



Connecticut interChange MMIS

Provider Manual

Chapter 6 - Electronic Data Interchange Options

January 19, 2022

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Amendment History

Version	Version Date	Reason for Revision	Section	Page(s)
1.0	01/01/2008	Initial Release.	All	All
1.1	07/14/2008	Revisions made to match Internet static content changes and reflect current processes.	All	2, 4-5, 7-11, 13, 15-18
1.2	01/21/2010	Added e-Prescribing information, removed references to password requirement for Chapter 10.	6.1 6.2 6.3	2-3 5-6 8
1.3	07/21/2010	Updated to reflect discontinuation of SAGA program and the implementation of the Medicaid Low Income Adults program, added TDD/TTY phone number.	6.1 6.2 6.5	3 7 19-20
1.4	03/01/2011	Added reference to HIPAA 5010 implementation information.	6.1	2
1.5	05/04/2012	Updated as a result of ASO transition and to support HIPAA 5010.	6.1 6.2 6.3	2-3 5-6 9-11, 13
1.6	11/12/2013	Updated to indicate PES will no longer be a supported electronic solutions option. Also updated to reflect ConnPACE and Charter Oak program shut downs.	6.1 6.3	3 12
1.7	06/16/2014	Updated to reflect new requirements as a result of ACA 1104 Operating Rules, and future availability of PES. Updated to reflect new DSS address.	All	All
1.9	07/27/2015	Removed references to Charter Oak and ConnPACE. Removed references to form availability via fax on demand.	6.1 6.5	3 18
2.0	09/08/2015	Updated PES references.	6.2 6.3 6.5	5 10-11 16
2.1	11/01/2015	Updated to replace HP references/logo with Hewlett Packard Enterprise references/logo.	All	All

2.2	04/18/2017	Updated to replace Hewlett Packard Enterprise references/logo with DXC Technology references/logo, as well as updated hyperlinks to Husky Health.	All	All
2.3	11/01/2018	Updated as a result of changes in CADAP program administration.	6.1	3
2.4	7/1/2018	Updates to support elimination of paper trading partner agreements	All	All
2.5	10/01/2020	Updated to replace Gainwell Technologies references/logo with Gainwell Technologies references/logo.	All	All
2.6	01/19/2022	Updated misc links.	All	All

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6.1 Overview

Chapter 6 contains information regarding methods of electronic data interchange between the Connecticut Medical Assistance Program provider community and Gainwell Technologies.

Electronic Data Interchange (EDI)

Electronic Data Interchange (EDI) refers to all electronic transaction methods used by the Connecticut Medical Assistance Program. The Connecticut Medical Assistance Program uses the Health Insurance Portability and Accountability Act (HIPAA) compliant formats for all accepted transactions. These formats are explained in further detail in the appropriate sections of this chapter.

Electronic transaction methods include:

- Eligibility verification transactions ASC X12N 270/271 (Section 6.2)
- Electronic claim submission ASC X12N 837 Institutional, Professional and Dental (Section 6.3)
- Electronic claim status requests ASC X12N 276/277 (Section 6.3)
- Electronic implementation/functional acknowledgements ASC X12N 999 and ASC X12N TA1 (Section 6.3)
- Electronic Remittance Advice access ASC X12N 835 Health Care Claim Payment/Advice (Section 6.4)

For additional EDI information or assistance, please log on to our Web site at www.ctdssmap.com and select the Trading Partner tab.

Benefits of Electronic Transactions

Electronic transactions, submitted via the internet, or POS are an efficient and cost effective method for providers to verify eligibility, submit claims, or verify claim status in the Connecticut Medical Assistance Program. Providers who submit electronic transactions receive timely responses to their transactions.

e-Prescribing

e-Prescribing allows licensed authorized practitioners, clinics, hospitals and pharmacies to provide enhanced patient service and ensure medication safety by streamlining practice workflows through the efficiency of electronic medication orders, receiving pharmacy program benefits for the patient and obtaining patient medication history information.

DSS is a certified payer in the Surescripts network. Through the Surescript network, the e-Prescribing technology is securely linked to the Connecticut Medicaid Management Information System (MMIS). Surescripts electronically routes up-to-date patient eligibility, medication history, and information about how the different pharmacy programs cover specific medications at every point of care.

