

**MMCD Enrollment File for CAPMAN
CHANGE CONTROL**



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APPROVAL FORM

WORK EFFORT NAME:

MMCD Enrollment File for CAPMAN

IDENTIFIERS (CCMS/CBA):

CCMS 2498 / OHC1010

SUBMITTER:

Phil Heinrich

SUBMISSION DATE:

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820 Phase 2 - 0001

ROUTING & APPROVAL	SIGNATURE DATE	By	SIGNATURE	CHANGE TYPE
<input checked="" type="checkbox"/>		Name: Phil Heinrich Title: IT Section Manager Organization: OHC	 8/26/10	<input type="checkbox"/> MINOR CHANGES For Clarity/Format/Typo (signatures not required) <input checked="" type="checkbox"/> SUBSTANTIVE CHANGES New Programming Enhancement or other Material Change to existing business practice including reports or file delivery (All signatures required)
<input checked="" type="checkbox"/>	8/26/10	Fei Collier Application Support Branch Chief Information Technology Systems Division		IMPLEMENTATION DATE <input type="checkbox"/> TBD <input type="checkbox"/> NEXT REGULAR <input type="checkbox"/> EMERGENCY CHANGE DUE BY: SPECIAL IMPLEMENTATION INSTRUCTIONS:
	8/26/10	Ken Buehler DPM III Medi-Cal Applications Section Information Technology Services Division		
	8/26/2010	Cheryl Dobbins DPM II MEDS Analysis Unit Information Technology Services Division		
	8/26/2010	Emily Yamamoto DPM II MEDS Programming Unit Information Technology Services Division		
		Wendy Louie Senior Analyst MEDS Analysis Unit Information Technology Services Division	 8/26/10	

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SEE VERSION HISTORY FOR AUGUST 2010 CHANGES.



***California Department of Health Care Services
820 Phase 2 System***

**Use Case 1.1
*Receive and Process Enrollment Data File***

*Version: 1.6
Date: 08/26/10*

Version History

Version	Author	Date	Updates/Comments
0.1	Cyndi Strange	06/15/09	Creation
0.2	Shauna Neva	06/17/09	Updated per UC 1.1 JAD1 held 6/17/09
0.3	Shauna Neva	07/29/09	Updated per 820 team meeting
0.4	Cyndi Strange	08/21/09	Submission of Requirements Specification Deliverable
0.5	Cyndi Strange	09/10/09	Updated as Requirements Specification Deliverable comments.
0.6	Gina Pasaak	09/16/09	Updated as Requirements Specification Deliverable comments.
0.7	Gina Pasaak	09/21/09	Updated as Requirements Specification Deliverable comments
0.8	Shauna Neva	10/07/09	Enrollment File- HCP logic Step 1
0.9	Shauna Neva	12/21/09	Removed Exception #2 in Step 1, regarding validation of file name and file type.
1.0	Shauna Neva	1/11/2010	Added Note to Step 1, additional logic for valid record check on MMCD file, and updated the Data Description table with more descriptive terminology.
1.1	Shauna Neva	02/02/2010	Step 1, Exception 3 and Section 5.0 (Data Description table), item number 7: Removed edit for date of birth/death not valid if it is a future date. This was not a requirement. Also, updated Step 1 Exception #2 to indicate non-txt file is ignored.
1.2	Shauna Neva	02/11/2010	Updated logic for invalid dates and error log.
1.3	Shauna Neva	08/19/2010	Updated sections 4.3 and 5.0
1.4	Shauna Neva	8/25/2010	Added/Updated items 2, 3, 4, and 5 in section 5.0, per Ted Calvert.
1.5	Shauna Neva	8/25/2010	Updated per 8/25 meeting with ITSD for final review and sign-off of section 5.0 (Enrollment File requirements). Updated sections 1.3, 3.0, 4.1-Step 1 System Action, 4.2 and 5.0 (items 1, 5, 9 and 10).

