



Data Extract System (DESY) User Guide

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Chapter 1: Introduction

About This Guide

The purpose of this guide is to help you understand the Data Extract System (DESY) application. If you are a new user, this reference will help you learn the system. Use it to determine what information is in each field, row, and column on the various screens. This reference also can help you navigate through the system if you are lost.

This guide is divided into several sections so you can quickly and easily find the information you need.

Chapter 1: Introduction includes a document overview, background information on DESY, and instructions on finding additional information.

Chapter 2: Getting Started provides information on system requirements, user roles, logging on and off the system, and a description of the DESY home page, menus, and conventions.

Chapter 3: Managing Requests gives procedures for entering new requests; searching for, updating and copying existing requests; using advanced search criteria; and canceling a request.

Appendices A-I detail various system components, including reference guides and generated e-mails. An **Index** is also provided.

What is DESY?

DESY retrieves information from the Centers for Medicare and Medicaid Services' (CMS') major data sources and provides the files to internal and external customers. Through the DESY application, users can specify targeted CMS data sources, search selection criteria, view selections, and file formats. DESY captures the user's request and submits it to the mainframe for processing. DESY notifies the user of the file names via the session summary and e-mail notification.

The DESY web application is closely connected to the Data Agreement & Data Shipping Tracking System (DADSS) Web Application. After DESY access is approved, a Data Use Agreement (DUA) is created through the DADSS system for the data you will need to access. A DUA is established for identifiable, encrypted and limited dataset data. The information is obtained from the data use agreement document that is completed by the requestor, custodian and Federal Representative, and the CMS project officer. Access to at least one DUA is required for a user to access DESY. Active DUA's are required to submit requests, however a DESY expired DUA still allows the user to access DESY and view previously entered requests for that DUA

Finding Help

This User Guide is available on the DESY Website <http://www.cms.hhs.gov/desy/>. You must have Adobe Acrobat Reader installed on your personal computer (PC) to view the online guide. You can

install Adobe Reader for free by going to www.adobe.com and selecting the  icon on the left side of the page. Follow the prompts to download and install the reader on your PC.

Technical Support

This version of DESY does not currently have a Comment Tracker feature. Please contact the DESY hotline at 410-786-0159 or desy_support@cms.hhs.gov for technical and production support with DESY.

Chapter 2: Getting Started

This chapter includes information you need to begin using DESY.

Before You Begin

Before you begin working with DESY, the following tasks must be completed. These steps are covered in DESY training. After these steps have been completed, you are ready to begin working with DESY.

- Contact your administrator to obtain a CMS User ID and password. See the DESY website for more information on gaining a DESY login. Website <http://www.cms.hhs.gov/desy/>
- Contact your administrator to get assigned to the appropriate DUA's (Data Use Agreements). See the DESY website for more information on gaining access to DUA's. Website <http://www.cms.hhs.gov/desy/>
- Ensure that the workstation you will be using is set up with the specifications outlined in System Requirements below.
- To access DESY from a remote location, you must have the AGNS software installed, and you must complete an Application for Access to CMS Computer Services. Send this form to your CAA/ RACF administrator for entry into the CMS system. The administrator will provide you with the necessary authorization to use AGNS to access DESY, including the role of DSY_P_R_USER.

System Requirements

Your workstation must meet the following minimum requirements and have the designated software installed in order to operate DESY successfully:

- Intel® Pentium® processor with 128MB of RAM and up to 90Mb of available hard-disk space
- Microsoft® Windows 2000 with Service Pack 2, Windows XP Professional or Home Edition, or Windows XP Tablet PC Edition
- Microsoft Internet Explorer (IE) 6.0 or higher
- Acrobat Reader 7.0

Logging On

Before logging on for the first time, have the following information at hand:

- Username
- Password

DESY logon information must be requested through the Enterprise User Administration (EUA) system at CMS. DESY access will be addressed in DESY training.

User Roles

Your access to the features of the system is based upon the rights associated with the user role you are given by your administrator. The following user roles are available in DESY:

- **User** has access to the Manage Requests menu and can manage requests attached to his/her Data Use Agreements (DUAs).
- **Approver** has the same rights granted to a user, as well as access to the Manage Approvals menu.
- **Developer** has the same right granted to an approver (but they do not get email notification), as well as access to the Mange Roles and Manage News menus under System administration. They can perform Administrator searches, but cannot cancel another user's request.
- **System Administrator** is granted the highest authority in the system. This role allows for complete update access to the entire DESY system, including the ability to cancel any request.

If you are not authorized to access a certain page, links to those pages will not be active for you, or you will receive a warning that you do not have access to that portion of the application.



Figure 1. Unauthorized Access Screen

To Log onto DESY:

Open your Internet Explorer browser, and type in the URL for DESY: desy.cms.cmsnet. The Login Page will appear.

**TO LOG IN QUICKLY
EACH TIME YOU USE
DESY, SAVE IT TO
YOUR FAVORITES
LIST.**

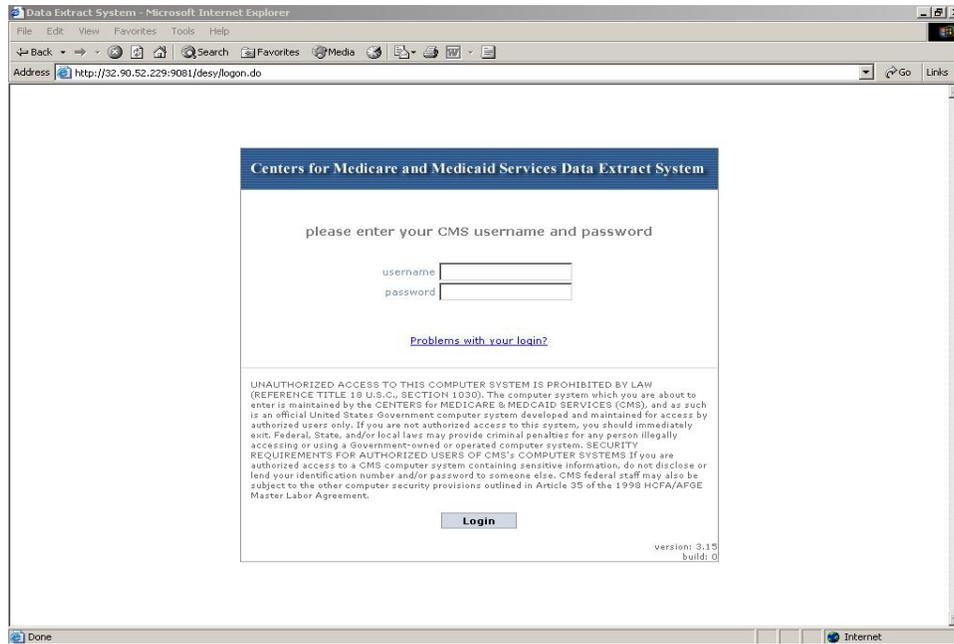


Figure 2. DESY Login Screen

3. Type your CMS username and password in the respective fields.
4. Select **Login**.
The DESY Home Page appears.

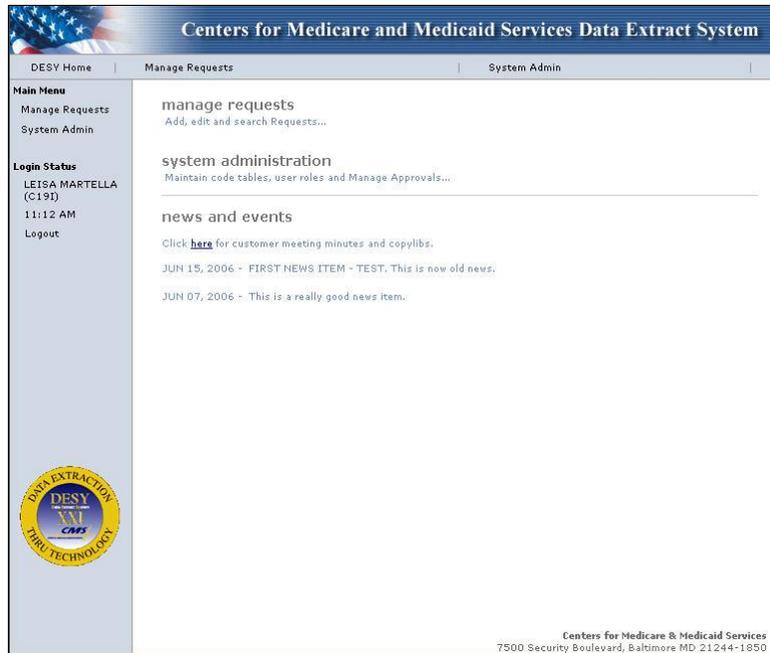


Figure 3. DESY Home Page

The DESY Home Page

The DESY Home Page consists of the Main Menu Bar across the top, a side menu on the far left, and links to the main work areas in the center of the screen. You can access the various work areas by selecting a menu item from any of these areas, provided your role has access to the area.

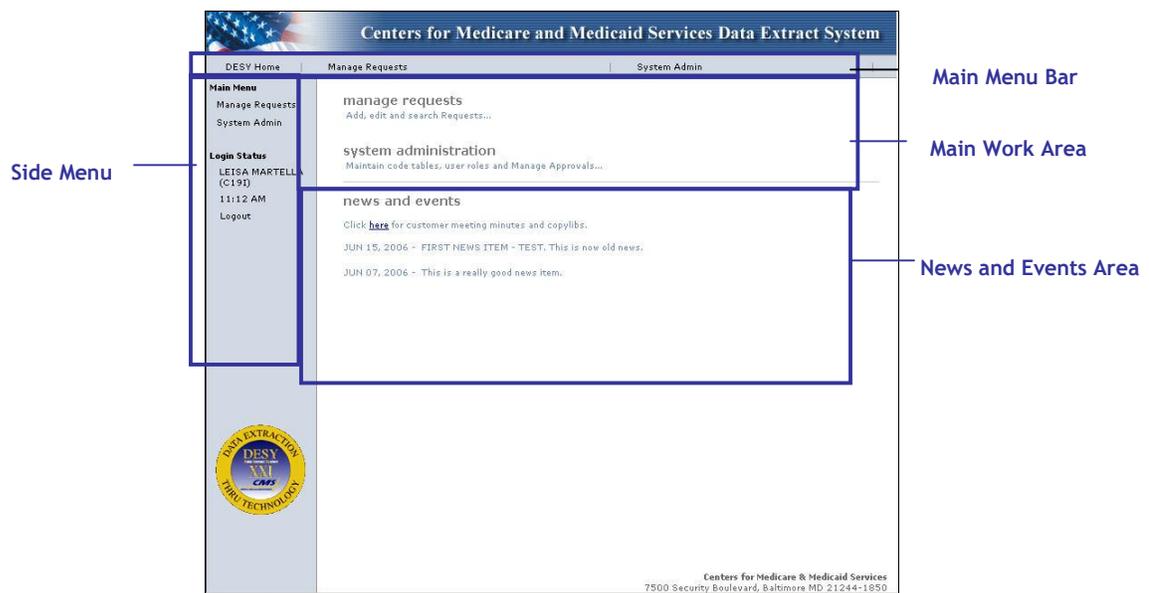


Figure 4. DESY Home Page - layout of work area

The News and Events Area does not have a corresponding left side menu. The most recent news is posted at the top of the list. This section also contains a hyperlink to access customer meeting minutes and copylibs.

Table 1. DESY Home Page Work Areas.

This section	Function
Main Menu Bar	Navigation buttons used to access various parts of the DESY application.
Side Menu	Main Menu or menu commands for the Main Menu item selected, as well as the Login Status and Logout command.
Main Work Area Links	Links to the main parts of the DESY system.

Main Menu

The Main Menu near the top of the page provides one way to navigate between the various components of DESY. The following table describes the Main Menu commands.

Table 2. DESY Main Menu.

Main Menu Item	Action
DESY Home	Returns you to the DESY Home Page from any point within the system.
Manage Requests	Allows you to search/view and create/update Requests.
System Admin	Allows you to manage approvals, as well as update user roles and news and events, provided your role has access to these areas.

When you move your mouse over the desired menu item, the sub-menu for that component is displayed. Select a sub-menu item to open the associated screens in that work area. All commands for that Main Menu item are also displayed in the side menu on the left. Selecting a command from a menu performs an action or displays a submenu or window, as described below. You may also access the desired screen by selecting the appropriate tab once they are displayed in the main work area.

Table 3. DESY Manage Request Menu.

Menu Command	Function
Search Requests	Opens the Search Requests tab so you can enter your search criteria.
Search Results	Opens the Search Results tab for Requests so you can view those meeting your search criteria.
Request Entry	Opens the Request Entry tab so you can enter information regarding the new Request.

The System Admin menus are not available for the **User** role. See the System Admin Guide for further information.

Screen Navigation and Conventions

All buttons, field names, and other items on the screen are shown throughout this document in **bold** type.

There are two ways to move about the screen. Your mouse can be used to make selections. Left click to select menu items and tabs, or select from the dropdown boxes on each screen. The Tab key can be used to move forward from one field to the next and to navigate through menus and submenus. The combination of **Shift+Tab** moves back from one field to another.

Use your keyboard to enter text into the fields as appropriate.

Using the Calendar Icon

Use the **Calendar** icon  to quickly select a date. You can also type the date entry by hand.

1. Select the **Calendar** icon  to open the calendar popup.



Figure 5. Calendar Pop-up

2. Use the inner arrow buttons to move backward (left) and forward (right) through the months. Use the outer arrow buttons to move backward and forward through years.
3. When the calendar with the correct month and year is displayed, select the day of the week within the calendar.

The **calendar** pop-up closes automatically and enters your selected date in the respective field.

Using the Printer Icon

Use the **Printer** icon  to display and print a summary of information associated with a request after you have added or updated it.

1. On the **Summary** page of the **Request Entry** tab, select the printer icon  on the right, just above the scrolling region of the screen.

The **Print** dialog opens.

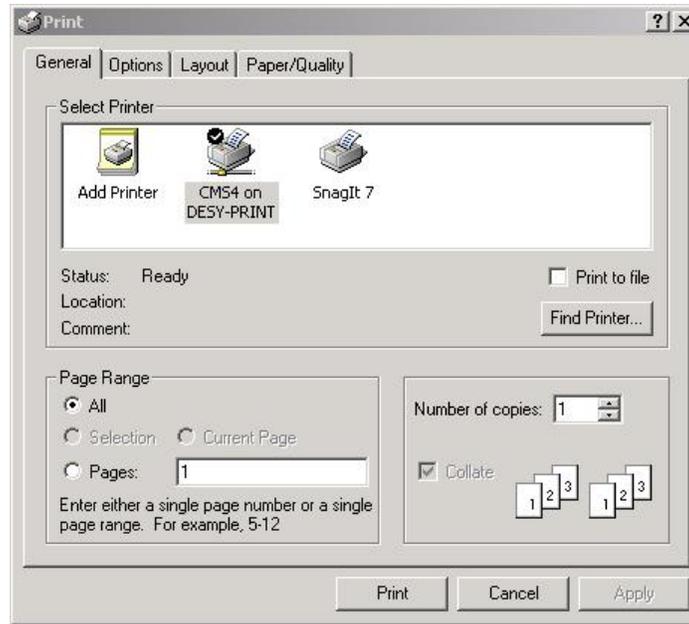


Figure 6. Print Dialog

2. Select an appropriate printer, or check **Print to File**.
3. Make other printing selections, such as **Page Range** and **Number of Copies**, as necessary.
4. Select **Print** to send the pages to the printer or file; **Cancel** to return to the previous screen without printing.

Logging Off

To log off DESY, select **Logout** at the bottom of the left side menu from any screen. You will be returned to the **DESY Login** screen.

Chapter 3: Managing Requests

The **Manage Requests** function of **DESY** allows you to add requests and perform searches for existing requests. Also, based on the current status of the request (i.e., Submitted, Pending), you can edit, copy and view a summary of it. If your user profile does not allow access to a specific function, it will not appear active on the screen (button is gray).

When you roll your mouse over **Manage Requests** on the Main Menu, a sub-menu displays the following options: **Search Requests**, **Search Results**, and **Request Entry**. Select your choice to open the **Manage Requests** portion of the application, with the associated tab displayed. Note that the **Manage Requests** menu items are now also displayed in the side menu on the left, with your selection highlighted. All menu options can also be accessed from within the work area by selecting among the three tabs.

It may be necessary for you, at times, to begin adding a request and switch to another task *within* the application, such as researching an approval, before you have entered all information for the request. Provided you have selected **Save** on the Request entry page, you can navigate to another part of the application, then resume working on the incomplete request. All fields you previously completed will be retained until you either submit the request on the **Summary** screen or select the **Clear** button to clear all fields on all screens of the request. If you work *outside* of the **DESY** application for more than 50 seconds and do not save your work, the application will log off due to inactivity and any work in process will be lost.

Entering a New Request

1. Roll your mouse over **Manage Requests** on the Main Menu to display the sub-menu.
2. Select **Request Entry**.

DESY displays the first page of the **Request Entry** tab in the main work area; the **Properties** page.

Figure 7. Request Entry (Properties)

The following fields are completed with default values on the **Properties** page:

- **Request User** – The name of the user currently logged into the system.
- **Email Address** – The e-mail address of the user currently logged into the system.

The following columns are displayed in the scrolling window on the **Properties** page:

- **Data Use Agreement (DUA) #** - The unique number assigned by CMS for each DUA that has been assigned to the logged-in user to gain access to data.
- **Study Name** – The name given to identify the DUA.
- **Expiration Date** – The date the DUA expires.
- **Requestor** – The name of the person identified as the requestor on the DUA.

3. Select a DUA from the scrolling window.

Only DUAs associated with the current logged on user are displayed. The selected DUA will remain highlighted, and the **Data Source** field drop-down box is populated with the data sources available for that DUA.

4. Select a **Data Source** from the drop-down box. For information on the types of data sources available, see the Appendices at the back of this manual.

Once you select the **Data Source**, the **Recipient** drop-down box is displayed. Additionally, the **Data Type** field is populated with the data types available for the selected **DUA** and **Data Source** combination.

5. Select the desired **Recipient**, if applicable.
6. Select the desired **Data Type**.

Once you select the **Data Type**, the **State** selection box is populated, if required, for the **Data Type** selected.

7. Select the desired **State**. To run your request for all states, select **All States** (if available).
8. Select the desired **Year**, if applicable.

NOTE: To select multiple years, hold down the **Ctrl** key and select each year in turn. To select a range of years, hold down the **Shift** key and select the first and last years in the range; all years in between will also be highlighted.

9. Type a **Request Description** (a description that is meaningful to you for identifying this request) and **Output File Identifier** (up to seven alphanumeric characters that will be incorporated in the file name to allow for easy identification of the output data). Both of these fields are optional.

Centers for Medicare and Medicaid Services Data Extract System

DES Home | Manage Requests | System Admin

Request Entry

1-Properties | 2-Search Criteria | 3-Output | 4-Summary

DUA #: 12364
 Request User: C191 - LEISA MARTELLA
 Data Source: NCH NEARLINE FILE
 DUA Study Name: VIPS GROUP DUA

DESY Expiration Date: 12/31/2006
 Email Address: leisa-m@vips.com
 Data Type: FIHHA CLAIM RECORD

DUA #	Study Name	Exp Date	Requestor
12364	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12365	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12366	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12985	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12986	VIPS GROUP DUA	12/31/2006	SIG PYZIK

Data Source: NCH NEARLINE FILE
 Data Type: FIHHA CLAIM RECORD
 Recipient: NO DATA SHIPPED
 State: Alaska
 Request Description: test file
 Output File Identifier: TST
 Year(s) Updated: 2003 06/2004, 2002 12/2002, 2001 09/2002, 2000 09/2002

Next Save Clear

Centers for Medicare & Medicaid Services
 7500 Security Boulevard, Baltimore MD, 21244-1850

Figure 8. Request Entry (1 – Properties) - completed

10. Select **Save** to commit the information to the database; **Next** to save and move to the **Search Criteria** screen; **Clear** to remove the selections from all fields and begin again.

NOTE: If you change the **Data Source** or any other selections on the page, you will be prompted to confirm your change. Selections in subsequent fields will also need to be remade, as the information with which they are populated may change.

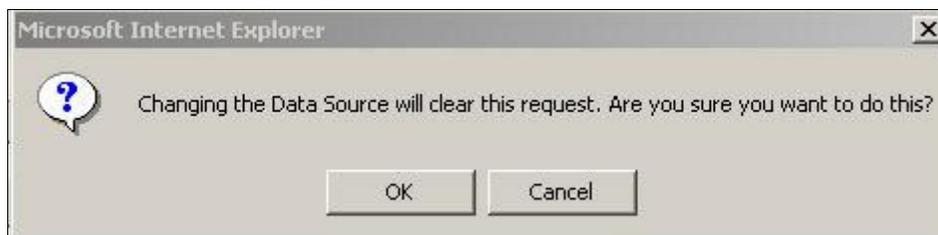


Figure 9. Changing Data Source Clear Request dialog box.

11. Depending on the selections you made, you will either continue to the **Search Criteria** screen, or receive a notice that no additional search criteria are accepted for your selections. If no additional search criteria are allowed, select **OK** to dismiss the notice and continue with Step 20 on page 21.

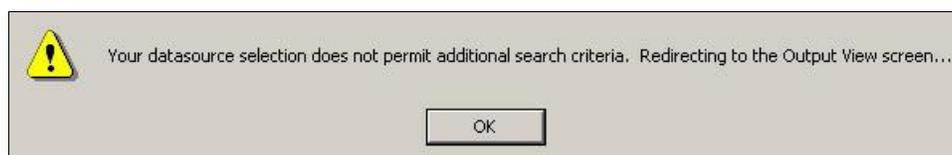


Figure 10. No Additional Search Criteria notice

Centers for Medicare and Medicaid Services Data Extract System

DESYS Home | Manage Requests | System Admin

Management Requests

Search Requests | Search Results | **Request Entry**

request-entry -

1-Properties 2-**Search Criteria** 3-Output 4-Summary

DUA #: 12364 DESYS Expiration Date: 12/31/2006
 Request User: C191 - LEISA MARTELLA Email Address: leisa-m@vips.com
 Data Source: NCH NEARLINE FILE Data Type: FI HHA CLAIM RECORD
 DUA Study Name: VIPS GROUP DUA

Field: Beneficiary Mailing Contact ZIP Code Operator: =

Search Criteria Set #: 1

Value:

#	Field	Operator	Value	
1	Beneficiary Birth Date	<	20060711	Remove
1	Beneficiary Mailing Contact ZIP Code	=	21211*	Remove

Next Save Clear

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

Figure 11. Request Entry (2-Search Criteria) screen.

12. On the **Search Criteria** screen, select the desired **Field** from the drop-down box.

13. Select an **Operator**.

Selections in the **Operator** drop down will change depending on the **Field** selected. Valid operators are <, >, =, Range, Not =, and User Input File. For more information on creating searches, see *Using Advanced Search Criteria* on page 21.

14. Enter a **Value** for the operator.

The selections made for **Field** and **Operator** determine the format of the field. The **Value** field will be identified as a date, number, range, list selection, or file name, start position, and header position. The formats are as follows:

Alphanumeric value

Value:

Single Date

Date:

 / /

Date Range

Date From: / / Date To: / /

User Input File

The screenshot shows a light blue header bar with the text 'User Input File'. Below the header, there are three input fields arranged horizontally. The first field is labeled 'File Name:' and is a wide text box. The second field is labeled 'Start Position:' and is a smaller text box. The third field is labeled 'Header Start Position:' and is also a smaller text box. All three fields are currently empty.

Figure 12. Request Entry (2-Search Criteria) field formats.

The **File Name** field is used for the mainframe data set name of the user input file. The User Interface verifies the existence of the file on the mainframe.

The **Start Position** is the beginning location of the data in the finder file.

The **Header Start Position** is the beginning location of a 30-byte user defined area, such as an internal control number. It is copied to the output records to help the recipient of the output identify the data. The header start position is only available when adding a user input file for Claim Locator Number Group (HICN).

The lookup value may be selected directly from the drop down.

Lookup Value

The screenshot shows a light blue header bar with the text 'Lookup Value:'. Below the header, there is a dropdown menu with a blue background and white text. The dropdown menu is currently open, showing three options: '5 - Critical Access Hospital (eff. 10/99) formerly Rural primary care hospi', '6-8 - Reserved for national use', and '9 - Other'. To the right of the dropdown menu is a button labeled 'Expand'.

Figure 13. Request Entry (2-Search Criteria) Lookup Value field.

In some circumstances the description for the value is too large for the drop down. To read the full descriptions, click the **Expand** button. This will open a new window that will display the entire value description and allow you to select the value you want. It will automatically close the window and select the item in the drop down.

