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**ENCOUNTER REPORTING 2.5  
RELEASE NOTES**

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**Project No.:** Encounter Reporting 2.5

**Document No.:** Encounter Reporting 2.5 Release Notes

**Document Description:** Encounter Reporting 2.5 release notes for the users.

## **1.0 INTRODUCTION**

This document mainly describes enhancements to the Encounter Reporting Application to collect encounter data for both Wisconsin Pace Partnership and SSI Managed Care lines of business. Also included in this document is core product enhancement.

## **2.0 OVERVIEW**

In Encounter Reporting Release 1.5, two architectural changes were made to accommodate multi lines of business. One was the introduction of the Edit Management table. That change allowed an administrator to manipulate edits at the line of business level. The other change allowed the Encounter application to use different schemas based on the line of business.

In this release of Encounter Reporting, we detail non-architectural changes to Encounter Reporting needed to add both Wisconsin Pace Partnership and SSI Managed Care lines of business. These enhancements mainly consist of adding data elements, master look up tables and edits.

## **3.0 ENHANCEMENTS – TO ADD NEW LINES OF BUSINESS**

### **3.1 Changes to Screens**

Changed Home Page welcome message:

The overall purpose of the MCO Encounter Reporting system is to give managed care programs ability to submit claims/encounter data, in a pre-defined format, to the State of Wisconsin. Encounter data will be used to analyze a range of topics including, service costs, capitation rates, program integrity, etc.

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### 3.2 Data elements

#### 3.2.1 Data elements added:

The following data elements have been added to the Encounter Application. To see which data elements are relevant to your line of business, please refer to your specific Data Dictionary views. Where appropriate, lookup tables have been created to validate the data.

- Ninth Diagnosis Code
- Patient Discharge Status Code
- Primary ICD9 Procedure Code, Second ICD9 Procedure Code, Third ICD9 Procedure Code, Fourth ICD9 Procedure Code, Fifth ICD9 Procedure Code, & Sixth ICD9 Procedure Code
- Primary ICD9 Procedure Date, Second ICD9 Procedure Date, Third ICD9 Procedure Date, Fourth ICD9 Procedure Date, Fifth ICD9 Procedure Date, & Sixth ICD9 Procedure Date
- Type of Bill Code
- From Statement Covers Date
- To Statement Covers Date
- Admitting Diagnosis Code
- E Code
- Admit Start Care Date
- Claim Type
- Prescriber DEA number
- Prescription Number

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- Unit Dose Indicator
- Dispense as written

3.2.2 Alias name added for CMO MA ID. The data element CMO MA ID is displayed as CMO MA ID for Family Care but as Organization ID for WI Pace Partnership and SSI Managed Care. It is our intention to change the name to Organization ID for Family Care in the future.

### 3.3 Domain or Table changes

3.3.1 The Organization table was changed:

- Added the following organization Ids to the domain of valid organizations

SSI Managed Care:

69002300: Community Care Organization Milw County  
69002700: Elder Care of Dane County  
69005000: Community Living Alliance  
69005200: Community Health Partnership

WI Pace Partnership:

69002330: Community Care for the Elderly/PACE  
69002331: Community Care for the Elderly/Partnership  
69002731: Elderly Care of Wisconsin/Partnership  
69005030:Community Living Alliance/Partnership  
69005230:Community Health Partnership/Partnership

- Data Source: Added the following to the data source domain.

04 = Predictive Model  
05= Accounts Payable

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### 3.4 Edits

3.4.1 New Parser Edits created. Please note, length checks do not apply to date fields.

<b>Parser Edits</b>						
<b>Field ID</b>	<b>Error Severity</b>	<b>Edit #</b>	<b>Edit Scenario</b>	<b>Edit</b>	<b>Error Cat</b>	<b>Error Message</b>
XML Layout	Batch Reject	A009A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	The Submission XML layout must follow the schema for this line of business.	R	The Submission XML layout does not follow the schema for this line of business.
XML Layout	Batch Reject	A009B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	The Header XML layout must follow the schema for this line of business.	R	The Header XML layout does not follow the schema for this line of business.
XML Layout	Batch Reject	A009C	Encounter Vol.Contrib Cost Share R & B Denied Reversal	The Detail XML layout must follow the schema for this line of business.	R	The Detail XML layout does not follow the schema for this line of business.
XML Layout	Batch Reject	A009D	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Submissions cannot contain detail records with duplicate Record IDS.	R	A record id has been used more than once in this submission.
Record ID	Batch Reject	D004H	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Duplicate record ids are not allowed in the submission	R	INVALID DATA. Duplicate record id in submission.
Ninth Diagnosis Code	Batch Reject	D077A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Ninth Diagnosis is provided, it must be an alpha numeric dot data Type.	S	INVALID DATA TYPE. Ninth Diagnosis is not an alphanumeric dot data Type.

