



Healthcare Eligibility Benefit Inquiry and Response

270-271 - 005010X279A1

Companion Guide

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INTRODUCTION

Ayin Health Solutions (Ayin) currently supports access to certain data by 3rd party applications and clients. This allows for integration between Ayin systems and non-Ayin systems. Users of this interface are responsible for the data and its usage once it is extracted from Ayin. This includes security mechanisms around the transit and storage of this data in other locations

GETTING STARTED

Purpose:

This document is intended for use as a companion to the HIPAA ASC X12N/005010X279 270/271 TR3. Specific instructions contained in this document are provided for clarification and subject to change. This document should be used in conjunction with the HIPAA TR3 published by Washington Publishing Company.

Connectivity

The 270/271 is accessible via a web service interface accessible over the Secure Hypertext Transfer Protocol (HTTPS). The endpoint and its associated operations are exposed via the Web Service Definition Language (WSDL).

Production Endpoint: <https://api.ayin.com/cim/ediservices/Service.svc>

Test Endpoint: <https://api.dev.ayin.com/cim/ediservices/Service.svc>

Test endpoint is available from 6AM-7PM Pacific time.

The exposed operations follow the CAQH Core II web service operations for Real Time Transactions. Other operations are currently unsupported.

Submitter Setup Requirements

In order to proceed with preparations for connectivity, Ayin requires the following information from the submitter:

1. Verification of Business Associate Agreement/Trading Partner Agreement. If none exists Ayin will work with the submitter to have an agreement executed.
2. Contact name
Address

Phone Number

Email Address

3. IP Address Range. Please provide the IP address range that the 270 requests will be initiated from.

IP Address Range: _____._____._____._____.

Example: 10.0.44

Web Service Access

In order to access the 270/271 service you will need an API key. In order to obtain an API key please contact Ayin EDI Support at 503-584-2169 option 1. API keys are associated with an individual user account within the Ayin CIM product. Data access is controlled using the same mechanisms as security configurations for standard CIM user accounts. Also, data changes in CIM are tracked to that user account for auditing/change tracking purposes.

Along with using an API key, the interface requires clients to connect from a predefined IP range. This prevents compromised API keys from being used outside of the desired organization. The IP range is configured for a practice office in CIM and will apply to all users within the office

Setting up API Access

To configure API access, the following steps are required:

1. Determine if a new user account is needed or if the API access should be tied to an existing CIM user account. If an existing user account is used, skip to Step 2. If a new user account is needed, log into CIM and fill out the “Register User” link from the Main Menu to create a new user account in the system. Once created, this account will require activation.
2. Contact the Ayin EDI Support (503-584-2169 option 1 or edi.support@phtech.com). The EDI Support Specialist will be able to complete the process. Please be prepared with the user account you wish to add API access to as well as the IP address range you wish to use for your office.

If at any time, you believe your API key may have been compromised, please contact the Ayin Service Desk immediately. For extra security precautions, Ayin recommends that organizations consider periodically cycling their API key.

Using the API Key

When making a request to an operation every request will need to have the API key provided in the header of the request. The element name will be “Ayin-api-key”.

Example SOAP Request

POST <https://localhost/Cim/Services/EligibilityService.asmx> HTTP/1.1

Content-Type: text/xml; charset=utf-8

phtech-api-key: 00000000000000000000000000000000

SOAPAction: "RealTimeTransaction"

Host: seteam2

Content-Length: 618

Expect: 100-continue

Accept-Encoding: gzip, deflate

Connection: Keep-Alive

```
<s:Envelope xmlns:s="http://schemas.xmlsoap.org/soap/envelope/">
  <s:Body xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
  xmlns:xsd="http://www.w3.org/2001/XMLSchema">
    <COREEnvelopeRealTimeRequest
  xmlns="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
      <PayloadType xmlns="">X12_270_Request_005010X279A1</PayloadType>
      <PayloadID xmlns="">f81d4fae-7dec-11d0-a765-00a0c91e6bf6</PayloadID>
      <TimeStamp xmlns="">4/26/2013 2:00:22 PM</TimeStamp>
      <SenderID xmlns="">SOME_SENDER_ID</SenderID>
      <ReceiverID xmlns="">AYIN</ReceiverID>
      <CORERuleVersion xmlns="">2.2.0</CORERuleVersion>
    </COREEnvelopeRealTimeRequest>
  </s:Body>
</s:Envelope>
```

Our system uses the **phtech-api-key** in the http header for identifying the sender for authentication & authorization purposes. If the **phtech-api-key** is not provided, is invalid, or if a request is made outside of the allowed IP address range, the request will be responded to with an HTTP 403 error.

The **SenderID** value submitted in the 270 SOAP request will simply be echoed back in the 271 SOAP response as the ReceiverID, and has no impact on the data returned in the 271.

