HIPAA TRANSACTION STANDALD COMPANION GUIDE

DECEMBER 31 2015 V2.0

Refers to the Implementation Guides Based on ASC X12 version 005010 Real-Time Eligibility, Claim Status, Referral
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PREFACE

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Change Healthcare. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The 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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<td>37</td>
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<td>Incorrect PayloadID</td>
<td>39</td>
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</tbody>
</table>
1 INTRODUCTION

This section describes how ASC X12N Implementation Guides (IGs) adopted under HIPAA will be detailed with the use of a table. The tables contain a row for each segment that Change Healthcare has something additional, over and above, the information in the IGs. That information can:

1. Limit the repeat of loops, or segments
2. Limit the length of a simple data element
3. Specify a sub-set of the IGs internal code listings
4. Clarify the use of loops, segments, composite and simple data elements
5. Any other information tied directly to a loop, segment, composite or simple data element pertinent to trading electronically with Change Healthcare.

In addition to the row for each segment, one or more additional rows are used to describe Change Healthcare’s usage for composite and simple data elements and for any other information. Notes and comments should be placed at the deepest level of detail. For example, a note about a code value should be placed on a row specifically for that code value, not in a general note about the segment.

The following example table specifies the columns and suggested use of some rows for the detailed description of the transaction set companion guides. For more details, please see the Transaction Specific Information section.

<table>
<thead>
<tr>
<th>Page #</th>
<th>Loop ID</th>
<th>Reference</th>
<th>Name</th>
<th>Codes</th>
<th>Length</th>
<th>Notes/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>193</td>
<td>2100C</td>
<td>NM1</td>
<td>Subscriber Name</td>
<td></td>
<td></td>
<td>This type of row always exists to indicate that a new segment has begun. It is always shaded at 10% and notes or comment about the segment itself goes in this cell.</td>
</tr>
<tr>
<td>195</td>
<td>2100C</td>
<td>NM109</td>
<td>Subscriber Primary Identifier</td>
<td></td>
<td>15</td>
<td>This type of row exists to limit the length of the specified data element.</td>
</tr>
<tr>
<td>196</td>
<td>2100C</td>
<td>REF</td>
<td>Subscriber Additional Identification</td>
<td></td>
<td></td>
<td>These are the only codes transmitted by Change Healthcare.</td>
</tr>
<tr>
<td>197</td>
<td>2100C</td>
<td>REF01</td>
<td>Reference Identification Qualifier</td>
<td>18, 49, 6P, HJ, N6</td>
<td></td>
<td>This type of row exists when a note for a particular code value is required. For example, this note may say that value N6 is the default. Not populating the first 3 columns makes it clear that the code value belongs to the row immediately above it.</td>
</tr>
<tr>
<td>218</td>
<td>2110C</td>
<td>EB</td>
<td>Subscriber Eligibility or Benefit Information</td>
<td></td>
<td></td>
<td>This row illustrates how to indicate a component data element in the Reference column and also how to specify that only one code value is applicable.</td>
</tr>
<tr>
<td>231</td>
<td>2110C</td>
<td>EB13-1</td>
<td>Product/Service ID Qualifier</td>
<td>AD</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SCOPE

This companion guide is intended for Trading Partners trading ASC/X12N 005010 transactions with Change Healthcare.

The purpose of this guide is to convey the information needed to commence and maintain communication exchange with Change Healthcare’s Real-Time Exchange Services, for the purpose of conducting real-time X12N/005010 Eligibility/Benefit Inquiry and Response, Claim Status Request and Response, and Health Care Services Request for Review and Response transactions.

This guide does not contain individual payer specifications.

This guide is intended to supplement information from the ASC X12 Technical Reports Type 3 (TR3s).

OVERVIEW

This guide is composed of the following sections:

- Section 1  Introduction: Scope, overview, and related references.
- Section 2  Getting Started: How to interact with Change Healthcare’s implementation team, how to register as a trading partner and complete payer enrollment, and an overview of testing and certification.
- Section 3  Testing with Change Healthcare: details about the testing and certifying process.
- Section 4  Connectivity with Change Healthcare/Communications: process flows, transmission administrative procedures, communication protocols, security protocols, and passwords.
- Section 5  Contact Information: How to get help.
- Section 6  Control Segments/Envelopes: ISA/ISE, GS/GE, and ST/SE values specific to Change Healthcare.
- Section 8  Acknowledgements and Reports: Information about Change Healthcare's use of acknowledgements and reports.
- Section 9  Trading Partner Agreements: needed instructions regarding agreements that must be made between trading partners.
- Section 10 Transaction Specific Information: general supplemental instructions for each of the HIPAA-adopted transaction types.
REFERENCES

ASC X12 Technical Reports Type 3 (TR3s)
ASC X12 publishes implementation guides, known as Technical Reports Type 3 (TR3s), which define the data contents and compliance requirements for the health care implementation of the ASC X12N/005010 transaction sets. Following are the TR3s referenced in this guide:

- ASC X12N/005010X279 Health Care Eligibility Benefit Inquiry and Response (270/271) and Errata 1, hereinafter 005010X279A1 TR3s.
- ASC X12N/005010X212 Health Care Claim Status Request and Response (276/277), Errata 1, and Errata 2, hereinafter 005010X212 TR3s.
- ASC X12N/005010X216 Health Care Services Review Notification and Acknowledgment (278), hereinafter 005010X216 TR3.
- ASC X12N/005010X217 Health Care Services Review – Request for Review and Response (278), Errata 1, and Errata 2, hereinafter 005010X217 TR3s.

You are expected to comply with the requirements set forth in the TR3s. You can purchase these guides from the ASC X12 store at [http://store.x12.org/](http://store.x12.org/) or from Washington Publishing Company ([http://www.wpc-edi.com](http://www.wpc-edi.com)). The TR3s are copyrighted.

The following materials complete the Standard Companion Guide set. Companion Guides are updated twice per month. They are available on ON24/7. You will be given access to On24/7 as a part of the implementation process.

- **X12 Submitter 005010 Transaction Instruction Portfolio**: This pdf portfolio contains the individual 005010 payer instruction tables, which define individual payer requirements for the X12N transaction sets supported via Change Healthcare’s Real-Time Exchange Services.

- **X12 Submitter Additional Reference Tables**: This portfolio contains the following reference tables:
  - Payer ID/GS02 Cross-Reference
  - MRT ID/Batch ID Cross-Reference
  - Payer Lines of Business
  - Blue Exchange Access
Change Healthcare Publications—Vendor Testing Manuals

The Vendor Testing Manuals provide the test scenarios available for certifying with Change Healthcare. The following publications are available and will be provided to you when you are ready to certify.


Change Healthcare Web Resources

- Payer List: The payer list at [www.emdeon.com/payerlists/](http://www.emdeon.com/payerlists/) provides information about the payers Change Healthcare supports, including the payer ID and the payer’s enrollment requirements. From the Payer List link given above, select Medical/Hospital/Dental Payers, then the Eligibility, Claim Status, & Referrals tab.
- Enrollment/Registration Information: For enrollment forms and instructions, see [www.emdeon.com/enrollment](http://www.emdeon.com/enrollment).

ADDITIONAL INFORMATION

A Trading Partner has one of the following business relationships with Change Healthcare:

- **Business Partner.** The Business Partner sells its own front-end products, such as POS terminals or practice management software, and contracts with Change Healthcare for connectivity to payers. The Business Partner’s individual product installations can send requests directly to Change Healthcare.

- **Host-to-Host Partner:** The Host-to-Host Partner is typically a facility, such as a hospital, with a large-scale computer system that communicates directly with Change Healthcare. The Host-to-Host Trading Partner does not sell products or data access. Instead, the Host-to-Host Trading Partner is enhancing its own internal systems.

