



5010 270/271 Companion Guide

Refers to the Implementation Guides
Based on X12 version 005010
Companion Guide Version Number: 1.3

March 25, 2021



Disclosure Statement

It is the sole responsibility of the provider/vendor to initiate a 270 Health Care Eligibility/Benefit Inquiry transaction. AulCare provides a 271 Health Care Eligibility/Benefit Information Response to a 270 inquiry. The information included in the 271 response file is not intended to provide a complete representation of all plan benefits, but rather to address the status of eligibility (active or inactive) and patient financial responsibility at the base contract amounts for the service types defined under CORE Phase I Rules on Eligibility and Benefits.

Health plans are dynamic; the data included in a 271 response file is deemed true and accurate only at the particular time of the transaction. Any questions regarding eligibility/benefit data should be directed to Customer Service at 330-363-6360.

Transaction log files are retained for a period of six months.

Submit data transmission problems to edisupport@aultcare.com as soon as possible. AulCare recommends by the end of the next business day.



Preface

This Companion Guide to the ASC X12N Implementation Guides adopted under HIPAA clarifies and specifies the data content being requested when data is transmitted electronically to AulCare. Transmissions based on this companion document, used in tandem with the X12N Implementation Guides, are compliant with both X12 syntax and those guides. This Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.



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1 Introduction

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 carries provisions for administrative simplification. This requires the Secretary of the Department of Health and Human Services (HHS) to adopt standards to support the electronic exchange of administrative and financial health care transactions primarily between health care providers and plans. HIPAA directs the Secretary to adopt standards for translations to enable health information to be exchanged electronically and to adopt specifications for implementing each standard.

HIPAA serves to:

- Create better access to health insurance
- Limit fraud and abuse
- Reduce administrative costs

Purpose of the Companion Guide

The HIPAA EDI Transaction Standard Companion Guide explains the procedures necessary for Trading Partners to transmit Electronic Data Interchange (EDI) transactions. Please see our website at www.aulthcare.com for the companion guide pertaining to the HIPAA EDI transaction set that meets your needs.

This Companion Guide is not intended to replace the X12N Implementation Guides; rather it is intended to be used in conjunction with them. Additionally, the Companion Guide is intended to convey information that is within the framework and structure of the X12N Implementation Guides and not to contradict or exceed them.

1.1. Scope

The scope of this Companion Guide is to specify the appropriate and recommended use of the 270/271 transaction sets where the 270 is the Health Care Eligibility/Benefit Inquiry and the 271 is the Health Care Eligibility/Benefit Information Response.

1.2. References

This document supplements the *X12N Implementation Guide 005010X279A1* adopted under HIPAA.

1.3. Additional Information

- Assumes the provider/vendor initiates a 270 inquiry transaction
- Assumes the provider/vendor has a Third Party Agreement on file with AultCare.

2 Getting Started

2.1 Working with AultCare

Questions related to HIPAA 270/271 Transactions should be emailed to edisupport@aultcare.com.

2.2 Trading Partner Registration

Providers that contract with a vendor to facilitate file transfer and processing are responsible for notifying AultCare of any change in vendor status (e.g. service transferring to a different vendor, vendor system changes, vendor system upgrades, etc.).

2.3 Certification and Testing Overview

The following procedures must be completed by providers/vendors prior to Implementing the 270 Health Care Eligibility/Benefit Inquiry.

3 Testing with the Payer

Testing with the payer is not required but is recommended. You must contact the payer prior to sending a 270 Health Care Eligibility/Benefit Inquiry.

4 Connectivity with the Payer / Communications

4.1 Process Flows

Register to become a trading partner. To complete this process, go to the following website to locate the Vendor/Affiliate Registration Guide.

<https://www.aultcare.com/hipaa>

During the registration process, you will complete a trading partner and non-disclosure agreement. Once this is completed, you will be provided a login and password for the test and production environments by a representative of the AultCare Information Systems Department.