Version	Author	Date	Updates/Comments
1.5	Shauna Neva	8/26/2010	Added SFTP Server location where Enrollment Files will be sent and retrieved. Fixed MMCD typo in Section 5.0, item 10.+

Table of Contents

1.0	INTRODUCTION	5
1.1	PURPOSE	5
1.2	OVERVIEW	5
1.3	PROCESS MODEL	5
2.0	ACTORS.....	5
3.0	TRIGGER	6
4.0	FLOW OF EVENTS.....	6
4.1	MAIN EVENT FLOW	6
4.2	VERIFICATION.....	8
4.3	RECOMMENDED FILE NAMING CONVENTION.....	8
5.0	MMCD ENROLLMENT FILE DATA DESCRIPTION.....	9
6.0	POST-CONDITIONS	11
7.0	QUESTIONS.....	11
8.0	REQUIREMENTS.....	11

1.0 Introduction

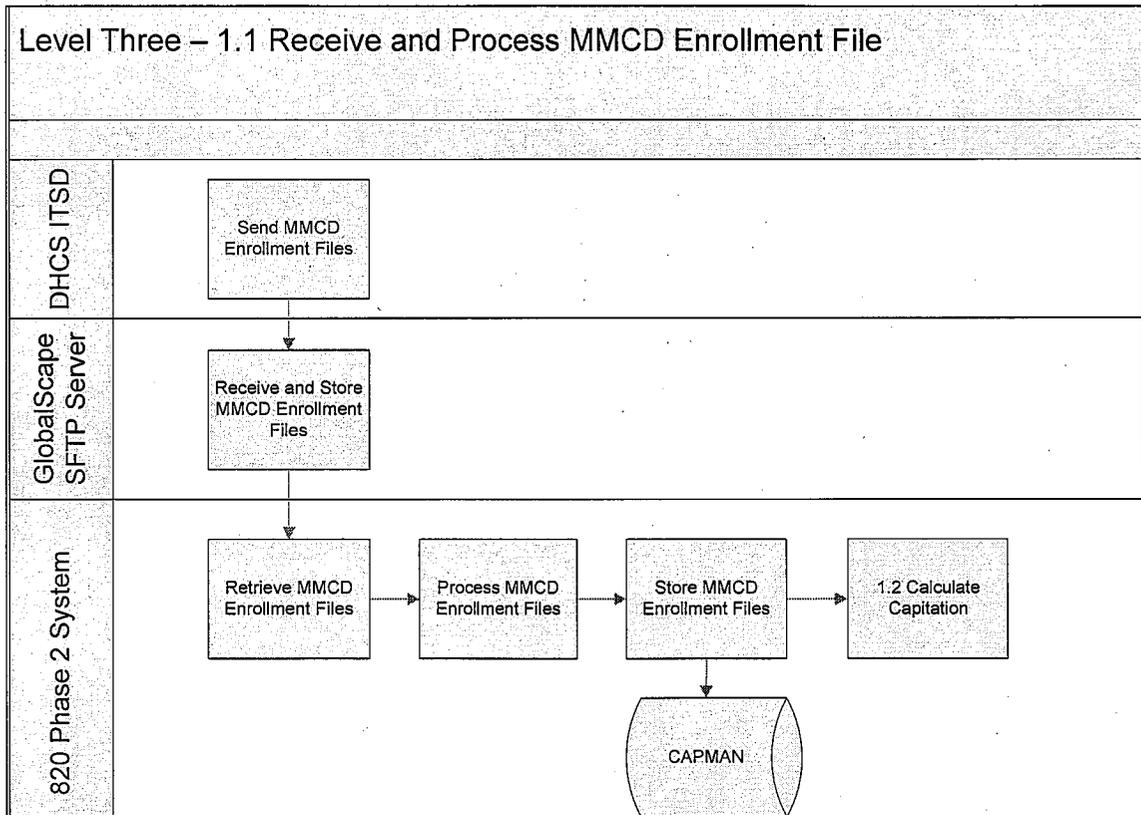
1.1 Purpose

The purpose of this use case is to provide the functional requirements for the 820 Phase 2 project. The information contained in this document is the basis for the system design and formal testing plans.

1.2 Overview

This use case describes the steps for processing the MMCD Enrollment Files in the 820 Phase 2 System.

1.3 Process Model



2.0 Actors

Actor	Description
DHCS ITSD	Sends MMCD Enrollment Files
DHCS SFTP Site	Receives and Stores MMCD Enrollment Files

<i>Actor</i>	<i>Description</i>
820 Phase 2 System	Retrieves, processes and stores MMCD Enrollment Files

3.0 Trigger

ITSD generates the MMCD Enrollment Files on a monthly basis after the MEDS renewal occurs. Note: There is a 5-day window for MEDS renewal, between the 24th and 28th day of the month. The files will be submitted by ITSD to the following location on the GlobalScape SFTP Server: <sftp://eft.dhcs.ca.gov/DHCS/MMCDDFile>. Note: Files must first be uploaded to the root folder <sftp://eft.dhcs.ca.gov/DHCS> then moved to the 'MMCD File' folder once the upload is complete.

