

**ODJFS Members' Primary Care Provider
File & Submission Specifications
Version 2.2**

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1. Introduction

This document describes the file layout to be used for the Members' Primary Care Provider (PCP) File. This file is designed to capture each member's PCP for a given month. Secure file transfer protocol (SFTP) client software capable of 128 bit encryption will be required to connect to the server.

2. HIPAA Security Measures

In accordance with federal privacy and security requirements per the Health Insurance Portability and Accountability Act (HIPAA), certain data transfers, including the Members' PCP file submitted to the Ohio Department of Jobs and Family Services (ODJFS) via SFTP and the subsequent activity files generated by ODJFS, must be protected through a secure, encrypted transmission system. SFTP client software capable of 128 bit encryption will be required to connect to the server.

3. File Submission Guidelines

1. MCPs may submit either 1 or 2 files for the monthly file submission; If an MCP chooses to submit separate files, they must be submitted per the following descriptions:

File Type 1: Records for members for whom:

- a. No PCP is assigned (these may either be for members who have newly-enrolled and have not had a PCP assigned within the enrollment span or for members for whom the MCP incorrectly reported the start date of PCP assignment).
- b. A PCP has been assigned and the assigned PCP is **not** in the ODJFS Managed Care Provider Network (MCPN)

File Type 2: Records for member for whom:

- c. A PCP has been assigned and the assigned PCP is **in** Managed Care Provider Network (MCPN)

2. Data for the Payment Arrangement field is required.

3. MCPs will only need to provide information on changes and corrections to PCP information previously accepted in the PCP database, instead of submitting the full membership each month. Records that must be submitted include:

- Additions for Newly-Enrolled Members. These are records for all members who were newly-enrolled during the prior month. If a PCP has not been assigned, the PCP status is '0'. If a PCP has been assigned, the PCP status is '1'. If the PCP status is '1', the MCP must not submit information on this member in subsequent months unless there is a change in PCP, PCP status, or payment arrangement. For example, if a member is newly-enrolled in the MCP during July 2006 and has not been assigned a PCP, then the MCP must submit a record with a PCP status of '0' in the August 2006 file submission. For this record, the enrollment month must be "07/2006". There will be no PCP span for this member until the MCP submits an assigned PCP. Alternatively, if a member is newly-enrolled in the MCP during July 2006 and has been assigned to PCP 7777777 in the same month, then the MCP must submit a record with a PCP status of '1' in the

August 2006 file submission. For this record, the enrollment month must be "07/2006". The PCP span for PCP 7777777 will be open-ended starting in July 2006.

- Updates to PCP Medicaid Provider Number. These are records which update the assigned PCP previously submitted and accepted into the PCP database. For example, if the PCP of the member changed from PCP 3451234 in July, 2006 to PCP 7654305 in September 2006, the MCP must submit this change to ODJFS with the October 2006 file submission. For this record, the enrollment month must be "09/2006" and the PCP status must be '1', indicating that the member's PCP has changed. The PCP span for PCP 3451234 will be July through August 2006. The PCP span for PCP 7654305 will be open-ended starting in September 2006. When submitting update, the MCP must submit the entire record (not just the field involving the change).
- Updates to Payment Arrangement. These are records which update the payment arrangement previously submitted and accepted into the PCP database. For example, if the payment arrangement between the MCP and the PCP changed from fee-for-service (value of '1') in July 2006 and later the payment arrangement changes to full capitation (value of '3') in October 2006, the MCP must submit this change to ODJFS with the November 2006 file submission. For this record, the enrollment month must be "10/2006" and the PCP status must be '2'. The PCP span from July through September 2006 will have a payment arrangement of fee-for-service. The PCP span starting in October 2006 will be open-ended and have a payment arrangement of full capitation. When submitting update, the MCP must submit the entire record (not just the field involving the change).
- Corrections to PCP Medicaid Provider Number. These are records which correct the PCP Medicaid provider numbers that were erroneously submitted and accepted into the PCP database; corrected PCP Medicaid provider number records will completely overlay the most recently accepted information in the PCP database. For example, if the PCP of a member was originally submitted as 1234567 for enrollment month July 2006 with no subsequent records submitted to the PCP database and later (submission month of December 2006) the MCP discovers that the PCP for this member for July 2006 through present should have been 7654321, this correction must be included in the file. For this record, the enrollment month must be "07/2006" and the PCP status must be '1'. The PCP span for PCP 7654321 will be open-ended starting in July 2006. When submitting corrections, the MCP should resubmit the entire record (not just the field related to the error).
- Corrections to PCP Assignment Dates. These are records which correct the original PCP assignment date that were erroneously submitted and accepted into the PCP database; there must be two record submissions for these corrections. For example, if the PCP of a member was originally submitted as 1234567 for enrollment month July 2006 with no subsequent records submitted to the PCP database and later (submission month of December 2006) the MCP discovers that the PCP for this member was not assigned until September 2006. The first record in the file must be submitted with the enrollment month "07/2006", the PCP status must be '0', and the Medicaid provider number must be blank. The second record in the file must be submitted with the enrollment month "09/2006" and the PCP status must be '1'. The PCP span for PCP 1234567 will be open-ended starting in September 2006. When submitting corrections, the MCP should