This allows providers who currently use an approved e-Prescribing system access to Connecticut Medical Assistance Program client's eligibility, formulary, and medication claim history for:

- HUSKY A – Family Medicaid
- HUSKY B – State Children's Health Insurance Program (SCHIP)
- HUSKY C – previously referred to as Medicaid, Title XIX, fee-for-service, or Adult Medicaid
- HUSKY D – previously referred to as Medicaid for Low Income Adults (LIA)

Note: The CADAP program is administered by the Department of Public Health's pharmacy benefit manager, Magellan. For contact information, please reference Chapter 1.

Additional information on e-Prescribing is located in Chapter 5, Section 17.

6.2 EDI Eligibility Verification Options

Overview

The following electronic methods can be used to verify client eligibility:

- Provider Secure Web site
- Gainwell Technologies Provider Electronic Solutions software (PES)
- Point of Sale (POS) Device
- Vendor software utilizing the ASC X12N 270/271: Health Care Eligibility/Benefit Inquiry and Information Response transaction
- Via e-Prescribing using Surescripts and the ASC X12N 270/271: Health Care Eligibility/Benefit Inquiry and Information Response transaction

Given the options explained below, providers can determine which methods best meet the needs of their organization. Complete information about Automated Eligibility Verification System (AEVS) options is found in Chapter 4, Client Eligibility and Chapter 10, Web Portal and Automated Voice Response System (AVRS).

Provider Secure Web Site

The Provider Secure Web site at www.ctdssmap.com allows providers to submit eligibility requests, one at a time, and receive an immediate response on a particular client's eligibility for Connecticut Medical Assistance Program services.

The Web site also provides self-service features for providers in addition to client eligibility verification. These services include direct claims submission via the Web with a response returned to the user's Web browser, downloading of pertinent forms and remittance advices, online provider Enrollment/Re-enrollment Wizard, claims correction and access to pertinent client/program information. See Chapter 10 for information for these self-service features.

Gainwell Technologies Provider Electronic Solutions software

The Gainwell Technologies Provider Electronic Solutions software package allows existing users to verify client eligibility and access pertinent client/program information through a personal computer.

The Provider Electronic Solutions software package allows the provider to:

- Save client eligibility and client/program verification requests and responses in a database.
- Print a paper copy of the eligibility verification response.

Point Of Sale (POS) Device

A POS device allows providers to verify client eligibility and access pertinent client/program information. POS devices can be obtained from third party vendors.

Vendor Software 270/271 Transaction Specifications	<p>Providers who wish to have the eligibility verification function incorporated into their vendor's software program via batch or interactive submission may do so.</p> <p>The technical transaction specifications for the 270/271 Health Care Eligibility/Benefit Inquiry and Information Response transaction are available at www.wpc-edi.com.</p> <p>This information may also be accessed through links on the Connecticut Medical Assistance Program Web site at www.ctdssmap.com:</p> <ol style="list-style-type: none"> 1. Select the Information tab. 2. Select the Links tab for more information. <p>Companion Guides are also available:</p> <ol style="list-style-type: none"> 1. Select the Trading Partner tab. 2. Select the EDI tab, and then locate the Companion Guide.
e-Prescribing	<p>Connecticut Medical Assistance Program licensed authorized practitioners, clinics and hospitals use their valid National Provider Identification number (NPI) to access real-time pharmacy eligibility information for CT Medical Assistance Program clients through the Surescripts network. Additional information on e-Prescribing and eligibility verification is located in Chapter 5, Section 17,</p>
Requests for Additional Information on Electronic Eligibility Options	<p>For additional information on any of the above EDI methods or for information on obtaining technical specifications, providers may call 1-800-842-8440, between the hours of 8:00 a.m. – 5:00 p.m. Monday through Friday, excluding holidays, and ask a Customer Service Representative for the Electronic Data Interchange Unit.</p> <p>Providers are also offered a TDD/TTY number for assistance in obtaining necessary program information. The number is 1-866-604-3470.</p> <p>Providers may also access companion guides and manuals from the Connecticut Medical Assistance Program Web site at www.ctdssmap.com.</p> <p>Providers interested in purchasing a POS device may contact a third party vendor who provides this service.</p>

6.3 Electronic Transaction Submission Options, Procedures, and Forms

Overview

Electronic Data Interchange (EDI) refers to all electronic transaction methods used by the Connecticut Medical Assistance Program. EDI provides the most efficient and cost effective method for the provider to submit electronic transactions to Gainwell Technologies.

The following sections describe methods of claim submission, claim record layouts, methods of transmission, and submission media related to electronic claim submission. This section also provides information regarding Health Care Claim Status and Functional Acknowledgement transactions.

