

Attachment D - Sample File Layouts



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Magellan Data Files

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eMedNY Data Files

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1. Purpose of Interface Control

The intended audience of the Electronic Medicaid of New York (eMedNY) Project Interface Control Document (ICD) is all project stakeholders, including the project sponsor, senior leadership, and the project team.

This ICD defines the eMedNY system's Data Files interface with Department of Health (DOH) Data Partners and Magellan. The purpose of this ICD is to communicate all inputs and outputs from the system for all potential actions.

The information depicted throughout this Interface Control Document (ICD) is specific to the eMedNY Program only. It does not represent other Vendor requirements, standards and/or processes related to the interface.

2. Introduction

Electronic Medicaid of New York (eMedNY) is the New York State Medicaid program claims processing system. The system allows New York Medicaid providers to submit claims and receive payments for Medicaid-covered services provided to eligible clients.

This Interface Control Document (ICD) describes the relationship between the Electronic Medicaid of New York (eMedNY) system and the Magellan systems and specifies the requirements of both participating systems. This includes the concept of operations, the file structure and protocols that govern the interchange of data, and identifies the communication paths along which the data are expected to flow.

This is the current and official version of the interface. Other versions in development represent proposed changes until fully approved.

For each interface, the following information will be provided:

- A general description of the interface
- Assumptions where appropriate
- A description of the data exchange format and protocol for exchange
- Estimated size and frequency of data exchange

3. Overview

In order to determine the client eligibility, adjudicate and pay healthcare claims and generally serve as the Medicaid Fiscal Agent for the New York State Department of Health (NYSDOH), the eMedNY information system must exchange data with a number of external State and Federal agencies and partners.

The New York State Department of Health (DOH) has implemented a program that allows the pharmacy community to submit transactions in an online real-time environment that performs a Prospective Drug Utilization Review (Pro-DUR). In order to receive payment for services rendered, all pharmacies must submit their transactions through the online ProDUR system.

Magellan use these files to update their data repository. Magellan require the most current information in order to accurately perform Pharmacy Prior Approval administration.

4. Assumptions/Constraints/Risks

4.1 Assumptions

- ICDs will be reviewed, updated and routed/transmitted for approval based on changes resulting from Evolution Project requirements and/or other enhancements or maintenance activities.
- Appropriate identification and authentication controls, audit logging, and access controls are implemented.
- Disruption of normal functioning environment will not occur because of interface communications.
- Key personnel are available in case of interface-related issues and/or incident.
- Key personnel have been identified and are trained annually in their roles.
- Current backups of the application software and data are intact and available at the offsite storage facility.
- Data transfer capability is available 24 hours a day/7 days a week.
- Users are assigned logical accesses approved by appropriate personnel.
- eMedNY's sFTP service is Internet facing.
- With the implementation of this ICD, GDIT expects that the Magellan Medicaid Administration Weekly SMAC Price Update File will only contain National Drug Codes (NDC).
- Zero price records will not be transmitted from Magellan Medicaid Administration.

4.2 Constraints

- eMedNY information system must not be interrupted based upon contractual Service Level Agreements (SLAs).
- eMedNY will not be adversely impacted by the introduction of the interface.
- No coding changes that interrupts connectivity between the two systems may be performed on this interface without NYSDOH approval.
- All system-to-system file transfer activity must be logged, correlated and reviewed to ensure compliance with New York State (NYS) and GDIT auditing practices.
- ICDs will be reviewed, updated and routed/transmitted for approval based on changes resulting from Evolution Project requirements and/or other enhancements or maintenance activities.
- eMedNY's sFTP client can only access Magellan's sFTP service via semi-trusted Statewide Network (NYeNet).
- The summary data in the file header and trailer records will be validated against the file details records for accuracy and the file will be rejected if there are any inconsistencies.

4.3 Risks

There are no specific risks associated with this interface.

5. General Interface Requirements

5.1 Interface Overview

eMedNY and Magellan interface supports the bidirectional transfer of data via Secure File Transfer Protocol (SFTP). Any SFTP client that supports the RSA encryption algorithm and has been certified as FIPS 140-2 compliant.

5.2 Functional Allocation

eMedNY's mainframe workload scheduler will schedule the creation of the Magellan Client Update File Tuesday through Saturday and will "normally" be ready for pick up at 5 am. Delays are possible depending on other eMedNY Client Processing. If files are delayed, Magellan must periodically check for the files.

eMedNY's mainframe workload scheduler will schedule the creation of the Magellan Claims Data Files daily and will "normally" be ready for pick up at 1 am. Delays are possible depending on other eMedNY Claims Processing. If files are delayed, Magellan must periodically check for the files.

eMedNY's mainframe workload scheduler will schedule the creation of the Magellan Reference Data Files daily and will "normally" be ready for pick up at 1 am. Delays are possible depending on other eMedNY Reference Processing. If files are delayed, Magellan must periodically check for the files.

eMedNY's job scheduler schedules the Magellan Medicaid Administration Weekly SMAC Price Update File Retrieval job (GFRW0320) to run weekly on Wednesday at 6:00 PM.

The Weekly SMAC Price Update File Retrieval job verifies that the Magellan Medicaid Administration file is available for retrieval via SFTP based on file naming convention match.

Upon successful match, eMedNY moves the data file to the Enterprise Server.

eMedNY Weekly SMAC Price Update File processing generates a Process Summary Report for the Preferred Drug Program (PDP) vendor Magellan Medicaid Administration and sends it back via SFTP.

5.3 Data Transfer

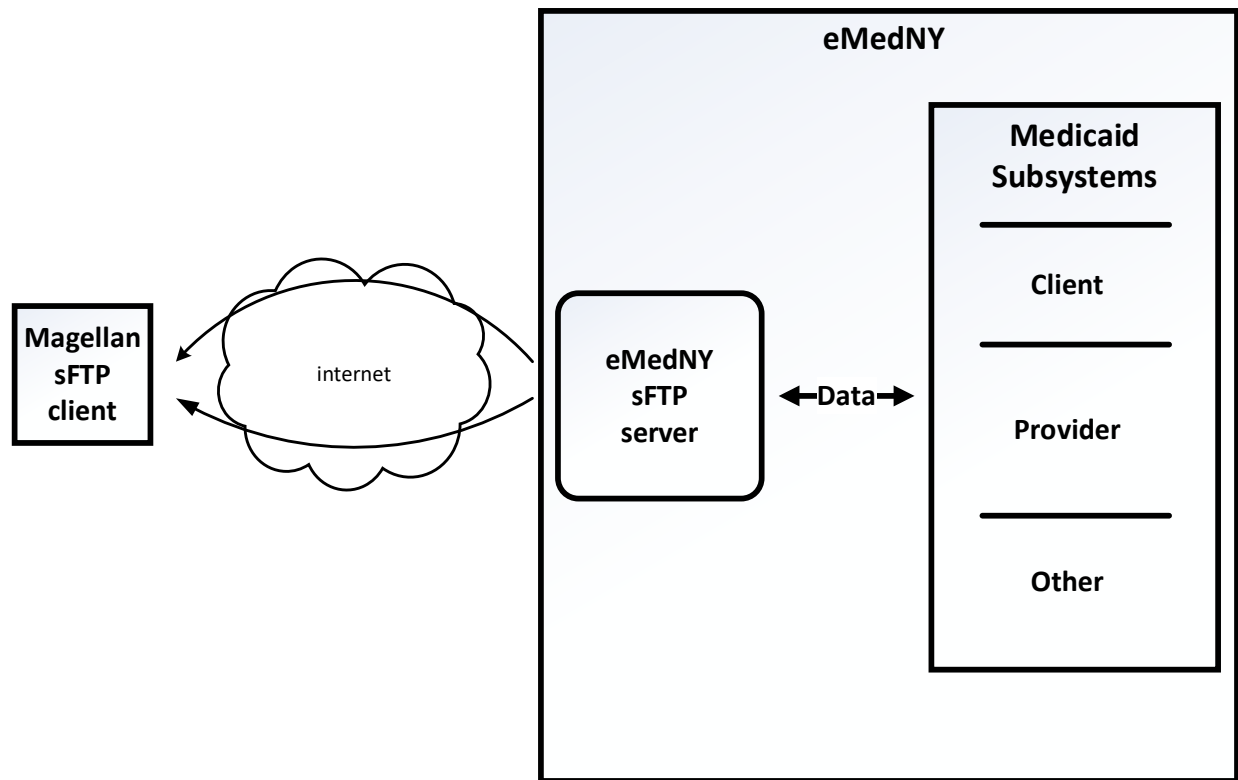


Figure 1 – Data Transfer Diagram

eMedNY will use a user ID and password combination to authenticate to Magellan Medicaid Administration's sFTP service.

eMedNY's sFTP service pushes the files to Magellan Medicaid Administration.

If the file is not found, Magellan should contact the GDIT command center.

If the file is found Magellan retrieves the file and follow the ETL process.

The specified user id has read/write access to the below directory for the data gets:

\\mmaftp\nypdms_cscmac\PROD\

The specified user id has read/write access to the below directory for the data puts:

\\mmaftp\nypdms_cscmac\CSC Summary Reports\

eMedNY's sFTP client pulls the data file from Magellan Medicaid Administration.

eMedNY processes the data file which updates Medicaid Subsystems and pushes a response file to Magellan Medicaid Administration.

5.4 Transactions

Not Applicable.

5.5 Security and Integrity

eMedNY's Internet facing SSH File Transfer Protocol (SFTP) service leverages Open SSH to establish secure and encrypted transport, data integrity and authentication for data transfers between Magellan and eMedNY.

Validation checks such as record counts, file formats, source stamps, and date-time stamps will be performed on the data transferred in this interface. When issues with this interface are discovered that prevent data exchange, Magellan personnel will be notified immediately by eMedNY operations teams.

5.6 Operational Support & Service Levels

This section discusses the Operational Level expectations of the interface regarding availability, performance, and scale. Interfaces do not inherit eMedNY's "continuously available" SLA's unless specifically mentioned in the section below.

5.6.1 Service Level Agreements (SLA)

This interface does not have any Service Level Agreements.

5.6.2 Operational Expectations

5.6.2.1 Usage Policy

This interface is designed to meet the use cases as mentioned in the requirements document. Extending the usage of interfaces beyond the original intent requires the approval of NYSDOH and General Dynamics Information Technology (GDIT).

The interface user/consumer might be disabled if their usage pattern presents security risks or operational expectations are not met.

5.6.2.2 Availability & Performance

Below is the general guidance on the operational levels on this SLA. These are delivered on a best efforts basis.

- Not Applicable.

5.6.2.3 Support

If you face issues with the interface in the production environment, call the GDIT Command Center at +1 318-549-4333.

Non production issues need to be communicated to the onboarding team/project team during normal business hours.

6. Detailed Interface Requirements

This section refers and/or describes details for the Magellan interface. This ICD defines the conditions under which each file is sent or received.

6.1 Requirements for B-F-963 – Preferred Drug Program (PDP) Client Data Extract File

In order for Magellan to accurately perform Pharmacy Prior Approval administration, they require the most current Client information including the Demographic, Eligibility, Medicare, Managed Care, Long Term Care, Restriction/Exception/Exemption and Third Party Insurance.

6.1.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.1.2 General Processing Steps

- eMedNY outbound Magellan Client Update File will be available for pickup by Magellan Tuesday through Saturday.
- After all eMedNY Client Processing is complete, Job PRBD0960 runs Tuesday through Thursday to extract the information for Magellan.
- Job GFBD0960 runs after PRBD0960 to deliver the files to Magellan.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.1.3 Interface Processing Time Requirements

Magellan Client Update File will be made available by 5:00 am.

6.1.4 File Naming Convention

The eMedNY mainframe file B-F-963 - Preferred Drug Program (PDP) Client Data Extract output file will be delivered to Magellan as NYP_RecipDataU_ccyymmddhhmm.gz, according to the agreed upon file naming convention. The CCYYMMDDHHMM will be replaced with current date time stamp.

`/u/emedprod/nas/prd/mqfte/ebcdic/MAGELLAN/outbound/Daily_Eligible/Mxccyymmdd.#`

6.1.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.1.5.1 File Layout

The Preferred Drug Program (PDP) Client Data Extract File has 10 types of records:

- Header
- Details (6 required, 4 optional) – multiples allowed

- Trailer

6.1.5.2 Data Assembly Characteristics

Table 1 – Data Assembly Characteristics - Preferred Drug Program (PDP) Client Data Extract File (B-F-963)

DSN	XDFHSC.BD0960.FH.D&BYMMDD
Description	B-F-963 - Preferred Drug Program (PDP) Client Data Extract
Structure	Sequential Flat File
Copybook	W1B09600 – Preferred Drug Program (PDP) Client Extract File Copybook
Length	137
Format	Fixed Block
Access	Sequential
Record Count	60 – 70K

6.1.5.3 Field/Element Definition

Table 2 – Field/Element Definition - Preferred Drug Program (PDP) Client Data Extract File (B-F-963)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Header Record - Record Type 00				Required Segment
Record Type	System generated	Char(2)	Identifies type of record. Required Numeric Value 00 = Header Record	Constant Value '00'
Type Of Load	System generated	Char(1)	Identifies the type of enrollment process being requested. Required Values U = Update only (Full patient records required) R = Full file refresh with logical deletion of missing records. F = Full file without refresh. (no logical deletion of missing records)	Type of Load Processing: U – Update only. Client must submit full historical information for the members who are submitted. Patient record types 15-50, which are not submitted, will be logically deleted. There will be no logical deletion of patients who are not submitted. F – Full file without refresh. The same processing as Update will apply but all of the client's members are contained in the file. There will be no logical deletion of missing members. R – Full file refresh with logical deletion of missing records. Same processing as Update will apply for submitted individual patient records. Load will logically delete all enrollment information for missing members. (This Option will not be used.) For CSC's initial load, we will be using the 'F' option. For Daily updates (Tues AM - Sat AM) we will use the 'U' option.
Client ID	System generated	Char(15)	Identifies the client the enrollment file is for. The ID will be assigned by First Health Services. Required	NYPDP
Client Name	System generated	Char(30)	Name of the client. Optional	NEW YORK PDP

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Client Contact Name	System generated	Char(30)	Name of contact person if there are problems with the file. Optional	CSC COMMAND CENTER
Client Contact Phone	System generated	Char(20)	Telephone number of contact person. Please include extension. Optional	318-549-4333
Creation Date	System generated	Char(8)	Date the file was created. Optional Numeric Format CCYYMMDD	Current Date
Filler		Char(31)	Space Fill	Spaces
Base Record - Record Type 05				Required Segment
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 05 = Member Base Information	Constant Value '05'
Update Type	System generated	Char(1)	Type of update record is requesting. Required Values I = Insert (Add) C = Change D = Delete	If the record is submitted as an insert (add) but the patient exists, the record will be processed as a change. If the record is submitted as a change but the patient does not exist, the record will be processed as an insert (add). Default to 'C'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	eMedNY Client ID
First Name	0637	Char(15)	Member first name Required	eMedNY 10 bytes
Last Name	0639	Char(25)	Member last name Required	eMedNY 17 bytes
Initial	0640	Char(1)	Member middle initial Optional	

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Relationship	System generated	Char(1)	ID of the relationship of the family member to the Cardholder. Required Values 1 = Cardholder 2 = Spouse 3 = Child 4 = Other 5 = Student 6 = Disabled Dependent 7 = Adult Dependent 8 = Significant Other '0' is not a valid specification	Hard Code '1'
Person Code	System generated	Char(3)	The ID code assigned to a specific person within a family (or cardholder ID). Required for clients who use person code as a part of their eligibility process.	Spaces
Date Of Birth		Char(8)	Date of birth of the member Required for clients who use date of birth as a part of their eligibility process. Numeric Format CCYYMMDD	Unborn will have birth dates of '00000000'
Gender		Char(1)	Gender of the member Required for clients who use gender as a part of their eligibility process. Values M = Male F = Female U = Unknown	
Race	System generated	Char(1)	Race code for the member Optional	Spaces
Date Of Death		Char(8)	Date of death of the member Optional Format CCYYMMDD	Date of Death for living clients will be '00000000'
Multiple Birth Number	System generated	Char (1)	Unique number to identify which twin or multiple the members is. Optional	Hard Code numeric '0'

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Tracking Group	System generated	Char(15)	A unique identifier for a particular collection of groups sharing the same patient base. First Health will identify the value required in this field. Required	NYPDP
Filler		Char(35)	Space Fill	Spaces
Alias(1) Record - Record Type 10				Required Segment All clients will have at least one Alias record with the Alias ID being the same as the cardholder's ID. If the client is linked to another at eMedNY, there will be additional segments for each client the cardholder is linked to.
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 10 = Member Alias ID Information	Constant Value '10'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Member's Alias IDs	System generated	Char(20)	Other IDs associated with the member, which can be used to adjudicate a drug claim or informational only. Multiple other IDs allowed. Required	Same as B_SYS_ID in 1st Alias Record
Alias ID Type	System generated	Char(2)	Code for the type of id the alias id is considered. Required	Hard Code 'MI' for main alias ID
Submission Allowed Indicator	System generated	Char(1)	Indicates if the alias can be submitted for claims processing through POS, batch or screen entry. If not allowed the alias id is for informational purposes only. Required Values Y – Yes N – No Spaces will be converted to No.	Hard Code 'Y'
Filler		Char(92)	Space Fill	Spaces

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Alias(2) Record - Record Type 10				Required Segment All clients will have at least one Alias record with the Alias ID being the same as the cardholder's ID. If the client is linked to another at eMedNY, there will be additional segments for each client the cardholder is linked to. Note: the Alternate (Alias ID) for a client may or may not have eligibility for the last two years. If they have eligibility, the alternate client will also be present on the FH file with their own set of services. If they do not have eligibility within the last two years, they will not be present on the file
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 10 = Member Alias ID Information	Constant Value '10'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Member's Alias IDs		Char(20)	Other IDs associated with the member, which can be used to adjudicate a drug claim or informational only. Multiple other IDs allowed. Required	
Alias ID Type	System generated	Char(2)	Code for the type of id the alias id is considered. Required	Hard Code 'AI' for Alternate ID
Submission Allowed Indicator	System generated	Char(1)	Indicates if the alias can be submitted for claims processing through POS, batch or screen entry. If not allowed the alias id is for informational purposes only. Required Values Y – Yes N – No Spaces will be converted to No.	Hard Code 'N'
Filler		Char(92)	Space Fill	Spaces

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Address Record - Record Type 15				Optional Segment - Multiples Allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 15 = Member Address Information	Constant Value '15'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Effective Date	0528	Char(8)	Date the address is effective. If not submitted the system date will be used. Required Numeric Format CCYYMMDD	
Address Code	System generated	Char(1)	Type of Address Required Values 1 – Mailing 2 – Residential 3 – Business 4 – Temporary 5 – Other 6 – Card Mailing 9 – Member Submitted Claims (used for member payment)	Hard Code '1'
Address Line 1	0576	Char(32)	First line of street address of member. May be only line of address. Required	eMedNY field has 28 bytes If B_IC_CARE_OF_NAM spaces, use B_LINE1_AD
Address Line 2	0576	Char(32)	Second line of the street address of member. Used only if first line will not accommodate a complete address. Optional	35 bytes on eMedNY (and WMS) record. eMedNY will remove extraneous spaces from this field. Note, this will not guarantee that the field will not be truncated
City	0574	Char(30)	City in which member resides Required	
State	9808	Char(2)	State abbreviation where member resides. Required.	
Zip	9805	Char(10)	Extended zip code where the member resides. Optional	Comes 5 bytes from WMS, We store as 15 (left justified), straight move to FH record

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Phone Record - Record Type 20				Optional Segment - Multiples Allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required, Numeric Value 20 = Member Telephone Information	Constant Value '20'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Effective Date	0528	Char(8)	Date the address is effective. If not submitted the system date will be used. Required, Numeric Format CCYYMMDD	
Telephone Type Code	System generated	Char(1)	Type of Telephone Number Required Values B – Business R – Residence C – Mobile/Cellular F – Fax P – Pager O – Other	Hard Code 'R'
Area Code	0588	Char(7)	The telephone area code for the member Optional	Area code only from phone number
Telephone Number	0588	Char(10)	The telephone number for the member Required Numeric	Last 7 bytes of phone number only
Extension	System generated	Char(6)	The extension for the phone number Optional	Spaces
Filler		Char(83)	Space Fill	Spaces
Eligibility Record - Record Type 25				Required Segment - Multiples Allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required numeric Value 25 = Member Eligibility Information	Constant Value '25'

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Group ID	System generated	Char(15)	ID number assigned to Medicaid program or employer plan to identify specific drug coverage. Required	3 Group IDs: - NYDPDPRXA (Eligibility Pharmacy Allowed) Based on Client COE Coverage Codes: 01, 02, 07, 08, 09 (MSP Ind not = L, U or X), 10, 11, 13, 14, 15, 16, 18, 19, 20, 21, 22, 23, 24, 30, 31, 32, 33 - NYDPDPRXN (Eligibility Pharmacy not allowed) Based on Client COE Coverage Codes: 04, 05, 06, 17, 34, 36 - NYDPDPMCN (Managed Care Pharmacy not allowed) Regardless of coverage code, if the client is enrolled in a plan that covers Pharmacy, this Group ID will be used. Read all segments for the service date. If any of these segments have either the NYDPDPRXN or NYDPDPMCN, deny the PA for this client.
Effective Date	0593 4172	CHAR(8)	The date the member is eligible for coverage under the group. Required Numeric Format CCYYMMDD	
Termination Date	0594 1419	CHAR(8)	The date the member's coverage is terminated. Optional Numeric Format CCYYMMDD	Open ended date convert to '00000000'

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Termination Reason Code	System generated	CHAR(1)	The reason the member was terminated. Optional Values 1 = Subscriber Deceased 2 = Patient Deceased 3 = Subscriber Coverage Expired 4 = Patient Coverage Expired 5 = Plan Terminated/Expired 6 = Subscriber Purged 7 = Patient Purged 8 = Default Group/Plan Terminated	Space or '1' for deceased clients (B_STATUS_CD = '13')
Client Payer Status	System generated	CHAR(1)	Specifies whether the Client is considered the primary or secondary insurance. Medicaid will only use to submit Medicare Part B coverage. Submit coverage as secondary when the patient had Medicare Part B. Optional Values P = Primary S = Secondary Space will be converted to 'P' - Primary	Hard Code 'P'
Coverage Level Indicator	System generated	CHAR(1)	Indicates level coverage the cardholder has under the group. Required Values I = Subscriber Only S = Spouse Only D = Non-spousal Dependents Only C = Subscriber and Spouse Only K = Subscriber and Dependents Only W = Spouse and Dependents Only F = Family	Hard Code 'I'
Filler		CHAR(81)	Space Fill	Spaces
Client Specific Reporting - Record Type 30				Optional segment - multiples allowed Use this record to Indicate Medicare Part D and Lockin Information