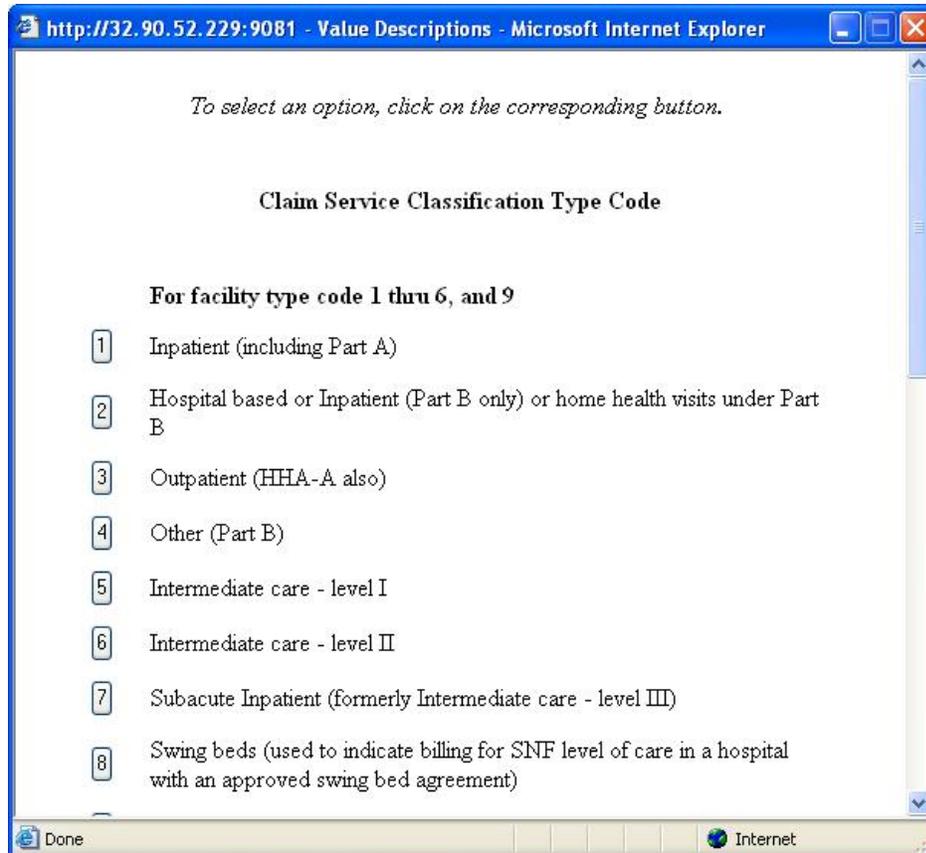


Figure 14. Request Entry (2-Search Criteria) Lookup Value field expanded.

15. Select **Add**.

The search expression is displayed in the box below the field selection area.

16. Repeat Steps 11-14 for each search criterion you wish to add. You may add up to 20 different elements with up to 10 values each.

Notes:

- If you use a **user input file**, it will be the only value that you can use for that particular **data element**.
- If you select **HICAN finder file** for search criterion and **user input file** as the **operator**, then you cannot use any other input files in the first or second search criteria set.
- Except when there is a HICAN, you can use 1 **user input file** per **search criteria set**, for a maximum of 2.

17. By default, the **Search Criteria Set #** is set to 1 upon first display of this screen. To add a second **Search Criteria Set**, change the number in the associated drop-down box to 2. Choose another **Field** and **Operator**, type in a **Value**, and select **Add**.

Both search criteria sets will be displayed, separated by “OR”. When two search expressions are used, the search engine processes them as an OR criteria.

18. To remove a search expression, select the **Remove** link next to the expression you wish to delete.
19. When you are satisfied with your search criteria and sets, select **Save** to commit the information to the database; **Next** to save and move to the **3-Output** screen; **Clear** to remove the selections from all fields and begin again.

NOTE: If you entered a ZIP code search criterion with a **User Input File**, you will receive an alert regarding using wildcard searches for ZIP+4. If you are using a **User Input File** and only have 5 characters, you must put an asterisk (*) in the 6th position for each zip code in your file.



Figure 15. Request Entry (3-Output) screen.

20. On the **Output** screen, select the desired **Output Type** from the drop-down box.

Available output types include:

- Whole Record
- Finder File View
- Whole Record View
- Predefined View
- Select from a list of available fields
- Previously saved custom views

NOTE: The following **Data Types** produce finder file output under the **Enrollment Data Source**:

- Cross Reference
- Railroad Retirement Board (RRB) conversion to Health Insurance Claim Account Number (HICAN, also referred to as Claim Locator Number Group)
- HICAN conversion to RRB
- Social Security Number (SSN) conversion to HICAN
- For SSN conversion to HICAN search criteria, select one of the following elements (each element represents a different user input file format):
 - 18-Byte SSN (SSN + Birth Date + Sex Code)
 - 9-Byte SSN (SSN only)

NOTE: Selections available, as well as the fields displayed on this screen, depend on the selections on previous pages. This example, Select Available fields output type, displays many more fields and options on the screen than other output type selections. This is just one example of what displays on the screen for output type.

21. Select to check **Comma Delimited** and/or **Compressed Format**, if applicable (available only for certain output types.)
22. Select **Include Dropped Records** or **Do Not Include Dropped Records**, if applicable. (This field will not be displayed if you entered a HICAN **User Input file** for years prior to 1998.)
Selecting **Include Dropped Records** will provide you with a separate output file for the dropped records.
23. For the **Select Available Fields** view option, select **Fields** to be included in the output.
 - a. Hold down the Ctrl key to make multiple selections when selecting entries in **Available Fields** and **Selected Fields** boxes.
 - b. Select **Add** to move the selected **Available Fields** to the **Selected Fields** box.
 - c. Select **Remove** to move the selected **Selected Fields** to the **Available Fields** box.
 - d. Select **Save View** to retain the layout you have created. When saving a custom view, a **Custom View Name** is required.

For more information on working with custom views, see *Editing Custom Views* on page 26.

Figure 16. Request Entry (Output) - completed

24. Select **Save** to commit the information to the database; **Next** to save and move to the **Summary** screen; **Clear** to remove the selections from all fields and begin again.

Centers for Medicare and Medicaid Services Data Extract System

DES Home | Manage Requests | System Admin

Manage Requests
Search Requests
Search Results
Request Entry

request summary
1-Properties 2-Search Criteria 3-Output 4-Summary

Login Status
LEISA MARTELLA (C19I)
3:56 PM
Logout

Request Properties:

Requests:	0 - test file	DUA Expiration Date:	12/31/2006
DUA #:	12364		
DUA Study Name:	VIPS GROUP DUA		
DES Expiration Date:	12/31/2006		
Request User:	C19I - LEISA MARTELLA	Email Address:	leisa-m@vips.com
Data Source:	NCH NEARLINE FILE	Data Type:	FIHHA CLAIM RECORD
Data Description:	NCH		
State:	Alaska		
Recipient:	6448 - NO DATA SHIPPED		
Return to CMS:	Y		

Search Criteria:

1	Beneficiary Birth Date	<	20060711
1	Beneficiary Mailing Contact ZIP Code	=	21211*

Output View:

Output Desc: alisa1
File Id: TST
Dropped Records: Excluded **Comma Delimited:** Yes
Format: **Media Type:** 3490 UNCOMPRESSED

Selected Fields:

Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code

Request Status Information:

Request Submitted: 0 **Time:**
Request Status:
Years: 2002

Submit Save Clear

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

Figure 17. Request Entry (Summary) screen

25. On the **Summary** screen, all information entered on the previous three screens is displayed as read only. To make changes, select the link for the appropriate page, edit your entries, and select the **Save** button to save your changes. Select the **summary** hyperlink to view your changes.

Note: Depending on what fields are changed, you may be required to reenter data for subsequent fields. (i.e. If you change a DUA in the **properties**, the entire request will need to be reentered.)

26. Select the **Printer** icon  to print a printout of your summary. See *Using the Printer Icon* on page 13 for more information.

27. Select **Submit** to prepare the request for processing.

DES validates all pages of the request information and commits the entries to the database.

Using Advanced Search Criteria

DESY uses both wildcard and Boolean logic when performing searches. Be aware of the following rules governing each type of search when creating search expressions.

Wildcard(*) Searches

To search for a specific value, type the exact value in the **Value** field.

To search for a group of values, type the first few numbers of the value followed by an asterisk (*). For example, to search for Claim Diagnosis Codes related to nontoxic nodular goiters, use a value of 241*.

For a larger selection, such as all Claim Diagnosis Codes related to disorders of the thyroid gland, use fewer beginning digits of the associated value (24*).

Wildcards can be used in **user input file** values as well as in values entered directly. Only one user input file may be selected for each criteria set. If a user input file is selected, no additional values may be selected for that element.

Only one wildcard (*) is permitted per value. Any characters after the first wild card are ignored. For example, the same records would be selected for Claim Diagnosis Code = 24*1 as would be for Claim Diagnosis Code = 24*.

Wildcards are not permitted in HICAN values. Only one search expression is allowed when searching on the HICAN field.

If you type a five-digit ZIP code as your search criterion, DESY adds an asterisk at the end so that nine-digit ZIP codes are included in your search automatically. For example, if you select ZIP Code as the Field, = as the Operator, and type 21244 as the value, DESY changes the value to 21244*. Your output will contain records with ZIP code 21244, as well as records with ZIP codes 21244-0001 through 21244-9999.

Note: DESY **does not** append asterisks to zip codes on a **User Input File**. If a User Input File is used for zip codes, then DESY will look for exact matches only unless you manually add your own asterisks to the end of each zip code less than 9 digits.

Only one value is permitted when using the Not Equal operator.

Boolean ("OR") Logic

In DESY, Boolean logic relates to using OR to connect two sets of searchable data elements. Boolean logic allows you to specify a second set of search criteria to be run so that a match on the data is returned if either set of search criteria is met.

Editing Custom Views

You can edit any custom view you have previously created. Views you create are available only to you when signed in with your User ID. Only the custom views associated with the selected **DUA**, **Data Source**, and **Data Type** will be available as an output selection.

1. Go to request entry and select a **DUA**, **Data Source** and **Data Type** combination for which you have a **custom view**. Select the link to open the **Output** screen.
2. Select the name of a custom view from the **Output Type** drop-down box.

The fields included in the view are displayed in the **Selected Fields** window near the bottom of the screen.

3. Select **Edit View**.

The **Available Fields** are displayed.

4. Select a field name(s) in **Available Fields** and select **Add** to move it to **Selected Fields**.
5. Select a field name(s) in **Selected Fields** and select **Remove** to return it to the **Available Fields** list.
6. If you want to rename this view, enter a new name in the **Custom View Name** field.
7. When you are satisfied with the view you have created, select **Save View**.

The **Selected Fields** will be included in the output.

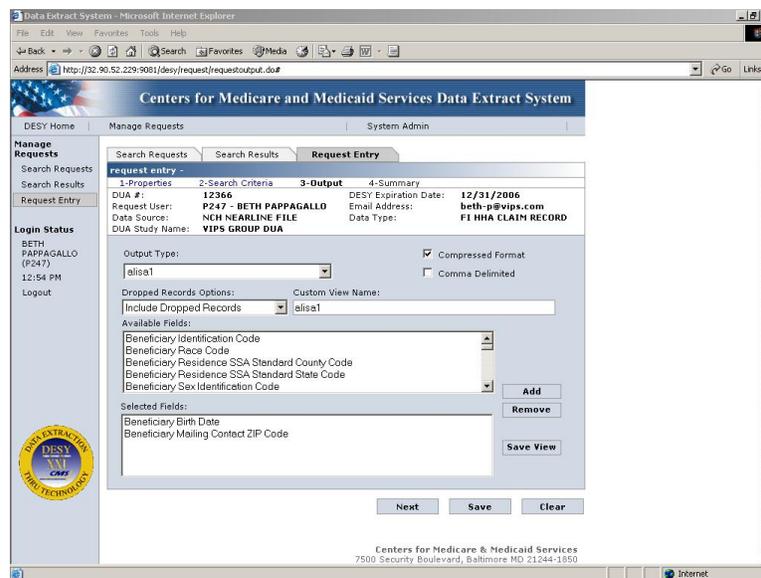


Figure 18. Edit Custom View

Searching for a Request

A user can only search for and retrieve those requests that they have entered

1. Roll your mouse over **Manage Requests** on the **Main Menu** to display the sub-menu.
2. Select **Search Requests**.

DESY opens the **Search Requests** tab in the main work area.

Figure 19. Search Requests

3. Complete at least one of the following fields:
 - **Request #** – the numerical value assigned by DESY to a request when it is submitted. The number must match exactly to meet the criteria for a search.
 - **DUA Study/Project Name** – name assigned to the DUA in Data Agreement & Data Shipping Tracking System (DADSS). Use a minimum of two characters to execute a wildcard search.
 - **User ID** – ID of the person that submitted the request.
 - **User Name** – name of the person that submitted the request. Use a minimum of two characters to execute a wildcard search.
 - **Submitted (From/To)** – date range describing when a request was submitted. Search is inclusive of the date entered in the range. Use the calendar icon or enter the date in the field(s) to select the dates.
 - **DUA #** – The numerical value assigned to a DUA. The number must match exactly to meet search criteria.
 - **Request Action** – specify whether to include requests that are Submitted, Saved or Submitted and Saved in the search.

4. Select **Search** to perform the search using the criteria you provide; **Clear** to remove entries from all fields and begin again.
5. If you performed a search, the **Search Results** tab displays, showing the **Search Criteria** used and a scrolling area listing the following columns:
 - **Req #** - the numerical value assigned by DESY to a request when it is submitted.
 - **DUA #** - The numerical value assigned to a DUA.
 - **User ID** – ID of the person that submitted the request.
 - **Submitted** – date request was submitted.
NOTE: This field will be blank if the request was saved but has not yet been submitted.
 - **Status** – status of request at the time the search was made. Possible statuses are **Saved**, **Cancel Requested**, **Pending Approval**, **Submitted**, and **Super**.
 - **Desc Cd** – the Data Description Code assigned to the particular **Data Type**.
 - **Request Description** – description of the request entered by the user when the request was saved or submitted.
6. Select any of the column titles to sort the search results in ascending order on that column. Select the column again to sort in descending order. Scroll to locate the desired request.
7. Select the radio button in the checkmark column to select a request.
Additional information for that request (**Recipient, Requestor, Year**) is displayed.



Figure 20. Search Results with Request Details Displayed

8. The buttons at the bottom of the screen activate depending on your user role and the functions available for the selected request.

See *Editing a Stored Request* on page 29, *Copying an Existing Request* on page 29, *Submitting a Saved Request* on page 29, or *Canceling a Request* on page 30 for more information on working with requests in search results.

Editing a Stored Request

(Only available on previously saved requests)

TO EASILY LOCATE THE REQUEST YOU ARE LOOKING FOR, SELECT ANY OF THE COLUMN HEADERS ON THE SEARCH RESULTS TAB TO CHANGE THE SORT ORDER OF THE LIST.

1. From the **Search Results** tab, select the radio button in the checkmark column for the request you would like to edit.

If you created and saved the selected request, the **Edit** button will activate. Requests cannot be edited if they have already been submitted.

2. Select **Edit**.

The **Request Entry** screen is displayed at the **1-Properties** tab, similar to adding a new request.

3. Make changes to the fields as desired, selecting any of the four screen links under the tabs to move from screen to screen, or using the **Next** button.
4. Select **Save** to save changes or **Cancel** to return to the **Search Results** screen without saving.
5. When you have finished making changes, select the **4-Summary** link to display the updated request.

Note: Depending on what fields are changed, you may be required to reenter data for subsequent fields. If you change a DUA in the properties, the entire request will need to be reentered.

6. Select the **Printer** icon to print a copy for your records.

Copying an Existing Request

TO EASILY LOCATE THE REQUEST YOU ARE LOOKING FOR, SELECT ANY OF THE COLUMN HEADERS ON THE SEARCH RESULTS TAB TO CHANGE THE SORT ORDER OF THE LIST.

1. From the **Search Results** tab, select the radio button in the checkmark column for the request you would like to copy.

If you have user access to copy the selected request, the **Copy** button will activate.

2. Select **Copy**.

The **Request Entry** screen is displayed at the **1-Properties** tab, similar to adding a new request.

3. Make changes to the fields as desired, selecting any of the four screen links under the tabs to move from screen to screen, or using the **Next** button.
4. Select **Save** to save changes or **Cancel** to return to the **Search Results** screen without saving.

Note: Depending on what fields are changed, you may be required to reenter data for subsequent fields. If you change a DUA in the properties, the entire request will need to be reentered.

5. When you have finished making changes, select the **4-Summary** link to display the new request.

If you save or submit the request, it is assigned a new **Request #**.

6. Select the **Printer** icon to print a copy for your records.

Submitting a Saved Request

TO EASILY LOCATE THE REQUEST YOU ARE LOOKING FOR, SELECT ANY OF THE COLUMN HEADERS ON THE **SEARCH RESULTS** TAB TO CHANGE THE SORT ORDER OF THE LIST.

1. From the **Search Results** tab, select the radio button in the checkmark column for the request you would like to submit.

Requests available for submission will be marked **SAVED** in the **Status** column. If you have user access to submit the selected request, the **Edit** button will activate.

2. Select **Edit**.

The **Request Entry** screen is displayed at the **1-Properties** tab, similar to adding a new request.

3. Make changes to the fields as desired, selecting any of the four screen links under the tabs to move from screen to screen, or using the **Next** button.
4. Select **Save** to save changes or **Cancel** to return to the **Search Results** screen without saving.

Note: Depending on what fields are changed, you may be required to reenter data for subsequent fields. If you change a DUA in the properties, the entire request will need to be reentered.

5. When you have finished making changes, select the **4-Summary** link to display the updated request.

6. Select **Submit**.

The request is submitted.

7. Select the **Printer** icon to print a copy for your records, if desired.

Canceling a Request

TO EASILY LOCATE THE REQUEST YOU ARE LOOKING FOR, SELECT ANY OF THE COLUMN HEADERS ON THE **SEARCH RESULTS** TAB TO CHANGE THE SORT ORDER OF THE LIST.

1. From the **Search Requests** tab, select the radio button in the checkmark column for the request you would like to cancel.

Only requests marked **Pending Approval** or **Submitted** in the **Status** column can be canceled. You can cancel a request only if you created it.

2. Select **Cancel**.

The Status will change to **Cancel Requested**. The request is still retained in the system and can be copied or a summary can be printed.

Appendix A: Acronym List

Table 4. Acronyms Used in DESY.

Acronym	Full Name
APC	Ambulatory Payment Classification
BEF/PUF	Beneficiary Encrypted Files/Public Use Files
BESS	Part B Extract & Summary System
BETOS	Berenson-Eggers Type of Service
BIC	Beneficiary Identification Code
CLIA	Clinical Laboratory Improvement Act
CMS	Centers for Medicare and Medicaid Services
CPO	Care Plan Oversight
CWF	Common Working File
DADSS	Data Agreement & Data Shipping Tracking System
DENOM	Denominator Files
DESY	Data Extract System
DME	Durable Medical Equipment
DMERC	Durable Medical Equipment Regional Carrier
DRG	Diagnostic Related Group
DUA	Data Use Agreement
ESRD	End-Stage Renal Disease
EUA	Enterprise User Administration
FI	Fiscal Intermediary
FSP	Federal Specific Portion
HCFA	Health Care Financing Administration
HCPCS	Healthcare Common Procedure Coding System
HHA	Home Health Agency
HICAN	Health Insurance Claim Account Number
HIPPS	Health Insurance Prospective Payment System
IDE	Investigational Device Exemptions
IME	Indirect Medical Education
LRD	Lifetime Reserve Days
LUPA	Low Utilization Payment Adjustment
MCO	Managed Care Organization
MEDPAR	Medicare Provider Analysis & Review
NCH	National Claims History

Acronym	Full Name
NMUD	National Medicare Utilization Database
NPI	National Provider Identifier
OTAF	Obligation to Accept As Full
PAD	Privacy Accountability Database
PIN	Personal Identification Number
PPS	Prospective Payment System
PRO	Peer Review Organization
RACF	Resource Access Control Facility
RRB	Railroad Retirement Board
SAF	Standard Analytical File
SNF	Skilled Nursing Facility
SPCL PGM	Special Program
SSA	Social Security Administration
SSN	Social Security Number
UPIN	Unique Physician Identification Number or Universal Provider Identification Number
URL	Uniform Resource Locator
VOLSER	Volume Serial Number

Appendix B: Encryption Rules

Encryption Methods

Age Range: The beneficiary birth date converts first to the beneficiary's entitled eligible date (the first of the month or the first of the prior month if born on the first day of a month). The age is then calculated against the CLM-FROM-DT field of the claim record, then grouped into an age category as follows:

00000000 = Unknown 00000001 = < 65
 00000002 = 65 through 69 00000003 = 70 through 74
 00000004 = 75 through 79 00000005 = 80 through 84
 00000006 = > 84

Blank: All data is blanked out.

Encrypt: The value is passed to the encryption routine. All numerical bytes are encrypted to another numerical value in the byte-by-byte encryption process. Alphabetical bytes are not encrypted and remain the same value.

Year/Qtr: All designated dates are converted to the calendar year and quarter that encompass that date using YYYYQ000 format.

Zero: All data is converted to zeroes.

Claims Encryption Rules

Table 5. DESY Claims Encryption Rules.

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Beneficiary Birth Date	All	Date	Age Range
Beneficiary Identification Code (BIC)	All	Character	
Beneficiary Mailing Contact Zip Code	All	Character	Blank
Carrier Claim Control Number	Carrier DMERC	Character	Blank
Carrier Claim Receipt Date	Carrier DMERC	Date	Zero
Carrier Claim Referring Physician National Provider Identifier (NPI) Number	Carrier	Character	Encrypt
Carrier Claim Referring Physician Unique Physician Identification Number (UPIN) Number	Carrier	Character	Encrypt
Carrier Claim Referring Personal Identification Number (PIN - Profiling) Number	Carrier	Character	Blank
Carrier Claim Scheduled Payment Date	Carrier DMERC	Date	Zero
Carrier Line Performing UPIN Number	Carrier	Character	Encrypt

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Carrier Line Performing NPI Number	Carrier	Character	Encrypt
Carrier Line Performing PIN (Profiling) Number	Carrier	Character	Blank
Carrier Line Performing Provider Zip Code	Carrier	Character	Blank
Claim Admission Date	Inpatient	Date	Year/Qtr
Claim Attending Physician Given Name	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Attending Physician Middle Initial Name	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Attending Physician NPI Number	HHA Hospice Inpatient Outpatient	Character	Encrypt
Claim Attending Physician Surname	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Attending Physician UPIN Number	HHA Hospice Inpatient Outpatient	Character	Encrypt
Claim Demonstration Identification Number	All	Character	Blank
Claim From Date	All	Date	Zero
Claim Home Health Agency (HHA) Care Start Date	HHA	Date	Year/Qtr
Claim Hospice Start Date	Hospice	Date	Year/Qtr
Claim Locator Number Group (HICAN) Beneficiary Claim Account Number National Claims History (NCH) Category Equatable BIC Code	All	Character	Encrypt
Claim Medical Record Number	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Operating Physician Given Name	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Operating Physician Middle Initial Name	HHA Hospice Inpatient Outpatient	Character	Blank

Encryption Rules

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Claim Operating Physician NPI Number	HHA Hospice Inpatient Outpatient	Character	Encrypt
Claim Operating Physician Surname	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Operating Physician UPIN Number	HHA Hospice Inpatient Outpatient	Character	Encrypt
Claim Other Physician Given Name	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Other Physician Middle Initial Name	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Other Physician NPI Number	HHA Hospice Inpatient Outpatient	Character	Encrypt
Claim Other Physician Surname	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Other Physician UPIN Number	HHA Hospice Inpatient Outpatient	Character	Encrypt
Claim Patient 1st Initial Given Name	All	Character	Blank
Claim Patient 6 Position Surname	All	Character	Blank
Claim Patient First Initial Middle Name	All	Character	Blank
Claim Peer Review Organization (PRO) Control Number	HHA Hospice Inpatient Outpatient	Character	Blank
Claim Procedure Performed Date	Hospice Inpatient Outpatient	Date	Year/Qtr
Claim Through Date	All	Date	Year/Qtr
Common Working File (CWF) Claim Accretion Date	All	Date	Year/Qtr
CWF Claim Accretion Number	All	Number	Zero
CWF Claim Assigned Number	All	Character	Blank

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Durable Medical Equipment Regional Center (DMERC) Claim Ordering Physician NPI Number	DMERC	Character	Encrypt
DMERC Claim Ordering Physician UPIN Number	DMERC	Character	Encrypt
DMERC Line Supplier NPI Number	DMERC	Character	Encrypt
Fiscal Intermediary (FI) Claim Process Date	HHA Hospice Inpatient Outpatient	Date	Zero
FI Claim Receipt Date	HHA Hospice Inpatient Outpatient	Date	Zero
FI Claim Scheduled Payment Date	HHA Hospice Inpatient Outpatient	Date	Zero
FI Document Claim Control Number	HHA Hospice Inpatient Outpatient	Character	Blank
FI Original Claim Control Number	HHA Hospice Inpatient Outpatient	Character	Blank
Line First Expense Date	Carrier DMERC	Date	Zero
Line Last Expense Date	Carrier DMERC	Date	Year/Qtr
Line Provider Tax Number	Carrier DMERC	Character	Blank
NCH Beneficiary Discharge Date	Inpatient HHA Hospice	Date	Year/Qtr
NCH Inpatient PRO Approval Grace Day Count	Inpatient	Number	Zero
NCH Inpatient PRO Approval Service From Date	Inpatient	Date	Zero
NCH Inpatient PRO Approval Service Thru Date	Inpatient	Date	Zero
NCH Qualified Stay From Date	HHA	Date	Zero
NCH Qualified Stay Through Date	HHA	Date	Year/Qtr
NCH Weekly Claim Processing Date	All	Date	Zero

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Patient Control Number	HHA Hospice Inpatient Outpatient	Character	Blank
Revenue Center Date	HHA Hospice Inpatient Outpatient	Date	Year/Qtr

MEDPAR Encryption Rules

Table 6. MEDPAR Encryption Rules.

