STATE OF NEW YORK
DEPARTMENT OF HEALTH

eMedNY

Medicaid Eligibility V4.1.0.5 User Guide

November 2002

Computer Sciences Corporation
Healthcare Group

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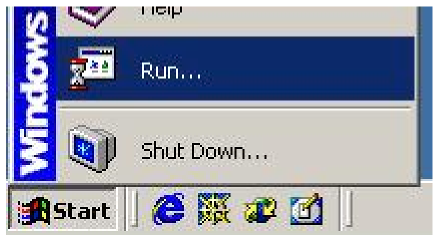
1.0 INSTALLATION

NOTE: This software should be installed on PC's equipped with Windows 95 , 98, or ME <u>only</u>.

To install the New York State PC Applications Software on your PC, please do the following steps:

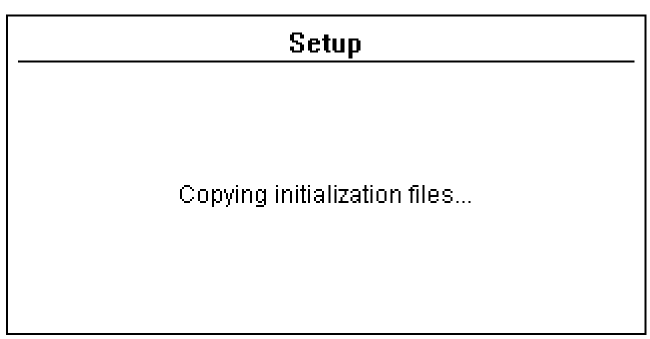
- Close all other applications you have running.
- Put the disk labeled PC Applications Disk 1 of 3 in the 3.5" disk drive.
- Click on **Start** and then **Run**.



A box will appear that looks like the following:

- Type **<drive>:\setup.exe** under the Command Line (<drive> should be the drive in which you placed the disk).
- Click on **OK** once you have entered the information.

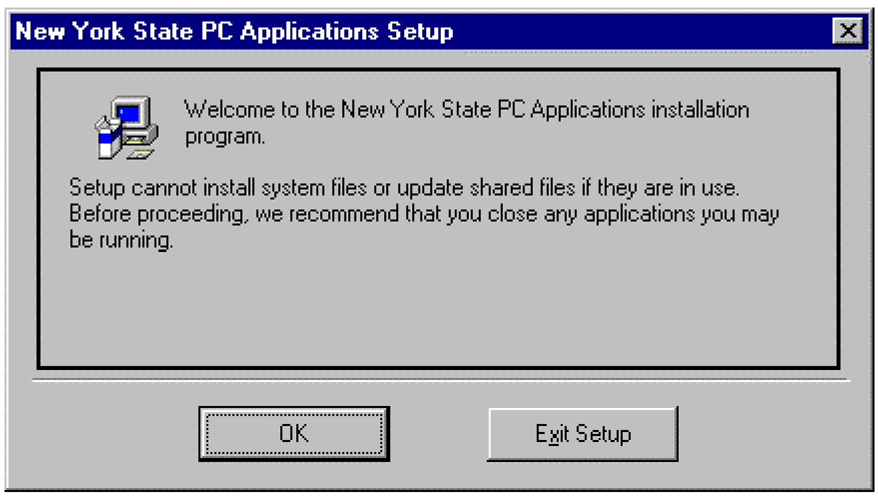
The Setup Program will display the next few screens as you install the PC Applications Software. The first screen that appears looks like this:



The Setup Program will prompt you along the way to insert the other disks as needed. The screen below demonstrates this:

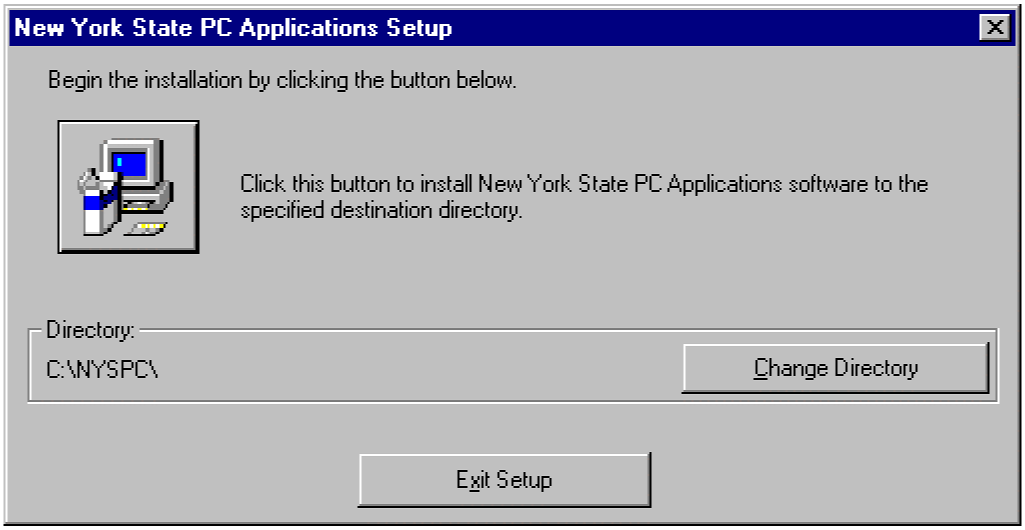
- Once you have inserted the disk, click on **OK** to continue.

Next, this screen will appear:



- Make sure all other applications are closed, then click on **OK**.

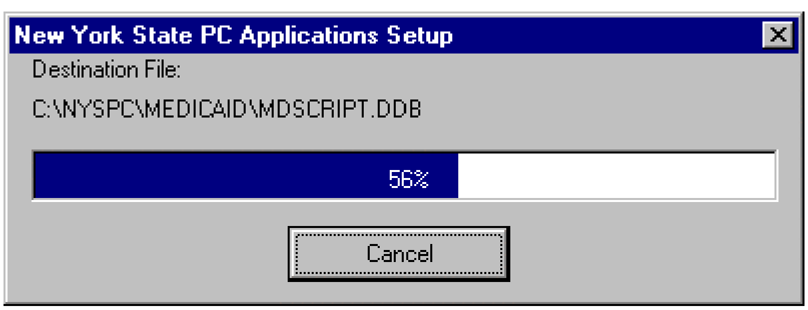
The next screen looks like this:



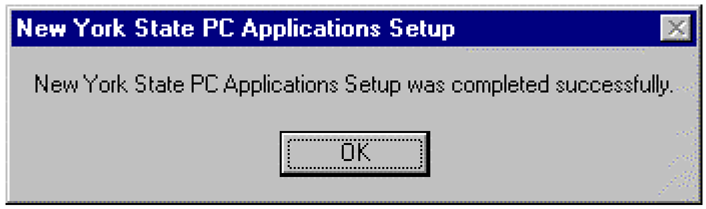
- If you need to change the default directory, click on the **Change Directory** button and the Setup Program will take you to a screen that will allow you to do so.
- If you want the software installed in the default directory C:\NYSPC, click on the large button with the picture of the computer on it.

***Note**: You can click on **Exit Setup** at any time to discontinue installing this software.

As the Setup Program continues, the following screen appears. The bar in the middle of the screen indicates what percentage of the software has been installed.



When the final two screens appear, as seen below, you have successfully installed the PC Applications Software and are ready to begin.