Test Client

A sample test client (C#/ .NET 4) is available upon request which will allow one to quickly verify connectivity to our system and perform a real time eligibility lookup via a 270. The test client provides an example of how to add the custom http header for the api key as well as encode the payload properly so as to conform with the CORE standards.

Data Clarification

Specific instructions contained below are provided for clarification and subject to change. This document should be used in conjunction with the HIPAA TR3 published by Washington Publishing Company. Please be sure you are using “.” as a control character rather than “>” as the later control character can cause the XML to be invalid.

270 Transaction Set

Interchange and Functional Group

Transaction Set	Element	Element Description	Instruction
270 Interchange	ISA01	Authorization Qualifier	“00”
270 Interchange	ISA02	Authorization Identifier	[blank]
270 Interchange	ISA03	Security Information Qualifier	“00”
270 Interchange	ISA04	Security Information Identifier	[blank]
270 Interchange	ISA05	Sender Qualifier	“ZZ”
270 Interchange	ISA06	Sender Identifier	[Business Tax ID]
270 Interchange	ISA07	Receiver Qualifier	“ZZ”
270 Interchange	ISA08	Receiver Identifier	“931211733”
270 Interchange	ISA15	Usage Indicator	“P” = Production, “T”= Test
270 Functional Group	GS02	Group Sender Identifier	[Business Tax ID]
270 Functional Group	GS03	Group Receiver Identifier	“CIM”

270 Loop and Segments

270 Loop	270 Element	Description	Instruction
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L2100A	NM103	Organization Name	See Appendix for list of valid Organizations
L2100B	NM103	Organization Name	[Requesting Organization]
L2100B	NM108	Identification Qualifier	“XX”
L2100B	NM109	Identification Code	[NPI]
L2100C	NM103	Subscriber Last Name	
L2100C	NM104	Subscriber First Name	
L2100C	NM108	Subscriber Qualifier	“MI”
L2100C	NM109	Subscriber Identification	
L2100C	DMG02	Subscriber Date of Birth	CCYYMMDD
L2100C	DTP01*	Date Time Qualifier	“291”
L2100C	DTP02	Date Time Format Qualifier	“D8”
L2100C	DTP03**	Date Period	CCYYMMDD
L2110C	EQ01	Service Type Code	See Appendix for a list of support codes.

* If L2100C DTP is not passed, eligibility and benefit is determined for time of the request, unless a date is provided in the L2110C dtp element..

** If not supplied will assume current transaction date.

270 Lookup Subscriber Combination Support

Ayin supports the following search combinations for eligibility and benefit inquiry searches;

Subscriber ID (NM109)

The subscriber ID can be used in any combination of the other supported search fields (NM103 - Subscriber Last Name, NM104- Subscriber First Name, DMG02 - Subscriber DOB) . The other search fields are NOT required but suggested to help ensure the most accurate match.

- Subscriber ID (NM109) + Subscriber Last Name (NM103) + Subscriber First Name (NM104)
 - If subscriber ID is provided with the last and first name, the search will return a successful match if one name is correct.
 - Example Record

- NM103 - Jones, NM104 - Robert, NM109 - 123456
- Example Search
 - Successful Search
 - NM103 - Jones, NM104 - Bob, NM109 - 123456
 - Unsuccessful Search
 - NM103 - Smith, NM104 -Robert, NM109 - 123456
 - NM103 - Smith, NM104 - Bob, NM109 - 123456

Subscriber Last Name (NM103),Subscriber First Name (NM104) and Subscriber DOB (DMG02)

All elements must be provided when not using the subscriber ID in the Inquiry. The elements must match exactly to a record in the system in order for the search to return successfully.

- Example Record
 - NM103 - Jones, NM104 - Robert, NM109 - 123456, DMG02 - 1/14/2001
- Example Search
 - Successful Search
 - NM103 - Jones, NM104 - Rober, DMG02- 1/14/2001
 - Unsuccessful Search
 - NM103 - Jones, NM104 -Robert, DMG02 - 1/14/2002
 - NM103 - Jones, NM104 - Bob, DMG02- 1/14/2001
 - NM103 - Smith, NM104 - Robert , DMG02- 1/14/2001

270 Ayin Exceptions

Ayin currently does not support L200D (dependent Level inquiry).

The following inquiry scenarios will be treated as if we have received an EQ01= 30:

- No STC is is provided in inquiry
- An explicit STC inquiry is not supported by this companion guide. (See [Appendix](#) for supported codes)
- Procedure code or Diagnosis code inquiry - (Not supported by Ayin)

271 Response

The following table lists the codes that will only report Coverage information for a subscriber. All other Patient Financial Responsibility is withheld due to discretion about the service inquiry or the service type code is too general to respond.

