



AHCCCS ALTCS-EPD RFP YH24-0001
Section E - AHCCCS Reference Tables
Document - AHCCCS Form Type

AHCCCS Form Type	AHCCCS Form Type Definition
Form A	CMS 1500 - Professional and Other Services
Form C	Universal Claim Form - Prescription Drugs
Form D	ADA - Dental Services
Form I	UB-04 Inpatient Hospital
Form L	UB-04 Long-Term Care Facility
Form O	UB-04 Outpatient Hospital

Source: AHCCCS Encounter Manual