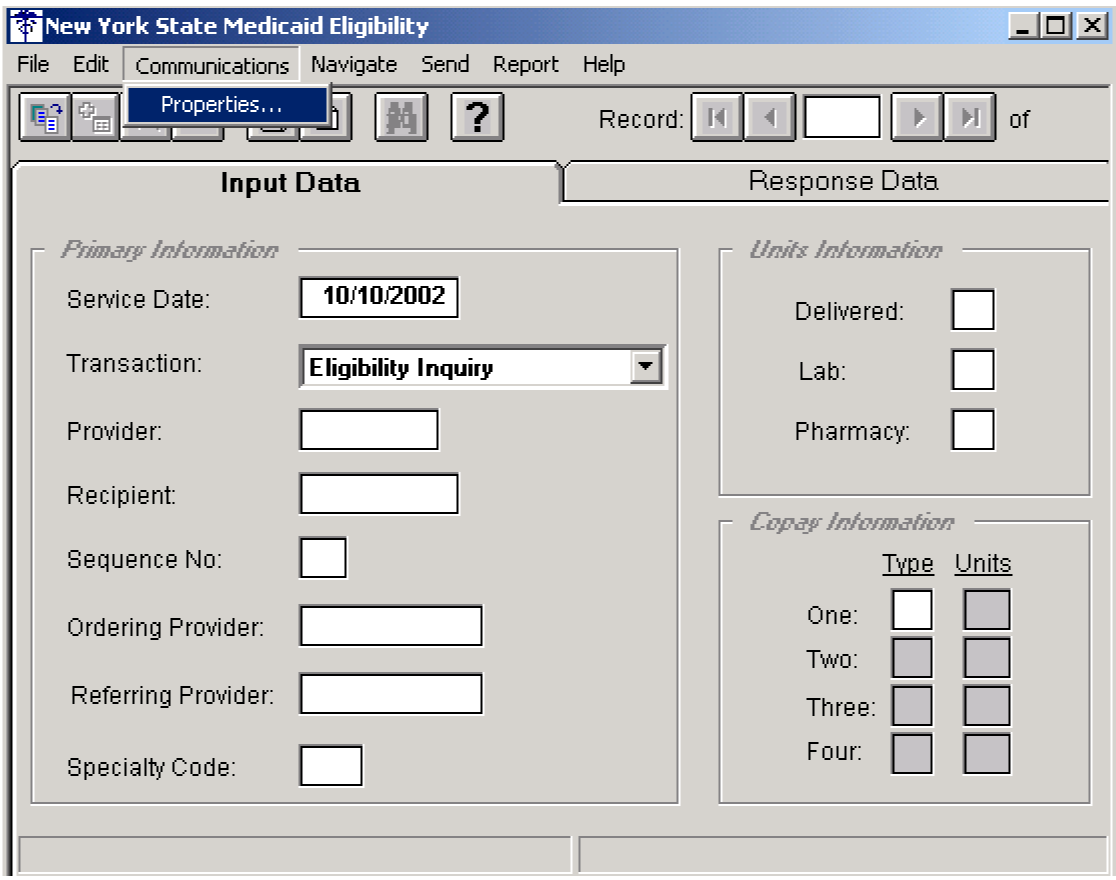


- Click on **OK** to continue.

2.0 COMMUNICATION SETUP

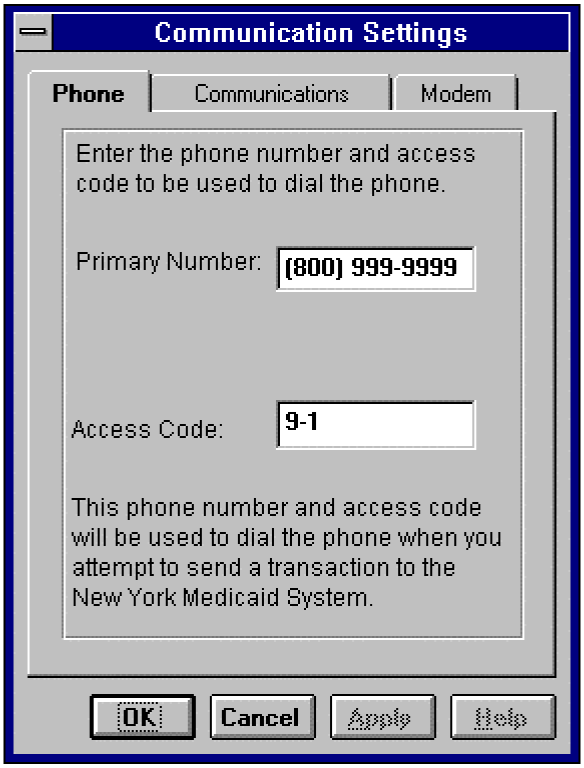
Once you have installed the Medicaid Eligibility Software on your PC, double click on the Medicaid icon to start the application. The first time you use the Medicaid Eligibility Software, you must adjust some of the Communication Setup information.

- Click on **Communications** and then **Properties**. A box labeled **Communication Settings** appears.



<u>Phone</u>

This tab contains the phone number and access code that you use when you send a Medicaid transaction to the New York State Medicaid System.



Primary Number

The phone number to be entered in this field will be the **productive** telephone number. **For every transaction, always dial the "Primary" number first."** If you do not receive a response or have any problem in completing the transaction, try again using the **"Backup"** number. The telephone number will vary depending upon the capabilities of your modem.

PC's with modem limitations (4800 baud or less) should use the PC (low-speed) numbers. PC's with higher-speed modems (9600 baud or more) should use the PC (high-speed) numbers.

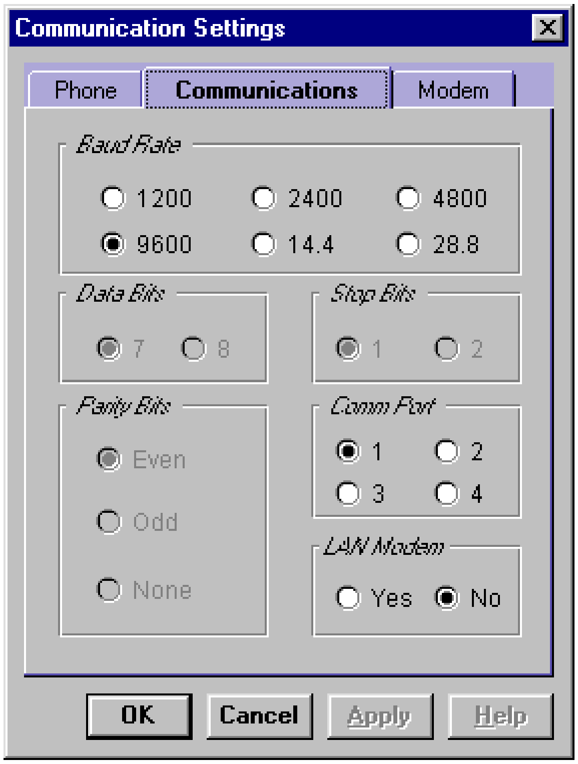
Access Method	Primary	Backup
PC (low-speed)	(800) 997-1119	(800) 394-2345
PC (high-speed)	(800) 997-1110	(800) 394-4858

Access Code

If you are connected to a phone line that requires a **"9"** to dial out, please type in **9-1**. If you require an access code other than a **"9"**, please use that number in place of the 9. If you do not need a number to dial out, please type in a **1**.

Communications

Click the Communications tab. This screen contains a variety of communications information. Please make sure your screen has the same information as the following box:



Baud Rate

This should be set to the baud rate of the NYS Medicaid System. This is **not** the baud rate of your modem. At this time, the NYS Medicaid System is set up to handle a 9600 baud rate. Potential upgrades to the system may change this. You will be notified if any upgrades are installed.

Comm Port

This field will vary depending on which communication port your modem is connected to.

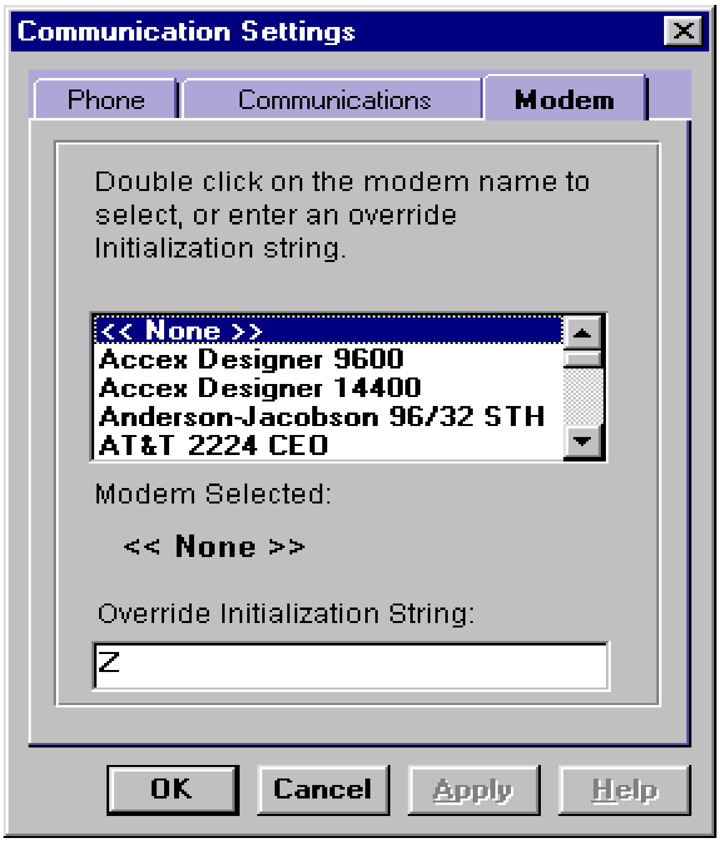
*__Note__: The rest of the information should be the same as the example above. This information cannot be changed at this time.

Modem

Click the Modem tab. This screen contains modem information.