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Record Type	System generated	CHAR(2)	Identifies the type of record for processing. Required Numeric Value 30 = Member Client Specific Reporting Information	Constant Value '30'
Cardholder ID	0694	CHAR(20)	Unique ID of the cardholder Required	
Effective Date	0455 4242	CHAR(8)	The date the Client Specific Reporting information is effective. Required Numeric Format CCYYMMDD	
Termination Date	0456 4240	CHAR(8)	The date the Client Specific Reporting information is terminated. Optional Numeric Format CCYYMMDD	Open ended date convert to '00000000'
Reporting Information Type	System generated	CHAR(2)	Type of information in reporting information field. Required	Medicare Part D - 'PD' (if T_MCARE_CVRG_TY_CD = 'MD') Lockin Pharmacy - 'LP' (if B_LOCKIN_TY_CD = '06', or '08') Lockin Physician - 'LD' (if B_LOCKIN_TY_CD = '05') This field will be spaces for all other Restrictions and Exceptions other than 05, 06 and 08.
Reporting Information	1563	CHAR(25)	Client specified information needed for reporting or special adjudication processing. Optional	Medicare Part D - 'PART D' Lockin Pharmacy or Physician - MMIS Provider ID from Lockin Segment
Filler		CHAR(72)	Space Fill	
Regional Reporting Rec - Record Type 35				Optional Segment - Multiples allowed
Record Type	System generated	CHAR(2)	Identifies the type of record for processing. Required Numeric Value 35 = Member Regional Reporting Information	Constant Value '35'
Cardholder ID	0694	CHAR(20)	Unique ID of the cardholder Required	

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Effective Date	0593	CHAR(8)	The date the Regional Reporting Information is effective. If not submitted the system date will be used. Required Numeric Format CCYYMMDD	
Termination Date	0594	CHAR(8)	The date the Regional Reporting Information is terminated. Optional Numeric Format CCYYMMDD	Open ended date convert to '00000000'
County Code	4275	CHAR(4)	County code where the member resides Optional	From Current segment only
Town Code	System generated	CHAR(4)	Town code where the member resides Optional	Spaces
Filler		CHAR(91)	Space Fill	Spaces
LTC Record - Record Type 40				Added for project EP6409
Record Type	System generated	CHAR(2)	Identifies the type of record for processing. Required Numeric Value 35 = Member Regional Reporting Information	Constant Value '40'
Cardholder ID	0694	CHAR(20)	Unique ID of the cardholder Required	
Client Principal Provider ID	1563	Char(15)	Optional	
Principal Provider Service Begin Date	4354	CHAR(8)	Principal Provider Service Begin Date is the first day of a hospital stay (long-term care). Numeric Format CCYYMMDD	
Principal Provider Service End Date	4187	CHAR(8)	Principal Provider Service End Date is the last day of a hospital stay (long-term care). Numeric Format CCYYMMDD	
Filler		Char(84)	Space Fill	
TPL Record - Record Type 45				This Record Type is not Currently Used
Lockin Record - Record Type 50				This Record Type is not Currently Used
Trailer Record - Record Type 99				Required Segment

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Record Type	System generated	CHAR(2)	Identifies type of record. Required Numeric Value 99 = Trailer Record	Constant Value: '99'
Client ID	0694	CHAR(15)	Identifies the client the enrollment file is for, the ID will be assigned by First Health Services. Required	NYPDP
Total Record Count	System generated	CHAR(9)	Total number of records on the file including the header and trailer records Required Numeric	Count of all records
Filler		CHAR(111)	Space Fill	

6.1.6 Communication Methods

eMedNY will deliver the B-F-963 - Preferred Drug Program (PDP) Client Data Extract File to Magellan via sFTP protocol.

6.1.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan Client Update File processing job (PRBD0960) to run Tuesday through Thursday after all eMedNY Client Processing is complete.

Then the sFTP job (GFBD0960) transmits, via sFTP, the data file directly to Magellan.

6.1.6.2 Flow Control

Magellan will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan by phone, should sFTP service be unavailable or any access issues are encountered.

6.1.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.2 Requirements for C-F-080 – Outside Vendor PDP Claims File

The Outside Vendor PDP Claims File is the representation of converted eMedNY Pharmacy Claims to the Outside Vendor PDP layout. It follows mapping rules detailed in the program specifications of CM90050. This file will be transmitted to the Magellan via sFTP for processing.

6.2.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.2.2 General Processing Steps

- After all eMedNY Pharmacy Processing is complete, Job PRCDFH10 runs daily after midnight to extract the information of all eMedNY Pharmacy Claims and create the Outside Vendor PDP Claims File for Magellan. For input Job/Program uses a file created by database utility EXEC PGM=PTLDRIVM, PARM='EP=UTLGLCTL/DBR0,' to unload claims from the Claims PDP Trigger Table (C_PDP_TRIG_TB).
- Job PRCDFH11 runs after PRCDFH10 to deliver (sFTP) the C-F-080 - Outside Vendor PDP Claims File to Magellan.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.2.3 Interface Processing Time Requirements

The eMedNY Mainframe C-F-080 - Outside Vendor PDP Claims File will be created after midnight by 12:30 AM once per day. The file will be sFTP'd to Magellan daily.

6.2.4 File Naming Convention

The eMedNY Mainframe C-F-080 - Outside Vendor PDP Claims File will be delivered to Magellan as NYP_ClaimHistoryU_CCYYMMDD.0030.gz, according to the agreed upon file naming convention. The CCYYMMDD will be replaced with current date.

6.2.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.2.5.1 File Layout

The eMedNY mainframe file C-F-080 - Outside Vendor PDP Claims File has three types of records:

- Header
- Detail
- Trailer

6.2.5.2 Data Assembly Characteristics

Table 3 – Data Assembly Characteristics - Outside Vendor PDP Claims File (C-F-080)

DSN	EPROD.NM.XDFHSC.CDFH10.PDL.DYYMMDD.T0030 EPROD.NM.XDFHSC.CDFH10.PDL.DYYMMDD.T0030.GZ (Zipped File)
Description	C-F-080 - Outside Vendor PDP Claims File
Structure	Sequential Flat File
Copybook	P1C00011 - Outside Vendor PDP Layout
Length	1200
Format	Fixed Block
Access	Sequential
Record Count	100,000 – 120,000

6.2.5.3 Field/Element Definition

Table 4 – Field/Element Definition - Outside Vendor PDP Claims File (C-F-080)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Header Record						
Customer ID	9988	1	15	CHAR	YES	'NYPDP'
Record Type	9988	16	1	CHAR	YES	'H'
Input Type	9988	17	15	CHAR	YES	'CLAIMS'
Audit Timestamp	0530	32	30	CHAR	YES	Format CCYYXMMXDD.- hh.mm.ss.nnnnnn
Start Date and Time	9988	62	16	CHAR	YES	Input Parameter, Start data and Time for processing for processing. Format CCYY-MM-DD.- 00.00
End Date and Time	9988	78	16	CHAR	YES	Input Parameter, End data and Time for processing for processing. Format CCYY-MM-DD.- 23.59
FILLER	9995	94	1107	CHAR	N/A	Space Fill
Detail Record						
Customer ID	9988	1	15	CHAR	YES	'NYPDP'
Detail Record Type	9988	16	1	CHAR	YES	'D'
Transaction Control Number (TCN)	0537	17	16	CHAR	YES	Transaction Control Number (TCN) is a unique identifier assigned to each claim or encounter transaction received.
FILLER	9995	33	4	CHAR	N/A	Space Fill
Claim Adjudication Date	0963	37	8	NUMERIC	YES	Format CCYYMMDD
Claim Status Code	1020	45	1	CHAR	YES	Valid Values are P (PAID) and D (DENIED)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Claim Base Amount Source Code	0167	46	4	CHAR	YES	Type of update record is requesting. Possible Valid Values for File are: '01' ('A' - AWP), '09' ('W' - WAC), '23' ('F' - FMAC), '24' ('B' - NADACB), '25' ('G' - NADACG), '99' ('M' - MEDICARE), '102' ('MM' - MANUAL), 'SMAC' ('S' - SMAC)
Point of Service (POS) Transaction Code	6433	50	2	CHAR	YES	'B1', 'B2' or 'B3'
Provider Identification Number	1563	52	15	CHAR	YES	
Provider Qualification	9988	67	2	NUMERIC	YES	'05'
Claim Service Begin Date	1022	69	8	NUMERIC	YES	Format CCYYMMDD
Transaction Response Status	9988	77	1	CHAR	YES	'A'
Transaction Control Number (TCN)	0537	78	16	CHAR	YES	
FILLER	9995	94	4	CHAR	N/A	Space Fill
Client Birth Date	0601	98	8	NUMERIC	YES	Format CCYYMMDD
Client Gender Code	0229	106	1	CHAR	YES	
Recipient First Name 1	9995	107	15	CHAR	NO	Space Fill
Recipient Last Name 1	9995	122	25	CHAR	NO	Space Fill
Recipient ZIP Code	9995	147	15	CHAR	NO	Space Fill
Patient Location	9995	162	2	CHAR	NO	Space Fill
PREGNANCY	9995	164	1	CHAR	NO	Space Fill
Client Identification Number (CIN) (Original)	0535	165	20	CHAR	YES	
Recipient First Name 2	9995	185	15	CHAR	NO	Space Fill
Recipient Last Name 2	9995	200	25	CHAR	NO	Space Fill
Plan ID	9988	225	8	CHAR	YES	'NYPDP01'
Group ID	9988	233	15	CHAR	YES	'NYPDP'
Person Code	9988	248	3	CHAR	YES	'001'

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Patient Relation Code	9988	251	1	CHAR	YES	'1'
Claim Prescription Number	0990	252	12	CHAR	YES	
Prescription NO Qualification	9988	264	1	CHAR	YES	'1'
National Drug Code (NDC)	1856	265	19	CHAR	YES	
NDC Qualification	9988	284	2	CHAR	YES	'03'
Drug Quantity (Submitted)	0991	286	12	CHAR	YES	
Drug Refill Code	4237	298	2	NUMERIC	YES	
Drug Days' Supply Count (Paid)	0819	300	3	NUMERIC	YES	
Compound Drug Code	0824	303	1	CHAR	YES	
Drug Dispensed As Written (DAW) Code	0246	304	1	CHAR	YES	
Claim Service/Prescription Ordered Date	0860	305	8	NUMERIC	YES	Format CCYYMMDD
Drug Refills Count (Authorized)	0851	313	2	NUMERIC	YES	
Drug Prescription Override Code	0874	315	2	CHAR	YES	
Quantity Prescription	9995	317	12	CHAR	NO	Space Fill
Claim Other Insurance Payment Collection Code	3078	329	2	CHAR	YES	
Unit Dose Indicator	9995	331	1	CHAR	NO	Space Fill
Original Prescription Quantity	9995	332	12	CHAR	NO	Space Fill
Unit of Measure	9995	344	2	CHAR	NO	Space Fill
Drug Prior Authorization/Approval (PA) Medical Certification Code	0855	346	2	CHAR	YES	
Prior Authorization/Approval (PA) Number	0426	348	11	CHAR	YES	
Dispensing Status	9995	359	1	CHAR	NO	Space Fill
Quantity Intend to Dispense	9995	360	12	CHAR	NO	Space Fill
Days Intend to Dispense	9995	372	3	CHAR	NO	Space Fill
Reject Code Count	9987	375	2	CHAR	YES	
Reject Code 1	9995	377	3	CHAR	NO	Space Fill
Reject Occur Code 1	9995	380	2	CHAR	NO	Space Fill
Claim Edit Code 1	1737	382	5	CHAR	YES	

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
FILLER	9995	387	4	CHAR	N/A	Space Fill
Reject Code 2	9995	391	3	CHAR	NO	Space Fill
Reject Occur Code 2	9995	394	2	CHAR	NO	Space Fill
Claim Edit Code 2	1737	396	5	CHAR	YES	
FILLER	9995	401	4	CHAR	N/A	Space Fill
Reject Code 3	9995	405	3	CHAR	NO	Space Fill
Reject Occur Code 3	9995	408	2	CHAR	NO	Space Fill
Claim Edit Code 3	1737	410	5	CHAR	YES	
FILLER	9995	415	4	CHAR	N/A	Space Fill
Reject Code 4	9995	419	3	CHAR	NO	Space Fill
Reject Occur Code 4	9995	422	2	CHAR	NO	Space Fill
Claim Edit Code 4	1737	424	5	CHAR	YES	
FILLER	9998	429	4	CHAR	N/A	Space Fill
Reject Code 5	9995	433	3	CHAR	NO	Space Fill
Reject Occur Code 5	9995	436	2	CHAR	NO	Space Fill
Claim Edit Code 5	1737	438	5	CHAR	YES	
FILLER	9995	443	4	CHAR	N/A	Space Fill
Submitted Dispensing Fee	9995	447	9	CHAR	NO	Space Fill
Patient Paid Amount	0987	456	10	CHAR	YES	
Claim Charge Amount	1025	466	10	CHAR	YES	
Gross Amount Due	9995	476	10	CHAR	NO	Space Fill
Basis Cost Detail Code	9995	486	2	CHAR	NO	Space Fill
Recipient Payment	9987	488	10	CHAR	YES	
Claim Allowed Ingredient Cost	0710	498	10	CHAR	YES	
Pharmacy Dispensing Fee	0817	508	10	CHAR	YES	
Claim Reimbursement Amount	1028	518	10	CHAR	YES	
Other Payer Amount	9995	528	10	CHAR	NO	Space Fill
Claim Co-payment Amount	0827	538	10	CHAR	YES	

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Provider Identification Number 08	1563	548	8	CHAR	YES	
FILLER	9995	556	7	CHAR	N/A	Space Fill
Provider Identification Number 10	1563	548	10	CHAR	YES	
FILLER	9995	558	5	CHAR	N/A	Space Fill
Provider Profession Code	2165	548		CHAR	YES	
Provider License Number	1570	551	8	CHAR	YES	
FILLER	9995	559	4	CHAR	N/A	Space Fill
Prescription ID Qualifier	9988	563	2	CHAR	YES	'05'
Prescription Last Name	9995	565	15	CHAR	NO	Space Fill
Prescription Phone Number	9995	580	10	CHAR	NO	Space Fill
Number of Other Payer	9988	590	1	CHAR	YES	'0', '1' or '2'
Other Payer ID 1	9988	591	10	CHAR	YES	'9999999999'
Other Payer Qualifier 1	9988	601	2	CHAR	YES	'13' or '99'
Claim Adjudication Date (Other Payer Date 1)	0963	603	8	NUMERIC	YES	Format CCYYMMDD
Claim Other Payer Paid Amount	1085	611	10	CHAR	YES	
Other Payer ID 2	9988	621	10	CHAR	YES	'9999999999'
Other Payer Qualifier 2	9988	631	2	CHAR	YES	'99'
Claim Adjudication Date (Other Payer Date 2)	0963	633	8	NUMERIC	YES	Format CCYYMMDD
Claim Third Party Liability (TPL) Amount	1029	641	10	CHAR	YES	
Other Payer ID 3	9995	651	10	CHAR	NO	Space Fill
Other Payer Qualifier 3	9995	661	2	CHAR	NO	Space Fill
Claim Adjudication Date (Other Payer Date 3)	9995	663	8	NUMERIC	NO	Space Fill
Claim Other Payer Paid Amount 3	9995	671	10	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code PPS Count	9987	681	1	CHAR	YES	The Valid Values are '0' and '1'
Drug Utilization Review (DUR) Conflict Code	0986	682	2	CHAR	YES	
Drug Intervention Code	0125	684	2	CHAR	YES	
Drug Utilization Review (DUR) Outcome Code	0881	686	2	CHAR	YES	

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Drug Utilization Review (DUR) Conflict Code 2	9995	688	2	CHAR	NO	Space Fill
Drug Intervention Code 2	9995	690	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 2	9995	692	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 3	9995	694	2	CHAR	NO	Space Fill
Drug Intervention Code 3	9995	696	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 3	9995	698	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 4	9995	700	2	CHAR	NO	Space Fill
Drug Intervention Code 4	9995	702	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 4	9995	704	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 5	9995	706	2	CHAR	NO	Space Fill
Drug Intervention Code 5	9995	708	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 5	9995	710	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 6	9995	712	2	CHAR	NO	Space Fill
Drug Intervention Code 6	9995	714	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 6	9995	716	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 7	9995	718	2	CHAR	NO	Space Fill
Drug Intervention Code 7	9995	720	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 7	9995	722	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 8	9995	724	2	CHAR	NO	Space Fill
Drug Intervention Code 8	9995	726	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 8	9995	728	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Conflict Code 9	9995	730	2	CHAR	NO	Space Fill
Drug Intervention Code 9	9995	732	2	CHAR	NO	Space Fill
Drug Utilization Review (DUR) Outcome Code 8	9995	734	2	CHAR	NO	Space Fill
Diagnosis Code Count	9995	736	1	CHAR	NO	Zero Fill
FILLER	9995	737	463	CHAR	N/A	Space Fill
Trailer Record						
Customer ID	9988	1	15	CHAR	YES	NYPDP

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Record Type	9988	16	1	CHAR	YES	'T'
Total Detail Record Count	9987	17	9	NUMERIC	YES	Number of Detail Records Written to the file
Total PA Record Count	9995	26	9	NUMERIC	NO	Zero Fill
Total Compound Count	9995	35	9	NUMERIC	NO	Zero Fill
FILLER	9995	44	1157	CHAR	N/A	Space Fill

6.2.6 Communication Methods

eMedNY will deliver the C-F-080 - Outside Vendor PDP Claims File to Magellan over the Internet via sFTP protocol.

6.2.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan - Outside Vendor PDP Claims File processing job (PRCDFH10) to run Daily after midnight after all eMedNY Pharmacy Processing is complete. Then the sFTP job (PRCDFH11) transmits, via sFTP, the data file directly to Magellan.

6.2.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.2.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.3 Requirements for C-F-081 – Outside Vendor PDP Claims File Check Digit Control File

The Outside Vendor PDP Claims File Check Digit Control File is the check digit Control file that is sent with the Pharmacy PDP Claims Zipped Data file to Magellan. This file will be transmitted to Magellan via sFTP for processing.

6.3.1 Assumptions

NYSDOH and Magellan is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.3.2 General Processing Steps

- After all eMedNY Pharmacy Processing is complete, Job PRCDFH10 runs daily after midnight to create the Outside Vendor PDP Claims File Check Digit Control File.
- Job PRCDFH11 runs after PRCDFH10 to deliver (sFTP) the C-F-081 - Outside Vendor PDP Claims File Check Digit Control File to Magellan.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.3.3 Interface Processing Time Requirements

The eMedNY Mainframe C-F-081 - Outside Vendor PDP Claims File Check Digit Control File will be created after midnight once per day. The file will be sFTP'd to Magellan daily.

6.3.4 File Naming Convention

The eMedNY Mainframe C-F-081 - Outside Vendor PDP Claims File Check Digit Control File will be delivered to Magellan as NYP_ClaimHistoryU_CCYYMMDD.0030.crc, according to the agreed upon file naming convention. The CCYYMMDD will be replaced with current date.

6.3.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.3.5.1 File Layout

The eMedNY mainframe file C-F-081 - Outside Vendor PDP Claims File Check Digit Control File has one type of record:

- Detail

6.3.5.2 Data Assembly Characteristics

Table 5 – Data Assembly Characteristics - Outside Vendor PDP Claims File Check Digit Control File (C-F-081)

DSN	EPROD.NM.XDFHSC.EMEX.CRC.DYYMMDD.T0030
Description	C-F-081 - Outside Vendor PDP Claims File Check Digit Control
Structure	Sequential Flat File
Copybook	Outside Vendor PDP Claims File Check Digit Control File
Length	80
Format	Fixed Block
Access	Sequential
Record Count	1

6.3.5.3 Field/Element Definition

Table 6 – Field/Element Definition - Outside Vendor PDP Claims File Check Digit Control File (C-F-081)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Detail Record						
Check Sum of File	9987	1	10	CHAR	YES	
DELIMITER	9995	11	1	CHAR	YES	Delimiter Value ‘;’
Byte Count	9987	12	18	NUMERIC	YES	
DELIMITER	9995	29	1	CHAR	YES	Delimiter Value ‘;’
Remainder (Comments)	9987	30	50	CHAR	YES	File name being transferred.

6.3.6 Communication Methods

eMedNY will deliver the C-F-081 - Outside Vendor PDP Claims File Check Digit Control File to Magellan over the Internet via sFTP protocol.

6.3.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan - Outside Vendor PDP Claims File processing job (PRCDFH10) to run Daily after midnight after all eMedNY Pharmacy Processing is complete. Then the sFTP job (PRCDFH11) transmits, via sFTP, the data file directly to Magellan.

6.3.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.3.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.4 Requirements for P-F-408 – Practitioner Address Extract File

The Practitioner Address Extract File is an address extract of practitioners allowed to order pharmacy that is sent to Magellan. This file will be transmitted to Magellan via sFTP for processing.

6.4.1 Assumptions

NYSDOH and Magellan is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.4.2 General Processing Steps

- After all eMedNY Provider Processing is complete, Job PRPD0150 runs daily after midnight to create the Practitioner Address Extract File.
- Job GFPD0150 runs after PRPD0150 to deliver (sFTP) the P-F-408 - Practitioner Address Extract File to Magellan.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.4.3 Interface Processing Time Requirements

The eMedNY Mainframe P-F-408 – Practitioner Address Extract File will be created after midnight once per day. The file will be sFTP'd to Magellan daily.

6.4.4 File Naming Convention

The eMedNY Mainframe P-F-408 – Practitioner Address Extract File will be delivered to Magellan as NYP_PreAddrData_ccyymmddhhmm.gz, according to the agreed upon file naming convention. The CCYYMMDDHHMM will be replaced with current date and Time.

6.4.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.4.5.1 File Layout

The eMedNY mainframe file P-F-408 – Practitioner Address Extract File has one type of record:

- Detail

6.4.5.2 Data Assembly Characteristics

Table 7 – Data Assembly Characteristics - Practitioner Address Extract File (P-F-408)

DSN	EPROD.NM.XDFHSC.PD0150.PF41A.Dyymmdd
Description	P-F-408 – Practitioner Address Extract File
Structure	Sequential Flat File
Copybook	W2P40400 – Provider First Health Extract Practitioner Address Layout
Length	163
Format	Fixed Block
Access	Sequential
Record Count	Approximately 100 – 300 Records

6.4.5.3 Field/Element Definition

Table 8 – Field/Element Definition - Practitioner Address Extract File (P-F-408)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Detail Record						
Update Type	9995	1	1	CHAR	YES	Type of update record is requesting. I = Insert (Add), C = Change, D = Delete Hardcode Value 'C'
Registration ID	9992	2	15	CHAR	YES	The ID given to the practitioner by a register body. Hardcode Value 'NY' + P_PROFESSION_CD+P_LIC_CERT_NUM
Registration Code	9992	17	2	CHAR	YES	The code identifying the specific register body (board, college, agency, etc.) from which the PRACTITIONER_REGISTER_ID was issued. Hardcode Value '99'
Address Type	9992	19	1	CHAR	YES	Identifies the type of address contained in the record. 1 – Mailing maps to our C, 2 – Residential, 3 – Business maps to our S, 4 – Temporary, 5 – Other, Hardcode Value '1'
Effective Date	9992	20	8	CHAR	YES	The date on which the information in the record becomes effective Format CCYYMMDD Value 'Current Date'
Provider Address Line 1	1508	28	32	CHAR	NO	First line of street address.
Provider Address Line 2	1508	60	32	CHAR	NO	Second line of street address.
Provider Address City	1506	92	30	CHAR	NO	The full city or town name.
Country Code	9806	122	4	CHAR	NO	Country code.
Provider Address State/Province Code	2638	126	2	CHAR	NO	State code.
Postal Code	9805	128	10	CHAR	NO	The postal or zip code.