EB03 STC Response	Description	Benefit Coverage
1	Medical Care	Active/ Inactive
35	Dental Care	Active/ Inactive
47	Hospital	Active/ Inactive
86	Emergency Services	Active / Inactive
88	Pharmacy	Active / Inactive
98	Professional (Physician Visit) Office	Active / Inactive
AL	Vision	Active / Inactive
MH	Mental Health	Active / Inactive

STC = 30 Health Plan Benefit Coverage

When STC = “30” is submitted on a 270 request, the 271 response returns the coverage status of the following STCs: Patient Financials in the below tables equate to Co-Pay, Co-Insurance, Plan Deductible, and Patient Remaining Deductible

EB03 STC Response	Description	Benefit Coverage/ Patient Financial Responsibility
1	Medical Care	Active / Inactive
33	Chiropractic	Patient Financials
35	Dental Care	Active / Inactive
47	Hospital	Active / Inactive
86	Emergency Services	Active / Inactive
88	Pharmacy	Active / Inactive
98	Professional (Physician Visit) Office	Active / Inactive
AL	Vision	Active / Inactive

MH	Mental Health	Active / Inactive
UC	Urgent Care	Patient Financials

Supported Service type codes and 271 Response

Patient Financials in the below tables equate to Co-Pay, Co-Insurance, Plan Deductible, and Patient Remaining Deductible

270 Inquiry	271 Response	
EQ01 Request STC	EB03 Response STC	Coverage/ Patient Financials
01 - Medical Care	01 - Medical Care	Active/ Inactive
	02 - Surgical	Patient Financials
	42 - Home Health Care	Patient Financials
	45 - Hospice	Patient Financials
	73 - Diagnostic Medical	Active/ Inactive
	76 - Dialysis	Patient Financials
	AG - Skilled Nursing Care	Patient Financials
02 - Surgical	02 - Surgical	Patient Financials
	07 - Anesthesia	Patient Financials
	08 - Surgical Assistance	Patient Financials
	20 - Second Surgical Opinion	Patient Financials
04 - Diagnostic X- Ray	04 - Diagnostic X- Ray	Patient Financials

05 - Diagnostic Lab	05 - Diagnostic Lab	Patient Financials
06 - Radiation Therapy	06 - Radiation Therapy	Patient Financials
07 - Anesthesia	07 - Anesthesia	Patient Financials
08 - Surgical Assistance	08 - Surgical Assistance	Patient Financials
12 - DME Purchase	12 - DME Purchase	Patient Financials
20 - Second Surgical Opinion	20 - Second Surgical Opinion	Patient Financials
33 - Chiropractic	33 - Chiropractic	Patient Financials
	98 - Professional (Physician) Visit - Office	Patient Financials
35 - Dental Care	35 - Dental Care	Active/ Inactive
	40 - Oral Surgery	Patient Financials
40 - Oral Surgery	40 - Oral Surgery	Patient Financials
42 - Home Health	42 - Home Health	Patient Financials
45 - Hospice	45 - Hospice	Patient Financials
47 - Hospital	47- Hospital	Active/ Inactive
	48- Hospital Inpatient	Patient Financials
	50 - Hospital Outpatient	Patient Financials
	51- Hospital - Emergency Accident	Patient Financials
	52- Hospital - Emergency Medical	Patient Financials
	53- Hospital - Ambulatory Surgical	Patient Financials
48 - Hospital Inpatient	48 - Hospital Inpatient	Patient Financials
	99 - Professional (Physician) visit - Inpatient	Patient Financials
50 - Hospital Outpatient	50 - Hospital Outpatient	Patient Financials
	51 - Emergency Accident	Patient Financials
	52 - Emergency Medical	Patient Financials

	A0 - Professional (physician) Visit Outpatient	Patient Financials
51 - Emergency Accident	51 - Emergency Accident	Patient Financials
52 - Emergency Medical	52 - Emergency Medical	Patient Financials
53 - Ambulatory Surgical	53 - Ambulatory Surgical	Patient Financials
62 - MRI/CAT Scan	62 - MRI/CAT Scan	Patient Financials
65 - Newborn Care	65 - Newborn Care	Patient Financials
68 - Well Baby Care	68 - Well Baby Care	Patient Financials
73 - Diagnostic Medical	73 - Diagnostic Medical	Active/ Inactive
	04 - Diagnostic X-Ray	Patient Financials
	05 - Diagnostic Lab	Patient Financials
	62 - MRI/CAT Scan	Patient Financials
76 - Dialysis	76 - Dialysis	Patient Financials
78 - Chemotherapy	78 - Chemotherapy	Patient Financials
80 - Immunizations	80 - Immunizations	Patient Financials
81 - Routine Physical	81 - Routine Physical	Patient Financials
82 - Family Planning	82 - Family Planning	Patient Financials
86 - Emergency Services	86 - Emergency Services	Active/ Inactive
	51 - Emergency Accident	Patient Financials
	52 - Emergency Medical	Patient Financials
88 - Pharmacy	88 - Pharmacy	Active/ Inactive
93 - Podiatry	93 - Podiatry	Patient Financials
98 - Professional (Physician) Visit - Office	98 - Professional (Physician) Visit - Office	Patient Financials
99 - Professional (Physician) Visit - Inpatient	99 - Professional (Physician) Visit - Inpatient	Patient Financials
A0 - Professional (Physician) Visit - Outpatient	A0 - Professional (Physician) Visit - Outpatient	Patient Financials
A3 - Professional (Physician) Visit - Home	A3 - Professional (Physician) Visit - Home	Patient Financials