This information is summarized in the chart, “Overview of Provider Electronic Transaction Options” on the following pages.

Transaction Type	Electronic Transactions Description
Claims Submission	<p>Electronic claims submission methods:</p> <ul style="list-style-type: none"> • Batch: This is the traditional method of electronic claim submission. Claims are submitted to Gainwell Technologies in a group or “batch” prior to the bi-monthly claims processing cycle. • Interactive: This method is available to pharmacies for the submission of pharmacy claims. Pharmacy claims are submitted via the Point of Sale (POS) system for online, real-time adjudication. • Internet*: This method is available for those providers who do not submit large volumes of claims and do not use a vendor/clearinghouse, but enjoy the ease of submission from a desktop computer. <p>*Enrolled providers who have established their Web account on the Internet provider portal can submit a claim using the Web and receive confirmation whether the claim was accepted. In addition, the provider can use the claim inquiry function to retrieve their claim records to view or use to resubmit claims via the Internet provider portal.</p>
	<p>Electronic claim record layouts, based on claim type:</p> <ul style="list-style-type: none"> • ASC X12N 837 Health Care Claim Institutional: For the submission of long-term care, home health and inpatient and outpatient hospital claims (UB-04). • ASC X12N 837 Health Care Claim Professional: For the submission of professional (including but not limited to Physicians, Clinics, Labs, etc.) and medical transportation claims (CMS-1500). • ASC X12N 837 Health Care Claim Dental: For the submission of dental claims (ADA-2006 Dental Claim Form). • National Council for Prescription Drug Programs (NCPDP-Version D.0): For the submission of pharmacy claims.

Transaction Type	Electronic Transactions Description
Claim Status Requests	<p>Electronic claim status methods:</p> <ul style="list-style-type: none"> • Batch: This is the traditional method for electronic claim status requests and responses. Claim status requests are submitted to Gainwell Technologies in a group or “batch”, to which a response is generated. • Internet: This method is available for providers who wish to verify claim status through a Web browser interface.
	<p>Claim status record layout:</p> <ul style="list-style-type: none"> • ASC X12N 276/277 Health Care Claim Status Request and Response: The 276/277 is a paired transaction set used to send and receive health care claim status requests and responses.
Implementation Acknowledgement	<p>Implementation acknowledgment receipt method:</p> <ul style="list-style-type: none"> • Batch: This is the traditional receipt method of electronic claim submission acknowledgment.
	<p>Implementation Acknowledgment record layout:</p> <ul style="list-style-type: none"> • ASC X12N 999 Implementation Acknowledgement for Health Care Insurance: The 999 acknowledgement informs a sender that a transmission has been received, whether the submission has been accepted or rejected and is generally available within 24 hours of receipt. It also is used by the sender to specify for each functional group of X12 835 transactions that the functional group was either accepted, accepted with errors, or rejected.
Interchange Acknowledgment	<p>Interchange Acknowledgment record layout:</p> <ul style="list-style-type: none"> • ASC X12N TA1 Interchange Acknowledgement: When the original Inbound transaction contains a value of zero (0) in ISA14, the TA1 acknowledgement informs a sender that a transmission has rejected and is generally available within 24 hours of receipt. When the original Inbound transaction contains a value of one (1) in ISA14, the TA1 acknowledgement is generated for the submitted transaction in all cases.

Transaction Type	Electronic Transactions Description
Claims Submission, Claims Status Requests and Functional Acknowledgment Transactions	<p>For the submission of claims or claims status, the following transmission methods are available:</p> <p>Value-Added Network (VAN)/ Vendor</p> <ul style="list-style-type: none"> Connecticut Medical Assistance Program providers may use the services of a VAN, also referred to as a switching company or clearinghouse, for the formatting and routing of electronic transactions. The VAN, or an outside software vendor, develops software to allow providers to submit transactions to the VAN and from the VAN to Gainwell Technologies. The Implementation Guide for retail pharmacy standards (NCPDP Version D.0) is available from the National Council for Prescription Drug Programs, 9240 E. Raintree Dr., Scottsdale, AZ, 85260-7518; telephone (480) 477-1000; FAX: (480) 767-1042. It is also available from the NCPDP Web site at www.ncdp.org/. The non-pharmacy Implementation Guides for the ASC X12N Health Care Claim 837 Institutional, Professional, Dental formats, ASC X12N 276/277 Health Care Claim Status Request and Response and ASC X12N 999 Implementation Acknowledgment for Health Care Insurance are available at the Washington Publishing Web site at www.wpc-edi.com/. This information may also be accessed at the Connecticut Medical Assistance Program Web site www.ctdssmap.com by selecting the Information tab, then the Links tab. <p>Gainwell Technologies Provider Electronic Solutions Software</p> <ul style="list-style-type: none"> Long Term Care providers who do not use the services of a VAN/vendor may be utilizing Gainwell Technologies' Provider Electronic Solutions software package to submit institutional claims as well as Paid Claim Adjustment Requests (PCARs) and receive a functional acknowledgment.
Non-Pharmacy Submission Media	Non-pharmacy Connecticut Medical Assistance Program providers may submit electronic transactions via a Web interface for uploading and downloading files.