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Mail Stop	9995	138	18	CHAR	NO	The internal mail code within a building. Value 'Spaces'
Termination Date	9992	156	8	CHAR	YES	The date at the beginning of which the information in the record ceases to be effective. Format CCYYMMDD Hardcode Value '30000101'

6.4.6 Communication Methods

eMedNY will deliver the P-F-408 - Practitioner Address Extract File to Magellan over the Internet via sFTP protocol.

6.4.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan – Practitioner Address Extract File processing job (PRPD0150) to run Daily after midnight after eMedNY Provider Processing is complete. Then the sFTP job (GFPD0150) transmits, via sFTP, the data file directly to Magellan.

6.4.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.4.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.5 Requirements for P-F-409 – Practitioner Phone (and Fax) Extract File.

The Practitioner Phone Extract File includes practitioners Phone (and Fax) numbers having had changes and sent to Magellan. This file is transmitted to Magellan via sFTP for processing.

6.5.1 Assumptions

NYSDOH and Magellan is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.5.2 General Processing Steps

- After all eMedNY Provider Processing is complete, Job PRPD0150 runs daily after midnight to create the Practitioner Phone Extract File.
- Job GFPD0150 runs after PRPD0150 to deliver (sFTP) the P-F-409 – Practitioner Phone Extract File to Magellan.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.5.3 Interface Processing Time Requirements

The eMedNY Mainframe P-F-409 – Practitioner Phone Extract File will be created after midnight once per day. The file will be sFTP'd to Magellan daily.

6.5.4 File Naming Convention

The eMedNY Mainframe P-F-409 – Practitioner Phone Extract File will be delivered to Magellan as NYP_PrePhoneData_ccyymmdd.gz, according to the agreed upon file naming convention. The ccyymmdd is replaced with current date.

6.5.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.5.5.1 File Layout

The eMedNY mainframe file P-F-409 – Practitioner Phone Extract File has one type of record:

- Detail

6.5.5.2 Data Assembly Characteristics

Table 9 – Data Assembly Characteristics - Practitioner Phone Extract File (P-F-409)

DSN	EPROD.NM.XDFHSC.PD0150.PF41B.Dyymmdd
Description	P-F-409 – Practitioner Phone Extract File
Structure	Sequential Flat File
Copybook	W3P40400 - PROVIDER EXTRACT PRACTITIONER PHONE/FAX
Length	58
Format	Fixed Block
Access	Sequential
Record Count	Approximately 100 – 300 Records

6.5.5.3 Field/Element Definition

Table 10 – Field/Element Definition - Practitioner Phone Extract File (P-F-409)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Detail Record						
Phone Update Type	9992	1	1	Char	Yes	Defaulted to "C", change to Provider Phone or Facsimile Number.
Registration Identification	9992	2	15	Char	Yes	Created by joining text "NY", Provider Profession Code (DE 2165) and Part of the Provider License Number (DE 1570).
Registration Code	9992	17	2	Char	Yes	Defaulted to "99"
Phone Type	9992	19	1	Char	Yes	Used to indicate if record is Provider Phone Number, Value "B", or if record is Provider Facsimile Number, Value "F".
Phone Effective Date	9992	20	8	Char	Yes	Start Date when Phone or Facsimile Number was changed, using date file was created in "CCYYMMDD" format.
Area Code	1610 or 0378	28	7	Char	Yes	First 3 characters of Provider Phone or Facsimile Number.
Provider Phone Number	1610 or 0378	35	10	Char	Yes	When Phone Type is "B", then this is Provider Phone Number without area code, at which a specific provider can be reached. When Phone Type is "F", then this is the Provider Fax Number without area code.
Provider Phone Number Extension	2795	45	6	Char	No	Telephone extension at which a provider can be reached, defaulted to spaces.
Phone Termination Date	9992	51	8	Char	Yes	Date Phone/Facsimile Number is no longer valid in eMedNY System. Value is always 30000101 and in "CCYYMMDD" Format.

6.5.6 Communication Methods

eMedNY will deliver the P-F-409 – Practitioner Phone Extract File to Magellan over the Internet via sFTP protocol.

6.5.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan – Practitioner Phone Extract File processing job (PRPD0150) to run Daily after midnight after eMedNY Provider Processing is complete. Then the sFTP job (GFDP0150) transmits, via sFTP, the data file directly to Magellan.

6.5.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.5.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.6 Requirements for P-F-415 – Pharmacy Extract File

The Provider Pharmacy Extract File includes Pharmacy providers having been recently updated. This file is transmitted to Magellan via sFTP for processing.

6.6.1 Assumptions

NYSDOH and Magellan is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.6.2 General Processing Steps

- After all eMedNY Provider Processing is complete, Job PRPD0150 runs daily after midnight to create the Practitioner Phone Extract File.
- Job GFDP0150 runs after PRPD0150 to deliver (sFTP) the P-F-415 - Pharmacy Extract File to Magellan.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.6.3 Interface Processing Time Requirements

The eMedNY Mainframe P-F-415 – Pharmacy Extract File will be created after midnight once per day. The file will be sFTP'd to Magellan daily.

6.6.4 File Naming Convention

The eMedNY Mainframe P-F-415 – Pharmacy Extract File will be delivered to Magellan as NYP_ServiceProvData_ccyymmdd.gz, according to the agreed upon file naming convention. The ccyymmdd is replaced with current date.

6.6.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.6.5.1 File Layout

The eMedNY mainframe file P-F-415 – Pharmacy Extract File has three types of records:

- Header
- Detail
- Trailer

6.6.5.2 Data Assembly Characteristics

Table 11 – Data Assembly Characteristics - Pharmacy Extract File (P-F-415)

DSN	EPROD.NM.XDFHSC.PD0150.PF415.Dyymmdd
Description	P-F-415 – Pharmacy Extract File
Structure	Sequential Flat File
Copybook	W1P40200 –Pharmacy Provider Extract Layout Copybook
Length	900
Format	Fixed Block
Access	Sequential
Record Count	Approximately 3 – 40 Records

6.6.5.3 Field/Element Definition

Table 12 – Field/Element Definition - Pharmacy Extract File (P-F-415)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Header Record						
Header Trailer ID	9992	1	7	Char	Yes	Hard coded value “9999999”.
File ID	9992	8	1	Char	Yes	Hard coded value “T”.
File Type ID	9992	9	1	Char	Yes	Hard coded value “1”.
Create Date	9992	10	8	Char	Yes	Date file was created, Formatted as MMDDCCYY.
Number of Detail Records.	9992	18	6	Integer	Yes	Number of detail records included in file, does not include header and trailer records.
Copyright information	9992	24	100	Char	Yes	Value spaces.
Provider ID Qualifier	9994	124	2	Char	Yes	Hard coded value “05”.
Filler	9994	126	775	Char	Yes	Value spaces.
Detail Record						
Provider Identification Number	1563	1	15	Char	Yes	Unique number assigned to each provider enrolled to provide services to clients of the Medicaid program.
Filler	9991	16	60	Char	Yes	Value spaces.
Pharmacy Provider Name	1589	76	60	Char	Yes	The name of a provider of Medicaid services as used on official State records.
Filler	9991	136	10	Char	Yes	Value spaces.
Physical Location Address Line 1	1508	146	55	Char	Yes	First line of street address.
Physical Location Address Line 2	1508	201	55	Char	Yes	Second line of street address.
Physical Location City	1506	256	30	Char	Yes	The full city or town name.
Physical Location State	2638	286	2	Char	Yes	State code.
Physical Location Zip Code	9805	288	9	Char	Yes	The postal or zip code.
Physical Location Phone Number	1610	297	10	Char	Yes	Provider Phone Number with area code, at which a specific provider can be reached.

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Physical Location Phone extension	2795	307	5	Char	Yes	Telephone extension at which a provider can be reached, defaulted to spaces.
Physical Location Facsimile number	0378	312	10	Char	Yes	Provider Fax Number with area code, at which a specific provider can be reached.
Physical Location E-mail Address	9804	322	50	Char	Yes	Address used to send an electronic (email) message.
Filler	9991	372	50	Char	Yes	Value spaces.
Physical Location County Code	0250	422	5	Char	Yes	Specifying a particular county or Local District Social Services (LDSS) Office.
Filler	9991	427	80	Char	Yes	Value spaces.
Mailing Address Line 1	1508	507	55	Char	Yes	First line of street address.
Mailing Address Line 2	1508	562	55	Char	Yes	Second line of street address.
Mailing Address City	1506	617	30	Char	Yes	The full city or town name.
Mailing Address State	2638	647	2	Char	Yes	State code.
Mailing Address Zip Code	9805	649	9	Char	Yes	The postal or zip code.
Filler	9991	658	71	Char	Yes	Value spaces.
Mailing Address Phone Number	1610	729	10	Char	Yes	Provider Phone Number with area code, at which a specific provider can be reached.
Mailing Address Phone Extension	2795	739	5	Char	Yes	Telephone extension at which a provider can be reached, defaulted to spaces.
Mailing Address E-mail Address	9804	744	50	Char	Yes	Address used to send an electronic (email) message.
Filler	9991	794	18	Char	Yes	Value spaces.
National Provider Identifier (NPI)	6477	812	10	Char	Yes	Nationally recognized provider identifier assigned by the Center for Medicare & Medicaid Services (CMS).
Filler	9991	822	71	Char	Yes	Value spaces.
Transaction date	1681	893	8	Char	Yes	Date that an enrollment status became effective for a provider. It is used to determine whether a provider is eligible to receive payment under the Medicaid program. "MMDDCCYY" format.

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Trailer Record						
Header Trailer ID	9992	1	7	Char	Yes	Hard coded value "9999999".
File ID	9992	8	1	Char	Yes	Hard coded value "T".
File Type ID	9992	9	1	Char	Yes	Hard coded value "1".
Create Date	9992	10	8	Char	Yes	Date file was created, Formatted as MMDDCCYY.
Number of Detail Records	9992	18	6	Integer	Yes	Number of detail records included in file, does not include header/trailer record.
Copyright information	9992	24	100	Char	Yes	Value spaces.
Provider ID Qualifier	9994	124	2	Char	Yes	Hard coded value "05".
Filler	9994	126	775	Char	Yes	Value spaces.

6.6.6 Communication Methods

eMedNY will deliver the P-F-415 - Pharmacy Extract File to Magellan over the Internet via SFTP protocol.

6.6.6.1 Interface Initiation

eMedNY SFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan – Pharmacy Extract File processing job (PRPD0150) to run Daily after midnight after eMedNY Provider Processing is complete. Then the SFTP job (GFPD0150) transmits, via SFTP, the data file directly to Magellan.

6.6.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY SFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should SFTP service be unavailable or any access issues are encountered.

6.6.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.7 Requirements for P-F-419 – Practitioner Based Extract File

The Provider Practitioner Based Extract File includes data condensed into one record with license, Profession Code, Provider ID and types of changes.

6.7.1 Assumptions

NYSDOH and Magellan is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.7.2 General Processing Steps

- Job PRPD1050 runs Tuesday through Saturday to create the eMedNY Provider Practitioner Based Extract File.
- Job GFPD1050 runs after PRPD1050 to deliver the Practitioner Based Extract File to the Magellan server.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.7.3 Interface Processing Time Requirements

The Provider Practitioner Based Extract File is to be made available to Magellan following the successful completion of eMedNY job GFPD1050. This typically occurs every Tuesday through Saturday after 1:00 am. Delays are possible.

6.7.4 File Naming Convention

The eMedNY mainframe P-F-419 Provider Practitioner Based Extract File will be delivered to Magellan as NYP_PreBaseData_CCYYMMDD.gz, according to the agreed upon file naming convention. The CCYYMMDD is replaced with the current date.

6.7.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.7.5.1 File Layout

The Provider Practitioner Based Extract File has two types of records:

- Base
- Alias

6.7.5.2 Data Assembly Characteristics

Table 13 – Data Assembly Characteristics - Provider Practitioner Based Extract File (P-F-419)

DSN	EPROD.NM.XDFHSC.PD0150.PF419.DYYMMDD
Description	P-F-419 – Provider Practitioner Based Extract File
Structure	Sequential Flat File
Copybook	W1P40400 – Provider First Health Extract Practitioner Base/Alias Record Copybook
Length	104
Format	Fixed Block
Access	Sequential
Record Count	Approximately 1,741 records over a 5 day period

6.7.5.3 Field/Element Definition

Table 14 – Field/Element Definition - Provider Practitioner Based Extract File (P-F-419)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Base Record (when Segment ID is 'P')						
Segment ID	9988	1	1	Character	Yes	Field contains 'P'.
Update Type	9988	2	1	Character	Yes	Field contains 'C'.
First Name	0637	3	15	Character	Yes	Field will contain spaces.
Client's Name	1589	18	25	Character	Yes	This field consists of the last name, first name and middle name (or initial) of the provider's license name.
Region ID	9992	43	15	Character	Yes	Is a string (and delimited by size) of the: State Code (DE 9805: value 'NY'), Provider Profession Code (DE 2165) and the first 8-bytes of the Provider License Number (DE 1570).
Region Code	9988	58	2	Character	Yes	Field contains '99'.
Type Code	9988	60	3	Character	Yes	Field contains 'PRE'.
Birth Date	9988	63	8	Character	Yes	Field contains '00000000'.
Date of Death	0602	71	8	Character	Yes	Client Death Date is the date that a client died. Field will contain zeroes if the client is alive. Format CCYYMMDD.
Retirement Date	9988	79	8	Character	Yes	Field contains '00000000'.
Language Code	9988	87	2	Character	Yes	Field contain 'EN'.
Effective Date	1569	89	8	Character	Yes	Provider License Certification Begin Date is the first date of a provider's license certification. Format CCYYMMDD.
Termination Date	9988	97	8	Character	Yes	Field contains '30000101'. Format CCYYMMDD.
Alias Record (when Segment ID is 'A')						
Segment ID	9988	1	1	Character	Yes	Field contains 'A'.

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Update Type	9992	2	1	Character	Yes	Field may contain 'C' or 'I'.
Region ID	9992	3	15	Character	Yes	May contain one of the following combinations: When Region Code is '08': Region ID is Positions 3 through 9 of the Provider License Number (DE 1570). When Region Code is '13': Region ID is a string (and delimited by size) of the Provider Profession Code (DE 2165) and Positions 1 through 8 of the Provider License Number (DE 1570). When Region Code is '14': Region ID is a string (and delimited by size) of 0, Provider License Privilege Code (DE 0670) and positions 3 through 9 of the Provider License Number (DE 1570). When Region Code is '05': Region ID is the Provider ID (DE 1563). When Region Code is '01': Region ID is the National Provider Identifier (NPI) (DE 6477).
Region Code	9992	18	2	Character	Yes	Consists of one of the following values: '01', '05', '08', '13' or '14'.
Effective Date	1569	20	8	Character	Yes	Provider License Certification Begin Date is the first date of a provider's license certification. Format CCYYMMDD.
Termination Date	1572	28	8	Character	Yes	Provider License Certification Expiration Date is the end date of a provider's license certification. Field may contain 30000101. Format CCYYMMDD.
Filler	9995	36	69	Character	Yes	Field will contain spaces

6.7.6 Communication Methods

eMedNY will deliver the P-F-419 - Provider Practitioner Based Extract File to Magellan over the Internet via sFTP protocol.

6.7.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Provider Practitioner Based Extract File processing job (PRPD0150) to run every Tuesday through Saturday after 1:00 am. Delays are possible.

eMedNY job GFPD0150 runs after PRPD0150 to deliver the Provider Practitioner Based Extract File to Magellan, via sFTP. Delays are possible.

6.7.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.7.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.8 Requirements for Process Summary Report produced from the Magellan Medicaid Administration Weekly SMAC Price Update File

GDIT processes a weekly SMAC File from Magellan Medicaid Administration, the process produces a summary report which details records read, accepted, rejected as well as DB2 fetches, inserts, deletes and updates.

6.8.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.8.2 General Processing Steps

- JOB PRRW0320 produces a Process Summary Report which details the records read, accepted, rejected as well as DB2 fetches, inserts, deletes and updates produced by the COBOL program.
- The reports can be viewed in MOBIUS.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.8.3 Interface Processing Time Requirements

Inbound files are retrieved on Wednesdays and processed in batch on the following Mondays, when the Process Summary Report will be produced. If there will be a delay in producing the

Process Summary Report then Magellan Medicaid Administration is contacted via phone to inform them of the delay.

6.8.4 File Naming Convention

The location and naming convention of the Process Summary Report file will be

\\mmaftp\nypdms_cscmac\CSC Summary Reports\SMAC_Summary_Report_ccyymmdd.txt

according to the agreed upon file naming convention. The *CCYYMMDD* is replaced with the current date.

6.8.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details described in the following sections.

6.8.5.1 File Layout

The Process Summary Report has one record type which details records read, accepted, rejected as well as DB2 fetches, inserts, deletes and updates.

6.8.5.2 Data Assembly Characteristics

Table 15 – Data Assembly Characteristics - Process Summary Report to PDP Vendor File

DSN	EPROD.NM.XDFHSC.RW0320.R9999.PROC.CYCnnnn
Description	Process Summary Report to PDP Vendor File
Structure	Sequential Flat file
Copybook	RR09700-R9999
Length	132
Format	Fixed Block
Access	Sequential
Record Count	22

6.8.5.3 Field/Element Definition

Table 16 – Field/Element Definition - Process Summary Report to PDP Vendor File

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
The first 9 lines are generic report header data.						
RR014AI1 – SMAC UPDATE FILE						
FILE – RR014AI1 – SMAC UPDATE FILE (DETAIL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
FILE – RR014AI1 – SMAC UPDATE FILE (TOTAL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Read
FILLER	9994	54	1	Character	Yes	FILLER

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Total Records Accepted
FILE – RR014AO1 – ACTIVITY REPORT						
FILE – RR014AO1 – ACTIVITY REPORT (DETAIL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
FILE – RR014AO1 – ACTIVITY REPORT (TOTAL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
FILE – RR014AO2 – EXCEPTION REPORT						
FILE – RR014AO2 – EXCEPTION REPORT (DETAIL)	9994	1	41	Character	Yes	Label

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
FILE – RR014AO2 – EXCEPTION REPORT (TOTAL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
CURSOR – DRUG_PRC_CSR						
CURSOR – DRUG_PRC_CSR (DETAIL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
CURSOR – DRUG_PRC_CSR (TOTAL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
TABLE R_DRUG_PRICE_TB						
TABLE – R_DRUG_PRICE_TB (DETAIL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
TABLE – R_DRUG PRICE_TB (TOTAL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
TABLE R_DRUG_PRICE_TB						
TABLE R_DRUG_TB (DETAIL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted
TABLE R_DRUG_TB (TOTAL)	9994	1	41	Character	Yes	Label
RECORDS READ	9987	42	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Read
FILLER	9994	54	1	Character	Yes	FILLER
RECORDS ADDED	9987	55	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Added

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
FILLER	9994	67	1	Character	Yes	FILLER
RECORDS CHANGED	9987	68	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Changed
FILLER	9994	80	1	Character	Yes	FILLER
RECORD DELETED	9987	81	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Deleted
FILLER	9994	93	1	Character	Yes	FILLER
RECORDS WRITTEN	9987	94	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Record Written
FILLER	9994	106	1	Character	Yes	FILLER
RECORDS REJECTED	9987	107	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Rejected
FILLER	9994	119	1	Character	Yes	FILLER
RECORDS ACCEPTED	9987	120	12	Numeric (Mask ZZZZ,ZZZ,ZZZ)	Yes	Records Accepted

6.8.6 Communication Methods

eMedNY will produce the Process Summary Report after the Magellan Medicaid Administration Weekly SMAC Price Update File has been processed and deliver via sFTP protocol.

6.8.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Magellan Medicaid Administration Weekly SMAC Price Update File processing job (PRRW0320) to run weekly on Mondays around 3:30 PM.

6.8.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.8.7 Security Requirements

GDIT eMedNY and Magellan Medicaid Administration will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.9 Requirements for R-F-140 – PDP Vendor State Maximum Allowable Cost (SMAC) Update File

The eMedNY system processes a weekly SMAC file from Magellan Medicaid Administration which can include retroactive effective dates. NYSDOH can deactivate a SMAC by end dating based on a termination date received in the SMAC file.

6.9.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.9.2 General Processing Steps

- JOB GFRW0320 executes a utility that is used to get the file from server to the mainframe. The DASD file is created. The SYSOUT from this job will indicate the number of records processed. The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).
- JOB PRRW0320 executes a program that will validate the header, trailer and record count in the file and set a return code 8 for invalid conditions. It will also validate the data fields on each record. Errors are written to a reject report. Valid records are written out, sorted and read into another COBOL program that will update the eMedNY database with the State Maximum Allowable Cost information and produce an update report. A Process Summary report which details the records read, accepted, rejected as well as DB2 fetches, inserts, deletes and updates will be produced by the COBOL program. The

reports can be viewed in MOBIUS. The SYSOUT is archived in mainframe operational reporting platform for the LPAR.

- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.9.3 Interface Processing Time Requirements

Inbound files are retrieved on Wednesdays and processed in batch on the following Mondays. If the file has not been retrieved by 6:00 PM on Wednesday, Magellan Medicaid Administration is contacted via phone for a resolution.

6.9.4 File Naming Convention

The location and naming convention of the SMAC file will be

\\mmaftp\nypdms_cscmac\PROD\ccyymmdd_NYPDPSMAC.txt

according to the agreed upon file naming convention. The CCYYMMDD is replaced with the current date.

6.9.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.9.5.1 File Layout

The Magellan Medicaid Administration Weekly SMAC Price Update File has 3 types of records:

- Header
- Detail
- Trailer

The header record will contain the file creation date. The trailer record will contain the count of all records in the file (this way we can do a better handshaking with the vendor to make sure the file transfers successfully and gets loaded appropriately).

