other information. Notes and comments should be placed at the deepest level of detail.

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

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
79	2100B	REF01	Reference Identification Qualifier	1D	2	Use “1D” for Atypical Provider only.
79	2100B	REF02	Reference Identification		12	Payment Contract for Atypical Providers only.
96	2100C	NM109	Identification Code (Subscriber)		10	Utah Medicaid Recipient’s 10-digit Medicaid ID Number
124	2110C	EQ01	Service Type Code		20	Limits the number of iteration of the EQ01 on the 270 transaction.

218	2110C	EB03	Service Type Code		20	Limits the number of iteration of the EB03 on the 271 transaction.
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**Scope**

The Companion Guide addresses Utah Medicaid’s technical and connectivity specifications for the Health Care Eligibility Benefit Inquiry and Response (270/271) transactions. It highlights business rules, system limitations, and data requirements needed for a successful client search and response.

Transactions	Versions
270/271 Health Care Eligibility Benefit Inquiry and Response	005010X279A1
Implementation Acknowledgment for Health Care Insurance (999)	005010X231A1
Interchange Acknowledgment (TA1)	

**Overview**

The Companion Guide was written to assist providers in designing and implementing transaction standards to meet Utah Medicaid’s processing methodology. The guide is organized in the sections listed below:

- **Getting Started:** Section includes information on enrolling as a Utah Medicaid Provider, EDI enrollment, and testing process.
- **Testing With The Payer:** Section includes detailed transaction instruction on how to test with Utah Medicaid.
- **Connectivity With The Payer/Communications:** Section includes information on Medicaid’s transmission procedures, as well as communication and security protocols.
- **Contact Information:** Section includes Medicaid’s telephone numbers, mailing and email addresses, and other contact information.
- **Control Segments/Envelopes:** Section contains information needed to create the ISA/IEA, GS/GE, and ST/SE control segments to be submitted to Utah Medicaid.

- **Payer Specific Business Rules and Limitation:** Section includes detailed transaction testing information. Web services connection is needed to send transactions.
- **Acknowledgements and/or Reports:** Sections contains information on all EDI reports such as 270/271, 999s or TA1.
- **Trading Partner Agreements:** Sections contains information regarding Trading Partner EDI Enrollment requirements for the 270/271 transactions.
- **Transaction Specific Information:** Section contains specific information regarding 270/271 transactions, system limitations, scheduled and non-scheduled system downtime notification, holiday hours and other information that would be helpful to Trading Partners.
- **Appendices:** This section will lay out transmission examples, frequently asked questions, implementation checklist, business scenarios and change summary.

## References

### **5010 ASC X12 TR3 Guides**

Due to system limitation and business needs, Utah Medicaid will identify loops, segments and data elements to convey additional information in order to process electronic requests successfully.

The TR3s may be purchased through Washington Publishing Company (WPC) at <http://www.wpc-edi.com>.

### **Utah Health Information Network (UHIN) Standards and Specifications**

All payers in Utah, including Medicaid, have adopted the UHIN Standards and Specifications set forth by the Utah Health Insurance Commission. UHIN is an independent, not-for-profit, value added network serving providers and payers in Utah.

UHIN Home Page: <http://www.uhin.org>

The UHIN Standards can be found at:  
<http://www.uhin.org/standards-documents>

UHIN UTRANSEND Technical Reference Manual (TRM)  
<http://www.uhin.org/system/files/documents/UTRANSEND%20TRM.v1%2020141104.pdf>

UHIN Home Page: <http://www.uhin.org>

UHIN's EDI Enrollment Specification:

<http://www.uhin.org/system/files/documents/EDI%20Enrollment%20Specification%20v1%2020110510%20approved.pdf>

**Council For Affordable Quality Healthcare (CAQH) Committee On Operating Rules for Information Exchange (CORE)**

For information regarding CORE Rules which governs additional requirements with the Health Care Eligibility Benefit Inquiry and Response (270/271), see the Committee On Operating Rules for Information Exchange (CORE) website at: <http://www.caqh.org>

**Washington Publishing Company (WPC):** <http://www.wpc-edi.com/>  
Washington Publishing Company Code List: <http://www.wpc-edi.com/codes>  
Washington Publishing Company complete product list: <http://www.wpc-edi.com/content/view/661/393/>

**CMS transaction and Code Sets Standards:**  
<http://www.cms.gov/TransactionCodeSetsStands>

**CMS Electronic Billing & EDI Transactions Help Lines (Part A and B)**  
<http://www.cms.gov/ElectronicBillingEDITrans>

**Accredited Standards Committee (ASC):** <http://www.x12.org>

**Additional Information**

Utah Medicaid does not offer EDI software. Some software vendors charge for each electronic transaction type (claims, eligibility, reports, and remittance advice). There is no regulation as to what software vendors can charge for the software license or their services. It is the responsibility of the provider to procure software that best fit their business needs.

