



**Rhode Island HIPAA 5010
276/277 Health Care Claim
Status Request and
Response
Version 1.2**

Section 1 Introduction

Section 1104 of the Patient Protection and Affordable Care Act (ACA) establishes new requirements for administrative transactions that will improve the utility of the existing HIPAA transactions and reduce administrative costs.

1.1 Overview

ACA Section 1104 requires the Secretary of the Department of Health and Human Services (HHS) to adopt and regularly update standards, implementation specifications, and operating rules for the electronic exchange and use of health information for the purposes of financial and administrative transactions.

HHS then designated specific CORE rule to be those operating rules. The CAQH CORE Operating Rules defined a Connectivity/Security Rule, which is a Safe Harbor over the public Internet.

The transactions based on this companion guide must be used in tandem with 005010 ASC X12 TR 3 Implementation Guides.

Section 2 Getting Started

The RI Gainwell Safe Harbor connection is HDE (Health Direct Interchange). HDE will utilize the RI Medicaid trading partner ID.

This guide is a supplement to the Standard RI 5010 Companion Guide. Details relating to the topics below will contain references to that guide.

2.1 Trading Partner Registration

To enroll as a Trading Partner with Rhode Island Medicaid, go to [Trading Partner Enrollment \(riproviderportal.org\)](https://riproviderportal.org). Once you've been approved you will need to register your trading partner number [Registration Selector \(riproviderportal.org\)](https://riproviderportal.org).

For questions regarding the Trading Partner Agreement or EDI Registration, please email riediservices@gainwelltechnologies.com.

2.2 Acquire HDE Safe Harbor Access

All submitters wishing to submit transactions via the Safe Harbor HDE connection to Rhode Island Medicaid must have an active trading partner number to use the Safe Harbor connection for production. And is required to test using a trading partner number designated for testing only.

Section 3 Connection Details

3.1 RI Medicaid Real Time Supported Transactions

Rhode Island Medicaid supports real time 276/277 HIPAA X12 transactions over the Safe Harbor HDE connection.

Element	Value
Sender ID	HDE Authorized User Name RI-XXXXXXXXXX("RI-"followed by trading partner ID)
Receiver ID	RI Payer ID 056000522
Username	RI Medicaid Web username RI-XXXXXXXXXX("RI-"followed by trading partner ID)
Password	HDE provided password
Payload ID	Unique number per transaction (assigned by sender) ex: PAYLOAD - 1

3.2 Safe Harbor HDE URL and Authentication

A RI Medicaid Secure Web Portal Trading Partner username and password combination is required for Safe Harbor HDE authentication.

Safe Harbor URLs for HDE real time transactions will be exchanged through emails for production and test environments. Please email riediservices@gainwelltechnologies.com to get started.

If you intend to use MIME Multipart, please email riediservices@gainwelltechnologies.com.

3.3 Rules of Behavior

RI Medicaid Safe Harbor HDE users should submit transactions in plain upper-case text, and should not send executable (.exe), portable document format (.pdf) or any other file type which is not plain text.

- Sending the "&" character in a 276 request – will cause a syntax error – “Problems creating SAAJ object model.”
- We will not return any files or information to the trading partner mailbox for real-time transactions. During testing and when we go live, if you submit a non-compliant 276 file, a 999 rejection will be returned in real time. If the 277 transaction contains a structural error, a 999 rejection will be returned in real time.
- If the file cannot be processed within the required response time, HDE will send a 277 automated response with status error indicating they cannot return results as requested. Example below:

The STC segment from the 277 Real Time transaction will look like this:

```
STC*E1:0*20230726
```

```
E1 - Response not possible - System Status
0 - Cannot provide further status electronically
20230726 – the data of the real-time transaction
```

The above error can also appear if the trading partner user has been inactive for a period of time.

RI MMIS does not require a procedure code on all 837 claims. The 277 response reports service line detail, procedure code is required. Procedure code HC:NOS will be utilized for any service line detail that does not have a procedure code in RI MMIS claim details. Procedure code HC:NOS will not be updated in RI MMIS or MMIS database tables. It will only be used on 277 responses when applicable.