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Ninth Diagnosis Code	Batch Reject	D077B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Ninth Diagnosis is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Ninth Diagnosis does not conform to max length specified in the data dictionary.
Patient Discharge Status Code	Batch Reject	D078A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Patient Discharge Status Code is provided, it must be an alpha numeric data type.	M	INVALID DATA TYPE. Patient Discharge Status Code is not an alphanumeric data type.
Patient Discharge Status Code	Batch Reject	D078B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Patient Discharge Status Code is provided, it must conform to max length specified in the data dictionary.	M	INVALID LENGTH. Patient Discharge Status Code does not conform to max length specified in the data dictionary.
Primary ICD9 Procedure Code	Batch Reject	D079A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Primary ICD9 Procedure Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Primary ICD9 Procedure Code is not an alphanumeric data type.
Primary ICD9 Procedure Code	Batch Reject	D079B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Primary ICD9 Procedure Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Primary ICD9 Procedure Code does not conform to max length specified in the data dictionary.
Second ICD9 Procedure Code	Batch Reject	D080A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Second ICD9 Procedure Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Second ICD9 Procedure Code is not an alphanumeric data type.
Second ICD9 Procedure Code	Batch Reject	D080B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Second ICD9 Procedure Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Second ICD9 Procedure Code does not conform to max length specified in the data dictionary.

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Third ICD9 Procedure Code	Batch Reject	D081A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Third ICD9 Procedure Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Third ICD9 Procedure Code is not an alphanumeric data type.
Third ICD9 Procedure Code	Batch Reject	D081B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Third ICD9 Procedure Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Third ICD9 Procedure Code does not conform to max length specified in the data dictionary.
Fourth ICD9 Procedure Code	Batch Reject	D082A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Fourth ICD9 Procedure Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Fourth ICD9 Procedure Code is not an alphanumeric data type.
Fourth ICD9 Procedure Code	Batch Reject	D082B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Fourth ICD9 Procedure Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Fourth ICD9 Procedure Code does not conform to max length specified in the data dictionary.
Fifth ICD9 Procedure Code	Batch Reject	D083A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Fifth ICD9 Procedure Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Fifth ICD9 Procedure Code is not an alphanumeric data type.
Fifth ICD9 Procedure Code	Batch Reject	D083B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Fifth ICD9 Procedure Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Fifth ICD9 Procedure Code does not conform to max length specified in the data dictionary.
Sixth ICD9 Procedure Code	Batch Reject	D084A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Sixth ICD9 Procedure Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Sixth ICD9 Procedure Code is not an alphanumeric data type.
Sixth ICD9	Batch Reject	D084B	Encounter	When Sixth ICD9	S	INVALID LENGTH. Sixth

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Procedure Code			Vol.Contrib Cost Share R & B Denied Reversal	Procedure Code is provided, it must conform to max length specified in the data dictionary.		ICD9 Procedure Code does not conform to max length specified in the data dictionary.
Primary ICD9 Procedure Date	Batch Reject	D085A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Primary ICD9 Procedure Date is provided, it must be valid date format	S	INVALID DATA TYPE. Primary ICD9 Procedure Date is not a valid date format
Second ICD9 Procedure Date	Batch Reject	D086A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Second ICD9 Procedure Date is provided, it must be valid date format	S	INVALID DATA TYPE. Second ICD9 Procedure Date is not a valid date format
Third ICD9 Procedure Date	Batch Reject	D087A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Third ICD9 Procedure Date is provided, it must be valid date format	S	INVALID DATA TYPE. Third ICD9 Procedure Date is not a valid date format
Fourth ICD9 Procedure Date	Batch Reject	D088A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Fourth ICD9 Procedure Date is provided, it must be valid date format	S	INVALID DATA TYPE. Fourth ICD9 Procedure Date is not a valid date format
Fifth ICD9 Procedure Date	Batch Reject	D089A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Fifth ICD9 Procedure Date is provided, it must be valid date format	S	INVALID DATA TYPE. Fifth ICD9 Procedure Date is not a valid date format
Sixth ICD9 Procedure Date	Batch Reject	D090A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Sixth ICD9 Procedure Date is provided, it must be valid date format	S	INVALID DATA TYPE. Sixth ICD9 Procedure Date is not a valid date format
Type of Bill Code	Batch Reject	D091A	Encounter Vol.Contrib Cost Share R & B	When Type of Bill Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Type of Bill Code is not an alphanumeric data type.

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			Denied Reversal			
Type of Bill Code	Batch Reject	D091B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Type of Bill Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Type of Bill Code does not conform to max length specified in the data dictionary.
From Statement Covers Date	Batch Reject	D092A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When From Statement Covers Date is provided, it must be valid date format	S	INVALID DATA TYPE. From Statement Covers Date is not a valid date format
To Statement Covers Date	Batch Reject	D093A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When To Statement Covers Date is provided, it must be valid date format	S	INVALID DATA TYPE. To Statement Covers Date is not a valid date format
Admitting Diagnosis Code	Batch Reject	D094A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Admitting Diagnosis Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Admitting Diagnosis Code is not an alphanumeric data type.
Admitting Diagnosis Code	Batch Reject	D094B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Admitting Diagnosis Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Admitting Diagnosis Code does not conform to max length specified in the data dictionary.
E Code	Batch Reject	D095A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When E Code is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. E Code is not an alphanumeric data type.
E Code	Batch Reject	D095B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When E Code is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. E Code does not conform to max length specified in the data dictionary.
Admit Start	Batch Reject	D096A	Encounter	When Admit Start	S	INVALID DATA TYPE.