Things to consider when looking for an EDI software:

1. Fees and Function – What EDI transactions are included with the software license?
  - a. Health Care Benefit Eligibility Inquiries/Response (270/271).
  - b. Health Care Claim Status Request and Response (276/277).
  - c. Health Care Claims: 837P (Professional), 837I (Institutional), 837D (Dental)
  - d. Acknowledgment Reports (999 and 277CA).
  - e. Health Care Claim Payment/Advice (835).

- f. Health Care Service Review (278)
  - g. 820 Premium Payment (HMO only)
  - h. 834 Benefits Enrollment and Maintenance (HMO only)
2. Software License – Will the license include free regulatory updates?
  3. Technical Support – Is the installation, set-up and subsequent assistance included with the subscription?
  4. System Requirements – Will the software function with your current Operating System and/or Practice Management software or will new hardware be needed?
  5. Reports – Are data elements on received transactions viewable, i.e., Claims Adjustment Reason Codes, Remittance Remark Codes, PLB segments on the 835, etc?
  6. UHIN provides software for their members. Contact UHIN for at 801-716-5901 for more information.
  7. Providers using a billing company or clearinghouse, contact the billing company or clearinghouse for software.
  8. Proprietary software can be used provided it meets HIPAAA 5010 standards and CORE requirements.

## **2 GETTING STARTED**

### **Working with Utah Medicaid**

Providers must enroll as a Utah Medicaid provider. Medicaid Provider Enrollment team may be reached at (801) 538-6155 or (800) 662-9651, option 3 and option 4 for questions regarding provider enrollment. Provider Enrollment forms, instructions and contact information are available on the Medicaid website at: <http://health.utah.gov/medicaid/provhtml/providerenroll.htm>

Once enrolled as a Utah Medicaid provider, contact UHIN for membership information and to obtain an Electronic Data Interchange (EDI) Trading Partner Number (TPN) needed to submit and/or receive electronic transactions to/from Utah Medicaid. Providers must obtain a Trading Partner Number (TPN) from UHIN. Contact UHIN at [www.uhin.org](http://www.uhin.org) or call (801) 716-5901 for membership enrollment information and web service connection.

Providers who wish to employ UHIN and use their tools and services to submit EDI claims, Client Eligibility and Response, Claim Status Inquiry and Response or receive Electronic Remittance Advice should contact UHIN at (801) 716-5901 or see UHIN's EDI Enrollment Specification at:

<http://www.uhin.org/system/files/documents/EDI%20Enrollment%20Specification%20v1%2020110510%20approved.pdf>

Providers who elect to transmit/receive electronic transactions using a third party, such as a billing agent, clearinghouse or network service, do not need to contact UHIN or acquire a TPN if the billing agent, clearinghouse or network service provider is a member of UHIN. In this case, providers must obtain the billing company's TPN to complete Medicaid's EDI enrollment on line.

### **Trading Partner Registration**

Utah Medicaid requires all trading partners to complete the Medicaid EDI Enrollment Form on line at <https://mmcslive.health.utah.gov/hcfeenroll2/index.jsp>, using the TPN assigned by UHIN or the clearinghouse or the network service TPN. Utah Medicaid does not accept any other form of EDI Enrollment.

Use the provider NPI or Medicaid Payment Contract Number (Atypical providers only), and the Tax ID to fill out the EDI Enrollment Form on line. Fill out the form completely and associate the TPN to each transaction based on business needs. Various and different TPNs may be used for each transaction.

A clearinghouse or billing agency may complete the EDI enrollment for the provider using the established TPN owned by the clearinghouse or billing agency.

Click on the link for the EDI Enrollment tutorial:

[https://medicaid.utah.gov/Documents/pdfs/EDI\\_Tutorial2014.pdf](https://medicaid.utah.gov/Documents/pdfs/EDI_Tutorial2014.pdf)

### **Certification and Testing Overview**

All payers in Utah, including Medicaid, have adopted the UHIN Standards and Specifications set forth by the Utah Health Insurance Commission. UHIN is an independent, not-for-profit, value added network serving providers and payers in Utah.

Medicaid requires all providers to test with UHIN prior to submission of electronic 5010 transactions. Contact UHIN at (877) 693-3071 to coordinate 5010 acceptance testing.

## **3 TESTING WITH UTAH MEDICAID**

Contact UHIN Help Desk at (801) 716-5901 for security access to their Test environment. Coordinate Acceptance Testing with UHIN first. UHIN will validate your EDI transactions and notify Utah Medicaid when Acceptance Testing is completed.

Ensure your Trading Partner Number (TPN) is registered with Utah Medicaid prior to testing. Associate the TPN, obtained through UHIN to each transaction based on business needs. Registration can be done through the EDI Enrollment on line at the Medicaid's website: <https://mmcslive.health.utah.gov/hcfeenroll2/index.jsp>.

Providers should coordinate testing with Utah Medicaid after completion of the Acceptance Testing with UHIN, by calling the EDI Customer Support at (801) 538-6155, option 3, option 5. Medicaid EDI Customer Support will assist with testing issues and errors.