6.9.5.2 Data Assembly Characteristics - PDP Vendor State Maximum Allowable Cost (SMAC) Update File (R-F-140)

Table 17 – Data Assembly Characteristics - PDP Vendor State Maximum Allowable Cost (SMAC) Update File (R-F-140)

DSN	DOH.FH.RF014.SMAC.CYCnnnn
Description	PDP Vendor State Maximum Allowable Cost (SMAC) Update File
Structure	Sequential Flat file
Copybook	N1R00140 State Maximum Allowable Cost (SMAC) Copybook
Length	50
Format	Fixed Block
Access	Sequential
Record Count	Approx. 40K

6.9.5.3 Field/Element Definition

Table 18 – Field/Element Definition - PDP Vendor State Maximum Allowable Cost (SMAC) Update File (R-F-140)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Header Record						
Header identifier	9995	1	11	'01' pad spaces right	Yes	Value that identifies the header record
SPACE	9995	12	1	space	Yes	
File identifier	9995	13	11	'NYSMAC' pad spaces right	Yes	File process name
SPACE	9995	24	1	space	Yes	
File Create date	9995	25	8	Date (Format YYYYMMDD)	Yes	Date that the file was generated
Filler	9995	33	17	spaces	Yes	
End of Line marker	9995	50	CR/LF		Yes	
Detail Record						
NDC	1856	1	11	Char	Yes	The identifier of the drug at the NDC level
SPACE	9995	12	1	space	Yes	
MAC_per_Unit	0500	13	19	Number (11,7)	Yes	The MAC price associated with the NDC
SPACE	9995	32	1	space	Yes	
Effective Date	0485	33	8	Date (Format YYYYMMDD)	Yes	The date the MAC price is effective for NDC
SPACE	9995	41	1	space	Yes	
Termination Date	0486	42	8	Date (Format YYYYMMDD)	Yes	The date the MAC price is no longer valid. Magellan does not use termination dates unless a drug is terminated in our pricing system, meaning zero priced (0). Records that are open and active will contain the value of 30000101
End of Line marker	9995	50	CR/LF		Yes	
Trailer Record						
Trailer Identifier	9995	1	11	'99' pad spaces right	Yes	Value that identifies the trailer record
SPACE	9995	12	1	space	Yes	
Total Count # Records	9995	13	11	Format (000000000000)	Yes	The total count of all rows (inclusive of header/trailer)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Filler	9995	24	26	spaces		
End of Line marker	9995	50	CR/LF			

If an NDC contains multiple records that begin PRIOR to '04/01/2017' with Termination Dates either open or later than '04/01/2017', the records for that NDC will be submitted in Effective Date ascending order with the OLDER dates submitted first.

Magellan will submit Termination Dates of either '01/01/3000' (Open ended) or a date where the MAC rate is no longer valid (zero priced). The records where an end date is Open is considered Active at the time of submission. Records that contain any valid date less than '01/01/3000' are to be considered Inactive (zero price) and the Termination Date will be used to end date the MAC rate record in eMedNY.

6.9.6 Communication Methods

eMedNY will retrieve the Magellan Medicaid Administration Weekly SMAC Price Update File from Magellan's file transfer service via SFTP protocol.

6.9.6.1 Interface Initiation

eMedNY's SFTP client is available to connect to Magellan's service 24/7.

eMedNY's job scheduler schedules the Magellan Medicaid Administration Weekly SMAC Price Update File Retrieval job (GFRW0320) to run weekly on Wednesday at 6:00 PM.

eMedNY's job scheduler schedules the Magellan Medicaid Administration Weekly SMAC Price Update File Processing job (PRRW0320) to run weekly on Mondays around 3:30 PM.

6.9.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY SFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should SFTP service be unavailable or any access issues are encountered.

6.9.7 Security Requirements

GDIT eMedNY and Magellan Medicaid Administration will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.10 Requirements for R-F-162 – Outside Vendor Drug Updated Activity File

The Outside Vendor Drug Updated Activity File is the Drug Updated Activity file that is sent with the Formatted Unloaded Drug information Zipped Data file to Magellan. This file will be transmitted to Magellan via SFTP for processing.

6.10.1 Assumptions

NYSDOH and Magellan is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.10.2 General Processing Steps

- After all eMedNY Pharmacy Processing is complete, Job PRRD0080 runs daily after midnight to create the Outside Vendor Drug Updated Activity File. This file will contain Drug information that was updated from the prior Daily file.
- Job GFRD0080 runs after PRRD0080 to deliver (SFTP) the R-F-162 - Outside Vendor Drug Updated Activity File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.10.3 Interface Processing Time Requirements

The eMedNY Mainframe R-F-162 - Outside Vendor Drug Updated Activity File will be created after midnight once per day. The file will be sFTP'd to Magellan daily.

6.10.4 File Naming Convention

The eMedNY Mainframe R-F-162 - Outside Vendor Drug Updated Activity File will be delivered to Magellan as NYP_DrugFormData_ccyyymmdd.gz, according to the agreed upon file naming convention. The CCYYMMDD will be replaced with current date.

6.10.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.10.5.1 File Layout

The eMedNY mainframe file R-F-162 - Outside Vendor Drug Updated Activity File has three types of records:

- Header
- Detail
- Trailer

6.10.5.2 Data Assembly Characteristics

Table 19 – Data Assembly Characteristics - Outside Vendor Drug Updated Activity File (R-F-162)

DSN	EPROD.NM.XDFHSC.RD0080.RF162.FORMAT.D&YYMMDD
Description	R-F-162 - Outside Vendor Drug Updated Activity File
Structure	Sequential Flat File
Copybook	P1R17100 - Outside Vendor Header Copybook P1R17000 - Outside Vendor Update File Copybook P1R17200 - Outside Vendor Trailer Copybook
Length	331 (new length)
Format	Fixed Block
Access	Sequential
Record Count	2 – 2500 for the daily About 453,000 and growing each month for the Monthly file

6.10.5.3 Field/Element Definition

Table 20 – Field/Element Definition - Outside Vendor Drug Updated Activity File (R-F-162)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Header Record						
Record ID	9992	1	2	CHAR	YES	Constant Value '00'
Run Type	9992	3	9	CHAR	YES	For the Daily run, Run Type will contain 'UPDATE' For the monthly run, Run Type will contain 'FULL FILE'
Filler	9995	12	320	CHAR	N/A	Space Fill
Detail Record						
Record ID	9992	1	2	CHAR	YES	Constant Value '10'
National Drug Code (NDC)	1856	3	11	CHAR	YES	
Filler	9995	14	11	CHAR	N/A	Space Fill
Effective Date	9992	25	8	CHAR	YES	Date of the run in YYYYMMDD format
Termination Date	9992	33	8	CHAR	YES	Constant value '30000101'
Filler	9995	41	21	CHAR	N/A	Space Fill
Child Health Bypass Indicator	0453	62	1	CHAR	YES	Drug Edit Bypass Indicator specifies whether or not the children's facility or nursing home edits should be bypassed during claims processing for drugs included in the rate. Y - Bypass Editing N - Do Not Bypass Editing
Filler	9995	63	2	CHAR	N/A	Space Fill
Package Size	1861	65	11	NUMERIC	YES	Drug Package Size specifies the quantity of a drug contained in a package expressed in units of measure. Format Numeric (11,3).
Filler	9995	76	1	CHAR	N/A	Space Fill

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Max Bill Quantity	4132	77	11	NUMERIC	YES	The maximum quantity that is allowed to be prescribed at one time. Format Numeric (8,3).
ST Max Quantity Code	2943	88	1	CHAR	YES	Reference Frequency Time Code specifies the time period defined for a frequency (number of occurrences (DE 2944) per time period) of a specific drug or procedure.
Current Max MAC	9988	89	10	NUMERIC	YES	Constant value all zeroes.
Filler	9995	99	8	CHAR	N/A	Space Fill
Previous Max MAC	9988	107	10	NUMERIC	YES	Initialized to all zeroes
Filler	9995	117	8	CHAR	N/A	Space Fill
Prior Authorization Code	4191	125	1	CHAR	YES	Reference Prior Authorization/Approval (PA) Required Code specifies whether or not a PA is required for a product or service, and if so, which type or combination is required.
Filler	9995	126	2	CHAR	N/A	Space Fill
Refill Frequency Code	2944	128	1	CHAR	YES	Reference Frequency Occur Code specifies the number of occurrences per time period (DE 2943) defined for a frequency of a specific drug or procedure. A - 24 Times X - Unlimited 1 - Once 2 - Twice 3 - 3 Times 4 - 4 Times 5 - 6 Times 6 - 8 Times 7 - 12 Times 8 - 15 Times 9 - 20 Times
Filler	9995	129	48	CHAR	N/A	Space Fill
Provider State Code	9998	177	2	CHAR	YES	Constant Value 'NY'
Last Transaction Date	9988	179	8	CHAR	YES	Constant value '30000101'

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Drug Obsolete Date	4247	187	8	CHAR	YES	Converts '0001-01-01' date to '30000101' Drug Termination Date is the shelf-life expiration date of the last batch of a drug produced by a drug manufacturer. This date is supplied to the Center for Medicare & Medicaid Services (CMS) by the drug manufacturer/distributor and is passed to eMedNY through the CMS quarterly tape.
Generic Code	5024	195	5	CHAR	YES	Defaults to 'FHSC'. Drug Therapeutic Class Code (State Formulary) specifies the categories to which a drug may be assigned based on its medical action.
Therapeutic Class	0080	200	3	CHAR	YES	Defaults to 'FHS'. Drug Therapeutic Class Code (Specific) is the most specific therapeutic class-coding scheme offered on First Databank National Drug Data File.
Sex	0104	203	1	CHAR	YES	Reference Gender Restriction Code designates the gender to which a procedure, diagnosis, formulary, or supply item is restricted. B - Either; Not Gender Specific F - Females Only M - Males Only
Drug Name	1855	204	30	CHAR	YES	Defaults to 'FHSC'. Drug Label Name is a combination of the drug name as it appears on the package label, plus the strength and dosage form description.
Strength Description	1881	234	10	CHAR	YES	Defaults to 'FHSC'. Drug Strength Description is a text description of the mass and volume measurements of a drug's potency. It may also provide additional descriptors such as needle size, length of a device, etc.
Formulary Indicator	0020	244	1	CHAR	YES	Reference Cancellation Reason Code specifies the reason why a drug, supply, or other medical item is not covered for payment. 0 - Not Cancelled

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
						1 - Product Discontinued By Manufacturer 2 - Federal Regulations Changed 3 - State Regulations Changed 4 - Paid Trough OTC/Supply Codes 5 - NDC Number Changed By Manufacturer 6 - NDC Number Not Valid 7 - Not Paid For Other Reasons 8 - Not Approved For Medicaid List 9 - Billable Under Medical Claim Only
Manufacturer	9995	245	17	CHAR	YES	Defaults to 'FHSC'.
MAC Indicator	9996	262	1	CHAR	YES	If the Drug Price Type Code is 'SMAC' then this will be 'Y' otherwise it will be 'N'
Minimum Age	1957	263	3	NUMERIC	YES	Reference Age (Minimum) is the minimum client age allowed for a procedure, diagnosis, formulary or supply item.
Maximum Age	1947	266	3	NUMERIC	YES	Reference Age (Maximum) is the maximum client age allowed for a procedure, diagnosis, formulary or supply item.
Nursing Home Bypass Indicator	0453	269	1	CHAR	YES	Drug Edit Bypass Indicator specifies whether or not the children's facility or nursing home edits should be bypassed during claims processing for drugs included in the rate. Y - Bypass Editing N - Do Not Bypass Editing
Number of Refills Allowed	6486	270	3	NUMERIC	YES	Drug Refills Count (Maximum Allowable) is the maximum number of refills allowable for a prescription. Defaults to '005'
Minimum Billing Quantity	9988	273	10	CHAR	YES	Constant value all zeroes.
Preferred Drug Indicator	2159	283	1	CHAR	YES	Preferred Drug Code specifies if a drug is on the New York State Preferred Drug List. Values: Y - Preferred Drug N - Not Preferred Drug X - Other

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Service Medicare Indicator	0387	284	1	CHAR	YES	Service Medicare Indicator specifies whether or not Medicare covers a service. Y - Yes N - No
Emergency Indicator	2158	285	1	CHAR	YES	Reference Emergency Code specifies whether or not a procedure, drug, or diagnosis is emergency related. N - Not Emergency related Y - Emergency related
Drug Generic Product Code	0842	286	1	CHAR	YES	Drug Generic Product Code specifies whether or not a drug has a generic equivalent and whether that generic is only available from a single distributor or from multiple distributors. Space - Default 0 - Non-drug item 1 - Generic drug 2 - Branded drug 3 - Multi-source drug 4 - Single-source drug
Drug Package Description	1860	287	10	CHAR	Yes	Drug Package Description describes how a drug is packaged.
Drug Form Code	1833	297	1	CHAR	Yes	Drug Form Code specifies the basic drug measurement unit for performing price calculations. 1 - Each (Tablets, Kits, Etc.) 2 - Milliliters (Liquids) 3 - Grams (Solids)
Drug Strength Units Count	1882	298	11	NUMERIC	Yes	The Drug Strength Units Count is the number of mass strength units (DE 1883) in the measurement of a drug's potency. Format Numeric (11,3).
Drug Strength Units Type	1883	309	10	CHAR	Yes	The Drug Strength Units Type specifies the type of mass strength unit used to measure a drug's potency.
Drug Strength Volume Count	1879	319	7	NUMERIC	Yes	The Drug Strength Volume Count is the number of volume strength units (DE 1880)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
						in the measurement of a drug's potency. Format Numeric (7,3).
Drug Strength Volume Type	1880	326	5	CHAR	Yes	The Drug Strength Volume Type specifies the type of volume strength unit used to measure a drug's potency.
Frequency Time Code	2943	331	1	CHAR	Yes	Reference Frequency Time Code specifies the time period defined for a frequency (number of occurrences (DE 2944) per time period) of a specific drug or procedure. A - 18 Months B - 3 Years C - 2 Weeks D - 3 Weeks E - 4 Years F - 8 Years X - Unlimited Y - 2 Months 1 - 1 Day 2 - 1 Week 3 - 1 Month 4 - 3 Months 5 - 6 Months 6 - 1 Year 7 - 2 Years 8 - 5 Years 9 - Lifetime
Trailer Record						
Record ID	9988	1	2	CHAR	YES	Constant Value '99'
Record Count	9987	3	10	NUMERIC	YES	Count of records in file inclusive of Header and Trailer records
Filler	9995	13	319	CHAR	N/A	Space Fill

6.10.6 Communication Methods

eMedNY will deliver the R-F-162 - Outside Vendor Drug Updated Activity File to Magellan over the Internet via sFTP protocol.

6.10.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the R-F-162 - Outside Vendor Drug Updated Activity File processing job (PRRD0080) to run daily after all eMedNY Provider Processing is complete. Then the sFTP job (GFRD0080) transmits, via sFTP, the data file directly to Magellan.

6.10.6.2 Flow Control

Magellan will notify the GDIT Command Center should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Magellan should sFTP service be unavailable or any access issues are encountered.

6.10.7 Security Requirements

GDIT eMedNY and Magellan will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

7. Qualification Methods

Qualification methods to be used to verify that the requirements for the interfaces defined in Section 6 “*Detailed Interface Requirements*” have been met include:

- During Construction Phase, unit test packages are created with visual examination and approval of test results.
- During System Integration Phase, test packages are created with visual examination and approval of test results. Test results are then presented to NYSDOH for their sign-off.
- During Quality Assurance Phase, automated scripts are executed to determine results are as expected.
- Post Implementation Validate is performed after a project is moved into Production where visual examination of file processing is reviewed for accuracy.

Appendix A – Record of Changes

Table 21 – Record of Changes

Version Number	Date	Author/Owner	Description Of Change
0	05/06/2019	Marie Normore	Initial Draft created with EP6409.
1	12/10/2020	Marie Normore	Modified B-F-963 - Preferred Drug Program (PDP) Client Data Extract File layout with EP6835.
2	12/28/2020	Rajesh Sinha	Added C-F-080 Outside Vendor PDP Claims File and the C-F-081 Outside Vendor PDP Claims File Check Digit Control File with EP6852.
3	03/31/2021	Mahesh Mamillapalli	Added file R-F-162 - Outside Vendor Drug Updated Activity File with EP6684.
4	03/31/2022	Cyd Hoen-Shears	Added file P-F-408 Practitioner Address Extract File with EP6684.
5	03/31/2022	Barrett Drosehn	Added file P-F-409 Practitioner Phone (and Fax) Extract File. Added file P-F-415 Pharmacy Provider Extract File with EP6684.
6	06/30/2022	Michael Vertucci	Added file P-F-419 Practitioner Base Extract File with EP6684.
7	02/23/2023	Joanne Bologna-Jill	Merged Requirements for Process Summary Report produced from the Magellan Medicaid Administration Weekly SMAC Price Update File and Requirements for R-F-140 PDP Vendor State Maximum Allowable Cost (SMAC) Update File into this ICD from original separate Magellan ICDs. Modified R-F-140 PDP Vendor State Maximum Allowable Cost (SMAC) Update File to increase price by 8 bytes and record length to 50 bytes with EP7320.
8	03/31/2023	Carolyn Mitchell	Updated R-F-162 Outside Vendor Drug Updated Activity File with EP7386.

Appendix B – Acronyms

Table 22 – Acronyms

Acronym	Literal Translation
CIN	Client Identification Number
DAW	Dispensed As Written
DOH	Department of Health
DUR	Drug Utilization Review
eMedNY	Electronic Medicaid of New York
HARP	Health and Recovery Plan
HIPAA	Health Insurance Portability and Accountability Act
ICD	Interface Control Document
MAC	Maximum Allowable Cost
MMIS	Medicaid Management Information System
MQFTE	MQ File Transfer Edition
NDC	National Drug Code
NPI	National Provider Identifier
NYeNet	Statewide Network
NYSDOH	New York State Department of Health
NYSOH	New York State of Health
PA	Prior Approval
PDP	Preferred Drug Plan
PHI	Protected Health Information
PII	Personally Identifiable Information
POS	Point of Service
sFTP	SSH File Transfer Protocol
SIT	Systems Integration Testing
TCN	Transaction Control Number
TPL	Third Party Liability

Appendix C – Glossary

Table 23 – Glossary

Term	Acronym	Definition
Preferred Drug Plan	PDP	Promotes the prescribing of less expensive, effective prescription drugs when medically appropriate.

Appendix D – Referenced Documents

Table 24 – Referenced Documents

Document Name	Document Location and/or URL	Issuance Date
Claims Technical Design Document	\\CSCRSRS0005\MedNY Project File\Semi-Annual Documentation	Semi-Annually
Client Technical Design Document	\\CSCRSRS0005\MedNY Project File\Semi-Annual Documentation	Semi-Annually
EP6852	\\ENYRSRFILE\csc\System Development\Evolution Projects\Active Projects\6800\Project #6852\PDD	January 2021
Provider Technical Design Document	\\CSCRSRS0005\MedNY Project File\Semi-Annual Documentation	Semi-Annually
Reference Technical Design Document	\\CSCRSRS0005\MedNY Project File\Semi-Annual Documentation	Semi-Annually
EP7320	\\ENYRSRFILE\csc\System Development\Evolution Projects\Active Projects\7300\Project #7320\PDD\PDD EP7320	February 2023
EP7386	\\enyrsrfile\CSC\System Development\Evolution Projects\Active Projects\7300\Project #7386\HLD\Release 2 thru 4__2.2.23	March 2023

Appendix E – Approvals

The undersigned acknowledge that they have reviewed the ICD and agree with the information presented within this document. Changes to this ICD will be coordinated with, and approved by, the undersigned, or their designated representatives.

Table 25 – Approvals

Document Approved By	Date Approved
----- Name: Patric Dempster, CISO and Privacy Officer - GDIT	----- Date
----- Name: <Name>, <Job Title> - <Company>	----- Date
----- Name: <Name>, <Job Title> - <Company>	----- Date
----- Name: <Name>, <Job Title> - <Company>	----- Date

Appendix F – Contact Information

Table 26 – Contact Information

Entity	Contact Description/Name	Phone	Email Address
Magellan	Jim Whelan	Work (518) 220-3930 Cell (518) 763-1415	JKWhelan@magellanhealth.com
Magellan	Tammy Freeman	Work (804) 548-0101 Cell (804) 921-9090	TAFreeman@magellanhealth.com
Magellan	Umakanth Pandurangaiah	Work (804) 548-0181	
GDIT	GDIT Command Center	(318) 549-4333	RDC_Command_Center@gdit.com

Appendix G – Additional Appendices

There are no additional appendices.



**Department
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Executive Deputy Commissioner

New York State Medicaid Management Information System (MMIS)

Acentra Health, LLC

EP8268

Interface Control Document (ICD)

eMedNY Data Files

ICD Version 1.0

7/24/2025

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1. Purpose of Interface Control

The intended audience of the Electronic Medicaid of New York (eMedNY) Project Interface Control Document (ICD) is all project stakeholders, including the project sponsor, senior leadership, and the project team.

This ICD defines the eMedNY system's Data Files interface with Acentra Health (Kepro; HID). This ICD is to communicate all inputs and outputs from the system for all potential actions.

2. Introduction

Electronic Medicaid of New York (eMedNY) is the New York State (NYS) Medicaid program claims processing system. The system allows NYS Medicaid providers to submit claims and receive payments for Medicaid-covered services provided to eligible clients.

This Interface Control Document (ICD) describes the relationship between the Electronic Medicaid of New York (eMedNY) information system and Acentra Health (Kepro; HID) and specifies the requirements of both participating systems. This includes the concept of operations, the file structure and protocols that govern the interchange of data, and the communication paths along which the data is expected to flow.

This is the current and official version of the interface. Other versions in development represent proposed changes until fully approved.

For each interface, the following information will be provided:

- A general description of the interface
- Assumptions where appropriate
- A description of the data exchange format and protocol for exchange
- Estimated size and frequency of data exchange

3. Overview

In order to determine the client eligibility, adjudicate and pay healthcare claims and generally serve as the Medicaid Fiscal Agent for the NYSDOH, the eMedNY information system must exchange data with a number of external State and Federal agencies and partners.

The New York State Department of Health (DOH) has implemented a program that allows the pharmacy community to submit transactions in an online real-time environment that performs a Prospective Drug Utilization Review (ProDUR). In order to receive payment for services rendered, all pharmacies must submit their transactions through the online ProDUR system.

Acentra Health (Kepro; HID) uses these files to update their data repository. To accurately perform Pharmacy Prior Approval administration, Acentra Health (Kepro; HID) requires the most current information.