Overview of Provider Transaction Options:

The Overview of Provider Electronic Transaction Options chart on the following pages is organized by transaction type and provides the options available to providers using electronic transactions with the Connecticut Medical Assistance Program. This chart summarizes both eligibility and claim transaction options.

Overview of Provider Electronic Transaction Options

Transaction Type	Claim Record Layout	Method of Submission		
		Interactive Via VAN	Batch File Submission Via Vendor	Batch File Submission Via PES
Institutional Inpatient, Outpatient, Long-Term Care, Home Health	ASC X12N 837 Health Care Claim: Institutional	N/A	X	X (Long Term Claims Only)
Professional, Medical Transportation	ASC X12N 837 Health Care Claim: Professional	N/A	X	N/A
Dental	ASC X12N 837 Health Care Claim: Dental	N/A	X	N/A
Claim Status	ASC X12N 276 Health Care Claim Status Request ASC X12N 277 Health Care Claim Status Response*	X	X	X (Long Term Claims Only)
Eligibility	ASC X12N 270 Health Care Eligibility Benefit Inquiry ASC X12N 271 Health Care Eligibility Benefit Response*	X	X	X
Pharmacy Claim Submission	NCPDP D.0	X	N/A	N/A
Implementation Acknowledgement	ASC X12N 999 Implementation Acknowledgement for Health Care Insurance	N/A	X	X (Long Term Claims Only)
Interchange Acknowledgement	ASC X12N TA1 Interchange Acknowledgement	X	X	X (Long Term Claims Only)

*These transaction types are returned by Gainwell Technologies to the provider and/or trading partner.

6.4 Electronic Remittance Advice

Overview

Providers submitting Connecticut Medical Assistance Program claims to Gainwell Technologies receive a semi-monthly report on processed claims. This report is known as a Remittance Advice (RA) and is accessed via a Web download. Electronic RAs allow for fast and accurate posting of Connecticut Medical Assistance Program payments.

Submission	About Electronic Remittance Advice
How to Request	<p>To request an electronic RA (ASC X12N 835 Health Care Claim Payment/Advice), providers or trading partners must complete the Trading Partner Agreement by accessing the Connecticut Medical Assistance Program Web site at www.ctdssmap.com. To complete the agreement on the Web:</p> <ol style="list-style-type: none"> 1. Click on the Trading Partner tab 2. Select Trading Partner Enrollment/Profile <p>Note: Paper Trading Partner Agreement forms are not accepted.</p> <p>The information collected for enrollment for the 835 Health Care Claim Payment/Advice is in accordance with Section 1104 of the Affordable Care Act and the CORE 382 ERA Enrollment Data Rule, available at http://www.caqh.org/ORMandate_EFT.php. An agreement must be completed for each provider enrolling for the 835 Health Care Claim Payment/Advice.</p> <p>Instructions for completing each field on the Web site can be found using the link below.</p> <p style="text-align: center;">ERA Enrollment Instructions</p>
Where to Submit	<p>When the Web enrollment/profile is completed, a trading partner ID and initial password will be issued. Two letters will be generated to the trading partner, one advising of the trading partner ID and another advising of the initial password (or PIN).</p>
When to Expect First Electronic RA	<p>Providers or trading partners can expect to download the first electronic RA from the Web approximately 30 days after the date of request.</p> <p>Please note that providers or trading partners are required to return an X12 999 Implementation Acknowledgment that specifies for each functional group of X12 835 transactions that the functional group was either accepted, accepted with errors, or rejected.</p>
How to Make Changes or Cancel	<p>If a provider or trading partner needs to make changes to or cancel an ERA enrollment (i.e. adding/deleting providers from</p>

Submission	About Electronic Remittance Advice
	their electronic RA), an updated Trading Partner Agreement should be submitted on the Secure Web site using the Trading Partner Enrollment/Profile menu item.

