**Automated Medicaid Code 35 Assignment Data files to SFA:**

1. A text file with the same file format (tab delimited) as Monday SFA fiscal text files is prepared on code 35 assignment for SFA with the following fields.

| Field Name | Field Description | Send to eMedNY |
| --- | --- | --- |
| CIN | Child Medicaid ID | Yes |
| eMedNY\_County\_ID | eMedNY county ID/eMedNY transaction district code | Yes |
| Code | Exception code = 35 | Yes |
| From\_Date | Code 35 start date in yyyymmdd | Yes |
| To\_Date | Code 35 end date in yyyymmdd | Yes |
| Medicaid\_number | Billing provider medicaid number | Yes |
| NYEIS\_County\_ID | NYEIS county ID for the municipality from the SA in 000xx | Yes |
| Old\_From\_Date | Code 35 original start date in eMedNY in yyyymmdd | No |
| Old\_To\_Date | Code 35 original end date in eMedNY in yyyymmdd | No |
| status | Code 35 edit status: 5N – new code 35; 1V – the original code 35 in eMedNY is voided by submitting the same start and end date to eMediNY; 3F – the code 35 start date is changed; 4T – the code 35 end date is changed; 2B – both the code 35 start and end dates are changed. | No |
| OHIPdate | The date OHIP sends the data used for the file in yyyymmdd | No |
| SFAdate | The date SFA sends the response file/data used for the file in yyyymmdd | No |
| BEIdate | The date BEI generates the file in yyyymmdd | No |
| NYEISdate | The date NYEIS refreshes the data in yyyymmdd | No |

1. A text file with Medicaid eligibility information from OHIP’s data for SFA. Same file format as the code 35 file for SFA with the following fields.

| Field Name | Field Description | Send to eMedNY |
| --- | --- | --- |
| CIN | Child Medicaid ID | No |
| Child\_system\_ID | Child’s NYEIS concernrole/system ID | No |
| Child\_ref\_ID | Child’s NYEIS reference ID searchable online | No |
| Elig\_from\_date | Child’s Medicaid eligible start date in yyyymmdd | No |
| Elig\_to\_date | Child’s Medicaid eligible end date in yyyymmdd | No |
| OHIPdate | The date OHIP sends the data used for the file | No |
| BEIdate | The date BEI generates the file | No |
| First | First name from NYEIS | No |
| Last | Last name from NYEIS | No |
| Sex | Gender from NYEIS | No |
| DOB | DOB from NYEIS | No |

1. A text file for code 35 only with complete conflict time frames between “eligible” SA and any eMedNY code 35 from different provider Medicaid numbers for SFA to generate reports for municipalities’ review (from Section 5).

| Order | Source | Field Name | Field Description | Send to County |
| --- | --- | --- | --- | --- |
| 1 | NYEIS | NYEIS\_child\_ref\_ID | Child’s NYEIS reference ID searchable online | Yes |
| 2 | NYEIS | First | First name from NYEIS | Yes |
| 3 | NYEIS | Last | Last name from NYEIS | Yes |
| 4 | NYEIS | cin | Medicaid recipient ID | Yes |
| 5 | NYEIS; eMedNY | Overlap\_from\_dt | The start date of the complete overlap between the code 35 in eMedNY and NYEIS “eligible” SA in yyyymmdd | Yes |
| 6 | NYEIS; eMedNY | Overlap\_to\_dt | The end date of the complete overlap between the code 35 in eMedNY and NYEIS “eligible” SA in yyyymmdd | Yes |
| 7 | NYEIS | NYEIS\_sa\_providername | Name of the billing provider on the SA | Yes |
| 8 | NYEIS; SFA | NYEIS\_sa\_prov\_medicaidnumber | SA billing provider’s Medicaid number from SFA’s provider map table | Yes |
| 9 | eMedNY | emedny\_prov\_name | Name of the provider on the exception code in eMedNY | Yes |
| 10 | eMedNY | eMedNY\_prov | Medicaid number of the provider on the exception code in eMedNY | Yes |
| 11 | eMedNY | Mbr\_Exc\_Cd | 35 | Yes |
| 12 | eMedNY | emedny\_trans\_disc | eMedNY transaction district name | Yes |
| N/A | NYEIS | NYEIS\_County\_ID | NYEIS muni ID on SA | NO |
| N/A | NYEIS | NYEIS\_county | NYEIS muni name on SA | NO |
| N/A | eMedNY | eMedNY\_trans\_disc\_ID | eMedNY transaction district ID | NO |
| N/A | eMedNY | Cd\_from\_dt | Start date of the code 35 in eMedNY in yyyymmdd | NO |
| N/A | eMedNY | cd\_to\_dt | End date of the code 35 in eMedNY in yyyymmdd | NO |
| N/A | eMedNY | Aud\_Dt | Change date of the exception code in eMedNY in yyyymmdd | NO |
| N/A | eMedNY | Aud\_User\_ID | User ID who submitted the exception code in eMedNY | NO |
| N/A | NYEIS | DOB | DOB from NYEIS | NO |
| N/A |  | OHIPdate | The date OHIP sends the data used for the file in yyyymmdd | NO |
| N/A |  | SFAdate | The date of the response file from SFA in yyyymmdd | NO |
| N/A |  | NYEISdate | The date when NYEIS refreshes the data in yyyymmdd | NO |
| N/A |  | BEIdate | The date BEI generates the file | NO |