The 837 file allows for the prescription number to be sent in the 2410 service line detail loop and the 276 claims status search allows for prescription number to be sent at the 2200 claim header loop. As a result, prescription number cannot be used as search criteria because it does not apply to all details and header of the claim. We will not accept the prescription as an option to search on claims as noted below in the fields.

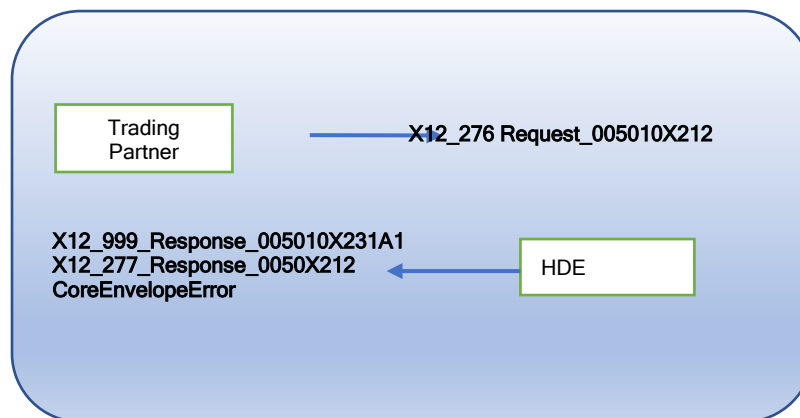
3.4 System Availability

The Gainwell Safe Harbor HDE connection will be available 24 hours a day, 7 days a week outside of the regularly scheduled system maintenance windows, unless there are unforeseen technical difficulties.

Section 4 Real Time Submission

CAQH CORE described a specific set of web services which can be used over the HDE connection. The Real Time Transaction operation will allow Trading Partners to submit individual 276 requests and receive the 277 results within twenty seconds.

Real Time Allowed Incoming/Outgoing Payload Types



4.1 Sample Envelope for Real Time Request using SOAP and WSDL

The following is a sample request for real-time in inbound translation:

```
<soap:Envelope xmlns:soap="http://www.w3.org/2003/05/soap-envelope"
xmlns:cor="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
  <soap:Header>
    <wsse:Security
      xmlns:wsse="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd"
      xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd">
      <wsse:UsernameToken wsu:Id="UsernameToken-1">
        <wsse:Username>RI-XXXXXXXXXX</wsse:Username>
        <wsse:Password
          Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-username-token-profile-
1.0#PasswordText">xxxxxxxxxxxx</wsse:Password>
        </wsse:UsernameToken>
      </wsse:Security>
    </soap:Header>
  <soap:Body>
```

```

<cor:COREEnvelopeRealTimeRequest>
  <PayloadType>X12_276_Request_005010X212</PayloadType>
  <ProcessingMode>RealTime</ProcessingMode>
  <PayloadID>PAYLOAD-1</PayloadID>
  <TimeStamp>2022-10-01T10:20:34Z</TimeStamp>
  <SenderID>RI-xxxxxxx</SenderID>
  <ReceiverID>056000522</ReceiverID>
  <CORERuleVersion>2.2.0</CORERuleVersion>
  <Payload> (this is where the 276 transaction is inserted)
</Payload>
</cor:COREEnvelopeRealTimeRequest>
</soap:Body>
</soap:Envelope>

```

4.2 Sample for Production Soap Password Reset

The Trading Partner will be responsible for updating their password (maximum password age 6 months).