The provider/vendor must be successfully sending 270 Health Care Eligibility/Benefit Inquiry files to be eligible to receive the 271 Health Care Eligibility/Benefit Response file.

4.2 Transmission Administrative Procedures

The provider/vendor must supply:

- Provider contact name, phone number, and email address
- Receiving Provider US Federal Tax ID
- Receiving Vendor (if applicable) US Federal Tax ID
- Interchange Code Qualifier will be FI, Federal Tax ID Number or XX, National Provider Identifier.

4.2.1 Re-transmission Procedures

Real Time

If a response is not received within 20 seconds, the provider's system should send a duplicate transaction no sooner than 90 seconds after the original attempt was sent.

If no response is received after the second attempt, the provider's system should submit no more than 5 duplicate transactions within the next 15 minutes.

If the additional attempts result in the same timeout termination, the provider should notify AultCare to determine if system availability problems exist or if there are known Internet traffic constraints causing the delay.

Batch

TA1 , 997 or 999 responses will be available to the submitter within one hour of receipt of the 270 batch inquiries. Maximum response time when processing in batch mode for the receipt of a 271 response to a 270 inquiry submitted by a provider by 8pm EST will be returned no later than 7am EST the following business day.

4.3 Communication Protocol Specifications

If a provider is using a vendor, the vendor tax id will be populated in the ISA receiver ID field. The provider tax id will be populated in the GS Application ID field.

If a provider is not using a vendor, the provider's tax id will be populated in both the ISA Receiver ID field and GS Application ID field.

4.4 Passwords

Provider/vendor must contact System Administrator to establish a password and user ID.

Please contact:
AultCare Information Systems
330-363-7495
AultCare-IS@aultcare.com

4.5 Downtime

SYSTEM MAINTENANCE

Scheduled Down-Time

Regular System Change Window (Routine)

- Every Tuesday, 9:00 pm – 11:00 pm EST, (2 hours)
- Every Thursday, 9:00 pm – 11:00 pm EST, (2 hours)

Standard system maintenance and changes include but are not limited to, cycling of services, deployment of code changes, modification of databases, purging of data, minor upgrade of software or hardware changes, implementation of edits, workflow changes, etc.

Standard system maintenance and changes will occur during this window.

Notification reminders of standard maintenance or changes will be communicated to the customer 24 hours in advance via email from the Support Team. This notification will include detailed information about the maintenance or change and will indicate whether or not availability or functionality will be impacted during the window. If the regular system change window is not used, a notification will not be provided.

Extended System Maintenance Window (Non-Routine)

- Every Weekend, Saturday 5:00 am – Monday 5:00 am EST, (48 Hours)

Extended system maintenance and changes include, but are not limited to, maintenance or changes expected to take longer than 2 hours and maintenance or non-routine types of changes considered non standard.

Extended system maintenance and major software/hardware changes will occur during this window. Notification of extended maintenance or changes will be communicated to the customer 1 week in advance via email from the Support Team. This notification will include detailed information about the maintenance or change and will indicate whether or not availability or functionality will be impacted during the window. If the regular system change window is not used, a notification will not be provided.

Unscheduled Down-Time

Emergency system maintenance and changes cannot be predicted and notification of downtime cannot always be provided in advance. In the event unscheduled downtime occurs, a notification will be provided to the customer via email within 1 hour of discovery of the downtime, or as far in advance as possible.

The initial notification will include as much information available about the problem and any changes needed. During unscheduled downtime, notifications will be provided to the customer via email periodically (as appropriate) to relay information on the status of the issue and to provide estimated time of resolution.

Upon the resolution of unscheduled downtime and the verification of system availability, notification will be provided via email to the customer and will indicate that the system is available.

Weekend / Holidays

The system will process real-time and batch request and responses on weekends and designated holidays with the exception of system unavailability as mentioned above.

4.6 Connecting to the AulCare Eligibility Web Service

There are two web methods within the real time eligibility web service. They both return the same data but differ in how they respond. In the “ProcessRequest” method, the response is sent back as an octet stream with the attached X12 message. The “ProcessRequestText” method relays the X12 message as text within a browser window. The following URLs are the locations of the production web methods.

