



Query Claim Status API

User Interface Guidelines

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Business Group	Digital Consumed Services
	Nathan Bramley

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VERSION HISTORY

Date	Version	Change
March 2018	1.0	Initial Release
June 2020	1.1	No material change; only cosmetics.
August 2022	1.2	Changed title and file name to read Tips & Tricks as opposed to User Interface
	1.3	
May 2023	1.4	Document title change ONLY from Tips & Tricks to reflect the true nature of the document. No content change
	1.5	Cleaning up formatting and pagination.
June 2023	1.6	Section 3: Added two additional Claim Number patterns of 99999AA and 9999AAA.

1 INTRODUCTION

Support material for APIs consists of:

1. Context:
 - a. Provider API User Interface - Provides overall context for the service the specific API supports; and
2. The specific API:
 - a. Common Specification;
 - b. Query Claim Status API User Interface - This document as a repository for remaining important items.

This document contains information specific to this API regards:

1. Quirks; and
1. Support messages for the Provider.

For the latter item, a table is provided, and each item within is classified as follows:

2. **Required**
ACC will check integration prior to go live.
3. **Recommended**
ACC have learnt, primarily from Provider feedback, that this is good for the Provider; resulting in better quality submissions & less pain for them.
4. **Optional**
Something ACC has learnt for your consideration.

2 QUIRKS

Providers need a valid Digital Certificate and a registered ACC Provider ID and Vendor ID.

3 QUERY CLAIM STATUS – SUPPORT MESSAGES FOR THE PROVIDER

Provided with current solutions to assist Providers understand what is expected of them by ACC. All are to be considered “Recommended”.

Current Offering Term	API JSON Field Name	Provider Support Message
Query parameters		
Enter Provider ID & Vendor ID	(Heading)	To perform a search enter your ACC Provider ID and ACC Vendor ID (both are required). All searches are recorded against these ID numbers to stop unauthorised access to this information.
ACC claim number(s) or NHI number & DOB	(Heading)	<p>Enter the search details, either:</p> <ul style="list-style-type: none"> • Up to five ACC45 claim number(s); or • The client’s NHI number and date of birth (both are required). <p>Note: When searching by a client’s NHI number and Date of Birth claims will only be displayed where the Date of Accident is within the last five years.</p>
Claim Number	claimNumber	The ACC45 number; current formats being AANNNNN, 99999AA and 9999AAA.
Claim ID	claimId	This is ACC’s internally issued claim number that appears in resulting correspondence; current format is NNNNNNNNNN. This is not the ACC45 Number.

Current Offering Term	API JSON Field Name	Provider Support Message
Results		
Cover status	(Heading)	<p>The Cover Status column will show the status of the claim e.g. Accept, Declined, Held, Not Available or Not Applicable. The Not Applicable status means the claim is not yet registered by ACC.</p> <p>If the search results displays "Not available - please contact ACC Provider Helpline on 0800 222 070" this means the claim is registered as a Sensitive, ACC Staff or Accredited Employer claim.</p> <p>If the claim number is a duplicate of another claim then a message under the claim number will display "Please use claim XXXXXXXXXX, the master record for this claim", and master claim details will be displayed in the result set.</p>
Diagnosis detail	(Heading)	<p>When you select a specific claim, the detail section shows the Injury Status, Diagnosis Code, Description & Side, NHI Number (only part of the NHI Number is displayed) and the Date of Accident.</p>
Status	(Heading)	<p>Receipted = The claim has passed all validation checks and has been received by ACC for processing. The claim cannot be edited. <u>Action</u> = No further action required.</p> <p>Failed = The claim contains information that is either incomplete and/or incorrect. The claim cannot be processed by ACC. Failed claims display an error code and a reason. <u>Action</u> = Errors must be corrected before the claim is resubmitted. This must be done from the system that was used to originally submit the claim.</p> <p>Invalid = The claim is submitted with an invalid number. <u>Action</u> = Update the claim number.</p>