4.0 Flow of Events

4.1 Main Event Flow

<i>Step</i>	<i>System Action</i>	<i>System Response</i>
1	System retrieves new MMCD Enrollment Files on the GlobalScape SFTP Server, at the following location: sftp://eft.dhcs.ca.gov/DHCS/MMCDDFile	<p>System finds and picks up the most recent MMCD Enrollment Files, which are separated by each HCP (Health Care Plan) code.</p> <p>Exception: If MMCD Enrollment Files do not exist within the defined time frame then system logs an error.</p> <p>Exception: If a non-txt file is found in the MMCD Enrollment File SFTP folder, the file is ignored.</p> <p>Exception: If the MMCD Enrollment File data does not include the following data elements for all beneficiaries, the system logs an error and beneficiary record will not be persisted in the 820 database:</p> <ul style="list-style-type: none"> • CIN • Last Name • Date of Birth, cannot be: <ul style="list-style-type: none"> ○ NULL ○ Invalid <ul style="list-style-type: none"> ▪ Date does not exist (e.g. 13/80/9999) ▪ Contains non-numeric characters

Step	System Action	System Response
		<p>Note: The system does NOT perform an edit upon the following:</p> <ul style="list-style-type: none"> • File name matches file naming convention • HCP(s) and MEDS Renewal Date(s) contained in file match those in the file name <p>If the beneficiary does not have payment history for a service month and does not have both of the following data elements, the beneficiary record will not be stored in the database:</p> <ul style="list-style-type: none"> • Aid Code (associated with eligible HCP) • Valid HCP1 Code (medical) or HCP2 Code (dental) <ul style="list-style-type: none"> ◦ System ignores values for HCP 3, 4 and 5 • HCP status code equals 01, S1 or 51 <p>If the beneficiary has payment history for a service month, and the beneficiary record for that month does not contain both of the following data elements, the beneficiary will be considered "Dis-enrolled" for that capitation month, and net changes will be calculated.</p> <ul style="list-style-type: none"> • Aid Code (associated with eligible HCP) • Valid HCP1 Code (medical) or HCP2 Code (dental) <ul style="list-style-type: none"> ◦ System ignores values for HCP 3, 4 and 5 • HCP status code equals 01, S1 or 51 <p>If the Capitation Date is not the same for all beneficiaries on the MMCD file, system rejects all beneficiary records that do not match the Capitation Date of first record.</p> <p>A beneficiary's record appears in the Enrollment file of the HCP under which they are eligible for the Current Service Month. (If a beneficiary is eligible under an HCP different than the Current Month Eligibility HCP, Enrollment file includes prior month Eligibility on same file).</p>

Step	System Action	System Response
		<p>If a beneficiary is eligible under a medical and a dental HCP, then beneficiary record appears on the Enrollment file of the Medical HCP, where HCP 1 = Medical and HCP2 = Dental.</p> <p>If a beneficiary's Current Service Month eligibility is Dental only, then beneficiary record appears in the Enrollment File of the Dental HCP, where HCP 1 = Dental and HCP 2 is ignored.</p> <p>If Date of Death, Date Death Posted, or Last Modified date are in an invalid format:</p> <ul style="list-style-type: none"> ▪ Date does not exist (e.g. 13/80/9999) ▪ Contains non-numeric character <p>Then system logs an error indicating that the date is non-null, but is in an invalid format, and therefore will not be saved in the system. The remainder of the beneficiary record will be processed.</p>
2	System processes MMCD Enrollment File	System captures the beneficiary data for each HCP that exists in the System HCP table and persists the data to the CAPMAN database.
3	System logs any errors encountered and produces a log for the System Administrator	System stores MMCD Enrollment Files in CAPMAN archive database.

4.2 Verification

Verification occurs at two levels in the interface: syntactical and application. Files received through the interface will be syntactically verified with the appropriate XSD schema (XML Schema Definition) to ensure the contents have the correct format and are parse-able by the application tier. Application verification will ensure the data contained within each file is acceptable and refers to valid entities within the consuming system. Receipt of a MMCD Enrollment File deemed to be inconsumable or unable to be processed by the 820 Phase 2 system will result in a suspension of the process.

4.3 Recommended File Naming Convention

HDDTRES.MMCD001.HCP###.Dyymm.txt

- "HDDTRES" is ignored by CAPMAN

- "MMCD###" is required in the file name format
- "001" = The total number of files sent for an HCP for the Capitation Month (current month's file processing period)
- "HCP###" is used to denote the 3-digit Health Care Plan code
- "Dyymm" indicates the Current Service Month and year (also called Capitation Month).