<https://test.aulmedi.com> or <sftp://aulmedi.com>

<https://www.aulmedi.com> or <sftp://aulmedi.com>

Both web methods are available via HTTP requests. The service expects the following field names to be present (unless optional).

txtUser – Username

txtPass – Password

txtX12 – 270 passed as a string (optional, but if not used, X12 file will need to be passed)

txtDateTime – Date Time field (optional)

txtID – ID field (optional)

In addition to these 5 fields, the web service can access a file passed in through the HTTP post. This allows the user to upload a file rather than having to copy/paste x12 into an html form field. If the user sends both, the X12 received from the file takes priority over the data passed in the txtX12 field. The name of the uploaded file does not matter.



5 Contact Information

5.1 EDI Customer Service/Technical Assistance

Please contact:
AultCare Information Systems
330-363-7495
AultCare-IS@aultcare.com

5.2 Provider Service Number

Please contact Provider Services at **330-363-6360**

5.3 Applicable Websites / e-mail

www.aultcare.com

AultCare-IS@aultcare.com

6 Control Segments / Envelopes

The ISA and GS segments make up the header information for the 270/271 transactions.

6.1 ISA-IEA

Location	Data Element Description	Expected Value
ISA01	Authorization Information Qualifier	00
ISA02	Authorization Information	Blank
ISA03	Security Information Qualifier	00
ISA04	Security Information	Blank
ISA05	Interchange ID Qualifier	ZZ
ISA06	Interchange Sender ID	(270) Vendor/Provider Federal Tax ID (271) AultCare Federal Tax ID: 341488123
ISA07	Interchange ID Qualifier	ZZ
ISA08	Interchange Receiver ID	(270)Client Federal Tax ID (271) AultCare Fed Tax ID
ISA09	Interchange Date	YYMMDD
ISA10	Interchange Time	HHMM
ISA11	Interchange Control Standards Identifier	
ISA12	Interchange Control Version Number	005010
ISA13	Interchange Control Number	Increment by 1 with each submission
ISA14	Acknowledgment Requested	0 or 1
ISA15	Usage Indicator	T for Testing or P for Production
ISA16	Component Element Separator	Recommend colon (:)

Location	Data Element Description	Expected Value
IEA01	Number of Included Functional Groups	A count of functional groups
IEA02	Interchange Control Number	Provider assigned

Note: An asterisk (*) is recommended as the data element separator.

A tilde (~) is recommended as the segment terminator.

6.2 GS-GE

Location	Data Element Description	Expected Value
GS01	Functional Identifier Code	HS
GS02	Application Sender's Code	(270) Vendor/Provider Federal Tax ID (271) AultCare Federal Tax ID: 341488123
GS03	Application Receiver's Code	Client Federal Tax ID
GS04	Date	CCYYMMDD
GS05	Time	HHMM
GS06	Group Control Number	Provider Assigned
GS07	Responsible Agency Code	X
GS08	Version / Release / Industry Identifier Code	005010X279A1

Location	Data Element Description	Expected Value
GE01	Number of Transaction Sets Included	A count of transaction sets
GE02	Group Control Number	Provider assigned

6.3 ST-SE

Location	Data Element Description	Expected Value
ST01	Transaction Set Identifier Code	270 or 271
ST02	Transaction Set Control Number	Provider assigned

Location	Data Element Description	Expected Value
SE01	Number of Included Segments	A count of segments in transaction set
SE02	Transaction Set Control Number	Provider assigned

7 Payer Specific Business Rules and Limitations

The AultCare federal tax identification number 341488123 should be populated in the receiver ID of the 270 Health Care Eligibility/Benefit Inquiry.

8 Acknowledgements and/or Reports

8.1 Real Time Request Acknowledgements

Real time requests must include a single inquiry or submission (e.g. one eligibility inquiry to one information source for one patient). The response from the message receiver is either an error response or the corresponding X12 message response (e.g. a TA1, 997, 999, or 271).