Use Production URL received with email communication.

```

<soap:Envelope xmlns:soap="http://www.w3.org/2003/05/soap-envelope"
xmlns:gat="http://hde.oxisaas.com/schema">
  <soap:Header>
    <wsse:Security xmlns:wsse="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-
wssecurity-secext-1.0.xsd" xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-
wss-wssecurity-utility-1.0.xsd">
      <wsse:UsernameToken wsu:Id="UsernameToken-1">
        <wsse:Username>RI-TradingPartnerID</wsse:Username>
        <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-
username-token-profile-1.0#PasswordText">CurrentPassword</wsse:Password>
      </wsse:UsernameToken>
    </wsse:Security>
  </soap:Header>
  <soap:Body>
    <gat:changePassword>
      <oldPwd> CurrentPassword </oldPwd>
      <newPwd> NewPassword </newPwd>
    </gat:changePassword>
  </soap:Body>
</soap:Envelope>

```

Note that you should receive a “True” in the response as below.

```

Content-Type: application/xop+xml; charset=UTF-8; type="application/soap+xml" Content-
Transfer-Encoding: binary
Content-ID: <root.message@cxf.apache.org>
<soap:Envelope xmlns:soap="http://www.w3.org/2003/05/soap-envelope">
  <soap:Body>
    <ns3:changePasswordResponse xmlns:ns3="http://hde.oxisaas.com/schema"
xmlns:ns2="http://www.cagh.org/SOAP/WSDL/CORERule2.2.0.xsd">

```

```
<changePasswordReturn>true</changePasswordReturn>
</ns3:changePasswordResponse>
</soap:Body>
</soap:Envelope>
```

If you receive a “False”, the password has not changed. For example, if you try an update too far ahead of the password expiration.

(e.g. <changePasswordReturn>false</changePasswordReturn>)

If your request contains an incorrect old password, you will get a response similar to the following:

```
<soap:Envelope xmlns:soap="http://www.w3.org/2003/05/soap-envelope">
  <soap:Body>
    <soap:Fault>
      <soap:Code>
        <soap:Value>soap:Sender</soap:Value>
        <soap:Subcode>
          <soap:Value
xmlns:ns1="http://ws.apache.org/wss4j">ns1:SecurityError</soap:Value>
        </soap:Subcode>
      </soap:Code>
      <soap:Reason>
        <soap:Text xml:lang="en">A security error was encountered when verifying the
message</soap:Text>
      </soap:Reason>
    </soap:Fault>
  </soap:Body>
</soap:Envelope>
```

Section 5 Contact Information

For EDI support, please email riediservices@gainwelltechnologies.com.

276 Inbound Transaction

Loop ID	Reference	Name	Codes	Notes/Comments
	ISA	Interchange Control Header		
	ISA01	Authorization Information Qualifier	00	Populate with "00".
	ISA03	Security Information Qualifier	00	Populate with "00".
	ISA05	Interchange ID Qualifier	ZZ	Populate with "ZZ".
	ISA06	Interchange Sender ID		Populate with Trading Partner ID assigned by RI Medicaid. If testing this should be the trading partner for RI Medicaid Test environment.
	ISA07	Interchange ID Qualifier	ZZ	Populate with "ZZ".
	ISA08	Interchange Receiver ID		Rhode Island Medicaid expects 056000522.
	ISA14	Acknowledgment Requested	0	Populate with "0".
	ISA15	Interchange Usage Indicator	T, P	Make sure that the value is "T" for transactions in test environment, and "P" for transactions in the production environment.
	ISA16	Component Element Separator		RI expects ':' but is defined by the sender
Loop ID	Reference	Name	Codes	Notes/Comments
2100A	NM103	Name Last or Organization Name		Populate with "RI MEDICAID".
2100A	NM108	Identification Code Qualifier	PI	Populate with "PI".
2100A	NM109	Identification Code		Populate with '056000522'.

Loop ID	Reference	Name	Codes	Notes/Comments
2100B	NM1	Information Receiver Name		
2100B	NM102	Entity Type Qualifier		Rhode Island Medicaid is expecting 1 or 2
2100B	NM1	Information Receiver Name		
2100B	NM102	Entity Type Qualifier		Rhode Island Medicaid is expecting 1 or 2
2100B	NM103	Name Last or Organization Name		RI Medicaid expects last or organization name
2100B	NM104	Name First		When NM102 = 1 send first name and when the NM102 = 2 send organization name.
2100B	NM108	Identification Code Qualifier		Rhode Island Medicaid expects 46
2100B	NM109	Identification Code		Populate with senders trading partner number with RI Medicaid.
Loop ID	Reference	Name	Codes	Notes/Comments
2100C	NM1	Provider Name		
2100C	NM101	Entity Identifier Code		Populate with 1P
2100C	NM102	Entity Type Qualifier		Populate with 1 or 2
2100C	NM103	Name Last or Organization Name		RI Medicaid expects the billing provider last or organization name
2100C	NM104	Name First		When NM102 = 1 send first name
2100C	NM108	Identification Code Qualifier	XX, SV	Use "XX" for National Provider Identifier Use "SV" for 7-digit RI Medicaid Provider ID