6.5 Electronic Data Interchange (EDI) Unit Services

Electronic Data Interchange (EDI) Unit

The Electronic Data Interchange (EDI) Unit provides technical assistance to those providers interested in using electronic data interchange methods. EDI representatives assist providers to complete the testing process and provide ongoing production support.

Gainwell Technologies
Provider Electronic Solutions

The Gainwell Technologies Provider Electronic Solutions software package allows all existing users to submit eligibility verifications and allows Long Term Care providers to submit claims and Paid Claim Adjustment Requests electronically through a Web interface.

Provider Web Site

The Provider Web site at www.ctdssmap.com provides access to self-service features for providers and trading partners. These services include eligibility verification, direct claims submission via the Web with a response returned to the user's Web browser, downloading of pertinent forms and remittance advices, online provider Enrollment/Re-enrollment Wizard, claims correction and access to pertinent client/program information. Reference Chapter 10 for information for more information on accessing the features available on this Web site.

Vendor Software

Providers who wish to have the electronic claim submission function incorporated into their vendor's software program can find the specifications at www.ncpdp.org for pharmacy claims or www.wpc-edi.com for all other transactions governed by HIPAA. These sites may also be accessed through links on the Connecticut Medical Assistance Program Web site at www.ctdssmap.com. Click on the Information tab, then click on the Links tab.

Manuals

Electronic claim submission instruction manuals specific to each claim type are available with Gainwell Technologies' free software packages. The Companion Guide is available on the Connecticut Medical Assistance Program Web site at www.ctdssmap.com, click on the Trading Partner tab, then click on the EDI tab.

Electronic Claims Submission (ECS) Testing and Certification	<p>Prior to approval for electronic claim submission, providers or trading partners must successfully complete the testing process and receive certification.</p> <ol style="list-style-type: none"> 1. Providers first complete and submit the on-line Trading Partner Enrollment Application, on the Public Web Site www.ctdssmap.com. Click on the Trading Partner from the Menu Bar at the top of the screen, then from the Drop Down menu click on Trading Partner Enrollment/Profile. 2. Upon submission of that on-line application, the trading partner is issued a trading partner identification number. 3. The trading partner then creates their Secure Web Portal account and submits a file to Gainwell Technologies with the correct Test indicator. The Trading Partner then must retrieve the resulting 999 Interchange Acknowledgement for the test submission and verify that the file passed compliance. A copy of the 999 must be faxed to the EDI unit at 877-413-4421. 4. Upon successful completion of the testing process, EDI notifies the provider and authorizes the trading partner identification number for Production electronic claim submission.
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Note: The National Provider identifier (NPI) is distinct from and should not be confused with the EDI trading partner identification number which a provider uses to submit claims electronically.

EDI Inquiries:	<p>To obtain Gainwell Technologies' Vendor Interface Specification, Companion Guide, or User Guide, providers should visit our Web site at www.ctdssmap.com and click on Trading Partner from the Menu Bar, then the EDI button from the Drop Down menu. In addition, providers may contact Gainwell Technologies' EDI Unit at 1-800-688-0503, between the hours of 8:00 a.m. – 5:00 p.m. Monday through Friday, excluding holidays.</p> <p>Providers are also offered a TDD/TTY number for assistance in obtaining necessary program information. The number is 1-866-604-3470.</p>
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Electronic Data Interchange Trading Partner Agreement Form

Providers or their trading partners are required to complete an on-line Electronic Data Interchange Trading Partner Agreement prior to submitting Connecticut Medical Assistance Program claims electronically. The Electronic Data Interchange Trading Partner Agreement is an agreement with the provider to submit electronic claims and eligibility transactions.

By signing this form, the provider agrees to all the terms and conditions of the agreement.

Submission	About the EDI Trading Partner Agreement Form
How to Complete the Form	<p>Providers or their trading partners must complete the form using the on-line Trading Partner Enrollment Application on the Public Web site www.ctdssmap.com. Click on Trading Partner from the Menu Bar, then Trading Partner Enrollment/Profile to complete and submit the application on-line to Gainwell Technologies.</p> <p>Providers are also offered a TDD/TTY number for assistance in obtaining necessary program information. The number is 1-866-604-3470.</p> <p>Note: Paper Trading Partner Agreement forms are not accepted.</p>