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Care Date			Vol.Contrib Cost Share R & B Denied Reversal	Care Date is provided, it must be valid date format		Admit Start Care Date is not a valid date format
Claim Type	Batch Reject	D097A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Claim Type is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Claim Type is not an alphanumeric data type.
Claim Type	Batch Reject	D097B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Claim Type is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Claim Type does not conform to max length specified in the data dictionary.
Prescriber DEA Number	Batch Reject	D098A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Prescriber DEA Number is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Prescriber DEA Number is not an alphanumeric data type.
Prescriber DEA Number	Batch Reject	D098B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Prescriber DEA Number is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Prescriber DEA Number does not conform to max length specified in the data dictionary.
Prescription Number	Batch Reject	D099A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Prescription Number is provided, it must be an alpha numeric data type.	S	INVALID DATA TYPE. Prescription Number is not an alphanumeric data type.
Prescription Number	Batch Reject	D099B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Prescription Number is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Prescription Number does not conform to max length specified in the data dictionary.
Unit Dose Indicator	Batch Reject	D100A	Encounter Vol.Contrib Cost Share	When Unit Dose Indicator is provided, it must	S	INVALID DATA TYPE. Unit Dose Indicator is not an alphanumeric data type.

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			R & B Denied Reversal	be an alpha numeric data type.		
Unit Dose Indicator	Batch Reject	D100B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Unit Dose Indicator is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Unit Dose Indicator does not conform to max length specified in the data dictionary.
Dispense As Written Indicator	Batch Reject	D101A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Dispense As Written Indicator is provided, it must be an alphanumeric data type.	S	INVALID DATA TYPE. Dispense As Written Indicator is not an alphanumeric data type.
Dispense As Written Indicator	Batch Reject	D101B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	When Dispense as Written is provided, it must conform to max length specified in the data dictionary.	S	INVALID LENGTH. Dispense as Written does not conform to max length specified in the data dictionary.
Organization ID	Batch Reject	D102A	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must be provided in the header record	R	MISSING DATA. Organization ID is not provided in the header record
Organization ID	Batch Reject	D102B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must be alphanumeric data type.	R	INVALID DATA TYPE. Organization ID is not alphanumeric data type.
Organization ID	Batch Reject	D102C	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must be 8 bytes in length.	R	INVALID LENGTH. Organization ID must be 8 bytes in length.
Organization ID	Batch Reject	H007A	Encounter Vol.Contrib Cost Share R & B	Organization ID must be provided in the header record	H	MISSING DATA. Organization ID is not provided in the header record

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			Denied Reversal			
Organization ID	Batch Reject	H007B	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must be alphanumeric data type.	H	INVALID DATA TYPE. Organization ID is not alphanumeric data type.
Organization ID	Batch Reject	H007C	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must be 8 bytes in length.	H	INVALID LENGTH. Organization ID must be 8 bytes in length.
Organization ID	Batch Reject	H007D	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID in the header must match the value supplied in the GUI (submission table)	H	MISMATCHING DATA. Organization ID in the header does not match the value supplied in the GUI (submission table)

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### 3.4.2 New Content Edits: Code Validation and Business Rules.

<b>Content Edits: Code Validation</b>						
<b>Field ID</b>	<b>Error Severity</b>	<b>Edit #</b>	<b>Edit Scenario</b>	<b>Edit</b>	<b>Error Cat</b>	<b>Error Message</b>
MA Billing Provider ID	Warning	D018F	Encounter	When Billing Provider ID is provided, it must be within date range.	P	INVALID DATA. MA Billing Provider ID is not within date range.
MARendering Provider ID	Warning	D024E	Encounter	When MA Rendering Provider ID is provided, it must be within date range.	P	INVALID DATA. MA Rendering provider ID is not within date range.
Patient Discharge Status Code	Batch Accept	D078C	Encounter Vol.Contrib Cost Share R & B	When Patient Discharge Status Code is provided, it must exist in the Master Lookup Table.	M	INVALID DATA. Patient Discharge Status Code is not valid.
Patient Discharge Status Code	Batch Accept	D078D	Encounter Vol.Contrib Cost Share R & B	When Patient Discharge Status Code is provided, it must be within date range	M	INVALID DATA. Patient Discharge Status Code is not within date range.
Primary ICD9 Procedure Code	Batch Accept	D079C	Encounter Vol.Contrib Cost Share R & B	When Primary ICD9 Procedure Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Primary ICD9 Procedure Code is not valid.
Primary ICD9 Procedure Code	Batch Accept	D079D	Encounter Vol.Contrib Cost Share R & B	When Primary ICD9 Procedure Code is provided, it must be within date range of the Primary ICD9 Procedure Code.	S	INVALID DATA. Primary ICD9 Procedure Code is not within date range of the Primary ICD9 Procedure Code.
Second ICD9 Procedure Code	Batch Accept	D080C	Encounter Vol.Contrib Cost Share	When Second ICD9 Procedure Code is provided,	S	INVALID DATA. Second ICD9 Procedure Code is not valid.