Send your test transaction to Medicaid's Test Trading Partner Number:  
HT000004-003

Providers using the UHINt software are not required to test. Contact UHIN Member Relations Team at (801) 716-5901 for technical support.

Providers using a third party software or a practice management software need to work directly with their software vendor for software upgrade and technical support.

#### **4 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS**

Web Service connection is required to send electronic 5010 transactions. For more information, see UHIN standards at <http://www.uhin.org/>, under Standards & Specifications.

To initiate a Trading Partner relation with UHIN, contact UHIN at (801) 716-5901 or (877) 693-3071 for more information, or email at: [customerservice@uhin.com](mailto:customerservice@uhin.com).

UHIN membership must access the Hardware Requirements and Connectivity Companion Guides through UHIN.

For complete information on the Connectivity requirements, click on UHIN's website at the link below:

<http://www.uhin.org/system/files/documents/Connectivity%20Companion%20Guide%20v1.1%2020140826.pdf>

UHIN Technical Specifications are available in the UHIN UTRANSEND Technical Reference Manual. UHIN UTRANSEND Technical Reference Manual can be found at:

<http://www.uhin.org/system/files/documents/UTRANSEND%20TRM.v1%2020141104.pdf>

For information pertaining to the Hardware requirements, click on the link below:  
[http://www.uhin.org/system/files/Minimum\\_Technical\\_Requirements\\_0.pdf](http://www.uhin.org/system/files/Minimum_Technical_Requirements_0.pdf)

## 5 CONTACT INFORMATION

### EDI Customer Service

Trading Partners may call Utah Medicaid for assistance in researching problems with submitted EDI transactions. Utah Medicaid will not edit Trading Partner data and/or resubmit transactions for processing on behalf of a Trading Partner. The Trading Partner must correct any transmission or data errors found and resubmit.

Utah Medicaid EDI Customer Support team may be reached by calling the Medicaid Information Line at (801) 538-6155 or (800) 662-9651, option 3, option 5.

You may also email the EDI Customer Support team at: [HCF\\_OSD@utah.gov](mailto:HCF_OSD@utah.gov)

Note: **Do not send PHI to this email address.**

If Utah Medicaid receives a regular, unencrypted email containing protected health information (PHI), there may be some risk that the information in the email could be intercepted and read by a third party during transmission.

This may be a reportable incident under the HIPAA Privacy and Security Rules. Please follow your organization's incident reporting procedure and notify your compliance officer.

If you need to send PHI or other sensitive information to us electronically, we strongly encourage you to use a secure method.

<https://medicaid.utah.gov/Documents/manuals/pdfs/Medicaid%20Information%20Bulletins/Traditional%20Medicaid%20Program/2014/October2014-MIB.pdf>

EDI Customer Support hours are Monday through Friday from 8 A.M. to 5 P.M. On Thursday, EDI Customer Support phone lines are open from 11 A.M. to 5 P.M. Utah Medicaid is closed during Federal and State Holidays.

Utah Medicaid will broadcast messages through the Medicaid Information Line, the ListServe and through UHIN alerts for unexpected system down time for unexpected delay in generation and transmission of EDI reports, delay in the release of provider payments, and to announce the release of new or interim Medicaid Information Bulletin (MIB), etc.

To sign up for the Medicaid ListServe, click on the URL below:  
<https://medicaid.utah.gov/utah-medicaid-official-publications>

Trading partners may also sign up to receive UHIN alerts for urgent broadcast and notification sent by various Utah Payers including Utah Medicaid at:

<http://uhin.org/members/uhin-alerts>

Utah Medicaid's mailing address is:  
Bureau of Medicaid Operations  
PO Box 143106  
Salt Lake City, UT. 84114-3106

### **EDI Technical Assistance**

Contact the EDI Customer Support team for error resolutions and questions regarding EDI errors. EDI Customer Support team may be reached by calling the Medicaid Information Line at (801) 538-6155 or (800) 662-9651, option 3, option 5.

You may also email the EDI Customer Support team at: [HCF\\_OSD@utah.gov](mailto:HCF_OSD@utah.gov)

Note: **Do not send PHI to this email address.**

If Utah Medicaid receives a regular, unencrypted email containing protected health information (PHI), there may be some risk that the information in the email could be intercepted and read by a third party during transmission.

This may be a reportable incident under the HIPAA Privacy and Security Rules. Please follow your organization's incident reporting procedure and notify your compliance officer.

If you need to send PHI or other sensitive information to us electronically, we strongly encourage you to use a secure method.

<https://medicaid.utah.gov/Documents/manuals/pdfs/Medicaid%20Information%20Bulletins/Traditional%20Medicaid%20Program/2014/October2014-MIB.pdf>

EDI Customer Support hours are Monday through Friday from 8 A.M. to 5 P.M. On Thursday, EDI Customer Service phone lines are open from 11 A.M. to 5 P.M. Utah Medicaid is closed during Federal and State Holidays.

