



**Rhode Island HIPAA 5010 270/271**  
**Batch and Real Time**  
**Eligibility Request and Response**  
**Version 1.0**

## Section 1 Introduction

The purpose of this document is to provide the information necessary to submit batch or real time eligibility benefit inquiry to RI Medicaid.

MID is a required field in Loop 2100C. The MID must contain 10 digits, no hyphens, or alpha characters. Special, alpha characters and/or a blank field (in the 270 file) will cause the 271 Eligibility Response to fail. Meaning the 271 will not be returned to the trading partner mailbox.

Request can be made up to 12 months, prior to today through the current date, with a maximum 3-month date span.

RI Medicaid only accepts one set of Subscriber dates in loop 2100C. DTP segment in loop 2110C will be ignored.

When sending Dental eligibility request, please note that the eligibility is based on the request from date. For Vision Service Limits it's based on the date of request (today's date).

RI Medicaid is not responsible for reporting the financial responsibility for the Managed Care Programs. This must be obtained directly from the Health Plans.

### 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 to be used in conjunction with the TR 3 Notes.

### 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](mailto: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 270/271 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](mailto:riediservices@gainwelltechnologies.com) to get started.

If you intend to use MIME Multipart, please email [riediservices@gainwelltechnologies.com](mailto: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 270 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 270 file, a 999 rejection will be returned in real time. If the 271 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 271 automated response with status error indicating they cannot return results as requested. Example below:

AAA – Rejection segment

42 - Unable to Respond at Current Time

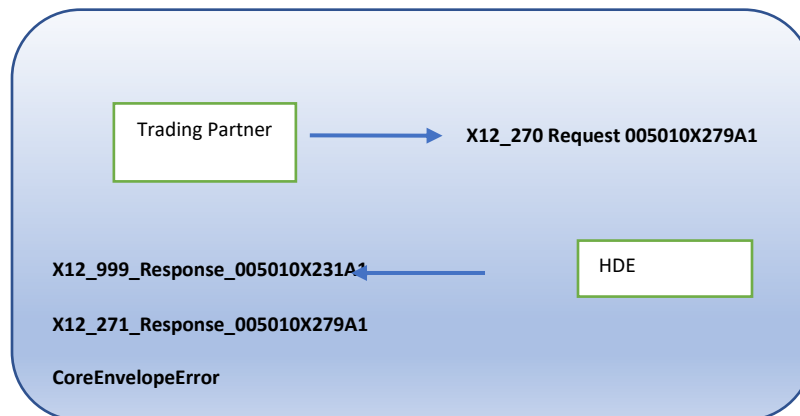
### 3.4 System Availability

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 270 requests and receive the 271 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 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-xxxxxxxxx</wsse:Username>
          <wsse:Password
            Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-username-token-profile-
1.0#PasswordText">xxxxxxxxxxx</wsse:Password>
```

```

        </wsse:UsernameToken>
    </wsse:Security>
</soap:Header>
<soap:Body>
    <cor:COREEnvelopeRealTimeRequest>
        <PayloadType>X12_270_Request_005010X279A1</PayloadType>
        <ProcessingMode>RealTime</ProcessingMode>
        <PayloadID>PAYLOAD-1</PayloadID>
        <TimeStamp>2023-10-01T10:20:34Z</TimeStamp>
        <SenderID>RI-xxxxxxxx</SenderID>
        <ReceiverID>056000522</ReceiverID>
        <CORERuleVersion>2.2.0</CORERuleVersion>
        <Payload>(this is where the 270 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:wssu="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-xxxxxxxx</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>
        <gat:changePassword>
            <oldPwd> xxxxxxxxxxxx </oldPwd>
            <newPwd> xxxxxxxxxxxx </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.caqh.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](mailto:riediservices@gainwelltechnologies.com)

## 005010X279A1 270 Eligibility Request

<b>PRE-HEADER</b>		
<b>Segment</b>	<b>ISA Interchange Control Segment</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
ISA01	Authorization Information Qualifier	Populate with '00'.
ISA03	Security Information Qualifier	Populate with '00'.
ISA05	Interchange ID qualifier	Populate with ZZ.
ISA06	Interchange sender ID	Populate with Trading Partner ID assigned by RI Medicaid.
ISA07	Interchange ID qualifier	Populate with 'ZZ'.
ISA08	Interchange Receiver ID	Populate with '056000522'.
ISA14	Acknowledgement Requested	Populate with '0'.
<b>Segment</b>	<b>GS Functional Group Header</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
GS02	Application Sender Code	Populate with Trading Partner ID.
GS03	Application Receiver Code	Populate with RI EIN '056000522'.
GS08	Version Identifier Code	Populate with '005010X279A1'.
<b>HEADER</b>		
<b>Segment</b>	<b>ST Transaction Set Header</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
ST03	Implementation Convention Reference	Populate with 005010X279A1.
<b>Segment</b>	<b>BHT Beginning of Hierarchical Transaction</b>	

Reference	Name	Rhode Island Requirements
BHT02	Transaction Set Purpose	Populate with '13'.