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Beneficiary Claim Account Number	MEDPAR	Character	Encrypt
Original Claim Locator Group	MEDPAR	Character	Encrypt
Admission Date	MEDPAR	Date	None
Beneficiary Death Date	MEDPAR	Date	Blank
Discharge Date	MEDPAR	Date	Zero
Skilled Nursing Facility (SNF) Qualify through Date	MEDPAR	Date	Encrypt
Surgical Procedure Perform Date	MEDPAR	Date	Blank
SNF Qualify from Date	MEDPAR	Date	Zero
Beneficiary Mailing Contact Zip Code	MEDPAR	Character	Spaces
Beneficiary Age Count	MEDPAR	Number	Age Range

DENOM Encryption Rules

Table 7. DENOM Encryption Rules.

Data Element Name	Claim Type(s)	Field Type	Encryption Method
Claim Control Number (HIC)	DENOM	Character	Encrypt
Beneficiary Zip Code	DENOM	Character	Spaces
Beneficiary Date of Birth	DENOM	Date	Zero
Beneficiary Date of Death	DENOM	Date	Zero

Appendix C: Viewable Fields by Claim Type

Carrier

Table 8. Carrier – Viewable Fields.

Carrier
Beneficiary Birth Date
Beneficiary Identification Code
Beneficiary Mailing Contact ZIP Code
Beneficiary Race Code
Beneficiary Residence Social Security Administration (SSA) Standard County Code
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Care Plan Oversight (CPO) Provider Number
Carrier Claim Beneficiary Paid Amount
Carrier Claim Cash Deductible Applied Amount
Carrier Claim Control Number
Carrier Claim Demonstration ID Count
Carrier Claim Diagnosis Code Count
Carrier Claim Entry Code
Carrier Claim Healthcare Common Procedure Coding System (HCPCS) Year Code
Carrier Claim Health PlanID Count
Carrier Claim Line Count
Carrier Claim Payment Denial Code
Carrier Claim Primary Payer Paid Amount
Carrier Claim Provider Assignment Indicator Switch
Carrier Claim Receipt Date
Carrier Claim Referring PIN Number
Carrier Claim Referring UPIN Number
Carrier Claim Scheduled Payment Date
Carrier Line Anesthesia Base Unit Count
Carrier Line Blood Deductible Pints Quantity
Carrier Line CLIA Alert Indicator Code
Carrier Line Clinical Lab Charge Amount
Carrier Line Clinical Lab Number

Carrier
Carrier Line Durable Medical Equipment (DME) Coverage Period Start Date
Carrier Line DME Medical Necessity Month Count
Carrier Line Miles/Time/Units/Services Count
Carrier Line Miles/Time/Units/Services Indicator Code
Carrier Line Performing Group NPI Number
Carrier Line Performing PIN Number
Carrier Line Performing Provider ZIP Code
Carrier Line Performing UPIN Number
Carrier Line Pricing Locality Code
Carrier Line Provider Specialty Code
Carrier Line Provider Type Code
Carrier Line Psychiatric, Occupational Therapy, Physical Therapy Limit Amount
Carrier Line Reduced Payment Physician Assistant Code
Carrier Line Type Service Code
Carrier NCH Edit Code Count
Carrier NCH Patch Code Count
Carrier Number
Claim Blood Deductible Pints Quantity
Claim Blood Pints Furnished Quantity
Claim Demonstration Identification Number
Claim Demonstration Information Text
Claim Diagnosis Code
Claim Disposition Code
Claim Excepted/Nonexcepted Medical Treatment Code
Claim From Date
Claim Health PlanID Code
Claim Health PlanID Number
Claim Locator Number Group (HICAN)
Claim Payment Amount
Claim Principal Diagnosis Code
Claim Through Date
CPO Organization NPI Number
CWF Beneficiary Medicare Status Code
CWF Claim Accretion Date
CWF Claim Accretion Number

Carrier
Line CWF Transmission Batch Number
Line End of Record Code
Line 10% Penalty Reduction Amount
Line Additional Claim Documentation Indicator Code
Line Allowed Charge Amount
Line Beneficiary Part B Deductible Amount
Line Beneficiary Payment Amount
Line Beneficiary Primary Payer Code
Line Beneficiary Primary Payer Paid Amount
Line Coinsurance Amount
Line Diagnosis Code
Line DME Purchase Price Amount
Line First Expense Date
Line Health Care Financing Administration (HCFA) Provider Specialty Code
Line HCFA Type Service Code
Line HCPCS Code
Line HCPCS Initial Modifier Code
Line HCPCS Second Modifier Code
Line Investigational Device Exemptions (IDE) Number
Line Interest Amount
Line Last Expense Date
Line National Drug Code
Line NCH BETOS Code
Line NCH Payment Amount
Line NCH Provider State Code
Line Payment 80%/100% Code
Line Payment Indicator Code
Line Place Of Service Code
Line Primary Payer Allowed Charge Amount
Line Processing Indicator Code
Line Provider Participating Indicator Code
Line Provider Payment Amount
Line Provider Tax Number
Line Service Count
Line Service Deductible Indicator Switch

Carrier
Line Submitted Charge Amount
NCH Carrier Claim Allowed Charge Amount
NCH Carrier Claim Submitted Charge Amount
NCH Category Equitable Beneficiary Identification Code
NCH Claim Beneficiary Payment Amount
NCH Claim Provider Payment Amount
NCH Claim Type Code
NCH Daily Process Date
NCH Edit Code
NCH Near Line Record Identification Code
NCH Near-Line Record Version Code
NCH Patch Applied Date
NCH Patch Code
NCH Segment Link Number
NCH Weekly Claim Processing Date

DMERC

Table 9. DMERC – Viewable Fields.

DMERC
Beneficiary Birth Date
Beneficiary Identification Code
Beneficiary Mailing Contact ZIP Code
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Carrier Claim Beneficiary Paid Amount
Carrier Claim Cash Deductible Applied Amount
Carrier Claim Control Number
Carrier Claim Entry Code
Carrier Claim HCPCS Year Code
Carrier Claim Payment Denial Code
Carrier Claim Primary Payer Paid Amount
Carrier Claim Provider Assignment Indicator Switch

DMERC
Carrier Claim Receipt Date
Carrier Claim Scheduled Payment Date
Carrier Number
Claim Demonstration Identification Number
Claim Demonstration Information Text
Claim Diagnosis Code
Claim Disposition Code
Claim Excepted/Nonexcepted Medical Treatment Code
Claim From Date
Claim Health PlanID Code
Claim Health PlanID Number
Claim Locator Number Group (HICAN)
Claim Payment Amount
Claim Principal Diagnosis Code
Claim Through Date
CWF Beneficiary Medicare Status Code
CWF Claim Accretion Date
CWF Claim Accretion Number
CWF Transmission Batch Number
DMERC Claim Demonstration ID Count
DMERC Claim Diagnosis Code Count
DMERC Claim Health PlanID Count
DMERC Claim Line Count
DMERC Claim Ordering Physician UPIN Number
DMERC Line Decision Indicator Switch
DMERC Line HCPCS Fourth Modifier Code
DMERC Line HCPCS Third Modifier Code
DMERC Line Miles/Time/Units/Services Count
DMERC Line Miles/Time/Units/Services Indicator Code
DMERC Line Not Otherwise Classified HCPCS Code Text
DMERC Line Pricing State Code
DMERC Line Provider State Code
DMERC Line Screen Result Indicator Code
DMERC Line Screen Savings Amount
DMERC Line Screen Suspension Indicator Code

DMERC
DMERC Line Supplier Provider Number
DMERC Line Supplier Type Code
DMERC Line Waiver Of Provider Liability Switch
DMERC NCH Edit Code Count
DMERC NCH Patch Code Count
End of Record Code
Line 10% Penalty Reduction Amount
Line Additional Claim Documentation Indicator Code
Line Allowed Charge Amount
Line Beneficiary Part B Deductible Amount
Line Beneficiary Payment Amount
Line Beneficiary Primary Payer Code
Line Beneficiary Primary Payer Paid Amount
Line Coinsurance Amount
Line Diagnosis Code
Line DME Purchase Price Amount
Line First Expense Date
Line HCFA Provider Specialty Code
Line HCFA Type Service Code
Line HCPCS Code
Line HCPCS Initial Modifier Code
Line HCPCS Second Modifier Code
Line IDE Number
Line Interest Amount
Line Last Expense Date
Line National Drug Code
Line NCH BETOS Code
Line NCH Payment Amount
Line Payment 80%/100% Code
Line Payment Indicator Code
Line Place Of Service Code
Line Primary Payer Allowed Charge Amount
Line Processing Indicator Code
Line Provider Participating Indicator Code
Line Provider Payment Amount

DMERC
Line Provider Tax Number
Line Service Count
Line Service Deductible Indicator Switch
Line Submitted Charge Amount
NCH Carrier Claim Allowed Charge Amount
NCH Carrier Claim Submitted Charge Amount
NCH Category Equitable Beneficiary Identification Code
NCH Claim Beneficiary Payment Amount
NCH Claim Provider Payment Amount
NCH Claim Type Code
NCH Daily Process Date
NCH Edit Code
NCH Near Line Record Identification Code
NCH Near-Line Record Version Code
NCH Patch Applied Date
NCH Patch Code
NCH Segment Link Number
NCH Weekly Claim Processing Date

HHA

Table 10. HHA – Viewable Fields.

HHA
Beneficiary Birth Date
Beneficiary Identification Code
Beneficiary Mailing Contact ZIP Code
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Claim Attending Physician UPIN Number
Claim Demonstration Identification Number
Claim Demonstration Information Text
Claim Diagnosis Code
Claim Diagnosis E Code

HHA
Claim Disposition Code
Claim Excepted/Nonexcepted Medical Treatment Code
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Health PlanID Code
Claim Health PlanID Number
Claim HHA Care Start Date
Claim HHA Low Utilization Payment Adjustment (LUPA) Indicator Code
Claim HHA Referral Code
Claim HHA Total Visit Count
Claim Locator Number Group (HICAN)
Claim Managed Care Organization (MCO) Paid Switch
Claim Medicaid Information Code
Claim Medical Record Number
Claim Medicare Non Payment Reason Code
Claim Occurrence Span Code
Claim Occurrence Span From Date
Claim Occurrence Span Through Date
Claim Operating Physician UPIN Number
Claim Other Physician UPIN Number
Claim Payment Amount
Claim Prospective Payment System (PPS) Indicator Code
Claim Principal Diagnosis Code
Claim PRO Control Number
Claim PRO Process Date
Claim Query Code
Claim Related Condition Code
Claim Related Occurrence Code
Claim Related Occurrence Date
Claim Service Classification Type Code
Claim Through Date
Claim Total Charge Amount
Claim Transaction Code
Claim Treatment Authorization Number

HHA
Claim Value Amount
Claim Value Code
CWF Beneficiary Medicare Status Code
CWF Claim Accretion Date
CWF Claim Accretion Number
CWF Transmission Batch Number
End of Record Code
FI Claim Action Code
FI Claim Process Date
FI Claim Receipt Date
FI Claim Scheduled Payment Date
FI Document Claim Control Number
FI Number
FI Original Claim Control Number
FI Requested Claim Cancel Reason Code
HHA Claim Demonstration ID Count
HHA Claim Diagnosis Code Count
HHA Claim Health PlanID Count
HHA Claim Occurrence Span Code Count
HHA Claim Related Condition Code Count
HHA Claim Related Occurrence Code Count
HHA Claim Value Code Count
HHA NCH Edit Code Count
HHA NCH Patch Code Count
HHA Revenue Center Code Count
Medicaid Provider Identification Number
NCH Beneficiary Discharge Date
NCH Category Equitable Beneficiary Identification Code
NCH Claim Type Code
NCH Daily Process Date
NCH Edit Code
NCH Near Line Record Identification Code
NCH Near-Line Record Version Code
NCH Patch Applied Date
NCH Patch Code

HHA
NCH Payment and Edit Record Identification Code
NCH Primary Payer Claim Paid Amount
NCH Primary Payer Code
NCH Provider State Code
NCH Qualified Stay From Date
NCH Qualify Stay Through Date
NCH Segment Link Number
NCH Weekly Claim Processing Date
Organization NPI Number
Patient Control Number
Patient Discharge Status Code
Provider Number
Revenue Center 1st Medicare Secondary Payer Paid Amount
Revenue Center 2nd Medicare Secondary Payer Paid Amount
Revenue Center APC/Health Insurance Prospective Payment System (HIPPS) Code
Revenue Center Beneficiary Payment Amount
Revenue Center Blood Deductible Amount
Revenue Center Cash Deductible Amount
Revenue Center Code
Revenue Center Coinsurance/Wage Adjusted Coinsurance Amount
Revenue Center Date
Revenue Center Deductible Coinsurance Code
Revenue Center Discount Indicator Code
Revenue Center HCFA Common Procedure Coding System Code
Revenue Center HCPCS Fifth Modifier Code
Revenue Center HCPCS Fourth Modifier Code
Revenue Center HCPCS Initial Modifier Code
Revenue Center HCPCS Second Modifier Code
Revenue Center HCPCS Third Modifier Code
Revenue Center IDE, National Drug Code (NDC), Universal Product Code (UPC) Number
Revenue Center Non-Covered Charge Amount
Revenue Center Obligation to Accept As Full (OTAF) Payment Code
Revenue Center Packaging Indicator Code
Revenue Center Patient Responsibility Payment Amount

HHA
Revenue Center Payment Amount
Revenue Center Payment Method Indicator Code
Revenue Center Pricing Indicator Code
Revenue Center Professional Component Amount
Revenue Center Provider Payment Amount
Revenue Center Rate Amount
Revenue Center Reduced Coinsurance Amount
Revenue Center Total Charge Amount
Revenue Center Unit Count

Hospice

Table 11. Hospice – Viewable Fields.

Hospice
Beneficiary Birth Date
Beneficiary Identification Code
Beneficiary Mailing Contact ZIP Code
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Beneficiary's Hospice Period Count
Claim Attending Physician UPIN Number
Claim Demonstration Identification Number
Claim Demonstration Information Text
Claim Diagnosis Code
Claim Diagnosis E Code
Claim Disposition Code
Claim Excepted/Nonexcepted Medical Treatment Code
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Health PlanID Code
Claim Health PlanID Number
Claim Hospice Start Date

Hospice
Claim Locator Number Group (HICAN)
Claim MCO Paid Switch
Claim Medicaid Information Code
Claim Medical Record Number
Claim Medicare Non Payment Reason Code
Claim Occurrence Span Code
Claim Occurrence Span From Date
Claim Occurrence Span Through Date
Claim Operating Physician UPIN Number
Claim Other Physician UPIN Number
Claim Payment Amount
Claim PPS Indicator Code
Claim Principal Diagnosis Code
Claim PRO Control Number
Claim PRO Process Date
Claim Procedure Code
Claim Procedure Performed Date
Claim Query Code
Claim Related Condition Code
Claim Related Occurrence Code
Claim Related Occurrence Date
Claim Service Classification Type Code
Claim Through Date
Claim Total Charge Amount
Claim Transaction Code
Claim Treatment Authorization Number
Claim Utilization Day Count
Claim Value Amount
Claim Value Code
CWF Beneficiary Medicare Status Code
CWF Claim Accretion Date
CWF Claim Accretion Number
CWF Transmission Batch Number
End of Record Code
FI Claim Action Code

Hospice
FI Claim Process Date
FI Claim Receipt Date
FI Claim Scheduled Payment Date
FI Document Claim Control Number
FI Number
FI Original Claim Control Number
FI Requested Claim Cancel Reason Code
Hospice Claim Demonstration ID Count
Hospice Claim Diagnosis Code Count
Hospice Claim Health PlanID Count
Hospice Claim Occurrence Span Code Count
Hospice Claim Procedure Code Count
Hospice Claim Related Condition Code Count
Hospice Claim Related Occurrence Code Count
Hospice Claim Value Code Count
Hospice NCH Edit Code Count
Hospice NCH Patch Code Count
Hospice Revenue Center Code Count
Medicaid Provider Identification Number
NCH Beneficiary Discharge Date
NCH Beneficiary Medicare Benefits Exhausted Date
NCH Category Equitable Beneficiary Identification Code
NCH Claim Type Code
NCH Daily Process Date
NCH Edit Code
NCH Near Line Record Identification Code
NCH Near-Line Record Version Code
NCH Patch Applied Date
NCH Patch Code
NCH Patient Status Indicator Code
NCH Payment and Edit Record Identification Code
NCH Primary Payer Claim Paid Amount
NCH Primary Payer Code
NCH Provider State Code
NCH Segment Link Number

Hospice
NCH Weekly Claim Processing Date
Organization NPI Number
Patient Control Number
Patient Discharge Status Code
Provider Number
Revenue Center 1st Medicare Secondary Payer Paid Amount
Revenue Center 2nd Medicare Secondary Payer Paid Amount
Revenue Center APC/HIPPS Code
Revenue Center Beneficiary Payment Amount
Revenue Center Blood Deductible Amount
Revenue Center Cash Deductible Amount
Revenue Center Code
Revenue Center Coinsurance/Wage Adjusted Coinsurance Amount
Revenue Center Date
Revenue Center Deductible Coinsurance Code
Revenue Center Discount Indicator Code
Revenue Center HCFA Common Procedure Coding System Code
Revenue Center HCPCS Fifth Modifier Code
Revenue Center HCPCS Fourth Modifier Code
Revenue Center HCPCS Initial Modifier Code
Revenue Center HCPCS Second Modifier Code
Revenue Center HCPCS Third Modifier Code
Revenue Center IDE, NDC, UPC Number
Revenue Center Non-Covered Charge Amount
Revenue Center OTAF Payment Code
Revenue Center Packaging Indicator Code
Revenue Center Patient Responsibility Payment Amount
Revenue Center Payment Amount
Revenue Center Payment Method Indicator Code
Revenue Center Pricing Indicator Code
Revenue Center Professional Component Amount
Revenue Center Provider Payment Amount
Revenue Center Rate Amount
Revenue Center Reduced Coinsurance Amount
Revenue Center Total Charge Amount

Hospice
Revenue Center Unit Count

Inpatient

Table 12. Inpatient – Viewable Fields.

Inpatient
Beneficiary Birth Date
Beneficiary Identification Code
Beneficiary Lifetime Reserve Days (LRD) Used Count
Beneficiary Mailing Contact ZIP Code
Beneficiary Prior Psychiatric Day Count
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Beneficiary Total Coinsurance Days Count
Claim Admission Date
Claim Admitting Diagnosis Code
Claim Attending Physician UPIN Number
Claim Cost Report Days Count
Claim Demonstration Identification Number
Claim Demonstration Information Text
Claim Diagnosis Code
Claim Diagnosis E Code
Claim Diagnosis Related Group Code
Claim Diagnosis Related Group Outlier Stay Code
Claim Disposition Code
Claim Excepted/Nonexcepted Medical Treatment Code
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Health PlanID Code
Claim Health PlanID Number
Claim Inpatient Admission Type Code
Claim KRON Indicator Code

Inpatient
Claim Locator Number Group (HICAN)
Claim MCO Paid Switch
Claim Medicaid Information Code
Claim Medical Record Number
Claim Medicare Non Payment Reason Code
Claim Non Utilization Days Count
Claim Occurrence Span Code
Claim Occurrence Span From Date
Claim Occurrence Span Through Date
Claim Operating Physician UPIN Number
Claim Other Physician UPIN Number
Claim Pass Thru Per Diem Amount
Claim Payment Amount
Claim PPS Capital Discharge Fraction Percent
Claim PPS Capital Disproportionate Share Amount
Claim PPS Capital DRG Weight Number
Claim PPS Capital Exception Amount
Claim PPS Capital FSP Amount
Claim PPS Capital HSP Amount
Claim PPS Capital IME Amount
Claim PPS Capital Outlier Amount
Claim PPS Indicator Code
Claim PPS Old Capital Hold Harmless Amount
Claim Principal Diagnosis Code
Claim PRO Control Number
Claim PRO Process Date
Claim Procedure Code
Claim Procedure Performed Date
Claim Query Code
Claim Related Condition Code
Claim Related Occurrence Code
Claim Related Occurrence Date
Claim Service Classification Type Code
Claim Source Inpatient Admission Code
Claim Through Date

Inpatient
Claim Total Charge Amount
Claim Total PPS Capital Amount
Claim Transaction Code
Claim Treatment Authorization Number
Claim Utilization Day Count
Claim Value Amount
Claim Value Code
CWF Beneficiary Medicare Status Code
CWF Claim Accretion Date
CWF Claim Accretion Number
CWF Transmission Batch Number
End of Record Code
FI Claim Action Code
FI Claim Process Date
FI Claim Receipt Date
FI Claim Scheduled Payment Date
FI Document Claim Control Number
FI Number
FI Original Claim Control Number
FI Requested Claim Cancel Reason Code
Inpatient/SNF Claim Demonstration ID Count
Inpatient/SNF Claim Diagnosis Code Count
Inpatient/SNF Claim Health PlanID Count
Inpatient/SNF Claim Occurrence Span Code Count
Inpatient/SNF Claim Procedure Code Count
Inpatient/SNF Claim Related Condition Code Count
Inpatient/SNF Claim Related Occurrence Code Count
Inpatient/SNF Claim Value Code Count
Inpatient/SNF NCH Edit Code Count
Inpatient/SNF NCH Patch Code Count
Inpatient/SNF Revenue Center Code Count
Medicaid Provider Identification Number
NCH Active or Covered Level Care Thru Date
NCH Beneficiary Blood Deductible Liability Amount
NCH Beneficiary Discharge Date

Inpatient
NCH Beneficiary Inpatient Deductible Amount
NCH Beneficiary Medicare Benefits Exhausted Date
NCH Beneficiary Part A Coinsurance Liability Amount
NCH Blood Deductible Pints Quantity
NCH Blood Non-Covered Charge Amount
NCH Blood Pints Furnished Quantity
NCH Blood Pints Not Replaced Quantity
NCH Blood Pints Replaced Quantity
NCH Blood Total Charge Amount
NCH Category Equitable Beneficiary Identification Code
NCH Claim Type Code
NCH Daily Process Date
NCH DRG Outlier Approved Payment Amount
NCH Edit Code
NCH Inpatient Non-covered Charge Amount
NCH Inpatient PRO Approval Grace Day Count
NCH Inpatient PRO Approval Service From Date
NCH Inpatient PRO Approval Service Thru Date
NCH Inpatient Pro Approval Type Code
NCH Inpatient Total Deduction Amount
NCH Near Line Record Identification Code
NCH Near-Line Record Version Code
NCH Patch Applied Date
NCH Patch Code
NCH Patient Status Indicator Code
NCH Payment and Edit Record Identification Code
NCH Primary Payer Claim Paid Amount
NCH Primary Payer Code
NCH Professional Component Charge Amount
NCH Provider Guaranteed Payment Start Date
NCH Provider State Code
NCH Qualified Stay From Date
NCH Qualify Stay Through Date
NCH Segment Link Number
NCH Utilization Review Notice Received Date

Inpatient
NCH Verified Non-covered Stay From Date
NCH Verified Non-covered Stay Through Date
NCH Weekly Claim Processing Date
Organization NPI Number
Patient Control Number
Patient Discharge Status Code
Provider Number
Revenue Center 1st Medicare Secondary Payer Paid Amount
Revenue Center 2nd Medicare Secondary Payer Paid Amount
Revenue Center APC/HIPPS Code
Revenue Center Beneficiary Payment Amount
Revenue Center Blood Deductible Amount
Revenue Center Cash Deductible Amount
Revenue Center Code
Revenue Center Coinsurance/Wage Adjusted Coinsurance Amount
Revenue Center Date
Revenue Center Deductible Coinsurance Code
Revenue Center Discount Indicator Code
Revenue Center HCFA Common Procedure Coding System Code
Revenue Center HCPCS Fifth Modifier Code
Revenue Center HCPCS Fourth Modifier Code
Revenue Center HCPCS Initial Modifier Code
Revenue Center HCPCS Second Modifier Code
Revenue Center HCPCS Third Modifier Code
Revenue Center IDE, NDC, UPC Number
Revenue Center Non-Covered Charge Amount
Revenue Center OTAF Payment Code
Revenue Center Packaging Indicator Code
Revenue Center Patient Responsibility Payment Amount
Revenue Center Payment Amount
Revenue Center Payment Method Indicator Code
Revenue Center Pricing Indicator Code
Revenue Center Professional Component Amount
Revenue Center Provider Payment Amount
Revenue Center Rate Amount

Inpatient
Revenue Center Reduced Coinsurance Amount
Revenue Center Total Charge Amount
Revenue Center Unit Count

Outpatient

Table 13. Outpatient – Viewable Fields.