5.0 MMCD Enrollment File Data Description

The file format is a fixed-width txt file and contains 580 characters (with no delimiters) per record. The MMCD-MD, MMCD-CD, and MMCD-HD fields can be repeated up to 13 times each. Each numbered iteration represents a month of eligibility. The first iteration is the current service month and each iteration thereafter represents the 12 previous service months.

1. Monthly, ITSD sends one MMCD Enrollment File for each Managed Care plan ('HCP-PLAN') that has one or more beneficiary records where that HCP is the most recently reported HCP on their record.
2. Thirteen service months of eligibility are reflected on the MMCD Enrollment File. The file includes current month plus 12 prior months.
3. For every given set of monthly files, counts of beneficiaries active (measured by System HCP code status equals S1, 01 or 51) in Plans by Aid Codes should match the counts provided on the historical 075/076 reports. The counts should match in the Current Month and each of the prior twelve months – i.e., every column on the 075/076 report. That will ensure that the historical enrollment data provided to the new 820 Phase 2 system matches the information previously provided to MMCD, and that the new system accurately counts Net Changes when eligibility information is re-stated.
4. Include all beneficiary records for individuals with any current or previous activity in any of the HCP segments, even if the individual is no longer eligible in any of the 13 service months. This will ensure that records are received for all individuals with any current or historical activity that took place within the previous twelve months.
5. The file contains only one record for each beneficiary included.
6. A beneficiary (CIN) should NOT appear on more than one MMCD Enrollment File per Capitation Month.
7. Each of the 12 prior months may or may not reflect eligibility for an HCP ('HCP-PLAN') different than the Current Service Month's HCP, for any beneficiary.
8. A beneficiary is considered eligible under an HCP for a given service month only if the HCP status code ('HCP-ST') for that service month equals '01', 'S1' or '51'.
9. If a beneficiary does not have an HCP reported for the Current Service Month, but has an HCP reported during any of the 12 prior service months (in HCP 1), the beneficiary record appears on the Enrollment File of the HCP under which they were most recently reported (regardless of eligibility status as defined in item 8).
10. If a beneficiary is reported under both a medical and a dental HCP for the same service month or for separate service months within the 13 month's

reflected on the MMCD Enrollment File, AND the beneficiary's most recently reported HCP is either a medical HCP or both a medical and a dental HCP, then the beneficiary record appears on the on the medical HCP file, with HCP 1 field(s) populated with the medical HCP, and the HCP 2 field(s) populated with the dental HCP information

11. If a beneficiary is eligible for a dental HCP only, then their record appears on the dental MMDC Enrollment File, wherein the dental HCP information appears in the HCP 1 position.
12. Enrollment Files include both Non-COHS and COHS HCPs.
13. Length of Record = 580 characters
14. Each Record is separated by a Carriage Return (Line Break). There is no carriage return after the last record.
15. All date values must be valid format (a valid calendar date in YYYYMMDD and no alpha characters), else an error is logged.
16. The following denotes the format for each beneficiary record within the file:

MMCD-RECORD	Format	Number of Characters
MMCD-CLIENT-INDEX-NUMBER	PIC X (Alpha-Numeric)	09
MMCD-MEDS-RENEWAL-CCYMM		
MMCD-MEDS-REN-YYYY	PIC X (Alpha-Numeric)	04
MMCD-MEDS-REN-MM	PIC X (Alpha-Numeric)	02
MMCD-NAME		
MMCD-LAST-NAME	PIC X (Alpha-Numeric)	20
MMCD-FIRST-NAME	PIC X (Alpha-Numeric)	15
MMCD-MIDDLE-INITIAL	PIC X (Alpha-Numeric)	01
MMCD-BIRTHDATE-CCYMMDD		
MMCD-BIRTHDATE-YYYY	PIC X (Alpha-Numeric)	04
MMCD-BIRTHDATE-MM	PIC X (Alpha-Numeric)	02
MMCD-BIRTHDATE-DD	PIC X (Alpha-Numeric)	02
MMCD-DEATH-DATE-CCYMMDD		
MMCD-DEATH-DATE-YYYY	PIC X (Alpha-Numeric)	04
MMCD-DEATH-DATE-MM	PIC X (Alpha-Numeric)	02
MMCD-DEATH-DATE-DD	PIC X (Alpha-Numeric)	02
MMCD-DEATH-DATE-POSTED-CCYMMDD		
MMCD-DEATH-DATE-POSTED-YYYY	PIC X (Alpha-Numeric)	04
MMCD-DEATH-DATE-POSTED-MM	PIC X (Alpha-Numeric)	02
MMCD-DEATH-DATE-POSTED-DD	PIC X (Alpha-Numeric)	02
MMCD-ALIEN-INDICATOR	PIC X (Alpha-Numeric)	01
MMCD-ETHNIC-CODE	PIC X (Alpha-Numeric)	01
MMCD-SEX	PIC X (Alpha-Numeric)	01
MMCD-LAST-MODIFIED-DATE-CCYMMDD		
MMCD-LAST-MODIFIED-DATE-YYYY	PIC X (Alpha-Numeric)	04
MMCD-LAST-MODIFIED-DATE-MM	PIC X (Alpha-Numeric)	02