2100C	NM109	Identification Code		Report 10-digit National Provider Identifier or Report 7-digit RI Medicaid Provider ID for atypical billing provider
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Loop ID	Reference	Name	Codes	Notes/Comments
2000D	HL	Subscriber Level		
2000D	HL04	Hierarchical child Code	0	Populate with "0". The subscriber is always the same as the patient for RI Medicaid.
2000D	DMG	Subscriber Demographic Information		
2000D	DMG01	Date Time Period Format Qualifier		
2000D	DMG02	Date Time Period		Populate with Date of Birth for RI Medicaid
Loop ID	Reference	Name	Codes	Notes/Comments
2100D	NM1	Subscriber Name		
2100D	NM101	Entity Identifier Code		Populate with IL for RI Medicaid
2100D	NM102	Entity Type Qualifier		Populate with 1 for RI Medicaid
2100D	NM103	Name Last Organization Name		Populate with members last name
2100D	NM104	Name First		Populate with members first name
2100D	NM108	Identification Code Qualifier	MI	Use MI for RI Medicaid member ID
2100D	NM109	Identification Code		Send the members RI Medicaid Identification number. RI is expecting 10 digits. Do not zero or space fill. Do not use special characters.

Loop ID	Reference	Name	Codes	Notes/Comments
2200D	TRN	Claim Status Tracking Number		
2200D	TRN01	Trace Type Code		Populate with 1
2200D	TRN02	Reference Identification		Populate with the value sent in the CLM01 of the 837 claims
2200D	REF	Payer Claim Control Number		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference Identification		When sending the ICN the REF01 must equal 1K.
2200D	REF	Institutional Bill Type Identification		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference Identification		When sending the bill type for the institutional claim the REF 01 equals BLT.
2200D	REF	Patient Control Number		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference Identification		When sending the patient account number from the CLM01 the REF01 equals EJ
2200D	REF	Pharmacy Prescription Number		
2200D	REF01	Reference Identification Qualifier		This field cannot be used to search on
2200D	REF02	Reference Identification		
2200D	AMT	Claim Submitted Charges		
2200D	AMT01	Amount Code Qualifier		
2200D	AMT02	Total Claim Charge Amount		When sending dollar amount the AMT01 = T3
2200D	DTP	Claim Service Date		
2200D	DTP01	Date/Time Qualifier		
2200D	DTP02	Date Time Period Format Qualifier		Populate with D8 or RD8 for date span
2200D	DTP03	Date Time Period		Dates of Service

277 Outbound Transaction

Loop ID	Reference	Name	Codes	Notes/Comments
	ISA	Interchange Control Header		
	ISA01	Authorization Information Qualifier	00	RI Medicaid will populate with "00"
	ISA03	Security Information Qualifier	00	RI Medicaid will populate with "00"
	ISA05	Interchange ID Qualifier	ZZ	RI Medicaid will populate with "ZZ"
	ISA06	Interchange Sender ID		Rhode Island Medicaid will send 056000522.
	ISA07	Interchange Receiver ID Qualifier	ZZ	RI Medicaid will populate with "ZZ"
	ISA08	Interchange Receiver ID		RI Medicaid will populate with the assigned Trading Partner ID
	ISA14	Acknowledgment Requested	0	RI Medicaid will populate with "0"
	ISA15	Usage Indicator	T, P	RI Medicaid will populate with "T" for responses from the test environment, and "P" for responses from the production environment.
Loop ID	Reference	Name	Codes	Notes/Comments
	GS	Functional Group Header		
	GS01	Functional Identifier Code	HN	RI Medicaid will populate with "HN"
	GS02	Application Sender's Code		RI Medicaid will populate with "056000522".
	GS03	Application Receiver's Code		RI Medicaid will populate with the senders Trading Partner ID (from the 276).