- Double click on the first modem selection which is **<<None>>**. Once you have done this, **<<None>>** should appear under "Modem Selected:"
- Type **Z** in the "Override Initialization String:"

Your screen should appear as follows:



This completes the Communications Setup. Click on **OK** to exit this box.

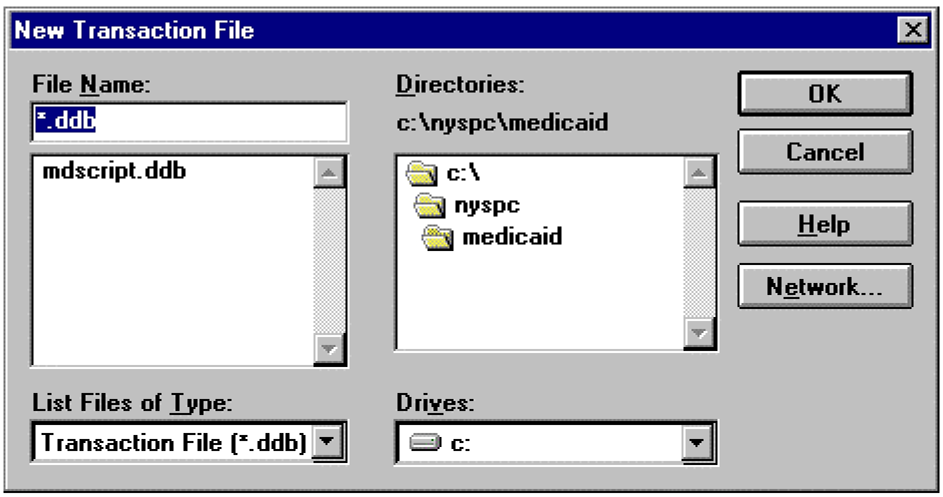
3.0 CREATING TRANSACTION FILES

You are now ready to create a transaction file. If you wish to save a copy of the records entered, you must create a transaction file and add your records to the file. If you only want to send in one record and you do not need to save a copy of it, skip to the sections titled Entering a Record and Sending a Single Record.

To create a transaction file:

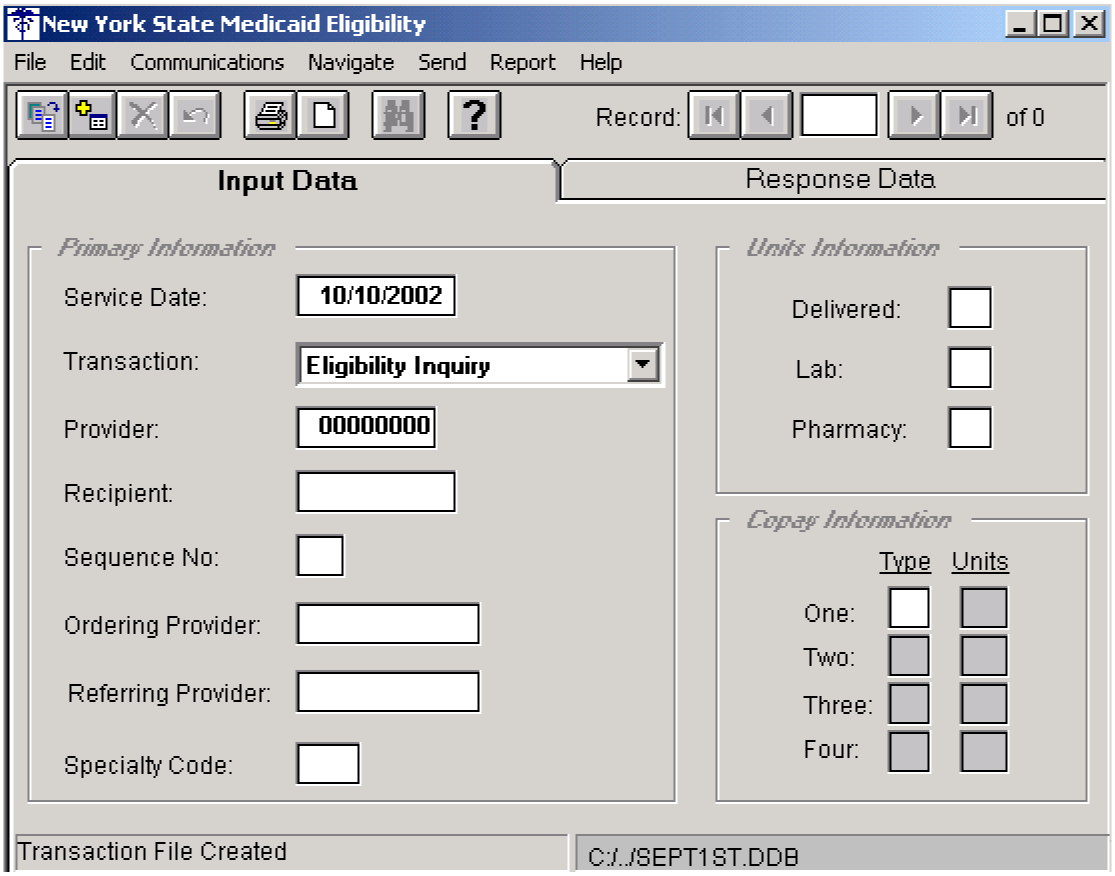
- Click on **File** and then **New**.

A screen will appear that looks like the following:



- Type in a **File Name** where you currently see hi-lighted ***.ddb**. Follow the DOS naming standards: eight characters long, cannot start with a number, no spaces, etc. An example of a file name is: Sept1st (if you enter an invalid file name, a box will appear telling you so).
- Once you have entered a file name, click on **OK**.

If you look at the example below you will notice the name **C:/../SEPT1ST.DDB** on the bottom right box of the screen. This is the name of the current Transaction File. You also see **Transaction File Created** in the bottom left box. This verifies you have properly created a new Transaction File.



For an explanation or description of any of the fields in the Input or Response Data screens, you can click on the individual caption and a help screen will appear with a brief description or list of codes.

4.0 ENTERING A RECORD

You are now ready to enter a record or Input Data information.

Primary Information

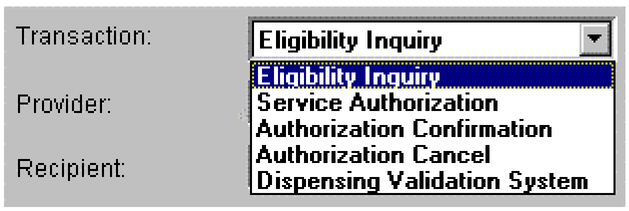
This information is found on the left side of the Input Data screen and includes the following fields:

Service Date

This field should contain the actual date the services were rendered to the recipient. For example: If the patient was seen yesterday, and the transaction is being entered today, use yesterday's date as the service date. Once a service date has been entered, the program will keep that date in the Service Date field until it is changed. Dispensing Validation System (DVS) transactions require a current date entry. This field is required.

Transaction

This field identifies the type of Medicaid transaction to be processed. Acceptable transaction types are listed in a dropdown box. Click on the down arrow key to see the following dropdown box appear:



Click once on the appropriate transaction type. This field is required.

Provider

This field identifies the NYS Medicaid Provider number of the provider that actually **provided the service** for which you are running the transaction. For example: If Dr. X has a provider number of 01234567, and you need a service authorization for his Medicaid patient, you would enter 01234567 in the Provider field. This is an eight-digit field. Once you enter a provider number in the Provider field, the program will keep that number in the field until it is changed. This field is required.

Recipient

This field requires the 8-digit alpha-numeric New York Medicaid Identification Number of the recipient receiving services. This field is required and the number must be entered in the following format:

CCNNNNNC, where:

C = Alphabetic Character
N = Numeric Character

Sequence No

This field should contain the two-digit sequence number located on the bottom right corner of the recipient's identification card. The recipient must use their most recent Medicaid card. If the card used is not the most recent card, an Invalid Sequence number reject will be returned. This field is required if the service date is the same as the current date.

Ordering Provider

This is the provider number or license number of the provider who ordered the service.

If you do not have the provider number of the ordering provider, you may enter the license type and license number. If entering an out of state license number, the two character alpha state code must also be entered. If entering a license number from New York State providers, enter two zeroes and the six digit number after the license type. This will allow the system to distinguish an eight digit MMIS # with 01 as the first two digits from a license number. The license type and license number should not have spaces in them. If entering a Nurse Practitioner license number, the fourth digit must be "F". If entering an Optometrist license number, the fourth digit must be a U or V.