8.1.1 Authorization Errors

If the username and/or password included in the request are not valid according to the message receiver, the message receiver will send back an HTTP 403 Forbidden error response with no data content.

8.1.2 Real Time Response

In response to a real time request, assuming that the message authorization passed, the receiver will respond with an HTTP 200 OK status code and the X12 data content.

8.1.3 Server Errors

It is possible that the HTTP server is not able to process a real time request. In this case, the message receiver will respond with a standard HTTP 5xx series error such as HTTP 500 Internal Server Error or HTTP 503 Service Unavailable. If a sender receives a response with this error code, they will need to resubmit the request at a later time because this indicates that the message receiver will never process this inquiry.

9 Trading Partner Agreements

9.1 Trading Partners

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

9.2 Trading Partner Agreements

Payers have EDI Trading Partner Agreements that accompany the standard implementation guide to ensure the integrity of the electronic transaction process. 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.

For example, a Trading Partner Agreement may specify among other things, the roles and responsibilities of each party to the agreement in conducting standard transactions.

10 Transaction Specific Information

Location	Data Element Description	Expected Value
2110C	Authorization or Benefit Information	1(active) or I (non-covered) for service type 88 (Pharmacy)
2110C	Service Type Code	1 Medical Care 30 Health Plan Benefit 33 Chiropractic 35 Dental 48 Hospital Inpatient 50 Hospital Outpatient 86 Emergency Services 88 Pharmacy 98 Professional (Physician) – Office visit AL Vision (Optometry) MH Mental Health UC Urgent Care

Appendices

A: Implementation Checklist

Contact the AultCare HIPAA 270/271 Transaction Coordinator to discuss implementing this new process.

AultCare Information Systems
330-363-7495
AultCare-IS@aultcare.com

Register online at www.aultcare.com to become a trading partner.

Obtain your test and production logins to the PCS System from the AultCare Information Systems Department.

Submit test files to assure your connectivity has been set up accordingly.

Submit production 270 HIPAA transactions to obtain 271 Response Files.

B: Business Scenarios

1. SUBSCRIBER INFORMATION	
Subscriber Name	Rolando A. Arrojo
Member ID	5643296
Address	1 Main St Suite 1
City	Nashville
State	TN
Zip	10234
Date of Birth	01/02/1971
Gender	Male
Provider Information	Test Provider

HEALTH PLAN INFORMATION	
Health Plan Name	Tennessee PCN
Health Plan #	2614153
Group #	19482002
Coverage Level	Family
Health Plan Begin Date	01-01-2006
Health Plan Coverage Status	Active
Annual Deductible Individual/Family	Individual In and Out of Network \$250 Family In and Out of Network \$500
Annual Remaining Deductible Individual/Family	Individual In and Out of Network \$250 Family In and Out of Network \$250
Professional Physician Office Visit	In-Network \$15 co-pay Primary Care Phys. \$30 co-pay Specialist Out-of-Network 20% co-insurance after deductible
Chiropractic	In-Network \$30 co-pay Out-of-Network 20% co-insurance after deductible
Inpatient Hospital Outpatient Hospital	In-Network 0% co-insurance after deductible Out-of-Network 20% co-insurance after deductible
Vision	Not covered
Pharmacy	Active or Not Covered
Dental	Multiple Benefits
Emergency Services	Multiple Benefits



C: Transmission Examples

270 Health Care Eligibility/Benefit Inquiry

ISA*00* *00* *ZZ*4137147 *ZZ*PLANA
*200513*1206*^*00501*999999999*0*T*:
GS*HS*4137147*341488123*20200513*120657*999999999*X*005010X279A1
ST*270*0001*005010X279A1
BHT*0022*13*1262636482*20200513*120657
HL*1**20*1
NM1*PR*2*PLANA*****PI*00999
HL*2*1*21*1
NM1*1P*2*TEST PROVIDER*****XX*123456789
HL*3*2*22*0
TRN*1*TEST*12345789*ADHOC
NM1*IL*1*ARROJO*ROLANDO*****MI*1234567890E
DMG*D8*19851007
DTP*291*D8*20200513
EQ*30
SE*13*0001
GE*1*999999999
IEA*1*999999999