Loop ID	Reference	Name	Codes	Notes/Comments
2100A	NM1	Payer Name		
2100A	NM103	Name Last or Organization Name		RI Medicaid will populate with RI Medicaid.
2100A	NM108	Identification Code Qualifier	PI	RI Medicaid will populate with "PI"
2100A	NM109	Identification Code		RI Medicaid will populate with "056000522"
2100B	NM1	Information Receiver Name		
2100B	NM102	Entity Type Qualifier		RI Medicaid will populate with 1 or 2
2100B	NM103	Name Last or Organization Name		RI Medicaid will populate with 1 for person or 2 for non-person
2100B	NM104	Name First		If the NM102 qualifier = 1 populate with First Name
2100B	NM108	Identification Code Qualifier	46	RI Medicaid will populate qualifier "46"
2100B	NM109	Identification Code		RI Medicaid will report the Trading Partner ID of the entity who submitted the Claim Status Inquiry

Loop ID	Reference	Name	Codes	Notes/Comments
2100C	NM1	Provider Name		
2100C	NM101	Entity Identifier Code		RI Medicaid will populate with 1P
2100C	NM102	Entity Type Qualifier		RI Medicaid will populate with 1 or 2
2100C	NM103	Name Last or Organization Name		RI Medicaid will populate 1 for person or 2 for non-person
2100C	NM104	Name First		If the NM102 qualifier = 1 populate with First Name
2100C	NM108	Identification Code Qualifier	XX, SV	RI Medicaid will use "XX" when sending National Provider Identifier. RI Medicaid will use "SV" when sending RI Medicaid Provider Number (for atypical provider)
2100C	NM109	Identification Code		This field will contain the 10-digit National Provider Identifier. This field will contain the 7-digit RI Medicaid Provider Number for atypical provider (for atypical provider)
Loop ID	Reference	Name	Codes	Notes/Comments
2200C	STC	Provider Status Information		
2200C	STC01	HEALTH CLAIM STATUS		
2200C	STC01-1	Industry Code		If provider error(s) - 277 Category code is reported
2200C	STC01-2	Industry Code		If provider error(s) - 277 Status code is reported
2200C	STC01-3	Entity Identifier Code		If provider error – qualifier is '1P'
2200C	STC02	Date		If provider error(s) - today's date

Loop ID	Reference	Name	Codes	Notes/Comments
2100D	NM1	Subscriber Name		
2100D	NM101	Entity Identifier Code		
2100D	NM102	Entity Type Qualifier	1	Rhode Island Medicaid will use qualifier '1'
2100D	NM108	Identification Code Qualifier	MI	RI Medicaid will use qualifier 'MI'.
2100D	NM109	Identification Code		RI Medicaid will send the 10-digit Member Identification Number.
Loop ID	Reference	Name	Codes	Notes/Comments
2200D	TRN	Claim Status Tracking Number		The TRN segment is required when sending the STC segment of loop 2200D.
2200D	TRN01	Trace Type Code		
2200D	TRN02	Reference Identification		RI Medicaid will return the Trace Number from the Submitter's original 276 transaction. This is from the CLM01 segment of the 837 transaction.
2200D	STC	Claim Level Status Information		
2200D	STC01	HEALTH CARE CLAIM STATUS		
2200D	STC01-1	Health Care Claim Status Category Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	STC01-2	Status Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	STC01-3	Entity Identifier Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	STC02	Date		Rhode Island will return the adjudicated date (MMIS status date).
2200D	STC04	Monetary Amount		Billed amount of the original submitted charges
2200D	STC05	Monetary Amount		Paid amount of the claim
2200D	STC06	Adjudication Finalized Date		Paid Date of claim – check deposit date
2200D	STC08	Remittance Date		If applicable this would be the Payment Date (EFT Deposit Date)
2200D	STC09	Check Number		If applicable this would be the check number