Outpatient
Beneficiary Birth Date
Beneficiary Identification Code
Beneficiary Mailing Contact ZIP Code
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Claim Attending Physician UPIN Number
Claim Demonstration Identification Number
Claim Demonstration Information Text
Claim Diagnosis Code
Claim Diagnosis E Code
Claim Disposition Code
Claim Excepted/Nonexcepted Medical Treatment Code
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Health PlanID Code
Claim Health PlanID Number
Claim Locator Number Group (HICAN)
Claim MCO Paid Switch
Claim Medicaid Information Code
Claim Medical Record Number
Claim Medicare Non Payment Reason Code
Claim Occurrence Span Code
Claim Occurrence Span From Date
Claim Occurrence Span Through Date

Outpatient
Claim Operating Physician UPIN Number
Claim Other Physician UPIN Number
Claim Outpatient Beneficiary Interim Deductible Amount
Claim Outpatient Beneficiary Payment Amount
Claim Outpatient ESRD Method of Reimbursement Code
Claim Outpatient Provider Payment Amount
Claim Outpatient Referral Code
Claim Outpatient Service Type Code
Claim Outpatient Transaction Type Code
Claim Payment Amount
Claim PPS Indicator Code
Claim Principal Diagnosis Code
Claim PRO Control Number
Claim PRO Process Date
Claim Procedure Code
Claim Procedure Performed Date
Claim Query Code
Claim Related Condition Code
Claim Related Occurrence Code
Claim Related Occurrence Date
Claim Service Classification Type Code
Claim Through Date
Claim Total Charge Amount
Claim Transaction Code
Claim Treatment Authorization Number
Claim Value Amount
Claim Value Code
CWF Beneficiary Medicare Status Code
CWF Claim Accretion Date
CWF Claim Accretion Number
CWF Transmission Batch Number
End of Record Code
FI Claim Action Code
FI Claim Process Date
FI Claim Receipt Date

Outpatient
FI Claim Scheduled Payment Date
FI Document Claim Control Number
FI Number
FI Original Claim Control Number
FI Requested Claim Cancel Reason Code
Medicaid Provider Identification Number
NCH Beneficiary Blood Deductible Liability Amount
NCH Beneficiary Part B Coinsurance Amount
NCH Beneficiary Part B Deductible Amount
NCH Blood Deductible Pints Quantity
NCH Blood Pints Furnished Quantity
NCH Blood Pints Not Replaced Quantity
NCH Blood Pints Replaced Quantity
NCH Category Equitable Beneficiary Identification Code
NCH Claim Type Code
NCH Daily Process Date
NCH Edit Code
NCH Near Line Record Identification Code
NCH Near-Line Record Version Code
NCH Patch Applied Date
NCH Patch Code
NCH Payment and Edit Record Identification Code
NCH Primary Payer Claim Paid Amount
NCH Primary Payer Code
NCH Professional Component Charge Amount
NCH Provider State Code
NCH Segment Link Number
NCH Weekly Claim Processing Date
Organization NPI Number
Outpatient Claim Demonstration Id Count
Outpatient Claim Diagnosis Code Count
Outpatient Claim Health PlanID Count
Outpatient Claim Occurrence Span Code Count
Outpatient Claim Procedure Code Count
Outpatient Claim Related Condition Code Count

Outpatient
Outpatient Claim Related Occurrence Code Count
Outpatient Claim Value Code Count
Outpatient NCH Edit Code Count
Outpatient NCH Patch Code Count
Outpatient Revenue Center Code Count
Patient Control Number
Patient Discharge Status Code
Provider Number
Revenue Center 1st Medicare Secondary Payer Paid Amount
Revenue Center 2nd Medicare Secondary Payer Paid Amount
Revenue Center APC/HIPPS Code
Revenue Center Beneficiary Payment Amount
Revenue Center Blood Deductible Amount
Revenue Center Cash Deductible Amount
Revenue Center Code
Revenue Center Coinsurance/Wage Adjusted Coinsurance Amount
Revenue Center Date
Revenue Center Deductible Coinsurance Code
Revenue Center Discount Indicator Code
Revenue Center HCFA Common Procedure Coding System Code
Revenue Center HCPCS Fifth Modifier Code
Revenue Center HCPCS Fourth Modifier Code
Revenue Center HCPCS Initial Modifier Code
Revenue Center HCPCS Second Modifier Code
Revenue Center HCPCS Third Modifier Code
Revenue Center IDE, NDC, UPC Number
Revenue Center Non-Covered Charge Amount
Revenue Center OTAF Payment Code
Revenue Center Packaging Indicator Code
Revenue Center Patient Responsibility Payment Amount
Revenue Center Payment Amount
Revenue Center Payment Method Indicator Code
Revenue Center Pricing Indicator Code
Revenue Center Professional Component Amount
Revenue Center Provider Payment Amount

Outpatient
Revenue Center Rate Amount
Revenue Center Reduced Coinsurance Amount
Revenue Center Total Charge Amount
Revenue Center Unit Count

Appendix D: Searchable Fields by Claim Type

An asterisk (*) indicates elements for which a user input file can be used.

Carrier

Table 14. Carrier – Searchable Fields.

Carrier
Any Diagnosis Code*
Any HCPCS Modifier Code
Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Carrier Claim Control Number*
Carrier Claim Demonstration ID Count
Carrier Claim Referring PIN Number*
Carrier Claim Referring UPIN Number*
Carrier Line Clinical Lab Number*
Carrier Line Performing PIN Number*
Carrier Line Performing Provider ZIP Code*
Carrier Line Performing UPIN Number*
Carrier Line Pricing Locality Code
Carrier Line Provider Type Code
Carrier Line Type Service Code
Carrier Number*
Claim Demonstration Identification Number
Claim Diagnosis Code*
Claim From Date
Claim Locator Number Group (HICAN)*
Claim Principal Diagnosis Code*
Claim Through Date
CWF Beneficiary Medicare Status Code
Line Beneficiary Primary Payer Code
Line Diagnosis Code*

Carrier
Line HCFA Provider Specialty Code
Line HCFA Type Service Code
Line HCPCS Code*
Line IDE Number
Line National Drug Code
Line NCH BETOS Code*
Line NCH Provider State Code
Line Place Of Service Code
Line Provider Tax Number*
NCH Claim Type Code
NCH State Segment Code
NCH Weekly Claim Processing Date
State/County*

DMERC

Table 15. DMERC – Searchable Fields.

DMERC
Any Diagnosis Code*
Any HCPCS Modifier Code
Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Carrier Claim Control Number*
Carrier Number*
Claim Demonstration Identification Number
Claim Diagnosis Code*
Claim From Date
Claim Locator Number Group (HICAN)*
Claim Principal Diagnosis Code*
Claim Through Date
CWF Beneficiary Medicare Status Code

DMERC
DMERC Claim Demonstration ID Count
DMERC Claim Ordering Physician UPIN Number*
DMERC Line Pricing State Code
DMERC Line Provider State Code
DMERC Line Supplier Provider Number*
DMERC Line Supplier Type Code
Line Beneficiary Primary Payer Code
Line Diagnosis Code*
Line HCFA Provider Specialty Code
Line HCFA Type Service Code
Line HCPCS Code*
Line IDE Number
Line National Drug Code
Line NCH BETOS Code*
Line Place Of Service Code
Line Provider Tax Number*
NCH Claim Type Code
NCH State Segment Code
NCH Weekly Claim Processing Date
State/County*

HHA

Table 16. HHA – Searchable Fields.

HHA
Any Diagnosis Code*
Any HCPCS Modifier Code
Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Claim Attending Physician UPIN Number*
Claim Bill Type Group

HHA
Claim Demonstration Identification Number
Claim Diagnosis Code*
Claim Diagnosis E Code*
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Locator Number Group (HICAN)*
Claim Occurrence Span Code*
Claim Operating Physician UPIN Number*
Claim Other Physician UPIN Number*
Claim Principal Diagnosis Code*
Claim Related Condition Code*
Claim Related Occurrence Code*
Claim Service Classification Type Code
Claim Through Date
Claim Value Code*
CWF Beneficiary Medicare Status Code
FI Number*
HHA Claim Demonstration ID Count
Medicaid Provider Identification Number*
NCH Claim Type Code
NCH Primary Payer Code
NCH Provider State Code
NCH State Segment Code
NCH Weekly Claim Processing Date
Provider Number*
Revenue Center Code*
Revenue Center HCFA Common Procedure Coding System Code*
Revenue Center IDE, NDC, UPC Number
State/County*

Hospice

Table 17. Hospice – Searchable Fields.

Hospice
Any Diagnosis Code*
Any HCPCS Modifier Code
Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Claim Attending Physician UPIN Number*
Claim Bill Type Group
Claim Demonstration Identification Number
Claim Diagnosis Code*
Claim Diagnosis E Code*
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Locator Number Group (HICAN)*
Claim Occurrence Span Code*
Claim Operating Physician UPIN Number*
Claim Other Physician UPIN Number*
Claim Principal Diagnosis Code*
Claim Procedure Code*
Claim Related Condition Code*
Claim Related Occurrence Code*
Claim Service Classification Type Code
Claim Through Date
Claim Value Code*
CWF Beneficiary Medicare Status Code
FI Number*
Hospice Claim Demonstration ID Count
Medicaid Provider Identification Number*
NCH Claim Type Code
NCH Primary Payer Code

Hospice
NCH Provider State Code
NCH State Segment Code
NCH Weekly Claim Processing Date
Provider Number*
Revenue Center Code*
Revenue Center HCFA Common Procedure Coding System Code*
Revenue Center IDE, NDC, UPC Number
State/County*

Inpatient

Table 18. Inpatient – Searchable Fields.

Inpatient
Any Diagnosis Code*
Any HCPCS Modifier Code
Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
Claim Admitting Diagnosis Code
Claim Attending Physician UPIN Number*
Claim Bill Type Group
Claim Demonstration Identification Number
Claim Diagnosis Code*
Claim Diagnosis E Code*
Claim Diagnosis Related Group Code
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Inpatient Admission Type Code
Claim Locator Number Group (HICAN)*
Claim Occurrence Span Code*
Claim Operating Physician UPIN Number*

Inpatient
Claim Other Physician UPIN Number*
Claim Principal Diagnosis Code*
Claim Procedure Code*
Claim Related Condition Code*
Claim Related Occurrence Code*
Claim Service Classification Type Code
Claim Through Date
Claim Value Code*
CWF Beneficiary Medicare Status Code
FI Number*
Inpatient/SNF Claim Demonstration ID Count
Medicaid Provider Identification Number*
NCH Claim Type Code
NCH Primary Payer Code
NCH Provider State Code
NCH State Segment Code
NCH Weekly Claim Processing Date
Provider Number*
Revenue Center Code*
Revenue Center HCFA Common Procedure Coding System Code*
Revenue Center IDE, NDC, UPC Number
State/County*

Outpatient

Table 19. Outpatient – Searchable Fields.

Outpatient
Any Diagnosis Code*
Any HCPCS Modifier Code
Beneficiary Birth Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code

Outpatient
Claim Attending Physician UPIN Number*
Claim Bill Type Group
Claim Demonstration Identification Number
Claim Diagnosis Code*
Claim Diagnosis E Code*
Claim Facility Type Code
Claim Frequency Code
Claim From Date
Claim Locator Number Group (HICAN)*
Claim Occurrence Span Code*
Claim Operating Physician UPIN Number*
Claim Other Physician UPIN Number*
Claim Outpatient Service Type Code
Claim Principal Diagnosis Code*
Claim Procedure Code*
Claim Related Condition Code*
Claim Related Occurrence Code*
Claim Service Classification Type Code
Claim Through Date
Claim Value Code*
CWF Beneficiary Medicare Status Code
FI Number*
Medicaid Provider Identification Number*
NCH Claim Type Code
NCH Primary Payer Code
NCH Provider State Code
NCH State Segment Code
NCH Weekly Claim Processing Date
Outpatient Claim Demonstration Id Count
Provider Number*
Revenue Center Code*
Revenue Center HCFA Common Procedure Coding System Code*
Revenue Center IDE, NDC, UPC Number
State/County*

Name & Address

Table 20. Name & Address – Searchable Fields.

Name & Address
Beneficiary Birth Date
Beneficiary Claim Number Group*
Beneficiary Death Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
State/County*

DENOM

Table 21. DENOM – Searchable Fields.

DENOM
Beneficiary Mailing Contact ZIP Code*
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Claim Locator Number Group (HICAN)*
State/County*

MEDPAR

Table 22. MEDPAR – Searchable Fields.

MEDPAR
Beneficiary Mailing Contact ZIP Code*
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Claim Diagnosis Code*
Claim Diagnosis Related Group Code
Claim Locator Number Group (HICAN)*
Claim Procedure Code*
NCH Provider State Code

MEDPAR
Provider Number*
State/County*

Appendix E: Quick Reference for All Medicare Claim Data Items

Table 23. Medicare Claim Data Items.

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Any Diagnosis Code	S	S	S	S	S	S	Y	Y	N	
Any HCPCS Modifier Code	S	S	S	S	S	S	Y	N	N	
Beneficiary Birth Date	H	H	H	H	H	H	Y	N	Y	Age Range
Beneficiary Claim Account Number	H	H	H	H	H	H	N	N	N	Encrypt
Beneficiary CWF Location Code	H	H	H	H	H	H	N	N	N	
Beneficiary Identification Code	H	H	H	H	H	H	N	N	Y	
Beneficiary LRD Used Count			H				N	N	Y	
Beneficiary Mailing Contact ZIP Code	H	H	H	H	H	H	Y	Y	Y	Blank
Beneficiary Prior Psychiatric Day Count			H				N	N	Y	
Beneficiary Race Code	H	H	H	H	H	H	Y	N	Y	
Beneficiary Residence SSA Standard County Code	H	H	H	H	H	H	Y	Y	Y	
Beneficiary Residence SSA Standard State Code	H	H	H	H	H	H	Y	N	Y	
Beneficiary Sex Identification Code	H	H	H	H	H	H	Y	N	Y	
Beneficiary Total Coinsurance Days Count			H				N	N	Y	
Beneficiary's Hospice Period Count		H					N	N	Y	
Care Plan Oversight (CPO) Provider Number					H		N	N	Y	
Carrier Claim Beneficiary Paid Amount					H	H	N	N	Y	
Carrier Claim Cash Deductible Applied Amount					H	H	N	N	Y	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Carrier Claim Control Number					H	H	Y	Y	Y	Blank
Carrier Claim Demonstration ID Count					H		Y	N	Y	
Carrier Claim Diagnosis Code Count					H		N	N	Y	
Carrier Claim Entry Code					H	H	N	N	Y	
Carrier Claim HCPCS Year Code					H	H	N	N	Y	
Carrier Claim Health PlanID Count					H		N	N	Y	
Carrier Claim Hospice Override Indicator Code					H	H	N	N	N	
Carrier Claim Line Count					H		N	N	Y	
Carrier Claim MCO Override Indicator Code					H	H	N	N	N	
Carrier Claim Payment Denial Code					H	H	Y	N	Y	
Carrier Claim Primary Payer Paid Amount					H	H	N	N	Y	
Carrier Claim Provider Assignment Indicator Switch					H	H	N	N	Y	
Carrier Claim Receipt Date					H	H	N	N	Y	Zero
Carrier Claim Referring Physician NPI Number					H		N	N	N	Encrypt
Carrier Claim Referring PIN Number					H		Y	Y	Y	Encrypt
Carrier Claim Referring UPIN Number					H		Y	Y	Y	Encrypt
Carrier Claim Scheduled Payment Date					H	H	N	N	Y	Zero
Carrier Line Anesthesia Base Unit Count					T		N	N	Y	
Carrier Line Blood Deductible Pints Quantity					T		N	N	Y	
Carrier Line CLIA Alert Indicator Code					T		N	N	Y	

Legend:

H: Element is in the header portion for the claim type.

T: Element is in one of the trailers for the claim type.

Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Carrier Line Clinical Lab Charge Amount					T		N	N	Y	
Carrier Line Clinical Lab Number					T		Y	Y	Y	
Carrier Line DME Coverage Period Start Date					T		N	N	Y	
Carrier Line DME Medical Necessity Month Count					T		N	N	Y	
Carrier Line Miles/Time/Units/Services Count					T		N	N	Y	
Carrier Line Miles/Time/Units/Services Indicator Code					T		N	N	Y	
Carrier Line Performing Group NPI Number					T		N	N	Y	
Carrier Line Performing NPI Number					T		N	N	N	Encrypt
Carrier Line Performing PIN Number					T		Y	Y	Y	Encrypt
Carrier Line Performing Provider ZIP Code					T		Y	Y	Y	Blank
Carrier Line Performing UPIN Number					T		Y	Y	Y	Encrypt
Carrier Line Pricing Locality Code					T		Y	N	Y	
Carrier Line Provider Specialty Code					T		N	N	Y	
Carrier Line Provider Type Code					T		Y	N	Y	
Carrier Line Psychiatric, Occupational Therapy, Physical Therapy Limit Amount					T		N	N	Y	
Carrier Line Reduced Payment Physician Assistant Code					T		N	N	Y	
Carrier Line Type Service Code					T		Y	N	Y	
Carrier MCO Period Count					H		N	N	N	
Carrier NCH Edit Code Count					H		N	N	Y	
Carrier NCH Patch Code Count					H		N	N	Y	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Carrier Number					H	H	Y	Y	Y	
Claim Admission Date			H				Y	N	Y	Year/Qtr
Claim Admitting Diagnosis Code			H				Y	N	Y	
Claim Attending Physician Given Name	H	H	H	H			N	N	N	Blank
Claim Attending Physician Middle Initial Name	H	H	H	H			N	N	N	Blank
Claim Attending Physician NPI Number	H	H	H	H			N	N	N	Encrypt
Claim Attending Physician Surname	H	H	H	H			N	N	N	Blank
Claim Attending Physician UPIN Number	H	H	H	H			Y	Y	Y	Encrypt
Claim Bill Type Group	H	H	H	H			Y	N	N	
Claim Blood Deductible Pints Quantity					H		N	N	Y	
Claim Blood Pints Furnished Quantity					H		N	N	Y	
Claim Coinsurance Year 1 Day Count			H				N	N	N	
Claim Coinsurance Year 2 Day Count			H				N	N	N	
Claim Cost Report Days Count			H				N	N	Y	
Claim Demonstration Identification Number	T	T	T	T	T	T	Y	N	Y	Blank
Claim Demonstration Information Text	T	T	T	T	T	T	N	N	Y	
Claim Diagnosis Code	T	T	T	T	T	T	Y	Y	Y	
Claim Diagnosis E Code	H	H	H	H			Y	Y	Y	
Claim Diagnosis Related Group Code			H				Y	N	Y	
Claim Diagnosis Related Group Outlier Stay Code			H				N	N	Y	
Claim Disposition Code	H	H	H	H	H	H	N	N	Y	

Legend:

H: Element is in the header portion for the claim type.

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Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Claim Excepted/Non-excepted Medical Treatment Code	H	H	H	H	H	H	N	N	Y	
Claim Facility Type Code	H	H	H	H			Y	N	Y	
Claim Frequency Code	H	H	H	H			Y	N	Y	
Claim From Date	H	H	H	H	H	H	Y	N	Y	Zero
Claim Health PlanID Code	T	T	T	T	T	T	N	N	Y	
Claim Health PlanID Number	T	T	T	T	T	T	N	N	Y	
Claim HHA Care Start Date	H						N	N	Y	Year/Qtr
LUPA Indicator Code	H						N	N	Y	
Claim HHA Referral Code	H						N	N	Y	
Claim HHA Total Visit Count	H						N	N	Y	
Claim Hospice Start Date		H					N	N	Y	Year/Qtr
Claim Inpatient Admission Type Code			H				Y	N	Y	
Claim KRON Indicator Code			H				N	N	Y	
Claim Locator Number Group (HICAN)	H	H	H	H	H	H	Y	Y	Y	
Claim MCO Paid Switch	H	H	H	H			N	N	Y	
Claim Medicaid Information Code	H	H	H	H			N	N	Y	
Claim Medical Record Number	H	H	H	H			N	N	Y	Blank
Claim Medicare Non Payment Reason Code	H	H	H	H			Y	N	Y	
Claim Non Utilization Days Count			H				N	N	Y	
Claim Occurrence Span Code	T	T	T	T			Y	Y	Y	
Claim Occurrence Span From Date	T	T	T	T			N	N	Y	
Claim Occurrence Span Through Date	T	T	T	T			N	N	Y	
Claim Operating Physician Given Name	H	H	H	H			N	N	N	Blank

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Claim Operating Physician Middle Initial Name	H	H	H	H			N	N	N	Blank
Claim Operating Physician NPI Number	H	H	H	H			N	N	N	Encrypt
Claim Operating Physician Surname	H	H	H	H			N	N	N	Blank
Claim Operating Physician UPIN Number	H	H	H	H			Y	Y	Y	Encrypt
Claim Other Physician Given Name	H	H	H	H			N	N	N	Blank
Claim Other Physician Middle Initial Name	H	H	H	H			N	N	N	Blank
Claim Other Physician NPI Number	H	H	H	H			N	N	N	Encrypt
Claim Other Physician Surname	H	H	H	H			N	N	N	Blank
Claim Other Physician UPIN Number	H	H	H	H			Y	Y	Y	Encrypt
Claim Outpatient Beneficiary Interim Deductible Amount				H			N	N	Y	
Claim Outpatient Beneficiary Payment Amount				H			N	N	Y	
Claim Outpatient ESRD Method of Reimbursement Code				H			N	N	Y	
Claim Outpatient Provider Payment Amount				H			N	N	Y	
Claim Outpatient Referral Code				H			N	N	Y	
Claim Outpatient Service Type Code				H			Y	N	Y	
Claim Outpatient Transaction Type Code				H			N	N	Y	
Claim Pass Thru Per Diem Amount			H				N	N	Y	
Claim Patient 1st Initial Given Name	H	H	H	H	H	H	N	N	N	Blank
Claim Patient 6 Position Surname	H	H	H	H	H	H	N	N	N	Blank
Claim Patient First Initial Middle Name	H	H	H	H	H	H	N	N	N	Blank

Legend:

H: Element is in the header portion for the claim type.

T: Element is in one of the trailers for the claim type.

Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Claim Payment Amount	H	H	H	H	H	H	N	N	Y	
Claim PPS Capital Discharge Fraction Percent			H				N	N	Y	
Claim PPS Capital Disproportionate Share Amount			H				N	N	Y	
Claim PPS Capital DRG Weight Number			H				N	N	Y	
Claim PPS Capital Exception Amount			H				N	N	Y	
Claim PPS Capital FSP Amount			H				N	N	Y	
Claim PPS Capital HSP Amount			H				N	N	Y	
Claim PPS Capital IME Amount			H				N	N	Y	
Claim PPS Capital Outlier Amount			H				N	N	Y	
Claim PPS Indicator Code	H	H	H	H			N	N	Y	
Claim PPS Old Capital Hold Harmless Amount			H				N	N	Y	
Claim Principal Diagnosis Code	H	H	H	H	H	H	Y	Y	Y	
Claim PRO Control Number	H	H	H	H			N	N	Y	Blank
Claim PRO Process Date	H	H	H	H			N	N	Y	
Claim Procedure Code		T	T	T			Y	Y	Y	
Claim Procedure Performed Date		T	T	T			N	N	Y	Year/Qtr
Claim Query Code	H	H	H	H			N	N	Y	
Claim Related Condition Code	T	T	T	T			Y	Y	Y	
Claim Related Occurrence Code	T	T	T	T			Y	Y	Y	
Claim Related Occurrence Date	T	T	T	T			N	N	Y	Year/Qtr
Claim Segment Line Count	H	H	H	H	H	H	N	N	N	
Claim Segment Number	H	H	H	H	H	H	N	N	N	
Claim Service Classification Type Code	H	H	H	H			Y	N	Y	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Claim Source Inpatient Admission Code			H				N	N	Y	
Claim Through Date	H	H	H	H	H	H	Y	N	Y	Year/Qtr
Claim Total Charge Amount	H	H	H	H			N	N	Y	
Claim Total Line Count	H	H	H	H	H	H	N	N	N	
Claim Total PPS Capital Amount			H				N	N	Y	
Claim Total Segment Count	H	H	H	H	H	H	N	N	N	
Claim Transaction Code	H	H	H	H			N	N	Y	
Claim Treatment Authorization Number	H	H	H	H			N	N	Y	
Claim Utilization Day Count		H	H				N	N	Y	
Claim Value Amount	T	T	T	T			N	N	Y	
Claim Value Code	T	T	T	T			Y	Y	Y	
CPO Organization NPI Number					H		N	N	Y	
CWF Beneficiary Medicare Status Code	H	H	H	H	H	H	Y	N	Y	
CWF Claim Accretion Date	H	H	H	H	H	H	N	N	Y	Year/Qtr
CWF Claim Accretion Number	H	H	H	H	H	H	N	N	Y	Zero
CWF Claim Assigned Number	H	H	H	H			N	N	N	Blank
CWF Forwarded Date	H	H	H	H	H	H	N	N	N	
CWF Transmission Batch Number	H	H	H	H	H	H	N	N	Y	
DMERC Claim Demonstration ID Count						H	Y	N	Y	
DMERC Claim Diagnosis Code Count						H	N	N	Y	
DMERC Claim Health PlanID Count						H	N	N	Y	
DMERC Claim Line Count						H	N	N	Y	
DMERC Claim Ordering Physician NPI Number						H	N	N	N	Encrypt

Legend:

H: Element is in the header portion for the claim type.