Valid license types include:

01 NYS Physician	11 Out of State Physician
02 NYS Dentist	12 Out of State Dentist
09 NYS Physician's Assistant	19 Out of State Physician's Assistant
25 NYS Optometrist	35 Out of State Optometrist
26 NYS Podiatrist	36 Out of State Podiatrist
27 NYS Audiologist	37 Out of State Audiologist
29 NYS Nurse	39 Out of State Nurse Practitioner

An example of a NYS provider license type and number is:

0100123456 ('01' being the license type, 2 added zeroes, and '123456' being the license number.)

An example of an Out of State provider license type and number is:

11NJ123456

An example of a Nurse Practitioner license type and number is:

290F121212

An example of an Optometrist license type and number is:

250U123456

NOTE: When entering a license type and license number, the last six positions of the entry should be the actual numeric license number. If the license number does not contain six numbers, zero fill the appropriate positions preceding the actual license number. For example, an entry for an

Optometrist whose license number is V867 would be: 250V000867 (License Type + 0V + Zero fill + License Number).

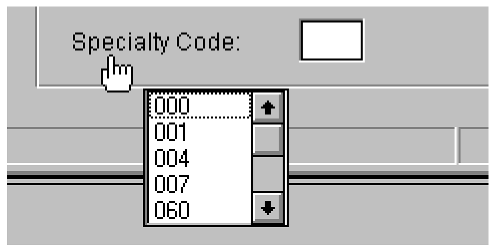
Completion of this field is required for all providers who fill written orders/scripts.

Referring Provider

This field should only be used if the provider initiating this transaction is not the primary provider. An example would be if a recipient is restricted to a primary physician and is referred by the primary to a specialist for additional services or the recipient is participating in the Managed Care Coordinator Program. The MMIS provider number of the primary physician who made the referral must be entered into the Referring Provider field. This field is optional unless the recipient is restricted and the transaction is not from the primary provider.

Specialty Code
This is a State supplied code that indicates the type of service rendered to the patient. This is an optional field except for a clinic provider requesting a Service Authorization. For DVS transactions, only clinics must enter their DME specialty code. Entry of a specialty code by other DME provider types will cause the transaction to reject.

When applicable, you can manually enter the code in the box or choose from a list of codes (if any) by pointing to and clicking the right mouse button on Specialty Code. A small box listing your choices will then appear. The box will be empty until you manually enter new codes. Choose by double-clicking on the appropriate code. Click on anything else to close the list box. You can also use the 'Enter' and up/down arrows on your keyboard to make your selection.



The list grows longer and longer as you add new codes. The box can hold up to 32 distinct codes. After 32 codes have been entered, new codes will be added to the list by replacing the oldest codes entered.

Units Information

For all transactions except DVS, this information is found on the top right side of the Input Data screen and includes the following fields:

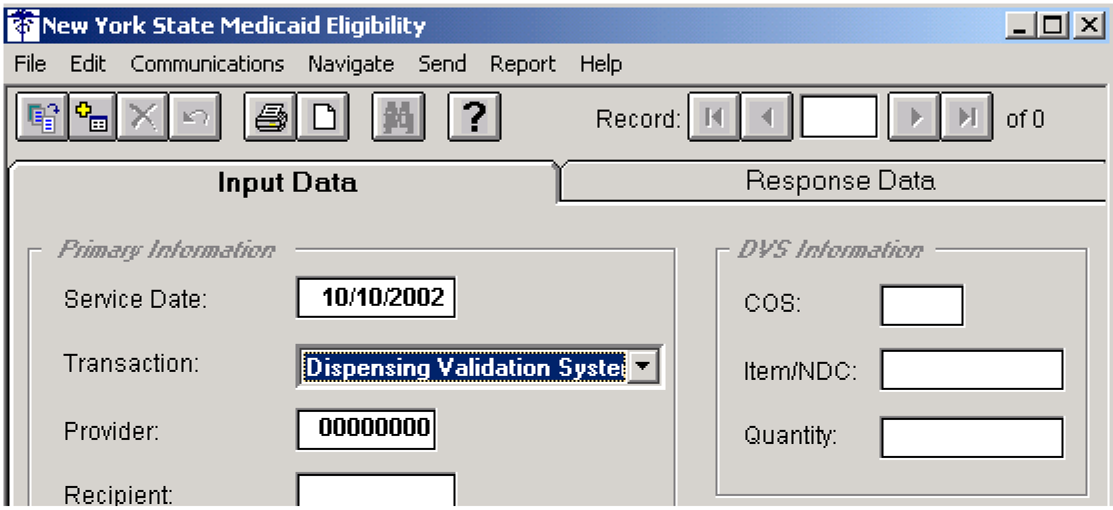
Delivered Units
The number of service units the provider delivered to the patient, for which a claim will be filed later. Labs and Pharmacies must enter information into this field. Physicians and clinics are not required to enter service units. One service unit per authorization per calendar day will be assumed.

Lab Units
The number of laboratory tests that the provider is ordering for this patient. This field is to be completed by the practitioner ordering the lab tests. Enter the number of lab tests ordered or leave blank if not applicable.

Pharmacy Units
The number of prescriptions that the provider is ordering for this patient. This field is to be completed by the practitioner ordering the prescriptions. Enter the number of prescriptions ordered or leave blank if not applicable.

DVS Information

For Dispensing Validation System (DVS) transactions, the following information will appear instead of the Units Information on the top right side of the Input Data screen.



For DVS transactions, each of the following additional fields are required:

COS (Category of Service)

The 4 digit state supplied code assigned to your provider number at the time of enrollment in the New York State Medicaid Program which identifies your service type.

Item/NDC

The 5 digit New York State alpha-numeric item code of the item being dispensed. For some items, if instructed by New York State, the 11 digit National Drug Code may be entered in this field.

Quantity

The quantity being dispensed for the current date of service only. Do not enter the total quantity (original plus refills) authorized on the written order. For an example of an enteral product entry, click on the Quantity caption on the screen.

Copay Information

For all transactions except DVS, this information is found on the bottom right side of the Input Data screen. Copay may not be entered for a DVS transaction because the program will use the amount from the NYS Drug Plan file and return it in your response as well as add it to the recipient copay file for cap calculation.

Type

A letter indicating the type of copayment service rendered. This field is optional and may be left blank. Refer to the Code Tables in the Help-Contents section for Copayment Type Codes.

Units
The number of units rendered for copay. This is a two-digit field and must be entered accordingly. The Units field is optional and may be left blank if not relevant.

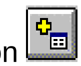
For example, a Medicaid Recipient is being seen for one clinic visit. The Copay Type and Units would be as follows:

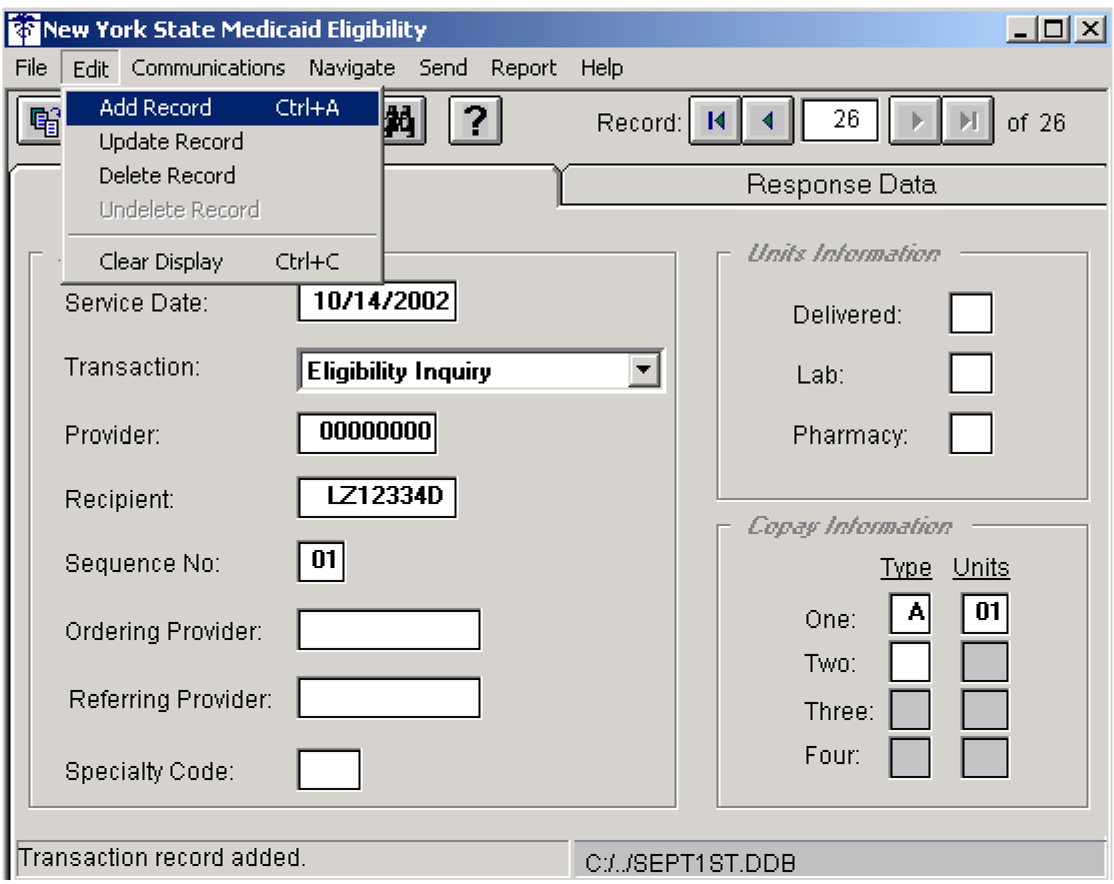
Type = C   Units = 01

***Note**: Copay Type must be entered before Copay Units can be entered. Copay Type One must be entered before Copay Type Two can be entered.