This Companion Guide assumes that you, the reader, are a representative of the Trading Partner, and that as such, you understand basic X12 structure, looping, and standard data requirements as set forth in the TR3 for each transaction set you wish to exchange.

This Companion Guide also assumes that:

- You have a real-time EDI interface that supports the transaction sets the Trading Partner wishes to exchange.
- You have resources to develop a connection between your interface and Change Healthcare.
2 GETTING STARTED

WORKING WITH CHANGE HEALTHCARE

Sales Contract

Change Healthcare will enter into a written agreement with your organization as a part of the sales contract. Change Healthcare will provide you with appropriate information about fee schedules, the various billing options, invoicing procedures, and wholesale vs. commission arrangements.

Non-Disclosure Agreement

A signed Non-Disclosure Agreement (NDA) is required before any exchange of Change Healthcare proprietary information can occur (e.g., database specifications, layouts, formats).

Implementation

Once the contract and non-disclosure agreement have been signed by your organization and Change Healthcare, implementation can begin. Your sales representative will set up a record for your organization in Change Healthcare’s customer database, which will trigger an initial conference call between you and your Implementation Coordinator at Change Healthcare. The Implementation Coordinator will facilitate the implementation process and will be your primary contact during this process.

The Implementation Coordinator and the Trading Partner will establish a schedule of conference calls. The preferred conference call schedule is once per week until implementation of your payer connections is complete. After implementation is complete, conference calls may proceed on a monthly or as-needed basis.

The Implementation Coordinator will provide you with the following:

- X12 Submitter companion guides, including this guide, the Transaction Instruction portfolio for each transaction, and the additional reference.
- TPG number and password.
- Payer IDs for testing and certification.
- Enrollment forms as needed.
- Production interchange sender IDs and passwords, once assigned.

Connectivity

Connectivity will be addressed during the scheduled weekly conference calls. Your organization will provide technical resources who will work directly with the communications specialists at Change Healthcare to establish the physical connection. The Implementation Coordinator will not be directly involved in setting up the physical connection, but will facilitate the process and will be available to address issues that may arise during connectivity implementation.
Transaction Development and Testing

Your organization is responsible for programming and coding per the specifications provided by Change Healthcare in the individual Payer Instruction Tables, which are distributed as a part of the X12 Submitter 005010 Transaction Instruction Portfolio. These guides will be distributed to you once your organization has signed the Non-Disclosure Agreement, at the beginning of the implementation process. The X12 Submitter 005010 Transaction Instruction Portfolio is updated twice per month and is posted on ON24/7.

TRADING PARTNER REGISTRATION

Trading Partner registration is required to set up the Trading Partner’s systems(s) with access to payers and transactions. Registration consists of two distinct processes:

- Registration with Change Healthcare.
- Payer enrollment, when required by the payer.

Registration with Change Healthcare

Change Healthcare will enter into a written agreement with your organization as a part of the sales contract. Change Healthcare will provide you with appropriate information about fee schedules, the various billing options, invoicing procedures, and wholesale vs. commission arrangements.

The following registration options are available.

- Registering with a site-specific TPG number.
- Registering with a single TPG number.

Site-Specific TPG Numbers

You can opt to enroll each of your sites under an individual TPG. A site can be one of your customers, if you are a Business Partner, or a specific department or division, if you are a Host-to-Host facility.

In this situation, your Implementation Coordinator will assist you in completing a Real Time Eligibility Provider Setup Form for each site.

Once implementation is complete, complete an Change Healthcare Eligibility Provider Setup Form whenever you want to do the following:

- Add a site.
- Give an existing site access to additional payers.

The Real Time Eligibility Provider Setup Form is available at www.emdeon.com/resourcelibrary/#119.

When you have completed the setup form, scan and email it to rtenrollment@changehealthcare.com or fax it to 615-885-3713.
Single TPG Number

You can opt to enroll with a single TPG number. In this situation, your Implementation Coordinator will assist you in completing one Real Time Eligibility Provider Setup Form.

Once implementation is complete, complete a Real Time Eligibility Provider Setup Form whenever you want to access additional payers. The Real Time Eligibility Provider Setup Form is available at www.emdeon.com/resourcelibrary/#119.

When you have completed the setup form, scan and email it to rtenrollment@changehealthcare.com or fax it to 615-885-3713.

Payer Enrollment

Some payers require provider enrollment in addition to enrollment with Change Healthcare. To determine whether a payer requires enrollment, see the Change Healthcare payer list at www.com/payerlists/

During implementation, your Implementation Coordinator will assist you in completing the forms required for payer enrollment.

Once implementation is complete, follow the procedures described in Change Healthcare Registration above. In addition to the Real Time Eligibility Provider Setup Form, complete and include the payer-specific enrollment form for the payer to whom you wish to connect. Payer enrollment forms are located at http://www.emdeon.com/resourcelibrary/#120#261.

- If you have implemented under site-specific TPG NUMBERS, each of your sites must complete a payer enrollment form for the requested payer.
- If you have implemented under a single TPG NUMBER, you need only to complete a single payer enrollment form for the requested payer.

When you have completed the setup form, scan and email it to rtenrollment@changehealthcare.com or fax it to 615-885-3713.

CERTIFICATION AND TESTING OVERVIEW

The testing and certifying process involves the following activities:

- Establishing communication with Change Healthcare.
- Building properly-formatted and compliant transactions and verifying with a compliance checker, such as Edifecs®.
- Certifying individual transactions using Change Healthcare’s Certification Payer, a prototypical payer database hosted by Change Healthcare.
- Implement individual payer transactions. It is recommended that submitters test payer transactions in production prior to full deployment.
3 TESTING WITH CHANGE HEALTHCARE

Before you can test with Change Healthcare, the following must first be accomplished:

- You must have established connectivity with Change Healthcare’s Real-Time Exchange Services. The Implementation Coordinator will work with you to facilitate the setup and testing of connectivity and communications.

- You are responsible for developing HIPAA and ASC/X12-compliant transaction sets. You can begin to develop transaction sets before connectivity with Change Healthcare is established.

It is strongly recommended that you check your transactions for compliance to 005010 standards using a compliance checker. Change Healthcare has partnered with Edifecs for this purpose and will activate an Edifecs account for your use. If you need assistance with your Edifecs account, your Implementation Coordinator can assist you; send questions to 5010submitterRTtesting@changehealthcare.com. If you do not wish to use Edifecs, you can use your preferred compliance checker.

TESTING WITH CHANGE HEALTHCARE’S CERTIFICATION PAYER

Once you have verified the transaction formats using Edifecs or your preferred compliance checker and have established connectivity, you are ready to certify with Change Healthcare. To certify, you will exchange transactions using Change Healthcare’s Certification Payer, a prototypical payer database hosted by Change Healthcare for testing and certification purposes. Your Implementation Coordinator will provide you with the Vendor Testing Manual for each transaction type. These publications contain test scenarios.

IMPLEMENTING PAYER TRANSACTIONS

To implement payer transactions, use the individual Payer Instruction Tables provided in the X12 Submitter 005010 Transaction Instruction Portfolio.

It is recommended that you test transactions in production prior to full deployment. Your Change Healthcare Implementation Coordinator can assist you with this process.

Note: Change Healthcare does not have access to payer test data.
4 CONNECTIVITY WITH CHANGE HEALTHCARE / COMMUNICATIONS

PROCESS FLOWS

TRANSMISSION ADMINISTRATIVE PROCEDURES

The Real-Time Exchange Services at Change Healthcare are available 24/7. Availability of individual payers is determined by the payers’ maintenance schedules. For a schedule of payer downtimes, see the Payer Maintenance Schedule at www.emdeon.com/resourcelibrary/#84#247.