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Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
DMERC Claim Ordering Physician UPIN Number						H	Y	Y	Y	Encrypt
DMERC Line Decision Indicator Switch						T	N	N	Y	
DMERC Line HCPCS Fourth Modifier Code						T	N	N	Y	
DMERC Line HCPCS Third Modifier Code						T	N	N	Y	
DMERC Line Item Supplier NPI Number						T	N	N	N	Encrypt
DMERC Line Miles/Time/Units/Services Count						T	N	N	Y	
DMERC Line Miles/Time/Units/Services Indicator Code						T	N	N	Y	
DMERC Line Not Otherwise Classified HCPCS Code Text						T	N	N	Y	
DMERC Line Pricing State Code						T	Y	N	Y	
DMERC Line Provider State Code						T	Y	N	Y	
DMERC Line Screen Result Indicator Code						T	N	N	Y	
DMERC Line Screen Savings Amount						T	N	N	Y	
DMERC Line Screen Suspension Indicator Code						T	N	N	Y	
DMERC Line Supplier Provider Number						T	Y	Y	Y	
DMERC Line Supplier Type Code						T	Y	N	Y	
DMERC Line Waiver Of Provider Liability Switch						T	N	N	Y	
DMERC MCO Period Count						H	N	N	N	
DMERC NCH Edit Code Count						H	N	N	Y	
DMERC NCH Patch Code Count						H	N	N	Y	
End of Record Code	T	T	T	T	T	T	N	N	Y	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
FI Claim Action Code	H	H	H	H			N	N	Y	
FI Claim Process Date	H	H	H	H			N	N	Y	Zero
FI Claim Receipt Date	H	H	H	H			N	N	Y	Zero
FI Claim Scheduled Payment Date	H	H	H	H			N	N	Y	Zero
FI Document Claim Control Number	H	H	H	H			N	N	Y	Blank
FI Number	H	H	H	H			Y	Y	Y	
FI Original Claim Control Number	H	H	H	H			N	N	Y	Blank
FI Requested Claim Cancel Reason Code	H	H	H	H			N	N	Y	
HHA Claim Demonstration ID Count	H						Y	N	Y	
HHA Claim Diagnosis Code Count	H						N	N	Y	
HHA Claim Health PlanID Count	H						N	N	Y	
HHA Claim Occurrence Span Code Count	H						N	N	Y	
HHA Claim Related Condition Code Count	H						N	N	Y	
HHA Claim Related Occurrence Code Count	H						N	N	Y	
HHA Claim Value Code Count	H						N	N	Y	
HHA MCO Period Count	H						N	N	N	
HHA NCH Edit Code Count	H						N	N	Y	
HHA NCH Patch Code Count	H						N	N	Y	
HHA Revenue Center Code Count	H						N	N	Y	
Hospice Claim Demonstration ID Count		H					Y	N	Y	
Hospice Claim Diagnosis Code Count		H					N	N	Y	

Legend:

H: Element is in the header portion for the claim type.

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Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Hospice Claim Health PlanID Count		H					N	N	Y	
Hospice Claim Occurrence Span Code Count		H					N	N	Y	
Hospice Claim Procedure Code Count		H					N	N	Y	
Hospice Claim Related Condition Code Count		H					N	N	Y	
Hospice Claim Related Occurrence Code Count		H					N	N	Y	
Hospice Claim Value Code Count		H					N	N	Y	
Hospice MCO Period Count		H					N	N	N	
Hospice NCH Edit Code Count		H					N	N	Y	
Hospice NCH Patch Code Count		H					N	N	Y	
Hospice Revenue Center Code Count		H					N	N	Y	
Inpatient/SNF Claim Demonstration ID Count			H				Y	N	Y	
Inpatient/SNF Claim Diagnosis Code Count			H				N	N	Y	
Inpatient/SNF Claim Health PlanID Count			H				N	N	Y	
Inpatient/SNF Claim Occurrence Span Code Count			H				N	N	Y	
Inpatient/SNF Claim Procedure Code Count			H				N	N	Y	
Inpatient/SNF Claim Related Condition Code Count			H				N	N	Y	
Inpatient/SNF Claim Related Occurrence Code Count			H				N	N	Y	
Inpatient/SNF Claim Value Code Count			H				N	N	Y	
Inpatient/SNF MCO Period Count			H				N	N	N	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Inpatient/SNF NCH Edit Code Count			H				N	N	Y	
Inpatient/SNF NCH Patch Code Count			H				N	N	Y	
Inpatient/SNF Revenue Center Code Count			H				N	N	Y	
Line 10% Penalty Reduction Amount					T	T	N	N	Y	
Line Additional Claim Documentation Indicator Code					T	T	N	N	Y	
Line Allowed Charge Amount					T	T	N	N	Y	
Line Beneficiary Part B Deductible Amount					T	T	N	N	Y	
Line Beneficiary Payment Amount					T	T	N	N	Y	
Line Beneficiary Primary Payer Code					T	T	Y	N	Y	
Line Beneficiary Primary Payer Paid Amount					T	T	N	N	Y	
Line Coinsurance Amount					T	T	N	N	Y	
Line Diagnosis Code					T	T	Y	Y	Y	
Line DME Purchase Price Amount					T	T	N	N	Y	
Line First Expense Date					T	T	Y	N	Y	Zero
Line HCFA Provider Specialty Code					T	T	Y	N	Y	
Line HCFA Type Service Code					T	T	Y	N	Y	
Line HCPCS Code					T	T	Y	Y	Y	
Line HCPCS Initial Modifier Code					T	T	N	N	Y	
Line HCPCS Second Modifier Code					T	T	N	N	Y	
Line IDE Number					T	T	Y	N	Y	
Line Interest Amount					T	T	N	N	Y	

Legend:

H: Element is in the header portion for the claim type.

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Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Line Last Expense Date					T	T	Y	N	Y	Year/Qtr
Line National Drug Code					T	T	Y	N	Y	
Line NCH BETOS Code					T	T	Y	Y	Y	
Line NCH Payment Amount					T	T	N	N	Y	
Line NCH Provider State Code					T		Y	N	Y	
Line Payment 80%/100% Code					T	T	N	N	Y	
Line Payment Indicator Code					T	T	N	N	Y	
Line Place Of Service Code					T	T	Y	N	Y	
Line Primary Payer Allowed Charge Amount					T	T	N	N	Y	
Line Processing Indicator Code					T	T	N	N	Y	
Line Provider Participating Indicator Code					T	T	N	N	Y	
Line Provider Payment Amount					T	T	N	N	Y	
Line Provider Tax Number					T	T	Y	Y	Y	Blank
Line Service Count					T	T	N	N	Y	
Line Service Deductible Indicator Switch					T	T	N	N	Y	
Line Submitted Charge Amount					T	T	N	N	Y	
MCO Contract Number	T	T	T	T	T	T	N	N	N	
MCO Health PLANID Number	T	T	T	T	T	T	N	N	N	
MCO Option Code	T	T	T	T	T	T	N	N	N	
MCO Period Effective Date	T	T	T	T	T	T	N	N	N	
MCO Period Termination Date	T	T	T	T	T	T	N	N	N	
Medicaid Provider Identification Number	H	H	H	H			Y	Y	Y	
NCH Active or Covered Level Care Thru Date			H				N	N	Y	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
NCH Beneficiary Blood Deductible Liability Amount			H	H			N	N	Y	
NCH Beneficiary Discharge Date	H	H	H				N	N	Y	Year/Qtr
NCH Beneficiary Inpatient Deductible Amount			H				N	N	Y	
NCH Beneficiary Medicare Benefits Exhausted Date		H	H				N	N	Y	
NCH Beneficiary Part A Coinsurance Liability Amount			H				N	N	Y	
NCH Beneficiary Part B Coinsurance Amount				H			N	N	Y	
NCH Beneficiary Part B Deductible Amount				H			N	N	Y	
NCH Blood Deductible Pints Quantity			H	H			N	N	Y	
NCH Blood Non-Covered Charge Amount			H				N	N	Y	
NCH Blood Pints Furnished Quantity			H	H			N	N	Y	
NCH Blood Pints Not Replaced Quantity			H	H			N	N	Y	
NCH Blood Pints Replaced Quantity			H	H			N	N	Y	
NCH Blood Total Charge Amount			H				N	N	Y	
NCH Carrier Claim Allowed Charge Amount					H	H	N	N	Y	
NCH Carrier Claim Submitted Charge Amount					H	H	N	N	Y	
NCH Category Equatable Beneficiary Identification Code	H	H	H	H	H	H	N	N	Y	Blank
NCH Claim Beneficiary Payment Amount					H	H	N	N	Y	

Legend:

H: Element is in the header portion for the claim type.

T: Element is in one of the trailers for the claim type.

Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
NCH Claim BIC Modify H Code	H	H	H	H	H	H	N	N	N	
NCH Claim Provider Payment Amount					H	H	N	N	Y	
NCH Claim Type Code	H	H	H	H	H	H	Y	N	Y	
NCH Coinsurance Year 1 Rate Amount			H				N	N	N	
NCH Coinsurance Year 2 Rate Amount			H				N	N	N	
NCH Condition Trailer Indicator Code	T	T	T	T			N	N	N	
NCH Daily Process Date	H	H	H	H	H	H	N	N	Y	
NCH Demonstration Trailer Indicator Code	T	T	T	T	T	T	N	N	N	
NCH Diagnosis Trailer Indicator Code	T	T	T	T	T	T	N	N	N	
NCH DRG Outlier Approved Payment Amount			H				N	N	Y	
NCH Edit Code	T	T	T	T	T	T	N	N	Y	
NCH Edit Disposition Code	H	H	H	H	H	H	N	N	N	
NCH Edit Trailer Indicator Code	T	T	T	T	T	T	N	N	N	
NCH Health PlanID Trailer Indicator Code	T	T	T	T	T	T	N	N	N	
NCH Inpatient Non-covered Charge Amount			H				N	N	Y	
NCH Inpatient PRO Approval Grace Day Count			H				N	N	Y	Zero
NCH Inpatient PRO Approval Service From Date			H				N	N	Y	Zero
NCH Inpatient PRO Approval Service Thru Date			H				N	N	Y	Zero
NCH Inpatient Pro Approval Type Code			H				N	N	Y	
NCH Inpatient Total Deduction Amount			H				N	N	Y	
NCH Line Item Trailer Indicator Code					T	T	N	N	N	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
NCH MCO Trailer Indicator Code	T	T	T	T	T	T	N	N	N	
NCH MQA Query Patch Code	H	H	H	H			N	N	N	
NCH MQA RIC Code	H	H	H	H	H	H	N	N	N	
NCH Near Line Record Identification Code	H	H	H	H	H	H	N	N	Y	
NCH Near-Line Record Version Code	H	H	H	H	H	H	N	N	Y	
NCH Occurrence Trailer Indicator Code	T	T	T	T			N	N	N	
NCH Patch Applied Date	T	T	T	T	T	T	N	N	Y	
NCH Patch Code	T	T	T	T	T	T	N	N	Y	
NCH Patch Trailer Indicator Code	T	T	T	T	T	T	N	N	N	
NCH Patient Status Indicator Code		H	H				N	N	Y	
NCH Payment and Edit Record Identification Code	H	H	H	H			N	N	Y	
NCH Primary Payer Claim Paid Amount	H	H	H	H			N	N	Y	
NCH Primary Payer Code	H	H	H	H			Y	N	Y	
NCH Procedure Trailer Indicator Code		T	T	T			N	N	N	
NCH Professional Component Charge Amount			H	H			N	N	Y	
NCH Provider Guaranteed Payment Start Date			H				N	N	Y	
NCH Provider State Code	H	H	H	H			Y	N	Y	
NCH Qualified Stay From Date	H		H				N	N	Y	Zero
NCH Qualify Stay Through Date	H		H				N	N	Y	Year/Qtr
NCH Revenue Center Trailer Indicator Code	T	T	T	T			N	N	N	

Legend:

H: Element is in the header portion for the claim type.

T: Element is in one of the trailers for the claim type.

Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
NCH Segment Link Number	H	H	H	H	H	H	N	N	Y	
NCH Span Trailer Indicator Code	T	T	T	T			N	N	N	
NCH State Segment Code	H	H	H	H	H	H	Y	N	N	
NCH Utilization Review Notice Received Date			H				N	N	Y	
NCH Value Trailer Indicator Code	T	T	T	T			N	N	N	
NCH Verified Non-covered Stay From Date			H				N	N	Y	
NCH Verified Non-covered Stay Through Date			H				N	N	Y	
NCH Weekly Claim Processing Date	H	H	H	H	H	H	Y	N	Y	Zero
Organization NPI Number	H	H	H	H			N	N	Y	
Outpatient Claim Demonstration Id Count				H			Y	N	Y	
Outpatient Claim Diagnosis Code Count				H			N	N	Y	
Outpatient Claim Health PlanID Count				H			N	N	Y	
Outpatient Claim Occurrence Span Code Count				H			N	N	Y	
Outpatient Claim Procedure Code Count				H			N	N	Y	
Outpatient Claim Related Condition Code Count				H			N	N	Y	
Outpatient Claim Related Occurrence Code Count				H			N	N	Y	
Outpatient Claim Value Code Count				H			N	N	Y	
Outpatient MCO Period Count				H			N	N	N	
Outpatient NCH Edit Code Count				H			N	N	Y	
Outpatient NCH Patch Code Count				H			N	N	Y	
Outpatient Revenue Center Code Count				H			N	N	Y	
Patient Control Number	H	H	H	H			N	N	Y	Blank

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Patient Discharge Status Code	H	H	H	H			N	N	Y	
Provider Number	H	H	H	H			Y	Y	Y	
Record Length Count	H	H	H	H	H	H	N	N	N	
Revenue Center 1st ANSI Code	T	T	T	T			N	N	N	
Revenue Center 1st Medicare Secondary Payer Paid Amount	T	T	T	T			N	N	Y	
Revenue Center 2nd ANSI Code	T	T	T	T			N	N	N	
Revenue Center 2nd Medicare Secondary Payer Paid Amount	T	T	T	T			N	N	Y	
Revenue Center 3rd ANSI Code	T	T	T	T			N	N	N	
Revenue Center 4th ANSI Code	T	T	T	T			N	N	N	
Revenue Center APC/HIPPS Code	T	T	T	T			N	N	Y	
Revenue Center Beneficiary Payment Amount	T	T	T	T			N	N	Y	
Revenue Center Blood Deductible Amount	T	T	T	T			N	N	Y	
Revenue Center Cash Deductible Amount	T	T	T	T			N	N	Y	
Revenue Center Code	T	T	T	T			Y	Y	Y	
Revenue Center Coinsurance/Wage Adjusted Coinsurance Amount	T	T	T	T			N	N	Y	
Revenue Center Date	T	T	T	T			N	N	Y	Year/Qtr
Revenue Center Deductible Coinsurance Code	T	T	T	T			N	N	Y	
Revenue Center Discount Indicator Code	T	T	T	T			N	N	Y	
Revenue Center HCFA Common Procedure Coding System Code	T	T	T	T			Y	Y	Y	

Legend:

H: Element is in the header portion for the claim type.

T: Element is in one of the trailers for the claim type.

Quick Reference for All Medicare Claim Data Items

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Revenue Center HCPCS Fifth Modifier Code	T	T	T	T			N	N	Y	
Revenue Center HCPCS Fourth Modifier Code	T	T	T	T			N	N	Y	
Revenue Center HCPCS Initial Modifier Code	T	T	T	T			N	N	Y	
Revenue Center HCPCS Second Modifier Code	T	T	T	T			N	N	Y	
Revenue Center HCPCS Third Modifier Code	T	T	T	T			N	N	Y	
Revenue Center IDE, NDC, UPC Number	T	T	T	T			Y	N	Y	
Revenue Center Non-Covered Charge Amount	T	T	T	T			N	N	Y	
Revenue Center OTAF Payment Code	S	S	S	S			N	N	N	
Revenue Center Packaging Indicator Code	T	T	T	T			N	N	Y	
Revenue Center Patient Responsibility Payment Amount	T	T	T	T			N	N	Y	
Revenue Center Payment Amount	T	T	T	T			N	N	Y	
Revenue Center Payment Method Indicator Code	T	T	T	T			N	N	Y	
Revenue Center Pricing Indicator Code	T	T	T	T			N	N	Y	
Revenue Center Professional Component Amount	T	T	T	T			N	N	Y	
Revenue Center Provider Payment Amount	T	T	T	T			N	N	Y	
Revenue Center Rate Amount	T	T	T	T			N	N	Y	
Revenue Center Reduced Coinsurance Amount	T	T	T	T			N	N	Y	
Revenue Center Total Charge Amount	T	T	T	T			N	N	Y	

Data Element Name	HHA	Hospice	Inpatient	Outpatient	Carrier	DMERC	Search	User Input File	Output View	Encryption
Revenue Center Unit Count	T	T	T	T			N	N	Y	
State/County	S	S	S	S	S	S	Y	Y	N	

Legend:

H: Element is in the header portion for the claim type.

T: Element is in one of the trailers for the claim type.

This page intentionally left blank.

Appendix F: Quick Reference for MEDPAR

An asterisk (*) indicates elements for which a user input file can be used.

Table 24. Quick Reference for MEDPAR.

MEDPAR
Beneficiary Mailing Contact ZIP Code*
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Claim Diagnosis Code*
Claim Locator Number Group (HICAN)*
Claim Procedure Code*
NCH Provider State Code
Provider Number*
State/County*

Appendix G: Quick Reference for DENOM

An asterisk (*) indicates elements for which a user input file can be used.

Table 25. Quick Reference for DENOM.

DENOM
Beneficiary Mailing Contact ZIP Code*
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Claim Locator Number Group (HICAN)*
State/County*

Appendix H: Quick Reference for Name & Address/Vital Statistics

An asterisk (*) indicates elements for which a user input file can be used.

Name & Address

Table 26. Quick Reference for Name & Address.

Name & Address
Beneficiary Birth Date
Beneficiary Claim Number Group*
Beneficiary Death Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
State/County*

Vital Statistics

Table 27. Quick Reference for Vital Statistics.

Vital Stats
Beneficiary Birth Date
Beneficiary Claim Number Group*
Beneficiary Death Date
Beneficiary Mailing Contact ZIP Code*
Beneficiary Race Code
Beneficiary Residence SSA Standard County Code*
Beneficiary Residence SSA Standard State Code
Beneficiary Sex Identification Code
State/County*

Appendix I: E-mails Sent From DESY

List of VOLSERS for Foreign Media Output

This e-mail contains the list of VOLSERS for foreign media output.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]

Sent: Wednesday, July 20, 2005 2:23 PM

To: DESY System User

Subject: DESY processing has finished for request 000009104.

Number of records in your output file - 100.

Name of your output file - FOREIGN.DMCART.WC85.@-----R0009104.OUT.

VOLSERS - DM4528

Number of records in your dropped file - 500.

Name of your dropped file - FOREIGN.DMCART.WC85.@-----R0009104.OUTD.

VOLSERS - DM4529

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Completed Request – Media In-House

This e-mail is sent to the user when a request is complete and their media is in house.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]

Sent: Friday, July 22, 2005 3:40 PM

To: DESY System User

Subject: DESY processing has finished for request 000005729.

Number of records in your output file - 922.

Name of your output file - P#DSY.@AAA2049.WC85.@-----R0005729.OUT.

Number of records in your dropped file - 71.

Name of your dropped file - P#DSY.@AAA2049.WC85.@-----R0005729.OUTD.

PLEASE NOTE: These output datasets will be DELETED at the DUA expiration date (07/21/2008)

UNLESS you do the following:

1. Extend the DUA for the project. This allows you to use the data you already created and qualifies you for extending DESY access privileges. Please contact Maribel Franey (MARIBEL.FRANEY@CMS.HHS.GOV, 410-786-0757) to extend your DUA.

2. Extend the tape expiration date. To do this, send an e-mail to TAPELIB@CMS.HHS.GOV containing the dataset names and VOLSERS, and request an extension of the dataset expiration date by one year.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

New Beneficiary Encrypted Files/Public Use Files (BEF/PUF) File Requested

This e-mail is sent to the DESY user to alert him/her when a new BEF/PUF file has been requested so s/he can create the file.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:21 PM
To: DESY System User
Subject: A new BEF/PUF file has been requested.

Please run job DSY#BPMT and its generated Job Control Language (JCL) to create the files requested.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Merge Restarted

This e-mail is sent when a merge has been restarted. DESY previously had problems with retention periods on restarts, but this issue has been resolved.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:21 PM
To: DESYProb
Subject: The following merge job was restarted – (jobname).

The above merge job was a successful restart. You need to verify the output files have no expiration date. Send an e-mail to SMG@CMS.HHS.GOV if the files have an expiration date.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

No Records Selected

This e-mail is sent when a request completes with no records selected.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:19 PM
To: DESY System User
Subject: DESY processing has finished for request 000005231.

No records were selected for your request.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Request Canceled

This e-mail is sent when a request has been cancelled by the system.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:19 PM
To: DESY System User
Subject: DESY Request 000005231 has been cancelled.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Processing Completed – Waiting on Privacy Accountability Database (PAD)

This e-mail is sent when DESY has completed processing but is waiting on PAD.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:20 PM
To: DESY System User
Subject: DESY processing has finished for request 000005231.

DESY has completed processing. The Privacy Accountability Database (PAD) processing has been initiated. Please monitor DADSS to confirm that PAD processing has completed for this request.

Number of records in your output file - 10.
Name of your output file - P#DSY.@AAA2049.WC85.@-----R0005231.OUT.

PLEASE NOTE: These output datasets will be DELETED at the DUA expiration date (07/19/2008) UNLESS you do the following:

1. Extend the DUA for the project. This allows you to use the data you already created and qualifies you for extending DESY access privileges. Please contact Maribel Franey (MARIBEL.FRANEY@CMS.HHS.GOV, 410-786-0757) to extend your DUA.
2. Extend the tape expiration date. To do this, send an e-mail to TAPELIB@CMS.HHS.GOV containing the dataset names and VOLSERS, and request an extension of the dataset expiration date by one year.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Empty User Input File

This e-mail is sent when the user enters an empty user input file.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:20 PM
To: DESY System User
Subject: DESY Request 000005231 has been cancelled due to an empty user input file.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Process Large Request Merge

This e-mail is sent when we have over 100 requests in a given merge to process.

From: DESY@CMS.HHS.GOV [<mailto:DESY@CMS.HHS.GOV>]
Sent: Wednesday, July 20, 2005 5:21 PM
To: DESYProb
Subject: The following job has over 100 request – (jobname)

The above job has generated JCLs for over 100 requests. You will need to manually split out and submit the EXCESS Peer Data System (PDS) members.

This e-mail was generated by the system. Please do not respond to this e-mail. Thank you.

Appendix J: DESY Training Scenarios

DESY Training Guide

Version 6.0

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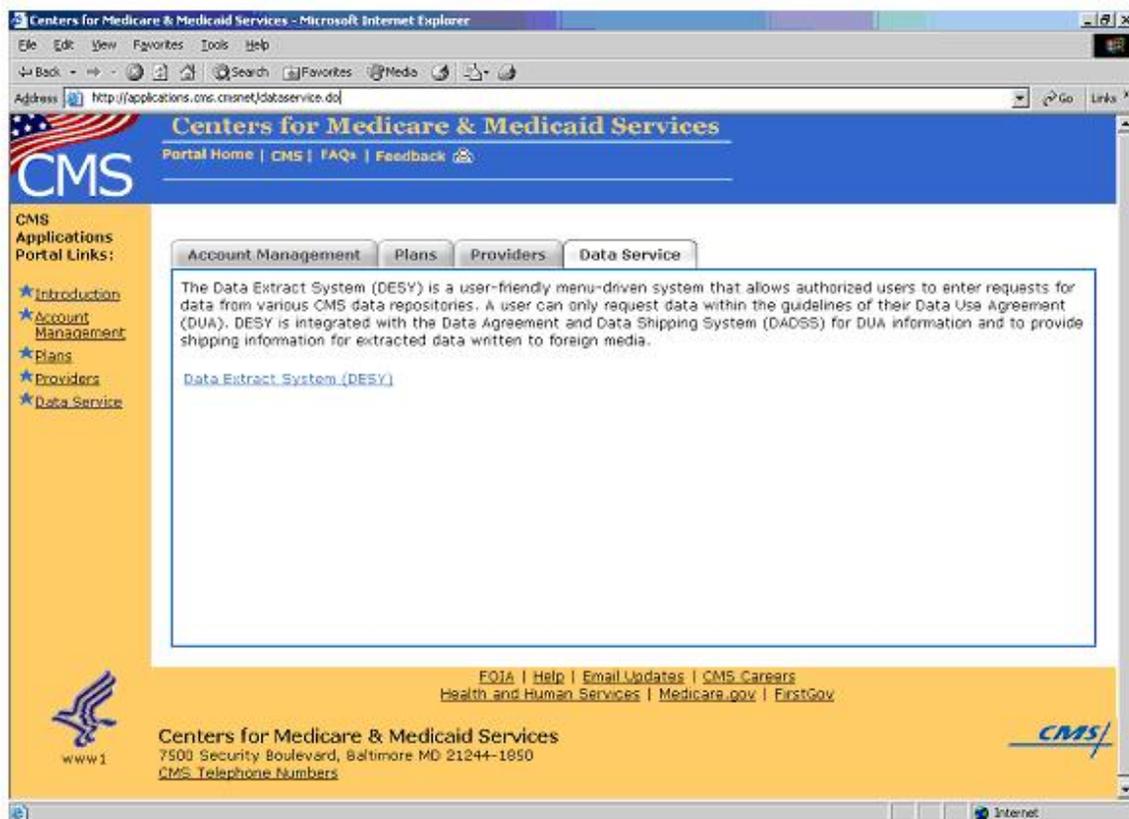
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Chapter 1: Application Portal

Open your Internet Explorer browser, and type in the URL for the extranet application portal (applications.cms.cmstest). The Application portal screen appears. Select the [Data Service](#) hyperlink. The following page appears:



Select the [Data Extract System \(DESY\)](#) hyperlink, which will launch the DESY web application/ Login Page in a new browser window.