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			R & B	it must exist in the Master Lookup Table.		
Second ICD9 Procedure Code	Batch Accept	D080D	Encounter Vol.Contrib Cost Share R & B	When Second ICD9 Procedure Code is provided, it must be within date range of the Second ICD9 Procedure Code.	S	INVALID DATA. Second ICD9 Procedure Code is not within date range of the Second ICD9 Procedure Code
Third ICD9 Procedure Code	Batch Accept	D081C	Encounter Vol.Contrib Cost Share R & B	When Third ICD9 Procedure Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Third ICD9 Procedure Code is not valid.
Third ICD9 Procedure Code	Batch Accept	D081D	Encounter Vol.Contrib Cost Share R & B	When Third ICD9 Procedure Code is provided, it must be within date range of the Third ICD9 Procedure Code.	S	INVALID DATA. Third ICD9 Procedure Code is not within date range of the Third ICD9 Procedure Code.
Fourth ICD9 Procedure Code	Batch Accept	D082C	Encounter Vol.Contrib Cost Share R & B	When Fourth ICD9 Procedure Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Fourth ICD9 Procedure Code is not valid.
Fourth ICD9 Procedure Code	Batch Accept	D082D	Encounter Vol.Contrib Cost Share R & B	When Fourth ICD9 Procedure Code is provided, it must be within date range of the Fourth ICD9 Procedure Code.	S	INVALID DATA. Fourth ICD9 Procedure Code is not within date range of the Fourth ICD9 Procedure Code.
Fifth ICD9 Procedure Code	Batch Accept	D083C	Encounter Vol.Contrib Cost Share R & B	When Fifth ICD9 Procedure Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Fifth ICD9 Procedure Code is not valid.
Fifth ICD9 Procedure Code	Batch Accept	D083D	Encounter Vol.Contrib Cost Share R & B	When Fifth ICD9 Procedure Code is provided, it must be within date range of the Fifth ICD9 Procedure	S	INVALID DATA. Fifth ICD9 Procedure Code is not within date range of the Fifth ICD9 Procedure Code.

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				Code.		
Sixth ICD9 Procedure Code	Batch Accept	D084C	Encounter Vol.Contrib Cost Share R & B	When Sixth ICD9 Procedure Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Sixth ICD9 Procedure Code is not valid.
Sixth ICD9 Procedure Code	Batch Accept	D084D	Encounter Vol.Contrib Cost Share R & B	When Sixth ICD9 Procedure Code is provided, it must be within date range of the Sixth CD9 Procedure Code.	S	INVALID DATA. Sixth ICD9 Procedure Code is not within date range of the Sixth ICD9 Procedure Code.
Type of Bill Code	Batch Accept	D091C	Encounter Vol.Contrib Cost Share R & B	When Type of Bill Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Type of Bill Code is not valid.
Admitting Diagnosis Code	Batch Accept	D094C	Encounter Vol.Contrib Cost Share R & B	When Admitting Diagnosis Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Admitting Diagnosis Code is not valid.
Admitting Diagnosis Code	Batch Accept	D094D	Encounter Vol.Contrib Cost Share R & B	When Admitting Diagnosis Code is provided, it must be within date range.	S	INVALID DATA. Admitting Diagnosis Code is not within date range.
E Code	Batch Accept	D095C	Encounter Vol.Contrib Cost Share R & B	When E Code is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. E Code is not valid.
E Code	Batch Accept	D095D	Encounter Vol.Contrib Cost Share R & B	When E Code is provided, it must be within date range.	S	INVALID DATA. E Code is not within date range.
Claim Type	Batch Accept	D097C	Encounter Vol.Contrib Cost Share R & B	When Claim Type is provided, it must exist in the Master Lookup Table.	S	INVALID DATA. Claim Type is not valid.
Prescriber DEA number	Warning	D098C	Encounter Vol.Contrib Cost Share R & B	When Prescriber DEA number is provided, it must exist in the master lookup table	S	Informational data: Prescriber DEA number is not valid.