Payers may alter their maintenance windows at any time without notifying Change Healthcare. Payers with no downtime information have not provided Change Healthcare with this information. The Payer Maintenance Schedule is provided for guidance when researching the possible cause of a payer’s inability to respond at a given time.
Error Messages

Warp will use one of the standard HTTP status codes listed below for each response.

- **HTTP/1.0 200 OK**
  The transaction was submitted to the data center and a response was returned to Warp.

- **HTTP/1.0 400 Bad Request**
  There was a problem with the request or the protocol-specific wrapper in which it was sent (corresponds to proprietary error SS0039).

- **HTTP/1.0 403 Forbidden**
  The submitted terminal ID and/or password were invalid.

- **HTTP/1.0 500 Internal Server Error**
  Warp experienced an internal problem. Please submit the transaction again (corresponds to proprietary error SS0042).

- **HTTP/1.0 503 Service Unavailable**
  Warp is unable to process the request, for one of several reasons (corresponds to proprietary errors SS0037, SS0038, and SS0040).

- **HTTP/1.0 504 Gateway Timeout**
  Warp failed to receive a response within the timeout period configured for the connection (corresponds to proprietary errors SS0034 and SS0036).

RETRANSMISSION PROCEDURES

Change Healthcare’s Real-Time Exchange Services do not perform re-transmissions. It is the Trading Partner’s responsibility to resubmit.

COMMUNICATION PROTOCOL SPECIFICATIONS

Change Healthcare has provided connectivity that complies with the CORE Safe Harbor principle (§5 Safe Harbor) according to the CORE Connectivity Phase II Rule 270 version 2.2.0 and Phase II Rule 250 version 2.1.0. Information receivers can submit eligibility (270), claim status (276), and Review/Review Inquiry (278) transactions in Real time via Safe Harbor. Submitters must submit ARK Payer IDs to the respective payers. Change Healthcare’s security protocol is Username/Password. Change Healthcare does not use X.509.

The currently supported protocol for CORE is HTTP/S. The following is a list of standards and their versions that this Rule is based on:

- HTTP Version 1.1
- SSL Version 3.0
- MIME Version 1.0
- The MIME Multipart/Form-Data (IETF RFC 2388)
- SOAP Version 1.2
• WSDL Version 1.1
• Web Services-Security 1.1
• Change Healthcare utilizes SOAP, MIME/Multipart, and WSDL.
• For more information on the required protocols and envelopes, see CORE 270: Phase II Connectivity Rule, version 2.2.0 section 4.

PASSWORDS
Change Healthcare requires each interchange submitter ID to be accompanied with a unique password for security reasons. The interchange submitter ID and password are authenticated against a database.

Operating Rule “Safe Harbor” Passwords

SOAP
The WS-Security Username and Password token (shown here in the Header portion of the SOAP request) is added to the SOAP Header by the platform on which SOAP is run. The SOAP platform’s Web-Services Security Extensions may be configured to insert these tokens. Please see Appendix 2 for full request.

```xml
<soap:Header>
  <wsse:Security xmlns:wsse="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd" soap:mustUnderstand="true">
    <wsse:UsernameToken xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd" wsu:Id="UsernameToken-21621663">
      <wsse:Username>[Insert user name here]</wsse:Username>
      <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd#PasswordText">[Insert password here]</wsse:Password>
    </wsse:UsernameToken>
  </wsse:Security>
</soap:Header>
```
MIME/Multipart

The below snippet shows the parts of the MIME/Multipart request that are required for username/password authentication. Please see Appendix 2 for full request.

3) MIME request

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="Password";
[Insert password here]
-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="Username";
[Insert user name here]
-----------------------------8cf9c8258a99367
5 CONTACT INFORMATION

EDI CUSTOMER SERVICE

Note: Issues encountered during the implementation and hand-holding process will be addressed by your Implementation Coordinator. Please utilize your Implementation Coordinator as your resource until you have passed through the implementation and hand-holding and have been released to full production status.

ON24/7

Change Healthcare’s ON24/7 web service allows you to report problems any time of day or night. You will receive an ON24/7 login when implementation begins.

PHONE SUPPORT

Technical assistance is also available via phone during regular business hours at the above number. Alternately, 1.866.742.4355 will connect to the Vendor Support Department.

BILLING ISSUES

For issues relating to billing, call 877.469.3263 and press option 1 from the main menu. Alternately, call 1.800.658.5138 and press option 4 from the main menu. Billing representatives are available from 8:00 AM through 5:00 PM Central Time.

ENROLLMENT ISSUES

For issues relating to enrollment, call 877.469.3263 and press option 5 from the main menu. Alternately, call 866-924-4634 Option 4 then option 2. Enrollment representatives are available from 8:00 AM through 5:00 PM Central Time.

EDI TECHNICAL ASSISTANCE

ON24/7 and the Phone Support number given above can also be used for technical issues.

PROVIDER SERVICE

ON24/7 and the Phone Support number given above can also be used for provider issues.

APPLICABLE WEBSITES/E-MAIL

Change Healthcare’s website address is www.changehealthcare.com.
6 CONTROL SEGMENTS/ENVELOPES

ISA/IEA

<table>
<thead>
<tr>
<th>Element</th>
<th>Value</th>
<th>Additional Notes and Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISA01</td>
<td>00</td>
<td></td>
</tr>
<tr>
<td>ISA02</td>
<td></td>
<td>Fill with spaces or any other character</td>
</tr>
<tr>
<td>ISA03</td>
<td>01</td>
<td></td>
</tr>
<tr>
<td>ISA04</td>
<td>TPG Serial Number</td>
<td>Left justify, space fill.</td>
</tr>
<tr>
<td>ISA05</td>
<td>ZZ</td>
<td></td>
</tr>
<tr>
<td>ISA06</td>
<td>TPG Terminal Number</td>
<td>Left justify, space fill.</td>
</tr>
<tr>
<td>ISA07</td>
<td>ZZ</td>
<td></td>
</tr>
<tr>
<td>ISA08</td>
<td>EMDEON</td>
<td>Left justify, space fill.</td>
</tr>
<tr>
<td>ISA11</td>
<td>&gt;.,::</td>
<td></td>
</tr>
<tr>
<td>ISA13</td>
<td>See TR3</td>
<td></td>
</tr>
<tr>
<td>ISA14</td>
<td>0,1</td>
<td>Can submit either 0 or 1; however, acknowledgement request is only honored for approved dual-port submitters.</td>
</tr>
</tbody>
</table>

IEA

<table>
<thead>
<tr>
<th>Element</th>
<th>Value</th>
<th>Additional Notes and Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>IEA01</td>
<td>1</td>
<td>Change Healthcare allows only one Functional Group per interchange.</td>
</tr>
</tbody>
</table>

GS/GE

Change Healthcare’s Real-Time Exchange Services support only one functional group per request and response.

<table>
<thead>
<tr>
<th>Element</th>
<th>Value</th>
<th>Additional Notes and Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>GS02</td>
<td>Value from Payer Reference Sheet</td>
<td></td>
</tr>
<tr>
<td>GS03</td>
<td>MTEXE</td>
<td></td>
</tr>
<tr>
<td>GE01</td>
<td>1</td>
<td>Change Healthcare allows only one transaction set per Functional Group and one patient per transaction set.</td>
</tr>
</tbody>
</table>
ST/SE

Change Healthcare’s Real-Time Exchange Services support only one transaction set per functional group.