MMCD-LAST-MODIFIED-DATE-DD	PIC X (Alpha-Numeric)	02
MMCD-MONTHLY-AREA	PIC X (Alpha-Numeric)	494
MMCD-MONTHLY-DATA REDEFINES MMCD-MONTHLY-AREA		
MMCD-MONTHLY-TABLE OCCURS 13 TIMES INDEXED BY MMCD-MONTH-DEX		
MMCD-MD-1ST-HCP-PLAN	PIC X (Alpha-Numeric)	03
MMCD-MD-1ST-HCP-ST	PIC X (Alpha-Numeric)	02
MMCD-MD-1ST-CAP-AID	PIC X (Alpha-Numeric)	02
MMCD-MD-2ND-HCP-PLAN	PIC X (Alpha-Numeric)	03
MMCD-MD-2ND-HCP-ST	PIC X (Alpha-Numeric)	02
MMCD-MD-2ND-CAP-AID	PIC X (Alpha-Numeric)	02
MMCD-MD-3RD-HCP-PLAN	PIC X (Alpha-Numeric)	03
MMCD-MD-3RD-HCP-ST	PIC X (Alpha-Numeric)	02
MMCD-MD-3RD-CAP-AID	PIC X (Alpha-Numeric)	02
MMCD-MD-4TH-HCP-PLAN	PIC X (Alpha-Numeric)	03
MMCD-MD-4TH-HCP-ST	PIC X (Alpha-Numeric)	02
MMCD-MD-4TH-CAP-AID	PIC X (Alpha-Numeric)	02
MMCD-MD-5TH-HCP-PLAN	PIC X (Alpha-Numeric)	03
MMCD-MD-5TH-HCP-ST	PIC X (Alpha-Numeric)	02
MMCD-MD-5TH-CAP-AID	PIC X (Alpha-Numeric)	02
MMCD-MD-MEDICARE-STATUS		
MMCD-MD-MEDICARE-PARTA	PIC X (Alpha-Numeric)	01
MMCD-MD-MEDICARE-PARTB	PIC X (Alpha-Numeric)	01
MMCD-MD-MEDICARE-PARTD	PIC X (Alpha-Numeric)	01

6.0 Post-Conditions

System successfully processes MMCD Enrollment Files.

7.0 Questions

Question Number	Step	Question	Resolution
1	1	Will ITSD only send FAME data for Capitation beneficiaries?	Yes.
2	1	Can HCP be blank? If HCP is blank, does that mean the beneficiary is not in a Managed Care Plan?	Yes, Yes.

8.0 Requirements

Requirement Number	Description

Requirement Number	Description
TR 1501 Original	MEDS/FAME Data - The System shall upload monthly eligibility data from the legacy CAP13REC file into the Pervasive Business Integrator software or alternate vendor-proposed data translation solution. The CAP13REC file shall be converted into a format compatible with CAPMAN and uploaded to the application. The upload process to CAPMAN will produce a report upon completion of any error situations encountered and appropriate control totals.
TR 1501 Modified per CR 104	MEDS/FAME Data - The System shall upload monthly eligibility data from the Beneficiary Enrollment file into the vendor-proposed data translation solution. The Beneficiary Enrollment file shall be converted into a format compatible with CAPMAN and uploaded to the application. The upload process to CAPMAN will produce a report upon completion of any error situations encountered and appropriate control totals.
TR 1502 Original	Mapping - The Contractor shall design, test, and implement a mapping in Pervasive Business Integrator software, or an alternate vendor-proposed data translation solution, to convert CAP13Rec files into files compatible with the CAPMAN application.
TR 1502 Modified per CR 105	Mapping - The Contractor shall design, test, and implement a mapping into a vendor-proposed data translation solution, to convert Beneficiary Enrollment files into files compatible with the CAPMAN application.
TR 0927	Update Logging - The System will log all events that result in an update to system data. The log will indicate who made the update, the nature of the update and the date and time of the action.