Add Record to File

Once you have completed entering the Input Data information, you need to add the record to the transaction file.

- Click on **Edit** and then **Add Record** or click on the Add Record button  on the toolbar.



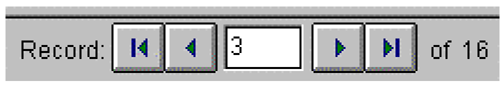
***Note**: With all of the toolbar buttons, you can find their labels by placing your cursor on the button and leaving it there for a few seconds. This will bring up a description of the button in a yellow box.

Once you have clicked on this button, notice the bottom left corner of your screen says **Transaction record added**. You may now enter new information in the Input Data. The information that is currently there is saved. Due to the speed of the NYS Medicaid system's modems, we recommend that you limit your files to 2,000 records.

5.0 VIEWING RECORDS

Once you have entered the record(s) that you plan to send, you may want to double check to see what you have entered. On the menu bar under Navigate you will see the following options that allow you to scroll through and find the records in your Transaction File:

You can also scroll through the records in your file by clicking on the toolbar buttons shown below:

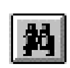


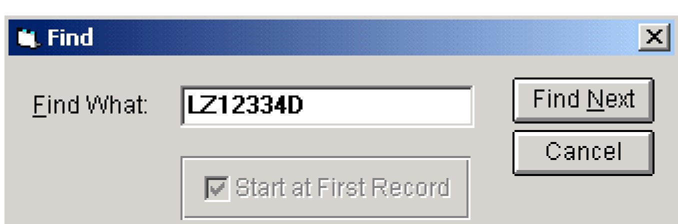
View First and Last Records
To view the first record in the file, click on the View First Record button. This button has a line and an arrow pointing to the left. To view the last record, click on the View Last Record button. This button has a line and an arrow pointing to the right.

View Previous Record
If you need to look at a previous record, click on the View Previous Record button. This button has an arrow pointing to the left. You may scroll all the way back to the beginning of your file using this button.

View Next Record
To look at the next record in your Transaction File, click on the View Next Record button. This button has an arrow pointing to the right. You may scroll through your entire transaction file by using this button.

Find
If you need to find a specific record in your Transaction File but you do not know where it is, you can use the Find feature. To use the Find feature:

- Click on **Navigate** and then **Find,** or click on the Find button  on the toolbar. The screen shown below will appear:



- Type in the text to search for in the Find What box, and click on Find Next.

The Input Data screen will display the first record it found with that information in it. If that is not the record you want, click on Find Next again. The Input Data screen will then display the next record it finds with that information in it.

The Find feature starts at the first record and works its way through. If you change the text you are looking for, you will want to check the Start at First Record box to start the new search at the first record.

View Record Number

If you know the record number you need to view, click in the record number box (in between the Next and Previous buttons on the toolbar), type the record number and press Enter. The record you specified will appear on the screen.

6.0 EDITING A RECORD

In addition to adding records, the Medicaid Eligibility software allows you to Update, Delete and Undelete records and Clear Display. These functions are found under the Edit menu as pictured below.

Update Record

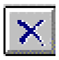
After entering several records, you may find a record that you want to change or correct. For example, you may have realized that on one particular record you entered an invalid recipient number.

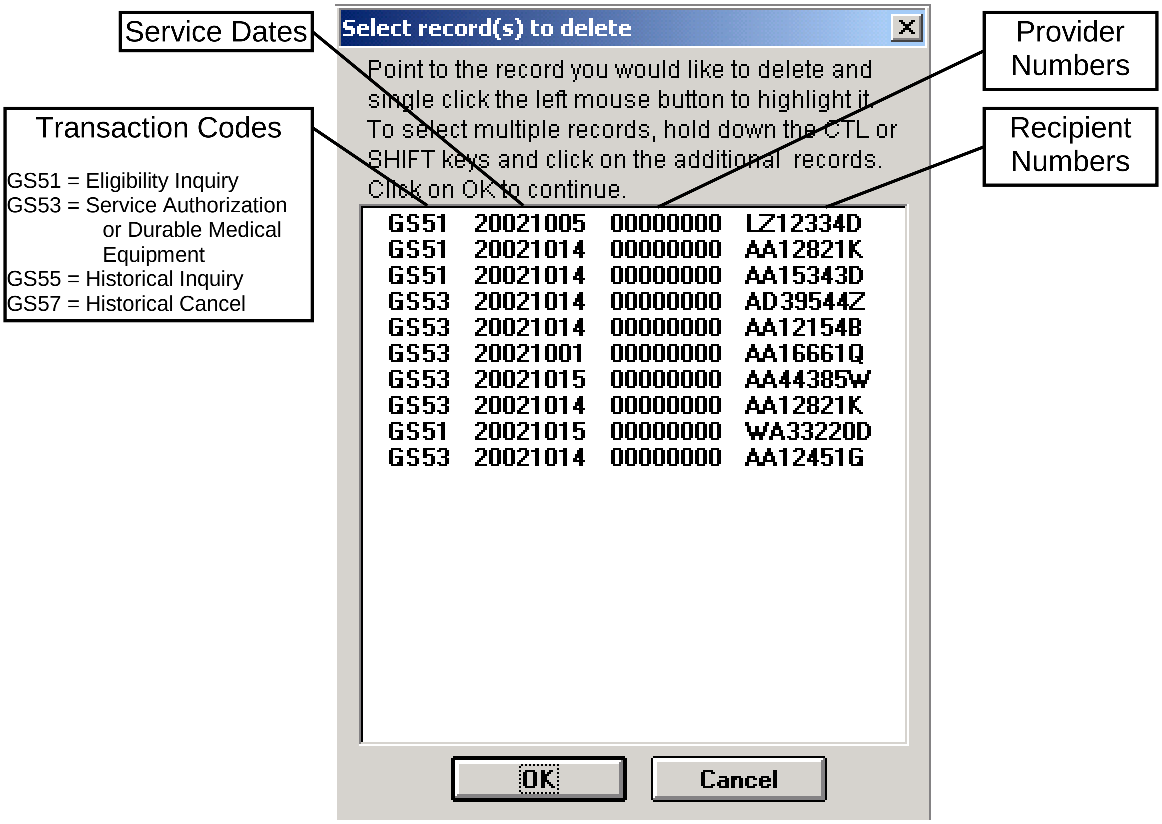
- Scroll to the record that you need to change.
- Go to the Recipient field (or any other field you need to update) and type in the correct information.
- Once you have changed the information, click on the **Edit** and then **Update Record**, or click on the Update Record button  on the toolbar.

If you look at the bottom left corner of your screen, you will see that it says **Transaction record updated**. If you make changes to a record but do not select Update Record, your changes will not be saved.

Delete Record

You may also have a record that you want to delete. To delete a record:

- Click on the **Edit** and then **Delete** Record, or click on the Delete Record button  on the toolbar. It will bring a screen that looks like the following:



- Select the record(s) you would like to delete. To select a single record, click on the record once to hi-light it. To select a group of records, click on the first record, hold down the Shift key and click on the last record. To select records that are not next to each other, hold down the Ctrl key and click on each record.
- Click on **OK** to delete the records you have selected.

In the bottom left corner of your screen, you will see **Selected record(s) deleted**. Your record(s) will not be **permanently** deleted until you close the current file, open a new file, or exit the program. You will be able to undelete the record(s) otherwise.

Undelete Record

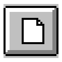
You also have the option to undelete a record that you have deleted. To undelete a record:

- Click on **Edit** and then **Undelete Record**, or click on the Undelete Record button  on the toolbar. This will bring up a list of deleted records.