resubmit the entire record (not just the field related to the error).

- Corrections to Payment Arrangement. These are records which correct the payment arrangement that were erroneously submitted and accepted into the PCP database. For example, if the payment arrangement of the member was originally submitted to the PCP database as fee-for-service (value of '1') in July 2006 and later (submission month of December 2006) the MCP discovers that the payment arrangement should have been full capitation (value of '3'), the MCP must submit this change to ODJFS with the December 2006 file submission. For this record, the enrollment month in the file must be "07/2006". The PCP span for PCP 3451234 will be July through August 2006. The PCP span starting July 2006 will reflect a payment arrangement of '1'. When submitting corrections, the MCP should submit the entire record (not just the field involving the change).

4. If no information is submitted regarding a member and the ODJFS recipient master file shows that the person continues to be a member with the MCP, the member will continue to have the same information previously submitted by the MCP. If the member's enrollment is terminated with the MCP, it is not necessary for the MCP to submit additional information to the PCP database. ODJFS will determine monthly MCP membership by referencing internal enrollment files.

5. The MCP Medicaid provider number must pertain to the member's residence as of the month submitted in the Enrollment Month field. Therefore, if the record pertains to a Covered Families and Children (CFC) member who was continuously enrolled in the same MCP from June 2006 to present during which time the region became active (September 2006), the MCP would submit the original record for this member with an enrollment month of June 2006 and the county-based MCP Medicaid provider number. If the member's PCP information changed in October 2006, the MCP must submit a record with an enrollment month of October 2006 and the regional-based MCP Medicaid provider number.

6. The PCP database completes the following data-related checks before adding a PCP record for a member:

- The entire PCP span must be within a valid enrollment span for member.
- The PCP provider number corresponds to an approved provider on the State Medical Board file per the provider specialties listed in Appendix B for CFC members or Appendix C for Aged, Blind, and Disabled (ABD) members.
- If a PCP record is submitted that is identical to an existing record except for the enrollment month value, then there must be a PCP span that falls between the existing span and submitted span. If there is no PCP span that falls between the existing span and the submitted span, the record will reject.

7. The PCP database makes the following assumptions when updating PCP spans for members:
- If the member’s beginning PCP assignment date (as submitted in enrollment month field) is the same as a record that already exists in the system, the submitted record will replace the existing record.
 - The PCP database will automatically end date existing PCP spans for a member as updates to the PCP Medicaid provider number and/or PCP payment arrangement for that member if either subsequent or preceding PCP spans that have previously been submitted and accepted into the PCP database.
8. Records that were rejected for errors should be resubmitted within a week of the original data submission with an updated file extension.