Chapter 2: Login Page

Enter CMS mainframe username & password.

The screenshot shows a Microsoft Internet Explorer browser window titled "Data Extract System - Microsoft Internet Explorer". The address bar displays "http://32.90.52.229:9081/desy/fgon.do". The main content area features a blue header with the text "Centers for Medicare and Medicaid Services Data Extract System". Below the header, the text "please enter your CMS username and password" is displayed. There are two input fields: "username" and "password". A blue link labeled "Problems with your login?" is positioned below the password field. A large block of legal disclaimer text is present, starting with "UNAUTHORIZED ACCESS TO THIS COMPUTER SYSTEM IS PROHIBITED BY LAW". At the bottom of the form area is a "Login" button. The version information "version: 3.15 build: 0" is located in the bottom right corner of the form area. The browser's status bar at the bottom shows "Done" and "Internet".

Centers for Medicare and Medicaid Services Data Extract System

please enter your CMS username and password

username

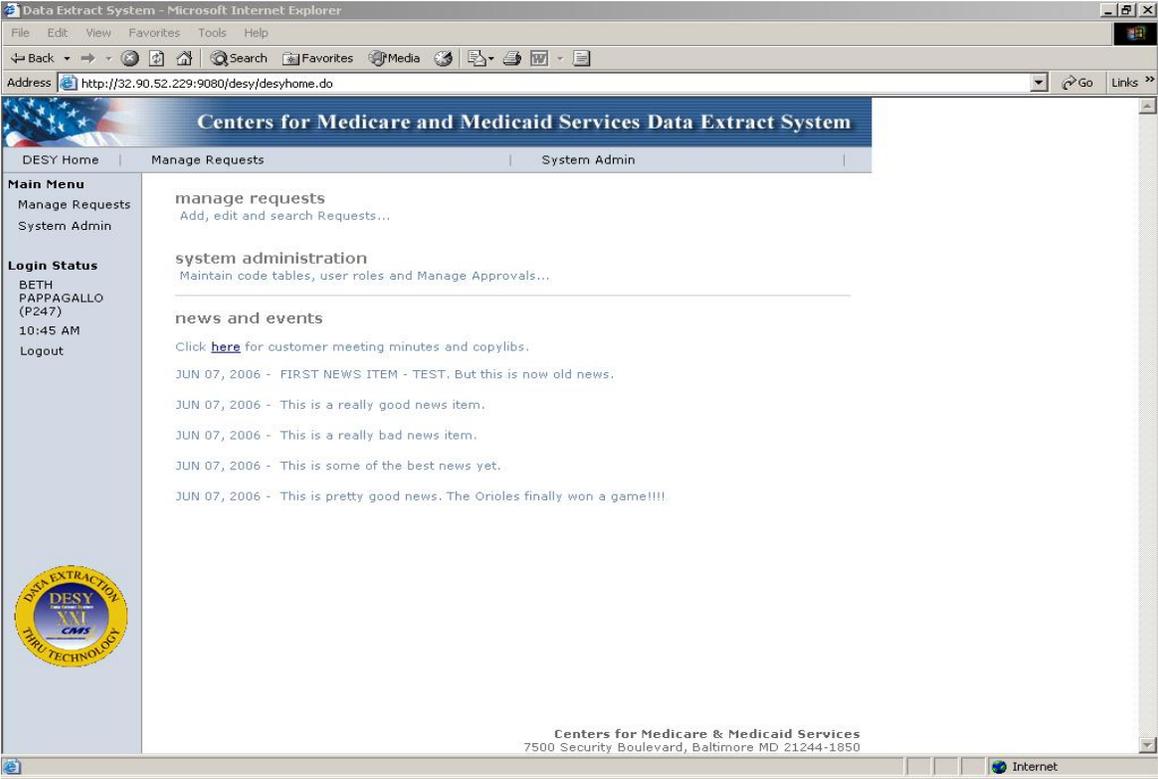
password

[Problems with your login?](#)

UNAUTHORIZED ACCESS TO THIS COMPUTER SYSTEM IS PROHIBITED BY LAW
(REFERENCE TITLE 18 U.S.C. SECTION 1030). The computer system which you are about to enter is maintained by the CENTERS for MEDICARE & MEDICAID SERVICES (CMS), and as such is an official United States Government computer system developed and maintained for access by authorized users only. If you are not authorized access to this system, you should immediately exit. Federal, State, and/or local laws may provide criminal penalties for any person illegally accessing or using a Government-owned or operated computer system. SECURITY REQUIREMENTS FOR AUTHORIZED USERS OF CMS'S COMPUTER SYSTEMS If you are authorized access to a CMS computer system containing sensitive information, do not disclose or lend your identification number and/or password to someone else. CMS federal staff may also be subject to the other computer security provisions outlined in Article 35 of the 1998 HCFA/AFGE Master Labor Agreement.

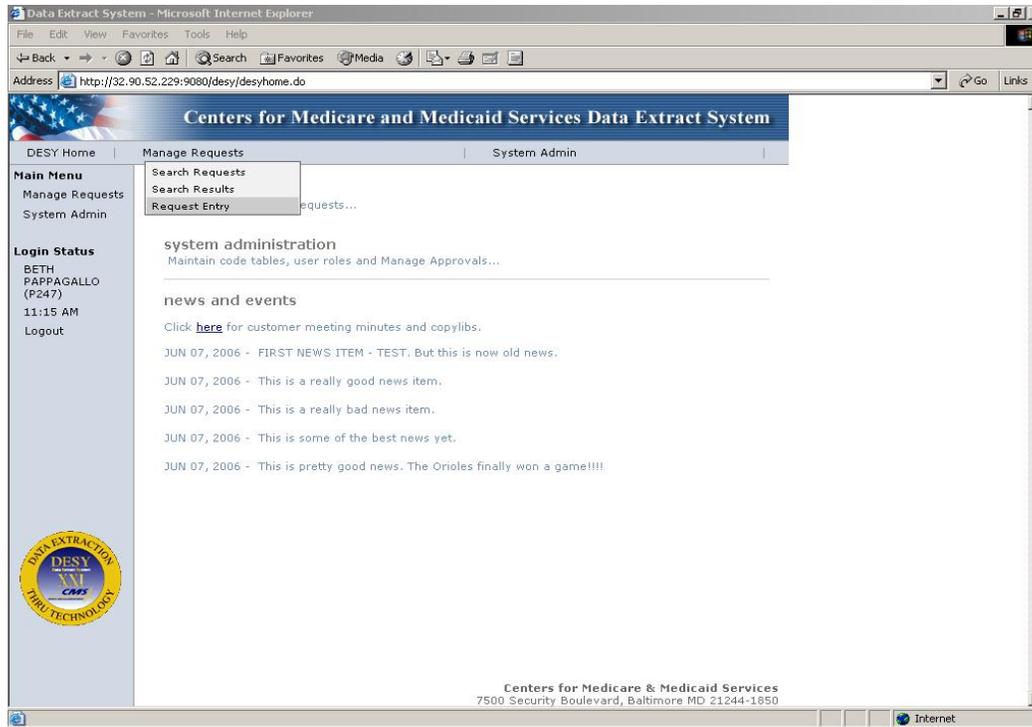
version: 3.15
build: 0

Chapter 3: Home Page



Chapter 4: Manage Requests

Request Entry can be accessed from the Manage Requests Section.



The Properties Page is the first page of Request Entry. It allows the user to select the DUA, Data Source, Data Type, Recipient, State, Year, and enter the Request Description and Output Identifier, if desired.

Centers for Medicare and Medicaid Services Data Extract System

DESY Home | Manage Requests | System Admin

Manage Requests

- Search Requests
- Search Results
- Request Entry**

request entry -

1-Properties | 2-Search Criteria | 3-Output | 4-Summary

DUA #: DESY Expiration Date:
Request User: **P247 - BETH PAPPAGALLO** Email Address: **beth-p@vips.com**
Data Source: Data Type:
DUA Study Name:

DUA #	Study Name	Exp Date	Requestor
12987	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12988	VIPS GROUP DUA	12/31/2006	SIG PYZIK
16167	VIPS GROUP DUA	05/08/2007	SIG PYZIK
16168	VIPS GROUP DUA	05/08/2007	HEATHER STEGAR
16169	VIPS GROUP DUA	05/09/2007	HEATHER STEGAR

Data Source: Select Datasource
Data Type: Select Data Type
Request Description:
Output File Identifier:

Next Save Clear

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

Request Entry

Request scenario #1:

DUA 16167
 Data Source: NCH
 Recipient: No Data Shipped
 Data Types: All Types
 State: Ohio
 Year: 2006
 Search Criteria Beneficiary Birth Date: less than 01/01/1935
 Beneficiary Race Code: Hispanic
 Beneficiary Sex Identification Code: Female
 Output: Whole record
 Compressed format

Use the properties page to begin entering the criteria specified above for this request. After entering all criteria, select Next to go to the Search Criteria page.

Note: The screens are dynamic and fields are presented based on the selections made by the user.

Centers for Medicare and Medicaid Services Data Extract System

DES Home | Manage Requests | System Admin

Manage Requests

- Search Requests
- Search Results
- Request Entry**

request entry -

1-Properties | 2-Search Criteria | 3-Output | 4-Summary

DUA #: **16167** DESY Expiration Date: **05/08/2007**
 Request User: **P247 - BETH PAPPAGALLO** Email Address: **beth-p@vips.com**
 Data Source: **NCH NEARLINE FILE** Data Type: **ALL TYPES**
 DUA Study Name: **VIPS GROUP DUA**

DUA #	Study Name	Exp Date	Requestor
12987	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12988	VIPS GROUP DUA	12/31/2006	SIG PYZIK
16167	VIPS GROUP DUA	05/08/2007	SIG PYZIK
16168	VIPS GROUP DUA	05/08/2007	HEATHER STEGAR
16169	VIPS GROUP DUA	05/09/2007	HEATHER STEGAR

Data Source: **NCH NEARLINE FILE** Recipient: **NO DATA SHIPPED**
 Data Type: **ALL TYPES** State: **Ohio**

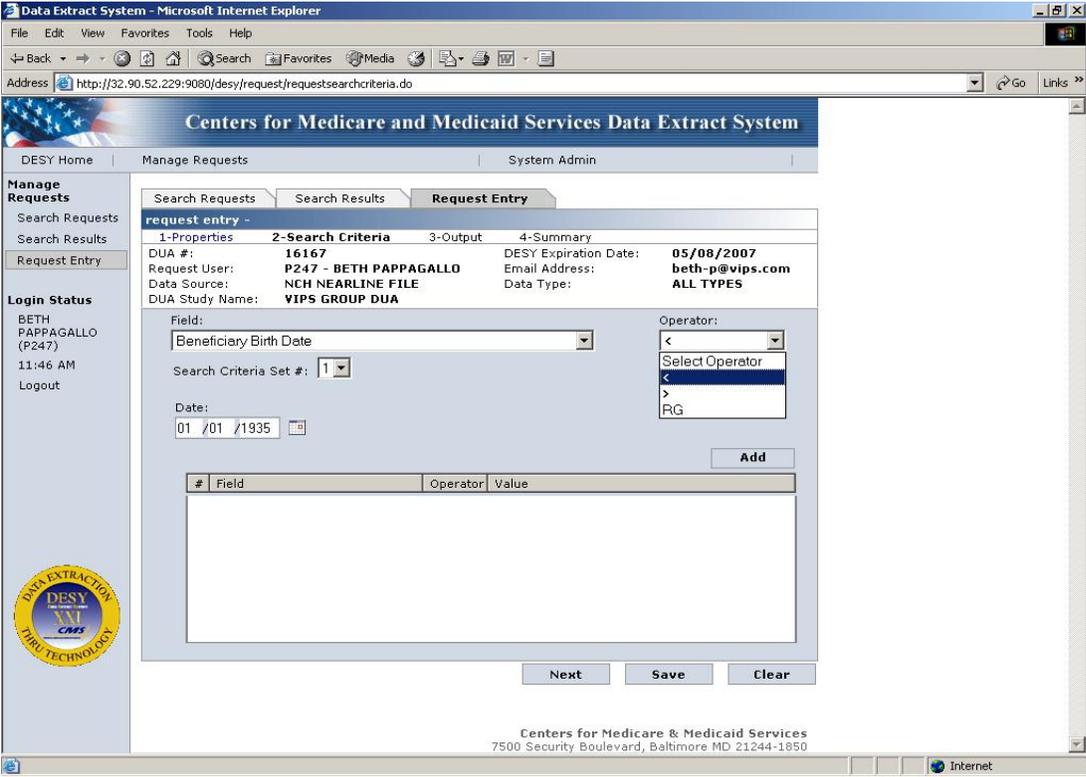
Request Description: **Hispanic Women born before 1935 in Ohio** Year(s), Updated: **2006 03/2006**
 Output File Identifier:

Next **Save** **Clear**

Centers for Medicare & Medicaid Services
 7500 Security Boulevard, Baltimore MD 21244-1850

After selecting each search criteria field, select an operator and then make a selection for the values. Select Add to save your selections. Select Next to go to the Output Page.

Beneficiary Birth Date Criteria:



Beneficiary Race Code criteria:

Data Extract System - Microsoft Internet Explorer

Address: <http://32.90.52.229:9080/desy/request/requestsearchcriteria.do#>

Centers for Medicare and Medicaid Services Data Extract System

DES Home | Manage Requests | System Admin

Manage Requests

Search Requests | Search Results | **Request Entry**

request entry -

1-Properties 2-**Search Criteria** 3-Output 4-Summary

DUA #: **16167** DESY Expiration Date: **05/08/2007**
 Request User: **P247 - BETH PAPPAGALLO** Email Address: **beth-p@vips.com**
 Data Source: **NCH NEARLINE FILE** Data Type: **ALL TYPES**
 DUA Study Name: **VIPS GROUP DUA**

Field: Operator:

Search Criteria Set #:

Lookup Value:

- Select Value
- Select Value
- Unknown
- White
- Black
- Other
- Asian
- Hispanic**
- North American Native

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

Beneficiary Sex ID Code Criteria and completed screen:

The screenshot shows the 'Centers for Medicare and Medicaid Services Data Extract System' (DESY) interface. The browser window title is 'Data Extract System - Microsoft Internet Explorer'. The address bar shows 'http://32.90.52.229:9062/desy/request/requestsearchcriteria.do#'. The page has a navigation bar with 'DESY Home', 'Manage Requests', and 'System Admin'. A left sidebar contains 'Manage Requests' (with sub-links for Search Requests, Search Results, and Request Entry), 'Login Status' (showing user BETH PAPPAGALLO (P247) at 2:39 PM), and a logo for 'DATA EXTRACTION DESY CMS THROUGH TECHNOLOGY'. The main content area has tabs for 'Search Requests', 'Search Results', and 'Request Entry'. Under 'Request Entry', there are sub-tabs for '1-Properties', '2-Search Criteria', '3-Output', and '4-Summary'. The '2-Search Criteria' tab is active, displaying request details: DUA #: 16167, Request User: P247 - BETH PAPPAGALLO, Data Source: NCH NEARLINE FILE, DUA Study Name: VIPS GROUP DUA, DESY Expiration Date: 05/08/2007, Email Address: beth-p@vips.com, and Data Type: ALL TYPES. Below this is a 'Field:' section with a dropdown menu set to 'Beneficiary Sex Identification Code' and an 'Operator:' dropdown set to '='. A 'Search Criteria Set #' dropdown is set to '1'. A 'Lookup Value:' section has a 'Select Value' dropdown and an 'Expand' button. An 'Add' button is located below the lookup section. A table lists the search criteria:

#	Field	Operator	Value	
1	Beneficiary Birth Date	<	19350101	Remove
1	Beneficiary Race Code	=	5 - Hispanic	Remove
1	Beneficiary Sex Identification Code	=	2 - Female	Remove

At the bottom of the criteria table are 'Next', 'Save', and 'Clear' buttons. The footer of the page reads 'Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850'.

The Output page is used to select the Output style and format. Select Next to go to the Summary Page.

The screenshot shows a web browser window titled "Data Extract System - Microsoft Internet Explorer". The address bar shows the URL: `http://32.90.52.229:9080/desy/request/requestoutput.do`. The page header includes "Centers for Medicare and Medicaid Services Data Extract System" and navigation links for "DESYS Home", "Manage Requests", and "System Admin".

The main content area is titled "request entry -" and is divided into four tabs: "1-Properties", "2-Search Criteria", "3-Output", and "4-Summary". The "3-Output" tab is active. It displays the following information:

DUA #:	16167	DESYS Expiration Date:	05/08/2007
Request User:	P247 - BETH PAPPAGALLO	Email Address:	beth-p@vips.com
Data Source:	NCH NEARLINE FILE	Data Type:	ALL TYPES
DUA Study Name:	VIPS GROUP DUA		

Below this information, there is a section for "Output Type:" with a dropdown menu. The dropdown menu is open, showing the following options:

- Select an Output Type
- Select an Output Type
- WHOLE RECORD OUTPUT**
- FINDER FILE VIEW
- SELECTED VIEW
- Standard BEF-PUF View
- efwh

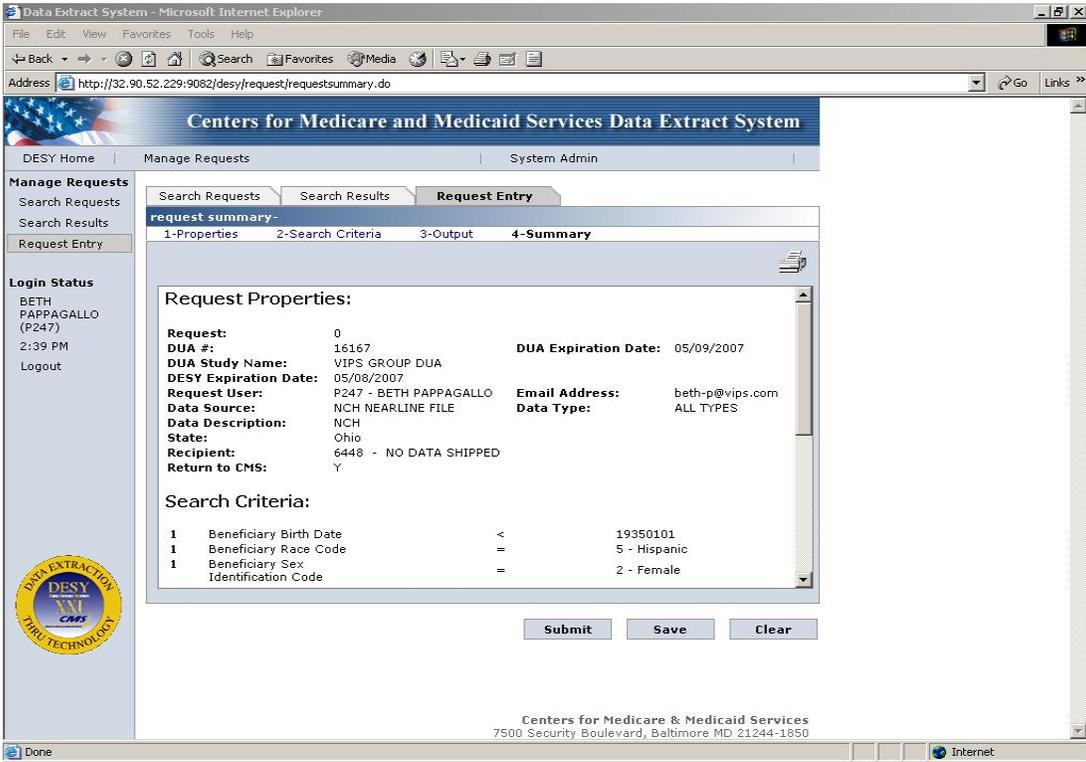
To the right of the dropdown menu, there is a checkbox labeled "Compressed Format" which is checked. At the bottom of the page, there are three buttons: "Next", "Save", and "Clear".

The footer of the page contains the text: "Centers for Medicare & Medicaid Services 7500 Security Boulevard, Baltimore MD 21244-1850".

The Summary Page displays the information that was entered on the previous pages. At this point the request is ready to be submitted for approval. The user can select the Submit button to do so.

The Save button is present on each page of the request, as the user can save their work and return to it later. Only those selections made prior to pressing the Save button will be saved.

The Clear button is used to delete the request if it hasn't been saved or submitted, or to clear the pages if the request has been saved or submitted.



Request scenario #2:

DUA 12987
 Data Source: NCH
 Recipient: No Data Shipped
 Data Types: All Types
 State: All States
 Year: 1999
 Search Criteria: Bene Contact Mailing Zip Code with a User Input
 File
 Claim Diagnosis Code
 Output: Standard BEF_PUF
 Compressed format
 Comma Delimited

Enter the criteria specified above for this Request. After entering all criteria, select Next to go to the Search Criteria page.

The screenshot shows the 'Data Extract System' web application in Internet Explorer. The browser address bar shows 'http://32.90.52.229:9080/desy/request/requestproperties.do'. The page title is 'Centers for Medicare and Medicaid Services Data Extract System'. The navigation menu includes 'DESY Home', 'Manage Requests', and 'System Admin'. The main content area is titled 'request entry -' and has four tabs: '1-Properties', '2-Search Criteria', '3-Output', and '4-Summary'. The '1-Properties' tab is active, showing the following details:

- DUA #: 12987
- Request User: P247 - BETH PAPPAGALLO
- Data Source: NCH NEARLINE FILE
- DUA Study Name: VIPS GROUP DUA
- DESY Expiration Date: 12/31/2006
- Email Address: beth-p@vips.com
- Data Type: ALL TYPES

Below these details is a table of DUA entries:

DUA #	Study Name	Exp Date	Requestor
12987	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12988	VIPS GROUP DUA	12/31/2006	SIG PYZIK
16167	VIPS GROUP DUA	05/08/2007	SIG PYZIK
16168	VIPS GROUP DUA	05/08/2007	HEATHER STEGAR
16169	VIPS GROUP DUA	05/09/2007	HEATHER STEGAR

Below the table is a form for entering request details:

- Data Source: NCH NEARLINE FILE
- Recipient: NO DATA SHIPPED
- Data Type: ALL TYPES
- State: All States
- Request Description: NCH with user input file
- Year(s), Updated: 2006 03/2006, 2005 03/2006, 2004 06/2005, 2003 06/2004

At the bottom of the form are three buttons: 'Next', 'Save', and 'Clear'. The footer of the page reads: 'Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850'.

Enter the Bene Contact Mailing Zip Code with a User Input File, and a Claim Diagnosis Code equal to 296 on the Search Criteria page. Select the Add button to put the search criteria into the box before entering the next one.

The screenshot shows the 'Centers for Medicare and Medicaid Services Data Extract System' (DESY) web application. The browser window title is 'Data Extract System - Microsoft Internet Explorer'. The address bar shows 'http://32.90.52.229:9080/desy/request/requestsearchcriteria.do'. The page has a navigation bar with 'DESY Home', 'Manage Requests', and 'System Admin'. A left sidebar contains 'Manage Requests' (with sub-links for Search Requests, Search Results, and Request Entry), and 'Login Status' for user BETH PAPPAGALLO (P247) at 3:59 PM. The main content area is titled 'request entry' and has tabs for '1-Properties', '2-Search Criteria', '3-Output', and '4-Summary'. The '2-Search Criteria' tab is active, displaying request details: DUA # 12987, Request User P247 - BETH PAPPAGALLO, Data Source NCH NEARLINE FILE, DUA Study Name VIPS GROUP DUA, DESY Expiration Date 12/31/2006, and Email Address beth-p@vips.com. Below this is a form for adding search criteria with 'Field' and 'Operator' dropdowns, and a 'Search Criteria Set #' dropdown. A table below the form lists the current criteria:

#	Field	Operator	Value	
1	Beneficiary Mailing Contact ZIP Code	=	USER INPUT FILE	Remove
1	Claim Diagnosis Code	=	296	Remove

At the bottom of the form are 'Next', 'Save', and 'Clear' buttons. The footer of the page reads 'Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850'. A 'DATA EXTRACTION DESY CMH THRU TECHNOLOGY' logo is in the bottom left corner.

Select Output criteria and then select the Next button.

Data Extract System - Microsoft Internet Explorer

Address: <http://32.90.52.229:9080/desy/request/requestoutput.do>

Centers for Medicare and Medicaid Services Data Extract System

DESY Home | Manage Requests | System Admin

request entry -

1-Properties | 2-Search Criteria | **3-Output** | 4-Summary

DUA #: **12987** DESY Expiration Date: **12/31/2006**
 Request User: **P247 - BETH PAPPAGALLO** Email Address: **beth-p@vips.com**
 Data Source: **NCH NEARLINE FILE** Data Type: **ALL TYPES**
 DUA Study Name: **VIPS GROUP DUA**

Output Type: **Standard BEF-PUF View** Compressed Format
 CommaDelimited

Selected Fields:

- Beneficiary Birth Date
- Beneficiary Identification Code
- Beneficiary Race Code
- Beneficiary Residence SSA Standard County Code
- Beneficiary Residence SSA Standard State Code

Next **Save** **Clear**

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

Done Internet

The Summary Page displays the information selected in this request.

The screenshot shows a web browser window titled "Data Extract System - Microsoft Internet Explorer". The address bar shows the URL: <http://32.90.52.229:9082/desy/request/requestsummary.do>. The page header includes "Centers for Medicare and Medicaid Services Data Extract System" with navigation links for "DESY Home", "Manage Requests", and "System Admin".