1. A text file for any exception codes other than code 35 with complete conflict time frames between “eligible” SA and any eMedNY exception code other than code 35 from different provider Medicaid numbers for SFA to generate reports for municipalities’ review (from Section 5).

| Order | Source | Field Name | Field Description | Send to County |
| --- | --- | --- | --- | --- |
| 1 | NYEIS | NYEIS\_child\_ref\_ID | Child’s NYEIS reference ID searchable online | Yes |
| 2 | NYEIS | First | First name from NYEIS | Yes |
| 3 | NYEIS | Last | Last name from NYEIS | Yes |
| 4 | NYEIS | cin | Medicaid recipient ID | Yes |
| 5 | NYEIS; eMedNY | Overlap\_from\_dt | The start date of the complete overlap between the exception code in eMedNY and NYEIS “eligible” SA in yyyymmdd | Yes |
| 6 | NYEIS; eMedNY | Overlap\_to\_dt | The end date of the complete overlap between the exception code in eMedNY and NYEIS “eligible” SA in yyyymmdd | Yes |
| 7 | NYEIS | NYEIS\_sa\_providername | Name of the billing provider on the SA | Yes |
| 8 | NYEIS; SFA | NYEIS\_sa\_prov\_medicaidnumber | SA billing provider’s Medicaid number from SFA’s provider map table | Yes |
| 9 | eMedNY | emedny\_prov\_name | Name of the provider on the exception code in eMedNY | Yes |
| 10 | eMedNY | eMedNY\_prov | Medicaid number of the provider on the exception code in eMedNY | Yes |
| 11 | eMedNY | Mbr\_Exc\_Cd | Medicaid exception code other than code 35 | Yes |
| 12 | eMedNY | emedny\_trans\_disc | eMedNY transaction district name | Yes |
| N/A | NYEIS | NYEIS\_County\_ID | NYEIS muni ID on SA | NO |
| N/A | NYEIS | NYEIS\_county | NYEIS muni name on SA | NO |
| N/A | eMedNY | eMedNY\_trans\_disc\_ID | eMedNY transaction district ID | NO |
| N/A | eMedNY | Cd\_from\_dt | Start date of the exception code in eMedNY in yyyymmdd | NO |
| N/A | eMedNY | cd\_to\_dt | End date of the exception code in eMedNY in yyyymmdd | NO |
| N/A | eMedNY | Aud\_Dt | Change date of the exception code in eMedNY in yyyymmdd | NO |
| N/A | eMedNY | Aud\_User\_ID | User ID who submitted the exception code in eMedNY | NO |
| N/A | NYEIS | DOB | DOB from NYEIS | NO |
| N/A |  | OHIPdate | The date OHIP sends the data used for the file in yyyymmdd | NO |
| N/A |  | SFAdate | The date of the response file from SFA in yyyymmdd | NO |
| N/A |  | NYEISdate | The date when NYEIS refreshes the data in yyyymmdd | NO |
| N/A |  | BEIdate | The date BEI generates the file | NO |