

Encounter Data Reporting - Post Adjudication File

Field Definition	Type	Length	From	To	Comments
EC-NUM	X	12	1	12	Encounter CRN (Claim Reference Number)
FORM-TYPE	X	1	13	13	Form Type
FUNDING TYPE	X	30	14	43	<p>SPT - VBPCContract ID            VB1 - E-Prescribe DAP            SUD - SUD Fund            CRI - NTXIX/XXI Crisis            SMI - NTXIX/XXI SMI            MHB - MHBG SED/SMI            SAB - SABG            MAT - MAT-PDOA            STR - Opioid STR            CTY - County            VB2 - IC DAP            VBD - DRG DAP            VBO - Other Hosp/IP DAP            VBN - NH DAP            VB3 - BH OP DAP 1            VB4 - BH OP DAP 2            VB5 - BH OP DAP 3            VB6 - Dental DAP            EVV - EVV DAP            ASI - APSI            PSI - PSI</p> <p><i>Change for 10/119 to use a 3 digit value to designate the Project Identifier.</i></p> <p><i>If more than one Project Identifier applies</i></p>

					<p>please list both separated by a “/”.</p> <p>Project Identifiers in red are new for 10/1/19 reporting all others in black should have been reported under previous reporting requirements.</p>
HP-ID	X	6	44	49	Health Plan ID
REND-PR-NPI	X	10	50	59	Rendering/Service Provider NPI
Filler	X	21	60	80	blank - for future use

Production files should be placed into SFTP directory: **XXX/PROD/IN** where XXX is the MCO folder

**File Naming convention:**

**AZSP123456.YYYYMMDD.STRUCTRCT.HHMM.999**

123456 = Health Plan ID

YYYYMMDD - Date (ex. 20160426)

HHMM = hour & Minute (ex. 2214)

999 - 001, 002, etc. (multiple files)

Ex. AZSP010122.20160426.STRUCTCT.1645.001

Note – Applicable to all form types.