

CHRIS Flat File Format

Purchased Services Billing Reconciliation Report

Organization:	Ontario Association of Community Care
	Access Centres (OACCAC)
Division:	CCAC Application Support
Version:	1.3
Version Date:	November 4, 2008
Prepared By:	OACCAC

Revision Log

Version No.	Version Date	Summary of Change	Changed by/Input from
1.0	April 2, 2008	Initial draft	Nasreen Pirani
1.1	August 13, 2008	Updated the heading from SAF to RA layout	Nasreen Pirani
1.2	August 21, 2008	Added Examples column	Miren Chauhan
1.3	November 4, 2008	Field specification clarifications. Identified Deltas from the original PMI Format Flat File.	OACCAC

Delta's from Original RA Format

This spec is based off of the original PMI format. Majority of the updates applied to this specification document were done with the objective clarifying field definitions and providing examples. Providers using the original PMI flat file format will need to account for the following changes (all other fields remain unchanged):

- Header
 - The "Vendor Identifier" field has been relabeled to "Provider Organization Code". The CHRIS Provider Organization Code will be populated in this field. Data type has changed from Numeric to Alpha/Numeric.
 - The "CCAC Reference" field has been relabeled to "Invoice File Number". The CHRIS Invoice File Number will be populated in this field.
- Details
 - The "Vendor Identifier" field has been relabeled to "Billing Code". The CHRIS Billing Code will be populated in this field. Data type has changed from Numeric to Alpha/Numeric.
 - The "Home Care Reference" field has been relabeled to "Billing Reference Number". The CHRIS Billing Reference Number will be populated in this field.
 - o The "Health Number" field has become obsolete. CHRIS will input spaces in this field.
 - o The "Health Number Version" field has become obsolete. CHRIS will input spaces in this field.
 - o The "Service Date From" field has been relabeled to "Visit Date"
 - o The "Service Date To" has become obsolete. CHRIS will input spaces in this field.
 - The "Services Codes" field supports two additional values:
 - The value "32" which represents Behavior Therapy
 - The value "33" which represents Geriatric Assessment.

Layout of the Electronic "Billing Reconciliation Report" Header

ID	Data Field	Field Length	Data	Columns	Field	Pad	Comment	Example	Obsolete
		(Chars.)	Туре	in Record	Justification	Width		_	
1	Record Type	1	Alpha	1	N/A	N/A	H = Batch Header	Н	Ν
2	SAF Type	6	Alpha/	2 – 7	Left	Spaces	This field is obsolete. Can be	1	Ν
			Num			-	populated with blanks.		

Page 4 of 9

3	Provider Org Code	10	Alpha/ Num.	8 – 17	Left	Spaces	The unique Pro assigned by th This number sl confirmed with successful con migration.	e local (hould be the pro	CCAC. e vider up	on	2801	N	
							This field was to as Vendor Id	dentifier					
4	Record Count	10	Num.	18 - 27	Right	Zero	Number of line Recommended items should n	d numbe	er of line		00000012 16	N	
5	CCAC ID	10	Alpha/ Num.	28 – 37	Left	Spaces	Unique identific Program withir Ontario (First 2 program #)	n the pro 2 charac	vince of ters of th		4	N	
							CCAC Name	Short Name	CCA C ID				
							Erie St. Clair CCAC	ESC	1				
							South West CCAC	SW	2				
							Waterloo Wellington CCAC	ww	3				
							HNHB CCAC	HNH B	4				
								Central West CCAC	CW	5			
							Mississauga Halton CCAC	МН	6				
							Toronto Central CCAC	тс	7				
							Central CCAC	CENT	8				
							Central East CCAC	CE	9				
							South East CCAC	SE	10				
							Champlain CCAC	CHA M	11				
							North Simcoe Muskoka	NSM	12				

				-			6CCAC				
							North East CCAC	NE	13		
							North West CCAC	NW	14		
7	Reconciliation ID	10	Num.	38 – 47	Right	Zero	The invoice fi assigned in C		er	00002698 01	N
8	Total Payable	10	Num.	48 - 57	Right	Zero	Total amount Decimals not = 00012395)			00045679 20	N