271 Health Care Eligibility/Benefit Response

ISA*00* *00* *ZZ*PLANA *ZZ*4137147

*200513*1019**^*00501*999999999*0*T*:

GS*HB*PLANA*4137147*20200513*1019*1*X*005010X279A1

ST*271*0001*005010X279A1

BHT*0022*11*999999999*20200513*101912

HL*1**20*1

NM1*PR*2*PLANA CERTIFICATION PAYER*****PI*00999

HL*2*1*21*1

NM1*1P*2*TEST PROVIDER*****XX*1234567890

HL*3*2*22*0

TRN*2*TESTPROVIDER123456789*1234567890*ADHOC

NM1*IL*1*ARROJO*ROLANDO****MI*1234567890E

N3*123 MAIN STREET SW

N4*ALLIANCE*OH*44601

DMG*D8*19851007*M

DTP*291*RD8*20200101-99991231

EB*1*IND*30^1^88^UC*C1*TENNESSEE PCN*23*****N

EB*1*IND*30^1^88^UC*C1*TENNESSEE PCN*23*****Y

EB*C*FAM*33*C1*MANIPULATION THERAPY OON*23*30000*****N

EB*C*FAM*33*C1*MANIPULATION THERAPY OON*29*30000*****N

EB*1*IND*33*C1*MANIPULATION THERAPY OON*23*****N

EB*A*IND*33*C1*MANIPULATION THERAPY OON*23**50*****N

EB*C*IND*33*C1*MANIPULATION THERAPY OON*23*10000*****N

EB*C*IND*33*C1*MANIPULATION THERAPY OON*29*10000*****N

EB*1*IND*33*C1*MANIPULATION THERAPY IN*23*****Y

EB*A*IND*33*C1*MANIPULATION THERAPY IN*23**00*****Y

EB*B*IND*33*C1*MANIPULATION THERAPY IN*23*45*****Y

EB*I*IND*35^AL*C1*TENNESSEE PCN*23*****N

EB*I*IND*35^AL*C1*TENNESSEE PCN*23*****Y

EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY ANCILLARY OON*23*30000*****N

EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY OON*23*30000*****N

EB*C*FAM*47^50^MH*C1*OUTPATIENT FACILITY SERVICES OON*23*30000*****N

EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY ANCILLARY OON*29*30000*****N

EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY OON*29*30000*****N

EB*C*FAM*47^50^MH*C1*OUTPATIENT FACILITY SERVICES OON*29*30000*****N

EB*1*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY OON*23*****N

EB*1*IND*47^48^MH*C1*INPATIENT FACILITY OON*23*****N



EB*1*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES OON*23*****N
EB*A*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY OON*23** .50*****N
EB*A*IND*47^48^MH*C1*INPATIENT FACILITY OON*23** .50*****N
EB*A*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES OON*23** .50*****N
EB*B*IND*47^48^MH*C1*INPATIENT FACILITY OON*23*250*****N
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY OON*23*1000*****N
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY OON*23*1000*****N
EB*C*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES OON*23*1000*****N
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY OON*29*1000*****N
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY OON*29*1000*****N
EB*C*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES OON*29*1000*****N
EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY ANCILLARY IN*23*1200*****Y
EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY IN*23*1200*****Y
EB*C*FAM*47^50^MH*C1*OUTPATIENT FACILITY SERVICES IN*23*1200*****Y
EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY ANCILLARY IN*29*1200*****Y
EB*C*FAM*47^48^MH*C1*INPATIENT FACILITY IN*29*1200*****Y
EB*C*FAM*47^50^MH*C1*OUTPATIENT FACILITY SERVICES IN*29*1200*****Y
EB*1*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY IN*23*****Y
EB*1*IND*47^48^MH*C1*INPATIENT FACILITY IN*23*****Y
EB*1*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES IN*23*****Y
EB*A*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY IN*23** .20*****Y
EB*A*IND*47^48^MH*C1*INPATIENT FACILITY IN*23** .20*****Y
EB*A*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES IN*23** .20*****Y
EB*B*IND*47^48^MH*C1*INPATIENT FACILITY IN*23*250*****Y
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY IN*23*4000*****Y
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY IN*23*4000*****Y
EB*C*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES IN*23*4000*****Y
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY ANCILLARY IN*29*4000*****Y
EB*C*IND*47^48^MH*C1*INPATIENT FACILITY IN*29*4000*****Y
EB*C*IND*47^50^MH*C1*OUTPATIENT FACILITY SERVICES IN*29*4000*****Y
EB*1*IND*86*C1*EMERGENCY ROOM PHYSICIAN*23*****N
EB*A*IND*86*C1*EMERGENCY ROOM PHYSICIAN*23** .20*****N
EB*1*IND*86*C1*EMERGENCY ROOM PHYSICIAN*23*****Y
EB*A*IND*86*C1*EMERGENCY ROOM PHYSICIAN*23** .20*****Y
EB*C*FAM*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*23*30000*****N
EB*C*FAM*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*23*30000*****N
EB*C*FAM*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST OON*23*30000*****N
EB*C*FAM*98*C1*TELEMEDICINE OON*23*30000*****N
EB*C*FAM*98*C1*TELEMEDICINE W/GT OR GQ OON*23*30000*****N
EB*C*FAM*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*29*30000*****N



EB*C*FAM*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*29*30000*****N
EB*C*FAM*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST OON*29*30000*****N
EB*C*FAM*98*C1*TELEMEDICINE OON*29*30000*****N
EB*C*FAM*98*C1*TELEMEDICINE W/GT OR GQ OON*29*30000*****N
EB*1*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*23*****N
EB*1*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*23*****N
EB*1*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST OON*23*****N
EB*1*IND*98*C1*TELEMEDICINE OON*23*****N
EB*1*IND*98*C1*TELEMEDICINE W/GT OR GQ OON*23*****N
EB*A*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*23*.50*****N
EB*A*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*23*.50*****N
EB*A*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST OON*23*.50*****N
EB*A*IND*98*C1*TELEMEDICINE OON*23*.50*****N
EB*A*IND*98*C1*TELEMEDICINE W/GT OR GQ OON*23*.50*****N
EB*C*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*23*10000*****N
EB*C*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*23*10000*****N
EB*C*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST OON*23*10000*****N
EB*C*IND*98*C1*TELEMEDICINE OON*23*10000*****N
EB*C*IND*98*C1*TELEMEDICINE W/GT OR GQ OON*23*10000*****N
EB*C*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*29*10000*****N
EB*C*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*29*10000*****N
EB*C*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST OON*29*10000*****N
EB*C*IND*98*C1*TELEMEDICINE OON*29*10000*****N
EB*C*IND*98*C1*TELEMEDICINE W/GT OR GQ OON*29*10000*****N
EB*I*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(OVER 19)*23*****N
EB*I*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(UNDER 19)*23*****N
EB*1*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(OVER 19)*23*****Y
EB*1*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(UNDER 19)*23*****Y
EB*1*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST IN*23*****Y
EB*1*IND*98*C1*TELEMEDICINE IN*23*****Y
EB*1*IND*98*C1*TELEMEDICINE W/GT OR GQ IN*23*****Y
EB*A*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(OVER 19)*23*.00*****Y
EB*A*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(UNDER 19)*23*.00*****Y
EB*A*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST IN*23*.00*****Y
EB*A*IND*98*C1*TELEMEDICINE IN*23*.00*****Y
EB*A*IND*98*C1*TELEMEDICINE W/GT OR GQ IN*23*.00*****Y
EB*B*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP IN(OVER 19)*23*45*****Y
EB*B*IND*98*C1*OFFICE VISIT ILLNESS/INJURY - SPECIALIST IN*23*45*****Y
EB*B*IND*98*C1*TELEMEDICINE IN*23*20*****Y
EB*B*IND*98*C1*TELEMEDICINE W/GT OR GQ IN*23*20*****Y



