CCL HEADER RECORD

Field Name	Picture	From	Thru	
Filler	X(09)	01	09	
Transmission Submitter No.	X(03)	10	12	
Create Date	X(05)	13	17	YYDDD
Serial Number	X(06)	18	23	
Filler	X(75)	24	98	
Record Type	X(02)	99	100	Value “T0”

CCL COMMON RECORD

Field Name	Picture	From	Thru	
CRN	N(14)	1	14	
Invoice Number	N(06)	15	20	
Form Type	X(01)	21	21	
Create Date	X(08)	22	29	CCYYMMDD
Health Plan ID	X(06)	30	35	
AHCCCS-ID	X(09)	36	44	
Ser-Pr-ID	X(10)	45	54	
HP Claim Number	X(30)	55	84	
Filler	X(14)	85	98	
Record-Typ	X(02)	99	100	Value “C1”

Changed the record length to 100
Changed the Format of the Create Date
Increased the Ser-Pr-ID to 10

CCL ERROR RECORD

Field Name	Picture	From	Thru	
CRN	N(14)	1	14	
Error Code 1	X(04)	15	18	
Error Code 2	X(04)	19	22	
Error Code 3	X(04)	23	26	
Error Code 4	X(04)	27	30	
Error Code 5	X(04)	31	34	
Error Code 6	X(04)	35	38	
Error Code 7	X(04)	39	42	
Error Code 8	X(04)	43	46	
Error Code 9	X(04)	47	50	
Error Code 10	X(04)	51	54	
Error Code 11	X(04)	55	58	
Error Code 12	X(04)	59	62	
Error Code 13	X(04)	63	66	
Error Code 14	X(04)	67	70	
Error Code 15	X(04)	71	74	
Filler	X(24)	75	98	
Record Type	X(02)	99	100	Value “C2”, “C4”

CCL ERROR FIELD RECORD

Field Name	Picture	From	Thru	
CRN	N(14)	1	14	
Invoice Number	X(06)	15	20	
Field Number	X(03)	21	23	
Old Value	X(20)	24	43	
New Value	X(20)	44	63	
Action Mode	X(01)	64	64	
CCL Location	X(02)	65	66	
Field Name	X(15)	67	81	
Filler	X(17)	82	98	
Record Type	X(02)	99	100	Value “C3”, “C5”

CCL TRAILER RECORD

Field Name	Picture	From	Thru	
Filler	X(09)	1	9	
Transmission Submitter No.	X(03)	10	12	
Serial Number	X(06)	13	18	
Create Date	X(02)	19	23	YYDDD
Tape Type Code	X(02)	24	25	
Total Records	N(07)	26	32	
Total Charges	N(13)v99	33	47	
Filler	X(51)	48	98	
Record Typ	X(02)	99	100	Value “T0”