4. File Names

The file name contains a unique character identifying the file type, the submitter’s ID, and the month and year of submission, as indicated below.

zxxxmmyy.t00

Position	Symbol	Description
1	z	PCP File Type 1
2-4	Xxx	MCP Submitter ID (Use codes from ODJFS MCP Submitter ID Table in Appendix A)
5-8	Mmyy	mm Month of submission yy Year of submission
9	.t00	Extension: t represents a text file 00 is the number of text file submission for the month. Increment by 1 with each new file submission. First file submission for each month begins with >00', the next >01', etc.

pxxxxmmyy.t00

Position	Symbol	Description
1	p	PCP File Type 2 (MCPs should use this unique identifier if the MCP chooses to submit only one file)
2-4	Xxx	MCP Submitter ID (Use codes from ODJFS MCP Submitter ID Table in Appendix A)
5-8	Mmyy	mm Month of submission yy Year of submission
9	.t00	Extension: t represents a text file 00 is the number of text file submission for the month. Increment by 1 with each new file submission. First file submission for each month begins with >00', the next >01', etc.

Example: File name for the initial submission for a file type 2 in April 2007:

pxxxx0407.t00

If necessary, a second file type 2 for the month of April would be:

pxxxx0407.t01

5. Delimiters

The delimiters are as follows:

This delimiter symbol:	Is this character:	Means this:
	Bar	End of a label field
~	Tilde	End of a data field
,	Comma	Separates multiple values within a data field

6. Fields/Records

6.1 Label Fields

Label fields are fields that identify the data in the following field. A label field precedes each data field (see sample record in section 5). Label fields are standard for delimited files.

Note: All label fields must be included in the record, even if the corresponding data fields contain no data.

6.2 Data Fields

Data fields are fields that contain the value for each data item.

If no data is available for a data field:

Insert a tilde character (~) immediately after the field label and bar character (|).

Then, continue with the next field. For example, the format of a record with no payment arrangement code is as follows:

PAYARRANGE|~

6.3 Records

A carriage return or line feed is required at the end of each record.

7. File Layout

Field Type	Field Name	Required, Optional, or Conditional	Description
Label	ENROLLMONTH	R	

Field Type	Field Name	Required, Optional, or Conditional	Description
Data	Enrollment Month	R	Month & year of enrollment if : 1) the record is the first record submitted and accepted for a member's enrollment span (this should include all newly-enrolled members for the month prior to enrollment); or 2) correcting information contained within the first record submitted and accepted for a member's enrollment span OR Month & year of PCP, payment arrangement or PCP status change if updating information stored in the PCP database. Format MM/YYYY
Label	MCPMEDPROVNO	R	
Data	Submitting MCP's Medicaid Provider ID	R	7 digit MCP Medicaid provider number of the submitting MCP for the county or region in which the member resided at the time of the date contained within the Enrollment Month field
Label	MEDRECIPIENTID	R	
Data	Medicaid Recipient ID	R	12 digit Medicaid recipient ID of member
Label	PCPSTATUS	R	
Data	PCP Status	R	0, 1, 2 Enter "0" if the member has not been designated a PCP. Enter "1" if it the original submission for a PCP assignment for a newly-enrolled member OR if the member's PCP changed from previously accepted records stored in the PCP database. Enter "2" if correcting or updating payment arrangement from previously accepted records stored n the PCP database and the member's PCP has not changed from previously accepted records stored in the PCP database.
Label	PCPMEDICAIDID	R	
Data	Primary Care Provider's Medicaid ID	C Required if PCPSTATUS =	7 digit Medicaid Provider ID of the Primary Care Provider for the member for the month in the Enrollment Month field.

Field Type	Field Name	Required, Optional, or Conditional	Description
		1 or 2	For members that change PCPs mid-month, enter the member's PCP as of the end of the month
Label	PAYARRANGE	R	
Data	Payment Arrangement	R	Description of Payment Arrangement between MCP & the PCP. Choose one of the following: 1 - Fee-for-service (no capitation) 2 - Partial Capitation (capitation paid to PCP covers some PCP services) 3 - Full Capitation (capitation paid to PCP covers all PCP services) Blank – no PCP has been assigned. Must be blank, if PCP's Medicaid ID is blank and PCP Status is "0"