LOOP ID	2100A INFORMATION SOURCE NAME	
Segment	NM1 Information Source Name	
Reference	Name	Rhode Island Requirements
NM101	Entity Identifier Code	Populate with 'PR'.
NM102	Entity Type Qualifier	Populate with '1 or 2'.
NM103	Name Last or Organization Name	Populate with 'RI Medicaid'.
NM108	Identification Code Qualifier	Populate with qualifier 'FI' for RI Medicaid.
NM109	Identification Code	Populate with RI EIN '056000522'.
Segment	NM1 Information Receiver Name	
Reference	Name	Rhode Island Requirements
NM101	Entity Identifier Code	Populate with '1P'.
NM108	Identification code Qualifier	Populate with 'XX' if provider has an NPI. Populate with 'SV' if provider does not have an NPI (Atypical Provider).
NM109	Identification Code	Populate with 10-digit NPI if the above qualifier is 'XX'. Populate with 7-digit RI legacy ID if the above qualifier is 'SV'.
Segment	REF Information Receiver Additional Identification	
Reference	Name	Rhode Island Requirements
REF01	Reference Identification Qualifier	Populate with 'EO'.



REF02	Reference Identification	Populate with Trading Partner ID assigned by RI Medicaid.
<b>Segment</b>	<b>Information Receiver Provider Information</b>	
PRV02	Reference Identification Qualifier	Populate with 'PXC'.
<b>LOOP ID</b>	<b>2100A INFORMATION SOURCE NAME</b>	
PRV03	Reference Identification	Use Taxonomy number to identify a specific provider type who may have multiple legacy ID's associated to one NPI.
<b>Segment</b>	<b>NM1 Subscriber Name</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
NM108	Identification Code Qualifier	Populate with 'MI'.
NM109	Identification Code	<b>RI Medicaid requires 10 numeric characters for the Rhode Island Medicaid Recipient Identification number. Failure to send 10 digits will cause the 271 file to fail. Meaning the 271 will not be returned to the trading partner mailbox.</b>
<b>Segment</b>	<b>REF Subscriber Additional Identification</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
REF01	Reference Identification Code Qualifier	Populate with 'EJ'.
REF02	Reference Identification	Populate with Provider Patient Account Number.
<b>Segment</b>	<b>DTP Subscriber Date</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
DTP01	Date/Time Qualifier	Populate with '291'.
<b>Segment</b>	<b>EQ Subscriber Eligibility or Benefit Inquiry Information</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
EQ01	Service Type Code	Populate with '30' for Generic request.

## 005010X279A1 271 Eligibility Response

The purpose of this section is to provide the information that will be sent electronically within the eligibility benefit response from RI Medicaid.

If the 270 file contains a blank or nonnumeric field for Loop 2100C NM109 field, the 271 will fail and a 999 rejection will be returned to the trading partner mailbox. Please make sure to confirm your 270 file contains numbers in Loop 2100C NM109.

<b>PRE-HEADER</b>		
<b>Segment</b>	<b>ISA Interchange Control Header</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
ISA01	Authorization Information Qualifier	Populate with '00'.
ISA03	Security Information Qualifier	Populate with '00'.
ISA05	Interchange ID Qualifier	Populate with 'ZZ'.
ISA06	Interchange Sender ID	RI Medicaid EIN: '056000522'
ISA07	Interchange ID Qualifier	Populate with 'ZZ'.
ISA08	Interchange Receiver ID	Populate with Trading Partner ID assigned by RI Medicaid.
ISA14	Acknowledgement Requested	Populate with '0'.
<b>Segment</b>	<b>GS Functional Group Header</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
GS02	Application Sender Code	RI Medicaid EIN: '056000522'
GS03	Application Receiver Code	Populate with Trading Partner ID assigned by RI Medicaid.
GS08	Version Identifier Code	Populate with '005010X279A1'.
<b>Segment</b>	<b>BHT Beginning of Hierarchical Transaction</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
BHT02	Transaction Set Purpose Code	Populate with '11'.