<table>
<thead>
<tr>
<th>Element</th>
<th>Value</th>
<th>Additional Notes and Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>ST</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ST01</td>
<td>270 = Eligibility/Benefit 276 = Claim Status 278 = Health Care Services Review, Review Inquiry, Notification</td>
<td></td>
</tr>
<tr>
<td>ST02</td>
<td>Assigned by originator.</td>
<td></td>
</tr>
<tr>
<td>ST03</td>
<td>Must match GS08</td>
<td></td>
</tr>
<tr>
<td>SE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SE02</td>
<td>Must match ST02</td>
<td></td>
</tr>
</tbody>
</table>

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

Change Healthcare imposes very few global business rules and limitations. Rather, Change Healthcare has contracted with numerous payers to provide real-time healthcare transaction processing services to healthcare providers, including eligibility/benefit verification, claim status, health care services review, and health care services inquiry transactions. Therefore, most of the business rules and limitations for submitting transactions to Change Healthcare are based upon individual payer requirements. Individual payer requirements are defined in the X12 Submitter 005010 Transaction Instruction Portfolio.

Globally, Change Healthcare’s Trading Partners must adhere to the following business rules and limitations for submitting transactions in real time:

- Only one patient per transaction.
- Only one transaction per functional group.
- Only one functional group per interchange.
- Interchange acknowledgements for successful deliveries will be honored for submitters using the dual-port method.
- If no date of service is received, the current date (based on Central time) will be considered as the date of service.
8 ACKNOWLEDGEMENTS AND REPORTS

REPORT INVENTORY
Change Healthcare supports the reports covered under ASC X12 Acknowledgements below.

ASC X12 ACKNOWLEDGEMENTS
Change Healthcare supports the exchange of both request and response acknowledgements in X12 TA1 segment format. The TA1 acknowledgement format for both request and response takes the following format:

```
TA1*000000027*061002*1130*A*000~
```

- **TA101**: control number from ISA13 of acknowledged message
- **TA102**: date as YYDDMM
- **TA103**: time as HHMM
- **TA104**: interchange acknowledgement code (ignored by Warp)
- **TA105**: interchange note code (ignored by Warp)

The TA1 acknowledgement segment must be contained within a standard ISA/IEA block. No further X12 segments are required.

9 TRADING PARTNER AGREEMENTS
Trading partner agreements are established at the time of contract.
10 TRANSACTION SPECIFIC INFORMATION

These tables contain one or more rows for each segment for which a supplemental instruction is needed.

<table>
<thead>
<tr>
<th>Page #</th>
<th>Loop ID</th>
<th>Reference</th>
<th>Name</th>
<th>Codes</th>
<th>Length</th>
<th>Notes/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>519</td>
<td>GS</td>
<td>GS</td>
<td>Functional Group Header</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>519</td>
<td></td>
<td>GS02</td>
<td></td>
<td></td>
<td></td>
<td>For ARK submitters, GS02 may vary per transaction. Value will be specified in Payer Instruction Table.</td>
</tr>
<tr>
<td>71</td>
<td>2100A</td>
<td>NM1</td>
<td>Information Source Name</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>71</td>
<td>2100A</td>
<td>NM101</td>
<td>Entity Identifier Code</td>
<td>PR</td>
<td></td>
<td>Value given in Payer Instruction Table.</td>
</tr>
<tr>
<td>72</td>
<td>2100A</td>
<td>NM103</td>
<td>Organization Name</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>73</td>
<td>2100A</td>
<td>NM109</td>
<td>Identification Code (Payer ID)</td>
<td></td>
<td></td>
<td>ARK and MRT values given in Payer Instruction Table.</td>
</tr>
<tr>
<td>77</td>
<td>2100B</td>
<td>NM1</td>
<td>Information Receiver Name</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>79</td>
<td>2100B</td>
<td>NM108</td>
<td>Identification Code Qualifier</td>
<td></td>
<td></td>
<td>Payer’s supported qualifiers are given in Payer Instruction Table.</td>
</tr>
<tr>
<td>80</td>
<td>2100B</td>
<td>NM109</td>
<td>Identification Code</td>
<td></td>
<td></td>
<td>Payer’s minimum/maximum edits for specific ID types are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>94</td>
<td>2100C</td>
<td>NM1</td>
<td>Subscriber Name</td>
<td></td>
<td></td>
<td>Specific ID types and payer-specific ID minimum/maximum edits are given in the Payer Instruction Table. Search options are also described.</td>
</tr>
<tr>
<td>99</td>
<td>2100C</td>
<td>REF</td>
<td>Subscriber Additional Identification</td>
<td></td>
<td></td>
<td>Additional reference ID types and payer-specific ID minimum/maximum edits are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>124</td>
<td>2100C</td>
<td>DTP</td>
<td>Subscriber Date</td>
<td></td>
<td></td>
<td>Payer’s supported qualifiers are noted in the Payer Instruction Table.</td>
</tr>
<tr>
<td>125</td>
<td>2100C</td>
<td>DTP02</td>
<td>Date Time Period Format Qualifier</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### REAL-TIME COMPANION GUIDE

<table>
<thead>
<tr>
<th>Page #</th>
<th>Loop ID</th>
<th>Reference</th>
<th>Name</th>
<th>Codes</th>
<th>Length</th>
<th>Notes/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>125</td>
<td>2100C</td>
<td>DPT03</td>
<td>Date Time Period</td>
<td></td>
<td></td>
<td>Payer’s date of service time period restrictions (such as number of months in the past of an acceptable inquiry) are noted in the Payer Instruction Table, if known.</td>
</tr>
<tr>
<td>126</td>
<td>2110C</td>
<td>EQ</td>
<td>Subscriber Eligibility or Benefit Inquiry</td>
<td></td>
<td></td>
<td>Codes supported by the payer are noted in the Payer Instruction Table.</td>
</tr>
<tr>
<td>128</td>
<td>2110C</td>
<td>EQ01</td>
<td>Service Type Code</td>
<td>Full Codeset</td>
<td></td>
<td>Codes supported by the payer are noted in the Payer Instruction Table.</td>
</tr>
<tr>
<td>148</td>
<td>2000D</td>
<td>HL</td>
<td>Dependent Level</td>
<td></td>
<td></td>
<td>Dependent information is included in the Payer Instruction Table when the payer supports dependent searches. Search options are also described.</td>
</tr>
</tbody>
</table>