The main content area is titled "request summary" and has tabs for "Search Requests", "Search Results", and "Request Entry". Below these tabs are sub-tabs: "1-Properties", "2-Search Criteria", "3-Output", and "4-Summary". The "1-Properties" tab is active, displaying the following information:

Request Properties:

Request:	0	DUA Expiration Date:	12/31/2006
DUA #:	12987		
DUA Study Name:	VIPS GROUP DUA		
DESY Expiration Date:	12/31/2006		
Request User:	P247 - BETH PAPPAGALLO	Email Address:	beth-p@vips.com
Data Source:	NCH NEARLINE FILE	Data Type:	ALL TYPES
Data Description:	NCH		
State:	All States		
Recipient:	6448 - NO DATA SHIPPED		
Return to CMS:	Y		

Search Criteria:

1	Beneficiary Mailing	User	TEST, Start Pos: 1, Header Pos: 0
	Contact ZIP Code	Input File	
1	Claim Diagnosis Code	=	296

At the bottom of the form are three buttons: "Submit", "Save", and "Clear".

The footer of the page contains the text: "Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850".

After the request is submitted, the status information is updated.

The screenshot shows a web browser window titled "Data Extract System - Microsoft Internet Explorer". The address bar shows the URL: `http://32.90.52.229:9080/desy/request/requests/summary.do`. The page header includes "Centers for Medicare and Medicaid Services Data Extract System" and navigation links for "DESJ Home", "Manage Requests", and "System Admin".

The main content area is titled "request summary" and contains the following information:

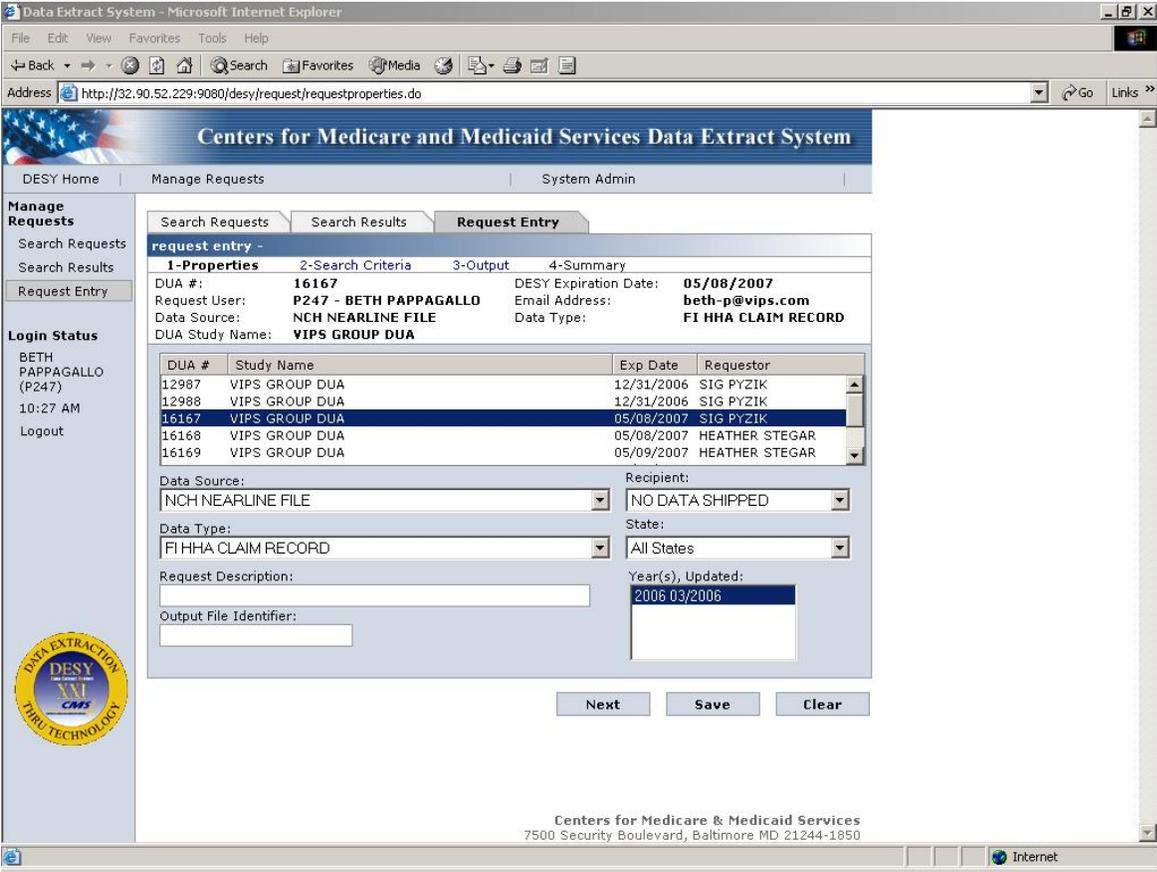
- Request Status Information:**
 - Request Submitted:** 76508
 - Request Status:** Pending Approval
 - Time:** Wed Jun 14 16:33:32 EDT 2006
- The following requests were generated:
- Request ID:** 76508
- Year:** 1999
- Status:** Pending Approval
- Output file specification:** FOREIGN.DMCART.P247.@-----R0076508.OUT
- Copybook file specification:** FOREIGN.DMCART.P247.@-----R0076508.VCPY
- Dropped file specification:**

A "Clear" button is located at the bottom right of the summary box. The footer of the page reads: "Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850".

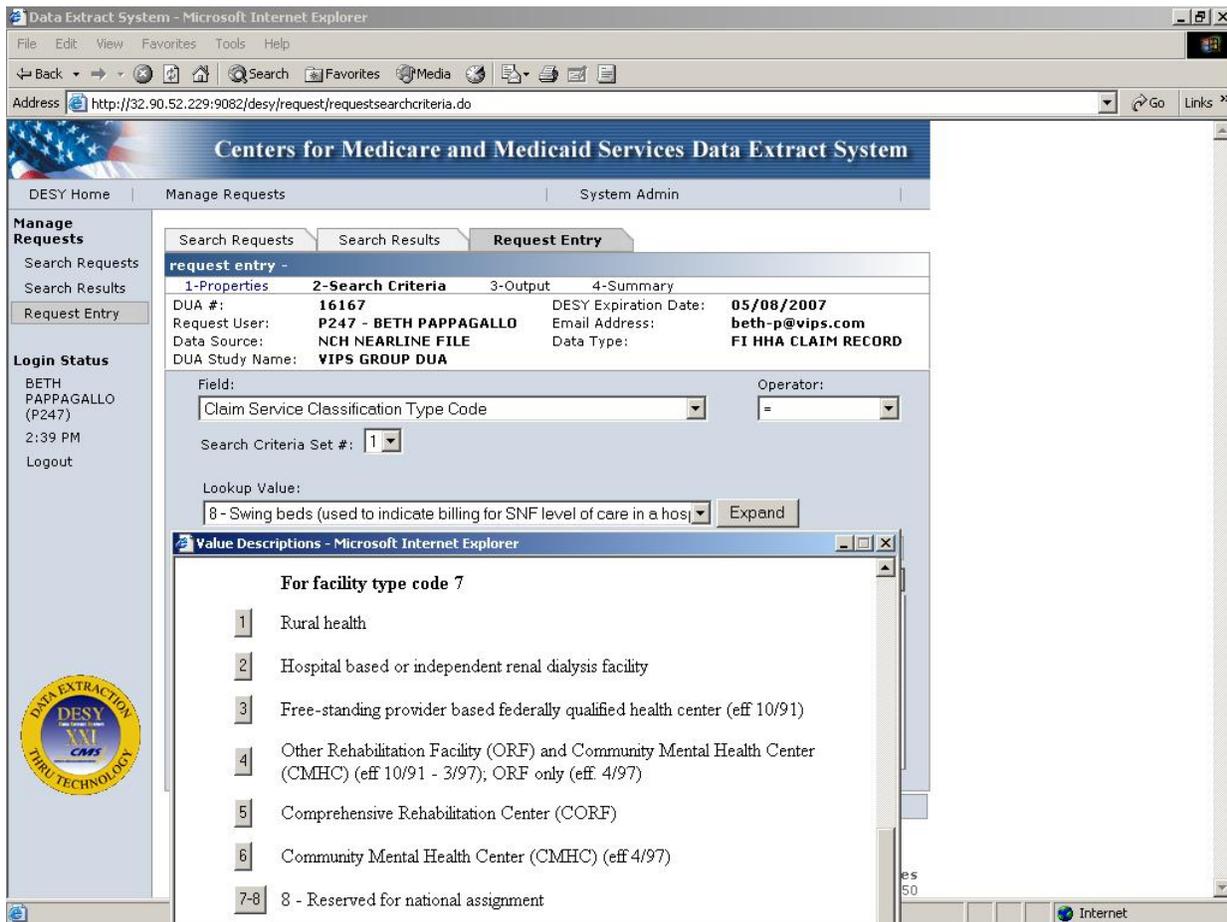
Request scenario #3:

- DUA 16167
- Data Source: NCH
- Recipient: No Data Shipped
- Data Types: FI HHA claim record
- State: All States
- Year: 2006
- Search Criteria (required): Claim Service Classification Type Code
- Output: Select Available Fields
 - Compressed format
 - Comma Delimited
 - Do Not Include Dropped Records
 - Select Available Fields: Beneficiary Birth Date
 - Beneficiary mailing Contact Zip Code
 - Beneficiary Residence SSA Standard State Code

Select the Criteria as mentioned above on the Properties page. Select Next to get to the Search Criteria Page



Note that the Next button is disabled. Selection Criteria is required because All States were selected on the properties page. Select Claim Service Classification Type Code on the search criteria page and = as the operator. Select the drop down arrow for the lookup value box. This box does not dynamically reset its length, and long descriptions such as these may not be completely displayed. The Expand button to the right of the lookup value list box will display all values and descriptions in full. Select Next to continue to the Output page.



The screenshot shows the 'Data Extract System - Microsoft Internet Explorer' browser window. The address bar shows the URL: <http://32.90.52.229:9082/desy/request/requestsearchcriteria.do>. The page title is 'Centers for Medicare and Medicaid Services Data Extract System'. The navigation menu includes 'DESY Home', 'Manage Requests', and 'System Admin'. The main content area is titled 'request entry -' and has tabs for 'Search Requests', 'Search Results', and 'Request Entry'. The 'Request Entry' tab is active, showing a form with the following details:

1-Properties	2-Search Criteria	3-Output	4-Summary
DUA #:	16167	DESY Expiration Date:	05/08/2007
Request User:	P247 - BETH PAPPAGALLO	Email Address:	beth-p@vips.com
Data Source:	NCH NEARLINE FILE	Data Type:	FI HHA CLAIM RECORD
DUA Study Name:	VIPS GROUP DUA		

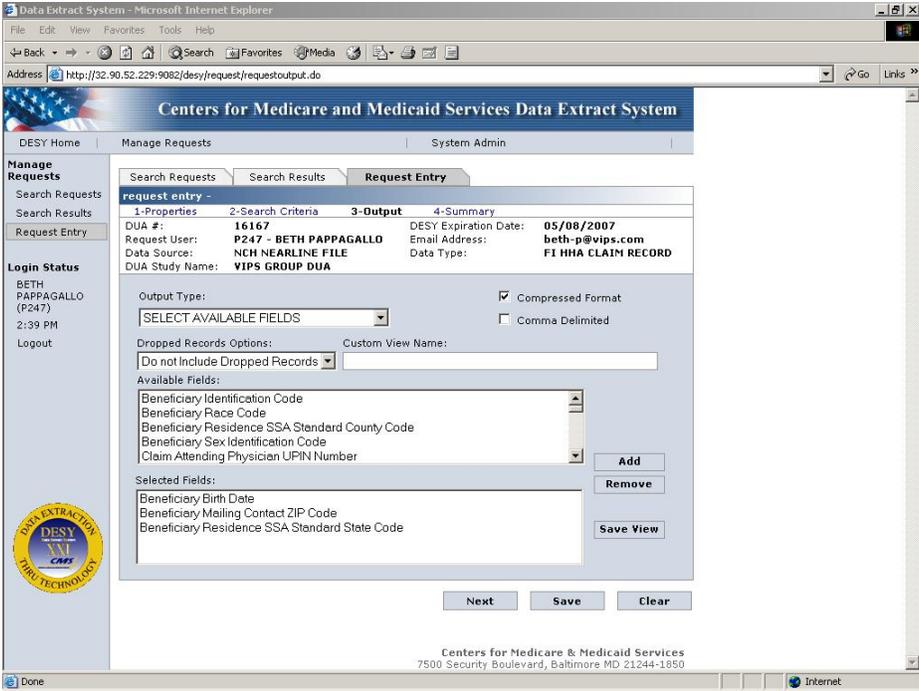
Below the table, the 'Field' dropdown is set to 'Claim Service Classification Type Code' and the 'Operator' dropdown is set to '='. The 'Search Criteria Set #' is '1'. The 'Lookup Value' dropdown is set to '8 - Swing beds (used to indicate billing for SNF level of care in a hos)'. An 'Expand' button is visible to the right of the lookup value.

An inset window titled 'Value Descriptions - Microsoft Internet Explorer' is open, showing a list of facility type codes:

- For facility type code 7**
- 1 Rural health
- 2 Hospital based or independent renal dialysis facility
- 3 Free-standing provider based federally qualified health center (eff 10/91)
- 4 Other Rehabilitation Facility (ORF) and Community Mental Health Center (CMHC) (eff 10/91 - 3/97); ORF only (eff. 4/97)
- 5 Comprehensive Rehabilitation Center (CORF)
- 6 Community Mental Health Center (CMHC) (eff 4/97)
- 7-8 8 - Reserved for national assignment

Depending on the Criteria from the Properties Page, the appropriate selections are dynamically populated on the Output page.

On the Output Page, select the Select Available Fields Output Type, do not include Dropped Records, and select the fields: Beneficiary Birth Date, Beneficiary mailing Contact Zip Code, Beneficiary Residence SSA Standard State Code. Select the Add button to place them in the Selected Fields box. Select the next button to proceed to the Summary Page. Select the Save Button.



Dropped Record Types:

Data Extract System - Microsoft Internet Explorer

Address: <http://32.90.52.229:9080/desy/request/requestoutput.do>

Centers for Medicare and Medicaid Services Data Extract System

DESY Home | Manage Requests | System Admin

Manage Requests

Search Requests | Search Results | **Request Entry**

request entry -

1-Properties	2-Search Criteria	3-Output	4-Summary
DUA #:	16167	DESY Expiration Date:	05/08/2007
Request User:	P247 - BETH PAPPAGALLO	Email Address:	beth-p@vips.com
Data Source:	NCH NEARLINE FILE	Data Type:	FI HHA CLAIM RECORD
DUA Study Name:	VIPS GROUP DUA		

Output Type: Compressed Format

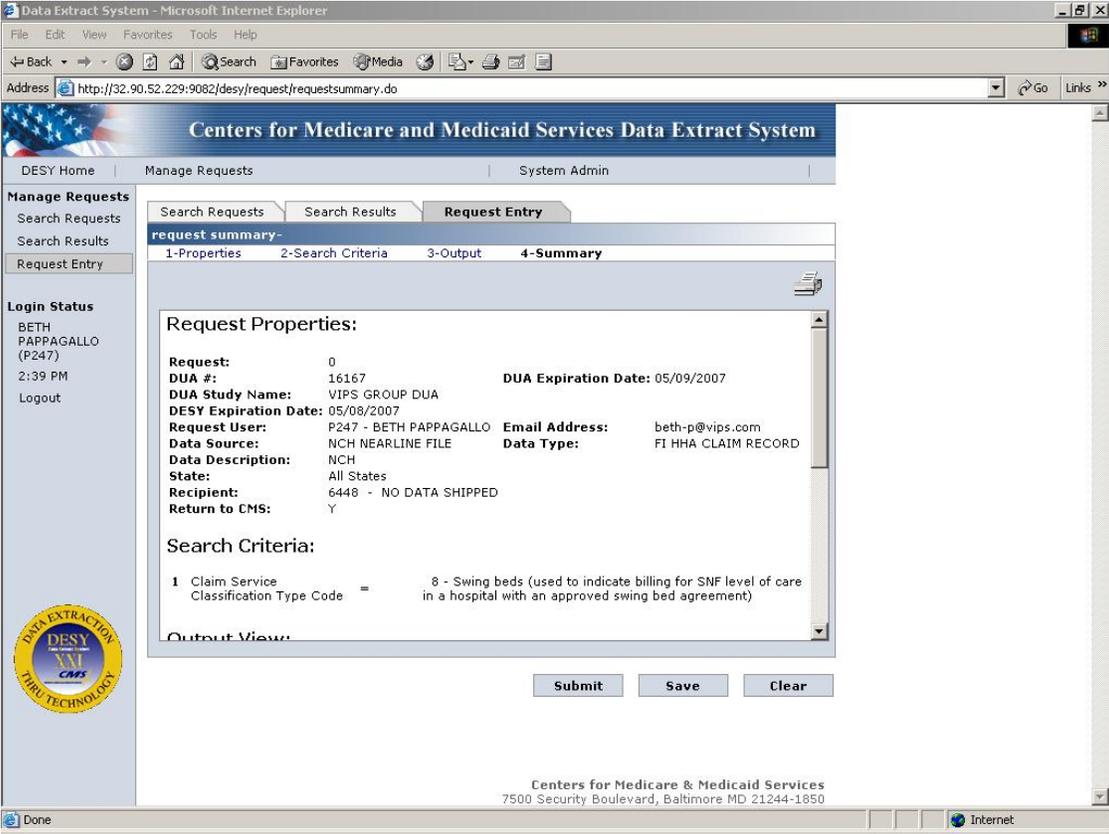
Dropped Records Options:

(dropdown menu)

Next Save Clear

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The Summary Page before Submission:



Data Extract System - Microsoft Internet Explorer

Address: http://32.90.52.229:9082/desy/request/requestssummary.do

Centers for Medicare and Medicaid Services Data Extract System

DESYS Home | Manage Requests | System Admin

Manage Requests

Search Requests | Search Results | **Request Entry**

request summary -

1-Properties | 2-Search Criteria | 3-Output | **4-Summary**

Output View:

Output Desc: SELECT AVAILABLE FIELDS
File Iden:
Dropped Records: Excluded **Comma Delimited:** No
Format: **Media Type:** 3490 COMPRESSED

Selected Fields:

Beneficiary Birth Date
 Beneficiary Mailing Contact ZIP Code
 Beneficiary Residence SSA Standard State Code

Request Status Information:

Request Submitted: 0 **Time:**

Submit Save Clear

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 7500 Security Boulevard, Baltimore MD 21244-1850

The Summary Page after submission:

The screenshot shows a web browser window titled "Data Extract System - Microsoft Internet Explorer". The address bar shows the URL: `http://32.90.52.229:9082/desy/request/requestsubmitsummary.do`. The page header features the "Centers for Medicare and Medicaid Services Data Extract System" logo and navigation links for "DESY Home", "Manage Requests", and "System Admin".

The main content area is titled "request summary" and contains the following sections:

- Request Properties:**
 - Request:** 13324
 - DUA #:** 16167
 - DUA Expiration Date:** 05/09/2007
 - DUA Study Name:** VIPS GROUP DUA
 - DESY Expiration Date:** 05/08/2007
 - Request User:** P247 - BETH PAPPAGALLO
 - Email Address:** beth-p@vips.com
 - Data Source:** NCH NEARLINE FILE
 - Data Type:** FI HHA CLAIM RECORD
 - Data Description:** NCH
 - State:** All States
 - Recipient:** 6448 - NO DATA SHIPPED
 - Return to CMS:** Y
- Search Criteria:**
 - 1 Claim Service Classification Type Code = 8 - Swing beds (used to indicate billing for SNF level of care in a hospital with an approved swing bed agreement)
- Output View:** (Empty section)

A "Clear" button is located at the bottom right of the request summary area. The footer of the page includes the text: "Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850".

Data Extract System - Microsoft Internet Explorer

Address: http://32.90.52.229:9002/desy/request/requestsummary.do

Centers for Medicare and Medicaid Services Data Extract System

DESY Home | Manage Requests | System Admin

Manage Requests
Search Requests
Search Results
Request Entry

Login Status
BETH PAPPAGALLO (P247)
2:39 PM
Logout

request summary

Request Properties:

Request: 13324
 DIA #: 16167 DIA Expiration Date: 05/09/2007
 DIA Study Name: VIPS GROUP DUA
 DESY Expiration Date: 05/08/2007
 Request User: P247 - BETH PAPPAGALLO Email Address: beth-p@vips.com
 Data Source: NCH NEARLINE FILE Data Type: FI HHA CLAIM RECORD
 Data Description: NCH
 State: All States
 Recipient: 6448 - NO DATA SHIPPED
 Return to CMS: Y

Search Criteria:

1 Claim Service Classification Type Code = 0 - Swing beds (used to indicate billing for SNF level of care in a hospital with an approved swing bed agreement)

Output View:

Output Desc: SELECTED VIEW
 File Ids:
 Dropped Records: Excluded Comma Delimited: Yes
 Format: Sequential Variable Blocked Media Type: S498 COMPRESSED

Selected Fields:

Beneficiary Birth Date
 Beneficiary Mailing Contact ZIP Code
 Beneficiary Residence SSA Standard State Code

Request Status Information:

Request Submitted: 13324 Time: Fri Jul 23 15:27:06 EDT 2006

The following requests were generated:

Request ID: 13324
 Year: 2006 Latest Update Date: 04/20/06 Status: PENDING WORKING
 Output file specification: FOREIGN.DMCART.P247@-----R0013324.OUT
 Copybook file specification: FOREIGN.DMCART.P247@-----R0013324.VCOPY

For Internal Use Only:

PAD: Y
 Encryption Method: IDENTIFIABLE

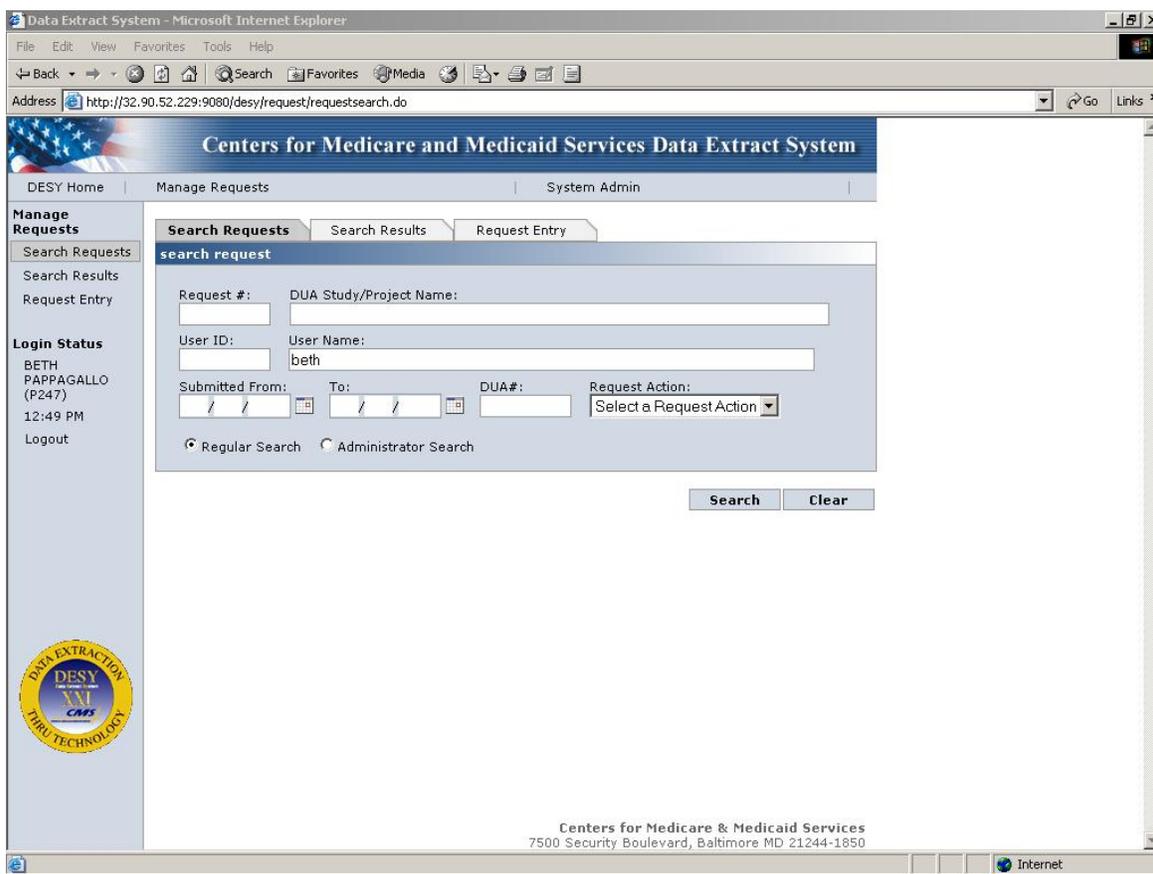
Chapter 5: Search Requests

Search Requests

The search requests page contains many fields to search with. They are Request Number, DUA Study/Project Name, User ID, User Name, Submitted From Date, To Date, DUA Number, Request Action (Saved or Submitted), and Regular or Administrator Search.

The choice of Regular or Administrator search is available to System Administrators only. The Administrator search shows request summaries only for all users. The Regular search allows the Copy function as well as the Summary function. The Edit function is only available to use when it is the SA's request.