4. Assumptions/Constraints/Risks

4.1 Assumptions

- ICDs will be reviewed, updated, and routed/transmitted for approval based on changes resulting from Evolution Project requirements and/or other enhancements or maintenance activities.
- Appropriate identification and authentication controls, audit logging, and access controls are implemented.
- Disruption of normal functioning environment will not occur as a result of interface communications.
- Key personnel are available in case of interface-related issues and/or incident.
- Key personnel have been identified and are trained annually in their roles.
- Current backups of the application software and data are intact and available at the offsite storage facility.
- Data transfer capability is available 24 hours a day/7 days a week.
- Users are assigned logical accesses approved by appropriate personnel.
- eMedNY's SFTP service is Internet facing.

4.2 Constraints

- eMedNY will not be adversely impacted by the introduction of the interface.
- No coding changes that interrupt connectivity between the two systems may be performed on this interface without NYSDOH approval.
- All system to system file transfer activity must be logged, correlated and reviewed to ensure compliance with New York State (NYS) and GDIT auditing practices.
- ICDs will be reviewed, updated and routed/transmitted for approval based on changes resulting from Evolution Project requirements and/or other enhancements or maintenance activities.

4.3 Risks

There are no specific risks associated with this interface.

5. General Interface Requirements

5.1 Interface Overview

eMedNY and Acentra Health (Kepro; HID) interface supports the bidirectional transfer of data via Secure File Transfer Protocol (SFTP). Any SFTP client that supports the RSA encryption algorithm and has been certified as FIPS 140-2 compliant.

5.2 Functional Allocation

eMedNY's mainframe workload scheduler will schedule the creation of the Acentra Health (Kepro; HID) Client Update File Tuesday through Saturday and will "normally" be ready for pick up at 5 am. Delays are possible depending on other eMedNY Client Processing. If files are delayed, Acentra Health (Kepro; HID) must periodically check for the file.

eMedNY's mainframe workload scheduler will schedule the creation of the Acentra Health (Kepro; HID) Pharmacy Extract File Tuesday through Saturday and will "normally" be ready for pick up at 5 am. Delays are possible depending on other eMedNY Provider Processing. If files are delayed, Acentra Health (Kepro; HID) must periodically check for the file.

eMedNY's mainframe workload scheduler will schedule the creation of the Acentra Health (Kepro; HID) Practitioner Extract File Tuesday through Saturday and will "normally" be ready for pick up at 5 am. Delays are possible depending on other eMedNY Provider Processing. If files are delayed, Acentra Health (Kepro; HID) must periodically check for the file.

eMedNY's mainframe workload scheduler will schedule the creation of the Acentra Health (Kepro; HID) Drug Update Activity File Tuesday through Saturday and will "normally" be ready for pick up at 5 am. Delays are possible depending on other eMedNY Drug Processing. If files are delayed, Acentra Health (Kepro; HID) must periodically check for the file.

eMedNY's mainframe workload scheduler will schedule the creation of the Acentra Health (Kepro; HID) Pharmacy/Non-Pharmacy Claim File weekly and will "normally" be ready for pick up at 5 am. Delays are possible depending on other eMedNY SURS/Claims Processing. If files are delayed, Acentra Health (Kepro; HID) must periodically check for the file.

5.3 Data Transfer

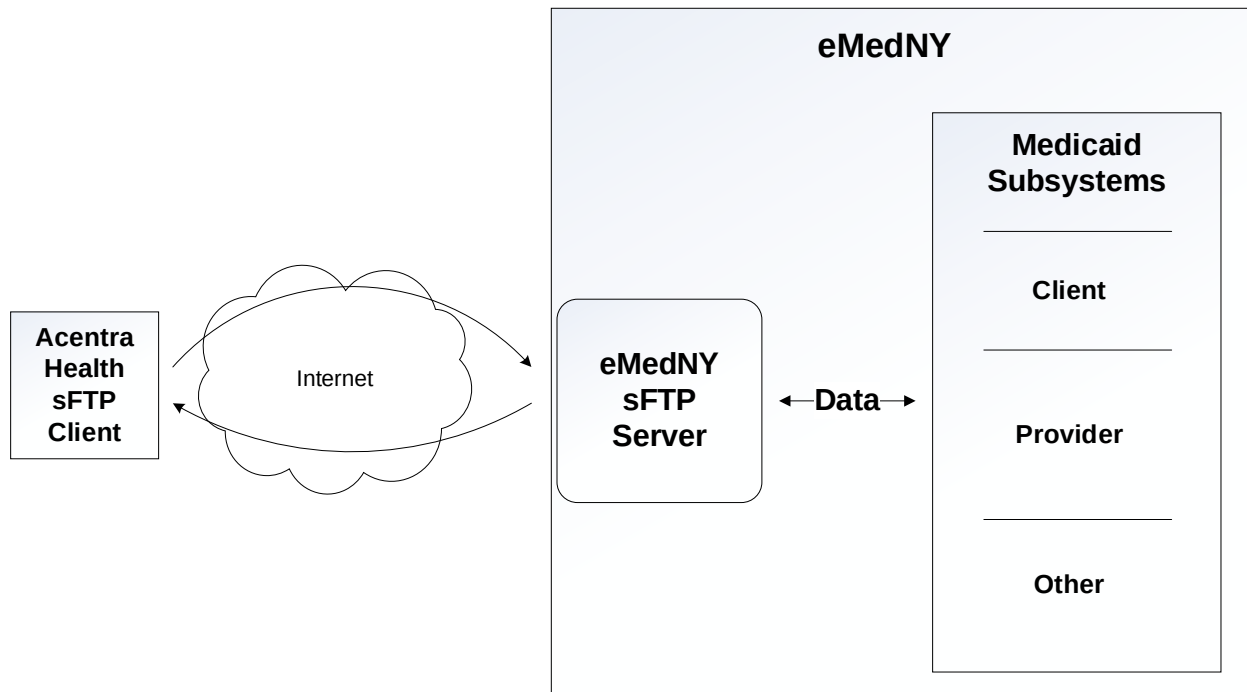


Figure 1 – Data Transfer Diagram

eMedNY acts as the sFTP Server, Acentra Health (Kepro; HID) connects to eMedNY as sFTP client.

Acentra Health (Kepro; HID) connects to the eMedNY sFTP server on a daily basis and polls the directory for the files (See section File Naming Convention).

If the file is not found, Acentra Health (Kepro; HID) should contact the GDIT command center.

If the file is found, Acentra Health (Kepro; HID) retrieves the file and follows the ETL process.

eMedNY creates the data files and transmits them to the HID outbound directory for Acentra Health (Kepro; HID) to retrieve from per agreed upon folder structures.

5.4 Transactions

Not performed for this interface.

5.5 Security and Integrity

eMedNY's Internet facing SSH File Transfer Protocol (sFTP) service leverages Open SSH to establish secure and encrypted transport, data integrity and authentication for data transfers between Acentra Health (Kepro; HID) and eMedNY.

Validation checks such as record counts, file formats, source stamps, and date-time stamps will be performed on the data transferred in this interface. When issues with this interface are discovered that prevent data exchange, Acentra Health (Kepro; HID) personnel will be notified immediately by eMedNY operations teams.

5.6 Operational Support & Service Levels

This section discusses the Operational Level expectations of the interface regarding availability, performance, and scale. Interfaces do not inherit eMedNY's "continuously available" SLA's unless specifically mentioned in the section below.

5.6.1 Service Level Agreements (SLA)

This interface does not have any Service Level Agreements.

5.6.2 Operational Expectations

5.6.2.1 Usage Policy

This interface is designed to meet the use cases as mentioned in the requirements document. Extending the usage of interfaces beyond the original intent requires the approval of DOH and GDIT.

The interface user/consumer might be disabled if their usage pattern presents security risks or operational expectations are not met.

5.6.2.2 Availability & Performance

Below is the general guidance on the operational levels of an SLA. These are delivered on a best efforts basis.

- Not Applicable.

5.6.2.3 Support

If you face issues with the interface in the production environment, call the GDIT Command Center at +1 318-549-4333.

Non production issues need to be communicated to the onboarding team/project team during normal business hours.

6. Detailed Interface Requirements

This section refers and/or describes details for the Acentra Health (HID) interfaces. This ICD defines the conditions under which each file is sent or received.

6.1 Requirements for B-F-963 – Preferred Drug Program (PDP) Client Data Extract File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Client information including; Demographic, Eligibility, Medicare, Managed Care, Long Term Care, Restriction/Exception/Exemption and Third Party Insurance.

6.1.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.1.2 General Processing Steps

- After all eMedNY Client Processing is complete, Job PRBD0960 runs Tuesday through Thursday to extract the information for Acentra Health (HID).
- Job PFBD0960 runs after PRBD0960 to deliver the files to the eMedNY local directly for Acentra Health (HID) to retrieve the Client Update file.
- For the Full Client Update File, after all eMedNY Client Processing is complete, job PRBA0960 runs annually on the second Tuesday in June to extract the information for Acentra Health (HID).
- Job GFBA0960 runs after PRBA0960 to deliver the files to the eMedNY local directly for Acentra Health (HID) to retrieve the Client Update file.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.1.3 Interface Processing Time Requirements

The B-F-963 - Preferred Drug Program (PDP) Client Data Extract File will be made available by 5:00 am.

The Full Client Update File will be made available annually on the second Tuesday in June 5PM.

6.1.4 File Naming Convention

The eMedNY mainframe file B-F-963 - Preferred Drug Program (PDP) Client Data Extract output file will be delivered to Acentra Health as HID_RecipDataU_ccyymmdd, according to the agreed upon file naming convention. The ccyymmdd will be replaced with current date.

Due to volume the annual B-F-963 - Preferred Drug Program (PDP) Client Data Full Extract is split in to 4 separate files for delivery. The eMedNY mainframe file B-F-963 - Preferred Drug Program (PDP) Client Data Extract output file will be delivered to Acentra Health (HID) as

HID_RecipAnnualA_20yymmdd
HID_RecipAnnualB_20yymmdd

HID_RecipAnnualC_20yymmdd

HID_RecipAnnualD_20yymmdd

according to the agreed upon file naming convention. The YYMMDD will be replaced with current date.

6.1.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.1.5.1 File Layout

The Preferred Drug Program (PDP) Client Data Extract File has 10 types of records:

- Header
- Details (6 required, 4 optional) – multiples allowed
- Trailer

6.1.5.2 Data Assembly Characteristics

Table 1 – Data Assembly Characteristics - Preferred Drug Program (PDP) Client Data Extract File (B-F-963)

DSN	EPROD.NM.XDFHSC.BD0960.FH.Dyymmdd - daily EPROD.NM.XDFHSC.BA0960.FH.Dyymmdd - annual
Description	B-F-963 - Preferred Drug Program (PDP) Client Data Extract
Structure	Sequential Flat File
Copybook	W1B09600 – Preferred Drug Program (PDP) Client Extract File Copybook
Length	137
Format	Fixed Block
Access	Sequential
Record Count	60 – 70K Annual File – Approximately 72 Million Records

6.1.5.3 Field/Element Definition

Table 2 – Field/Element Definition - Preferred Drug Program (PDP) Client Data Extract File (B-F-963)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Header Record - Record Type 00				Required Segment
Record Type	System generated	Char(2)	Identifies type of record. Required Numeric Value 00 = Header Record	Constant Value '00'
Type of Load	System generated	Char(1)	Identifies the type of enrollment process being requested. Required Values U = Update only (Full patient records required) R = Full file refresh with logical deletion of missing records. F = Full file without refresh. (no logical deletion of missing records)	Type of Load Processing: U – Update only. Client must submit full historical information for the members who are submitted. Patient record types 15-50, which are not submitted, will be logically deleted. There will be no logical deletion of patients who are not submitted. F – Full file without refresh. The same processing as Update will apply but all of the client's members are contained in the file. There will be no logical deletion of missing members. R – Full file refresh with logical deletion of missing records. Same processing as Update will apply for submitted individual patient records. Load will logically delete all enrollment information for missing members. (This Option will not be used.) For GDITs initial load, we will be using the 'F' option. For Daily updates (Tues AM - Sat AM) we will use the 'U' option.
Client ID	System generated	Char(15)	Identifies the client the enrollment file is for. ID will be assigned by First Health Services. Required	NYPDP
Client Name	System generated	Char(30)	Name of the client. Optional	NEW YORK PDP
Client Contact Name	System generated	Char(30)	Name of contact person if there are problems with the file. Optional	CSC COMMAND CENTER

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Client Contact Phone	System generated	Char(20)	Telephone number of contact person. Please include extension. Optional	318-549-4333
Creation Date	System generated	Char(8)	Date the file was created. Optional Numeric Format CCYYMMDD	Current Date
Filler		Char(31)	Space Fill	Spaces
Base Record - Record Type 05				Required Segment
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 05 = Member Base Information	Constant Value '05'
Update Type	System generated	Char(1)	Type of update record is requesting. Required Values I = Insert (Add) C = Change D = Delete	If the record is submitted as an insert (add) but the patient exists, the record will be processed as a change. If the record is submitted as a change but the patient doesn't exist, the record will be processed as an insert (add). Default to 'C'
Cardholder Id	0694	Char(20)	Unique ID of the cardholder Required	eMedNY Client ID
First Name	0637	Char(15)	Member first name Required	eMedNY 10 bytes
Last Name	0639	Char(25)	Member last name Required	eMedNY 17 bytes
Initial	0640	Char(1)	Member middle initial Optional	
Relationship	System generated	Char(1)	ID of the relationship of the family member to the Cardholder. Required Values 1 = Cardholder 2 = Spouse 3 = Child 4 = Other 5 = Student	Hard Code '1'

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
			6 = Disabled Dependent 7 = Adult Dependent 8 = Significant Other '0' is not a valid specification	
Person Code	System generated	Char(3)	The ID code assigned to a specific person within a family (or cardholder ID). Required for clients who use person code as a part of their eligibility process.	Spaces
Date Of Birth		Char(8)	Date of birth of the member Required for clients who use date of birth as a part of their eligibility process. Numeric Format CCYYMMDD	Unborns will have birth dates of '00000000'
Gender		Char(1)	Gender of the member Required for clients who use gender as a part of their eligibility process. Values M = Male F = Female U = Unknown	
Race	System generated	Char(1)	Race code for the member Optional	Spaces
Date of Death		Char(8)	Date of death of the member Optional Format CCYYMMDD	Date of Death for living clients will be '00000000'
Multiple Birth Number	System generated	Char (1)	Unique number to identify which twin or multiple the members is. Optional	Hard Code numeric '0'
Tracking Group	System generated	Char(15)	A unique identifier for a particular collection of groups sharing the same patient base. First Health will identify the value required in this field. Required	NYPDP
Filler		Char(35)	Space Fill	Spaces
Alias(1) Record - Record Type 10				Required Segment All clients will have at least one Alias record with the Alias ID being the same as the cardholder's ID. If the client is linked to another at eMedNY, there will be

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
				additional segments for each client the cardholder is linked to.
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 10 = Member Alias ID Information	Constant Value '10'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Member's Alias IDs	System generated	Char(20)	Other IDs associated with the member, which can be used to adjudicate a drug claim or informational only. Multiple other IDs allowed. Required	Same as B_SYS_ID in 1st Alias Record
Alias ID Type	System generated	Char(2)	Code for the type of id the alias id is considered. Required	Hard Code 'MI' for main alias ID
Submission Allowed Indicator	System generated	Char(1)	Indicates if the alias can be submitted for claims processing through POS, batch or screen entry. If not allowed the alias id is for informational purposes only. Required Values Y – Yes N – No Spaces will be converted to No.	Hard Code 'Y'
Filler		Char(92)	Space Fill	Spaces
Alias(2) Record - Record Type 10				Required Segment All clients will have at least one Alias record with the Alias ID being the same as the cardholder's ID. If the client is linked to another at eMedNY, there will be additional segments for each client the cardholder is linked to. Note; the Alternate (Alias ID) for a client may or may not have eligibility for the last two years. If they have eligibility, the alternate client will also be present on the FH file with their own set of services. If they do not have eligibility

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
				within the last two years, they will not be present on the file
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 10 = Member Alias ID Information	Constant Value '10'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Member's Alias IDs		Char(20)	Other IDs associated with the member, which can be used to adjudicate a drug claim or informational only. Multiple other IDs allowed. Required	
Alias ID Type	System generated	Char(2)	Code for the type of id the alias id is considered. Required	Hard Code 'AI' for Alternate ID
Submission Allowed Indicator	System generated	Char(1)	Indicates if the alias can be submitted for claims processing through POS, batch or screen entry. If not allowed the alias id is for informational purposes only. Required Values Y – Yes N – No Spaces will be converted to No.	Hard Code 'N'
Filler		Char(92)	Space Fill	Spaces
Address Record - Record Type 15				Optional Segment - Multiples allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 15 = Member Address Information	Constant Value '15'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Effective Date	0528	Char(8)	Date the address is effective. If not submitted the system date will be used. Required Numeric Format CCYYMMDD	

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Address Code	System generated	Char(1)	Type of Address Required Values 1 – Mailing 2 – Residential 3 – Business 4 – Temporary 5 – Other 6 – Card Mailing 9 – Member Submitted Claims (used for member payment)	Hard Code '1'
Address Line 1	0576	Char(32)	First line of street address of member. May be only line of address. Required	eMedNY field has 28 bytes If B_IC_CARE_OF_NAM spaces, use B_LINE1_AD
Address Line 2	0576	Char(32)	Second line of the street address of member. Used only if first line will not accommodate a complete address. Optional	35 bytes on eMedNY (and WMS) record. eMedNY will remove extraneous spaces from this field. Note, this will not guarantee that the field will not be truncated
City	0574	Char(30)	City in which member resides Required	
State	9808	Char(2)	State abbreviation where member resides. Required.	
Zip	9805	Char(10)	Extended zip code where the member resides. Optional	Comes 5 bytes from WMS, We store as 15 (left justified), straight move to FH record
Phone Record - Record Type 20				Optional Segment - Multiples allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required, Numeric Value 20 = Member Telephone Information	Constant Value '20'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Effective Date	0528	Char(8)	Date the address is effective. If not submitted the system date will be used. Required, Numeric Format CCYYMMDD	

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Telephone Type Code	System generated	Char(1)	Type of Telephone Number Required Values B – Business R – Residence C – Mobile/Cellular F – Fax P – Pager O – Other	Hard Code 'R'
Area Code	0588	Char(7)	The telephone area code for the member Optional	Area code only from phone number
Telephone Number	0588	Char(10)	The telephone number for the member Required Numeric	Last 7 bytes of phone number only
Extension	System generated	Char(6)	The extension for the phone number Optional	Spaces
Filler		Char(83)	Space Fill	Spaces
Eligibility Record - Record Type 25				Required Segment - Multiples allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required numeric Value 25 = Member Eligibility Information	Constant Value '25'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Group ID	System generated	Char(15)	ID number assigned to Medicaid program or employer plan to identify specific drug coverage. Required	3 Group IDs: - NYDPDPRXA (Eligibility Pharmacy Allowed) Based on Client COE Coverage Codes: 01, 02, 07, 08, 09 (MSP Ind not = L, U or X), 10, 11, 13, 14, 15, 16, 18, 19, 20, 21, 22, 23, 24, 30, 31, 32, 33 - NYDPDPRXN (Eligibility Pharmacy not allowed) Based on Client COE Coverage Codes: 04, 05, 06, 17, 34, 36

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
				- NYDPDMCN (Managed Care Pharmacy not allowed) Regardless of coverage code, if the client is enrolled in a plan that covers Pharmacy, this Group ID will be used. Read through all segments for the service date. If any of these segments have either the NYDPDRXN or NYDPDMCN, deny the PA for this client.
Effective Date	0593 4172	Char(8)	The date the member is eligible for coverage under the group. Required Numeric Format CCYYMMDD	
Termination Date	0594 1419	Char(8)	The date the member's coverage is terminated. Optional Numeric Format CCYYMMDD	Open ended date converts to '00000000'
Termination Reason Code	System generated	Char(1)	The reason the member was terminated. Optional Values 1 = Subscriber Deceased 2 = Patient Deceased 3 = Subscriber Coverage Expired 4 = Patient Coverage Expired 5 = Plan Terminated/Expired 6 = Subscriber Purged 7 = Patient Purged 8 = Default Group/Plan Terminated	Space or '1' for deceased clients (B_STATUS_CD = '13')
Client Payer Status	System generated	Char(1)	Specifies whether the Client is considered the primary or secondary insurance. Medicaid will only use to submit Medicare Part B coverage. Submit coverage as secondary when the patient had Medicare Part B. Optional Values P = Primary S = Secondary Space will be converted to 'P' – Primary	Hard Code 'P'

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Coverage Level Indicator	System generated	Char(1)	Indicates level coverage the cardholder has under the group. Required Values I = Subscriber Only S = Spouse Only D = Non-spousal Dependents Only C = Subscriber and Spouse Only K = Subscriber and Dependents Only W = Spouse and Dependents Only F = Family	Hard Code 'I'
Filler		Char(81)	Space Fill	Spaces
Client Specific Reporting - Record Type 30				Optional segment - multiples allowed Use this record to Indicate Medicare Part D and Lockin Information
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 30 = Member Client Specific Reporting Information	Constant Value '30'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Effective Date	0455 4242	Char(8)	The date the Client Specific Reporting information is effective. Required Numeric Format CCYYMMDD	
Termination Date	0456 4240	Char(8)	The date the Client Specific Reporting information is terminated. Optional Numeric Format CCYYMMDD	Open ended date converts to '00000000'
Reporting Information Type	System generated	Char(2)	Type of information in reporting information field. Required	a. Medicare Part D - 'PD' (if T_MCARE_CVRG_TY_CD = 'MD') b. Medicare Part B - 'PB' (if T_MCARE_CVRG_TY_CD = 'MB') c. Medicare Part C - 'PC', d. Lockin Pharmacy - 'LP' (if B_LOCKIN_TY_CD = '05')

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
				e. Client Category of Eligibility - 'CE' f. Long Term Care - 'LT' g. When none of the above set to 'RE'.
Reporting Information	1563	Char(25)	Client specified information needed for reporting or special adjudication processing. Optional	a. Medicare Part D - 'PART D' (if T_MCARE_CVRG_TY_CD = 'MD') b. Medicare Part B - 'PART B' (if T_MCARE_CVRG_TY_CD = 'MB') c. Medicare Part C - 'PART C' e. Category of Eligibility Code f. Long Term Care Provider Type g When information source table is: Lockin Table value is Lockin Type Cd & Provider ID Client Exception Table value is Restriction Cd & PID Managed Care Exemption table value is Exemption Type.
Filler		Char(72)	Space Fill	
Regional Reporting Rec - Record Type 35				Optional Segment - Multiples allowed
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 35 = Member Regional Reporting Information	Constant Value '35'
Cardholder Id	0694	Char(20)	Unique ID of the cardholder Required	
Effective Date	0593	Char(8)	The date the Regional Reporting Information is effective. If not submitted the system date will be used. Required Numeric Format CCYYMMDD	
Termination Date	0594	Char(8)	The date the Regional Reporting Information is terminated. Optional Numeric Format CCYYMMDD	Open ended date converts to '00000000'
County Code	4275	Char(4)	County code where the member resides Optional	From Current segment only

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Town Code	System generated	Char(4)	Town code where the member resides Optional	Spaces
Filler		Char(91)	Space Fill	Spaces
Ltc Record - Record Type 40				Added for project EP6409
Record Type	System generated	Char(2)	Identifies the type of record for processing. Required Numeric Value 35 = Member Regional Reporting Information	Constant Value '40'
Cardholder ID	0694	Char(20)	Unique ID of the cardholder Required	
Client Principal Provider ID	1563	Char(15)	Optional	
Principal Provider Service Begin Date	4354	Char(8)	Principal Provider Service Begin Date is the first day of a hospital stay (long-term care). Numeric Format CCYYMMDD	
Principal Provider Service End Date	4187	Char(8)	Principal Provider Service End Date is the last day of a hospital stay (long-term care). Numeric Format CCYYMMDD	
Filler		Char(84)	Space Fill	
TPL Record - Record Type 45				This Record Type is not Currently Used
Lockin Record - Record Type 50				This Record Type is not Currently Used
Trailer Record - Record Type 99				Required Segment
Record Type	System generated	Char(2)	Identifies type of record. Required Numeric Value 99 = Trailer Record	Constant Value: '99'
Client ID	0694	Char(15)	Identifies the client the enrollment file is for. ID will be assigned by First Health Services. Required	NYPDP
Total Record Count	System generated	Char(9)	Total number of records on the file including the header and trailer records Required Numeric	Count of all records

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Filler		Char(111)	Space Fill	

6.1.6 Communication Methods

eMedNY will use sFTP to deliver the B-F-963 - Preferred Drug Program (PDP) Client Data Extract Files to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.1.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the Acentra Health (HID) Client Update File processing job (PRBD0960) to run Tuesday through Thursday after all eMedNY Client Processing is complete. Then the sFTP job (PFBD0960) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

eMedNY's job scheduler schedules the Acentra Health (HID) processing job (PRBA0960) to run on the second Tuesday in June as required. Then job PFBA0960 transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.1.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.1.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.2 Requirements for LDAP Associated Provider File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Prescriber Provider information including, many different identifying numbers, and types of providers.