2200D	STC10-1	Health Care Claim Status Category Code		
2200D	STC10-2	Status Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	STC10-3	Entity Identifier Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
Loop ID	Reference	Name	Codes	Notes/Comments
2200D	STC11-1	Health Care Claim Status Category Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	STC11-2	Status Code		Refer to the EOHHS website for the crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	STC11-3	Entity Identifier Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2200D	REF	Payer Claim Control Number		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference Identification		If the claim is found, RI Medicaid will return the ICN using qualifier 1K
2200D	REF	Institutional Bill Type Identification		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference Identification		If the claim is found, RI Medicaid will return the bill type using qualifier BLT
2200D	REF	Patient Control Number		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference		If the qualifier EJ if sent on the 276, RI Medicaid will return the patient

		Identification		account number
2200D	REF	Pharmacy Prescription Number		
2200D	REF01	Reference Identification Qualifier		
2200D	REF02	Reference Identification		This field cannot be used to search on
2100D	REF	Claim Identification Number for Clearinghouses and Other Transmission Intermediaries		
2200D	REF01	Reference Identification Qualifier		D9 qualifier
2200D	REF02	Reference Identification		If qualifier D9 and clearing house trace number is reported on the 276, it is required to be returned on the 277

Loop ID	Reference	Name	Codes	Notes/Comments
2200D	DTP	Claim Service Date		
2200D	DTP01	Date/Time Qualifier		472 qualifier
2200D	DTP02	Date Time Period Format Qualifier	RD8	RI Medicaid will use RD8
2220D	SVC	Service Line Information		
2220D	SV01	COMPOSITE MEDICAL PROCEDURE IDENTIFIER		
2220D	SVC01-1	Product/Service ID Qualifier	AD, HC, N4, NU	RI will return the appropriate qualifier.
2220D	SVC01-2	Product/Service ID		RI Medicaid will return the appropriate service code
2220D	SVC01-3	Procedure Modifier		If applicable RI Medicaid will return
2220D	SVC01-4	Procedure Modifier		If applicable RI Medicaid will return
2220D	SVC01-5	Procedure Modifier		If applicable RI Medicaid will return
2220D	SVC01-6	Procedure Modifier		If applicable RI Medicaid will return
2220D	SVC02	Monetary Amount		Claim detail billed amount
2220D	SVC03	Monetary Amount		Claim detail paid amount
2220D	SVC04	Product/Service ID		If applicable RI Medicaid will return the revenue code
2220D	SVC07	Quantity		RI Medicaid will return units of service
2220D	STC	Service Line Status Information		
2220D	STC01	Health Care Claim Status		
2220D	STC01-1	Industry Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edl
2220D	STC01-2	Industry Code		Refer to the EOHHS website crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edl
2220D	STC01-3	Entity Identifier Code		Refer to the EOHHS website crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edl
2220D	STC01-4	Code List Qualifier		Refer to the EOHHS website for

		Code		crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC02	Date		Rhode Island will return the adjudicated date (MMIS status date).

Loop ID	Reference	Name	Codes	Notes/Comments
2220D	STC10	Health care Claim Status		
2220D	STC10-1	Industry Code		
2220D	STC10-2	Industry Code		
2220D	STC10-3	Entity Identifier Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC10-4	Code List Qualifier Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC11	HEALTH CARE CLAIM STATUS		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC11-1	Industry Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC11-2	Industry Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC11-3	Entity Identifier Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi
2220D	STC11-4	Code List Qualifier Code		Refer to the EOHHS website for crosswalk. https://eohhs.ri.gov/providers-partners/billing-and-claims/electronic-data-interchange-edi

2220D	REF	Reference Identification		
2220D	REF01	Reference Identification Qualifier		
2220D	REF02	Line-Item Control Number		If qualifier FJ is used in search, we will return the patient account number.
2220D	DTP	Service Line Date		
2220D	DTP01	Date/Time Qualifier		Qualifier 472
2220D	DTP02	Date Time Period Format Qualifier		D8 and RD8
2220D	DTP03	Date Time Period		RI Medicaid will return the From and To dates