### **Applicable Websites/E-mail**

Utah Medicaid EDI's email address is: [HCF\\_OSD@utah.gov](mailto:HCF_OSD@utah.gov). (there is an underscore between HCF and OSD).

Note: **Do not send PHI to this email address.**

If Utah Medicaid receives a regular, unencrypted email containing protected health information (PHI), there may be some risk that the

information in the email could be intercepted and read by a third party during transmission.

This may be a reportable incident under the HIPAA Privacy and Security Rules. Please follow your organization's incident reporting procedure and notify your compliance officer.

If you need to send PHI or other sensitive information to us electronically, we strongly encourage you to use a secure method.

<https://medicaid.utah.gov/Documents/manuals/pdfs/Medicaid%20Information%20Bulletins/Traditional%20Medicaid%20Program/2014/October2014-MIB.pdf>

Utah Medicaid Web Page: <https://medicaid.utah.gov>

Utah Medicaid 5010 Companion Guide: <http://health.utah.gov/hipaa/guides.htm>

Utah Medicaid EDI Enrollment:  
<https://mmeslive.health.utah.gov/hcfeenroll2/index.jsp>

EDI Enrollment Tutorial:  
[https://medicaid.utah.gov/Documents/pdfs/EDI\\_Tutorial2014.pdf](https://medicaid.utah.gov/Documents/pdfs/EDI_Tutorial2014.pdf)

Sign up for the Medicaid ListServe:  
<https://medicaid.utah.gov/utah-medicaid-official-publications>

UHIN: <http://www.uhin.org>

UHIN Help Desk: [customerservice@uhin.com](mailto:customerservice@uhin.com)

UHIN Standards and Specifications:  
<http://www.uhin.org/standards-documents>

Connectivity requirements, click on UHIN's website at the link below:  
<http://www.uhin.org/system/files/documents/Connectivity%20Companion%20Guide%20v1.1%2020140826.pdf>

Sign up to receive UHIN alerts:  
<http://uhin.org/members/uhin-alerts>

UHIN's Hardware Requirements, click on the link below:  
[http://www.uhin.org/system/files/Minimum\\_Technical\\_Requirements\\_0.pdf](http://www.uhin.org/system/files/Minimum_Technical_Requirements_0.pdf)

All documentation submitted for review through Fax, E-mail or paper, must be submitted with a completed Utah Medicaid Documentation Submission Form. The form must be the first page of the documentation and must be filled out completely. The form is available at:  
<http://health.utah.gov/medicaid/provhtml/forms.htm>.

## 6 CONTROL SEGMENT/ENVELOPES

In all transactions except the fast batch response (e.g. 271), the ISA06 and ISA08 hold the designated Trading Partner Number (TPN) of the submitter and receiver, respectively. The trading partner defines the value carried in the GS02 and GS03. If there is not an agreement between trading partners as to the value carried in these segments, then the default will be TPN of the submitter and receiver (i.e., the same numbers that are in ISA06 and ISA08, respectively).

For security purposes, neither the ISA04 nor the GS02 will be used to carry the Trading Partner Password or User ID. The Password and Use ID values will be transmitted in outside wrapping of the transaction for authentication. For this reason the ISA01 and ISA03 values are '00' and the ISA02 and ISA04 are space filled. See the table below for proper usage and required value for various data elements in the ISA and GS segments.

### ISA-IEA (Interchange Control Number)

To facilitate tracking and debugging the Interchange Control number used in the ISA13 must be unique for each transaction. The numbers may not be reused for a minimum of one year.

### Interchange Sender ID

The information that is sent in the XML Header (SOAP wrapper) sender\_id must be consistent with that sent in the Interchange Sender ID – ISA06. Failure may result in the receiver rejecting the file with an “ND” XML error code.

### Group Control Number

To facilitate tracking and debugging the Group Control number used in the GS06, must be unique. The numbers may not be reused for a minimum of one year.

In a 999 Acknowledgement or interactive response transaction, the GS03 carries the value sent in the GS02 of the 270 transaction that is being acknowledged. The table below identifies the values to be carried in the ISA and GS of the transaction acknowledgment.

For more information regarding the use of ISA/IEA and GS/GE control segments, see the Utah Standards available on the UHIN website at:

<http://www.uhin.org/standards-documents>

Page #	Reference	Name	Value	Notes/Comments
C.3	ISA05	Interchange ID Qualifier	ZZ	Utah Medicaid accepts 'ZZ' qualifier only.
C.3	ISA06	Interchange Sender ID	HTxxxxxxx-xxx	Sender's Trading Partner Number.