6.2.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.2.2 General Processing Steps

- All eMedNY Provider Processing is completed.
- Job PRPD0190 runs to create the LDAP Associated Provider File. The actual LDAP Associated Provider File is created by a selective Unload of two actual data fields:
 - o Field #1 consists of active EPACES UserIDs
 - o Field #2 consists of 22 blanks
 - o Field #3 consists of the NPI of providers related to the EPACES UserID

- o Field #4 consists of 10 blanks.
- o Providers must have an active TSN & a License active within the past year.
- Job PFPD0190 runs after PRPD0190 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the LDAP Associated Provider File
- eMedNY outbound LDAP Associated Provider File will be available for pickup by Acentra Health (HID) Tuesday through Saturday.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.2.3 Interface Processing Time Requirements

The LDAP Associate Provider File will be made available by 5:00 am.

6.2.4 File Naming Convention

The eMedNY mainframe file LDAP Associate Provider File will be delivered to Acentra Health as HID_LDAPProv_s_ccymmdd, according to the agreed upon file naming convention. The ccymmdd will be replaced with current date.

6.2.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.2.5.1 File Layout

The LDAP Associate Provider File has only one type of record.

6.2.5.2 Data Assembly Characteristics

Table 3 – Data Assembly Characteristics - LDAP Associate Provider File

DSN	EPROD.NM. XDPPAS.PD0190.LDAPPROV.Dyymmdd
Description	LDAP Associated Provider File
Copybook	Not Applicable
Length	50
Format	Fixed Block
Access	Sequential
Record Count	Just under 21M and growing

6.2.5.3 Field/Element Definition

Table 4 – Field/Element Definition - LDAP Associated Provider File

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
EPACES User ID	2411	Char(8)	System User Identification Number	Active EPACES user ID
Filler	N/A	Char(22)		Space Fill
Provider NPI	6477	Char(10)	National Provider Identifier (NPI)	National Provider Identifier (NPI)
Filler	N/A	Char(10)		Space Fill

6.2.6 Communication Methods

eMedNY will use sFTP to deliver the LDAP Associated Provider File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.2.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the LDAP Associate Provider File creation (PRPD0190) to run Tuesday through Thursday after all eMedNY Provider Processing is complete. Then the sFTP job (PFPD0190) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.2.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.2.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.3 Requirements for P-F-415 – Pharmacy Extract File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Pharmacy Provider information including; Provider Identification data, Address Information and other Contact data.

6.3.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.3.2 General Processing Steps

- After all eMedNY Provider Processing is complete, Job PRPD0150 runs Tuesday through Thursday to extract the information for Acentra Health (HID).
- Job PFPD0150 runs after PRPD0150 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the P-F-415 - Pharmacy Extract File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.3.3 Interface Processing Time Requirements

The P-F-415 - Pharmacy Extract File will be made available by 5:00 am.

6.3.4 File Naming Convention

The eMedNY mainframe file P-F-415 - Pharmacy Extract File will be delivered to Acentra Health as `HID_ServiceProvData_ccyymmdd`, according to the agreed upon file naming convention. The `ccyymmdd` will be replaced with current date.

6.3.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.3.5.1 File Layout

The Acentra Health (HID) Pharmacy Provider Extract File has three types of records:

- Header
- Detail
- Trailer – same layout/fields as header

6.3.5.2 Data Assembly Characteristics

Table 5 – Data Assembly Characteristics - Pharmacy Extract File (P-F-415)

DSN	EPROD.NM.XDFHSC.PD0150.PF415.Dyymmdd
Description	P-F-415 - Pharmacy Extract File
Copybook	W1P40200 - Provider First Health Pharmacy Extract Layout Copybook
Length	900
Format	Fixed Block
Access	Sequential
Record Count	2 – 10

6.3.5.3 Field/Element Definition

Table 6 – Field/Element Definition - Pharmacy Extract File (P-F-415)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Header/Trailer Record				Required Segment
Header/Trailer ID	System generated	Char(7)		Constant Value '9999999'
File ID	System Generated	Char(1)		Constant Value 'T'
File Type ID	System Generated	Char(1)		Constant Value '1'
Create Date	System Generated	Char(8)	Current Date in mmddyyyy format – Date in Filename plus one	Current Date in mmddyyyy format – Date in Filename plus one
Number of Records	System Generated	Numeric(6)	Count of Detail Records – can be zero	Count of Detail Records – can be zero
Copyright Info	9994 (Undefined)	Char(100)		Space Fill
Provider ID Qualifier	9994 (Undefined)	Char(2)		Constant Value '05'
Filler (Not Used)	N/A	Char(775)		Space Fill
Detail Record				Required Segment
Provider ID	1563	Char(8)	Pharmacy MMIS ID	
Filler (not used)	N/A	Char(67)		Space Fill
Pharmacy Name	1589	Char(60)	Pharmacy Name from	
Filler (not used)	N/A	Char(60)		
Location Address 1	1508	Char(55)	Pharmacy Service Address	
Location Address 2	1508	Char(55)	Pharmacy Service Address	
Location City	1506	Char(30)	Pharmacy Service City	
Location State	2638	Char(2)	Pharmacy Service State	
Location Zip Code	9805	Char(9)	Pharmacy Service ZIP Code	
Location County Code	0250	Char(2)	Pharmacy Service County Code	

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Location Phone Number	1610	Char(10)	Pharmacy Service Phone Number	
Location Phone Ext.	2795	Char(5)	Pharmacy Service Phone Extension Number	
Location Fax Number	0378	Char(10)	Pharmacy Service Fax Number	
Filler (not used)	N/A	Char(67)		Space Fill
Mail Address 1	1508	Char(55)	Pharmacy Correspondence Address	
Mail Address 2	1508	Char (55)	Pharmacy Correspondence Address	
Mail City	1506	Char(30)	Pharmacy Correspondence City	
Mail State	2638	Char(2)	Pharmacy Correspondence State	
Mail ZIP Code	9805	Char(9)	Pharmacy Correspondence ZIP Code	
Filler (not used)	N/A	Char(71)	Actual W1P40200 layout has Contact Names, and Title	Space Fill (all blanks in actual files)
Contact Phone	1610	Char(2)	Pharmacy Contact Phone Number	
Contact Phone Extension	2795	Char(10)	Pharmacy Contact Phone Extension	
Contact E-mail Address	9804	Char(5)	Pharmacy Contact E-mail Address	
NPI (National Provider ID)	6477	Char(10)	Pharmacy NPI Number	
Transaction Date	System Generated	Char(8)	Pharmacy Enrollment Date in mmddyyyy format.	Pharmacy Enrollment Date in mmddyyyy format

6.3.6 Communication Methods

eMedNY will use sFTP to deliver the P-F-415 - Pharmacy Extract File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.3.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the P-F-415 - Pharmacy Extract File processing job (PRPD0150) to run Tuesday through Thursday after all eMedNY Provider Processing is complete. Then the sFTP job (PFPD0150) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.3.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.3.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.4 Requirements for P-F-419 – Practitioner Base and Alias File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Prescriber Provider information including; Demographic, Ordering Status, and Date Spans.

6.4.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.4.2 General Processing Steps

- After all eMedNY Provider Processing is complete, Job PRPD0150 runs Tuesday through Thursday to extract the information for Acentra Health (HID).
- Job PFPD0150 runs after PRPD0150 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the P-F-419-Practitioner Base and Alias File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.4.3 Interface Processing Time Requirements

P-F-419-Practitioner Base and Alias File will be made available by 5:00 am.

6.4.4 File Naming Convention

The eMedNY mainframe file P-F-419-Practitioner Base and Alias File will be delivered to Acentra Health as HID_PreBaseData_ccyymmdd, according to the agreed upon file naming convention. The ccyymmdd will be replaced with current date.

6.4.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.4.5.1 File Layout

The P-F-419-Practitioner Base and Alias File has two types of records:

- Base
- Alias

6.4.5.2 Data Assembly Characteristics

Table 7 – Data Assembly Characteristics - Practitioner Base and Alias File (P-F-419)

DSN	EPROD.NM.XDFHSC.PD0150.PF419.Dyymmdd
Description	P-F-419 - Practitioner Base and Alias File
Copybook	W1P40400 - Provider First Health Extract Practitioner Base and Alias Record Layout
Length	104
Format	Fixed Block
Access	Sequential
Record Count	200 – 5000

6.4.5.3 Field/Element Definition

Table 8 – Field/Element Definition - Practitioner Base and Alias File (P-F-419)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Base Record				Required Segment
Practitioner Base Segment ID	System generated	Char(1)		Constant Value 'P'
Practitioner Base Update Type	System Generated	Char(1)		Constant Value 'C'
Practitioner Base First Name	Undefined	Char(15)	Blank in the actual file	Not populated
Practitioner Base Last Name	1589	Char(25)	P_LI_NAM from P_LIC_CERT_TB	P_LI_NAM from P_LIC_CERT_TB
Practitioner Base Reg ID	System Generated	Char(15)	'NY', Profession Code, and License Number strung together (from P_LIC_CERT_TB)	'NY', Profession Code, and License Number strung together (from P_LIC_CERT_TB)
Practitioner Base Reg Code	System Generated	Char (2)		Constant Value '99'
Practitioner Base Type Code	9994 Undefined	Char(2)		Constant Value 'PRE' (for Prescriber)
Practitioner Base Birth Date	9994 Undefined	Char(8)		Constant Value '00000000'
Practitioner Base Death Date	9994 Undefined	Char(8)		
Practitioner Base Retire Date	9994 Undefined	Char(8)		Constant Value '00000000'
Practitioner Base Language Code	System Generated			Constant Value 'EN'
Practitioner Base Effective Date	1569	Char(8)		
Practitioner Base Termination Date	9994 Undefined	Char(8)		Constant Value '30000101'
Alias Record				Required Segment
Practitioner Alias Segment ID	System generated	Char(1)		Constant Value 'A'

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Practitioner Alias Update Type	System Generated	Char(1)		Constant Value 'C'
Practitioner Alias Reg ID	System Generated	Char(15)	NPI when Reg CD is 01 MMIS PID for Reg CD 05 6 Digit License when Reg CD 08 Profession Code and 8 digit License when Reg CD 13 0 concatenated with Privilege Code and 6 digit License when Reg CD 14	
Practitioner Alias Reg Code	System Generated	Char (2)	'01' '05' '08' '13' '14' See notes →	Alias 01 records will contain NPI information. Alias 05 records containing eight digits Provider ID are built only when the license has a Provider ID and there are time periods within the past year when the Provider ID had an active ordering category of service and an active license status (Ordering categories of service are determined from the Prior Authorization System List '0302'; active Enrollment Status Codes are '01' (New Enrollment), '02' (Recertified), '47' (Reinstated per Court Order), '54' (Managed Care Provider) and '62' (Ordering, Prescribing, Referring & Attending (OPRA)); Active License Ordering Status is '00'). Alias 08 records containing six digit License Numbers are built when the license is not from out of state and there are periods within the past year where the license had an active license ordering status. If the license is cross-referenced to a Provider ID, any time periods for an ordering category of service with disqualified or dead status will be removed from the active license time periods (Disqualified Enrollment Status Codes are '03' - '08', '10' - '15', '29', '41', '51' and '56'; Deceased Enrollment Status Code is '16'). Alias 13 records containing three digits Profession Code followed by an eight digits

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
				License Number are built when there are time periods within the past year where the license had an active license ordering status. If the license is cross-referenced to a Provider ID, any time periods for an ordering category of service with disqualified or dead status will be removed from the active license time periods. (Disqualified Enrollment Status Codes are '03' - '08', '10' - '15', '29', '41', '51' and '56'; Deceased Enrollment Status Code is '16'). Alias 14 records containing the Profession Code followed by a '0', the ordering Privilege Code, and six digits License Number are built for each ordering Privilege Code ('F', 'U' or 'V') for a license that has active ordering segments within the past year. If the license is cross-referenced to a Provider ID, any time periods for an ordering category of service with disqualified or dead status will be removed from the active time periods for the ordering privilege. (Disqualified Enrollment Status Codes are '03' - '08', '10' - '15', '29', '41' and '51' and '56'; Deceased Enrollment Status Code is '16').
Practitioner Alias Effective Date	System Generated	Char(8)	Beg Date based on Reg Cd	
Practitioner Alias Termination Date	9994 Undefined	Char(8)	End Date based on Reg CD	
Practitioner Alias Filler	N/A	Char(69)		Space Fill

6.4.6 Communication Methods

eMedNY will use sFTP to deliver the P-F-419 - Practitioner Base and Alias File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.4.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the P-F-419-Practitioner Base and Alias File processing job (PRPD0150) to run Tuesday through Thursday after all eMedNY Provider Processing is complete. Then the sFTP job (PFPD0150) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.4.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.4.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.5 Requirements for P-F 498 – HID Practitioner File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Prescriber Provider information including, many different identifying numbers, and types of providers.

6.5.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.5.2 General Processing Steps

- All eMedNY Provider Processing is completed.
- Job PRPD0150 runs to create P-F 498 - HID Practitioner File which contains License Info and NPI data (about 75% of the records on the file contain an NPI).
- Job PFPD0150 runs after PRPD0150 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the P-F 498 - HID Practitioner File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.5.3 Interface Processing Time Requirements

The P-F 498 - HID Practitioner File will be made available by 5:00 am.

6.5.4 File Naming Convention

The eMedNY mainframe file P-F 498 - HID Practitioner File will be delivered to Acentra Health as HID_PreBaseData_ccyymmdd, according to the agreed upon file naming convention. The ccyymmdd will be replaced with current date.

6.5.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.5.5.1 File Layout

The P-F 498 - HID Practitioner File has only one type of record.

6.5.5.2 Data Assembly Characteristics

Table 9 – Data Assembly Characteristics - HID Practitioner File (P-F-498)

DSN	EPROD.NM. XDPPAS. PD0150.PF41C.Dyymmdd
Description	P-F 498 - HID Practitioner File
Copybook	W1P40800 - Provider Practitioner Extract for HID Copybook
Length	120
Format	Fixed Block
Access	Sequential
Record Count	~495,000 and growing

6.5.5.3 Field/Element Definition

Table 10 – Field/Element Definition - HID Practitioner File (P-F 498)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Provider ID	1563	Char(8)	Provider ID	Blank when no PID associated with a License that has Ordering capability
Profession Code	2165	Char(3)		
License Number	1570	Char(8)	Provider License Number	State Education Department (SED) interface provides X(6) license numbers. Professional license numbers are X(8). Wadsworth Laboratories and some transportation providers have X(10) license numbers.
Provider NPI	6477	Char(10)	National Provider Identifier (NPI)	
Provider DEA Number	1538	Char(9)	Provider Drug Enforcement Agency (DEA) Number	
Provider SSN	1680	Char (9)	Provider Social Security Number (SSN)	
Provider Fed Tax ID	4203	Char(9)	Provider Employer Identification Number (EIN)	
Provider Name	1589	Char(35)	Provider Name	
Provider Type Code	0204	Char(3)	Provider Type Code	Provider Type Code specifies a major classification for a provider under the Medicaid Program.
Filler	N/A	Char(26)		Space Fill

6.5.6 Communication Methods

eMedNY will use sFTP to deliver the P-F 498 - HID Practitioner File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.5.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the P-F 498 - HID Practitioner File processing job (PRPD0150) to run Tuesday through Thursday after all eMedNY Provider Processing is complete. Then the sFTP job (PFPD0150) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.5.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.5.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.6 Requirements for R-F-162 – Outside Vendor Drug Updated Activity File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current NDC/Drug information including, Effective, Termination, and Obsolete (when available) dates, certain bypass indicators, and other data that allows or prevents prescriptions to be written.

6.6.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.6.2 General Processing Steps

- All eMedNY Provider Processing is completed.
- For the weekly version of this file, first Drug data is unloaded from 4 tables into the R-F-161 - Outside Vendor Drug File (a daily merged unload file from four drug tables (R_DRUG_TB, R_DRUG_EDITBYPS_TB, R_DRUG_MISC_DT_TB, and R_DRUG_PRICE_TB)), that are then sorted, then merged in the RM16000C, and compared (in a sort utility) before it is formatted (in RM16200) and sent to the Outside Vendor for the Preferred Drug Program (PDP).
- Job PRRD0080 runs to create the R-F 162 - Outside Vendor Drug Updated Activity File, which contains Drug information along with other data limiting the prescribing of the drug. This file will contain Drug information that was updated from the prior Daily file.

- Job PFRD0080 runs after PRRD0080 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the R-F 162 - Outside Vendor Drug Updated Activity File.
- For the monthly version, takes the most recent version of the merged/sorted file, and runs job PRRM0180 to create the Full File version of the R-F 162 - Outside Vendor Drug Updated Activity File and then Job PFRM0180 runs to deliver the Full File version of the file to the eMedNY local directory for Acentra Health (HID) to retrieve this monthly version of the R-F 162 - Outside Vendor Drug Updated Activity File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.6.3 Interface Processing Time Requirements

The R-F 162 - Outside Vendor Drug Updated Activity File will be made available by 5:00 am.

6.6.4 File Naming Convention

The eMedNY daily mainframe file R-F 162 - Outside Vendor Drug Updated Activity File will be delivered to Acentra Health as `HID_DrugFormData_ccyymmdd`, according to the agreed upon file naming convention. The `ccyymmdd` will be replaced with current date.

The eMedNY monthly mainframe file R-F 162 - Outside Vendor Drug Updated Activity File will be delivered to Acentra Health as `HID_DrugMthyData_ccyymmdd`, according to the agreed upon file naming convention. The `ccyymmdd` will be replaced with current date.

6.6.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.6.5.1 File Layout

The R-F 162 - Outside Vendor Drug Updated Activity File has three types of records.

- Header
- Detail
- Trailer

6.6.5.2 Data Assembly Characteristics

Table 11 – Data Assembly Characteristics - Outside Vendor Drug Updated Activity File (R-F 162)

DSN	EPROD.NM.XDFHSC.RD0080.RF162.FORMAT.Dyymmdd EPROD.NM.XDFHSC.RM0180.RF162.FORMAT.Dyymmdd
Description	R-F 162 - Drug Updated Activity File
Copybook	P1R17100 - Outside Vendor Header Copybook P1R17000 - Outside Vendor Update File Copybook P1R17200 - Outside Vendor Trailer Copybook
Length	331 (new length)
Format	Fixed Block
Access	Sequential
Record Count	2 – 2500 for the daily About 453,000 and growing each month for the Monthly file

6.6.5.3 Field/Element Definition

Table 12 – Field/Element Definition - Outside Vendor Drug Updated Activity File (R-F 162)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Header Record						
Record ID	9992	1	2	CHAR	YES	Constant Value '00'
Run Type	9992	3	9	CHAR	YES	For the Daily run, Run Type will contain 'UPDATE' For the monthly run, Run Type will contain 'FULL FILE'
Filler	9995	12	320	CHAR	N/A	Space Fill
Detail Record						
Record ID	9992	1	2	CHAR	YES	Constant Value '10'
National Drug Code (NDC)	1856	3	11	CHAR	YES	
Filler	9995	14	11	CHAR	N/A	Space Fill
Effective Date	9992	25	8	CHAR	YES	Date of the run in YYYYMMDD format
Termination Date	9992	33	8	CHAR	YES	Constant value '30000101'
Filler	9995	41	21	CHAR	N/A	Space Fill
Child Health Bypass Indicator	0453	62	1	CHAR	YES	Drug Edit Bypass Indicator specifies whether or not the children's facility or nursing home edits should be bypassed during claims processing for drugs included in the rate. Y - Bypass Editing N - Do Not Bypass Editing
Filler	9995	63	2	CHAR	N/A	Space Fill
Package Size	1861	65	11	NUMERIC	YES	Drug Package Size specifies the quantity of a drug contained in a package expressed in units of measure. Format Numeric (11,3).
Filler	9995	76	1	CHAR	N/A	Space Fill
Max Bill Quantity	4132	77	11	NUMERIC	YES	The maximum quantity that is allowed to be prescribed at one time. Format Numeric (8,3).