ID	Data Field	Field Length (Chars.)	Data Type	Columns in Record	Field Justification	Pad Width	Comment	Example	Obsolete
9	Record Type	1	Alpha	1	N/A	N/A	S = Service Advice (Invoice Detail)	e Advice (Invoice S	
10	SAF Type	6	Alpha/ Num.	2 – 7	Left	Spaces	This field is obsolete. CHRIS will populate this field with spaces.	1	N
11	Billing Code	10	Alpha/ Num.	8 – 17	Left	Spaces	A unique billing code assigned to by a local CCAC for each provider contract. This code should be confirmed with provider after successful completion of final migration. This field was formerly referred to as "Vendor Identifier"	2801	N
12	Vendor Reference	10	Alpha/ Num.	18 - 27	Left	Spaces	This field is populated with the Vendor Reference value submitted for the line item in the original Billing Invoice File.	80701013 2	N
13	Billing Reference Number	10	Num.	28 – 37	Left	Spaces	Assigned by local CCAC as a unique identifier of the client record against which the line item is billed. In legacy systems this field may have been referred to as Home Care Reference. For PMI the CTN was submitted in this field.	56000654 8	N
14	Health Number	10	Num.	38 – 47	N/A	Spaces	This field will be populated with spaces. It has become obsolete.	17900262 39	Y
15	Health Number Version	2	Alpha/ Num.	48 – 49	N/A	Spaces	This field will be populated with spaces. It has become obsolete.	EB	Y
16	Surname	20	Alpha/ Num.	50 – 69	Left	Spaces			N
	Service Code	10	Alpha/	70 – 79	Left	Spaces	Assigned by HCPidentifies	01	N

Layout of the Electronic "Billing Reconciliation Report" Detail Record

I UIC							design of the second state		
			Num.				the specific service delivered to the client; 01 - Nursing 02 - Social Work - 03 - Nutrition 04 - Speech Pathology/Audiology 05 - Physiotherapy 06 - Occupational Therapy 07 - Enterostomal Therapy 08 - Meals on Wheels 09 - Laboratory Technology 10 - Respiratory Technology 11 - Homemaking 12 - Para-medical 32 - Behaviour Therapy 33 - Geriatric Assessment		
17	Service Unit Code	6	Alpha/ Num.	80 – 85	Left	Blanks	Code assigned by the local CCAC for the units in which the service has been delivered (HOUR or VISIT)	VISIT	N
18	Quantity (of service units)	6	Num.	86 – 91	Right	Zero	This quantity expressed as hours or visits depending on the Service Unit Code. <u>Service Unit Code = HOUR:</u> The last two digits are used for fractional hours. e.g., • 1.00hr (1 hour) is entered as 000100 • 1.33hr (1 hour 20 minutes) is entered as 000133 • 0.75hr (45 minutes) is entered as 000075 • 0.83hr (50 minutes) is entered as 000083 <u>If service unit code = VISIT</u> the quantity will always be 1.00. This	000100	N

19

20 21

22

Date Processed

8

						value should be entered as 000100		
Visit Date	8	Num.	92 – 99	N/A	N/A	The date of service (ddmmyyyy).	18062007 or 07102008	N
Service Date To	8	Num.	100 – 107	N/A	Spaces	For possible future use	04082008	Y
Service Activities	48	Alpha/ Num.	108 - 155	Left	Spaces	Identifies service provider activity with the client. CHRIS checks the following: All service must use at least one of these activities: 01,02,03,04,05 plus one or more for the following providers: Nursing and Enterostomal Therapy - 10,11,12,13,19 Social Work - 20,21,22,23 Speech Pathology - 41,42,43,43,44 Physiotherapy - 50,51,52,53 Occupational Therapy - 60,61,62,63,64,69 Para-Medical - 80,89 Homemaking - 90,91,92,93,94,99 Activity code 09 - Not Seen/ Not Found is used alone by any provider in accordance with local	10,13,19,	N
						home care policies.		
Processing Status	2	Alpha/ Num.	156 – 157	N/A	N/A	Values set by local CCAC to indicate the current processing	PA	N

158 – 165

Num.

N/A

N/A

status of the SAF. PA=Payable,

Date on which the SAF was

SU=Suspended, UN=Unauthorized

10072008 N

							processed by the local CCAC, i.e., date that processing status was set. (ddmmyyyy)		
23	Amount Payable	10	Num.	166 – 175	Right	Zero	A value other than 0 will only occur for line items with a payable status. Digits 9 and 10 are used for decimal value (cents) (\$51.04 = 0000005104)	00000051 04	N
24	**Reason Code	6	Alpha/ Num.	176 – 181	Left	Blanks	An meaningful value will populated for lines items with suspended or unauthorized status.	USEDUP	N