A6 - Psychotherapy	A6 - Psychotherapy	Active/ Inactive
A7 - Psychiatric - Inpatient	A7 - Psychiatric - Inpatient	Active/ Inactive
A8 - Psychiatric - Outpatient	A8 - Psychiatric - Outpatient	Active/ Inactive
AD - Occupational Therapy	AD - Occupational Therapy	Patient Financials
AE - Physical Medicine	AE - Physical Medicine	Patient Financials
AF - Speech Therapy	AF - Speech Therapy	Patient Financials
AG - Skilled Nursing Care	AG - Skilled Nursing Care	Patient Financials
AI - Substance Abuse	AI - Substance Abuse	Active/ Inactive
AL - Vision	AL - Vision	Active/ Inactive
BG - Cardiac Rehabilitation	BG - Cardiac Rehabilitation	Patient Financials
BH - Pediatric	BH - Pediatric	Patient Financials
MH - Mental Health	MH - Mental Health	Active/ Inactive
UC - Urgent Care	UC - Urgent Care	Patient Financials

Inquiry 271 Error Responses

Error Code	Error Loop	Error Description
79	L2100A	270 Request for invalid plan/ payer
41	L2100A	Requesting user does not have access to the plan/payer
41	L2100B	API key is invalid or NPI does not have access to the requested plan/ payer.
15	L2100C	Minimum search criteria was not met
71	L2100C	Date of Birth mismatch. (Subscriber ID not provided.)
72	L2100C	Failed to match subscriber ID.
73	L2100C	Subscriber name mismatch. (Subscriber ID not provided and any name does not match exactly OR Subscriber ID is provided and both names do not match exactly)

76	L2100C	Multiple results were found matching the inquiry criteria.
78	L2100C	Subscriber was not found under the plan/ payer specified in the 270 inquiry.

APPENDIX

Organizations

Organization	L2100A.NM03
AllCare CCO	AllCareCCO
Aspire Health Plan	Aspire
Capitol Dental Care Inc	CDC
Dental3	D3
HealthShare CCO	HEALTHSHARE_CCO
Providence Health Assurance	PHA
Providence PACE (CA, OR & WA)	PACE
Umpqua Health Alliance	UHA_CCO
Western Health Advantage	WHA
Yamhill CCO	YAMHILL_COO

Supported Service Type Codes

Service Type Code	Description
1	Medical Care
2	Surgical

4	Diagnostic X-Ray
5	Diagnostic Lab
6	Radiation Therapy
7	Anesthesia
8	Surgical Assistance
12	Durable Medical Equipment Purchase
13	Ambulatory Service Center Facility
18	Durable Medical Equipment Rental
20	Second Surgical Opinion
30	Health Benefit Plan Coverage
33	Chiropractic
35	Dental Care
40	Oral Surgery
42	Home Health Care
45	Hospice
47	Hospital
48	Hospital - Inpatient
50	Hospital - Outpatient
51	Hospital - Emergency Accident
52	Hospital - Emergency Medical
53	Hospital - Ambulatory Surgical
62	MRI /CAT Scan
65	Newborn Care
68	Well Baby Care
73	Diagnostic Medical
76	Dialysis
78	Chemotherapy

80	Immunizations
81	Routine Physical
82	Family Planning
86	Emergency Services
88	Pharmacy
93	Podiatry
98	Professional (Physician) Visit - Office
99	Professional (Physician) Visit - Inpatient
A0	Professional (Physician) Visit - Outpatient
A3	Professional (Physician) Visit - Home
A6	Psychotherapy
A7	Psychiatric - Inpatient
A8	Psychiatric - Outpatient
AD	Occupational Therapy
AE	Physical Medicine
AF	Speech Therapy
AG	Skilled Nursing Care
AI	Substance Abuse
AL	Vision
BG	Cardiac Rehabilitation
BH	Pediatric
MH	Mental Health
UC	Urgent Care