				Use the same value for GS02.
C.3	ISA07	Interchange ID Qualifier	ZZ	Utah Medicaid accepts 'ZZ' qualifier only.
C.3	ISA08	Interchange Receiver ID	HT000004-001	Utah Medicaid's Trading Partner Number. Use the same value for GS03.
C.3	ISA13	Interchange Control Number	Nine numeric value	Set of 9 numbers must be unique and may not be reused for a minimum of one year.
C.3	ISA14	Acknowledgment Requested	1	Always use number "1" for Interchange Acknowledgment Requested (TA1). Acknowledgment will be NOT be returned for the submitted transaction if an error on the ISA segment is detected. And the submitted EDI file will not be processed.
C.3	ISA15	Interchange Usage Indicator	P	Always use "P" for Production. EDI files marked with a "T" for Test will not be acknowledged or processed.
C.7	GS06	Group Control Number	Nine numeric value	Set of 9 numbers must be unique and may not be reused for a minimum of one year.

## 7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

Utah Medicaid will support both Batch and Real-Time Eligibility Benefit Inquiry and Response (270/271) transactions.

### Regular Scheduled System Downtime

Utah Medicaid’s systems are available to process Real Time and Batch transactions 24/7 except for our regularly scheduled system downtime, which is stated below.

#### Routine downtime

Regularly scheduled system downtime is Sundays, from 1 A.M. to 2 A.M.

No real-time transactions will be processed between these hours. No response and/or acknowledgement will be returned during scheduled and non-scheduled downtime.

#### Non-routine downtime

Medicaid will notify providers through email list serve, UHIN alerts or message broadcast through the phone system for unscheduled and/or emergency downtime within one hour of discovery.

No response and/or acknowledgement will be returned during scheduled or non-scheduled downtime.

### System Holiday Schedule

Utah Medicaid’s systems are available to process Real Time and Batch transactions 24 hours a day, 7 days a week except for our regularly scheduled system downtime, as stated above.

### Business Limitations

Page #	Loop ID	Reference	Name	Length	Notes/Comments
96	2100C	NM109	Identification Code (Subscriber)	10	Recipient’s 10-digit Medicaid ID Number
124	2110C	EQ01	Service Type Code	20	Limits the number of iteration of the EQ01 on the 270 transaction.

218	2110C	EB03	Service Type Code	20	Limits the number of iteration of the EB03 on the 271 transaction.
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## 8 ACKNOWLEDGEMENTS AND/OR REPORTS

**Implementation Acknowledgment for Health Care Insurance (999)** – Edits for syntactical quality of the functional group and the implementation guide compliance. 999 acknowledgements are returned for all batch 270 transactions. It will be available for download within one (1) hour after receipt of a 270 transmission.

An Accepted 999 means the transaction file was accepted and will be responded to by the next business day. A Rejected 999 means the file transmitted does not comply with the HIPAA standards identified by the syntactical analysis or implementation guide compliance.

The 999 Acknowledgment will identify the segment name, segment location (line number), Loop ID, and data element in error. For multiple errors, all errors found will be listed in the 999 Implementation Acknowledgment. Error(s) must be corrected before resubmitting the 270 transaction.

For Real-Time eligibility requests, no 999 acknowledgement will be returned. Multiple eligibility queries submitted on Real-time will reject on a 271 transaction with AAA error code.

**Interchange Acknowledgment (TA1)** – This report provides the capability for the interchange receiver to notify the sender that a valid envelope was received or that problems were encountered with the interchange control structure. The TA1 verifies the envelopes only. It is unique in that it is a single segment transmitted without the GS/GE envelope structure.

The TA1 Acknowledgment encompasses the interchange control number, interchange date and time, interchange acknowledgment code, and the interchange note code. The interchange control number, interchange date and time are identical to those that were present in the transmitted interchange from the trading partner. This provides the capability to associate the TA1 with the transmitted interchange.

TA104, Interchange Acknowledgment Code indicates the status of the interchange control structure. This data element stipulates whether the transmitted interchange was accepted with no errors, accepted with errors, or rejected because of errors.

TA105, Interchange Note Code is a numerical code that indicates the error found while processing the interchange control structure. Values for this data element indicate whether the error occurred at the interchange or functional group envelope.

EDI submitters wishing to receive a TA1 Acknowledgment must request it through data elements ISA14, using data element “1” in the transmitted interchange. If a TA1 Acknowledgment is not requested and the submitted EDI file has an enveloping error, Medicaid will not generate or send an acknowledgment for your file.

## 9 TRADING PARTNER AGREEMENTS

Contact UHIN at [www.uhin.org](http://www.uhin.org) or call (801) 716-5901 for membership enrollment information and Web Services connection. UHIN will assign a Trading Partner Number (TPN) for EDI.

Providers who elect to submit/receive electronic transactions using a third party such as a billing agent, clearinghouse or network service do not need to contact UHIN or acquire a TPN if the billing agent, clearinghouse or network service is a member of UHIN. Clearinghouse or billing agency may complete the EDI enrollment for the provider or obtain the billing company’s TPN if you elect to complete the EDI enrollment on our website.

Providers who wish to exchange electronic transaction with Medicaid must submit an Electronic Data Interchange (EDI) Enrollment through the Medicaid’s website: <https://mmcslive.health.utah.gov/hcfeenroll2/index.jsp>. Provider will need the National Provider Identifier (NPI) or 12-digit payment contract, and Tax ID to complete the EDI enrollment on line.