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Prescriber DEA number	Batch Accept	D098H	Encounter Vol.Contrib Cost Share R & B	When Prescriber DEA number is provided, the number must follow a mathematical formula.	S	INVALID DATA. Prescriber DEA number does not follow a mathematical formula.
Unit Dose Indicator	Batch Accept	D100C	Encounter Vol.Contrib Cost Share R & B	When Unit Dose Indicator is provided, it must be 0,1, 2 or 3.	S	INVALID DATA. Unit Dose Indicator is not valid.
Dispense as Written Indicator	Batch Accept	D101C	Encounter Vol.Contrib Cost Share R & B	When Dispense as Written Indicator is provided, it must be a 0, 1 or 8	S	INVALID DATA. Dispense as Written Indicator is not valid.
Organization ID	Batch Reject	D102D	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must exist in the master lookup table.	R	INVALID DATA. Organization ID does not exist in the master lookup table.
Organization ID	Batch Reject	H007E	Encounter Vol.Contrib Cost Share R & B Denied Reversal	Organization ID must exist in the master lookup table.	H	INVALID DATA. Organization ID does not exist in the master lookup table.

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<b>Content Edits: Business Rules</b>						
<b>Field ID</b>	<b>Error Severity</b>	<b>Edit #</b>	<b>Edit Scenario</b>	<b>Edit</b>	<b>Error Cat</b>	<b>Error Message</b>
Record ID	Batch Reject	D004E	Encounter Vol.Contrib Cost Share R & B Denied	Record ID must begin with MCDA.	R	INVALID RECORD This Record ID does not begin with MCDA.
Record ID	Batch Reject	D004F	Encounter Vol.Contrib Cost Share R & B Denied	Record ID must begin with WPS.	R	INVALID RECORD This Record ID does not begin with WPS.
Record ID	Batch Reject	D004G	Encounter Vol.Contrib Cost Share R & B Denied	Record ID must not begin with WPS or MCDA.	R	INVALID RECORD This Record ID must not begin with WPS or MCDA.
Original ID	Warning	D006E	Encounter Vol.Contrib Cost Share R & B	When Record Type = C or N, Original Record ID must be provided.	A	MISSING DATA: On an adjustment record an Original Record ID was not provided. Therefore, an Original Record ID has been inserted.
Recipient ID	Warning	D030H	Encounter Vol.Contrib Cost Share R & B	When a valid Recipient is provided, it must have Pace Partnership eligibility.	M	INFORMATIONAL. The Pace Partnership eligibility segment is not found.
Recipient ID	Warning	D030I	Encounter Vol.Contrib Cost Share R & B	When a valid Recipient is provided, it must have SSI Managed Care eligibility.	M	INFORMATIONAL. The SSI Managed Care eligibility segment is not found.
To Date of Service	Batch Accept	D043D	Encounter	If Claim Type = Pharmacy, To Date of Service must be less than or equal to posting date.	S	INVALID DATA. To Date of Service is not less than or equal to posting date.
National Place of Service	Batch Accept	D044G	Encounter	If Claim Type = professional, Place of Service must be provided.	S	MISSING DATA. Claim Type is professional, and Place of Service is not provided.

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ICD9 Procedure Code, Procedure Code or Revenue Code	Batch Accept	D046I	Encounter	“any” ICD9 Procedure Code, Procedure Code or Revenue Code must be provided.	S	MISSING DATA. ICD9 Procedure Code, Procedure Code or the Revenue Code is not provided.
Member Share	Batch Reject	D063F	Encounter Vol.Contrib Cost Share R & B Denied	Member Share must equal N	A	INVALID DATA Member share does not equal N
Member Share	Batch Reject	D063G	Encounter Vol.Contrib Cost Share R & B Denied	Member Share must equal C, R or V	A	INVALID DATA Member share does not equal C, R, or V
Recipient Death date	Warning	D072E	Encounter Vol.Contrib Cost Share R & B	When the MMIS recipient Master table has a death date, the death date must be provided.	M	Informational. The MMIS recipient Master table has a death date, and the death was not provided.
Patient Discharge Status Code	Batch Accept	D078E	Encounter	If Claim Type = Institutional, Patient Discharge Status Code must be provided.	S	MISSING DATA. Claim Type is Institutional, and Patient Discharge Status Code is not provided.
Patient Discharge Status Code	Batch Accept	D078F	Vol.Contrib Cost Share R & B	Patient Discharge Status Code must be null for member share.	S	INVALID DATA. Patient Status Discharge Code is not null for member share.
ICD9 Procedure Code	Batch Accept	D079E	Encounter	If any ICD9 Procedure Code is provided, a Revenue Code must be provided.	S	MISSING DATA. ICD9 Procedure Code is provided, and the Revenue Code is not provided
Primary ICD9 Procedure Code	Batch Accept	D079F	Encounter	When Primary ICD9 Procedure Code is provided, the corresponding ICD9 Procedure Date must be provided.	S	MISSING DATA. Primary ICD9 Procedure Code is provided and the corresponding ICD9 Procedure Date is not provided.
ICD9 Procedure Code	Batch Accept	D079G	Encounter	ICD9 Procedure Codes must be filled sequentially and without gaps.	S	INVALID SEQUENCE. ICD9 Procedure Code is not filled sequentially and without gaps.
Second ICD9	Batch	D080E	Encounter	When Second ICD9	S	MISSING DATA. Second