**DISCLAIMER:** If there is a payer-required disclaimer, information is given in the Payer Instruction Table.

---

### 005010X212 HEALTH CARE CLAIM STATUS REQUEST

<table>
<thead>
<tr>
<th>Page #</th>
<th>Loop ID</th>
<th>Reference</th>
<th>Name</th>
<th>Codes</th>
<th>Length</th>
<th>Notes/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>263</td>
<td>GS</td>
<td>GS</td>
<td>Functional Group Header</td>
<td></td>
<td></td>
<td>For ARK submitters, GS02 may vary per transaction. Value will be specified in Payer Instruction Table</td>
</tr>
<tr>
<td>41</td>
<td>2100A</td>
<td>NM1</td>
<td>Information Source Name</td>
<td>PR</td>
<td></td>
<td>Value given in Payer Instruction Table</td>
</tr>
<tr>
<td>41</td>
<td>2100A</td>
<td>NM101</td>
<td>Entity Identifier Code</td>
<td></td>
<td>2</td>
<td>Value given in Payer Instruction Table</td>
</tr>
<tr>
<td>41</td>
<td>2100A</td>
<td>NM102</td>
<td>Entity Type Qualifier</td>
<td></td>
<td>2</td>
<td>Value given in Payer Instruction Table</td>
</tr>
<tr>
<td>41</td>
<td>2100A</td>
<td>NM103</td>
<td>Organization Name</td>
<td></td>
<td></td>
<td>Value given in Payer Instruction Table</td>
</tr>
<tr>
<td>42</td>
<td>2100A</td>
<td>NM109</td>
<td>Identification Code (Payer ID)</td>
<td></td>
<td></td>
<td>ARK and MRT values given in Payer Instruction Table</td>
</tr>
<tr>
<td>45</td>
<td>2100B</td>
<td>NM1</td>
<td>Information Receiver Name</td>
<td></td>
<td>41</td>
<td>Payer’s minimum/maximum edits for specific ID types are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>45</td>
<td>2100B</td>
<td>NM101</td>
<td>Entity Identifier Code</td>
<td></td>
<td>41</td>
<td>Payer’s minimum/maximum edits for specific ID types are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>45</td>
<td>2100B</td>
<td>NM109</td>
<td>Identification Code</td>
<td></td>
<td>41</td>
<td>Payer’s minimum/maximum edits for specific ID types are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>49</td>
<td>2100C</td>
<td>NM1</td>
<td>Service Provider Name</td>
<td></td>
<td></td>
<td>Payer’s supported qualifiers are given in Payer Instruction Table.</td>
</tr>
<tr>
<td>50</td>
<td>2100C</td>
<td>NM101</td>
<td>Entity Identifier Code</td>
<td>1P</td>
<td></td>
<td>Payer’s supported qualifiers are given in Payer Instruction Table.</td>
</tr>
<tr>
<td>51</td>
<td>2100C</td>
<td>NM108</td>
<td>Identification Code Qualifier</td>
<td></td>
<td></td>
<td>Payer’s minimum/maximum edits for specific ID types are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>51</td>
<td>2100C</td>
<td>NM109</td>
<td>Identification Code</td>
<td></td>
<td></td>
<td>Payer’s minimum/maximum edits for specific ID types are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>56</td>
<td>2100D</td>
<td>NM1</td>
<td>Subscriber Name</td>
<td></td>
<td></td>
<td>Specific ID types and payer-specific ID minimum/maximum edits are given in the Payer Instruction Table.</td>
</tr>
<tr>
<td>58</td>
<td>2200D</td>
<td>TRN</td>
<td>Claim Status Tracking Number</td>
<td></td>
<td></td>
<td>Payer-specific usage of REF segments is given in the Payer Instruction Table.</td>
</tr>
</tbody>
</table>
## REAL-TIME COMPANION GUIDE

### Page # | Loop ID | Reference | Name | Codes | Length | Notes/Comments
---|---|---|---|---|---|---
67 | 2200D | DTP | Claim Service Date | | | Payer-specific usage of REF segments is given in the Payer Instruction Table.
68 | 2200D | DPT03 | Date Time Period | | | Payer’s date of service time period restrictions (such as number of months in the past of an acceptable inquiry) are noted in the Payer Instruction Table, if known.
69 | 2210D | SVC | Service Line Information | | | Payer-specific usage of service line segments is given in the Payer Instruction Table.
75 | 2000E | HL | Dependent Level | | | Dependent information is included in the Payer Instruction Table when the payer supports dependent searches.

### 005010X217 HEALTH CARE SERVICES REQUEST FOR REVIEW

<table>
<thead>
<tr>
<th>Page #</th>
<th>Loop ID</th>
<th>Reference</th>
<th>Name</th>
<th>Codes</th>
<th>Notes/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>607</td>
<td>GS</td>
<td>GS02</td>
<td>Application Sender's Code</td>
<td></td>
<td>For ARK submitters, GS02 may vary per transaction. Value will be specified in Payer Instruction Table</td>
</tr>
<tr>
<td>71</td>
<td>2010A</td>
<td>NM1</td>
<td>Utilization Management Organization (UMO) Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>72</td>
<td>2010A</td>
<td>NM102</td>
<td>Entity Type Qualifier</td>
<td>2</td>
<td>Value given in Payer Instruction Table</td>
</tr>
<tr>
<td>73</td>
<td>2010A</td>
<td>NM103</td>
<td>Organization Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>74</td>
<td>2000B</td>
<td>HL</td>
<td>Requester Level</td>
<td></td>
<td>Specific identifiers and minimum/maximum edits are given in the Payer Instruction Table</td>
</tr>
<tr>
<td>89</td>
<td>2000C</td>
<td>HL</td>
<td>Subscriber Level</td>
<td></td>
<td>Specific ID types, payer-specific ID minimum/maximum edits, and any other payer-specific business requirements are given in the Payer Instruction Table. Search options are also described.</td>
</tr>
<tr>
<td>103</td>
<td>2000D</td>
<td>HL</td>
<td>Dependent Level</td>
<td></td>
<td>Dependent information is included in the Payer Instruction Table when the payer supports dependent searches. Search options are also described.</td>
</tr>
<tr>
<td>116</td>
<td>2000E</td>
<td>HL</td>
<td>Patient Event Level</td>
<td></td>
<td>The Payer Instruction Table describes the segments, codes, and values that the payer supports at this level and describes related business rules.</td>
</tr>
<tr>
<td>234</td>
<td>2000F</td>
<td>HL</td>
<td>Service Level</td>
<td></td>
<td>The Payer Instruction Table describes the segments, codes, and values that the payer supports at this level and describes related business rules.</td>
</tr>
</tbody>
</table>

**DISCLAIMER:** Payer-required disclaimer information is given in the Payer Instruction Table.
## APPENDICES

### 1 IMPLEMENTATION CHECKLIST

<table>
<thead>
<tr>
<th></th>
<th>Action Items</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td><strong>Phase 1: Pre-Implementation</strong></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>1.1 Sign sales contract and sales ticket entered</td>
<td>Change Healthcare Sales/Trading Partner</td>
</tr>
<tr>
<td></td>
<td>1.2 Identify Trading Partner’s Primary Contact</td>
<td>Trading Partner</td>
</tr>
<tr>
<td></td>
<td>1.3 Identify Change Healthcare’s Implementation Coordinator</td>
<td>Change Healthcare Implementation Coordinator</td>
</tr>
<tr>
<td></td>
<td>1.4 Set Up Initial Conference Call</td>
<td>Trading Partner/Change Healthcare Sales/Change</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Healthcare Implementation Coordinator</td>
</tr>
<tr>
<td>2</td>
<td><strong>Phase 2: Implementation Kick-Off</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.1 Schedule weekly conference calls</td>
<td>Implementation Coordinator/Trading Partner</td>
</tr>
<tr>
<td></td>
<td>2.2 Identify initial transactions to implement</td>
<td>Trading Partner</td>
</tr>
<tr>
<td></td>
<td>2.3 Identify desired production date</td>
<td>Trading Partner</td>
</tr>
<tr>
<td></td>
<td>2.4 Identify Change Healthcare’s technical (communications) contact</td>
<td>Implementation Coordinator</td>
</tr>
<tr>
<td></td>
<td>2.5 Identify Trading Partner’s technical (communications) contact</td>
<td>Trading Partner</td>
</tr>
<tr>
<td></td>
<td>2.6 Schedule Communications call</td>
<td>Implementation Coordinator/Change Healthcare and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trading Partner Communications Contacts</td>
</tr>
<tr>
<td></td>
<td>2.7 Identify special issues or concerns</td>
<td>Trading Partner/Implementation Coordinator</td>
</tr>
<tr>
<td></td>
<td>2.8 Distribute Companion Guides</td>
<td>Implementation Coordinator</td>
</tr>
<tr>
<td>3</td>
<td><strong>Phase 3: Communications</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.1 Identify communications protocol</td>
<td>Change Healthcare and Trading Partner Communications Contacts</td>
</tr>
<tr>
<td></td>
<td>3.2 Identify hardware and communications network requirements</td>
<td>Change Healthcare and Trading Partner Communications Contacts</td>
</tr>
<tr>
<td></td>
<td>3.3 Order equipment and network installation, if necessary</td>
<td>Trading Partner</td>
</tr>
<tr>
<td></td>
<td>3.4 Estimate installation completion date</td>
<td>Trading Partner</td>
</tr>
<tr>
<td></td>
<td>Action Items</td>
<td>Responsibility</td>
</tr>
<tr>
<td>---</td>
<td>------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>✓</td>
<td>3.5 Establish communications testing process</td>
<td>Change Healthcare and Trading Partner Communications Contacts</td>
</tr>
<tr>
<td></td>
<td>3.6 Test communications</td>
<td>Change Healthcare and Trading Partner Communications Contacts</td>
</tr>
<tr>
<td></td>
<td>3.7 Resolve issues</td>
<td>Change Healthcare and Trading Partner Communications Contacts</td>
</tr>
<tr>
<td></td>
<td>3.8 Communications sign-off</td>
<td>Change Healthcare and Trading Partner Communications Contacts</td>
</tr>
</tbody>
</table>