EB*I*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(OVER 19)*23*****Y
 EB*I*IND*98^MH*C1*OFFICE VISIT ILLNESS/INJURY - PCP OON(UNDER 19)*23*****Y
 EB*C*FAM*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (OVER 19)*23*30000*****N
 EB*C*FAM*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (UNDER 19)*23*30000*****N
 EB*C*FAM*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (OVER 19)*29*30000*****N
 EB*C*FAM*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (UNDER 19)*29*30000*****N
 EB*1*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (OVER 19)*23*****N
 EB*1*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (UNDER 19)*23*****N
 EB*A*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (OVER 19)*23**50*****N
 EB*A*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (UNDER 19)*23**50*****N
 EB*C*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (OVER 19)*23*10000*****N
 EB*C*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (UNDER 19)*23*10000*****N
 EB*C*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (OVER 19)*29*10000*****N
 EB*C*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY OON (UNDER 19)*29*10000*****N
 EB*1*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY IN (OVER 19)*23*****Y
 EB*1*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY IN (UNDER 19)*23*****Y
 EB*A*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY IN (OVER 19)*23**00*****Y
 EB*A*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY IN (UNDER 19)*23**00*****Y
 EB*B*IND*MH*C1*OFFICE VISIT - PSYCHOTHERAPY IN (OVER 19)*23*45*****Y
 EB*A*IND*UC*C1*TENNESSEE PCN*23**00*****N
 EB*B*IND*UC*C1*TENNESSEE PCN*23*100*****N
 EB*A*IND*UC*C1*TENNESSEE PCN*23**00*****Y
 EB*B*IND*UC*C1*TENNESSEE PCN*23*100*****Y
 SE*138*0001
 GE*1*1
 IEA*1*999999999



D: Frequently Asked Question

1. Question: How do I contact AultCare?

Answer: Email AultCare Information Systems utilizing this email account aultcare-is@aultcare.com or call 330-363-7495

2. Question: Where can the 270/271 Companion Guide be located?

Answer: www.aultcare.com click on Provider Section, Click on Forms

3. Question: What product lines are covered?

Answer: AultCare Corporation, AultCare Health Insuring Company, AultCare Insurance Company and Aultra Administrative Group.

4. Question: Who do I contact with a transmission question?

Answer: edisupport@aultcare.com

5. Question: Who do I contact with a question regarding the member’s coverage?

Answer: Customer Service AultCare 330-363-6360

E. Change Summary

The information in this section lists the date and changes made to the AultCare 270/271 Companion Guide. Refer to the Data Requirements column within the document for details of the updates listed below.

Date	Updated Data Element	Data Requirements
11/26/2012	Initial document	
6/16/2020	2110C-Service Type Code	Added: MH-Mental Health, UC Urgent Care
10/23/2020	Frequently Asked Questions	Updated Product lines

10/23/2020	Frequently Asked Questions	Updated website address from www.Aultcas.com to reflect www.AultCare.com
10/23/2020	Purpose of the Companion Guide	Updated website address from www.Aultcas.com to reflect www.AultCare.com
10/23/2020	4 Connectivity with the Payer / Communications	Updated website address from www.Aultcas.com to reflect www.AultCare.com
10/23/2020	5.3 Applicable Websites / e-mail	Updated website address from www.Aultcas.com to reflect www.AultCare.com
2/25/2021	4.1 Process Flows	Updated the website to reflect https://www.aultcare.com/hipaa
3/25/2021	4.5 Downtime	Removed: Root cause information will be summarized and provided to the customer via email within 24 hours after any known unscheduled downtime.