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Procedure Code	Accept			Procedure Code is provided, the corresponding ICD9 Procedure Date must be provided.		ICD9 Procedure Code is provided and the corresponding ICD9 Procedure Date is not provided.
Third ICD9 Procedure Code	Batch Accept	D081E	Encounter	When Third ICD9 Procedure Code is provided, the corresponding ICD9 Procedure Date must be provided.	S	MISSING DATA. Third ICD9 Procedure Code is provided and the corresponding ICD9 Procedure Date is not provided.
Fourth ICD9 Procedure Code	Batch Accept	D082E	Encounter	When Fourth ICD9 Procedure Code is provided, the corresponding ICD9 Procedure Date must be provided.	S	MISSING DATA. Fourth ICD9 Procedure Code is provided and the corresponding ICD9 Procedure Date is not provided.
Fifth ICD9 Procedure Code	Batch Accept	D083E	Encounter	When Fifth ICD9 Procedure Code is provided, the corresponding ICD9 Procedure Date must be provided.	S	MISSING DATA. Fifth ICD9 Procedure Code is provided and the corresponding ICD9 Procedure Date is not provided.
Sixth ICD9 Procedure Code	Batch Accept	D084E	Encounter	When Sixth ICD9 Procedure Code is provided, the corresponding ICD9 Procedure Date must be provided.	S	MISSING DATA. Sixth ICD9 Procedure Code is provided and the corresponding ICD9 Procedure Date is not provided.
Primary ICD9 Procedure Date	Batch Accept	D085B	Encounter	When Primary ICD9 Procedure Date is provided, corresponding ICD9 Procedure Code must be provided.	S	MISSING DATA. Primary ICD9 Procedure Date is provided and the corresponding ICD9 Procedure Code is not provided.
ICD9 Procedure Date	Batch Accept	D085C	Encounter	ICD9 Procedure Date must be filled sequentially and without gaps.	S	INVALID SEQUENCE. ICD9 Procedure Date is not filled sequentially and without gaps.
Second ICD9 Procedure Date	Batch Accept	D086B	Encounter	When Second ICD9 Procedure Date is provided, corresponding ICD9 Procedure Code must be provided.	S	MISSING DATA. Second ICD9 Procedure Date is provided and the corresponding ICD9 Procedure Code is not provided.
Third ICD9	Batch	D087B	Encounter	When Third ICD9	S	MISSING DATA. Third

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Procedure Date	Accept			Procedure Date is provided, corresponding ICD9 Procedure Code must be provided.		ICD9 Procedure Date is provided and the corresponding ICD9 Procedure Code is not provided.
Fourth ICD9 Procedure Date	Batch Accept	D088B	Encounter	When Fourth ICD9 Procedure Date is provided, corresponding ICD9 Procedure Code must be provided.	S	MISSING DATA. Fourth ICD9 Procedure Date is provided and the corresponding ICD9 Procedure Code is not provided.
Fifth ICD9 Procedure Date	Batch Accept	D089B	Encounter	When Fifth ICD9 Procedure Date is provided, corresponding ICD9 Procedure Code must be provided.	S	MISSING DATA. Fifth ICD9 Procedure Date is provided and the corresponding ICD9 Procedure Code is not provided.
Sixth ICD9 Procedure Date	Batch Accept	D090B	Encounter	When Sixth ICD9 Procedure Date is provided, corresponding ICD9 Procedure Code must be provided.	S	MISSING DATA. Sixth ICD9 Procedure Date is provided and the corresponding ICD9 Procedure Code is not provided.
Type of Bill Code	Batch Accept	D091E	Encounter	If Claim Type = Institutional, Type of Bill Code must be provided.	S	MISSING DATA. Claim Type is institutional, and the Type of Bill Code is not provided.
Type of Bill Code	Batch Accept	D091F	Vol.Contrib Cost Share R & B	Type of Bill Code must be null for member share.	S	INVALID DATA. Type of Bill Code is not null for member share.
From Statement Covers Date	Batch Accept	D092B	Encounter	If Claim Type = Institutional, From Statement Covers Date must be provided.	S	MISSING DATA. Claim Type is institutional, and From Statement Covers Date is not provided.
From Statement Covers Date	Batch Accept	D092C	Vol.Contrib Cost Share R & B	From Statement Covers Date must be null for member share.	S	INVALID DATA. From Statement Covers Date is not null for member share.
To Statement Covers Date	Batch Accept	D093B	Encounter	If Claim Type = Institutional, To Statement Covers Date must be provided.	S	MISSING DATA. Claim Type is institutional, and To Statement Covers Date is not provided.
To Statement Covers Date	Batch Accept	D093C	Vol.Contrib Cost Share	To Statement Covers Date must be null for	S	INVALID DATA. To Statement Covers Date is