4  | Phase 4: Transaction Structure Development And Certification (done concurrently with Phase 5) |
   | 4.1 Transactions developed                                                   | Trading Partner                                                                |
   | 4.2 Transaction structures validated through Edifecs.                        | Trading Partner/Implementation Coordinator                                      |
   | 4.3 Correct any identified problems                                          | Trading Partner                                                                |
   | 4.4 Repeat 4.2 and 4.3 until structure passes certification                  | Trading Partner/Implementation Coordinator                                      |
   | 4.5 Correct any identified problems                                          | Trading Partner                                                                |
   | 4.6 Repeat 4.4 through 4.5 until response display passes certification       | Trading Partner/Implementation Coordinator                                      |

5  | Phase 5: Registration (done concurrently with Phase 4)                         |
   | 5.1 Provide Provider Enrollment forms as required                            | Implementation Coordinator                                                     |
   | 5.2 Submit Provider Enrollment forms                                         | Trading Partner                                                               |
   | 5.3 Submit Customer Agreement                                                | Trading Partner                                                               |

6  | Phase 6: Payer Development                                                    |
   | 6.1 Develop payer-specific test transactions                                 | Trading Partner                                                               |
   | 6.3 Resolve development issues                                               | Trading Partner/Implementation Coordinator                                     |

7  | Phase 7: Production                                                           |
   | 7.1 Assign production submitter ID(s) and password(s)                        | Trading Partner                                                               |
   | 7.2 Test transactions in production                                          | Trading Partner                                                               |
   | 7.3 Resolve production issues                                                | Trading Partner/Implementation Coordinator                                     |

8  | Phase 8: Sign-Off                                                            | Trading Partner/Implementation Coordinator                                     |
2 TRANSMISSION EXAMPLES

<table>
<thead>
<tr>
<th>Transaction Name</th>
<th>HIPAA Mandated</th>
<th>Request Value</th>
<th>Response Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Eligibility Benefit Inquiry and Response</td>
<td>Y</td>
<td>X12_270_Request_005010X279A1</td>
<td>X12_271_Response_005010X279A1</td>
</tr>
<tr>
<td>Health Care Claim Status Request and Response</td>
<td>Y</td>
<td>X12_276_Request_005010X212</td>
<td>X12_277_Response_005010X212</td>
</tr>
<tr>
<td>Health Care Services Request for Review and Response</td>
<td>Y</td>
<td>X12_278_Request_005010X217E1_2</td>
<td>X12_278_Response_005010X217E1_2</td>
</tr>
<tr>
<td>Health Care Services Review – Inquiry and Response</td>
<td>N</td>
<td>X12_278_Request_005010X215</td>
<td>X12_278_Response_005010X215</td>
</tr>
<tr>
<td>Health Care Services Review – Notification and Announcement</td>
<td>N</td>
<td>X12_278_Request_005010X216E2</td>
<td>X12_278_Response_005010X216E2</td>
</tr>
</tbody>
</table>

The request values provided in the above table should substitute the text and square brackets [Insert Payload Type value here] in the following examples.

Example 1: Sample MIME/Multipart Requests and SOAP Requests

**MIME/Multipart Request**

```
POST /core/eligibility HTTP/1.1
Host: server_host:server_port
Content-Length: 2408
Content-Type: multipart/form-data; boundary=XbCY

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="Password";
[Insert Serial Number here]
-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="Username";
[Insert TPG Number here]
-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="CORERuleVersion";
2.2.0
-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="PayloadType";
[Insert Payload Type value here]
-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="ProcessingMode";
```
HTTP Request Using SOAP + WSDL Request

POST /core/eligibility HTTP/1.1
Host: server_host:server_port
Content-Type: application/soap+xml; charset=UTF-8; action="RealTimeTransaction"

<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" soap:mustUnderstand="true">
      <wsse:UsernameToken xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd" wsu:Id="UsernameToken-21621663">
        <wsse:Username>[Insert Username here]</wsse:Username>
      </wsse:UsernameToken>
    </wsse:Security>
  </soap:Header>
  <soap:Body>
Example 2: Sample MIME/Multipart Requests and SOAP Responses

**MIME/Multipart Response**

```plaintext
POST /core/eligibility HTTP/1.1
HTTP/1.1 200 OK
Content-Length: 2408
Content-Type: multipart/form-data; boundary=XbCy

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="PayloadType"

[Payload Type returned here]

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="ProcessingMode"

RealTime

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="PayloadID"

[Payload ID returned here]

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="TimeStamp"

[Response UTC Time Stamp returned here]

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="SenderId"

[Sender ID returned here]

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="ReceiverId"

[Receiver ID returned here]

-----------------------------8cf9c8258a99367
Content-Disposition: form-data; name="CORERuleVersion"
```
SOAP + WSDL Response

HTTP/1.1 200 OK
Content-Type: application/soap+xml;
action="http://www.caqh.org/SOAP/WSDL/CORETransactions/RealTimeTransactionResponse";charset=UTF-8

<?xml version="1.0" encoding="UTF-8"?>
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://www.w3.org/2003/05/soap-envelope"
xmlns:SOAP-ENC="http://www.w3.org/2003/05/soap-encoding"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema"
xmlns:c14n="http://www.w3.org/2001/10/xml-exc-c14n#"
xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd"
xmlns:xenc="http://www.w3.org/2001/04/xmlenc#"
xmlns:wssec="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd"
xmlns:CORE="http://www.caqh.org/SOAP/WSDL/"
xmlns:CORE220="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
  <SOAP-ENV:Body>
    <CORE220:COREEnvelopeRealTimeResponse SOAP-ENV:encodingStyle="http://www.w3.org/2003/05/soap-encoding">
      <PayloadType>[Payload Type returned here]</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>[Payload ID returned here]</PayloadID>
      <TimeStamp>[Response UTC Time Stamp returned here]</TimeStamp>
      <SenderID>[Sender ID returned here]</SenderID>
      <ReceiverID>[Receiver ID returned here]</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>[Insert X12 response here]</Payload>
    </CORE220:COREEnvelopeRealTimeResponse>
  </SOAP-ENV:Body>
</SOAP-ENV:Envelope>
3 ERROR CODE SAMPLES

Structure of SOAP Error Code

Given the following SOAP request, we refer to the parts having the same color (see legend below).

```xml
<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" soap:mustUnderstand="true">
      <wsse:UsernameToken xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd" wsu:Id="UsernameToken-21621663">
        <wsse:Username>Q0000000</wsse:Username>
        <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0#PasswordText">033019950</wsse:Password>
      </wsse:UsernameToken>
    </wsse:Security>
  </soap:Header>
  <soap:Body>
    <cor:COREEnvelopeRealTimeRequest>
      <PayloadType>[Insert Payload Type value here]</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>e51d4fae-7dec-11d0-a765-00a0c9e6da66</PayloadID>
      <TimeStamp>2007-08-30T10:20:30-05:00</TimeStamp>
      <SenderID>EDIFECS TSK0334</SenderID>
      <ReceiverID>EDIFECSTEST/ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>[X12 Transaction]</Payload>
    </cor:COREEnvelopeRealTimeRequest>
  </soap:Body>
</soap:Envelope>
```
Below is the list of expected behaviors:

<table>
<thead>
<tr>
<th>Case#</th>
<th>Condition</th>
<th>Expected Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Missing <strong>Begin tags</strong></td>
<td>SOAP Fault – Validation constraint violation: tag name or namespace mismatch in element</td>
</tr>
<tr>
<td>2</td>
<td>Missing <strong>Begin tags</strong></td>
<td>SOAP Fault – No tag: no XML root element or missing SOAP message body element</td>
</tr>
<tr>
<td>3</td>
<td>Missing <strong>End tags</strong></td>
<td>CoreEnvelopeError – UnAuthorized</td>
</tr>
<tr>
<td>4</td>
<td>Missing <strong>Begin tags</strong></td>
<td>SOAP Fault – Method not implemented: method name or namespace not recognized. The first tag in the Body should be the method name <strong>COREEnvelopeRealTimeRequest</strong>, so if the app sees anything else, the tag will not be recognized and generate a SOAP Fault.</td>
</tr>
<tr>
<td>5</td>
<td>Missing <strong>Begin tags</strong></td>
<td>If the tag is missing, the parser will fail to obtain the rest of the values and they will be set to blank. For example, if <strong>PayloadType</strong> is missing, ProcessingMode, PayloadID, TimeStamp, etc. will all be set to blanks; thus, if the missing <strong>PayloadType</strong> is the last field in the request, all the fields' values above it would have been set and the response will not have blanks in them. TimeStamp is the first field that is being verified, therefore the error will be CoreEnvelopeError with TimeStampRequired. The fields are verified in the following order: TimeStamp, ProcessingMode, Version, SenderID, ReceiverID, PayloadType, PayloadID, Payload.</td>
</tr>
<tr>
<td>6</td>
<td>Missing <strong>End tags</strong></td>
<td>SOAP Fault - End of file or no input: Operation interrupted or timed out</td>
</tr>
<tr>
<td>7</td>
<td>Misspelled <strong>Begin tags</strong></td>
<td>SOAP Fault – Validation constraint violation: tag name or namespace mismatch in element</td>
</tr>
<tr>
<td>8</td>
<td>Misspelled <strong>Begin tags</strong></td>
<td>CoreEnvelopeError – UnAuthorized. Except wsse:Security, which returns “SOAP Fault – The data element must be understood but cannot be handled” only if the attribute mustUnderStand is present and set to true.</td>
</tr>
<tr>
<td>9</td>
<td>Misspelled <strong>End tags</strong></td>
<td>The misspelling is ignored and the parser will continue processing.</td>
</tr>
<tr>
<td>10</td>
<td>Misspelled <strong>Begin tags</strong></td>
<td>SOAP Fault – Method not implemented: method name or namespace not recognized.</td>
</tr>
<tr>
<td>11</td>
<td>Misspelled <strong>Begin tags</strong></td>
<td>CoreEnvelopeError - &lt;Tag&gt;Required.</td>
</tr>
<tr>
<td>12</td>
<td>Misspelled <strong>End tags</strong></td>
<td>The misspelling is ignored and the parser will continue processing.</td>
</tr>
<tr>
<td>13</td>
<td>In envelope <strong>header</strong>, spelling “&lt;soap:Envelope”</td>
<td>SOAP Fault – Well-formedness violation</td>
</tr>
<tr>
<td>14</td>
<td>In envelope <strong>header</strong>, spelling “&lt;soap:Envelope”</td>
<td>SOAP Fault – Validation constraint violation: tag name or namespace mismatch in element</td>
</tr>
<tr>
<td>15</td>
<td>In envelope <strong>header</strong>, missing “&lt;”</td>
<td>SOAP Fault – HTTP Error: 414 Request – URI Too Large</td>
</tr>
<tr>
<td>16</td>
<td>Missing the whole <strong>header</strong></td>
<td>SOAP Fault – Validation constraint violation: tag name or namespace mismatch in element</td>
</tr>
</tbody>
</table>
## Authentication Failure

*MIME/Multipart Error Response*

```
---8cfa663bc2437a5
Content-Disposition: form-data; name="PayloadType"

[Payload Type returned here]

---8cfa663bc2437a5
Content-Disposition: form-data; name="ProcessingMode"

RealTime

---8cfa663bc2437a5
Content-Disposition: form-data; name="PayloadID"

[Payload ID returned here]

---8cfa663bc2437a5
Content-Disposition: form-data; name="TimeStamp"

[Response UTC Time Stamp returned here]

---8cfa663bc2437a5
Content-Disposition: form-data; name="SenderId"

[Sender ID returned here]

---8cfa663bc2437a5
Content-Disposition: form-data; name="ReceiverID"

[Receiver ID returned here]

---8cfa663bc2437a5
Content-Disposition: form-data; name="CORERuleVersion"

2.2.0

---8cfa663bc2437a5
Content-Disposition: form-data; name="ErrorCode"

UnAuthorized

---8cfa663bc2437a5
Content-Disposition: form-data; name="ErrorMessage"

Invalid Username/Password.

---8cfa663bc2437a5
Content-Disposition: form-data; name="Payload"

[X12 response returned here]

---8cfa663bc2437a5
```
SOAP Error Response

```xml
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://www.w3.org/2003/05/soap-envelope"
xmlns:SOAP-ENC="http://www.w3.org/2003/05/soap-encoding"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema"
xmlns:c14n="http://www.w3.org/2001/10/xml-exc-c14n#
xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd"
xmlns:xenc="http://www.w3.org/2001/04/xmlenc#
xmlns:ds="http://www.w3.org/2000/09/xmldsig#
xmlns:wsse="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd"
xmlns:CORE220="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd"
xmlns:CORE="http://www.caqh.org/SOAP/WSDL/">
  <SOAP-ENV:Header>
    <wsse:Security SOAP-ENV:mustUnderstand="true">
      <wsse:UsernameToken wsu:Id="UsernameToken-21621663">
        <wsse:Username>L1000000</wsse:Username>
        <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-membership-token-profile-1.0#PasswordText">033019950</wsse:Password>
      </wsse:UsernameToken>
    </wsse:Security>
  </SOAP-ENV:Header>
  <SOAP-ENV:Body>
    <CORE220:COREEnvelopeRealTimeResponse>
      <PayloadType>[Payload Type returned here]</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>[Payload ID returned here]</PayloadID>
      <TimeStamp>[Response UTC Time Stamp returned here]</TimeStamp>
      <SenderID>[Sender ID returned here]</SenderID>
      <ReceiverID>[Receiver ID returned here]</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>[X12 response returned here]</Payload>
      <ErrorCode>Unauthorized</ErrorCode>
      <ErrorMessage>Invalid Username/Password.</ErrorMessage>
    </CORE220:COREEnvelopeRealTimeResponse>
  </SOAP-ENV:Body>
</SOAP-ENV:Envelope>
```
Version Mismatch