<b>LOOP ID</b>	<b>2100A INFORMATION SOURCE NAME</b>	
<b>Segment</b>	<b>NM1 Information Source Name</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
NM101	Entity Identifier Code	Populate with 'PR'.
NM102	Entity Type Qualifier	Populate with '1' or '2'.
NM103	Name Last or Organization name	Populate with 'RI Medicaid Title XIX'.
NM108	Identification Code Qualifier	Populate with 'FI'.
NM109	Identification Code	Populate with '056000522'.
<b>Segment</b>	<b>NM1 Information Receiver Name</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
NM101	Entity Identifier Code	Populate with '1P'.
NM102	Entity Type Qualifier	Populate with '1 or 2'.
NM108	Identification Code Qualifier	Populate with 'XX' if provider has an NPI.  Populate with 'SV' if provider does not have an NPI (Atypical Provider).
NM109	Identification Code	Populate with 10-digit NPI if the above qualifier is 'XX'.  Populate with 7-digit RI legacy ID if the above qualifier is 'SV'.
<b>Segment</b>	<b>REF Information Receiver Additional Identification</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
REF01	Reference Identification Code Qualifier	Populate with 'EO'.
REF02	Reference Identification	Populate with submitter's Trading Partner ID number.
<b>Segment</b>	<b>Information Receiver Name</b>	<b>Information Receiver Provider Information</b>
PRV01	Provider Code	Will Populate with BI for Billing

<b>LOOP ID</b>	<b>2100A INFORMATION SOURCE NAME</b>	
PRV02	PXC	Will populate with Health Care Provider Taxonomy Code if the 270 contained 2100B PRV.
<b>Segment</b>	<b>TRN Subscriber Trace Number</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
TRN01	Trace Type Code	RI Medicaid will pass back all TRN segments we get. There could be one from the provider, plus one from a clearinghouse. We will add an additional TRN with our Authorization Code. The exception to this rule is, when a provider level exists in loops 2000A, 2100A and 2100B, we <b>will not</b> return the trace number.
TRN03	Trace Assigning Entity Identifier	RI Medicaid will use "056000522" as its Trace Assigning Entity identifier.
<b>Segment</b>	<b>NM1 Subscriber Name</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
NM102	Entity Type Qualifier	Populate with '1'.
NM108	Identification Code Qualifier	Populate with 'MI'.
NM109	Identification Code	Rhode Island will return 10-digit Medicaid ID (MID)
<b>Segment</b>	<b>REF Subscriber Additional Identification</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
REF01	Reference Identification Qualifier	Populate with 'EJ'.
REF02	Reference Identification	Populate with account number if submitted on 270
<b>Segment</b>	<b>Subscriber Date</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
DTP01	Date Time Qualifier	Populate with 291

<b>LOOP ID</b>	<b>2110C SUBSCRIBER ELIGIBILITY OR BENEFIT INFO</b>	
<b>Segment</b>	<b>EB Subscriber Eligibility or Benefit Information</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
EB01	Eligibility or Benefit Code	Populate with '1', 'A', 'B', 'C','N','F','R' and 'X'.
EB02	Coverage Level Code	Populate with 'IND'
EB03	Service Type Code	RI Medicaid will return information corresponding to the Service Type code used from the 270 transaction
EB05	Plan coverage	Benefit Plan Name
<b>Segment</b>	<b>REF Subscriber Additional Identification</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
REF01	Reference Identification Qualifier	Populate with 'IG'
REF02	Reference Identification	Populate with group or policy number of third-party liability
<b>Segment</b>	<b>DTP Subscriber Eligibility/Benefit Date</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
DTP01	Date Time Qualifier	Populate with '291' or '307'.
<b>Segment</b>	<b>MSG Message Text</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
MSG01	Free Form Message Text	RI Medicaid may use this field to provide clarification and/or additional instructions. May be reported when no STCs can be returned.
<b>Segment</b>	<b>Subscriber Benefit Related Entity Name</b>	
<b>Reference</b>	<b>Name</b>	<b>Rhode Island Requirements</b>
NM101	Entity Identification Code	Populate with '1P' or 'PR'.
NM102	Entity Type Qualifier	Populate with '1' or '2'.