8. Sample Records

Example 1: A PCP record is submitted on the initial file for a member enrolled as of June 2006 in the county-based MCP provider number (111111). In July 2006, the county-based MCP provider (111111) number changed to the regional-based provider number (222222). The record should be submitted as follows in July 2006:

```
ENROLLMONTH|06/2006~MCPMEDPROVNO|111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~
```

Example 2: A PCP record is submitted on the initial file for a member enrolled as of June 2006 in the county-based MCP provider number (111111) and, based on current enrollment information, that member's enrollment span in the MCP ended on August 2006. As of August 2006, the county-based MCP provider (111111) number is still in use as the region has not yet gone live. The record should be submitted as follows:

```
ENROLLMONTH|06/2006~MCPMEDPROVNO|111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~
```

Example 3: A PCP record is submitted for a member whose enrollment span start date begins in January 2007 in the county-based MCP provider number (111111). As of February 2007, the county-based MCP provider (111111) number is still in use as the region has not yet gone live. A new PCP record is submitted for the member in February to indicate a change in designated PCP. The record should be submitted as follows:

First PCP record for enrollment span beginning January 2007

ENROLLMONTH|01/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Second PCP record for enrollment span beginning January 2007

ENROLLMONTH|02/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|9999999~PAYARRANGE|3~

Example 4: A PCP record is submitted for a member whose enrollment span start date begins in January 2007 in the county-based MCP provider number (1111111). As of March 2007, the county-based MCP provider (1111111) number changed to the region-based provider number (2222222). In April 2007, the payment arrangement between the provider and the MCP changed. The records should be submitted as follows:

First PCP record for enrollment span beginning January 2007

ENROLLMONTH|01/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

PCP record with payment arrangement change in April 2007 for enrollment span beginning January 2007

ENROLLMONTH|04/2007~MCPMEDPROVNO|2222222~MEDRECIPIENTID|
123456789999~PCPSTATUS|2~PCPMEDICAIDID|0123456~PAYARRANGE|2~

Example 5: A PCP record is submitted for a member whose enrollment span start date begins in January 2007 in the county-based MCP provider number (1111111). As of March 2007, the county-based MCP provider (1111111) number changed to the region-based provider number (2222222). In April 2007, the MCP discovers that the PCP had not been assigned to the member until March 2007.

First PCP record for enrollment span beginning January 2007

ENROLLMONTH|01/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Correction to first PCP record for enrollment span beginning January 2007

ENROLLMONTH|01/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|0~PCPMEDICAIDID|~PAYARRANGE|~

Update to PCP record for PCP span beginning March 2007

ENROLLMONTH|03/2007~MCPMEDPROVNO|2222222~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Example 6: A PCP record is submitted for a member whose enrollment span start date begins in January 2007 in the county-based MCP provider number (1111111). As of February 2007, the county-based MCP provider (1111111) number changed to the region-based provider number (2222222). In April 2007, enrollment for the member retroactively changes to a span which

begins in February 2007 and is open-ended. The initial PCP record will be deleted from the database as it is out of synch with enrollment. The new record will be submitted as follows:

PCP record for enrollment span beginning January 2007 – automatically deleted from database when enrollment retroactively changes

ENROLLMONTH|01/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

New PCP record for enrollment span beginning February 2007

ENROLLMONTH|02/2007~MCPMEDPROVNO|2222222~MEDRECIPIENTID|123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Example 7: A PCP span exists in the system for a member with a start date of March 2007. In the May submission, the MCP submits a PCP record for this member with a different PCP and payment arrangement and a start date of March 2007. The newly submitted record will overwrite the existing record.

PCP record that currently exists in the database

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Newly submitted record for the same member with the same PCP start date

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|2~PCPMEDICAIDID|8951111~PAYARRANGE|2~

PCP record that will exist in the database after the new record is submitted

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|2~PCPMEDICAIDID|8951111~PAYARRANGE|2~

Example 8: A PCP span exists in the system for a member with a start date of March 2007 and no end date. In the May 2007 submission, the MCP submits another record for this member for whom the PCP is the same in both records. However the payment arrangement has changed in April 2007.