**MIME/Multipart Error Response**

```plaintext
---8cfa6643a3596c5
Content-Disposition: form-data; name="PayloadType"

[Payload Type returned here]

---8cfa6643a3596c5
Content-Disposition: form-data; name="ProcessingMode"

RealTime

---8cfa6643a3596c5
Content-Disposition: form-data; name="PayloadID"

[Payload ID returned here]

---8cfa6643a3596c5
Content-Disposition: form-data; name="TimeStamp"

[Response UTC Time Stamp returned here]

---8cfa6643a3596c5
Content-Disposition: form-data; name="SenderId"

[Sender ID returned here]

---8cfa6643a3596c5
Content-Disposition: form-data; name="ReceiverID"

[Receiver ID returned here]

---8cfa6643a3596c5
Content-Disposition: form-data; name="CORERuleVersion"

2.1.0

---8cfa6643a3596c5
Content-Disposition: form-data; name="ErrorCode"

VersionMismatch

---8cfa6643a3596c5
Content-Disposition: form-data; name="ErrorMessage"

Expecting CORERuleVersion=2.2.0

---8cfa6643a3596c5
Content-Disposition: form-data; name="Payload"

[X12 response returned here]

---8cfa6643a3596c5
```
SOAP Error Response

```xml
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://www.w3.org/2003/05/soap-envelope"
xmlns:SOAP-ENC="http://www.w3.org/2003/05/soap-encoding"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema"
xmlns:c14n="http://www.w3.org/2001/10/xml-exc-c14n#"
xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd"
xmlns:xenc="http://www.w3.org/2001/04/xmlenc#"
xmlns:ds="http://www.w3.org/2000/09/xmldsig#"
xmlns:wsse="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd"
xmlns:CORE220="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd"
xmlns:CORE="http://www.caqh.org/SOAP/WSDL/"
>
  <SOAP-ENV:Header>
    <wsse:Security SOAP-ENV:mustUnderstand="true">
      <wsse:UsernameToken wsu:Id="UsernameToken-21621663">
        <wsse:Username>L0000000</wsse:Username>
        <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-username-token-profile-1.0#PasswordText">033019950</wsse:Password>
      </wsse:UsernameToken>
    </wsse:Security>
  </SOAP-ENV:Header>
  <SOAP-ENV:Body>
    <CORE220:COREEnvelopeRealTimeResponse>
      <PayloadType>[Payload Type returned here]</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>[Payload ID returned here]</PayloadID>
      <TimeStamp>[Response UTC Time Stamp returned here]</TimeStamp>
      <SenderID>[Sender ID returned here]</SenderID>
      <ReceiverID>[Receiver ID returned here]</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>[X12 response returned here]</Payload>
      <ErrorCode>VersionMismatch</ErrorCode>
      <ErrorMessage>Expecting CORERuleVersion=2.2.0</ErrorMessage>
    </CORE220:COREEnvelopeRealTimeResponse>
  </SOAP-ENV:Body>
</SOAP-ENV:Envelope>
```
Processing Mode Mismatch

*MIME/Multipart Error Response*

```
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="PayloadType"

[Payload Type returned here]
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="ProcessingMode"

RealTime
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="PayloadID"

[Payload ID returned here]
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="TimeStamp"

[Response UTC Time Stamp returned here]
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="SenderID"

[Sender ID returned here]
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="ReceiverID"

[Receiver ID returned here]
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="CORERuleVersion"

2.2.0
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="ErrorCode"

ProcessingModeIllegal
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="ErrorMessage"

Expecting ProcessingMode=RealTime
-------------------------------8cfa664119ef98b
Content-Disposition: form-data; name="Payload"

[X12 response returned here]
-------------------------------8cfa664119ef98b
```
SOAP Error Response

```xml
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://www.w3.org/2003/05/soap-envelope"
xmlns:SOAP-ENC="http://www.w3.org/2003/05/soap-encoding"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema"
xmlns:cl4n="http://www.w3.org/2001/10/xml-exc-c14n#"
xmlns:wss="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd"
xmlns:xenc="http://www.w3.org/2001/04/xmlenc#"
xmlns:wsc="http://schemas.xmlsoap.org/ws/2005/02/sechttp://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd"
xmlns:CORE="http://www.caqh.org/SOAP/WSDL/">
  <SOAP-ENV:Header>
    <wsse:Security SOAP-ENV:mustUnderstand="true">
      <wsse:UsernameToken wsu:Id="UsernameToken-21621663">
        <wsse:Username>L0000000</wsse:Username>
        <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-username-token-profile-1.0#PasswordText">033019950</wsse:Password>
      </wsse:UsernameToken>
    </wsse:Security>
  </SOAP-ENV:Header>
  <SOAP-ENV:Body>
    <CORE220:COREEnvelopeRealTimeResponse>
      <PayloadType>[Payload Type returned here]</PayloadType>
      <ProcessingMode>RealTime1</ProcessingMode>
      <PayloadID>[Payload ID returned here]</PayloadID>
      <TimeStamp>[Response UTC Time Stamp returned here]</TimeStamp>
      <SenderID>[Sender ID returned here]</SenderID>
      <ReceiverID>[Receiver ID returned here]</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>[X12 response returned here]</Payload>
      <ErrorCode>ProcessingModeIllegal</ErrorCode>
      <ErrorMessage>Expecting ProcessingMode=RealTime</ErrorMessage>
    </CORE220:COREEnvelopeRealTimeResponse>
  </SOAP-ENV:Body>
</SOAP-ENV:Envelope>
```
Incorrect PayloadID

MIME/Multipart Error Response

Content-Disposition: form-data; name="PayloadType"

[Payload Type returned here]

Content-Disposition: form-data; name="ProcessingMode"

RealTime

Content-Disposition: form-data; name="PayloadID"

[Payload ID returned here]

Content-Disposition: form-data; name="TimeStamp"

[Response UTC Time Stamp returned here]

Content-Disposition: form-data; name="SenderId"

[Sender ID returned here]

Content-Disposition: form-data; name="ReceiverID"

[Receiver ID returned here]

Content-Disposition: form-data; name="CORERuleVersion"

2.2.0

Content-Disposition: form-data; name="ErrorCode"

PayloadIDIllegal

Content-Disposition: form-data; name="ErrorMessage"

PayloadID must conform to ISO UUID standards.

Content-Disposition: form-data; name="Payload"

[X12 response returned here]
SOAP Error Response

```
<SOAP-ENV:Envelope xmlns:SOAP-ENV="http://www.w3.org/2003/05/soap-envelope"
xmlns:SOAP-ENC="http://www.w3.org/2003/05/soap-encoding"
xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
xmlns:xsd="http://www.w3.org/2001/XMLSchema"
xmlns:c14n="http://www.w3.org/2001/10/xml-exc-c14n#"
xmlns:wsu="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-utility-1.0.xsd"
xmlns:xenc="http://www.w3.org/2001/04/xmlenc#"
xmlns:ws=":http://schemas.xmlsoap.org/ws/2004/02/sc"
xmlns:ds="http://www.w3.org/2000/09/xmldsig#"
xmlns:wsse="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd"
xmlns:CORE220="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd"
xmlns:CORE="http://www.caqh.org/SOAP/WSDL/">

<SOAP-ENV:Header>
  <wsse:Security SOAP-ENV:mustUnderstand="true">
    <wsse:UsernameToken wsu:Id="UsernameToken-21621663">
      <wsse:Username>L0000000</wsse:Username>
      <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-username-token-profile-1.0#PasswordText">033019950</wsse:Password>
    </wsse:UsernameToken>
  </wsse:Security>
</SOAP-ENV:Header>

<SOAP-ENV:Body>
  <CORE220:COREEnvelopeRealTimeResponse>
    <PayloadType>[Payload Type returned here]</PayloadType>
    <ProcessingMode>RealTime</ProcessingMode>
    <PayloadID>[Payload ID returned here]</PayloadID>
    <TimeStamp>[Response UTC Time Stamp returned here]</TimeStamp>
    <SenderID>[Sender ID returned here]</SenderID>
    <ReceiverID>[Receiver ID returned here]</ReceiverID>
    <CORERuleVersion>2.2.0</CORERuleVersion>
    <Payload>[X12 response returned here]</Payload>
    <ErrorCode>PayloadIDIllegal</ErrorCode>
    <ErrorMessage>PayloadID must conform to ISO UUID standards.</ErrorMessage>
  </CORE220:COREEnvelopeRealTimeResponse>
</SOAP-ENV:Body>
</SOAP-ENV:Envelope>
```
# CHANGE LOG

<table>
<thead>
<tr>
<th>Date</th>
<th>Version</th>
<th>Change Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>December 31, 2012</td>
<td>1.0</td>
<td>Published.</td>
</tr>
<tr>
<td>December 31, 2015</td>
<td>2.0</td>
<td>Rebranded</td>
</tr>
</tbody>
</table>