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
ST Max Quantity Code	2943	88	1	CHAR	YES	Reference Frequency Time Code specifies the time period defined for a frequency (number of occurrences (DE 2944) per time period) of a specific drug or procedure.
Current Max MAC	9988	89	10	NUMERIC	YES	Constant value all zeroes.
Filler	9995	99	8	CHAR	N/A	Space Fill
Previous Max MAC	9988	107	10	NUMERIC	YES	Initialized to all zeroes
Filler	9995	117	8	CHAR	N/A	Space Fill
Prior Authorization Code	4191	125	1	CHAR	YES	Reference Prior Authorization/Approval (PA) Required Code specifies whether or not a PA is required for a product or service, and if so, which type or combination is required.
Filler	9995	126	2	CHAR	N/A	Space Fill
Refill Frequency Code	2944	128	1	CHAR	YES	Reference Frequency Occur Code specifies the number of occurrences per time period (DE 2943) defined for a frequency of a specific drug or procedure. A - 24 Times X - Unlimited 1 - Once 2 - Twice 3 - 3 Times 4 - 4 Times 5 - 6 Times 6 - 8 Times 7 - 12 Times 8 - 15 Times 9 - 20 Times
Filler	9995	129	48	CHAR	N/A	Space Fill
Provider State Code	9998	177	2	CHAR	YES	Constant Value 'NY'
Last Transaction Date	9988	179	8	CHAR	YES	Constant value '30000101'
Drug Obsolete Date	4247	187	8	CHAR	YES	Converts '0001-01-01' date to '30000101' Drug Termination Date is the shelf-life expiration date of the last batch of a drug

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
						produced by a drug manufacturer. This date is supplied to the Center for Medicare & Medicaid Services (CMS) by the drug manufacturer/distributor and is passed to eMedNY through the CMS quarterly tape.
Generic Code	5024	195	5	CHAR	YES	Defaults to 'FHSC'. Drug Therapeutic Class Code (State Formulary) specifies the categories to which a drug may be assigned based on its medical action.
Therapeutic Class	0080	200	3	CHAR	YES	Defaults to 'FHS'. Drug Therapeutic Class Code (Specific) is the most specific therapeutic class-coding scheme offered on First Databank National Drug Data File.
Sex	0104	203	1	CHAR	YES	Reference Gender Restriction Code designates the gender to which a procedure, diagnosis, formulary, or supply item is restricted. B - Either; Not Gender Specific F - Females Only M - Males Only
Drug Name	1855	204	30	CHAR	YES	Defaults to 'FHSC'. Drug Label Name is a combination of the drug name as it appears on the package label, plus the strength and dosage form description.
Strength Description	1881	234	10	CHAR	YES	Defaults to 'FHSC'. Drug Strength Description is a text description of the mass and volume measurements of a drug's potency. It may also provide additional descriptors such as needle size, length of a device, etc.
Formulary Indicator	0020	244	1	CHAR	YES	Reference Cancellation Reason Code specifies the reason why a drug, supply, or other medical item is not covered for payment. 0 - Not Cancelled 1 - Product Discontinued By Manufacturer 2 - Federal Regulations Changed 3 - State Regulations Changed

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
						4 - Paid Trough OTC/Supply Codes 5 - NDC Number Changed By Manufacturer 6 - NDC Number Not Valid 7 - Not Paid For Other Reasons 8 - Not Approved For Medicaid List 9 - Billable Under Medical Claim Only
Manufacturer	9995	245	17	CHAR	YES	Defaults to 'FHSC'.
MAC Indicator	9996	262	1	CHAR	YES	If the Drug Price Type Code is 'SMAC' then this will be 'Y' otherwise it will be 'N'
Minimum Age	1957	263	3	NUMERIC	YES	Reference Age (Minimum) is the minimum client age allowed for a procedure, diagnosis, formulary or supply item.
Maximum Age	1947	266	3	NUMERIC	YES	Reference Age (Maximum) is the maximum client age allowed for a procedure, diagnosis, formulary or supply item.
Nursing Home Bypass Indicator	0453	269	1	CHAR	YES	Drug Edit Bypass Indicator specifies whether or not the children's facility or nursing home edits should be bypassed during claims processing for drugs included in the rate. Y - Bypass Editing N - Do Not Bypass Editing
Number of Refills Allowed	6486	270	3	NUMERIC	YES	Drug Refills Count (Maximum Allowable) is the maximum number of refills allowable for a prescription. Defaults to '005'
Minimum Billing Quantity	9988	273	10	CHAR	YES	Constant value all zeroes.
Preferred Drug Indicator	2159	283	1	CHAR	YES	Preferred Drug Code specifies if a drug is on the New York State Preferred Drug List. Values: Y - Preferred Drug N - Not Preferred Drug X - Other
Service Medicare Indicator	0387	284	1	CHAR	YES	Service Medicare Indicator specifies whether or not Medicare covers a service.

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
						Y - Yes N - No
Emergency Indicator	2158	285	1	CHAR	YES	Reference Emergency Code specifies whether or not a procedure, drug, or diagnosis is emergency related. N - Not Emergency related Y - Emergency related
Drug Generic Product Code	0842	286	1	CHAR	YES	Drug Generic Product Code specifies whether or not a drug has a generic equivalent and whether that generic is only available from a single distributor or from multiple distributors. Space - Default 0 - Non-drug item 1 - Generic drug 2 - Branded drug 3 - Multi-source drug 4 - Single-source drug
Drug Package Description	1860	287	10	CHAR	Yes	Drug Package Description describes how a drug is packaged.
Drug Form Code	1833	297	1	CHAR	Yes	Drug Form Code specifies the basic drug measurement unit for performing price calculations. 1 - Each (Tablets, Kits, Etc.) 2 - Milliliters (Liquids) 3 - Grams (Solids)
Drug Strength Units Count	1882	298	11	NUMERIC	Yes	The Drug Strength Units Count is the number of mass strength units (DE 1883) in the measurement of a drug's potency. Format Numeric (11,3).
Drug Strength Units Type	1883	309	10	CHAR	Yes	The Drug Strength Units Type specifies the type of mass strength unit used to measure a drug's potency.
Drug Strength Volume Count	1879	319	7	NUMERIC	Yes	The Drug Strength Volume Count is the number of volume strength units (DE 1880) in the measurement of a drug's potency. Format Numeric (7,3).

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description/Value
Drug Strength Volume Type	1880	326	5	CHAR	Yes	The Drug Strength Volume Type specifies the type of volume strength unit used to measure a drug's potency.
Frequency Time Code	2943	331	1	CHAR	Yes	Reference Frequency Time Code specifies the time period defined for a frequency (number of occurrences (DE 2944) per time period) of a specific drug or procedure. A - 18 Months B - 3 Years C - 2 Weeks D - 3 Weeks E - 4 Years F - 8 Years X - Unlimited Y - 2 Months 1 - 1 Day 2 - 1 Week 3 - 1 Month 4 - 3 Months 5 - 6 Months 6 - 1 Year 7 - 2 Years 8 - 5 Years 9 - Lifetime
Trailer Record						
Record ID	9988	1	2	CHAR	YES	Constant Value '99'
Record Count	9987	3	10	NUMERIC	YES	Count of records in file inclusive of Header and Trailer records
Filler	9995	13	319	CHAR	N/A	Space Fill

6.6.6 Communication Methods

eMedNY will use sFTP to deliver the R-F-162 - Outside Vendor Drug Updated Activity File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.6.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the daily R-F-162 - Outside Vendor Drug Updated Activity File processing job (PRRD0080) to run daily after all eMedNY Provider Processing is complete. Then the sFTP job (PFPD0080) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

eMedNY's job scheduler schedules the monthly R-F-162 - Outside Vendor Drug Updated Activity File processing job (PRRM0180) to run the first of the month after all eMedNY Provider Processing is complete. Then the sFTP job (PFPM0180) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.6.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.6.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.7 Requirements for R-F-164 – HID Drug Retro PA 90 Day Activity File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current NDC/Drug information including ordering status and effective dates of the Drug.

6.7.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.7.2 General Processing Steps

- All eMedNY Reference Processing is completed.
- Job PRRD0080 runs to create the R-F-164 HID Drug Retro PA 90 Day Activity File.
- Job PFRD0080 runs after PRRD0080 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the R-F-164 HID Drug Retro PA 90 Day Activity File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.7.3 Interface Processing Time Requirements

The R-F-164 HID Drug Retro PA 90 Day Activity File will be made available by 5:00 am.

6.7.4 File Naming Convention

The eMedNY mainframe file R-F-164 HID Drug Retro PA 90 Day Activity File will be delivered to Acentra Health as `HID_DrugCnclData_ccyymmdd`, according to the agreed upon file naming convention. The `ccyymmdd` will be replaced with current date.

6.7.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.7.5.1 File Layout

The R-F-164 HID Drug Retro PA 90 Day Activity File has three types of records.

- Header
- Detail
- Trailer

6.7.5.2 Data Assembly Characteristics

Table 13 – Data Assembly Characteristics - HID Drug Retro PA 90 Day Activity File (R-F-164)

DSN	EPROD.NM. XDFHSC.RD0080.RF163.FORMAT.Dyymmdd
Description	R-F-164 HID Drug Retro PA 90 Day Activity
Copybook	P1R16201 - HID Header Record Layout Copybook P1R16202 - HID Detail Record Layout Copybook P1R16203 - HID Trailer Record Layout Copybook
Length	30
Format	Fixed Block
Access	Sequential
Record Count	~1,062,700 and growing every day

6.7.5.3 Field/Element Definition

Table 14 – Field/Element Definition - HID Drug Retro PA 90 Day Activity File (R-F-164)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Header Record				Required Segment from Copybook P1R16201
Record ID	System Generated	CHAR (2)		Constant Value '00'
Run Type	System Generated	CHAR (9)	For the monthly run, Run Type will contain 'FULL FILE'	Constant Value 'FULL FILE'
Filler	N/A	CHAR(271)		Space Fill
Detail Record				Required Segment from Copybook P1R16202
Record ID	System Generated	CHAR (2)		Constant Value '10'
NDC Code	1856	CHAR(11)	National Drug Code (NDC)	
Formulary Indicator	0020	CHAR(1)	Reference Cancellation Reason Code	
Begin Date	6895	CHAR(8)	Drug Miscellaneous Date Related Begin Date	
End Date	6896	CHAR(8)	Drug Miscellaneous Date Related End Date	
Trailer Record				Required Segment from Copybook P1R16203
Record ID	System Generated	CHAR (2)		Constant Value '99'
Record Count	System Generated	NUMERIC(10)	Count of records in file inclusive of Header and Trailer records	Count of records in file inclusive of Header and Trailer records
Filler	N/A	CHAR(270)		Space Fill

6.7.6 Communication Methods

eMedNY will use sFTP to deliver the R-F-164 HID Drug Retro PA 90 Day Activity File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.7.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the R-F-164 HID Drug Retro PA 90 Day Activity File processing job (PRRD0080) to run Tuesday through Thursday after all eMedNY Provider Processing is complete. Then the sFTP job (PFRD0080) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.7.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.7.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.8 Requirements for R-F-165 – Physician Administered Drug File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Physician Administered Drugs (PAD) information.

6.8.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.8.2 General Processing Steps

- All eMedNY Reference Processing is complete.
- Job PRRD0080 runs to create the R-F-165 Physician Administered Drug File.
- Job PFRD0080 runs after PRRD0080 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the R-F-165 Physician Administered Drug File.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.8.3 Interface Processing Time Requirements

The R-F-165 Physician Administered Drug File will be made available by 5:00 am.

6.8.4 File Naming Convention

The eMedNY mainframe file R-F-165 Physician Administered Drug File will be delivered to Acentra Health as HID_DrugPADData_20YYMMDD, according to the agreed upon file naming convention. The yymmdd will be replaced with current date.

6.8.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.8.5.1 File Layout

The R-F-165 Physician Administered Drug File has three types of records:

- Header
- Detail
- Trailer

6.8.5.2 Data Assembly Characteristics

Table 15 – Data Assembly Characteristics - Physician Administered Drug File (R-F-165)

DSN	EPROD.NM.XDFHSC.RD0080.RF165.PAD.Dyymmdd
Description	The R-F-165 Physician Administered Drug File is a Acentra Health data feed to clearly identify all Physician Administered Drugs (PAD).
Copybook	P1R16501 - Acentra Health PAD Header Record Layout P1R16502 - Acentra Health PAD Detail Record Layout P1R16503 - Acentra Health PAD Trailer Record Layout
Length	80
Format	Fixed Block
Access	Sequential
Record Count	37,000 – 38,000 Recs

6.8.5.3 Field/Element Definition

Table 16 – Field/Element Definition - Physician Administered Drug File (R-F-165)

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description
Header Record						
Record ID	9988	1	2	Character	Yes	Constant Value '00'
Run Type	9992	3	9	Character	Yes	For the Daily run, Run Type will contain 'UPDATE'
Filler	9995	12	69	Character	Yes	Space Fill
Detail Record						
Record ID	9988	1	2	Character	Yes	Constant Value '10'
National Drug Code (NDC)	1856	3	11	Character	Yes	National Drug Code (NDC) uniquely identifies a drug and includes information on the manufacturer, product code, and package size.
Drug Standard Package Indicator	1877	14	1	Character	Yes	Drug Standard Package Indicator specifies whether or not a drug has been packaged in a standard-size package. Valid Values: 0 - ALL OTHER PACKAGE SIZES 1 - STANDARD PACKAGE
Drug Package Size	1861	15	11	Numeric	Yes	Drug Package Size specifies the quantity of a drug contained in a package expressed in units of measure. Format Numeric (11,3).
Drug Package Description	1860	26	10	Character	Yes	Drug Package Description describes how a drug is packaged.
Drug Form Code	1833	36	1	Character	Yes	Drug Form Code specifies the basic drug measurement unit for performing price calculations. 1 - Each (Tablets, Kits, Etc.) 2 - Milliliters (Liquids) 3 - Grams (Solids)
Drug Strength Units Count	1882	37	11	Numeric	Yes	The Drug Strength Units Count is the number of mass strength units (DE 1883) in the measurement of a drug's potency. Format Numeric (11,3).
Drug Strength Units Type	1883	48	10	Character	Yes	The Drug Strength Units Type specifies the type of mass strength unit used to measure a drug's potency.

Layout	eMedNY Data Element	Start Position	Length	Format	Required	Description
Drug Strength Volume Count	1879	58	7	Numeric	Yes	The Drug Strength Volume Count is the number of volume strength units (DE 1880) in the measurement of a drug's potency. Format Numeric (7,3).
Drug Strength Volume Type	1880	65	5	Character	Yes	The Drug Strength Volume Type specifies the type of volume strength unit used to measure a drug's potency.
Filler	9995	70	11	Character	Yes	Space Fill
Trailer Record						
Record ID	9988	1	2	Character	Yes	Constant Value '99'
Record Count	9987	3	10	Character	Yes	Count of records in file inclusive of Header and Trailer records
Filler	9995	13	68	Character	Yes	Space Fill

6.8.6 Communication Methods

eMedNY will use sFTP to deliver the R-F-165 Physician Administered Drug File to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.8.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules the R-F-165 Physician Administered Drug File processing job (PRRD0080) to run daily after all eMedNY Reference Processing is complete. Then the sFTP job (PFPD0080) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.8.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.8.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.9 Requirements for S-F-500 – HID PPAS Non-Pharmacy Claim File and S-F-501 – HID PPAS Pharmacy Claims File

In order for Acentra Health (HID) to accurately perform Pharmacy Prior Approval administration, they require the most current Claims History information.

6.9.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.9.2 General Processing Steps

- All eMedNY Claims Processing is completed.
- Both the Daily and Weekly jobs utilize the same Input File - The Medicaid Analytical Extract File (S-F-100 - DW Analytical Extract - Claims) and the program that is used to create both files (SM51000) which creates the two files based on the value in the field MAEW-C279-CLAIM-CLASS. For '62', creates the Pharmacy Claims File, for '60' and '61' creates the Non-Pharmacy file.
- For the Daily job, Job PRSD0010 runs to create the S-F-500 - HID PPAS Non-Pharmacy Claim File and the S-F-501 - HID PPAS Pharmacy Claims File that contain claims information including dates of service, procedure codes or rate codes or NDCs, quantities, and pricing/reimbursement data, and associated data relevant to the

determination to pay the claim. Job PFSD0010 runs after PRSD0010 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve them.

- HID_MedicClms_#####_ccyymmdd.gz & md5 ##### cyc & day 1-5
- HID_PharmClms_#####_ccyymmdd.gz & md5
- For the weekly, Job PFSW0021 runs after PRSW0021 to deliver the files to the eMedNY local directory for Acentra Health (HID) to retrieve the S-F-500 - HID PPAS Non-Pharmacy Claim File and the S-F-501 - HID PPAS Pharmacy Claims File which contain claims information including dates of service, procedure codes or rate codes or NDCs, quantities, and pricing/reimbursement data, and associated data relevant to the determination to pay the claim.
- HID_MedicClms_#####w_ccyymmdd.gz & md5
- HID_PharmClms_#####w_ccyymmdd.gz & md5
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.9.3 Interface Processing Time Requirements

The S-F-500 - HID PPAS Non-Pharmacy Claim File and the S-F-501 - HID PPAS Pharmacy Claims File will be made available by 5:00 am.

6.9.4 File Naming Convention

The eMedNY mainframe file S-F-500 - HID PPAS Non-Pharmacy Claim File will be delivered to Acentra Health as HID_MedicClms_#####_ccyymmdd.gz & md5 according to the agreed upon file naming convention. The ccyymmdd will be replaced with current date and ##### with the current cycle & day 1-5 (Sat-Wed). The S-F-501 - HID PPAS Pharmacy Claims File will be delivered to Acentra Health as HID_PharmClms_#####_ccyymmdd.gz & md5 according to the agreed upon file naming convention. The ccyymmdd will be replaced with current date and ##### with the current cycle & day 1-5.

6.9.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.9.5.1 File Layout

The S-F 500 - HID PPAS Non-Pharmacy Claim File and the S-F 501 - HID PPAS Pharmacy Claims File has two types of records:

- Detail
- Trailer

6.9.5.2 Data Assembly Characteristics

Table 17 – Data Assembly Characteristics - HID PPAS Non-Pharmacy Claim File (S-F-500)/HID PPAS Pharmacy Claim File (S-F-501)

DSN	EPROD.NM.XDPPAS.SD0010.MEDI.CYC####D EPROD.NM.XDPPAS.SD0010.PHRM.CYC####D EPROD.NM.XDPPAS.SW0021.MEDI.CYC#### EPROD.NM.XDPPAS.SW0021.PHRM.CYC####
Description	HID PPAS Non-Pharmacy Claim File (S-F-500) HID PPAS Pharmacy Claim File (S-F-501)
Copybook	P1S5100 - HID PPAS Claim Encounter File Layout
Length	1299
Format	Fixed Block
Access	Sequential
Record Count	S-F-500 Daily - ~330,000 Weekly ~450,000 S-F-501 Daily - ~ 40,500 Weekly ~ 45,000

6.9.5.3 Field/Element Definition

Table 18 – Field/Element Definition - HID PPAS Non-Pharmacy Claim File (S-F-500)/HID PPAS Pharmacy Claim File (S-F-501)

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Detail Record		As in Copybook P1S51000		Required Segment from Copybook
Recipient Number	0694	Char(30)	Client Identification Number (CIN) (Current) is a unique identifier assigned to each Medicaid client by the Welfare Management System (WMS). The current CIN is the client id under which a claim was submitted and adjudicated.	In the copybook/file, this field actually contains the 8 character CIN as defined by DE 0694
Provider Number	1563	Char(20)		In the file, this field actually contains the 8-digit MMIS number described by DE 1563.
Plan ID	4397	Char(20)		This field shares the same space as the prior field, but is not actually populated in the module that creates this file, so the 20 characters here always contains the 8-digit MMIS number described by DE 1563 above.
Claims TCN (Transaction Control Number)	0537	Char(40)	Populated from the MAEW file Format: YYDDD#####MA YYDDD = Julian date of TCN creation; ##### = sequence number; M = input media code ('0' = paper, '2' = tape, '3' = POS and '4'=HIPP, '5' = Encounter at NYSoH); A = adjustment code ('0' = original, '1' = credit, '2' = debit);	In the file, this field contains the TCN that identifies the claim. Actually 16 characters/digits, as our TCN is defined as 16 characters, but is created with all numeric characters
Claim TCN Line Number	0429	Numeric(3)	Populated from the MAEW file	
Payment Date	1017	Char(8)	Populated with the payment date (Legacy DE 3150) from the MAEW file	In the file, this data is 8 bytes in CCYYMMDD format.
Claim Status	1030	Char(100)	Populated from the MAEW file	In the file, this data has one character to fit the DE description.
Claim Type Code	0141	Char(100)	Populated from the MAEW file	In the file, this data has one character to fit the DE description.
Provider Category of Service	1534	Char(5)	Populated from the MAEW file	Only first four bytes have the COS per DE 1534 definition and Valid Values.

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Date of Service	1022	Char(8)	Populated from the MAEW file with Line Item Service Date	In the file, this data is 8 bytes in CCYYMMDD format.
End Date of Service	1023	Char(8)	Populated from the MAEW file with Line Item End Service Date	In the file, this data is 8 bytes in CCYYMMDD format.
Admit Date	1033	Char(8)	Populated from the MAEW file with MAEW-3011-ADMIT-DATE	In the file, this data is 8 bytes in CCYYMMDD format.
Discharge Date	1185	Char(8)	Populated from the MAEW file with MAEW-3108-DISCH-DT	In the file, this data is 8 bytes in CCYYMMDD format.
Procedure Code	2042	Char(10)	Populated from the MAEW file with MAEW-5055-PROC-CODE-1	
Primary Diagnosis Code	4183	Char(10)	Populated from the MAEW file with MAEW-3006-PRIMARY-DIAG	
Diagnosis Related Group (DRG) Code	2053	Char(10)	Diagnosis Related Group (DRG) Code specifies the group of services received by a client during an inpatient stay.	Space Fill
NDC (National Drug Code)	1856	Char(11)	Populated from the MAEW file	
NDC Units (Quantity Dispensed)	2760	Numeric(9,3) Sign	Populated from the MAEW file with MAEW-3251-QTY-DISPENSED	
Day's Supply	0819	Numeric(3,3) Sign	Populated from the MAEW file MAEW-3232-DAYS-SUPPLY	
Compound Code	0824	Char(1)		Space Fill
Rx (Prescription) Number	0990	Char(12)	Populated from the MAEW file MAEW-3232-DAYS-SUPPLY	Claim Prescription Number contains the least significant 7 digits of the prescription number assigned by the pharmacy for the dispensed drug.
Amount Due	1028	Numeric(9,2) Sign	Populated from the MAEW	
Claim Charge Amount	1025	Numeric(9,2) Sign	Claim Charge Amount is the charge amount submitted or billed on a claim or claim line.	
Claim Calculated Allowed Amount	0743	Numeric(9,2) Sign	Claim Calculated Allowed Amount is the allowed charge calculated by the system for a claim or claim line. It is determined by applying the base rate change amounts (DE 0736) to a claim's base rate (DE 0564).	