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			R & B	member share.		not null for member share.
To Statement Covers Date	Batch Accept	D093D	Encounter	If To Statement Covers Date and From Statement Covers Date is present, To Statement Covers Date must be greater than or equal to From Statement Covers Date"	S	INVALID DATA: To Statement Covers Date is not greater than or equal to From Statement Covers Date,
Admitting Diagnosis Code	Batch Accept	D094E	Vol.Contrib Cost Share R & B	Admitting Diagnosis Code must be null for member share.	S	INVALID DATA. Admitting Diagnosis Code is not null for member share.
Admit Start Care Date	Batch Accept	D096B	Encounter	If Claim Type = Institutional, Admit Start Care Date must be provided.	S	MISSING DATA. Claim Type is Institutional, and Admit Start Care Date is not provided.
Admit Start Care Date	Batch Accept	D096C	Vol.Contrib Cost Share R & B	Admit Start Care Date must be null for member share.	S	INVALID DATA. Admit Start Care Date is not null for member share.
Admit Start Care Date	Batch Accept	D096D	Encounter	When Admit Start Care Date is present, it must equal From Date of Service	S	INVALID DATA: Admit Start Care Date does not equal From Date of Service.
Claim Type	Batch Reject	D097E	Encounter	Claim Type must be provided.	S	MISSING DATA. Claim Type is not provided.
Claim Type	Batch Accept	D097F	Vol.Contrib Cost Share R & B	Claim Type must be null for member share.	S	INVALID DATA. Claim Type is not null for member share.
Prescriber DEA Number	Batch Accept	D098E	Encounter	If Claim Type = Pharmacy, Prescriber DEA Number must be provided.	S	MISSING DATA. Claim Type is Pharmacy, and Prescriber DEA Number is not provided.
Prescriber DEA Number	Batch Accept	D098F	Vol.Contrib Cost Share R & B	Prescriber DEA Number must be null for member share.	S	INVALID DATA. Prescriber DEA Number is not null for member share.
Prescription Number	Batch Accept	D099E	Encounter	If Claim Type = Pharmacy, Prescription Number must be provided.	S	MISSING DATA. Claim Type is Pharmacy, and Prescription Number is not provided.

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Prescription Number	Batch Accept	D099F	Vol.Contrib Cost Share R & B	Prescription Number must be null for member share.	S	INVALID DATA. Prescription Number is not null for member share.
Unit Dose Indicator	Batch Accept	D100E	Encounter	If Claim Type = Pharmacy, Unit Dose Indicator must be provided.	S	MISSING DATA. Claim Type is Pharmacy, and Unit Dose Indicator is not provided.
Unit Dose Indicator	Batch Accept	D100F	Vol.Contrib Cost Share R & B	Unit Dose Indicator must be null for member share.	S	INVALID DATA. Unit Dose Indicator is not null for member share.
Dispense As Written	Batch Accept	D101E	Encounter	If Claim Type = Pharmacy, Dispense As Written must be provided.	S	MISSING DATA. Claim Type is Pharmacy, and Dispense As Written is not provided.
Dispense As Written	Batch Accept	D101F	Vol.Contrib Cost Share R & B	Dispense As Written must be null for member share.	S	INVALID DATA. Dispense As Written is not null for member share.
Organization ID	Batch Reject	D102E	Encounter Vol.Contrib Cost Share R & B Denied	Organization ID on the detail record must match the Organization ID on the header record	R	MISMATCHING DATA Organization ID on the detail record does not match the Organization ID on the header record

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3.4.3 Edits Obsoleted at the Encounter Level. Please note, these edits have been replaced by D063F, D063G, D004E, D004F & D004G.

- Edit D02E: CMO MA ID for 69005800 or 69005820 must not use member share equals N
- Edit D02F: CMO MA ID for 69005810 must not use member share equals C, R or V
- Edit D02G: CMO MA ID for 69005810 must begin their record ids with MCDA
- Edit D02H: CMO MA ID for 69005820 must begin their record ids with WPS
- Edit D02I: CMO MA ID for 69005800 must not begin their record ids with WPS or MCDA

3.4.4 Edits not activated for each of the line of business:

Family Care

- All edits for Ninth Diagnosis Code: D77x
- All edits for Patient Discharge Status Code: D78x
- All edits for Primary through Sixth ICD9 Procedure Code: D79x through D84x
- All edits for Primary through Sixth ICD9 Procedure Date: D85x through D90x
- All edits for Type of Bill Code: D91x
- All edits for From Statement Covers Date: D92x
- All edits for To Statement Covers Date: D93x
- All edits for Admitting Diagnosis Code: D94x
- All edits for E Code: D95x
- All edits for Admit Start Care Date: D96x