PCP record that currently exists in the database

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Newly submitted record for the same member with the same PCP start date

ENROLLMONTH|04/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|2~PCPMEDICAIDID|0123456~PAYARRANGE|1~

PCP records that will exist in the database after the new record is submitted

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

ENROLLMONTH|04/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|2~PCPMEDICAIDID|0123456~PAYARRANGE|1~

Example 9: A PCP span exists in the system for a member with a start date of March 2007 and no end date. In the May submission, the MCP submits another PCP record for this member with a start date of April 2007 and a different PCP and a different payment arrangement than the existing span. The existing record will be automatically end dated with a date of March 31, 2007 and the new record will be added to the database.

PCP record that currently exists in the database

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

Newly submitted record for the same member with a different PCP start date

ENROLLMONTH|04/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|8951111~PAYARRANGE|1~

PCP records that will exist in the database after the new record is submitted

ENROLLMONTH|03/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|0123456~PAYARRANGE|3~

ENROLLMONTH|04/2007~MCPMEDPROVNO|1111111~MEDRECIPIENTID|
123456789999~PCPSTATUS|1~PCPMEDICAIDID|8951111~PAYARRANGE|1~

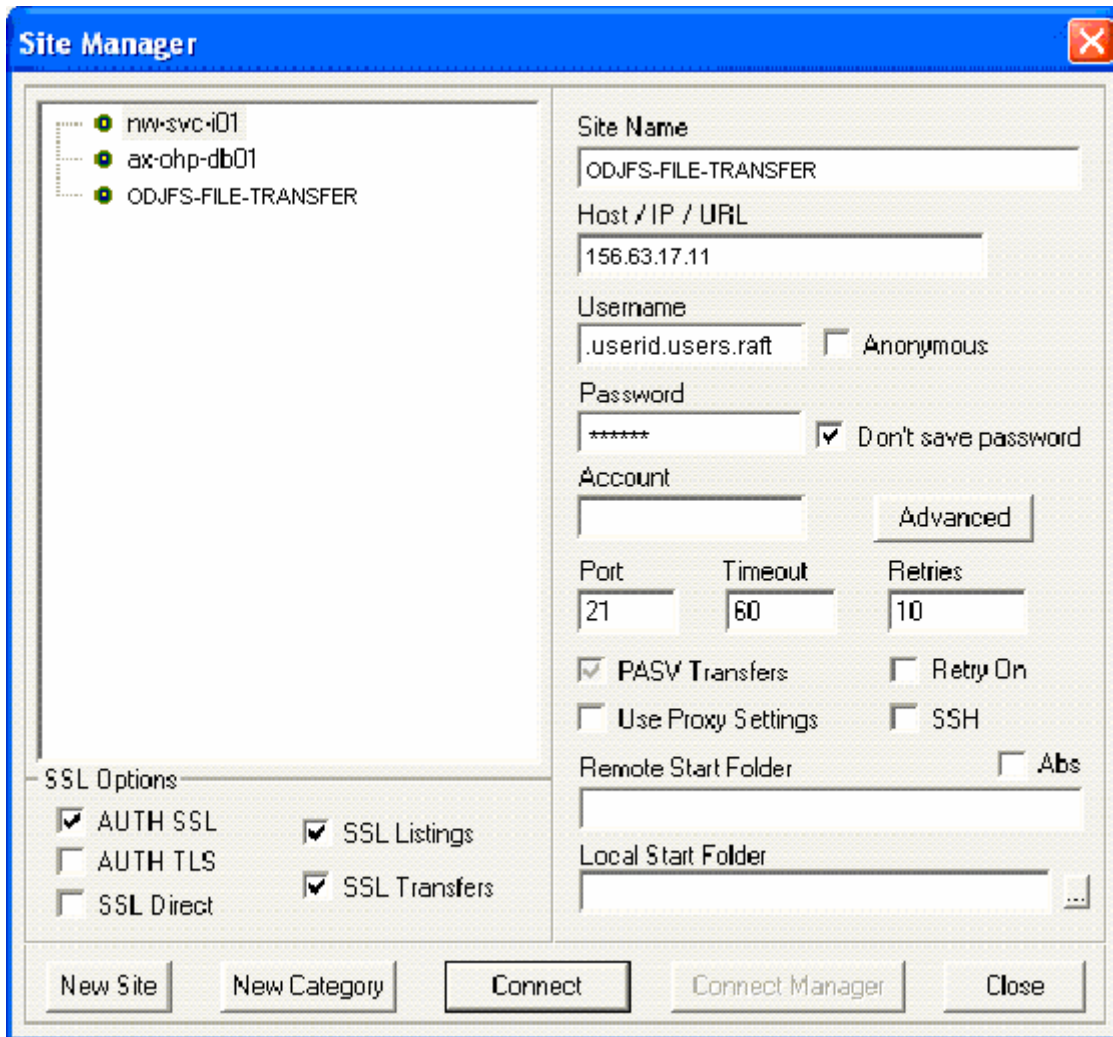
9. File Submissions

Each MCP must submit data through secure file transfer protocol (SFTP). There is a variety of client SFTP software available for this purpose.

Client software requirements for SFTP:

- Allow authorization secure sockets listing (AUTH SSL).
- Support SSL Listings.
- Support SSL Transfers.
- Connect to IP address: 156.63.17.11.

Below is an example of an FTP client application properly configured to connect to ODJFS' SFTP server:



The example was taken from the Core FTP Lite application. To configure your specific FTP client software, refer to the documentation provided with that software from the manufacturer.

10. Activity Reports

The MCP may obtain an activity report for the submitted PCP file by accessing its pickup folder on ODJFS' server through secure FTP. The activity report presents the results of the processing of a data file submitted by an MCP. It contains the following information:

- Summary of the Processing Results: counts the records accepted into database, rejected records, duplicate records, deleted records, expected but rejected recipients, expected but not submitted recipients and total records received.
- Accepted List: identifies records accepted into the PCP database
- Rejected List: identifies rejected records by a rejection code in the second column of each record in the report. For a list of rejection codes, see Appendix D.
- Deleted Records: lists the records that were deleted from the PCP database each month, due to retroactive changes in enrollment spans. In these cases, the PCP enrollment span is not completely contained within a valid enrollment span.
- Duplicate Records: lists the submitted records that were exact duplicates of records already contained within the PCP database.
- Expected but rejected recipients: lists the records for newly enrolled recipients that were submitted on the monthly file, but rejected
- Expected but not submitted recipients: lists newly enrolled members for whom PCP records were not submitted to the state

Appendix A

ODJFS MCP Submitter ID Table

MCP Submitter ID	MCP
712	Amerigroup
293	Anthem
420	Buckeye Community Health Plan
315	CareSource
731	Molina
325	Paramount
761	Unison
305	Wellcare

Appendix B

Codes to Identify Primary Care Providers – CFC

ODJFS SPECIALTY PROVIDER TYPE	STATE MEDICAL BOARD SPECIALTY
10: PCP: General/Family Practice	FP: Family Practice FPG: Geriatric Medicine (Family Practice) GP: General Practice FM: Family Medicine
11: Allergy	A: Allergy AI: Allergy & Immunology ALI: Allergy & Immunology (Clin. & Lab Imm) PDA: Pediatric Allergy
15: PCP: Internal Medicine	AMI: Adolescent Medicine (Internal Medicine) IM: Internal Medicine IMG: Geriatric Medicine MPD: Internal Medicine/Pediatrics
16: PCP: Pediatrics	MPD: Internal Medicine/Pediatrics PD: Pediatrics ADL: ADOLESCENT MEDICINE
17: PCP: Pediatrics (Board Certified)	MPD: Internal Medicine/Pediatrics ADL: ADOLESCENT MEDICINE
35: Ophthalmology	OPH: Ophthalmology PO: Pediatric Ophthalmology
51: General Surgery	GS: General Surgery PDS: Pediatric Surgery
52: PCP: OB/GYN	OBG: Obstetrics & Gynecology OBS: Obstetrician
53: Obstetrics & Gynecology	OBG: Obstetrics & Gynecology OBS: Obstetrician
55: Orthopedic Surgery	OFA: Orthopedics, Foot & Ankle ORS: Orthopedic Surgery OTR: Orthopedic Trauma OSS: Orthopedic Surgery of the Spine OP: Pediatric Orthopedics
56: Otolaryngology	OTO: Otolaryngology PDO: Pediatric Otolaryngology