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Previous Claim Reference	0537	Char(40)	Format: YYDDD#####MA YYDDD = Julian date of TCN creation; ##### = sequence number; M = input media code ('0' = paper, '2' = tape, '3' = POS and '4'=HIPP, '5' = Encounter at NYSoH); A = adjustment code ('0' = original, '1' = credit, '2' = debit);	
X12 ICD Code	2502	Char(1)	The ICD (International Classification of Diseases) Version Code identifies the ICD version being used in a transaction.	
Pharmacy Compound Table	9993		Contains data for up to 25 ingredients (NDCs) for a Compound Claim	
Rx Compound Table (indexed)	9993	Contains Next Two Fields 25 Times	Contains data for up to 25 ingredients (NDCs) for a Compound Claim	
Compound Drug Code (NDC)	1856	Char(11)	Ingredient's NDC.	
Other Drug Submitted Quantity	0991	Numeric(7,3) Sign	Ingredient's Submitted Quantity.	
Secondary Diagnosis Code	4183	Char(10)		
Diagnosis Table	9993			
4183-DIAG-TBL(indexed)	9993	Contains Below Field 24 Times	Contains up to 24 Diagnosis Codes	
Other Diagnosis Code	4183	Char(10)	Diagnosis Code identifies a condition, which requires medical treatment.	
Ordering Prescriber NPI	6477	Char(10)	NPI of the Ordering Prescriber	
Trailer Record				Required Segment from Copybook
Trailer ID	System Generated	Char (3)		Constant Value 'TRL'
Filler	N/A	Char(1)		Space Fill
System Date	System Generated	Char (10)		Current Date in MM/DD/CCYY format

Field Name	Data Element Number	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Filler	N/A	Char(1)		Space Fill
Record Count	System Generated	Numeric(9)	Total count of detail records only	Count of detail records only and excludes counting Trailer record
Filler	N/A	Char(1275)		Space Fill

6.9.6 Communication Methods

eMedNY will use sFTP to deliver the HID PPAS Non-Pharmacy Claim File (S-F-500) and the HID PPAS Pharmacy Claim File (S-F-501) to the eMedNY network folder for Acentra Health (HID) to retrieve from.

6.9.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

Daily: eMedNY's job scheduler schedules the HID PPAS Non-Pharmacy Claim File (S-F-500) and the HID PPAS Pharmacy Claim File (S-F-501) processing Daily job (PRSD0010) to run Saturday through Wednesday after all eMedNY Claims/SURS Processing is complete. Then the sFTP job (PFSD0010) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

Weekly: eMedNY's job scheduler schedules the HID PPAS Non-Pharmacy Claim File (S-F-500) and the HID PPAS Pharmacy Claim File (S-F-501) processing Weekly job (PRSW0021) to run Friday after all eMedNY Claims/SURS Processing is complete. Then the sFTP job (PFSW0021) transmits, via sFTP, the data file directly to the HID outbound folder for Acentra Health (HID) to retrieve from.

6.9.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.9.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.10 Requirements for PM00500-R0500 - Provider Load Reject Report File

In order for Acentra Health (PSM) technical staff to assist BPE in triage and reprocessing of failed PSM enrollments.

6.10.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.10.2 General Processing Steps

- PSM Approved provider enrollments are delivered to the eMedNY system via eMedNY Provider Enrollment Services (emedny-provider-enrollment-service) API.
- The Approved Provider Load To Provider Database Process (PRPD0010), that edits and loads newly approved providers from Enrollment Tracking database (PPROVD03) to the Provider Detail database (PPROVD01) runs daily.

- Job PRPD0010 generates the Provider Load Reject Report (PM00500-R0500), which is delivered to Acentra (PSM) as files in their native report formats. The report is also accessible for viewing in Mobius.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.10.3 Interface Processing Time Requirements

GDIT will send Provider Load Reject Report (PM00500-R0500) File to Acentra (PSM) on a daily basis around 9:00 PM. Delays are possible.

6.10.4 File Naming Convention

The eMedNY Mainframe Provider Load Reject Report output file (PM00500-R0500) is delivered to Acentra (PSM) as PM00500.ENRREJ.RPT.DYYMMDD, according to the agreed upon file naming convention. The YYMMDD is replaced with the current date.

6.10.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.10.5.1 File Layout

The Provider Load Reject Report output file (PM00500-R0500) has three types of records:

- Report Header
- Stage Header
- Detail

6.10.5.2 Data Assembly Characteristics

Table 19 – Data Assembly Characteristics - Provider Load Reject Report File (PM00500-R0500)

DSN	EPROD.NM.PD0010.PM00500.P00500RA.DYYMMDD
Description	Provider Load Reject Report (PM00500-R0500)
Copybook	N/A
Length	133
Format	Fixed Block Architecture (FBA)
Access	Sequential
Record Count	PM00500-R0500 Daily file contain approximately 20 records.

6.10.5.3 Field/Element Definition

Table 20 – Field/Element Definition - Provider Load Reject Report File (PM00500-R0500)

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Report Header -1 Record					
Filler	N/A	1	Char (01)	Space Fill	
Report Name	N/A	2	Char (08)	Constant Value 'REPORT: '	
Report Program ID	N/A	10	Char (07)	Constant Value 'PM00500'.	
Filler	N/A	17	Char (02)	Constant Value -R'	
Report Number	N/A	19	Char (04)	Constant Value '0500'	
Filler	N/A	23	Char (26)	Space Fill	
Filler	N/A	49	Char (36)	Constant Value 'NEW YORK STATE DEPARTMENT OF HEALTH '	
Filler	N/A	85	Char (23)	Space Fill	
Filler	N/A	108	Char (14)	Constant Value 'PROCESS DATE: '	
Process Date	9992	122	Char (10)	Current Date. Format is MM/DD/CCYY	System Generated Element
Filler	N/A	132	Char (01)	Space Fill	
Report Header -2 Record					
Filler	N/A	1	Char (51)	Space Fill	
Filler	N/A	52	Char (30)	Constant Value ' EMBEDNY '	
Filler	N/A	82	Char (26)	Space Fill	
Filler	N/A	108	Char (14)	Constant Value 'PROCESS TIME: '	
Process Time	9992	122	Char (08)	Current Timestamp Format is HH:MM:SS	System Generated Element
Report Header-3 Record					
Filler	N/A	1	Char (53)	Space Fill	
Filler	N/A	54	Char (06)	Constant Value 'AS OF '	
Filler	N/A	60	Char (06)	Space Fill	
AS of Date	9992	66	Char (10)	System Generated Current Date. Date Format is MM/DD/CCYY	System Generated Element
Filler	N/A	76	Char (32)	Space Fill	

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Filler	N/A	108	Char (14)	Constant Value 'PAGE: '	
Page Number	9992	122	Numeric (06)	Page Number	System Generated Element
Report Header-4 Record					
Filler	N/A	1	Char (52)	Space Fill	
Filler	N/A	53	Char (27)	Constant Value 'PROVIDER LOAD REJECT REPORT'	
Filler	N/A	80	Char (53)	Space Fill	
Report Header-5 Record					
Filler	N/A	1	Char (01)	Space Fill	
Filler	N/A	2	Char (07)	Constant Value 'STAGE: '	
Stage	1606	9	Char (10)	Constant Value 'COMPLETION'	Provider Enrollment Tracking Stage Code. Provider Enrollment Tracking Stage indicates the current stage within the provider enrollment process.
Filler	N/	19	Char (113)	Space Fill	
Report Header-6 Record					
Filler	N/A	1	Char (119)	Space Fill	
Filler	N/A	120	Char (06)	Constant Value 'USER '	
Filler	N/A	126	Char (07)	Space Fill	
Report Header-7 Record					
Filler	N/A	1	Char (11)	Constant Value 'ETN NUMBER '	
Filler	N/A	12	Char (36)	Constant Value 'PROVIDER NAME'	
Filler	N/A	48	Char (10)	Constant Value 'STATUS DT '	
Filler	N/A	58	Char (50)	Constant Value 'REASON'	
Filler	N/A	108	Char (11)	Space Fill	
Filler	N/A	119	Char(07)	Constant Value 'ASSIGN '	
Report Header-8 Record					
Filler	N/A	1	Char (11)	Constant Value '----- '	

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Filler	N/A	12	Char (36)	Constant Value '----- '	
Filler	N/A	48	Char (10)	Constant Value '----- '	
Filler	N/A	58	Char (50)	Constant Value '----- -----'	
Filler	N/A	108	Char (11)	Constant Value '----- '	
Filler	N/A	119	Char (07)	Constant Value '-----'	
Detail Record					
Filler	N/A	1	Char (01)	Space Fill	
ETN Number	0663	2	Numeric (10)	Provider Enrollment Tracking Number is a database generated sequential number	Provider Enrollment Tracking Number. Populate from Provider Enrollment Tracking Base Table (P_ET_PROV_TB)
Filler	N/A	11	Char (01)	Space Fill	
Provider Name	1589	12	Char (35)	Provider Name	Provider Name. Populate from Provider Enrollment Tracking Base Table (P_ET_PROV_TB)
Filler	N/A	47	Char (02)	Space Fill	
Status DT	9987	49	Char (08)	Calculated Value is a value resulting from calculation. Date Format: MM/DD/YY	Calculated Value
Filler	N/A	57	Char (01)	Space Fill	
Reason	9992	58	Char (60)	Error Message	System Generated Element. Populate error messages generated depending on the error encountered.
Filler	N/A	118	Char (01)	Space Fill	
User Assign	2411	119	Char (07)	System User Identification Number is an eMedNY user identifier that uniquely identifies a user.	System User Identification Number. Populate System User Identification Number (P_ET_ASGN_USER_ID) from Provider Enrollment Tracking Status Detail Table (P_ET_STAT_DTL_TB)

6.10.6 Communication Methods

eMedNY will use sFTP protocol to drop the Provider Load Reject Report (PM00500-R0500) file to the "Report" folder, where Acentra (PSM) can retrieve them.

6.10.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY's job scheduler schedules The Approved Provider Load To Provider Database Process (PRPD0010) to run daily, around 9:00 PM, generating report files and transferring them via sFTP to "Report" folder, where Acentra (PSM) can retrieve them.

6.10.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.10.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

6.11 Requirements for PM00500-R0501- Provider Load Accept Report File

In order for Acentra Health (PSM) technical staff to assist BPE in triage and reprocessing of failed PSM enrollments.

6.11.1 Assumptions

NYSDOH is responsible to attend all State Test Results given by the System Integration Testing (SIT) Team and approve any modifications to files and processing prior to implementation.

6.11.2 General Processing Steps

- PSM Approved provider enrollments are delivered to the eMedNY system via eMedNY Provider Enrollment Services (emedny-provider-enrollment-service) API.
- The Approved Provider Load To Provider Database Process (PRPD0010), that edits and loads newly approved providers from Enrollment Tracking database (PPROVD03) to the Provider Detail database (PPROVD01) runs daily.
- Job PRPD0010 generates the Provider Load Accept Report (PM00500-R0501), which is delivered to Acentra (PSM) as files in their native report formats. The report is also accessible for viewing in Mobius.
- The SYSOUT is archived in mainframe operational reporting platform for the Production Logical Partition (LPAR).

6.11.3 Interface Processing Time Requirements

GDIT will send Provider Load Accept Report (PM00500-R0501) to Acentra (PSM) on a daily basis around 9:00 PM. Delays are possible.

6.11.4 File Naming Convention

The eMedNY Mainframe Provider Load Accept Report output file (PM00500-R0501) is delivered to Acentra (PSM) as PM00501.ENRACC.RPT.DYYMMDD, according to the agreed upon file naming convention. The YYMMDD is replaced with the current date.

6.11.5 Message Format (or Record Layout) and Required Protocols

Communicating partners will comply with the agreed upon protocol details as described in the following sections.

6.11.5.1 File Layout

The Provider Load Accept Report output file (PM00500-R0501) has three types of records:

- Report Header
- Stage Header
- Detail

6.11.5.2 Data Assembly Characteristics

Table 21 – Data Assembly Characteristics - Provider Load Accept Report File (PM00500-R0501)

DSN	EPROD.NM.PD0010.PM00500.P00500RB.DYYMMDD
Description	Provider Load Accept Report (PM00500-R0501)
Copybook	N/A
Length	133
Format	Fixed Block Architecture (FBA)
Access	Sequential
Record Count	PM00500-R0501 Daily file contain approximately 200 records.

6.11.5.3 Field/Element Definition

Table 22 – Field/Element Definition - Provider Load Accept Report File (PM00500-R0501)

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Report Header -1 Record					
Filler	N/A	1	Char (01)	Space Fill	
Report Name	N/A	2	Char (08)	Constant Value 'REPORT: '.	
Report Program ID	N/A	10	Char (07)	Constant Value 'PM00500'.	
Filler	N/A	17	Char (02)	Constant Value -R'	
Report Number	N/A	19	Char (04)	Constant Value '0500'	
Filler	N/A	23	Char (26)	Space Fill	
Filler	N/A	49	Char (36)	Constant Value 'NEW YORK STATE DEPARTMENT OF HEALTH '	
Filler	N/A	85	Char (23)	Space Fill	
Filler	N/A	108	Char (14)	Constant Value 'PROCESS DATE: '	
Process Date	9992	122	Char (10)	Current Date. Format is MM/DD/CCYY	System Generated Element
Filler	N/A	132	Char (01)	Space Fill	
Report Header -2 Record					
Filler	N/A	1	Char (51)	Space Fill	
Filler	N/A	52	Char (30)	Constant Value ' EMEDNY '	
Filler	N/A	82	Char (26)	Space Fill	
Filler	N/A	108	Char (14)	Constant Value 'PROCESS TIME: '	
Process Time	9992	122	Char (08)	Current Timestamp Format is HH:MM:SS	System Generated Element
Report Header-3 Record					
Filler	N/A	1	Char (53)	Space Fill	
Filler	N/A	54	Char (06)	Constant Value 'AS OF '	
Filler	N/A	60	Char (06)	Space Fill	
AS of Date	9992	66	Char (10)	System Generated Current Date. Date Format is MM/DD/CCYY	System Generated Element

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Filler	N/A	76	Char (32)	Space Fill	
Filler	N/A	108	Char (14)	Constant Value 'PAGE: '	
Page Number	9992	122	Numeric (06)	Page Number	System Generated Element
Report Header-4 Record					
Filler	N/A	1	Char (52)	Space Fill	
Filler	N/A	53	Char (27)	Constant Value 'PROVIDER LOAD ACCEPT REPORT'	
Filler	N/A	80	Char (53)	Space Fill	
Report Header-5 Record					
Filler	N/A	1	Char (01)	Space Fill	
Filler	N/A	2	Char (07)	Constant Value 'STAGE: '	
Stage	1606	9	Char (10)	Constant Value 'COMPLETION'	Provider Enrollment Tracking Stage Code. Provider Enrollment Tracking Stage indicates the current stage within the provider enrollment process.
Filler	N/A	19	Char (113)	Space Fill	
Report Header-6 Record					
Filler	N/A	1	Char (119)	Space Fill	
Filler	N/A	120	Char (06)	Constant Value 'USER '	
Filler	N/A	126	Char (07)	Space Fill	
Report Header-7 Record					
Filler	N/A	1	Char (20)	Space Fill	
Filler	N/A	21	Char (11)	Constant Value 'ETN NUMBER '	
Filler	N/A	32	Char (36)	Constant Value 'PROVIDER NAME'	
Filler	N/A	68	Char (10)	Constant Value 'STATUS DT '	
Filler	N/A	78	Char (12)	Constant Value 'PROVIDER ID '	
Filler	N/A	90	Char (11)	Constant Value ' NPI '	
Filler	N/A	101	Char(07)	Constant Value 'ASSIGN '	

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
Report Header-8 Record					
Filler	N/A	1	Char (20)	Space Fill	
Filler	N/A	21	Char (11)	Constant Value '----- '	
Filler	N/A	32	Char (36)	Constant Value '----- '.	
Filler	N/A	68	Char (10)	Constant Value '----- '	
Filler	N/A	78	Char (12)	Constant Value '----- '	
Filler	N/A	90	Char (11)	Constant Value '----- '	
Filler	N/A	101	Char (07)	Constant Value '-----'	
Detail Record					
Filler	N/A	1	Char (20)	Space Fill	
ETN Number	0663	21	Numeric (10)	Provider Enrollment Tracking Number is a database generated sequential number	Provider Enrollment Tracking Number. Provider Enrollment Tracking Number. Populate from Provider Enrollment Tracking Base Table (P_ET_PROV_TB)
Filler	N/A	31	Char (01)	Space Fill	
Provider Name	1589	32	Char (35)	Provider Name	Provider Name. Populate from Provider Enrollment Tracking Base Table (P_ET_PROV_TB)
Filler	N/A	67	Char (02)	Space Fill	
Status DT	9987	69	Char (08)	Calculated Value is a value resulting from a calculation.	Calculated Value
Filler	N/A	77	Char (02)	Space Fill	
Provider ID	1563	79	Char (08)	Provider Identification Number is a unique number assigned to each provider	Provider Identification Number. Populate from Provider Base Table (P_PROV_TB)
Filler	N/A	87	Char (03)	Space Fill	
NPI	6477	90	Char (10)	National Provider Identifier (NPI)	National Provider Identifier (NPI). Populate from Provider Enrollment Tracking Base Table (P_ET_PROV_TB)
Filler	N/A	100	Char (01)	Space Fill	

Field Name	Data Element Number	Field Start Position	Field Type/Field Length	Description/Values	Notes/Comments/Questions
User Assign	2411	101	Char (07)	System User Identification Number is an eMedNY user identifier that uniquely identifies a user.	System User Identification Number. Populate System User Identification Number (P_ET_ASGN_USER_ID) from Provider Enrollment Tracking Status Detail Table (P_ET_STAT_DTL_TB)

6.11.6 Communication Methods

eMedNY will use sFTP protocol to drop the Provider Load Accept Report (PM00500-R0501) file to the “Report” folder, where Acentra (PSM) can retrieve them.

6.11.6.1 Interface Initiation

eMedNY sFTP services are available 24/7.

eMedNY’s job scheduler schedules The Approved Provider Load To Provider Database Process (PRPD0010) to run daily, around 9:00 PM, generating report files and transferring them via sFTP to “Report” folder, where Acentra (PSM) can retrieve them.

6.11.6.2 Flow Control

Acentra Health (HID) will notify eMedNY by phone, should eMedNY sFTP services be unavailable or any access issues are encountered.

The GDIT Command Center will notify Acentra Health (HID) by phone, should sFTP service be unavailable or any access issues are encountered.

6.11.7 Security Requirements

GDIT eMedNY and Acentra Health (HID) will comply with applicable Centers for Medicare & Medicaid Services (CMS) and NYS standard policies regarding data security and privacy controls.

7. Qualification Methods

Qualification methods to be used to verify that the requirements for the interfaces defined in Section 6 “*Detailed Interface Requirements*” have been met include:

- During Construction Phase, unit test packages are created with visual examination and approval of test results.
- During System Integration Phase, test packages are created with visual examination and approval of test results. Test results are then presented to NYSDOH for their sign-off.
- During Quality Assurance Phase, automated scripts are executed to determine results are as expected.
- Post Implementation Validation is performed after a project is moved into Production where visual examination of file processing is reviewed for accuracy.

Appendix A – Record of Changes

Table 23 – Record of Changes

Version Number	Date	Author/Owner	Description of Change
0	08/03/2020	Jeff Appleman	Initial with EP6684
1	03/31/2021	Jeff Appleman	Added Reference Files: Outside Vendor Drug Updated Activity File (R-F-162) and HID Drug Retro PA 90 Day Activity File (R-F-164) with EP6684. Added SURS/Claims Files: HID PPAS Non-Pharmacy Claim File (S-F-500) and HID PPAS Pharmacy Claims File (S-F-501) with EP6684.
2	12/10/2020	Marie Normore	Updated Preferred Drug Program (PDP) Client Data Extract File (B-F-963) with EP6835.
3	03/31/2023	Carolyn Mitchell	Updated Outside Vendor Drug Updated Activity File (R-F-162) with EP7386.
4	06/23/2023	Rajesh Sinha	Added Physician Administered Drug File (R-F-165) with EP7167.
5	06/11/2024	Joseph Smout	Added full client annual extract files with EP7802.
6	05/22/2025	Sree Vudaya	Updated HID PPAS Non-Pharmacy Claim File (S-F-500) and HID PPAS Pharmacy Claim File (S-F-501) with EP7852.
7	07/24/2025	Dan Hildebrandt/ Rakesh Kumar	Updated ICD filename and title to Acentra Health LLC. Updated to add two report extracts PM00500-R0500 and PM00500-R0501 with EP8268.

Appendix B – Acronyms

Table 24 – Acronyms

Acronym	Literal Translation
DE	Data Element Number
DOH	Department of Health
eMedNY	Electronic Medicaid of New York
GDIT	General Dynamics Information Technology
HID	Health Information Designs
ICD	Interface Control Document
NYS	New York State
NYSDOH	New York State Department of Health
ProDUR	Prospective Drug Utilization Review
sFTP	Secure File Transfer Protocol
SIT	Systems Integration Testing
SLA	Service Level Agreements

Appendix C – Glossary

Table 25 – Glossary

Term	Acronym	Definition
Acentra Health LLC		Kepto officially began operating under the Acentra Health name in June 2023.
Kepto		Kepto acquired HID (Health Information Designs) in July 2018.
Secure Shell	SSH	Secure File Transfer Protocol (sFTP) uses SSH and provides a secure way to transfer files between computers. SSH creates a secure connection when you log in to a remote computer.

Appendix D – Referenced Documents

Table 26 – Referenced Documents

Document Name	Document Location and/or URL	Issuance Date
eMedNY Data Element Dictionary	\\Cscrsrs0005\emedny project file\Semi-Annual Documentation	Semi-Annually
Client Technical Design Document	\\CSCRSRS0005\emedny Project File\Semi-Annual Documentation	Semi-Annually
Provider Technical Design Document	\\CSCRSRS0005\emedny Project File\Semi-Annual Documentation	Semi-Annually
Reference Technical Design Document	\\CSCRSRS0005\emedny Project File\Semi-Annual Documentation	Semi-Annually
SUR Technical Design Document	\\CSCRSRS0005\emedny Project File\Semi-Annual Documentation	Semi-Annually

Appendix E – Approvals

The undersigned acknowledge that they have reviewed the ICD and agree with the information presented within this document. Changes to this ICD will be coordinated with, and approved by, the undersigned, or their designated representatives.

Table 27 – Approvals

Document Approved By	Date Approved
Name: Shaun Smith, CISO and Privacy Officer – GDIT	Date
Name: <Name>, <Job Title> - <Company>	Date
Name: <Name>, <Job Title> - <Company>	Date
Name: <Name>, <Job Title> - <Company>	Date

Appendix F – Contact Information

Table 28 – Contact Information

Entity	Contact Description/Name	Phone	Email Address
Acentra Health (Kepro; HID)	Tanner Bain		tanner.bain@acentra.com
Acentra Health (Kepro; HID)	Tripp Callaway		tripp.callaway@acentra.com
Acentra Health (Kepro; HID)	Jeremy Bodden		jeremy.bodden@acentra.com
GDIT	GDIT Command Center	318-549-4333	RDC_Command_Center@gdit.com

Appendix G – Additional Appendices

There are no additional appendices associated with this ICD.