

Care Coordination Claims Data (CCCD) Connectivity Process

This document clarifies steps for connectivity to and use of Care Coordination Claims Data (CCCD).

CCCD Description and Documentation: The CCCD encompasses historical and ongoing claims data on individual Medicaid recipients for the purposes of risk stratification of those recipients at the time of their enrollment into a health plan. For further information, please see data dictionaries, FAQs, sample data, and other documentation [here](#).

Parameters for Appropriate Data Use: Under HIPAA law, CCCD is considered fully identified data and must be treated with the highest level of HIPAA compliance. Refer to contracts for further details.

Required Personnel: A staff member of the IT Department of the health plan must serve as a contact for data access and security. This contact is typically not a general contact for administrative or contract implementation, as this role involves familiarity with data connectivity, networking, and FTP. The most effective choice is typically a system administrator or network administrator. HFS favors a contact from the health plan's in-house IT department whenever possible.

Steps to Data Connectivity:

1. All health plans complete a provider enrollment application which includes a series of documents, including forms w-9, 1413, 1513, and 2243.
2. When forms are received, The HFS Provider Participation Unit (PPU) issues the health plan an HFS provider number.
3. Then the HFS Bureau of Managed Care (BMC) sends out a form 1706 to the health plan for completion.
4. BMC will forward the completed 1706 form to HFS Bureau of Technical Support (BTS). BTS will review the form and forward it to Network Services in the Office of Information Services (OIS). OIS will create a Random Access Control Identification (RACF ID) for the health plan as a means to verify user identity (estimated turnaround: 2 working days). At the same time, OIS will reach out to the State Central Management Services (CMS) to initiate the process of creating a Unix (USS) directory for secure data delivery.
5. When the Unix directory is available (estimated turnaround: 5-7 working days), an OIS employee will communicate with the health plan about technical aspects of connecting the network of the health plan to the Unix directory. This will include testing to ensure successful connection. Written instructions will be available to each health plan during this process. Connectivity to HFS is via FTP-S (SSL).
6. Once connectivity has been established, the health plan will be able to retrieve an initial data run from HFS's secure FTP site by the fifth working day of the month that the health plan begins having enrollees. HFS employees will be available for trouble-shooting, if necessary.
7. Subsequent monthly data runs will be available for retrieval by the **fifth working day** of each month. Health plans may automate download with a software app of their choosing. (Data remains available for **35 calendar days** after it becomes available on the FTP site.)

Troubleshooting: For help in establishing connectivity, contact HFS.Data@illinois.gov and HFS.OIS.TechServices@illinois.gov. If problems arise after connectivity is established, include your FTP session log in an email.

Dates of Data Availability: Please see [the CCCD webpage](#) for information on the dates that data will be available each month, as these can vary between health plans.