Appendix C

Codes to Identify Primary Care Providers - ABD

Codes to Identify Primary Care Providers
ODJFS PROVIDER TYPE *
(20) Individual Physician
(22) Individual Osteopath
(65) Clinical Nurse Specialist
(71) Certified Nurse Midwife
(72) Certified Nurse Practitioner
ODJFS PROVIDER SPECIALTY**
(01) General Practice
(11) Allergy
(12) Cardiovascular
(14) Gastroenterology
(15) Internal Medicine
(16) Pediatrics
(18) Preventive Medicine
(19) Pulmonary Diseases
(21) Child Psychiatry
(22) Neurology
(23) Psychiatry
(53) OB/GYN
(56) Otolaryngology
(59) Urology
(71) Obstetrics and Gynecology (Osteopath)
(72) Ophthalmology / Otolaryngology (Osteopath)
(75) Psychiatry Neurology (Osteopath)
(99) Other (includes Endocrinology, Nephrology, Oncology and Rheumatology)

* 'ODJFS Provider Type' represents the provider type codes found on the *ODJFS' Provider Master File (PMF)*. These codes are inclusive of those providers who will be approved as designated PCPs for ABD and CFC members. Please refer to the 'Provider Master File Layout and Code Keys.doc' located in MCP, SFTP plan pick-up folder.

** 'ODJFS Specialty Provider Type' represents the provider specialty codes found on the *ODJFS' Provider Master File (PMF)*. These codes are inclusive of those individual physicians and osteopaths who will be approved as designated PCPs for CFC members.

Please refer to the 'Provider Master File Layout and Code Keys.doc' located in MCP, SFTP plan pick-up folder.

Appendix D

Rejection Codes

Code	Description	Description
01	Invalid delimiter-must use bar (), tilde (~), or comma (,)	REJECT_INVALID_DELIMITER
36	Invalid field label	REJECT_INVALID_FIELD_LABEL
68	Duplicate field label	REJECT_DUPLICATE_FIELD_LABEL
100	Invalid Submitter ID	REJECT_INVALID_SUBMITTERID
101	No value in the ENROLLMONTH field	REJECT_NOVALUE_ENROLLMONTH
102	No value in the MCPMEDPROVNO field	REJECT_NOVALUE_MCPMEDPROVNO
103	No value in the MEDRECIPIENTID field	REJECT_NOVALUE_MEDRECIPIENTID
104	No value in the PCPSTATUS field	REJECT_NOVALUE_PCPSTATUS
105	No value in the PCPMEDICAIDID field	REJECT_NOVALUE_PCPMEDICAIDID
106	No value in the PAYARRANGE field	REJECT_NOVALUE_PAYARRANGE
111	ENROLLMONTH might not be in the MM/YYYY format or Recipient might not be enrolled for that month	REJECT_INVALID_ENROLLMONTH
112	Invalid MCP Provider Number	REJECT_INVALID_MCPMEDPROVNO
113	Recipient should not be more than 12 numbers and it should exist in the database.	REJECT_INVALID_MEDRECIPIENTID
114	Invalid PCP Status	REJECT_INVALID_PCPSTATUS
115	Invalid PCP provider number or PCP provider number might have entered when the PCP status is zero	REJECT_INVALID_PCPMEDICAIDID
116	Invalid PAYARRANGE value	REJECT_INVALID_PAYARRANGE
120	Exact duplicate was entered in the same file submission.	REJECT_EXACT_DUPLICATE

121

Different information was entered for the same recipient in the same file submission

REJECT_SAME_RECIPIENT_DUPLICATE