- Select the record(s) you would like to undelete then click on **OK**. You have the same selecting capabilities (using the Ctrl and Shift keys) as you do in the Delete Record screen.

In the bottom left corner of your screen, you will see **Selected record(s) undeleted.**

Clear Display

This menu option clears the information you currently have on the screen. You will not erase or delete a record in the file or the file itself. This option just allows you to have a clear screen to input new information into. You can also click on the Clear Display button  on the toolbar.

7.0 SENDING

With the Medicaid Eligibility software, you have the option of sending the current record, sending selected records or sending all records. If you click on **Send**, you will see the following drop down list:

Current Record

To send the current record, please follow these steps:

- Enter the Input Data information.
- Click on **Send** and then **Current Record**.

This will send your current record to the NYS Medicaid System and you will momentarily receive a response.

***Note**: If you use the Send – Current Record menu option, the response information will **not** be saved. If you want to save the response information, you must create a file and enter your record in the file. Please see the Creating Transaction Files section for more details.

Selected Records

To send specific records from a file, please do the following steps:

- Click on **Send** and then **Selected Records**.
- Select the records you want to send by hi-lighting them in the list. To select a single record, click on the record once to hi-light it. To select a group of records, click on the first record, hold down the Shift key and click on the last record. To select records that are not next to each other, hold down the Ctrl key and click on each record.
- Click on **OK** when you have selected the records you want to send.

This will send all of the records you have chosen at the same time. Once all of the records have been sent, you can see the response information.

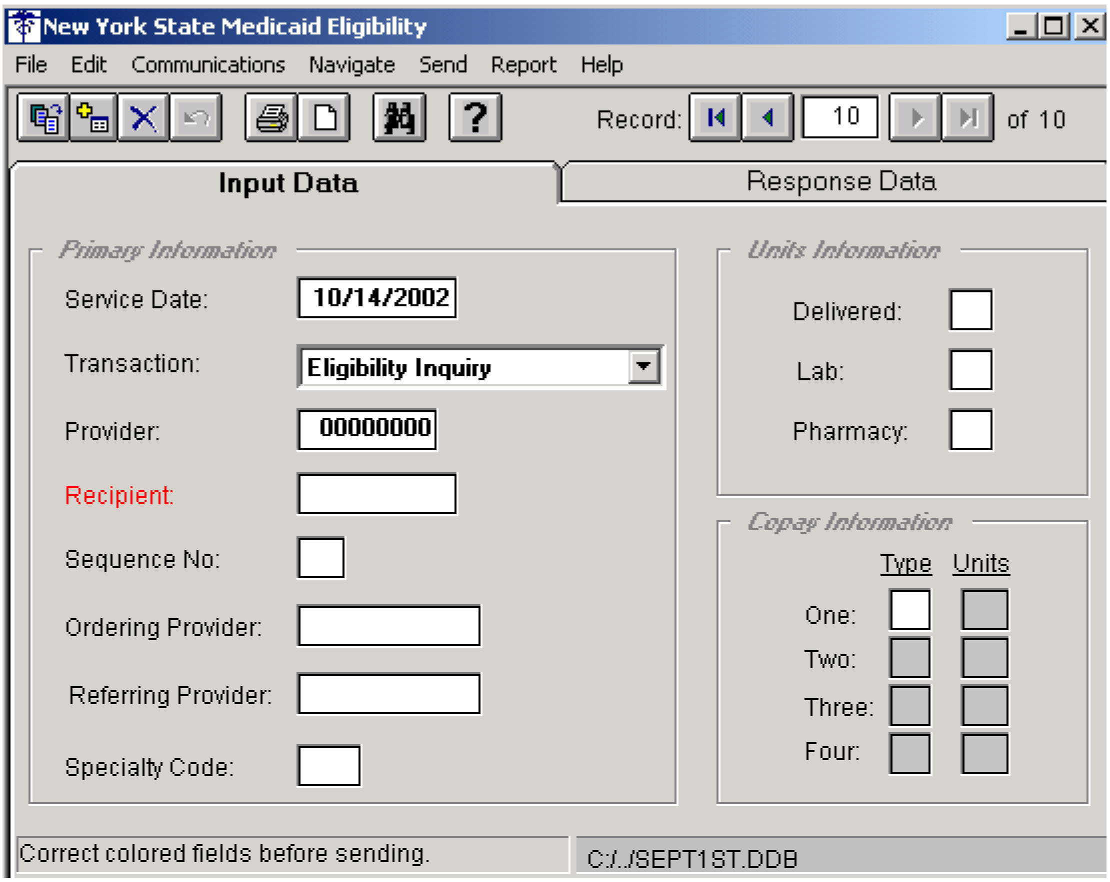
All Records

You may also send an entire transaction file at one time to the NYS Medicaid System. Due to the speed of the modem on the Host, we recommend that you keep your files under 2,000 records. If you need to send in more than 2,000 records, please divide them into separate files. To send an entire file:

- Click on **Send** and then **All Records**. This will send all of the records you have entered into your Transaction File at the same time.

The transactions will take place too quickly for you to be able to see your response data while sending. You will have to wait and view each record after the transactions have been sent.

Regardless of whether you are sending the current record or an entire file, the Medicaid Eligibility software will check your information to see if it is valid before it will start the sending process. If some of the information is missing or incorrect, the program will not allow you to send. The invalid fields will appear in red on the screen. You will need to correct or fill in the missing information before trying to re-send the record or file.

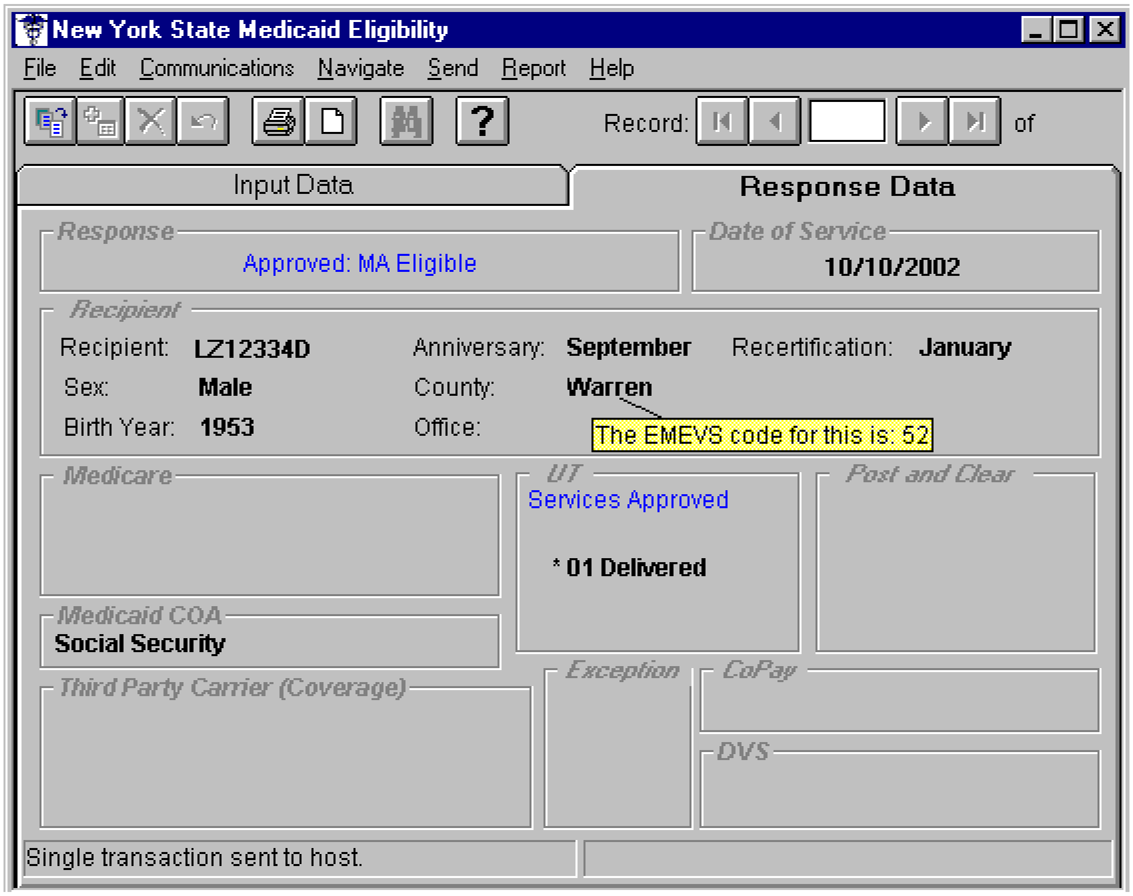


If you look at the example above, you will see the word **Recipient** appears in red. Also, there is a statement in the bottom left corner of your screen asking you to **Correct colored fields before sending**. Notice that the Recipient number field was inadvertently left blank. In this situation, you would need to correct the Recipient number field with the proper information and then send the transaction.

