EXHIBIT 4A

Pended Encounter File Record Layout

Pended Encounter File
Record Layout

T0 Record **One Per File**

Data Name	Picture	Actual Positions From	To	Remarks
Filler	X(09)	01	09	
Transmission Submitter Number	9(03)	10	12	
Date Created	9(05)	13	17	YYDDD (Julian Date Format)
Filler	X(61)	18	78	
Record Type	X(02)	79	80	Value "T0"

Pended Encounter File
Record Layout

C1 Record **One Per Encounter**

Data Name	Picture	Actual Positions From	To	Remarks
CRN	9(14)	01	14	
Invoice Number	9(06)	15	20	
Claim Type	X(01)	21	21	Value “E”
Form Type	X(01)	22	22	
Date Created	9(06)	23	28	YYMMDD
Contractor ID	9(06)	29	34	
AHCCCS Recipient ID	X(09)	35	43	
Service Provider ID	9(06)	44	49	
Health Plan Claim Number	X(20)	50	69	Contractor’s Claim Identification Number
Filler	X(9)	70	78	
Record Type	X(02)	79	80	Value "C1"

Pended Encounters File
Record Layout

80 Column Format

C2/C4 Records **Errors Present**

Data Name	Picture	Actual Positions From	To	Remarks
CRN	9(14)	01	14	
Error Code 1	X(4)	15	18	
Error Code 2	X(4)	19	22	
Error Code 3	X(4)	23	26	
Error Code 4	X(4)	27	30	
Error Code 5	X(4)	31	34	
Error Code 6	X(4)	35	38	
Error Code 7	X(4)	39	42	
Error Code 8	X(4)	43	46	
Error Code 9	X(4)	47	50	
Error Code 10	X(4)	51	54	
Error Code 11	X(4)	55	58	
Error Code 12	X(4)	59	62	
Error Code 13	X(4)	63	66	
Error Code 14	X(4)	67	70	
Error Code 15	X(4)	71	74	
Filler	X(4)	75	78	
Record Type	X(2)	79	80	Value "C2" or "C4"

Pended Encounters File
Record Layout

80 Column Format

C3/C5 Records **Fields in Error**

Data Name	Picture	Actual Positions From	To	Remarks
CRN	9(14)	01	14	
Invoice Number	9(6)	15	20	
Internal Field Number	X(3)	21	23	
Old Value	X(20)	24	43	
New Value	X(17)	44	60	Underscores to size of allowed input.
Action Mode	X(1)	61	61	Defaults to 'N' Input 'C' = Correct 'D' = Delete 'N' = No Action 'A' = Approve Duplicate Audit
CCL Location	X(2)	62	63	Always "92"
Form Field Name	X(15)	64	78	
Record Type	X(2)	79	80	Value "C3" or "C5"

Pended Encounters File
Record Layout

80 Column Format

T9 Record **One Per File**

Data Name	Picture	Actual Positions From	To	Remarks
Filler	X(9)	01	09	
Transmission Submitter Number	X(3)	10	12	
Filler	X(6)	13	18	Spaces
Current Date	9(5)	19	23	'YYDDD' (Julian Date Format)
Filler	X(2)	24	25	Spaces
Total Records on File	9(7)	26	32	
Total Charges	9(13)V99	33	47	Zeros
Filler	X(31)	48	78	Blanks
Record Type	X(2)	79	80	Value "T9"