Logged in as an SA and searching on my own requests:



The Search Results page displays the search criteria and the search results.

Centers for Medicare and Medicaid Services Data Extract System

DESY Home | Manage Requests | System Admin

Manage Requests
Search Requests | **Search Results** | Request Entry

Search Results

Request Entry

Login Status
BETH
PAPPAGALLO
(P247)
12:49 PM
Logout

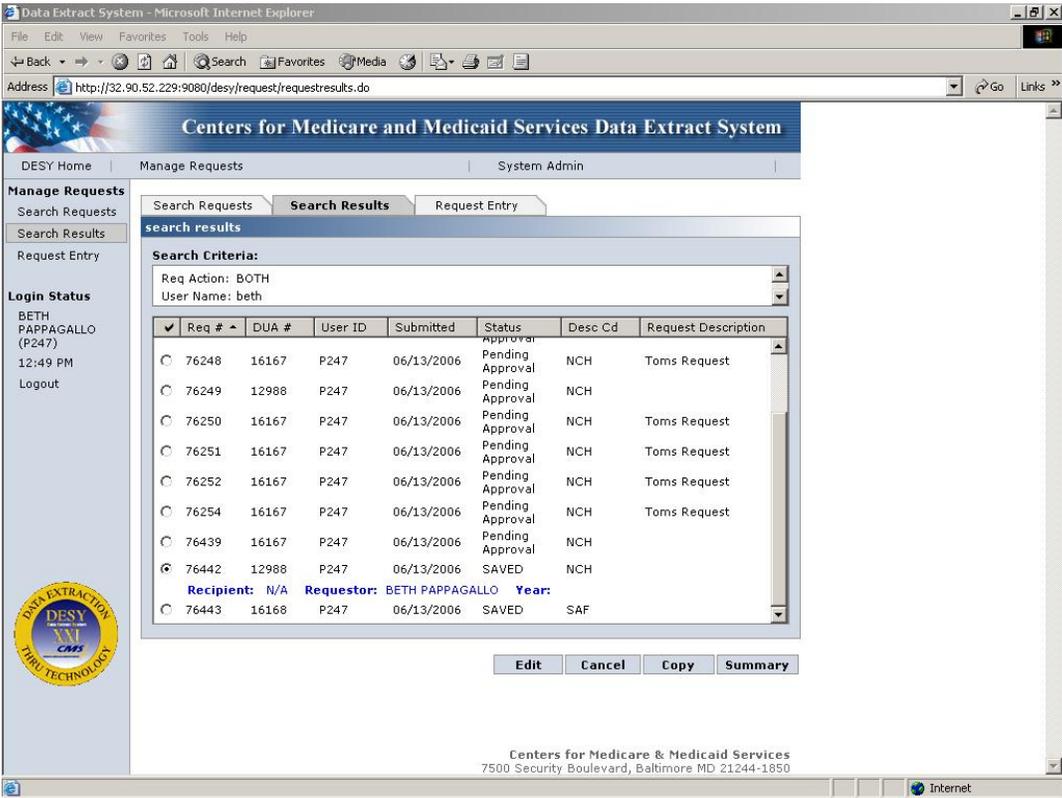
Search Criteria:
Req Action: BOTH
User Name: beth

Req #	DUA #	User ID	Submitted	Status	Desc Cd	Request Description
<input type="radio"/> 76246	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76248	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76249	12988	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76250	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76251	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76252	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76254	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76439	16167	P247	06/13/2006	Pending Approval	NCH	Toms Request
<input type="radio"/> 76442	12988	P247	06/13/2006	SAVED	NCH	Toms Request
<input type="radio"/> 76443	16168	P247	06/13/2006	SAVED	SAF	Toms Request

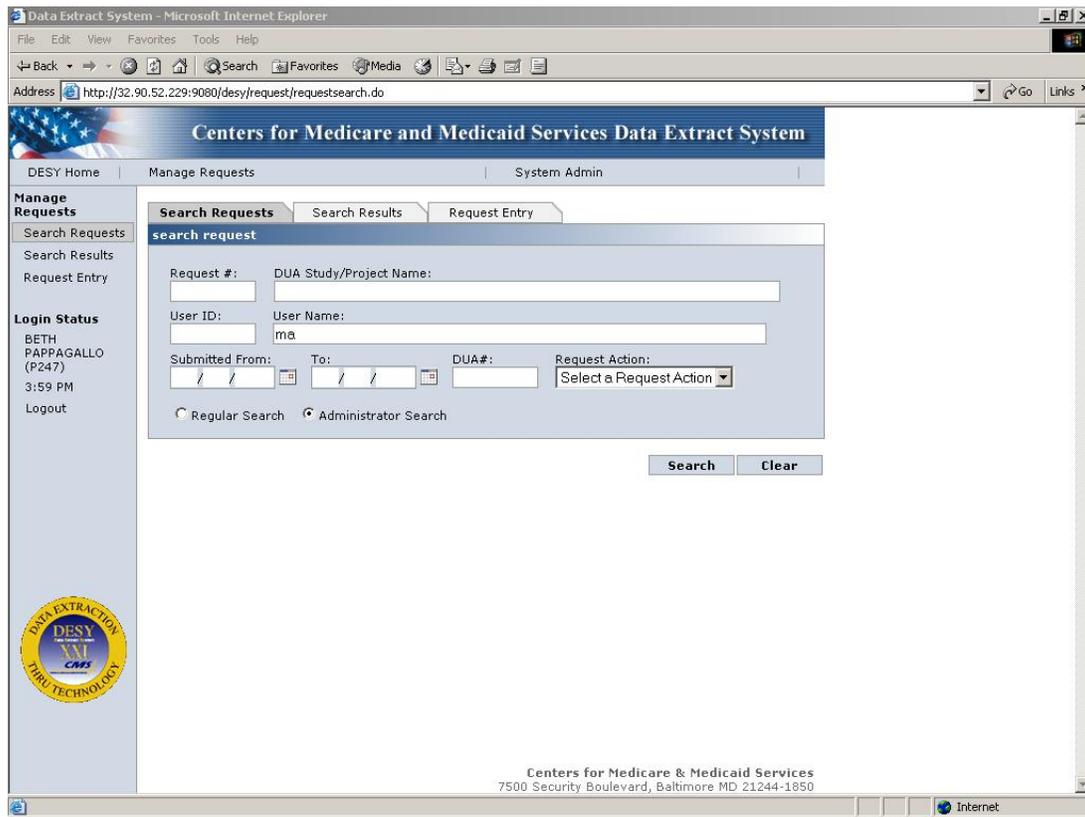
Edit Cancel Copy Summary

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7500 Security Boulevard, Baltimore MD 21244-1850

Selecting the radio button for a specific request enables the buttons that allow the user to Edit and Copy a Request, as well as see the request summary.



Logged in as SA doing a Administrator search with a string in user name:



Summary and Cancel are the only available function for a selected request.

The screenshot shows the 'Data Extract System' web application in Microsoft Internet Explorer. The browser address bar shows the URL: <http://32.90.52.229:9080/desy/request/requestresults.do>. The page title is 'Centers for Medicare and Medicaid Services Data Extract System'. The navigation menu includes 'DESY Home', 'Manage Requests', and 'System Admin'. The main content area is titled 'search results' and contains a 'Search Criteria' section with 'Req Action: BOTH' and 'User Name: ma'. Below this is a table of search results with columns: 'Req #', 'DUA #', 'User ID', 'Submitted', 'Status', 'Desc Cd', and 'Request Description'. The first row is selected, showing request 9326 with DUA 15758, User ID B1M3, submitted on 06/14/2006, with status 'Summary' and description 'test nch data d...'. Below the table are buttons for 'Edit', 'Cancel', 'Copy', and 'Summary'. The footer of the page provides contact information for the Centers for Medicare & Medicaid Services.

Search Criteria:
Req Action: BOTH
User Name: ma

Req #	DUA #	User ID	Submitted	Status	Desc Cd	Request Description
9326	15758	B1M3	06/14/2006	Summary	NCH	test nch data d...
9327	15761	B1M3	06/14/2006	Summary	SAF-HH	test specific d...
75967	12364	C19I	06/14/2006	Submitted		
75980	12364	C19I	06/14/2006	Submitted	SAF	
75986	16167	R2GX	06/14/2006	Submitted		Toms first dual...
75997	16167	C19I	06/14/2006	Submitted		
75998	16167	C19I	06/14/2006	Submitted		
75999	16167	C19I	06/14/2006	Submitted		
76000	16167	C19I	06/14/2006	SUPER		
76001	16167	C19I	06/14/2006	Submitted		
76002	16167	C19I	06/14/2006	Submitted		

Buttons: Edit, Cancel, Copy, Summary

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

Edit a Saved Request

Search for the saved Request. For example, on the search criteria page you can enter the user name and select the Saved status. Then select the Search button.

Select a request and then select the Edit button.

The screenshot shows the 'Data Extract System - Microsoft Internet Explorer' window. The browser address bar shows 'http://32.90.52.229:9080/desy/request/requestresults.do'. The page title is 'Centers for Medicare and Medicaid Services Data Extract System'. The navigation menu includes 'DES Home', 'Manage Requests', and 'System Admin'. The 'Manage Requests' section is active, with sub-tabs for 'Search Requests', 'Search Results', and 'Request Entry'. The 'Search Results' tab is selected, showing a search criteria of 'Req Action: SAVED'. Below the search criteria is a table of search results with columns: 'Req #', 'DUA #', 'User ID', 'Submitted', 'Status', 'Desc Cd', and 'Request Description'. The first row is selected, showing 'Req # 76399', 'DUA # 12987', 'User ID P247', 'Submitted 06/13/2006', 'Status SAVED', 'Desc Cd NCH', and 'Request Description'. Below the table are buttons for 'Edit', 'Cancel', 'Copy', and 'Summary'. The footer of the page includes the text 'Centers for Medicare & Medicaid Services 7500 Security Boulevard, Baltimore MD 21244-1850' and a logo for 'DATA EXTRACTION DESY CMS THRU TECHNOLOGY'.

Req #	DUA #	User ID	Submitted	Status	Desc Cd	Request Description
76399	12987	P247	06/13/2006	SAVED	NCH	
76401	16167	A2AK	06/13/2006	SAVED	NCH	
76403	16167	R2GX	06/13/2006	SAVED	NCH	
76404	16167	R2GX	06/13/2006	SAVED	NCH	
76408	16167	B1X1	06/13/2006	SAVED	NCH	
76409	16167	R2GX	06/13/2006	SAVED	NCH	
76413	16167	A2AK	06/13/2006	SAVED	NCH	
76415	16167	A2AK	06/13/2006	SAVED	NCH	
76416	16168	A2AK	06/13/2006	SAVED	SAF	
76417	16167	A2AK	06/13/2006	SAVED	NCH	
76418	16168	A2AK	06/13/2006	SAVED	SAF	

The Edit button will take you to the Properties page of the Request.

The screenshot shows the 'Centers for Medicare and Medicaid Services Data Extract System' interface. The main content area is titled 'request entry - 76399' and has four tabs: '1-Properties', '2-Search Criteria', '3-Output', and '4-Summary'. The '1-Properties' tab is active, displaying the following information:

- DUA #: 12987
- Request User: P247 - BETH PAPPAGALLO
- Data Source: NCH NEARLINE FILE
- DUA Study Name: VIPS GROUP DUA
- DESY Expiration Date: 12/31/2006
- Email Address: beth-p@vips.com
- Data Type: ALL TYPES

Below this information is a table with the following columns: DUA #, Study Name, Exp Date, and Requestor.

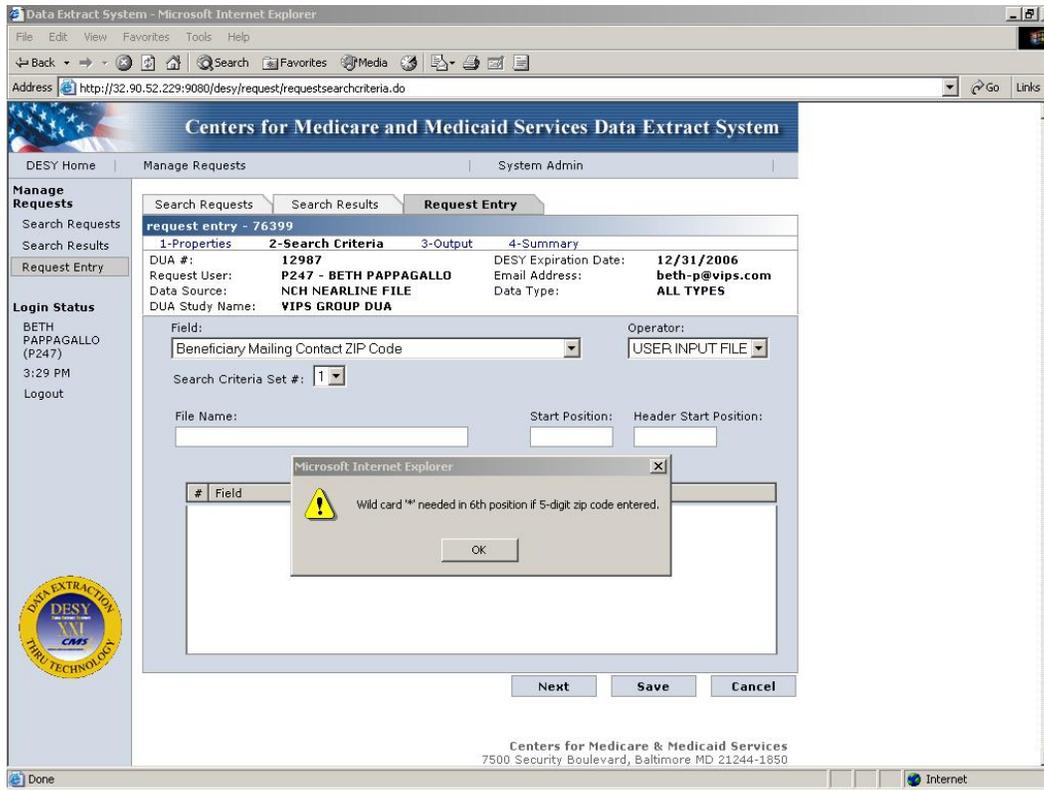
DUA #	Study Name	Exp Date	Requestor
12987	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12988	VIPS GROUP DUA	12/31/2006	SIG PYZIK
16167	VIPS GROUP DUA	05/08/2007	SIG PYZIK
16168	VIPS GROUP DUA	05/08/2007	HEATHER STEGAR
16169	VIPS GROUP DUA	05/09/2007	HEATHER STEGAR

Below the table are several form fields:

- Data Source: NCH NEARLINE FILE
- Recipient: NO DATA SHIPPED
- Data Type: ALL TYPES
- State: All States
- Request Description: (empty text box)
- Year(s), Updated: 2006 03/2006 (selected), 2005 03/2006, 2004 06/2005, 2003 06/2004
- Output File Identifier: (empty text box)

At the bottom of the form are three buttons: 'Next', 'Save', and 'Cancel'. The footer of the page reads: 'Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850'.

For this example, go to the Search Criteria page. Select Beneficiary Mailing Contact Zip Code. Select user Input File for the Operator. Note that the error message indicates that the User Input File requires the use of asterisks if a 5-digit zip is entered.

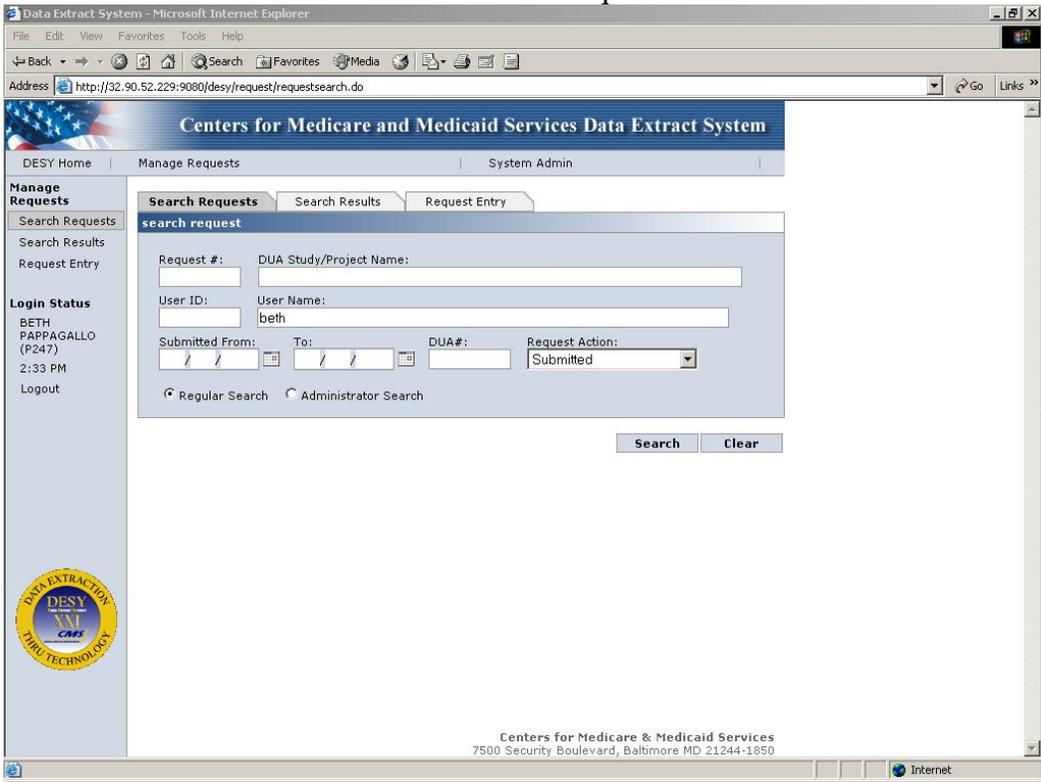


When the request is completed, it can be submitted for Approval.

Copy a Request

The Copy request function allows the user to copy an exiting request.

For this demonstration we will search for submitted requests first.



From the Search Results tab, select the Copy button.

The screenshot shows the 'Data Extract System' web application in Microsoft Internet Explorer. The browser address bar shows 'http://32.90.52.229:9080/desy/request/requestresults.do'. The application header includes 'Centers for Medicare and Medicaid Services Data Extract System' and navigation links for 'DESJ Home', 'Manage Requests', and 'System Admin'. The main content area is titled 'search results' and displays search criteria: 'Req Action: SUBMITTED' and 'User Name: beth'. Below this is a table of search results with columns for 'Req #', 'DUA #', 'User ID', 'Submitted', 'Status', 'Desc Cd', and 'Request Description'. The table contains 10 rows of data, all with a status of 'Pending Approval' and 'NCH' as the description code. The first row is selected. Below the table are buttons for 'Edit', 'Cancel', 'Copy', and 'Summary'. The footer of the application displays the address: 'Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850'. A 'Done' status is visible in the browser's status bar.

Req #	DUA #	User ID	Submitted	Status	Desc Cd	Request Description
76239	16167	P247	06/14/2006	Pending Approval	NCH	
76240	16167	P247	06/14/2006	Pending Approval	NCH	
76246	16167	P247	06/14/2006	Pending Approval	NCH	Toms Request
76248	16167	P247	06/14/2006	Pending Approval	NCH	Toms Request
76249	12988	P247	06/14/2006	Pending Approval	NCH	
Recipient: N/A Requestor: BETH PAPPAGALLO Year: 2006						
76250	16167	P247	06/14/2006	Pending Approval	NCH	Toms Request
76251	16167	P247	06/14/2006	Pending Approval	NCH	Toms Request
76252	16167	P247	06/14/2006	Pending Approval	NCH	Toms Request
76254	16167	P247	06/14/2006	Pending Approval	NCH	Toms Request

The Properties Page of the existing request will be presented. Any information in this request can be altered here. Select Next through each page adding and changing and search criteria necessary.

Centers for Medicare and Medicaid Services Data Extract System

DESY Home | Manage Requests | System Admin

Request Entry

request entry -

1-Properties 2-Search Criteria 3-Output 4-Summary

DUA #: **12988** DESY Expiration Date: **12/31/2006**
Request User: **P247 - BETH PAPPAGALLO** Email Address: **beth-p@vips.com**
Data Source: **NCH NEARLINE FILE** Data Type: **ALL TYPES**
DUA Study Name: **VIPS GROUP DUA**

DUA #	Study Name	Exp Date	Requestor
12987	VIPS GROUP DUA	12/31/2006	SIG PYZIK
12988	VIPS GROUP DUA	12/31/2006	SIG PYZIK
16167	VIPS GROUP DUA	05/08/2006	SIG PYZIK
16168	VIPS GROUP DUA	05/08/2007	HEATHER STEGAR
16169	VIPS GROUP DUA	05/09/2007	HEATHER STEGAR

Data Source: NCH NEARLINE FILE

Data Type: ALL TYPES State: Alabama

Request Description: Year(s), Updated: 2006 03/2006

Output File Identifier: NUL 2005 03/2006
2004 06/2005
2003 06/2004

Next Save Cancel

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore MD 21244-1850

The Copied request can be submitted on the Summary Page.

The screenshot shows a web browser window titled "Data Extract System - Microsoft Internet Explorer". The address bar shows the URL: <http://32.90.52.229:9080/desy/request/requestsummary.do>. The page content includes a navigation menu with "DESJ Home", "Manage Requests", and "System Admin". The main content area is titled "request summary -" and has tabs for "Search Requests", "Search Results", and "Request Entry". Under "Request Entry", there are sub-tabs for "1-Properties", "2-Search Criteria", "3-Output", and "4-Summary". The "1-Properties" tab is active, displaying the following information:

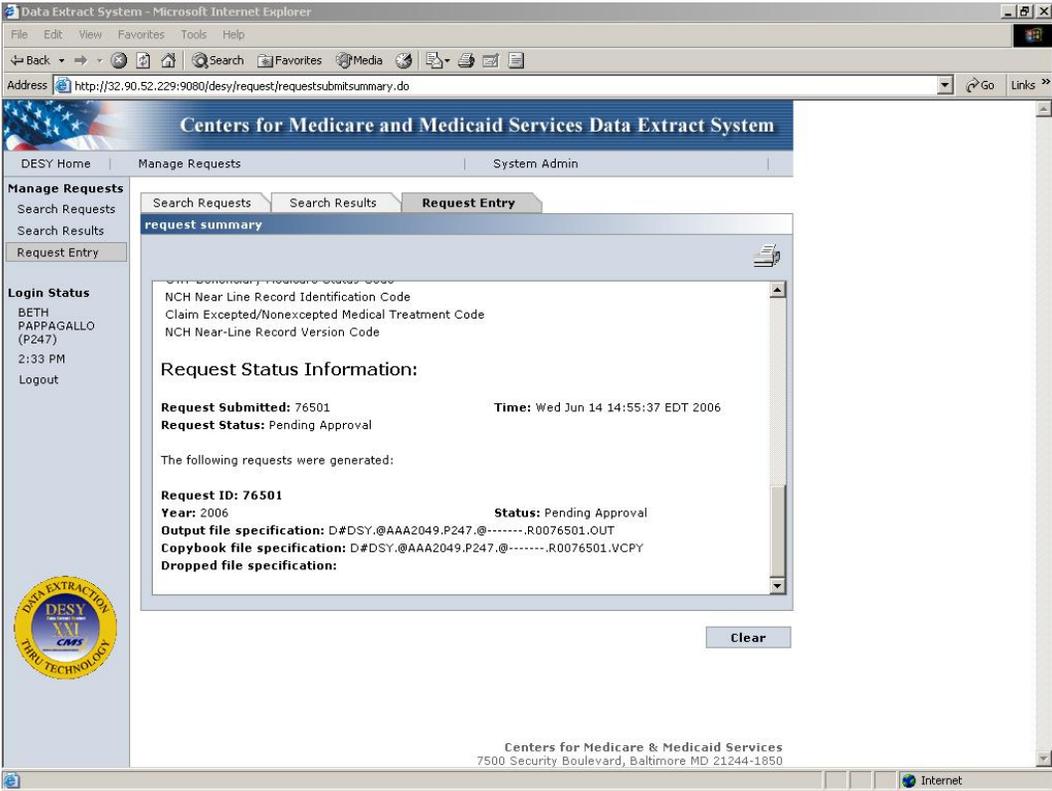
Request Properties:

Request:	0	Expiration Date:	12/31/2006
DUA #:	12988		
DUA Study Name:	VIPS GROUP DUA		
DESY Expiration Date:	12/31/2006		
Request User:	P247 - BETH PAPPAGALLO	Email Address:	beth-p@vips.com
Recipient:	N/A		
Data Source:	NCH NEARLINE FILE	Data Type:	ALL TYPES
Data Description:	NCH		
State:	Alabama		

Below the properties, there are sections for "Search Criteria:" and "Output View:". The "Output View:" section shows "Output Desc: Standard BEF-PUF View". At the bottom of the form area, there are three buttons: "Submit", "Save", and "Cancel".

The footer of the page contains the text: "Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore MD 21244-1850".

The Summary Page after the copied request is submitted:



Chapter 6: User Role Security

Security roles

There are four roles that allow access to the user interface. These roles are User, Approver, Developer and System Administrator.

The User role can only access the Home Page and access the Manage Request section. The Approver and Developer roles have access to the Manage Request section and the Manage Approvals Section. The System Administrator has access to all sections of the application. Any attempts to log in to an unauthorized area will alert the user that they are not authorized to view the page.

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