***Note**: If the Recipient or Provider number is invalid, it will be identified by the software as being an error even if the format is correct.

8.0 RESPONSE SCREEN

The previous page showed an example of the Input Data screen. The tab to the right of Input Data is **Response Data**. Single click on this tab and a screen will appear that looks like the following:



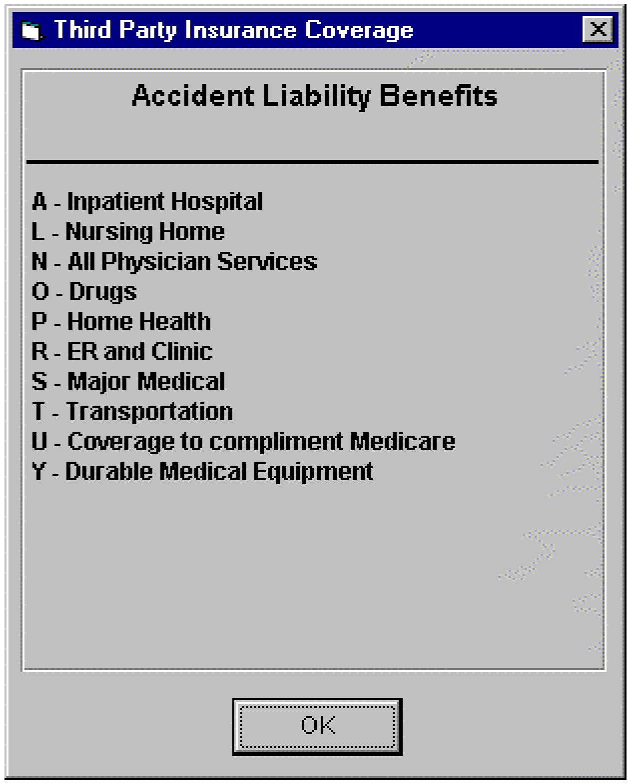
This is an example of a completed and approved Eligibility Inquiry transaction. You can see that there is now information in **Response Data**. If you send through an entire file, you will see the response data for the record that was on the screen before you sent the file. You may either scroll through your transactions using the arrow buttons on the toolbar, or by using the Record Number box. (Please see the section titled Viewing Records for further details.) You will notice the top right corner of the screen tells you the total number of records you have and which number record you are currently viewing.

There are several forms of help available on the Response Data screen. If there is any information on the screen that needs further explanation, such as Medicaid COA, click on that word and a pop-up help screen will appear.

In the center of the screen pictured above, there is a message box displaying the EMEVS code for the County Warren. This is another form of help available on the Response Data screen. When you send in transactions to the Medicaid System, a line of codes is sent back. These codes are deciphered by the software and the description is displayed on the Response Data screen. You can find out the code that was actually sent back from the Medicaid System by pointing and holding the mouse over the description momentarily.

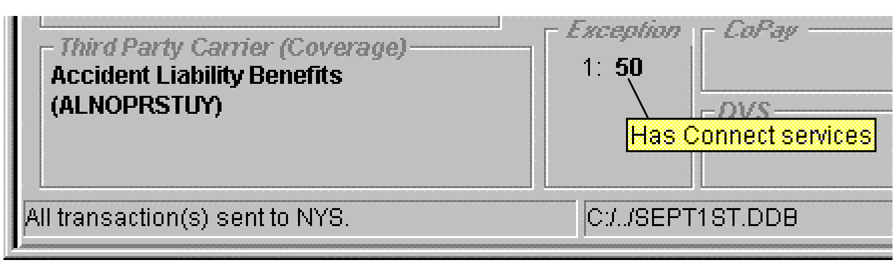
For approved DVS transactions, the DVS response field will contain an eight digit DVS number which you should put on your claim form. For denied transactions, the rejection reason will be returned in this field.

Additional help is available in the Third Party Carrier (Coverage) section. In the picture on the bottom of this page, the insurance plan Accident Liability Benefits is displayed with the coverage codes after it. If you hold your cursor over the codes (ALNOPRSTUY) and click, a pop up screen will appear like the following:



This screen displays the insurance coverage codes and what each of them stands for. To close this screen, click on OK and you will return to the Response Data screen. If more than one insurance carrier is listed under the Third Party Carrier (Coverage) section, you can also click on the coverage codes for that carrier to see this same information.

The final area that has additional help available is in the Exception section of the screen. If your transaction has any exceptions or restrictions associated with it, the codes will appear in this area. To find out what the codes stand for, hold your cursor over the code and a pop-up help screen will appear as shown below:



Up to three exceptions may be displayed on the Response Data screen.

9.0 IMPORTING/EXPORTING FILES

The Medicaid Eligibility software allows you to import and export files to and from the program. In the Help Screens you will find import and export specifications. These specifications give you the layout necessary to import or export records successfully.

Importing
In order to import a file, you must create a text (.txt) file that contains records separated with a carriage return (CR) followed by a linefeed(LF). The record length must be what is listed in the specifications and must be the same for all records. If a field is not applicable, fill it with spaces.

Once you have created the text file, you can import it by doing the following steps:

- Click on **File** and then **Import**.
- Select the text file that you created and click on **OK**.
- Name the new Medicaid Eligibility transaction file (.ddb).

You will see a status bar on the screen indicating how far along the import process is. Once the software has finished importing your file you will see a message box. If your import is successful, click on OK and view your file. If you have errors while importing, you will be able to view an Import Error Report. This report will display only those records that had errors. If you had records without errors, a transaction file will be created with the correct records.

The Import Error Report will display the invalid records and indicate what field is causing a problem. If you see a field hi-lighted in red or underlined, that field is causing the error. Common mistakes include invalid dates, invalid record lengths or fields in the wrong order. Keep in mind that fields that are not applicable to your business need to be space filled, they can not be left out.

Exporting
Before exporting a file from the Medicaid Eligibility software, you must have response data in the file. If the file does not have response data, the software will not allow you to export it.

To export from the Medicaid Eligibility software, please do the following steps:

- Open your transaction file by selecting **File - Open** from the menu.
- **Select the file** you want to open and click on **OK**.
- Select **File – Export** from the menu.
- Type in a name for the export file and click on **OK**.

The software will create the export file, a text file, and prompt you with a message when it is complete. If the export is successful, you can then import the file to another system. Again, the specifications for the layout of this file are available in the help screens.

Included with the Medicaid Eligibility software are two methods of viewing your export file without having to setup the export specifications. These methods are available in Excel and Access. Once you have created the export file by following the directions above, do the steps listed below.

Excel

To setup the Excel macro:

- Open Excel and go into **Tools-Options.**
- Click on the **General** tab.
- Type **c:\nyspc\xlstart** in the box next to Alternate Startup File Location. (Or type in the directory where you installed the software, if it is different. It must end with 'xlstart'.)
- Click **OK** and then exit Excel.
- Re-open Excel.

You are now ready to use the Excel macro. Once you have completed the setup of the Excel macro, you do **not** need to do those steps again.

To run the macro:

- For Excel 5.0, press **Ctrl-Q**
- For Excel 7.0 or 97, press **Ctrl-Z**

The Excel macro will ask for the name of the export file and then run the report for you.

Access

For Access 2.0, open Access and then open the database file called c:\nyspc\tools\nysacc16.mdb. For Access 7.0 or 97, open the file called c:\nyspc\tools\nysacc32.mdb. The Medicaid table in the Access database starts off empty, so you will want to add records by adding your Export file to the table. The following is an explanation of each of the buttons:

- **Add Export File to Medicaid Table**: Takes your Export file and appends the records to the Medicaid table.
- **Replace Medicaid Table with Export File**: Deletes all records in the Medicaid table and then adds your Export file to the table.
- **View Records**: Displays the records that are currently in the Medicaid table.
- **Preview Medicaid Report**: Displays a sample report that shows the records in a report form.
- **Close Medicaid Eligibility Database**: Closes the database.

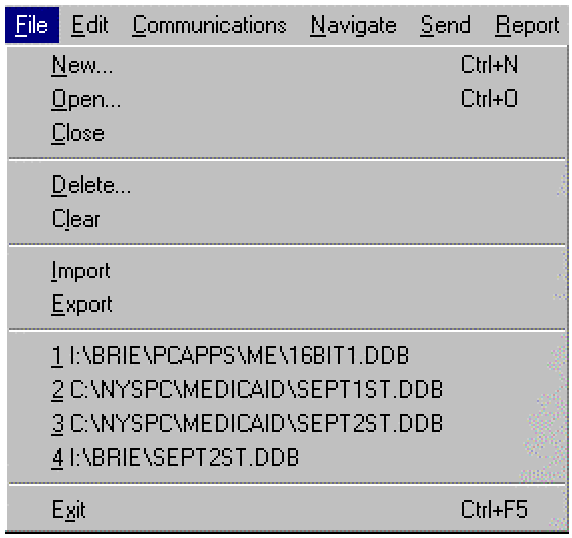
This is a sample database only that you can tailor to your needs. The report can be changed to include different fields or to display fields in a different order.