Associate the TPN to each transaction (based on business needs). Different TPN’s may be used for each transaction.

Utah Medicaid does not offer an EDI software. It is the responsibility of the provider to procure software capable of generating a 5010 X12 transaction, and is compatible with the practice management system to meet their business needs.

Some software vendors charge for each transaction type (claims, eligibility, reports, and remittance advice). There is no federal regulation as to how much a software vendor can charge for the software license or their services.

UHIN provides software for UHIN members, and can be downloaded from [www.uhin.org](http://www.uhin.org). For assistance with the download, contact UHIN at (801) 716-5901 or (877) 693-3071.

Providers using a billing company or clearing house, contact the billing company or clearing house for software. Proprietary software can be used provided it meets HIPAA 5010 standards and the CAQH CORE Operating Rules requirements.

## 10 TRANSACTION SPECIFIC INFORMATION

The information, when applicable under this section is intended to help the trading partner understand the business context of the 270/271 transaction.

There are multiple methods available for sending and receiving electronic transactions. The two most common methods for EDI transactions are Batch and Real-Time modes. Utah Medicaid supports both Batch and Real Time 270/271 transactions.

Access to the 270/271 transactions by Batch and Real Time requires trading partners to register on-line with Medicaid, and define usage of these transactions. Click on the following link to register: <https://mmcslive.health.utah.gov/hcfeenroll2/index.jsp>.

An EDI Enrollment Tutorial is also available at:  
[https://medicaid.utah.gov/Documents/pdfs/EDI\\_Tutorial2014.pdf](https://medicaid.utah.gov/Documents/pdfs/EDI_Tutorial2014.pdf)

Providers must be enrolled and open with Utah Medicaid for the date of service being queried. Utah Medicaid providers with an open NPI or 12-digit payment contract (Atypical Providers only) are allowed to transmit the 270/271 transaction. All others will receive a 271 with an AAA error response.

Providers, billers, and clearinghouses must separate batches by the receiving TPN, (HT000004-001 and HT000004-801).

### **Medicaid Trading Partner Numbers (TPN)**

Providers using NPI should submit 270 transactions to the following mailbox:  
**HT000004-001**

Atypical providers should route 270 transactions to the mailbox below using the 12-digit payment contract: **HT000004-801**

Test Trading Partner Number: **HT000004-003** (through UHIN ProdMirror)

### **Batch Transactions**

In a batch mode, the sender does not remain connected while Utah Medicaid processes the transaction. A 999 Acknowledgement will be returned and made available for download within one hour of receipt of a batch 270 transactions.

Batch 270 transactions should contain no more than ninety-nine (99) client inquiries per transmission.

Batch 271 responses are returned the day after the 270 transaction is received, unless transaction is rejected on a 999 acknowledgement. The 271 response will be available for download by 7 A.M. for all 270 batches submitted by 9 P.M. the day before.

Contact Medicaid EDI Customer Support at (801) 538-6155 or (800) 662-9651 option 3, option 5, and option 2 if a 999 acknowledgement is not returned or for questions pertaining to a rejection on the 999 acknowledgement.

### **Real-Time Transactions**

In Real-Time mode, the sender remains connected while Utah Medicaid processes the transaction. One single client and date of service inquiry is allowed in a Real Time 270 transaction.

Response for Real Time processing is completed and returned within 20 seconds.

### **Minimum Data Requirements For Client Search**

Trading Partners are required to submit a minimum amount of identification in order to verify eligibility on Utah Medicaid clients. Medicaid will search client based on the following data combinations submitted on the 270 transaction:

- a. Client Medicaid ID and Full Name
- b. Client Medicaid ID, Last Name and Date Of Birth
- c. Client Medicaid ID, First Name and DOB
- d. Full Name and DOB

Client Middle Initial may be sent, however, it is not required to verify eligibility and no searches will be performed based on the Middle Initial entered.

Name prefix or suffix may be sent on the 270 transaction, but is not required to perform name matching. Utah Medicaid will normalize names with name prefix or suffix and perform matching on other client data elements.

List each Utah Medicaid client as the Subscriber. No dependent level queries should be submitted.

Medicaid will support and process up to twenty (20) Service Type Codes (EQ03) and will return up to twenty (20) corresponding EB codes. Eligibility and benefit information are returned based on the service type code(s) submitted. All 270 transactions submitted without a service type code will return an AAA error code without client benefit information.

Medicaid supports queries for dates of service up to three (3) years in the past and up to the end of the current month.

The 271 response will return the trace number submitted in the 270 for matching response to the inquiry.

Co-payment, coinsurance or deductible amounts are reflective for the date of inquiry only. Amounts are applied to the claim at the time of adjudication and may vary from data given in the 271 transaction.

No eligibility or benefit information will be returned in the 271 response for clients enrolled in CHIP-UPP and Primary Care Network Covered-At-Work programs (PCN\_CAW) as these programs and are managed by other organizations.

Information will be provided regarding the Capitation organizations the client is enrolled in. A separate inquiry regarding eligibility benefits should be submitted to those organizations.

Some program types will supply information on specific service limitations and remaining accumulators.

## **APPENDICES**

### **Implementation Checklist**

1. Enroll as a Medicaid Provider.
2. Acquire a Trading Partner Number from UHIN.
2. Register Trading Partner Number on-line with Utah Medicaid.
3. Contact UHIN for Acceptance Testing and Connectivity testing.
4. Test with Utah Medicaid.
5. Go live with Utah Medicaid.

### **Business Scenarios**

A. Trading Partners are required to submit a minimum amount of provider and client identification in order to utilize the Health Care Eligibility Benefit Inquiry and Response (270/271) transaction.

Utah Medicaid will validate the NPI or the 12-digit Provider Contract ID (Atypical) for all providers sending 270 transactions.

B. Medicaid will search client information based on the data combinations submitted on the 270 transaction:

- a. Client Medicaid ID and Full Name
- b. Client Medicaid ID, Last Name and Date Of Birth
- c. Client Medicaid ID, First Name and Date of Birth
- d. Full Name and DOB

C. Medicaid will support and process up to twenty (20) Service Type Codes (EQ03) and will return up to twenty (20) corresponding EB codes. Eligibility and benefit information are returned based on the service type code(s) submitted.

All 270 transactions submitted without a service type code will return an AAA error code without client benefit information.

**Transmission Examples:**

A. NPI/Provider Contract ID validation:

<b>NPI Providers</b>					
<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Length</b>	<b>Notes/Comments</b>
2100B	NM108	Identification Code Qualifier	XX		The National Provider ID must be submitted
2100B	NM109	Identification Code (Information Receiver Identification Number		10	The National Provider ID must be submitted

OR

<b>Atypical Providers</b>					
<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Length</b>	<b>Notes/Comments</b>
2100B	REF01	Reference Identification Qualifier	1D		For Atypical Provider use only
2100B	REF02	Reference Identification		12	12-digit Payment Contract for Atypical Provider use only

B. Minimum client data needed for search:

<b>Utah Medicaid Client Identification Number and Full Name</b>					
<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Length</b>	<b>Notes/Comments</b>
2100C	NM103	Subscriber Last Name			Utah Medicaid Recipient's Last Name
2100C	NM104	Subscriber First Name			Utah Medicaid Recipient's First

					Name
2100C	NM108	Identification Code Qualifier	MI		
2100C	NM109	Identification Code Qualifier		10	Utah Medicaid Recipient's 10-digit Medicaid ID Number

OR

<b>Utah Medicaid Client Identification Number, Last Name and Date Of Birth</b>					
<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Length</b>	<b>Notes/Comments</b>
2100C	NM103	Subscriber Last Name			Utah Medicaid Recipient's Last Name
2100C	NM108	Identification Code Qualifier	MI		
2100C	NM109	Identification Code Qualifier		10	Utah Medicaid Recipient's 10-digit Medicaid ID Number
2100C	DMG01	Date Time Period Format Qualifier	D8		Use this qualifier to report Subscriber's DOB
2100C	DMG02	Date Time Period		8	Medicaid Recipient's Date of Birth expressed in (CCYYMMDD) format

OR

<b>Utah Medicaid Client Identification Number, First Name and Date Of Birth</b>					
<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Length</b>	<b>Notes/Comments</b>
2100C	NM104	Subscriber First Name			Utah Medicaid Recipient's First Name
2100C	NM108	Identification Code Qualifier	MI		
2100C	NM109	Identification Code Qualifier		10	Utah Medicaid Recipient's 10-digit Medicaid ID Number
2100C	DMG01	Date Time Period Format Qualifier	D8		Use this qualifier to report Subscriber's

					<b>DOB</b>
2100C	DMG02	Date Time Period		8	Medicaid Recipient's Date of Birth expressed in (CCYYMMDD) format

OR

<b>Utah Medicaid Client Full Name and Date Of Birth</b>					
<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Length</b>	<b>Notes/Comments</b>
2100C	NM103	Subscriber Last Name			Utah Medicaid Recipient's Last Name
2100C	NM104	Subscriber First Name			Utah Medicaid Recipient's First Name
2100C	DMG01	Date Time Period Format Qualifier	D8		Use this qualifier to report Subscriber's DOB
2100C	DMG02	Date Time Period		8	Medicaid Recipient's Date of Birth expressed in (CCYYMMDD) format

C. Usage Limitations of the 270 EQ01 and 271 EB03.

<b>Loop</b>	<b>Segment</b>	<b>Name</b>	<b>Code</b>	<b>Repeat</b>	<b>Notes/Comments</b>
2110C	EQ01	Service Type Code		20	Limits the number of iteration of the EQ01 on the 270 transaction.
2110C	EB03	Service Type Code		20	Limits the number of iteration of the EB03 on the 271 transaction.

**Frequently Asked Questions**

Here's a compilation of Questions and Answers relative to Utah Medicaid and its providers.

1. Is there an enrollment requirement to utilize the 270/271?

Yes. In order to successfully exchange electronic data like the 270/271 transaction, providers must be enrolled and currently open with Utah Medicaid for the service date.

- A. Successful utilization of the 270/271 transactions by Batch and/or Real Time requires trading partners to register the TPN on-line with Utah Medicaid, by submitting an Electronic Data Interchange (EDI) enrollment form. Define usage of the 270/271 transactions on the EDI Enrollment. Click on the link below to register.  
<https://mmeslive.health.utah.gov/hcfeenroll2/index.jsp>.

Tutorial: [https://medicaid.utah.gov/Documents/pdfs/EDI\\_Tutorial2014.pdf](https://medicaid.utah.gov/Documents/pdfs/EDI_Tutorial2014.pdf)

2. What is Utah Medicaid's client search criteria?

Medicaid will search client information based on the following data combinations submitted on the 270 transaction:

- a. Client Medicaid ID and Full Name
- b. Client Medicaid ID, Last Name and Date Of Birth
- c. Client Medicaid ID, First Name and DOB
- d. Full Name and DOB

3. What is the Connectivity Requirements for Real Time?

For more information, see UHIN standards at <http://www.uhin.org/>, under Standards & Specifications.

To initiate a Trading Partner relation with UHIN, contact UHIN at (801) 716-5901 or (877) 693-3071 for more information, or email at: [customerservice@uhin.com](mailto:customerservice@uhin.com).

UHIN membership must access the Hardware Requirements and Connectivity Companion Guides through UHIN.

For complete information on the Connectivity requirements, click on UHIN's website at the link below:  
<http://www.uhin.org/system/files/documents/Connectivity%20Companion%20Guide%20v1.1%2020140826.pdf>

4. Do you support Batch submission?

Yes, Utah Medicaid supports Batch and Real Time 270/271 and 276/277 transactions.

5. What Trading Partner Number should provider use to send the 270 to?

Providers using NPI to bill Utah Medicaid should submit 270 transactions to the following mailbox: **HT000004-001**

Atypical providers should route the 270 transactions to the mailbox below using the 12-digit Payment Contract: **HT000004-801**

6. Do you require testing?

Providers should complete Acceptance Testing with UHIN prior to submitting testing to Utah Medicaid. Call Medicaid's EDI team to coordinate testing at (801) 538-6155, option 3, option 5.

7. What is the response times for Batch and Real Time transaction?

Batch 271 responses are returned the day after the 270 transaction is received, unless transaction is rejected on a 999 acknowledgement. The 271 response will be available for download by 7 A.M. for all 270 batches submitted by 9 P.M. the day before

Response for Real Time processing is completed and returned within 20 seconds.

8. Who do I call for EDI Customer Support?

Trading Partners may call Utah Medicaid for assistance in researching problems with submitted EDI transactions. Utah Medicaid will not edit Trading Partner data and/or resubmit transactions for processing on behalf of a Trading Partner. The Trading Partner must correct any transmission or data errors found and resubmit.

Utah Medicaid EDI Customer Support team may be reached by calling the Medicaid Information Line at (801) 538-6155 or (800) 662-9651, option 3, option 5. You may also email the EDI Customer Support team at: [HCF\\_OSD@utah.gov](mailto:HCF_OSD@utah.gov)

Note: **Do not send PHI to this email address.**

If Utah Medicaid receives a regular, unencrypted email containing protected health information (PHI), there may be some risk that the information in the email could be intercepted and read by a third party during transmission.

This may be a reportable incident under the HIPAA Privacy and Security Rules. Please follow your organization's incident reporting procedure and notify your compliance officer.

If you need to send PHI or other sensitive information to us electronically, we strongly encourage you to use a secure method.

<https://medicaid.utah.gov/Documents/manuals/pdfs/Medicaid%20Information%20Bulletins/Traditional%20Medicaid%20Program/2014/October2014-MIB.pdf>

EDI Customer Support hours are Monday through Friday from 8 A.M. to 5 P.M. On Thursday, EDI Customer Support phone lines are open from 11 A.M. to 5 P.M. Utah Medicaid is closed during Federal and State Holidays.

Utah Medicaid will broadcast messages through the Medicaid Information Line, the ListServe and through UHIN alerts for unexpected system down time, delay in generation and/or transmission of EDI reports, delay in the release of provider payments, and to announce the release of new or interim Medicaid Information Bulletin (MIB), etc.

To sign up for the Medicaid ListServe, click on the URL below:

<https://medicaid.utah.gov/utah-medicaid-official-publications>

### **Change Summary**

This section details the changes between the current Companion Guide and the previous guide(s).

1. Add the Interchange Acknowledgment, TA1.
2. ISA and GS data elements.
3. Change reflecting the new URL for UHIN Standards Documents, and the UTRANSEND Technical Reference Manual (TRM).