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- All edits for Claim Type: D97x
- All edits for Prescriber DEA Number: D98x
- All edits for Prescription Number: D99x
- All edits for Unit Dose Indicator: D100x
- All edits for Dispense As Written Indicator: 101x
- Edit D30H: Recipient eligibility to Pace Partnership
- Edit D30I: Recipient eligibility to SSI Managed Care.
- Edit D43D: For Pharmacy claims, To date of Service must be less than or equal to Posting Date.
- Edit D44G: For Professional claims, Nat'l Place of Service must be provided.
- Edit D46I: ICD9 Procedure Code, Procedure Code or Revenue Code must be present.
- Edit D04E for organization ID's that are non 69005810 ( I .e., only turn it on for 69005810)
- Edit D04F for organization ID's that are non 69005800. ( I .e., only turn it on for 69005800)
- Edit D04G for organization ID's that are non 69005810 or 69005820. ( I .e., only turn it on for 69005810 & 69005820)
- Edit D63F for organization ID's that are non 69005810 or 69005820. ( I .e., only turn it on for 69005810 & 69005820)
- Edit D63G for organization ID's that are non 69005810 ( I .e., only turn it on for 69005810)

SSI Managed Care

- All edits for CMO Reason Code: D17x
- All edits for Unit or Basis of Measurement: D53x

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- All edits for SPC: D54x, D55x and D74x
- Edits D04E-D04G: Record ID naming convention edit
- Edit D30E: Recipient eligibility to Family Care
- Edit D30H: Recipient eligibility to Pace Partnership
- Edit D46G: Procedure Code or Revenue Code must be present
- Edits D63F-D63G: Member share relationship edits

Wisconsin Pace Partnership:

- All edits for CMO Reason Code: D17x
- All edits for Unit or Basis of Measurement: D53x
- All edits for SPC: D54x, D55x and D74x
- Edits D04E-D04G: Record ID naming convention edit
- Edit D30E: Recipient eligibility to Family Care
- Edit D30I: Recipient eligibility to SSI Managed Care
- Edit D46G: Procedure Code or Revenue Code must be present
- Edits D63F-D63G: Member share relationship edits

3.4.5 Edit Severity modified for each of the line of business.

Family Care

- (none at this time)

SSI Managed Care

- Edit D58F: Paid Amount must be less than or equal to Charges set to a Warning

Wisconsin Pace Partnership

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- Edit D58F: Paid Amount must be less than or equal to Charges set to a Warning

## **4.0 ENHANCEMENTS – CORE PRODUCT**

### 4.1 Main Menu enhancement

Main Menu now has the 2 more links. This section will contain documentation relevant to the Encounter Application.

- On-line Documentation
- FAQ

### 4.2 Created e-mail notifications for Purged Files.

A "purged file email" will be sent to everyone that currently gets the "Encounter - Uploaded File Finished Processing" email.

- Subject of email : Encounter - Purged File(s) Finished Processing
- The body of the email: Lists out the following information for each file that was purged, just like we do for Uploaded Files. Except we could show multiple sets depending on how many files were deleted. Here is an example where Portage deletes 2 files.

❖ Encounter Purged File

File Name: Portage Nov 04 sent 0322005.zip

Begin Posting Date: 2004-11-01

End Posting Date: 2004-11-30

Org ID: 69005700

Submission ID: 11464

Final Status: REJECTED

File Name: Portage Dec 04 sent 0422005.zip

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Begin Posting Date: 2004-12-01  
End Posting Date: 2004-12-31  
Org ID: 69005700  
Submission ID: 11465  
Final Status: REJECTED

4.3 Submission Listing Screen's "upload" date.

The upload time is displayed using the 24 hour clock.

4.4 Edits now have 5 character format

Edits have been converted to a 5 character format. Example, if the edit used to read D44G, it will now read D044G.

4.5 Certification enhancement

4.5.1 Certifying Process and rules:

- The earliest Accepted file is the only file that can be certified.
  - ❖ E.g., If you have a June and July file in an Accepted status, the certify flag would only be on the June file. As soon as the June file has a certified status, the certify button would now only be displayed on the July file.
- Pushing on that button displays a window with the following information:
  - ❖ Display the following text regarding the properties of the file.  
  
Organization Name: Portage County  
Submission Period: June, 2004  
Submission ID: 11125  
Today's date: 04/25/2005
  - ❖ Display the following text regarding the sign off statement:

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I have reviewed the encounter data for the period and ID listed above. By providing my Encounter UserID and password, I attest that based on best knowledge, information, and belief as of the date indicated above, all information submitted to the State of Wisconsin in this batch is accurate, complete, and truthful. No material fact has been omitted.

I acknowledge that the information described above may directly affect the calculation of payments to the CMO. I understand that I may be prosecuted under applicable federal and state laws for any false claims, statements, or documents, or concealment of a material fact.

- ❖ Display an enterable box with the following information

Encounter log in User ID \_\_\_\_\_

Password \_\_\_\_\_

- ❖ Pushing the submit button verifies the User ID and password of the person authorized to certify files for that CMO. Please note, the User ID and password must match the person logged on to the Encounter web site.
- When the file status is updated to Certified, an email is sent to the same distribution used on the file-uploaded email.

#### 4.5.2 Security:

- User must be given security to certify files.
- Only users with certify capability will be able to see features associated with certification.