10.0 THE MENU BAR

There are some features in the Menu Bar that you may find useful when processing Medicaid transactions.

Shortcuts

Each of the words in the Menu Bar have a letter underlined. If you press the Alt key and then one of the letters that is underlined, such as the 'F' in File, the drop-down box for that menu item will open as shown below.



Each of the menu items in the drop-down box also have a letter underlined. If you then press 'N' as in New, you will then be able to create a new file.

Next to the File - Exit option is written Ctrl+F5. This is another shortcut feature that you can use. Instead of having to press Alt+F+X to exit the program, you can also just press the Ctrl key and the F5 key. These shortcuts are available throughout all the menu options.

File

Under the File menu, you will have the following options:

New

Creates a new file; one that does not currently exist.

Open

Opens a file that has already been created and named. You would use this when you want to add to or edit a current file that has already been named.

Close

Closes the file that is currently open.

Delete

Deletes a file and all the records within that file. Once a file has been deleted, it cannot be retrieved. If you select File - Delete, you will see a menu of all the existing files. You must select the file from this menu that you want to delete. Once you click on OK, you will be asked if you are sure you want to delete this file. If you select Yes, your file will be permanently deleted.

Clear
Clears the information in the transaction file that is currently open. You are not actually deleting the file, just clearing the records within. The file name will remain in your menu but it will no longer hold any records.

Import
Takes a flat file that you have created in another software package and imports the data into the Medicaid Eligibility software. See the Importing/Exporting Files section for more information.

Export
Creates a text file from your Transaction File that you can then export to another software package. See the Importing/Exporting Files section for more information.

Recent File List
Lists files you have recently had open. To select a file from the list, click the number or name that corresponds to the file you want to open. Up to four recently used files will be listed here.

Exit
Exits you out of the Managed Care Program.

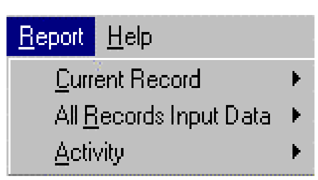
Edit
Please see the Editing A Record section of this User Guide for a detailed description of this menu option.

Communications
Please see the Communication Setup section of this User Guide for a detailed description of this menu option.

Navigate
Please see the Viewing Records section of this User Guide for a detailed description of this menu option.

Send
Please see the Sending section of this User Guide for a detailed description of this menu option.

Report
On the menu bar next to the word Send you see **Report**. If you select Report, you will find the following drop down list:



Current Record

Gives you the option of printing the Current Record Report. This report displays the Input and Response Data information for the current record. You can also press the Print Current Record button  on the toolbar to print this report.

All Records Input Data

Gives you the option of previewing or printing the Transaction File Report. This report displays the Input Data information for all the records in the file.

Activity

Gives you the option of previewing, printing or clearing the Activity File. An example of the Activity File Report is shown below. This report displays some of the Response Data information from **any** records you have sent. Information, even from other files, will be displayed on this report.

New York State Managed Care
Activity File Detail

Date: 08/13/2001 Page: 1
Time: 14:00:24

Medicaid Number	Service Date	Response Code and Descriptive Text	UT Code	PC Code	DVS Code	Medicare Coverage	Third Party Insurance
LZ12334D	10/06/2002	Denied – Invalid Sequence Number	099	112	130		
LZ12334D	10/05/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		AA-ALNOPRSTUY
LZ12334D	10/05/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		AA-ALNOPRSTUY
LZ12334D	10/05/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		AA-ALNOPRSTUY
LZ12334D	10/05/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		AA-ALNOPRSTUY
LZ12334D	10/25/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		AA-ALNOPRSTUY
AA12821K	10/15/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		
AA12821K	10/15/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		
LZ12334D	10/25/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		AA-ALNOPRSTUY
YU74111H	10/16/2002	Denied – No Authorization Found					
WY28941E	10/18/2002	Denied – No Authorization Found					
AB12154B	10/15/2002	Approved – MA Eligible	099	112	705		
ZZ11221X	09/15/2002	Approved – MA Eligible – HR – Utilization Threshold	099	112	130		

*****END OF REPORT*****

Print Activity Report

Prints the information you currently have in the Activity File Report.

Preview Activity Report

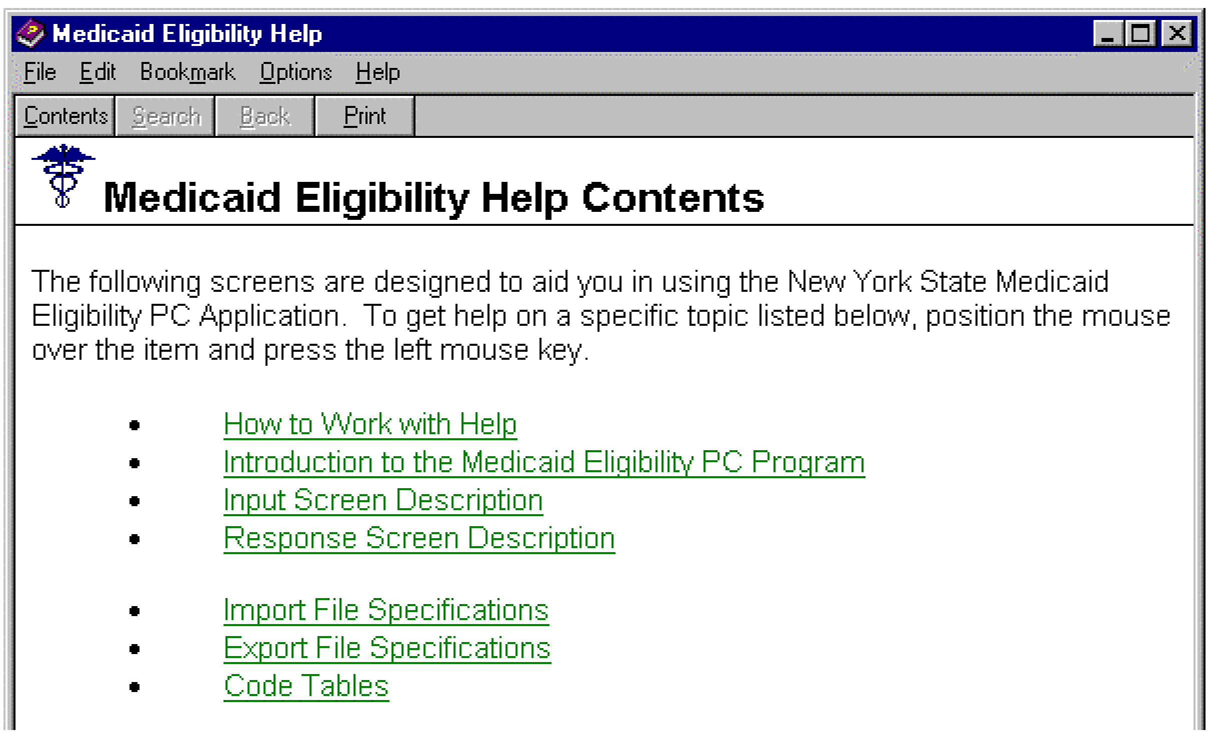
Displays a print preview of the Activity File Report. From here you have the option of printing the report.

Clear Activity Report

Clears the information you currently have in the Activity File. Information, even from different files, will continue to be added to this report until you clear it. Once you clear the report, the information cannot be retrieved again.

Help
If during processing you encounter a question or problem, you may want to refer to the Help menu. On the menu bar next to the word Activity you see **Help.** If you select Help, you will find the following drop down list:

Contents
Displays the Medicaid Eligibility Help screens. If you click on Main Help, a screen will appear that looks like the following:



The Help Contents screen can assist you with many items within the program that you may have questions on. You can find information by pointing and clicking on the item in question.

We recommend that you begin with the first item, How to Work with Help, and continue through the rest of the information above to get a thorough understanding of the Medicaid Eligibility Software. The Input and Response Screen Descriptions are also very helpful in getting started.

Please use the Help screens along with this User Guide to assist you.

About

Gives you information about the Medicaid Eligibility Software such as the version number and the path it is saved in. If you select About from the Help menu, a screen similar to the one below will appear: