

# EPSDT Screens

03/30/2016

# Screens EP-S-000 EPSDT Menu

## General Information

This on-line menu screen provides a list of the options available to DMAS for processing EPSDT information.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT000VA
MAPSET	EP000VA
TRAN ID	VB00

SAMPLE	<b>EPSDT Menu (EP-S-000)</b>
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## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	TRANSACTION ID (DE0000)	Edits: Must be VB00; the 4 character iden- tification of the trans- action.	'EXCLUDE'  'EXCLUDE'
2	PROGRAM NAME (DE0000)	Edits: Must be EPT000VA; 7 character inden- tification of the pro- gram processing	'EXCLUDE'  'EXCLUDE'

		transaction VB00.	
3	SCREEN TITLE (DE0000)	Edits: Proper title of the EP000VA screen; must be VA DMAS EPSDT MAIN MENU.	'EXCLUDE'  'EXCLUDE'
4	SYSTEM DATE (DE0000)	Edits: Must be format MM/DD/CCYY where: MM = 2-digit month (values 1 thru 12) DD = 2-digit day (values 1 thru 31) CCYY = 4-digit year including century.	'EXCLUDE'  'EXCLUDE'
5	SYSTEM TIME (DE0000)	Edits: Must be format HH:MM where: HH = 2-digit hour (values 01 thru 24) MM = 2-digit minute (values 01 thru 59).	'EXCLUDE'  'EXCLUDE'
6	PAGE NUMBER (DE0000)	Edits: Transaction VB00 displays a one page screen, therefore the PAGE value will always be 01.	'EXCLUDE'  'EXCLUDE'
7	MSG (DE0000)	Edits: None	'EXCLUDE'  'EXCLUDE'
8	SELECTION (DE0000)	Edits: Only those options displayed in the Selection Box can be selected. 1- EPSDT Case ID Update; 2 - EPSDT Case Screening Inquiry; 3 - EPSDT Abnormality Treatment Inquiry; 4 -	The selections allowed by this screen. Selections are: EPSDT Case ID Update EPSDT Case Screening Inquiry EPSDT Abnormality Treatment Inquiry EPSDT Abnormality Treatment Update Enrollee Listing by Name Enrollee Listing by Medicaid ID Enrollee Listing by Provider Name Enrollee Listing by Provider ID EPSDT Screening and Referral Appointment Tracking EPSDT Periodicity Table Inquiry EPSDT Periodicity Table Update EPSDT Immunization Table Inquiry

	<p>EPSDT Abnormality Treatment Update; 5 - Enrollee Listing by Name; 6 - Enrollee Listing by Medicaid ID; 7 - Enrollee Listing by Provider Name; 8 - Enrollee Listing by Provider ID; 9 - EPSDT Screening and Referral Appointment Tracking; 10 - EPSDT Periodicity Table Inquiry; 11 - EPSDT Periodicity Update; 12 - EPSDT Immunization Table Inquiry; or 13 - EPSDT Immunization Table Update.</p> <p>Messages: PLEASE ENTER A SELECTION PLEASE ENTER VALID SELECTION NUMBER</p>	<p>EPSDT Immunization Table Update. INQUIRY (R/U) Select the desired option you wish to inquire.</p> <p>The selections allowed by this screen. Selections are: EPSDT Case ID Update EPSDT Abnormality Treatment Update EPSDT Screening and Referral Appointment Tracking EPSDT Periodicity Table Update EPSDT Immunization Table Update. UPDATE (R/U) Select the desired option you wish to update.</p>
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NAVIGATION		EPSDT Menu (EP-S-000)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
MEMBER LISTING BY MEDICAID ID	Invokes the EPSDT Member Number Browse screen.	RS-S-006 (B)
MEMBER LISTING BY NAME	Invokes the EPSDT Member Name Browse screen.	RS-S-018 (B)
MEMBER LISTING BY PROVIDER ID	Invokes the EPSDT Member Provider ID Browse screen.	RS-S-010 (B)
MEMBER LISTING BY PROVIDER NAME	Invokes the EPSDT Member Provider Name Browse screen.	RS-S-010 (B)
ENTER	Displays Case information for the Medicaid ID or Member Name currently entered on the screen.	N/A
EPSDT	Invokes the EPSDT Abnormality Treatment	RS-S-018 (B)

ABNORMALITY TREATMENT INQUIRY	Inquiry Screen.	
EPSDT ABNORMALITY TREATMENT UPDATE	Invokes the EPSDT Abnormality Treatment Update Screen	N/A
EPSDT CASE ID UPDATE	Invokes the EPSDT Case Update screen.	RS-S-300 (B)
EPSDT CASE SCREENING INQUIRY	Invokes the EPSDT Case Screening Inquiry screen.	RS-S-009 (B)
EPSDT Immunization Table Inquiry	Invokes the EPSDT Immunization Schedule Inquiry Screen.	N/A
EPSDT Immunization Table Update	Invokes the EPSDT Immunization Table Update Screen.	N/A
EPSDT PERIODCITY TABLE INQUIRY/UPDATE	Invokes the EPSDT Periodicity Schedule Update screen.	RS-S-015 (B)
EPSDT PERIODICITY UPDATE	Invokes the EPSDT Periodicity Schedule screen.	RS-S-020 (B)
EPSDT SCREENING AND REFERRAL APPT TRACKING	Invokes the EPSDT Screening and Referral Appointment Main Menu screen.	RS-S-018 (B)
SUB MENU	Returns the user to the EPSDT Main Menu screen.	N/A
RETURN	Returns to previous screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
4004	CHOOSE A VALID SELECTION	Choose a selection from the drop-down menu.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
4002	ENTER A SELECTION	Enter your selection at the cursor to complete the task.

139	FUNCTION IS INVALID	Information message.
4116	SELECTION NUMBER MUST BE NUMERIC	Enter a numeric selection number.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).

# Screens EP-S-001 EPSDT Case Update

## General Information

This screen is used to update the comments and display member demographic and eligibility information stored on the Member Eligibility Database and the EPSDT Master File. Access is based on current member Medicaid Number and/or Last Name. The Member Identification Number and Last Name may be key-entered to perform searches. The comments section may be modified by authorized DMAS staff. All other fields are display only and may not be altered.

SOURCE/ORIGINATOR	EPT001VA
USAGE	Update
PROGRAM	EPT001VA
MAPSET	EP001VA
TRAN ID	VB01

SAMPLE	<b>EPSDT Case Update (EP-S-001)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	KEY-IN ENROLLEE ID Enrollee Permanent Identification Number (DE3093)	Edits: Must be numeric. Must be a valid enrollee on the EPSDT Master File (EP-F-001) and the Recipient Data Base (RS_PERSON table). Messages: If not numeric, 8001-'ENROLLEE ID IS INVALID.' If not found on EPSDT Master File:	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (R/U) Enter the Medicaid ID number. Must be numeric. Must be a valid enrollee on the EPSDT Master File and the Enrollee Master File.  The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims His-

		8014- "ENROLLEE ID IS NOT ON FILE". If not found on RS_PERSON table: 8021- "ENROLLEE ID IS NOT FOUND IN THE DATABASE".	tory File. UPDATE (R/U) Enter the Medicaid ID number. Must be numeric. Must be a valid enrollee on the EPSDT Master File and the Enrollee Master File.
2	KEY-IN LAST NAME Enrollee Last Name (DE3110)	Edits: Required only for the NAME BROWSE (PF4) Function. Messages: For a NAME BROWSE and field is blank : "PLEASE ENTER ENROLLEE LAST NAME". If numeric : 8023 - 'ENROLLEE NAME IS INVALID.'	The last name of the individual eligible for a DMAS-administered medical care program. INQUIRY (C/U) Enter the last name of the eligible individual in the medical care program.  The last name of the individual eligible for a DMAS-administered medical care program. Required only for the NAME BROWSE Function. System Displayed.
3	D.O.B. Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
4	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  A code indicating the sex of the enrollee. System Displayed.
5	RACE Enrollee Race Code (DE3006)		A code indicating the enrollee's racial origin.  A code indicating the enrollee's racial origin. System Displayed.
6	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Displayed.
7	ENROLLEE ADDRESS LINE 1 Enrollee Street Address (DE3115)		The street address of the enrollee.  The street address of the enrollee. System Displayed.
8	ENROLLEE ADDRESS LINE 2		The street address of the enrollee.

	Enrollee Street Address (DE3115)		The street address of the enrollee. System Displayed.
9	ENROLLEE CITY NAME Enrollee City Name (DE3116)		Name of the city in which the enrollee lives. Name of the city in which the enrollee lives. System Displayed.
10	ENROLLEE STATE Enrollee State Code (DE3117)		State abbreviation of the state in which the enrollee lives. State abbreviation of the state in which the enrollee lives. System Displayed.
11	ENROLLEE ZIP Enrollee ZIP Code (DE3118)		ZIP code of the area in which the enrollee lives. ZIP code of the area in which the enrollee lives. System Displayed.
12	RESPONSIBLE PARTY Case Name (DE3046)		The name of the individual who is considered head of the household, family, or group of individuals in the same Case entity. The name of the individual who is considered head of the household, family, or group of individuals in the same Case entity. System Displayed.
13	CITY/COUNTY CODE Enrollee FIPS Code (DE3008)		A code indicating the geographic or geopolitical statistical reporting area in which the enrollee resides. The county is a sub-division within the Commonwealth of Virginia. A code indicating the geographic or geopolitical statistical reporting area in which the enrollee resides. The county is a sub-division within the Commonwealth of Virginia. System Displayed.
14	LAST SCREEN DATE EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date. This date reflects the last performed screening date. System Displayed.
15	NEXT SCREEN DUE EPSDT Date of Next Screen (DE8007)		The numeric data field contains the date that a recipient is due for screening. The numeric data field contains the date that a recipient is due for screening. System Dis-

			played.
16	BENEFIT PLAN Benefit Definition Plan Short Name (DE3555)		A short, concise description of a Benefit Plan used primarily in reporting.  A short, concise description of a Benefit Plan used primarily in reporting. System Displayed.
17	DESIGNATION CODE Enrollee Eligibility Aid Category (DE3009)		Also known as Money Payment Code, Recipient Program Designation or Scope of Coverage code. This is the program category under which a recipient is eligible for Medicaid or DMAS- administered programs. It is also used to identify an enrollee's eligibility for certain Benefit Plans.  Also known as Money Payment Code, Recipient Program Designation or Scope of Coverage code. This is the program category under which a recipient is eligible for Medicaid or DMAS- administered programs. It is also used to identify an enrollee's eligibility for certain Benefit Plans. System Displayed.
18	ASSIGNMENT STATUS Enrollee Eligibility Status Code (DE3499)		A code used to indicate whether the associated eligibility period is active or voided.  A code used to indicate whether the associated eligibility period is active or voided. System Displayed.
19	Exclusion Indicator Benefit Plan Exception Indicator (DE3072)		A code used as a modifier to the Benefit Plan Code, indicating the level of care (LOC) that the enrollee is receiving in a nursing home facility or waiver service.  A code used as a modifier to the Benefit Plan Code, indicating the level of care (LOC) that the enrollee is receiving in a nursing home facility or waiver service. System Displayed.
20	ASSIGNMENT FROM (DATE) Enrollee Eligibility Begin Date (DE3010)		The beginning date of enrollment in the Benefit Plan. For managed care, this represents the beginning date of an assignment between a provider and an enrollee.  The beginning date of enrollment in the Benefit Plan. For managed care, this represents the beginning date of an assignment between a provider and an enrollee. System Dis-

			played.
21	ASSIGNMENT TO DATE Enrollee Eligibility End Date (DE3011)		The end date of enrollment in the Benefit Plan. For managed care, this represents the end date of an assignment between a provider and an enrollee.  The end date of enrollment in the Benefit Plan. For managed care, this represents the end date of an assignment between a provider and an enrollee. System Displayed.
22	LAST ACTION EPSDT Last Update Type (DE8012)		This one character field indicates the action taken to alter the enrollee's EPSDT Master File Record.  This one character field indicates the action taken to alter the enrollee's EPSDT Master File Record. System Displayed.
23	SOURCE EPSDT Last Update Source (DE8045)		The on-line program by which the EPSDT Master record was last updated.  The on-line program by which the EPSDT Master record was last updated. System Displayed.
24	LAST ACTION ID EPSDT Last Update Operator Identification (DE8009)		This is the on-line logon identification of the last user who updated the record on the EPSDT Master File.  This is the on-line logon identification of the last user who updated the record on the EPSDT Master File. System Displayed.
25	LAST ACTION DATE EPSDT Last Update Date (DE8046)		The date the Master record was last updated, on-line.  The date the Master record was last updated, on-line. System Displayed.
26	PROVIDER ID National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Linked Provider's nine digit Legacy ID or the Linked Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take	A unique identification number assigned to a provider. A unique identification number assigned to a provider. System Displayed.

		precedence over the Legacy ID and will be displayed whenever both numbers are present.	
27	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  The name of the provider. System Displayed.
28	COMMENTS EPSDT Case Comments (DE8015)	Edits: Field is alphanumeric. Display mode is protected only for the initial entry to the screen. For all subsequent entries to the screen the field will be unprotected for update purposes. Messages: For any invalid update: "CORRECT HIGHLIGHTED FIELD(S)". For all valid updates: "EPSDT MASTER FILE WAS UPDATED SUCCESSFULLY". For requesting the update function (ENTER) and no values are entered in this field: "NO UPDATE HAS TAKEN PLACE".	This thirty-character field occurs 4 times. It is used for any comments about the enrollee or other information on the EPSDT Master File. This is the only field that can be updated.  This thirty character field occurs 4 times. It is used for any comments about the enrollee or other information on the EPSDT Master File. This is the only field that can be updated. UPDATE (R/U) Enter any comments about the enrollee or other information on the EPSDT Master File. Field is alphanumeric.
29	MSG (DE0000)		'EXCLUDE'  'EXCLUDE'

NAVIGATION	<b>EPSDT Case Update (EP-S-001)</b>	
Function (B) or (M)	Action	Branch To (B) or Return To (R)

Clear Form	Clears the screen of any previously displayed data.	N/A
Member ID	Allows navigation to the EPSDT Member Number Browse screen.	EP-S-005 (B)
MEMBER NAME	Command button to allow the user to view a listing of all members with the specified Last Name if Member Last Name has been entered.	N/A
Enter	Processes the entered data.	N/A
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)
Provider ID	Allows navigation to the EPSDT Member Provider ID Browse screen.	EP-S-007 (B)
PROVIDER NAME	Invokes the Provider Name Browse, using the linked to Provider ID that is currently displayed.	N/A
Refresh	Re-displays previously displayed data before any changes were keyed.	N/A
RETURN	Returns to the previous screen.	N/A
SCREENING	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)
Update	Command button to allow the user update capability.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
68	DATA REFRESHED	Information message.
27	DATA UPDATED	Information message. No action needed.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8003	EPSDT MASTER FILE	Enter valid values according to error message spe-

	CLOSED	cifications.
8009	EPSDT MASTER FILE UPDATED	Information message. No action needed.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
139	FUNCTION IS INVALID	Information message.
8123	LOG FILE IS NOT OPENED	Information message.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Case ID Update from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Case Update screen (EP-S-001).

# Screens EP-S-002 EPSDT Screening Record Inquiry

## General Information

This screen displays individual member screening information, which has been added to the EPSDT Master File as a result of claims processing. The Member Identification Number is the only field on this screen that may be keyed to perform Member searches.

SOURCE/ORIGINATOR	EPT002VA
USAGE	Inquiry
PROGRAM	EPT002VA
MAPSET	EP002VA
TRAN ID	VB02

SAMPLE	<b>EPSDT Screening Record Inquiry (EP-S-002)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)	Edits: Must be numeric. Must be a valid enrollee on the EPSDT Master File (EP-F-001) and the Enrollee (Recipient Data Base). Messages: If not numeric, display the following mes- sage: 8001- "INVALID ENROLLEE ID". If not found on EPSDT Master File:	The DMAS-administered identification num- ber that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims His- tory File. INQUIRY (R/U) Enter the ID number for the enrollee. Must be numeric. Must be a valid enrollee on the EPSDT Master File and the Enrollee Master File. N/A

		8014- "ENROLLEE ID IS NOT ON FILE".	
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
3	LAST SCRIN DATE EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date.  N/A
4	IMMUNIZATION COMPLETE EPSDT Immunization Complete Indicator (DE8019)		This one byte field indicates whether or not a recipient's immunizations are complete and/or up-to-date.  N/A
5	SCREENING DATE EPSDT Screening Appointment Date (DE8205)		The date a screening should be performed.  N/A
6	TYPE EPSDT Screen Type (DE8101)		This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).  N/A
7	CPT CODE Procedure Code (DE5002)		Code used to identify a specific dental, medical, revenue, or ICD diagnosis/surgical procedure.  N/A
8	MODIFIER Claims Procedure Code Modifier (DE2171)		The 2-position standard HCFA modifier entered with a procedure code. The exception is that for EPSDT, the valid modifiers are only one position, H, K, T, U, W, Y, Z.  N/A
9	PROVIDER ID National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Screening Provider's nine digit Legacy ID or the Screening Provider's ten digit National Pro-	A unique identification number assigned to a provider.  A unique identification number assigned to a provider.

		vider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed whenever both numbers are present.	
10	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  N/A
12	COMPLIANCE RATE EPSDT Screening Compliance Rate (DE8380)	Edits: Messages:	Reflects the provider's success in getting enrollees screened within the required time.  N/A

NAVIGATION		EPSDT Screening Record Inquiry (EP-S-002)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)	
Clear Form	Clears the screen of any entered data.	N/A	
Enter	Processes the entered member ID.	N/A	
MAIN	Returns to the MMIS Main Menu.	RF-S-010 (R)	
MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)	
NEXT PAGE	Allows the user to page forward through a series of requested data.	N/A	
PREV PAGE	Allows the user to page backward through a series of requested data.	N/A	
RETURN	Returns to the previous screen.	N/A	

## Error Messages

Error	Description	Resolution
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the

		task again. See the field definitions for valid Enrollee ID specifications.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8003	EPSDT MASTER FILE CLOSED	Enter valid values according to error message specifications.
8133	EPSDT SCREENING AND APPOINTMENT FILE CLOSED	Enter valid values according to error message specifications.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
8099	SELECT ONLY ONE RECORD	Information message.
29	TOP OF THE PAGE	Information message. No action needed.
140	UNABLE TO RETURN TO PREVIOUS PROGRAM, SELECT EXIT TO RETURN	Choose Exit to leave the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Case Screening Inquiry from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening Record Inquiry screen (EP-S-002).
OR
1. Choose EPSDT Case Screening Inquiry from the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008).
2. You see the EPSDT Case Screening Record Inquiry screen (EP-S-002).
OR
1. Choose the Screening button on the EPSDT Case Update screen (EP-S-001).

2. You see the EPSDT Case Screening Record Inquiry screen (EP-S-002).

# Screens EP-S-003 EPSDT Abnormality Treatment Inquiry

## General Information

This screen displays referral information as it relates to treatment for an abnormality detected during screening.

SOURCE/ORIGINATOR	EPT003VA
USAGE	Inquiry
PROGRAM	EPT003VA
MAPSET	EP003VA
TRAN ID	VB03

SAMPLE	<b>EPSDT Abnormality Treatment Inquiry (EP-S-003)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	TREATMENT PROVIDER ID National Provider Identifier (DE4700)	Edits: Must be numeric. Must be a valid Pro- vider Identification Number. Messages: "INVALID PROVIDER ID". "NO MATCHING RECORDS FOUND".  This field may contain the Treatment Pro- vider's nine digit Legacy ID or the Treatment Provider's	A unique identification number assigned to a provider. A unique identification number assigned to a provider. INQUIRY (O/U) Enter the unique identification number of the treatment provider. Must be numeric. Must be a valid Provider Identification Number.

		ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered on the screen whenever both numbers are present.	
2	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)	Edits: Must be numeric. Must be a valid enrollee on the EPSDT Master File (EP-F-001) and the Enrollee (Recipient) Base. Messages: 8001-- ENROLLEE ID IS INVALID. 8014 - ENROLLEE ID NOT ON FILE. 8012- NO RECORD FOUND FOR THIS ENROLLEE ID.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (O/U) Enter the enrollee ID number. Must be numeric. Must be a valid enrollee on the EPSDT Master File and the Enrollee Master.  N/A
3	SCREENING PROVIDER ID National Provider Identifier (DE4700)	Edits: Must be numeric. Must be a valid Provider Identification Number. Messages: "INVALID PROVIDER ID". "NO MATCHING RECORDS FOUND".  This field may contain the Screening Provider's nine digit Legacy ID or the Screening Provider's ten digit National Provider Identifier (NPI).	A unique identification number assigned to a provider. INQUIRY (O/U) Enter the screening provider number. Must be a valid Provider Identification Number.  A unique identification number assigned to a provider. INQUIRY (O/U) Enter the screening provider number. Must be a valid Provider Identification Number.

		The NPI, when available, will always take precedence over the Legacy ID and must be entered on the screen whenever both numbers are present.	
4	SEL (DE0000)	Edits: Must be an "X" or "S". Used when selecting a specific enrollee.  Messages: "Enter an "S" or "X" in this field."	The field used in selecting a specific enrollee. INQUIRY (O/U) Click under the check for selecting a specific enrollee.  N/A
5	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
6	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
7	ICN Claim Request ICN (DE2001)		A unique Transaction Control Number serving to identify each claim transaction record. It is the group representation of Claim Reference DMB ( first 14 bytes representing the date, media, batch number, sequence number) and Claim Reference lines (last two bytes representing line number).  N/A
8	SCREENING PROV ID National Provider Identifier (DE4700)	Edits:  Messages: This field may contain the Screening Provider's nine digit Legacy ID or the Screening Provider's ten digit National Provider Identifier (NPI).	A unique identification number assigned to a provider.  N/A

		The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	
9	SCREEN TYPE EPSDT Screen Type (DE8101)		This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).  N/A
10	SCREEN DATE EPSDT Screening Appointment Date (DE8205)		The date a screening should be performed.  N/A
11	SCREENING PROVIDER NAME Provider Name (DE4085)		The name of the screening provider.  N/A
12	INITIAL TREATMENT DATE EPSDT Treatment Initiation Date (DE8130)		This is the date of the first treatment of an abnormal condition detected during a screening.  N/A
13	CATEGORY Diagnosis Name (DE5302)		Generally accepted nomenclature for a diagnosis.  N/A
14	DIAGNOSIS Diagnosis Code (DE5301)		Identifies a diagnosed medical condition; the ICD coding structure is used.  N/A
15	TREATMENT COMPLETE Calculated (DE0002)		An indicator for stating if the treatment of enrollee is complete.  N/A
16	TREATMENT COMPLETION DATE EPSDT Treatment Completion Date		This is the date treatment of an abnormal condition detected during a screening was complete.  N/A

	EPSDT Treatment Completion Date (DE8135)		
17	BENEFIT PLAN NAME Benefit Definition Plan Short Name (DE3555)		A short, concise description of a Benefit Plan used primarily in reporting.  N/A
18	MEDALLION PCP National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Medallion PCP's nine digit Legacy ID or the ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed whenever both numbers are present.	A unique identification number assigned to a provider who is in the Medallion program.  N/A
19	MODIFIER CODE Claims Procedure Code Modifier (DE2171)		The 2-position standard HCFA modifier entered with a procedure code. The exception is that for EPSDT, the valid modifiers are only one position, H, K, T, U, W, Y, Z.  N/A
20	CPT CODE Procedure Code (DE5002)		Code used to identify a specific dental, medical, revenue, or ICD diagnosis/surgical procedure.  N/A
21	COMMENTS EPSDT Treatment Comments (DE8126)		This field contains comments relating to a treatment resulting from an abnormal screening. DMAS will has access to this field.  N/A

NAVIGATION	<b>EPSDT Abnormality Treatment Inquiry (EP-S-003)</b>	
Function	Action	Branch To (B) or

(B) or (M)		Return To (R)
CASE INQ	Allows navigation to the EPSDT Case Update Screen or the EPSDT Case Inquiry Provider/Member Help-Line Screen.	EP-S-001 (B)
Enter	Processes the entered data.	N/A
MAIN	Returns to the MMIS Main Menu.	RF-S-010 (R)
MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (B)
NEXT PAGE	Allows the user to page forward through a series of requested data.	N/A
PREV PAGE	Allows the user to page backward through a series of requested data.	N/A
REFRESH	Command that allows the user to redisplay the current screen.	N/A
RETURN	Returns to the previous screen.	N/A
SCREEN INQ	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8000	ENTER A VALID OPTION	Enter a valid Option. See the field definitions for valid options.
8054	ENTER ID VALUE(S) FOR PROCESSING	Enter the valid ID value(s). See the field definitions for formatting and requirements for this field.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.

8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8012	NO RECORD FOUND FOR THIS ENROLLEE ID	Information message.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
8044	PROVIDER ID IS INVALID	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8099	SELECT ONLY ONE RECORD	Information message.
140	UNABLE TO RETURN TO PREVIOUS PROGRAM, SELECT EXIT TO RETURN	Choose Exit to leave the transaction.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:

1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Abnormality Treatment Inquiry from the Selection drop-menu.
7. You see the EPSDT Abnormality Treatment Inquiry screen (EP-S-003).

OR

1. Choose EPSDT Abnormality Treatment from the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008).
2. You see the EPSDT Abnormality Treatment Inquiry screen (EP-S-003).

# Screens EP-S-004 EPSDT Member Name Browse

## General Information

This inquiry screen displays a list of EPSDT Members on the EPSDT Master File in Last Name, First Name order.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT004VA
MAPSET	EP004VA
TRAN ID	VB04

SAMPLE	<b>EPSDT Member Name Browse (EP-S-004)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	KEY-IN LAST (NAME) Enrollee Last Name (DE3110)	Messages: 8022-ENTER AN ENROLLEE NAME. 8025- NO MATCHING RECORDS FOUND. 8023- ENROLLEE NAME IS INVALID.	The last name of the individual eligible for a DMAS-administered medical care program. INQUIRY (R/U) Enter the last name of the enrollee to be inquired.  N/A
2	KEY-IN FIRST (NAME) Enrollee First Name (DE3111)	Messages: 8026- ENROLLEE LAST NAME REQUIRED.	The first name of the individual eligible for a DMAS-administered medical care program. INQUIRY (O/U) Enter the first name of the enrollee to be inquired.  N/A

4	NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
5	ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
6	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  N/A
7	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  N/A
8	LAST SCRN EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date.  N/A
9	NEXT SCRN EPSDT Date of Next Screen (DE8007)		The numeric data field contains the date that a recipient is due for screening.  N/A
10	PROV ID National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  A unique identification number assigned to a provider.
11	COMPL RATE		Reflects the provider's success in getting enrollees screened within the required time.

EPSDT Screening Compliance Rate (DE8380)	N/A
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NAVIGATION		EPSDT Member Name Browse (EP-S-004)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CASE INQUIRY	Allows navigation to the EPSDT Case Update Screen or the EPSDT Case Inquiry Provider/Member Help-Line screen.	EP-S-001 EP-S-013 (B)
Clear Form	Clears the content of fields containing keyed data.	N/A
Enter	Displays all names that match the keyed names, in alphabetical order.	N/A
SUB MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
PAGE DOWN	Allows the user to page backward through a series of requested data.	N/A
PAGE UP	Allows the user to page forward through a series of requested data.	N/A
REFERRAL INQUIRY	Allows navigation to the EPSDT Referral Information screen.	N/A
RETURN	Returns to the previous screen.	N/A
SCREEN INQUIRY	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8026	ENROLLEE LAST NAME REQUIRED	Information message.

8023	ENROLLEE NAME IS INVALID	Check the Enrollee Name for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8126	ENTER A VALID SELECTION	Enter valid values according to error message specifications.
8022	ENTER AN ENROLLEE NAME	Enter valid values according to error message specifications.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8015	ERROR WHILE OPENING	Information message.
139	FUNCTION IS INVALID	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.
8127	NAME CROSS-REFERENCE FILE CLOSED	Enter valid data and begin process again.
141	NO MATCHING RECORD FOUND	Information message.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8099	SELECT ONLY ONE RECORD	Information message.
29	TOP OF THE PAGE	Information message. No action needed.
140	UNABLE TO RETURN TO PREVIOUS PROGRAM, SELECT EXIT TO RETURN	Choose Exit to leave the transaction.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Enrollee Listing By Name from the Selection drop-menu.

7. Choose Enter.
8. You see the EPSDT Enrollee Name Browse screen (EP-S-004).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose Enrollee Listing By Name from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Enrollee Name Browse screen (EP-S-004).

# Screens EP-S-005 EPSDT Member Number Browse

## General Information

This inquiry screen displays a list of EPSDT Members on the EPSDT Master File by their current Medicaid Number.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT005VA
MAPSET	EP005VA
TRAN ID	VB05

SAMPLE	<b>EPSDT Member Number Browse (EP-S-005)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
0	KEY-IN (EPSDT ENROLLEE ID) Enrollee Permanent Identification Number (DE3093)	Edits: Must be numeric. Messages: 8002- ENTER AN ENROLLEE ID. 8001- ENROLLEE ID IS INVALID.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (R/U) Enter the first eight (8) characters of enrollee to be inquired.  N/A
3	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A

4	NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
5	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  N/A
6	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  N/A
7	LAST SCR EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date.  N/A
8	NEXT SCR EPSDT Date of Next Screen (DE8007)		The numeric data field contains the date that a recipient is due for screening.  N/A
9	PROV ID National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  A unique identification number assigned to a provider.
10	COMPL RATE EPSDT Screening Compliance Rate (DE8380)		Reflects the provider's success in getting enrollees screened within the required time.  N/A

NAVIGATION	<b>EPSDT Member Number Browse (EP-S-005)</b>	
Function	Action	Branch To (B) or

(B) or (M)		Return To (R)
PAGE UP	Allows the user to page forward through a series of requested data.	N/A
CASE	Allows navigation to the EPSDT Case Update screen.	EP-S-001 (B)
Clear Form	Clears the keyed member ID that was previously entered.	N/A
Enter	Process the entered information.	N/A
SUB MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
PAGE DOWN	Allows the user to page backward through a series of requested data.	N/A
REFERRAL	Allows navigation to the EPSDT Referral Information screen.	N/A
RETURN	Returns to the previous screen.	N/A
SCREENING	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8134	ENROLLEE CROSS-REFERENCE FILE CLOSED	Information message.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8126	ENTER A VALID SELECTION	Enter valid values according to error message specifications.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8003	EPSDT MASTER FILE CLOSED	Enter valid values according to error message specifications.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.

8030	LAST PAGE OF RECORDS	Information message. No action needed.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
8049	PROVIDER ID NOT FOUND ON FILE	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8099	SELECT ONLY ONE RECORD	Information message.
29	TOP OF THE PAGE	Information message. No action needed.
140	UNABLE TO RETURN TO PREVIOUS PROGRAM, SELECT EXIT TO RETURN	Choose Exit to leave the transaction.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Enrollee Listing By Medicaid ID from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Enrollee Number Browse screen (EP-S-005).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose Enrollee Listing By Medicaid ID from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Enrollee Number Browse screen (EP-S-005).

# Screens EP-S-006 EPSDT Member Provider Name Browse

## General Information

This on-line inquiry screen displays a list of EPSDT Members by screening Provider Name.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT006VA
MAPSET	EP006VA
TRAN ID	VB06

SAMPLE	EPSDT Member Provider Name Browse (EP-S-006)
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	KEY-IN (PROVIDER LAST NAME) Provider Name (DE4085)	Messages: 8024- ENROLLEE NAME IS NOT ON FILE. 8052- GET PROVIDER NAME TO BROWSE ENROLLEE DETAILS.	The Name of the Provider. (P)  N/A
2	KEY-IN (PROVIDER FIRST NAME) Provider Name (DE4085)		The name of the provider. (P)  N/A
3	PROVIDER COMPLIANCE RATE EPSDT Screening Compliance Rate (DE8380)		Reflects the provider's success in getting enrollees screened within the required time. (P)  N/A

5	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs. (P)  N/A
6	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. (P)  N/A
7	D.O.B. Enrollee Birth Date (DE3005)		The enrollee's date of birth. (P)  N/A
8	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee. (P)  N/A
9	LAST SCREENED EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date. (P)  N/A
10	NEXT DUE EPSDT Date of Next Screen (DE8007)		The numeric data field contains the date that a recipient is due for screening. (P)  N/A
11	PROV ID National Provider Identifier (DE4700)	Edits:  Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider. (P)  N/A
13	SEARCH KEY (Enrollee Last Name) (DE0000)	Edits: Should be at least 3 characters. In case first name is entered, it should be separated from last name by a single space or comma.  Messages:	Search key/input field for this screen. (U/R)  N/A

	AT LEAST 3 CHARACTERS OF NAME REQUIRED	
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NAVIGATION		EPSDT Member Provider Name Browse (EP-S-006)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CASE	Allows navigation to the EPSDT Case Update or the EPSDT Case Inquiry Provider/Member Help-Line Screen.	EP-S-001 EP-S-013 (B)
Enter	Processes the entered information.	N/A
SUB MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to the MMIS Main Menu.	RF-S-010 (R)
PAGE DOWN	Allows the user to page backward through a series of requested data.	N/A
PAGE UP	Allows the user to page forward through a series of requested data.	N/A
PROVIDER ID	Allows navigation to the EPSDT Member Provider ID Browse screen.	EP-S-007 (B)
REFERRAL	Allows navigation to the EPSDT Referral Information screen.	N/A
RETURN	Returns to the previous screen.	N/A
SCREENING	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8129	CHOOSE THE APPROPRIATE BUTTON	Information message.
8024	ENROLLEE NAME IS NOT ON FILE	Information message.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.

139	FUNCTION IS INVALID	Information message.
8052	GET PROVIDER NAME TO BROWSE ENROLLEE DETAILS	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
4120	RECORDS DISPLAYED	Information message. No action needed.
8521	SEARCH TOO LARGE; ENTER MORE CHARACTERS	Enter more characters to narrow the search criteria.
4457	SELECT ONLY ONE RECORD	Information message.
29	TOP OF THE PAGE	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Enrollee Listing By Provider Name from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Provider Name Browse (EP-S-014).
9. Choose the Name Browse button.
10. You see the EPSDT Enrollee Provider Name Browse screen (EP-S-006) prompting for Enrollee last name.
11. Enter at least a character of Last name to be searched, or combination of Last and first name separated by
single comma or space. If separator is a comma, make sure that first name follows comma immediately(no space).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose Enrollee Listing By Provider Name from the Selection drop-menu.
2. Choose Enter.

3. You see the EPSDT Enrollee Provider Name Browse screen (EP-S-006) prompting for Enrollee name search.

4. Enter at least a character of Last name to be searched, or combination of Last and first name separated by

single comma or space. If separator is a comma, make sure that first name follows comma immediately(no space).

# Screens EP-S-007 EPSDT Member Provider ID Browse

## General Information

This inquiry screen displays a list of EPSDT members on the EPSDT Master File by Provider ID Number.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT007VA PSXREFVA
MAPSET	EP007VA
TRAN ID	VB07

SAMPLE	<b>EPSDT Member Provider ID Browse (EP-S-007)</b>
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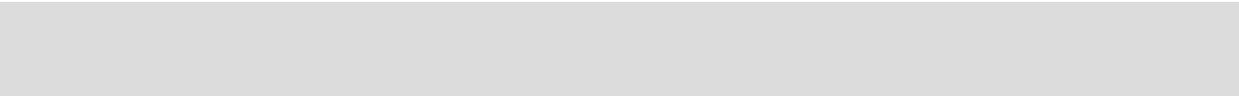
There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	PROVIDER ID (Key-in) National Provider Identifier (DE4700)	<p>Edits:</p> <p>Must be a valid Provider Identification Number.</p> <p>If the provider number is a Legacy, then it must not have an associated NPI/API, except during dual usage period.</p> <p>Messages:</p> <p>8044- PROVIDER ID IS INVALID. 8053- ENTER PROVIDER ID FOR SEARCH. 8912- ENTER A 10 DIGIT PROVIDER NUMBER</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit</p>	<p>A unique identification number assigned to a provider.</p> <p>INQUIRY (R/U)</p> <p>Enter the provider number you wish to inquire. Must be a valid Provider Identification Number. If the provider number is a Legacy, then it must not have an associated NPI/API, except during dual usage period.</p> <p>N/A</p>



		National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered on the screen whenever both numbers are present.	
2	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  N/A
3	PROVIDER COMPLIANCE RATE EPSDT Screening Compliance Rate (DE8380)		Reflects the provider's success in getting enrollees screened within the required time.  N/A
5	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
6	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
7	D.O.B. Enrollee Birth Date (DE3005)		The enrollee's date of birth.  N/A
8	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  N/A
9	LAST SCREENED EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date.  N/A
10	NEXT DUE EPSDT Date		The numeric data field contains the date that a recipient is due for screening.



	of Next Screen (DE8007)		N/A
11	PROV ID National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  N/A

NAVIGATION	EPSDT Member Provider ID Browse (EP-S-007)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CASE	Allows navigation to the EPSDT Case Update Screen or the EPSDT Case Inquiry Provider/Member Help-Line Screen.	EP-S-001 EP-S-013 (B)
CLEAR FORM	Clears the screen of previously input data.	N/A
Enter	List all members who are linked to the specified (keyed) provider ID.	N/A
SUB MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
PAGE DOWN	Allows the user to page backward through a series of requested data.	N/A
PAGE UP	Allows the user to page forward through a series of requested data.	N/A
PROVIDER NAME	Allows navigation to the EPSDT Member Provider Name Browse screen.	EP-S-006 (B)
REFERRAL	Allows navigation to the EPSDT Referral Information screen.	N/A
RETURN	Returns to the previous screen.	N/A
SCREENING	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT	User does not have access to the

	AUTHORIZED	screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8129	CHOOSE THE APPROPRIATE BUTTON	Information message.
8126	ENTER A VALID SELECTION	Enter valid values according to error message specifications.
8053	ENTER PROVIDER ID FOR SEARCH	Enter valid values according to error message specifications.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
8132	OPEN ERROR ON PROVIDER ID CROSS-REFERENCE FILE	Information message.
8912	PLEASE ENTER 10 DIGIT NUMERIC PROVIDER ID.	Informational message
8131	PROVIDER ID CROSS-REFERENCE FILE CLOSED	Information message.
8044	PROVIDER ID IS INVALID	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8130	SELECT ONLY ONE RECORD	Information message.
29	TOP OF THE PAGE	Information message. No action needed.
140	UNABLE TO RETURN TO PREVIOUS PROGRAM, SELECT EXIT TO RETURN	Choose Exit to leave the transaction.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:

1. Choose the EPSDT icon.

2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Enrollee Listing By Provider ID from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Enrollee Provider ID Browse screen (EP-S-007).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose Enrollee Listing By Provider ID from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Enrollee Provider ID Browse screen (EP-S-007).

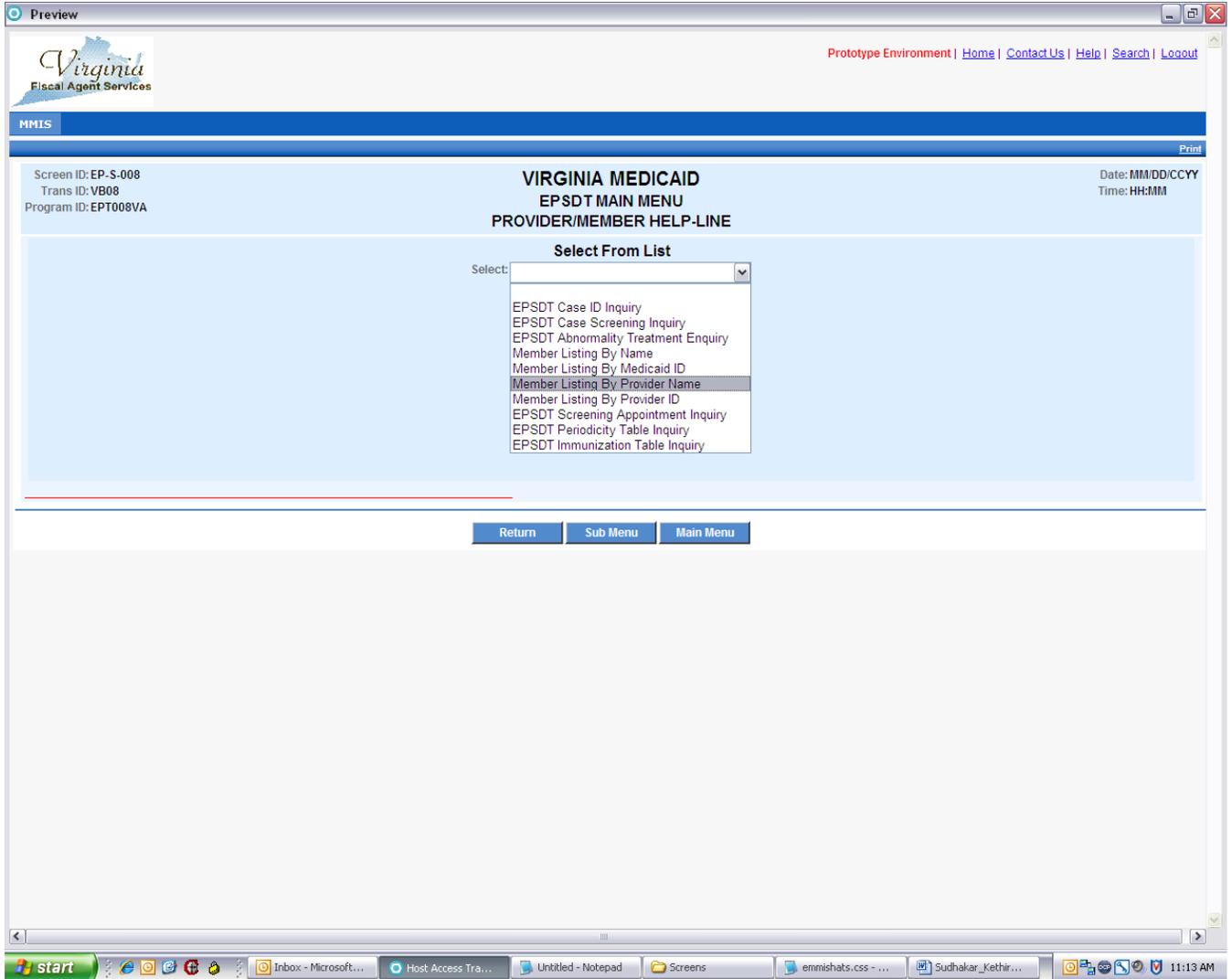
# Screens EP-S-008 EPSDT Main Menu - Provider/Member Help-line

## General Information

This on-line menu screen displays a list of the options available to the Provider/Member Help-line for accessing EPSDT information.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT008VA
MAPSET	EP008VA
TRAN ID	VB08

SAMPLE	EPSDT Main Menu - Provider/Member Help-line (EP-S-008)
--------	--



## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	TRANSACTION ID (DE0000)		'EXCLUDE'
2	PROGRAM NAME (DE0000)		'EXCLUDE'
3	SCREEN TITLE (DE0000)		'EXCLUDE'

4	SYSTEMDATE (DE0000)		'EXCLUDE'
5	SYSTEMTIME (DE0000)		'EXCLUDE'
6	SELECTION (DE0000)	Edits: One of the following selections may be opted: 1-EPSDT Case Inquiry; 2-EPSDT Case Screening Inquiry; 3-EPSDT Abnormality Treatment Inquiry; 4-Enrollee Listing by Name; 5-Enrollee Listing by Medicaid ID; 6-Enrollee Listing by Provider Name; 7-Enrollee Listing by Provider ID; 8-EPSDT Screening Appointment Inquiry; 9-EPSDT Periodicity Table Inquiry; and 10-EPSDT Immunization Table Inquiry.	The selections allowed by this screen. Selections are: EPSDT Case ID Inquiry EPSDT Case Screening Inquiry EPSDT Abnormality Treatment Inquiry Enrollee Listing by Name Enrollee Listing by Medicaid ID Enrollee Listing by Provider Name Enrollee Listing by Provider ID EPSDT Screening Appointment Inquiry EPSDT Periodicity Table Inquiry EPSDT Immunization Table Inquiry. INQUIRY (R/P) Select the desired option you wish to inquire.
7	MSG (DE0000)		'EXCLUDE'

NAVIGATION		EPSDT Main Menu - Provider/Member Help-line (EP-S-008)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)	
MEMBER LISTING BY NAME	Invokes the EPSDT Member Name Browse screen.	RS-S-101 RS-S-105 (B)	
MEMBER LISTING BY PROVIDER ID	Invokes the EPSDT Member Provider ID Browse screen.	RS-S-101 (B)	
MEMBER LISTING BY PROVIDER NAME	Invokes the EPSDT Member Provider Name Browse screen.	N/A	
MEMBER LISTING BY MEDICAID ID	Invokes the EPSDT Member Number Browse screen.	N/A	
EPSDT ABNORMALITY	Invokes the EPSDT Abnormality Treatment Inquiry Screen.	N/A	

TREATMENT INQUIRY		
EPSDT CASE ID INQUIRY	Invokes the EPSDT Case Inquiry (Help-line) screen.	N/A
EPSDT CASE SCREENING INQUIRY	Invokes the EPSDT Screening Record Inquiry screen.	RS-S-000 (B)
EPSDT IMMUNIZATION TABLE INQUIRY	Invokes the EPSDT Immunization Schedule Inquiry screen.	MC-S-010 (B)
EPSDT PERIODICITY TABLE INQUIRY	Invokes the EPSDT Periodicity Schedule Inquiry screen.	N/A
EPSDT SCREENING APPOINTMENT INQUIRY	Invokes the EPSDT Screening and Referral Appointment Main Menu screen.	RS-S-102 (B)
SUB MENU	Returns to the EPSDT Main Menu screen.	N/A
MAIN MENU	Returns to MMIS Main Menu.	N/A
RETURN	Returns to the EPSDT Main Menu.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
52	CHOOSE A SELECTION	Choose a selection from the drop-down menu.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8115	ENTER A SELECTION NUMBER	Enter valid values according to error message specifications.
139	FUNCTION IS INVALID	Information message.
8031	SELECTION MUST BE NUMERIC	Information message.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.

2. You see the EPSDT Main Menu (EP-S-100).
3. Choose Provider/Recipient Help-Line Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Main Menu Provider/Recipient Help-line screen (EP-S-008).

# Screens EP-S-009 EPSDT Periodicity Schedule Update

## General Information

This screen permits update functions on the EPSDT Screening Periodicity Schedule, which is used to determine, by age, what screenings are due. This screen may be used by DMAS and/or FH authorized personnel.

SOURCE/ORIGINATOR	Operator
USAGE	Update
PROGRAM	EPT009VA
MAPSET	EP009VA
TRAN ID	VB09

SAMPLE	<b>EPSDT Periodicity Schedule Update (EP-S-009)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/VAMMIS/VAMMIS/default/ver=2.0/rparam=PERF0x1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSIONID=q0x12

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MMIS

Screen ID: EP-S-009  
Trans ID: VB09  
Program ID: EPT009VA

**VIRGINIA MEDICAID  
EPSDT PERIODICITY SCHEDULE UPDATE**

Date: 03/23/2010  
Time: 16:21  
Page: 01

	Age in Months									Age in Years											
	00	01	02	04	06	09	12	15	18	02	03	04	05	06	08	10	12	14	16	18	20
Medical:	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Vision:	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Hearing:	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Dental:											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Update Date: 03/23/2010  
User ID: XA028

UPDATE DATA AND CHOOSE ENTER.

Enter Update Refresh Return Sub Menu Main Menu

650 (9,10) Local intranet 100%

start Ho... Su... DS... def... um... MI... Inb... VA ... Ho... Lot... Do...

4:21 PM

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	SCREENING TYPE (MED, VIS, HEAR and DENT) EPSDT Screen Type (DE8101)		This field identifies the type of screening as Dental, Hearing, Medical or Vision.
2	EPSDT ENROLLEE AGE EPSDT Enrollee Age at Screening or Immunization (DE8102)		The recipient's age at the time a screening was performed. May be represented in months or years.
3	SCREENING SCHEDULED	Edits:	

(DE0000)	Enter "Y" (Yes) or " " (No). Messages: "Enter 'Y' or space.	A 'Y' (Yes) or 'N ' (No) for the recipient's age at the time a screening is to be performed. UPDATE (R/U) Enter a 'Y' or 'N ' if you wish to change the date of the screening schedules.
4 LAST UPDATE DATE EPSDT Periodicity Table Last Update Date (DE8160)	Edits: Use the system date.	The date of the last update performed on the EPSDT Periodicity Table. System Displayed.
5 LAST UPDATE SOURCE EPSDT Periodicity Table Last Update ID (DE8161)	Edits: Enter program name (EPT009VA).	The ID of the operator or program that entered the last update to the Periodicity Table. System Displayed.
6 MSG (DE0000)		'EXCLUDE'

NAVIGATION			EPSDT Periodicity Schedule Update (EP-S-009)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)			
Enter	Processes the entered data.	N/A			
SUB MENU	Returns user to the EPSDT Main Menu screen.	RS-S-001 (R)			
MAIN MENU	Returns to MMIS Main Menu.	N/A			
REFRESH	Command that allows the user to redisplay the current screen.	N/A			
RETURN	Returns to the EPSDT Menu.	N/A			
UPDATE	Command button to save information entered in an update screen.	N/A			

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
45	CHOOSE UPDATE TO DELETE THE RECORD	Choose the update button to delete the record.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.

8060	ERROR OCCURRED WHILE WRITING TO LOG FILE (RFTPLOG)	Information message.
139	FUNCTION IS INVALID	Information message.
8057	LOG FILE CLOSED RECORD WAS NOT WRITTEN.	Information message.
8058	LOG FILE OUT OF SPACE RECORD WAS NOT WRITTEN.	Information message.
38	MISSING/INVALID DATA; CORRECT HIGHLIGHTED FIELD(S)	Correct the highlighted fields and choose Enter.
85	NO RECORD FOUND	Information message. No action needed.
8034	PERIODICITY TABLE FILE CLOSED	Information message.
86	READ FOR UPDATE WAS UNSUCCESSFUL	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
8059	UNSUCCESSFUL REWRITE OF PERIODICITY TABLE FILE	Contact ACS Operations for assistance.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Periodicity Table Update from the Selection drop-menu.
7. Choose Enter.
You see the EPSDT Periodicity Schedule Update screen (EP-S-009).

# Screens EP-S-010 EPSDT Periodicity Schedule Inquiry

## General Information

This screen allows inquiry functions on the EPSDT Screening Periodicity Schedule which is used to determine, by age, what screenings are due. This screen may be used by the Provider/Member Help-line or other personnel who may be restricted to Inquiry Only functionality.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT010VA
MAPSET	EP010VA
TRAN ID	VB10

SAMPLE	<b>EPSDT Periodicity Schedule Inquiry (EP-S-010)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/VAMMIS/VAMMIS/default/ver=2.0/rparam=PERF0x1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSIONID=wgNj...

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**Virginia Medicaid**

MMIS

Screen ID: EP-S-010  
Trans ID: VB10  
Program ID: EPT010VA

**VIRGINIA MEDICAID  
EPSDT PERIODICITY SCHEDULE INQUIRY**

Date: 03/25/2010  
Time: 10:59  
Page: 01

	Age in Months									Age in Years											
	00	01	02	04	06	09	12	15	18	02	03	04	05	06	08	10	12	14	16	18	20
Medical:	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Vision:	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Hearing:	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Dental:											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y

Update Date: 03/23/2010  
User ID: XA028

Return Sub Menu Main Menu

650 (9,10) | Local intranet | 100%

start | Inbox - Mic... | Sudhakar\_K... | DSD MMIS... | David Legg... | Host Access... | VA DMAS Pr... | HodConn:R...

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Cri- teria Message	Field Instructions
1	SCREENING TYPE (MED, VIS, HEAR and DENT) EPSDT Screen Type (DE8101)		This field identifies the type of screening as Dental, Hearing, Medical or Vision.  N/A
2	EPSDT ENROLLEE AGE EPSDT Enrollee Age at Screen- ing or Immunization (DE8102)		The recipient's age at the time a screening was per- formed. May be represented in months or years.  N/A
3	SCREENING SCHEDULED (DE0000)		A 'Y' (Yes) or 'N' (No) for the recipient's age at the time a screening is to be performed.

			N/A
4	LAST UPDATE DATE EPSDT Periodicity Table Last Update Date (DE8160)		The date of the last update performed on the EPSDT Periodicity Table.  N/A
5	LAST UPDATE SOURCE EPSDT Periodicity Table Last Update ID (DE8161)		The ID of the operator or program that entered the last update to the Periodicity Table.  N/A
6	MSG (DE0000)		'EXCLUDE'  N/A

NAVIGATION		EPSDT Periodicity Schedule Inquiry (EP-S-010)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)	
SUB MENU	Returns user to the EPSDT Main Menu screen.	N/A	
MAIN MENU	Returns to MMIS Main Menu.	N/A	
RETURN	Returns to the previous screen.	N/A	

## Error Messages

Error	Description	Resolution
8033	ERROR ENCOUNTERED WHILE ACCESSING PERIODICITY TABLE FILE	Information message.
139	FUNCTION IS INVALID	Information message.
8114	NO RECORD FOUND	Information message. No action needed.
8034	PERIODICITY TABLE FILE CLOSED	Information message.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.

5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Periodicity Table Inquiry from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Periodicity Schedule Inquiry screen (EP-S-010).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose EPSDT Periodicity Table Inquiry from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Periodicity Schedule Inquiry screen (EP-S-010).

# Screens EP-S-011 EPSDT Immunization Schedule Inquiry

## General Information

This screen allows inquiry functions on the EPSDT Immunization Schedule which is used for determining, by age, what immunizations are due.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT011VA
MAPSET	EP011VA
TRAN ID	VB11

SAMPLE	<b>EPSDT Immunization Schedule Inquiry (EP-S-011)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/HATS\_Portlet/HATS\_Portlet/default?ver=2.0/rparam=PERFD:1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSION

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MMIS

Screen ID: EP-S-011  
Trans ID: VB11  
Program ID: EPT011VA

**VIRGINIA MEDICAID**  
**EPSDT IMMUNIZATION SCHEDULE - INQUIRY**

Date: 03/26/2010  
Time: 14:50  
Page: 01

	Age In Months									Age In Years								
	00	01	02	04	06	12	15	18		04	05	06	11	12	14	15	16	
HEPB1:	Y																	
HEPB2:		Y																
HEPB3:					Y								Y	Y				
DTAP:			Y	Y	Y		Y	Y	Y	Y	Y	Y						
DTP4:							Y	Y										
DTP:			Y	Y	Y					Y	Y	Y						
TD:													Y	Y				
HIB:			Y	Y	Y	Y												
Polio:				Y						Y	Y	Y						
Polio6:			Y		Y													
MMR:						Y												
MMR7:										Y	Y	Y	Y	Y				
VAR:						Y												
VAR8:	Y									Y			Y	Y				

Update Date: 03/26/2010  
User ID: XA027

Return   Sub Menu   Main Menu

410 (6,10) | Local intranet | 100% | 2:50 PM

### Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Cri- teria Message	Field Instructions
1	EPSDT ENROLLEE AGE EPSDT Enrollee Age at Screening or Immunization (DE8102)		The recipient's age at the time a screening was per- formed. May be represented in months or years.  N/A
2	IMMUNIZATION TYPE EPSDT Immunization Type (DE8156)		Refers to the immunization type administered to an EPSDT enrollee.  N/A
3	IMMUNIZATION SCHEDULED	Edits:	An indicator for the months and years of age in which the types of immunizations are scheduled for the

	(DE0000)	N/A	enrollees. N/A
4	LAST UPDATE DATE EPSDT Immunization Table Last Update Date (DE8157)	Edits: N/A	This fields reflects the last date a record on this table was updated. N/A
5	LAST UPDATE SOURCE EPSDT Immunization Table Last Update ID (DE8158)	Edits: N/A	This is the user ID who updated or program ID that processed the last update to a record on the immunization table. N/A
6	MSG (DE0000)		'EXCLUDE' N/A

NAVIGATION		EPSDT Immunization Schedule Inquiry (EP-S-011)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
SUB MENU	Returns user to the EPSDT Main Menu screen.	N/A
MAIN MENU	Returns to MMIS Menu.	N/A
RETURN	Returns to the previous screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8043	IMMUNIZATION TABLE FILE CLOSED	Information message.
7058	NO RECORD FOUND	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.

2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Immunization Table Inquiry from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Immunization Schedule Inquiry screen (EP-S-011).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose EPSDT Immunization Table Inquiry from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Immunization Schedule Inquiry screen (EP-S-011).

# Screens EP-S-012 EPSDT Immunization Schedule Update

## General Information

This screen allows update functions on the EPSDT Immunization Schedule, which is used to determine, by age, what immunizations are due. This screen may be used by authorized DMAS or FHS personnel.

SOURCE/ORIGINATOR	Operator
USAGE	Update
PROGRAM	EPT012VA
MAPSET	EP012VA
TRAN ID	VB12

SAMPLE	<b>EPSDT Immunization Schedule Update (EP-S-012)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/HATS\_Portlet/HATS\_Portlet/default;ver=2.0/rparam=PERFD:1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSION

VA DMAS Prototype Portal

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MMIS

Screen ID: EP-S-012  
Trans ID: VB12  
Program ID: EPT012VA

Date: 03/26/2010  
Time: 10:02  
Page: 01

### VIRGINIA MEDICAID EPSDT IMMUNIZATION SCHEDULE - UPDATE

	Age In Months									Age In Years							
	00	01	02	04	06	12	15	18		04	05	06	11	12	14	15	16
HEPB1:	Y																
HEPB2:		Y															
HEPB3:					Y								Y	Y			
DTAP:			Y	Y	Y		Y	Y	Y	Y	Y	Y					
DTP4:							Y	Y									
DTP:			Y	Y	Y					Y	Y	Y					
TD:													Y	Y			
HIB:			Y	Y	Y	Y											
Polio:				Y						Y	Y	Y					
Polio6:			Y		Y												
MMR:						Y											
MMR7:										Y	Y	Y	Y	Y			
VAR:						Y											
VAR8:	Y									Y			Y	Y			

Update Date: 03/25/2010  
User ID: XA027

**UPDATE DATA AND CHOOSE ENTER.**

410 (6,10) Local intranet 100% 10:02 AM

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	EPSDT ENROLLEE AGE EPSDT Enrollee Age at Screening or Immun- ization (DE8102)		The recipient's age at the time a screening was per- formed. May be represented in months or years.
2	IMMUNIZATION TYPE EPSDT Immunization Type (DE8156)		Refers to the immunization type administered to an EPSDT enrollee. Use the On-Line HELP system to find valid codes for this field.

3	IMMUNIZATION SCHEDULED (DE0000)	Edits: Enter "Y" (Yes) or " " (No). Messages: Missing Invalid Date; Correct Highlighted Field(s).	An indicator for the months and years of age in which the types of immunizations are scheduled for the enrollees. UPDATE (R/P) Enter a 'Y' (Yes) or ' ' (No) in the field you wish to change the scheduled immunization dates.
4	LAST UPDATE DATE EPSDT Immunization Table Last Update Date (DE8157)	Edits: System date.	This fields reflects the last date a record on this table was updated. System Displayed.
5	LAST UPDATE SOURCE EPSDT Immunization Table Last Update ID (DE8158)	Edits: Program Name.	This is the user ID who updated or program ID that processed the last update to a record on the immunization table. System Displayed.
6	MSG (DE0000)		'EXCLUDE'

NAVIGATION			EPSDT Immunization Schedule Update (EP-S-012)
Function (B) or (M)	Action	Branch To (B) or Return To (R)	
ENTER	Processes the entered data.	N/A	
SUB MENU	Returns user to the EPSDT Main Menu screen.	RS-S-001 (R)	
MAIN MENU	Returns to MMIS Main Menu.	N/A	
REFRESH	Command that allows the user to redisplay the current screen.	RS-S-010 ( )	
RETURN	Returns to the previous screen.	N/A	
UPDATE	Command button to save information entered in an update screen.	RS-S-001 ( )	

### Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
39	CHOOSE UPDATE TO SAVE CHANGES	Choose the update button to save the changes.

30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
88	ERROR OCCURRED WHILE WRITING TO TELEPROCESSING LOG FILE	Retry the action, if applicable.
8113	ERROR UPDATING IMMUNIZATION TABLE FILE	Information message.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8043	IMMUNIZATION TABLE FILE CLOSED	Information message.
38	MISSING/INVALID DATA; CORRECT HIGHLIGHTED FIELD(S)	Correct the highlighted fields and choose Enter.
89	NO MORE SPACE ON TELEPROCESSING LOG FILE	Contact the ACS help desk, if necessary.
85	NO RECORD FOUND	Information message. No action needed.
86	READ FOR UPDATE WAS UNSUCCESSFUL	Information message. No action needed.
25	RECORD UPDATED	Information message. No action needed.
111	TELEPROCESSING LOG FILE NOT OPEN	Contact Network Control for assistance.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Immunization Table Update from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Immunization Schedule Update screen (EP-S-012).

# Screens EP-S-013 EPSDT Case Inquiry - Provider/Member Help-line

## General Information

This screen is used to inquire on member demographic and eligibility information stored on the Member Eligibility Database and the EPSDT Master File. Access is based on current Medicaid Number and/or Last Name. The Member Identification Number and Last Name may be key entered to perform searches. The Provider/Member Help-line will use this screen. All fields are display only and may not be altered.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT013VA
MAPSET	EP013VA
TRAN ID	VB13

SAMPLE	<b>EPSDT Case Inquiry - Provider/Member Help-line (EP-S-013)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	KEY-IN ENROLLEE ID Enrollee Permanent Identification Number (DE3093)	Edits: Must be a valid enrollee id. Messages: ENTER AN ENROLLEE ID OR ENROLLEE LAST NAME. 8001- ENROLLEE ID IS INVALID. 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (C/U) Enter the enrollee ID number you wish to inquire.  N/A
2	KEY-IN LAST NAME	Edits:	The last name of the individual eligible

	Enrollee Last Name (DE3110)	Must be alphabetic. Messages: INVALID ENROLLEE NAME.	for a DMAS-administered medical care program. INQUIRY (C/U) Enter the last name of the enrollee you wish to inquire.  N/A
3	D.O.B Enrollee Birth Date (DE3005)		The enrollee's date of birth.  N/A
4	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  N/A
5	RACE Enrollee Race Code (DE3006)		A code indicating the enrollee's racial origin.  N/A
6	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  N/A
7	ENROLLEE ADDRESS LINE 1 Enrollee Street Address (DE3115)		The street address of the enrollee.  N/A
8	ENROLLEE ADDRESS LINE 2 Enrollee City Name (DE3116)		Name of the city in which the enrollee lives.  N/A
9	ENROLLEE CITY NAME Enrollee City Name (DE3116)		Name of the city in which the enrollee lives.  N/A
10	ENROLLEE STATE Enrollee State Code (DE3117)		State abbreviation of the state in which the enrollee lives.  N/A
11	ENROLLEE ZIP		ZIP code of the area in which the

	Enrollee ZIP Code (DE3118)		enrollee lives.  N/A
12	RESPONSIBLE PARTY Case Name (DE3046)		The name of the individual who is considered head of the household, family, or group of individuals in the same Case entity.  N/A
13	CITY COUNTY CODE Enrollee FIPS Code (DE3008)		A code indicating the geographic or geopolitical statistical reporting area in which the enrollee resides. The county is a sub-division within the Commonwealth of Virginia.  N/A
14	LAST SCREEN DATE EPSDT Date of Last Screen (DE8006)		This date reflects the last performed screening date.  N/A
15	NEXT SCREEN DUE EPSDT Date of Next Screen (DE8007)		The numeric data field contains the date that a recipient is due for screening.  N/A
16	PROGRAM DESCRIPTION Benefit Definition Plan Short Name (DE3555)		A short, concise description of a Benefit Plan used primarily in reporting.  N/A
17	Aid Category Enrollee Eligibility Aid Category (DE3009)		Also known as Money Payment Code, Recipient Program Designation or Scope of Coverage code. This is the program category under which a recipient is eligible for Medicaid or DMAS-administered programs. It is also used to identify an enrollee's eligibility for certain Benefit Plans.  N/A
18	ASSIGNMENT STATUS Enrollee Eli-		A code used to indicate whether the associated eligibility period is active or voided.

	gibility Status Code (DE3499)		N/A
19	Exclusion Indicator Benefit Plan Exception Indicator (DE3072)		A code used as a modifier to the Benefit Plan Code, indicating the level of care (LOC) that the enrollee is receiving in a nursing home facility or waiver service.  N/A
20	ASSIGNMENT FROM (DATE) Enrollee Eligibility Begin Date (DE3010)		The date from which an enrollee may begin to receive DMAS-administered program benefits for a particular continuous period.  N/A
21	ASSIGNMENT TO (DATE) Enrollee Eligibility End Date (DE3011)		The date through which an enrollee is approved to receive DMAS-administered program benefits for a particular continuous period.  N/A
22	LAST ACTION EPSDT Last Update Type (DE8012)		This one character field indicates the action taken to alter the enrollee's EPSDT Master File Record.  N/A
23	SOURCE EPSDT Last Update Source (DE8045)		The on-line program by which the EPSDT Master record was last updated.  N/A
24	LAST ACTION ID EPSDT Last Update Operator Identification (DE8009)		This is the on-line logon identification of the last user who updated the record on the EPSDT Master File.  N/A
25	LAST ACTION DATE EPSDT Last Update Date (DE8046)		The date the Master record was last updated, on-line.  N/A
26	PROVIDER ID National Provider Identifier	Edits: Messages:	A unique identification number assigned to a provider.

	(DE4700)	This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.
27	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  N/A
28	COMMENTS EPSDT Case Comments (DE8015)		This thirty character field occurs 4 times. It is used for any comments about the enrollee or other information on the EPSDT Master File.  N/A

NAVIGATION	EPSDT Case Inquiry - Provider/Member Help-line (EP-S-013)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CLEAR FORM	Command that initializes the screen.	N/A
MEMBER ID	Allows navigation to the EPSDT Member Number Browse screen.	EP-S-005 (B)
MEMBER NAME	Allows navigation to the EPSDT Member Name Browse screen.	EP-S-004 (B)
Enter	Re-displays the screen with data using the most recently keyed Member ID or Last Name.	N/A
SUB MENU	Returns user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN MENU	Returns to MMIS Menu.	RF-S-010 (R)
PROV ID	Allows navigation to the EPSDT Member Provider ID Browse screen.	EP-S-007 (B)
PROV NAME	Allows navigation to the EPSDT Member Provider Name Browse screen.	EP-S-006 (B)
RETURN	Returns to the EPSDT Main Menu - Provider/Member Help-line screen.	N/A
SCREENING	Allows navigation to the EPSDT Screening Record Inquiry screen.	EP-S-002 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
68	DATA REFRESHED	Information message.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8138	ENTER AN ENROLLEE ID OR ENROLLEE LAST NAME	Enter valid values according to error message specifications.
8003	EPSDT MASTER FILE CLOSED	Enter valid values according to error message specifications.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
139	FUNCTION IS INVALID	Information message.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose Provider/Recipient Help-Line Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Main Menu Provider/Recipient Help-line screen (EP-S-008).
6. Choose EPSDT Case ID Inquiry from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Case Inquiry - Provider/Recipient Help-line screen (EP-S-013).
OR
From the EPSDT Provider Name Browse screen (EP-S-014):
1. Choose the Name Browse button.
2. You see the EPSDT Case Inquiry - Provider/Recipient Help-line screen (EP-S-013).

# Screens EP-S-014 EPSDT Provider Name Browse

## General Information

This screen displays an alphabetical listing of all linked Primary Care Providers (PCPs) in the EPSDT Subsystem who have performed screenings. The list is displayed when a Provider Last Name or part of a last name is entered.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT014VA
MAPSET	EP014VA
TRAN ID	VB14

SAMPLE	<b>EPSDT Provider Name Browse (EP-S-014)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	(Key-In) Provider Name To Be Defined (DE4065)	Messages: 8045- ENTER PROVIDER NAME FOR SEARCH. 8050- PROVIDER NAME IS INVALID. 8024- ENROLLEE NAME IS NOT ON FILE.	Last name of the provider. INQUIRY (R/P) Enter the last name of the provider you wish to inquiry.  N/A
3	Provider Name		The name of the provider.

	Provider Name (DE4085)		N/A
4	Provider Number National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  A unique identification number assigned to a provider.

NAVIGATION		EPSDT Provider Name Browse (EP-S-014)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
Enter	Displays the enter provider name data.	N/A
SUB MENU	Returns to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
Name Browse	Allows navigation to the EPSDT Member Provider Name Browse screen.	EP-S-006 (B)
Page Down	Re-displays any previously displayed pages, where applicable.	N/A
Page Up	Displays subsequent pages of data.	N/A
RETURN	Returns to the previous screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8125	CHOOSE THE ENROLLEE NAME BUTTON	Information message.
8024	ENROLLEE NAME IS NOT ON FILE	Information message.
8126	ENTER A VALID SELECTION	Enter valid values according to error message specifications.
8045	ENTER PROVIDER NAME FOR SEARCH	Enter valid values according to error mes-

		sage specifications.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.
8127	NAME CROSS-REFERENCE FILE CLOSED	Enter valid data and begin process again.
141	NO MATCHING RECORD FOUND	Information message.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
8128	OPEN ERROR ON NAME CROSS- REFERENCE FILE	Information message.
8050	PROVIDER NAME IS INVALID	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8130	SELECT ONLY ONE RECORD	Information message.
8051	SELECT RECORD TO BROWSE ENROLLEE NAME DETAILS	Information message.
29	TOP OF THE PAGE	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Enrollee Listing By Provider Name from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Provider Name Browse screen (EP-S-014).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose Enrollee Listing By Provider Name from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Provider Name Browse screen (EP-S-014).

# Screens EP-S-015 EPSDT Abnormality Treatment Update

## General Information

This screen displays referral information for update as it relates to treatment for an abnormality detected during screening.

SOURCE/ORIGINATOR	EPT015VA
USAGE	Inquiry, Update
PROGRAM	EPT015VA
MAPSET	EP015VA
TRAN ID	VB15

SAMPLE	<b>EPSDT Abnormality Treatment Update (EP-S-015)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	(Key-In) Treatment Provider ID National Provider Identifier (DE4700)	Edits: Must be a valid pro- vider ID. Messages: 8044- PROVIDER ID IS INVALID.  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take pre- cedence over the Legacy ID and must	A unique identification number assigned to a provider. INQUIRY (C/U) Enter the treatment provider number.  A unique identification number assigned to a provider. UPDATE (C/U) Enter the treatment provider number.

		be entered on the screen whenever both numbers are present.	
2	(Key-In) Enrollee ID Enrollee Permanent Identification Number (DE3093)	Edits: Must be a valid Enrollee ID on the EPSDT Master and the Recipient Eligibility Tables. Messages: 8001- ENROLLEE ID IS INVALID. 8014- ENROLLEE ID NOT ON FILE.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. Must be a valid Enrollee ID on the EPSDT Master and the Recipient Eligibility Tables. INQUIRY (C/U) Enter the enrollee ID number.  The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. Must be a valid Enrollee ID on the EPSDT Master and the Recipient Eligibility Tables. UPDATE (C/U) Enter the enrollee ID number.
3	(Key-In) Screening Provider ID National Provider Identifier (DE4700)	Edits: Must be a valid provider ID on the Provider Eligibility Tables. Messages: 8044- PROVIDER ID IS INVALID.  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered on the screen whenever both numbers are present.	A unique identification number assigned to a provider. Must be a valid provider ID on the Provider Eligibility Tables. INQUIRY (C/U) Enter the screening provider number.  A unique identification number assigned to a provider. Must be a valid provider ID on the Provider Eligibility Tables. UPDATE (C/U) Enter the screening provider number.

4	Selection (DE0000)	Edits: Valid value is "S"	<p>The field used in selecting a specific enrollee. INQUIRY (O/U) Click under the check for selecting a specific enrollee if it was not entered in the criteria selection.</p> <p>The field used in selecting a specific enrollee. UPDATE (O/U) Click under the check for selecting a specific enrollee to be updated if it was not entered in the criteria selection.</p>
5	Enrollee ID Enrollee Permanent Identification Number (DE3093)		<p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.</p>
6	Enrollee Name Enrollee Full Name (DE3003)		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
7	ICN Claim Request ICN (DE2001)		<p>A unique Transaction Control Number serving to identify each claim transaction record. It is the group representation of Claim Reference DMB ( first 14 bytes representing the date, media, batch number, sequence number) and Claim Reference lines (last two bytes representing line number).</p> <p>A unique Transaction Control Number serving to identify each claim transaction record. It is the group representation of Claim Reference DMB ( first 14 bytes representing the date, media, batch number, sequence number) and Claim Reference lines (last two bytes representing line number). System Displayed.</p>
8	Screening Provider ID National Provider	Edits: Messages:	A unique identification number assigned to a provider.

	Identifier (DE4700)	This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider. System Displayed.
9	Screen Type EPSDT Screen Type (DE8101)		This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).  This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening). System Displayed.
10	Screen Date EPSDT Screening Appointment Date (DE8205)		The date a screening should be performed.  The date a screening should be performed. System Displayed.
11	Screening Provider Name Provider Name (DE4085)		The name of the provider.  The name of the provider. System Displayed.
12	Initial Treatment date EPSDT Treatment Initiation Date (DE8130)		This is the date of the first treatment of an abnormal condition detected during a screening.  This is the date of the first treatment of an abnormal condition detected during a screening. System Displayed.
13	Category Diagnosis Name (DE5302)		Generally accepted nomenclature for a diagnosis.  Generally accepted nomenclature for a diagnosis. System Displayed.
14	Diagnosis Diagnosis Code		Identifies a diagnosed medical condition; the ICD coding structure is used.

	(DE5301)		Identifies a diagnosed medical condition; the ICD coding structure is used. System Displayed.
15	Treatment Complete Indicator Calculated (DE0002)	Edits: Must be valid rule value. Messages: 8116- VALID VALUES ARE 'Y', 'N', OR SPACE.	An indicator for stating if the treatment of enrollee is complete.  An indicator for stating if the treatment of enrollee is complete. UPDATE (R/U) Enter a 'Y' or 'N' to indicate if the treatment is complete or not.
16	Treatment Completion Date EPSDT Treatment Completion Date EPSDT Treatment Completion Date (DE8135)	Edits: Must be valid date or spaces Messages: 8117- ENTER A VALID DATE. 8118- COMPLETION DATE MUST BE GREATER THAN INITIAL TREATMENT DATE. 8119- NO DATE SHOULD BE ENTERED.	This is the date treatment of an abnormal condition detected during a screening was complete.  This is the date treatment of an abnormal condition detected during a screening was complete. UPDATE (O/U) Enter the change date on which the treatment was completed.
17	Benefit Plan Name Benefit Definition Plan Short Name (DE3555)		A short, concise description of a Benefit Plan used primarily in reporting.  A short, concise description of a Benefit Plan used primarily in reporting. System Displayed.
18	Medallion PCP National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Medallion PCPr's nine digit Legacy ID or the ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever	A unique identification number assigned to a provider.  A unique identification number assigned to a provider. System Displayed.

		both numbers are present.	
19	Modifier Code Claims Procedure Code Modifier (DE2171)		The 2-position standard HCFA modifier entered with a procedure code. The exception is that for EPSDT, the valid modifiers are only one position, H, K, T, U, W, Y, Z.  The 2-position standard HCFA modifier entered with a procedure code. The exception is that for EPSDT, the valid modifiers are only one position, H, K, T, U, W, Y, Z. System Displayed.
20	CPT Procedure Code (DE5002)		Code used to identify a specific dental, medical, revenue, or ICD diagnosis/surgical procedure.  Code used to identify a specific dental, medical, revenue, or ICD diagnosis/surgical procedure. System Displayed.
21	Comments EPSDT Treatment Comments (DE8126)	Edits: Free form text.	This field contains comments relating to a treatment resulting from an abnormal screening. DMAS will has access to this field.  This field contains comments relating to a treatment resulting from an abnormal screening. DMAS will have access to this field. UPDATE (O/U) Enter any changes to the comment relating to the EPSDT treatment.

NAVIGATION		EPSDT Abnormality Treatment Update (EP-S-015)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
Case	Invokes processing to display the EPSDT Case Update Screen, EP-S-001.	EP-S-001 (B)
Clear Form	Clears the keyed input fields, resulting in a blank display of the screen.	N/A
Enter	Invokes processing to display Referral data based on the Keyed Parameters.	N/A
Sub menu	Returns the user to the EPSDT Main Menu Screen.	EP-S-100 (R)
MAIN	Return to MMIS Menu.	RF-S-010 (R)

Page Down	Re-displays data previously presented on the screen.	N/A
Page Up	Displays subsequent pages of data, when applicable.	N/A
RETURN	Returns to the previous screen.	EP-S-000 (R)
Screening	Invokes processing to display the EPSDT Screening Record Inquiry Screen, EP-S-002.	EP-S-002 (B)
Update	Invokes processing that will update the currently displayed record.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
8029	CHOOSE PAGE UP TO VIEW PREVIOUSLY DISPLAYED RECORDS	Information message.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
8118	COMPLETION DATE MUST BE GREATER THAN INITIAL TREATMENT DATE	Enter a completion date that is greater than the initial treatment date.
68	DATA REFRESHED	Information message.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8117	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8000	ENTER A VALID OPTION	Enter a valid Option. See the field definitions for valid options.
8111	ENTER COMMENT(S)	Enter Comments. See the field definitions for formatting/requirements for this field.
8054	ENTER ID VALUE(S) FOR PROCESSING	Enter the valid ID value(s). See the field definitions for formatting and requirements for this field.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.

8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
139	FUNCTION IS INVALID	Information message.
8030	LAST PAGE OF RECORDS	Information message. No action needed.
8123	LOG FILE IS NOT OPENED	Information message.
8119	NO DATE SHOULD BE ENTERED	Information message. No action needed.
8025	NO MATCHING RECORDS FOUND	Information message. No action needed.
8012	NO RECORD FOUND FOR THIS ENROLLEE ID	Information message.
8027	NO RECORDS AVAILABLE FOR SCROLLING	Information message.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
8044	PROVIDER ID IS INVALID	Information message.
25	RECORD UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
8099	SELECT ONLY ONE RECORD	Information message.
140	UNABLE TO RETURN TO PREVIOUS PROGRAM, SELECT EXIT TO RETURN	Choose Exit to leave the transaction.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.
8116	VALID VALUES ARE 'Y', 'N', OR SPACE	See the field definitions for valid data/formatting for this field.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Case Abnormality Treatment Update from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Abnormality Treatment Update screen (EP-S-015).

# Screens EP-S-019 EPSDT Screening and Referral Appointment Main Menu - Provider/Member Help-line

## General Information

This screen is accessed for inquiry against the EPSDT Appointment Tracking Segment of the EPSDT Master File.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT019VA
MAPSET	EP019VA
TRAN ID	VB19

SAMPLE	<b>EPSDT Screening and Referral Appointment Main Menu - Provider/Member Help-line (EP-S-019)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENTER OPTION (DE0000)		The available options which the menu provides are: Screening Appointment Inquiry which branches to the EPSDT Screening Information Appointment Inquiry screen or Referral Appointment Inquiry which branches to the EPSDT Referral Appt Inquiry screen. INQUIRY (R/U) Select the desired option you wish to inquire and complete all data fields.  'EXCLUDE'
2	ENROLLEE NUMBER Enrollee Permanent Identification Num-	Edits: Must be a valid Enrollee Identification Num-	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (R/U)

	tification Number (DE3093)	ber. Messages: 8001- ENROLLEE ID IS INVALID. 8002- ENTER AN ENROLLEE ID.	Enter the enrollee ID number. Must be a valid Enrollee Identification Number.  'EXCLUDE'
3	SCREENING TYPE EPSDT Screening Type (DE8101)	Edits: Must be M,V,H, or D. Messages: 8005- SCREEN TYPE MUST BE 'M', 'V', 'H', OR 'D'.	This one-character field identifies the type of screening. INQUIRY (O/U) Enter the type of screening for the enrollee. D= Dental H= Hearing M= Medical V = Vision.  'EXCLUDE'
4	SCREENING DATE EPSDT Screening Appointment Date (DE8205)	Edits: Must be of the format MM/DD/YYYY. Messages: 8004- ENTER A VALID DATE. 8006- SCREEN DATE IS INVALID.	The date a screening should be performed. Format is MMDDCCYY. INQUIRY (R/U) Enter the date of the screening.  'EXCLUDE'
5	SCREENING TIME EPSDT Screening Appointment Time (DE8209)	Edits: If entered must be of the format HH:MM. Messages: 8007- SCREEN TIME IS INVALID.	The time of day that a screening appointment has been scheduled. INQUIRY (O/U) Enter the time of the screening appointment. If entered must be of the format HH:MM.  'EXCLUDE'

NAVIGATION	<b>EPSDT Screening and Referral Appointment Main Menu - Provider/Member Help-line (EP-S-019)</b>
	Branch To (B)

Function (B) or (M)	Action	or Return To (R)
ENTER (OPT 1)	<p>This screen will branch to the EPSDT Screening Appt Inquiry screen (EP-S-027), if OPT 1 (SCREENING APPOINTMENT INQUIRY) is selected and an member ID is entered. Processing will branch to this screen, whenever all appointment parameters such as: Screening Type, Screening Date and Screening Time are not entered.</p> <p>If OPT 1 (SCREENING APPOINTMENT INQUIRY) is selected and all parameters, in addition to member ID, are entered and appointment records are on the file, processing will branch to the EPSDT Screening Information Appointment Inquiry screen (EP-S-024).</p>	N/A
ENTER (OPT 2)	<p>This screen will branch to the EPSDT Referral Appt Inquiry screen (EP-S-025), if REFERRAL APPOINTMENT INQUIRY (OPT 2) is selected and all data fields, including the Screening Appointment Type, Date and Time are entered.</p> <p>Processing will branch to the EPSDT Screening Appt Inquiry screen (EP-S-027), if REFERRAL APPOINTMENT INQUIRY (OPT 2) is selected, an member ID is entered, and the remaining screening appointment parameters (type, date and time) have not been entered.</p>	N/A
MAIN	Returns to MMIS Main Menu.	N/A
MENU	Returns user to the EPSDT Main Menu.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8004	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8000	ENTER A VALID OPTION	Enter a valid Option. See the field definitions for valid options.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for format-

		ting/requirements for this field.
8003	EPSDT MASTER FILE CLOSED	Enter valid values according to error message specifications.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8006	SCREEN DATE IS INVALID	If necessary, contact the ACS help desk for assistance.
8007	SCREEN TIME IS INVALID	If necessary, contact the ACS help desk for assistance.
8005	SCREEN TYPE MUST BE 'M', 'V', 'H', OR 'D'	If necessary, contact the ACS help desk for assistance.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose Screening and Referral Appointment Help-Line Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Screening and Referral Appointment Main Menu - Provider/Recipient Help-line screen (EP-S-019).
OR
From the EPSDT Main Menu Provider/Recipient Help-Line screen (EP-S-008):
1. Choose the EPSDT Screening Appointment Inquiry Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Screening and Referral Appointment Main Menu - Provider/Recipient Help-line screen (EP-S-019).

# Screens EP-S-020 EPSDT Screening and Referral Appointment Main Menu

## General Information

This screen is accessed for manual updating and inquiry against the EPSDT Appointment Tracking Segment of the EPSDT Master File. An option has been included to support Inquiry Only functionality for the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT020VA
MAPSET	EP020VA
TRAN ID	VB20

SAMPLE	<b>EPSDT Screening and Referral Appointment Main Menu (EP-S-020)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENTER OPTION (DE0000)	Edits: Must be 1 through 7 as follows: 1-Add Screening Appointment; 2-Update Screening Appointment; 3-Add Referral Appointment; 4-Update Referral Appointment; 5-Verify Screening date; 6-Screening Appointment Inquiry; and 7-Referral Appointment Inquiry .  Messages: Invalid entry.	The selections allowed by this screen. Selections are: Add Screening Appointment Add Referral Appointment Update Screening Appointment Update Referral Appointment Verify Screening Date Screening Appointment Inquiry Referral Appointment Inquiry INQUIRY (R/U) Select the desired option.  The selections allowed by this screen. Selections are: Add Screening Appointment Add Referral Appointment

		<p>Update Screening Appointment Update Referral Appointment. ADD (R/U) Select the desired add option and enter. UPDATE (R/U) Select the desired update option and enter.</p>	
2	<p><b>ENROLLEE NUMBER</b> Enrollee Permanent Identification Number (DE3093)</p>	<p>Edits: Must be a valid Enrollee Number found on the EPSDT Master File (EP-F-001). See program specifications for EPT020VA.</p> <p>Messages: 8001- ENROLLEE ID IS INVALID. 8002- ENTER AN ENROLLEE ID. 8065- ADD/UPDATE REJECTED; ENROLLEE IS OVER 21. 8066- ADD/UPDATE REJECTED; ENROLLEE IS DECEASED. 8067- ADD/UPDATE REJECTED; ENROLLEE IS NOT ELIGIBLE. 8142- PROCESSING IS INVALID; HMO ENROLLED.</p>	<p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. Must be a valid Enrollee Number found on the EPSDT Master File. INQUIRY (R/U) Enter the enrollee ID number you wish to inquire.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. Must be a valid Enrollee Number found on the EPSDT Master File. ADD (R/U) Enter the enrollee ID number to be added. UPDATE (R/U) Enter the change to the enrollee ID number.</p>
3	<p><b>SCREENING TYPE</b> EPSDT Screen Type (DE8101)</p>	<p>Edits: Must be ' ', M,V,H, or D.</p> <p>Messages: 8005- SCREEN TYPE MUST BE ' ', 'M', 'V', 'H', OR 'D'.</p>	<p>This one-character field identifies the type of screening as D = Dental Screening, H = Hearing Screening, M = Medical Screening, or V = Vision Screening. INQUIRY (O/U) Enter the code for the type of screening.</p> <p>This one-character field identifies the type of screening as D = Dental Screening, H = Hearing Screening, M = Medical Screening, or V = Vision Screening. ADD (O/U) Enter the code for the type of screening. UPDATE (O/U) Enter the change to the code for the type</p>

			of screening.
4	SCREENING DATE EPSDT Screening Appointment Date (DE8205)	Edits: Must be a valid date format MM/DD/YYYY. Messages: 8004- ENTER A VALID DATE. 8006- SCREEN DATE IS INVALID.	The date a screening should be performed. Format is MMDDCCYY. INQUIRY Enter the date the screening should be performed.  The date a screening should be performed. Format is MMDDCCYY. ADD Enter the date that the screening should be performed. UPDATE Enter the change to the date in which the screening should be performed.
5	SCREENING TIME EPSDT Screening Appointment Time (DE8209)	Edits: Must be valid military time format HH:MM. Messages: 8007- SCREEN TIME IS INVALID.	The time of day that a screening appointment has been scheduled. Must be valid time format HH:MM. INQUIRY (O/U) Enter the scheduled time of the screening.  The time of day that a screening appointment has been scheduled. Must be valid time format HH:MM. ADD (O/U) Enter the scheduled time for the screening. UPDATE (O/U) Enter the changed scheduled time of the screening.
6	MSG (DE0000)		'EXCLUDE'  'EXCLUDE'

NAVIGATION		
EPSDT Screening and Referral Appointment Main Menu (EP-S-020)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
Add Referral Appointment	This screen will branch to the EPSDT Referral Appointment Add screen if the value entered in the "ENTER OPTION" is "3" all screening appointment parameters such Member ID,	RS-S-300 (B)

	Screening Appt Type, Screening Appt Date and Screening Appt Time are entered. If all screening appointment parameters are not entered, processing will branch to the EPSDT Screening Appt List.	
Add Screening Appointment	This screen will branch to the EPSDT Screening Appointment Add screen if the value entered in the "ENTER OPTION" is "1".	N/A
SUB MENU	Returns user to the EPSDT Main Menu screen.	RS-S-300 (R)
Referral Appointment Inquiry	This screen will branch to the EPSDT Referral Appt Inquiry screen if the value entered in the "ENTER OPTION" is "7" and all screening appointment parameters such Member ID, Screening Appt Type, Screening Appt Date and Screening Appt Time are entered.  This screen will branch to the EPSDT Screening Appt Inquiry (EP-S-027) screen if the value entered in the "ENTER OPTION" is "7" and all screening appointment parameters are not entered.	N/A
Screening Appointment Inquiry	This screen will branch to the EPSDT Screening Information Appointment Inquiry screen if the value entered in the "ENTER OPTION" is "6" and all screening appointment parameters such Member ID, Screening Appt Type, Screening Appt Date and Screening Appt Time are entered. If all screening appointment parameters are not entered, processing will branch to the EPSDT Screening Appt Inquiry screen.	N/A
Up Arrow (Main)	Returns to MMIS Main Menu.	N/A
Update Referral Appointment	This screen will branch to the EPSDT Referral Appointment Update screen if the value entered in the "ENTER OPTION" is "4" and all screening appointment parameters such Member ID, Screening Appt Type, Screening Appt Date and Screening Appt Time are entered. If all screening appointment parameters are not entered, processing will branch to the EPSDT Screening Appt List.	RS-S-009 (B)
Update Screening Appointment	This screen will branch to the EPSDT Screening Appt Update screen if the value entered in the "ENTER OPTION" is "2", and all screening appointment parameters such Member ID, Screening Appt Type, Screening Appt Date and Screening Appt Time are entered. If all screening	N/A

	appointment parameters are not entered, processing will branch to the EPSDT Screening Appt List.	
Verify Screening Date	This screen will branch to the EPSDT Appointment Verification screen if the value entered in the "ENTER OPTION" is "5" and all screening appointment parameters such as Member ID, Screening Appt Type, Screening Appt Date, and Screening Appt Time are entered. If all screening appointment parameters are not entered, processing will branch to the EPSDT Screening Appt List.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8066	ADD/UPDATE REJECTED; ENROLLEE IS DECEASED	Information message.
8067	ADD/UPDATE REJECTED; ENROLLEE IS NOT ELIGIBLE	Information message.
8065	ADD/UPDATE REJECTED; ENROLLEE IS OVER 21	Information message.
8039	APPOINTMENT CROSS-REFERENCE FILE CLOSED	Information message.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8004	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8000	ENTER A VALID OPTION	Enter a valid Option. See the field definitions for valid options.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8077	ENTER SCREENING TYPE, DATE, AND TIME	Enter valid values according to error message specifications.
8003	EPSDT MASTER FILE CLOSED	Enter valid values according to error message specifications.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8136	NO SCREENING APPOINTMENT ON FILE	Information message.

8142	PROCESSING IS INVALID; HMO ENROLLED	Information message.
8006	SCREEN DATE IS INVALID	If necessary, contact the ACS help desk for assistance.
8007	SCREEN TIME IS INVALID	If necessary, contact the ACS help desk for assistance.
8005	SCREEN TYPE MUST BE 'M', 'V', 'H', OR 'D'	If necessary, contact the ACS help desk for assistance.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose EPSDT Screening and Referral Appointment Tracking from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
OR
From the EPSDT Main Menu (EP-S-100):
1. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
2. Choose Enter.
3. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).

# Screens EP-S-021 EPSDT Screening Appointment Update

## General Information

This screen is used to enter data to update appointment information stored on the EPSDT Appointment Tracking Segment of the EPSDT Master File. This screen will not be accessed by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	EPT021VA
MAPSET	EP021VA
TRAN ID	VB21

SAMPLE	<b>EPSDT Screening Appointment Update (EP-S-021)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		<p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.</p>

2	ENROLLEE NAME Enrollee Full Name (DE3003)		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
3	SCREEN TYPE EPSDT Screen Type (DE8101)		<p>This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).</p> <p>This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening). System Displayed.</p>
4	SRCE (Screening Appointment) EPSDT Screening Appointment Source (DE8212)		<p>Identifies who set up the screening appointment. E (Enrollee), P (Provider), D (DMAS), B (DMAS Backout) or U (Unable to contact).</p> <p>Identifies who set up the screening appointment. E (Enrollee), P (Provider), D (DMAS), B(DMAS Backout) or U (Unable to contact). System Displayed.</p>
5	DATE (SCREENING APPOINTMENT) EPSDT Screening Appointment Date (DE8205)		<p>The date a screening should be performed.</p> <p>The date a screening should be performed. System Displayed.</p>
6	TIME (SCREENING APPOINTMENT) EPSDT Screening Appointment Time (DE8209)		<p>The time of day that a screening appointment has been scheduled.</p> <p>The time of day that a screening appointment has been scheduled. System Dis-</p>

			played.
7	<p>DUE DATE (SCREENING DATE)</p> <p>EPSDT Appointment Due Date (DE8203)</p>		<p>For newly eligible recipients, this is the date before which their first screening should be performed.</p> <p>For newly eligible recipients, this is the date before which their first screening should be performed. System Displayed.</p>
8	<p>SOURCE (RESCREENING APPOINTMENT)</p> <p>EPSDT Re-screen Verification Source (DE8242)</p>	<p>Edits: Must be a valid source code.</p> <p>Messages: PLEASE ENTER A VALID SOURCE</p>	<p>Indicates how a re-scheduled appointment was verified as having been kept or missed.</p> <p>Indicates how a re-scheduled appointment was verified as having been kept or missed. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the source code which indicates how a re-scheduled appointment was verified as having been kept or missed.</p> <p>UPDATE (O/U) Enter the change to the source code which indicates how a re-scheduled appointment was verified as having been kept or missed.</p>
9	<p>DATE (RESCREENING APPOINTMENT)</p> <p>EPSDT Re-Screening Appointment Date (DE8222)</p>	<p>Edits: Format is MM/DD/CCYY.</p> <p>Messages: 8076- INVALID RESCREEN DATE. RE-ENTER IN MM/DD/CCYY FORMAT.</p>	<p>The date that a missed screening appointment has been rescheduled.</p> <p>The date that a missed screening appointment has been rescheduled. Format is MMDDCCYY.</p> <p>ADD (R/U) Enter the new date for a missed screening appointment which has been rescheduled.</p> <p>UPDATE (R/U)</p>

			Enter the change to the date that a missed screening appointment has been rescheduled.
10	TIME (RESCREENING APPOINTMENT) EPSDT Re-screen Appointment Time (DE8226)	Edits: Format is HH:MM. Messages: 8068- RESCREENING TIME IS INVALID. RE-ENTER IN HH:MM FORMAT.	The time a rescheduled screening appointment will occur.  The time a rescheduled screening appointment will occur. Format is HHMM. ADD (R/U) Enter the time a rescheduled screening appointment will occur. UPDATE (R/U) Enter the change to the time a rescheduled screening appointment will occur.
11	DUE DATE (RESCREENING APPOINTMENT) EPSDT Re-Screening Due Date (DE8218)		The date by which a missed screening appointment should be rescheduled.  The date by which a missed screening appointment should be rescheduled. System Displayed.
12	PROVIDER NUMBER National Provider Identifier (DE4700)	Edits: Must be a valid provider ID. Messages: INVALID PROVIDER ID.  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  A unique identification number assigned to a provider. ADD (R/U) Enter the new unique identification number assigned to a provider. UPDATE (R/U) Enter the change to the unique identification number assigned to a provider.
13	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  The name of the provider. System Displayed.
14	PROVIDER LOCATION	Edits: Must enter valid Provider Locality code.	Displays the county in which a provider is located.

	Provider Locality Code (DE4089)	Messages: 4947- Provider Locality Invalid.	Enter a valid county in which a provider is located.
15	TRANSPORTATION PROVIDER National Provider Identifier (DE4700)	Edits: Must be a valid provider ID number. Messages: 8070- ENTER A VALID PROVIDER NUMBER.  This field may contain the Transportation Provider's nine digit Legacy ID or the ten digit Atypical Provider Identifier (API). The API, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider of transportation.  A unique identification number assigned to a provider of transportation. Must be a valid provider ID number. ADD (R/U) Enter the new unique identification number assigned to a provider of transportation. UPDATE (R/U) Enter the change to the unique identification number assigned to a provider of transportation.
16	NAME Provider Name (DE4085)	Edits: Messages:	The name of the provider of transportation.  The name of the provider of transportation. System Displayed.
17	TRANSPORTATION LOCATION Provider Locality Code (DE4089)	Edits: Must enter valid Locality code Messages: 4947- Provider Locality Invalid	Displays the county in which a provider is located. Enter a valid county in which a provider is located.
18	ADDRESS LINE 1 Enrollee Additional Address Name (DE3114)	Edits: Messages:	Additional name information for the enrollee address information such as 'care of' or 'attention' information.  Additional name information for the enrollee address information such as 'care of' or 'attention' information. System Displayed.
19	ADDRESS LINE 2 Enrollee Street Address (DE3115)	Edits: Messages:	The street address of the enrollee.  The street address of the enrollee. System Displayed.

20	PHONE NUMBER Enrollee Telephone Number (DE3095)	Edits: Messages:	The telephone number of the enrollee as given to the enrolling agency.  The telephone number of the enrollee as given to the enrolling agency. System Displayed.
21	CITY Enrollee City Name (DE3116)	Edits: Messages:	Name of the city in which the enrollee lives.  Name of the city in which the enrollee lives. System Displayed.
22	STATE Enrollee State Code (DE3117)	Edits: Messages:	State abbreviation of the state in which the enrollee lives.  State abbreviation of the state in which the enrollee lives. System Displayed.
23	ZIP Enrollee ZIP Code (DE3118)	Edits: Messages:	Zip code of the area in which the enrollee lives.  Zip code of the area in which the enrollee lives. System Displayed.

NAVIGATION			EPSDT Screening Appointment Update (EP-S-021)
Function (B) or (M)	Action	Branch To (B) or Return To (R)	
MAIN	Returns to MIS Main Menu.	RF-S-010 (R)	
MENU	Returns the user to the EPSDT Main Menu Screen.	EP-S-100 (R)	
REFRESH	Command that allows the user to redisplay the current screen.	N/A	
RETURN	Returns to the previous screen..	N/A	
UPDATE	Command button to save information entered in an update screen.	N/A	

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8071	ADD/UPDATE NOT PERFORMED NO CHANGES WERE MADE TO THE RECORD.	Information message. No action needed.
8039	APPOINTMENT CROSS-REFERENCE FILE CLOSED	Information message.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8070	ENTER A VALID PROVIDER NUMBER	Enter a valid Provider Number. See the field definitions for formatting/requirements for this field.
8069	ENTER A VALID SOURCE	Enter a valid Source. See the field definitions for formatting/requirements for this field.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8072	ERROR WHILE UPDATING FILE	Information message.
8075	ERROR WRITING TO LOG FILE	Information message.
139	FUNCTION IS INVALID	Information message.
8076	INVALID RESCREEN DATE RE-ENTER IN MM/DD/CCYY FORMAT.	Re-enter date in the valid format. (Example: 01/04/2002).
8074	LOG FILE CLOSED; RECORD NOT WRITTEN	Information message.
4947	PROVIDER LOCALITY INVALID	Enter a valid Provider Locality code
8073	RECORD UPDATED	Information message. No action needed.
8040	REQUESTED INFORMATION IS NOT PRESENT ON CROSS-REFERENCE FILE	Information message.
8068	RESCREENING TIME IS INVALID RE-ENTER IN HH:MM FORMAT.	Enter Re-screening time in proper format. (Ex: 09:30)
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.

## Screen Access

From the VaMMIS Main System Menu:

1. Choose the EPSDT icon.

2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Update Screening Appointment from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Screening Appointment Update screen (EP-S-021).

# Screens EP-S-022 EPSDT Referral Appointment Update

## General Information

This screen is used to enter data to update referral appointment information stored on the Appointment Tracking Segment of the EPSDT Master File. This screen is not accessible by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	EPT022VA
MAPSET	EP022VA
TRAN ID	VB22

SAMPLE	<b>EPSDT Referral Appointment Update (EP-S-022)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		<p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.</p>
2	ENROLLEE NAME		The name of the individual eli-

	Enrollee Full Name (DE3003)		gible for DMAS-administered programs.  The name of the individual eligible for DMAS-administered programs. System Displayed.
3	SCREEN TYPE EPSDT Screen Type (DE8101)		This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).  This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening). System Displayed.
4	SCREENING DATE EPSDT Screening Appointment Date (DE8205)		The date a screening should be performed.  The date a screening should be performed. System Displayed.
5	TIME EPSDT Screening Appointment Time (DE8209)		The time of day that a screening appointment has been scheduled.  The time of day that a screening appointment has been scheduled. System Displayed.
6	(REFERRAL APPT) DATE EPSDT Referral Appointment Date (DE8240)	Messages: 8083- REFERRAL DATE IS INVALID. RE-ENTER IN MM/DD/CCYY FORMAT.	Date of the referral appointment.  Date of the referral appointment. Format is MMDDCCYY. UPDATE (R/P) Enter the change to the referral appointment date.
7	(REFERRAL APPT) TIME EPSDT Referral Appointment Time (DE8241)	Messages: 8084- REFERRAL TIME IS INVALID. RE-ENTER IN HH:MM FORMAT.	Time of the referral appointment.  Time of the referral appointment. Format is HHMM. UPDATE (R/P)

			Enter the change to the referral appointment time.
8	(RESCHEDULED REFERRAL APPOINTMENT) DATE EPSDT Referral Reappointment Date (DE8235)	Edits: Must be in MM/DD/CCYY format. Messages: 8085- RESCHEDULED DATE IS INVALID. ENTER IN MM/DD/CCYY FORMAT.	The rescheduled appointment date for a missed referral appointment.  The rescheduled appointment date for a missed referral appointment. Format is MMDDCCYY. UPDATE (R/U) Enter the change for the rescheduled date.
9	(RESCHEDULED REFERRAL APPOINTMENT) TIME EPSDT Referral Reappointment Time (DE8236)	Edits: Must be in HH:MM format. Messages: 8086- RESCHEDULED TIME IS INVALID. RE-ENTER IN HH:MM FORMAT.	The time of the rescheduled appointment for a missed referral appointment.  The time of the rescheduled appointment for a missed referral appointment. HHMM UPDATE (R/U) Enter the change for the rescheduled time.
10	(RESCHEDULED REFERRAL APPOINTMENT) DUE DATE EPSDT Referral Appointment Due Date (DE8231)		The date by which a referral appointment should be set up.  The date by which a referral appointment should be set up. System Generated.
11	PROVIDER NUMBER National Provider Identifier (DE4700)	Edits: Must be a valid provider ID number. Messages: 8070- ENTER A VALID PROVIDER NUMBER.  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  A unique identification number assigned to a provider. UPDATE (R/U) Enter the change to the assigned provider number.
12	LOCATION CODE Provider Locality	Edits: Must enter valid Provider Locality code.	Display the county in which a provider is located.

	Code (DE4089)	Messages: 4947- Provider Locality Invalid	Enter a valid county in which a provider is located.
13	TRANSPORTATION ASSISTANCE EPSDT Transportation Assistance Indicator (DE8244)	Edits: Must be BLANK , 'Y' , or 'N'. Messages: 8137- ENTER A VALID TRANSPORTATION ASSISTANCE.	This one-position field indicates whether or not transportation assistance is required.  This one-position field indicates whether or not transportation assistance is required. Must be BLANK , 'Y' , or 'N'. ADD (O/U) Enter the to determine if transportation assistance is required. May be left blank. UPDATE (O/U) Enter the change as to determine if transportation assistance is required.

NAVIGATION		EPSDT Referral Appointment Update (EP-S-022)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ENTER	Processes the entered data.	N/A
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
MENU	Returns user to the EPSDT Main Menu Screen.	EP-S-100 (R)
REFRESH	Command that allows the user to redisplay the current screen.	N/A
RETURN	Returns to the previous screen.	N/A
UPDATE	Command button to save information entered in an update screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8071	ADD/UPDATE NOT PERFORMED NO CHANGES WERE MADE TO THE RECORD.	Information message. No action needed.

8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8070	ENTER A VALID PROVIDER NUMBER	Enter a valid Provider Number. See the field definitions for formatting/requirements for this field.
8137	ENTER A VALID TRANSPORTATION ASSISTANCE	Enter a valid Transportation Code. See the field definitions for formatting/requirements for this field.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8072	ERROR WHILE UPDATING FILE	Information message.
8075	ERROR WRITING TO LOG FILE	Information message.
139	FUNCTION IS INVALID	Information message.
8074	LOG FILE CLOSED; RECORD NOT WRITTEN	Information message.
4947	PROVIDER LOCALITY INVALID	Enter a valid Provider Locality code
8073	RECORD UPDATED	Information message. No action needed.
8061	REFERRAL APPOINTMENT FILE CLOSED	Information message.
8083	REFERRAL DATE IS INVALID RE-ENTER IN MM/DD/CCYY FORMAT.	Enter a valid referral date. See the field definitions for valid data and formatting. (Example: 01/06/2001 is correct date formatting.)
8084	REFERRAL TIME IS INVALID RE-ENTER IN HH:MM FORMAT.	Re-enter the referral time in proper format. (Ex: 08:15)
8062	REQUESTED DATA NOT PRESENT	Information message. No action needed.
8085	RESCHEDULED DATE IS INVALID ENTER IN MM/DD/CCYY FORMAT.	Enter a valid rescheduled date. See the field definitions for valid data and formatting. (Example: 01/06/2001 is correct date formatting.)
8086	RESCHEDULED TIME IS INVALID RE-ENTER IN HH:MM FORMAT.	Enter a valid rescheduled time. See the field definitions for valid time and formatting. (Ex: 08:15)
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.

4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Update Referral Appointment from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Referral Appointment Update screen (EP-S-022).

# Screens EP-S-023 EPSDT Screening Appt List

## General Information

This screen is used to select a particular screening appointment record.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT023VA
MAPSET	EP023VA
TRAN ID	VB23

SAMPLE	EPSDT Screening Appt List (EP-S-023)
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
4	TYPE EPSDT Screen Type		This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screen-

	(DE8101)		ing), M (Medical Screening), or V (Vision Screening).  N/A
5	APPT DATE EPSDT Screening Appointment Date (DE8205)		The date a screening should be performed.  N/A
6	TIME EPSDT Screening Appointment Time (DE8209)		The time of day that a screening appointment has been scheduled.  N/A
7	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  N/A
8	PROVIDER ID NBR National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed whenever both numbers are present.	A unique identification number assigned to a provider.  N/A
9	LOCATION CODE Provider Locality Code (DE4089)	Edits: Messages:	Display the county in which a provider is located. Display the county in which a provider is located.
10	STATUS EPSDT Screen Verification Code (DE8215)	Edits: Messages:	A code which identifies whether or not a screening appointment was kept. If the appointment was missed, the code indicates the reason.  N/A

NAVIGATION		
EPSDT Screening Appt List (EP-S-023)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ADD REFERRAL	Allows navigation to the EPSDT referral Appointment Add screen for the selected screening appointment.	EP-S-029 (B)
ENTER	Processes the entered data.	N/A
SUB MENU	Return the user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
NEXT PAGE	Allows the user to page forward through a series of requested data.	N/A
PREV PAGE	Allows the user to page backward through a series of requested data.	N/A
REFER INQ	Allows navigation to the EPSDT Screening Inquiry (Referral Information) screen for the selected screening appointment.	EP-S-025 (B)
RETURN	Returns to the previous screen..	N/A
SCREENING INQ	Allows navigation to the EPSDT Screening Information Appointment Inquiry Screen for the selected screening appointment.	EP-S-024 (B)
UPDATE APPT	Allows navigation to the EPSDT Screening Appointment Update screen for the selected screening appointment.	EP-S-021 (B)
UPDATE REFERRAL	Allows navigation to the EPSDT Referral Appointment Update screen for the selected screening appointment.	EP-S-022 (B)
VERIFY SCREENING	Allows navigation to the EPSDT Appointment Verification screen for the selected screening appointment.	EP-S-026 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8035	ALREADY AT THE FIRST REQUESTED SCREENING APPOINTMENT	Information message.
8036	ALREADY AT THE LAST REQUESTED SCREENING APPOINTMENT	Information message.

8039	APPOINTMENT CROSS-REFERENCE FILE CLOSED	Information message.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8040	REQUESTED INFORMATION IS NOT PRESENT ON CROSS-REFERENCE FILE	Information message.
8037	SELECT AN APPOINTMENT AND CHOOSE THE DESIRED FUNCTION	Information message.
8038	TOO MANY SELECTIONS SELECT ONLY ONE APPOINTMENT.	Select only one appointment.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Update Screening Appointment, Add Referral Appointment, Update Referral Appointment or Verify Screening Date from the Selection drop-menu.
10. Enter only the enrollee ID data.
11. You see the EPSDT Screening Appt List screen (EP-S-023).

# Screens EP-S-024 EPSDT Screening Information Appointment Inquiry

## General Information

This inquiry screen displays screening appointment information stored on the EPSDT Appointment Tracking Segment of the EPSDT Master File. The Provider/Member Help-line may access this function.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT024VA
MAPSET	EP024VA
TRAN ID	VB24

SAMPLE	EPSDT Screening Information Appointment Inquiry (EP-S-024)
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-admin- istered programs.  N/A
3	SCREEN TYPE		This one-character field iden-

	EPSDT Screen Type (DE8101)		<p>tifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).</p> <p>N/A</p>
4	APPT DATE EPSDT Screening Appointment Date (DE8205)		<p>The date a screening should be performed.</p> <p>N/A</p>
5	APPT TIME EPSDT Screening Appointment Time (DE8209)		<p>The time of day that a screening appointment has been scheduled.</p> <p>N/A</p>
6	APPT SOURCE EPSDT Screening Appointment Source (DE8212)		<p>Identifies who set up the screening appointment. E (Enrollee), P (Provider), D (DMAS), B(DMAS BACKOUT) or U (Unable to contact).</p> <p>N/A</p>
7	APPT DUE DATE EPSDT Appointment Due Date (DE8203)		<p>For newly eligible recipients, this is the date before which their first screening should be performed.</p> <p>N/A</p>
8	DATE APPT MADE EPSDT Date Screen Appointment Made (DE8204)		<p>This is the date that a screening appointment was made with the provider.</p> <p>N/A</p>
9	VERIFICATION DUE DATE EPSDT Screen Verification Due Date (DE8213)		<p>The date by which a screening appointment should be verified.</p> <p>N/A</p>
10	VERIFICATION DATE EPSDT Screen Verification Date (DE8214)		<p>The date a screening was verified.</p> <p>N/A</p>

11	<p>VERIFICATION CODE</p> <p>EPSDT Screen Verification Code (DE8215)</p>		<p>A code which identifies whether or not a screening appointment was kept. If the appointment was missed, the code indicates the reason.</p> <p>N/A</p>
12	<p>RESCREEN DATE</p> <p>EPSDT Re-Screening Appointment Date (DE8222)</p>		<p>The date that a missed screening appointment has been rescheduled.</p> <p>N/A</p>
13	<p>RESCREEN TIME</p> <p>EPSDT Re-screen Appointment Time (DE8226)</p>		<p>The time a rescheduled screening appointment will occur.</p> <p>N/A</p>
14	<p>RESCREEN DUE DATE</p> <p>EPSDT Re-Screening Due Date (DE8218)</p>		<p>The date by which a missed screening appointment should be rescheduled.</p> <p>N/A</p>
15	<p>RESCREEN VERIFICATION DUE DATE</p> <p>EPSDT Re-screening Verification Due Date (DE8229)</p>		<p>The date by which a rescheduled screening appointment should be verified.</p> <p>N/A</p>
16	<p>RESCREEN VERIFICATION DATE</p> <p>EPSDT Re-screening Verification Date (DE8230)</p>		<p>The date that a rescheduled screening appointment was verified as having been kept or missed.</p> <p>N/A</p>
17	<p>PROVIDER NUMBER</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Messages:</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.</p>	<p>A unique identification number assigned to a provider.</p> <p>N/A</p>

18	LOC Provider Locality Code (DE4089)	Edits: N/A Messages: N/A	Display the county in which the provider is located. N/A
19	NAME Provider Name (DE4085)	Edits: Messages:	The name of the provider. N/A
20	TRANSPORTATION PROVIDER NUMBER National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Transportation Provider's nine digit Legacy ID or the Provider's ten digit Atypical Provider Identifier (API). The API, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider transportation. N/A
21	LOC Provider Locality Code (DE4089)	Edits: N/A Messages: N/A	Display the county in which a provider is located. N/A
22	TRANSPORTATION PROVIDER NAME Provider Name (DE4085)	Edits: Messages:	The name of the provider of transportation. N/A
23	LAST UPDATE DATE EPSDT Appointment Last Update Date (DE8250)	Edits: Messages:	This date is the latest date that appointment information was updated. N/A
24	LAST UPDATE SOURCE EPSDT Appointment Last Update Source (DE8254)	Edits: Messages:	This field contains the name of the program that performed the update on appointment information. N/A

NAVIGATION	<b>EPSDT Screening Information Appointment Inquiry (EP-S-024)</b>	
Function	Action	Branch To (B) or

(B) or (M)		Return To (R)
Enter	Processes the entered information.	N/A
SUB MENU	Returns to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
RETURN	Returns to the previous screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8039	APPOINTMENT CROSS-REFERENCE FILE CLOSED	Information message.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8040	REQUESTED INFORMATION IS NOT PRESENT ON CROSS-REFERENCE FILE	Information message.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Screening Appointment Inquiry from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Screening Information Appointment Inquiry screen (EP-S-024).
OR

From the EPSDT Screening and Referral Appointment Main Menu Provider/Recipient Help-Line (EP-S-019) screen:

1. Choose Screening Appointment Inquiry from the Selection drop-menu.

OR

From the EPSDT Screening Appt Inquiry (EP-S-027) screen:

1. Choose the Screen Inquiry button.

# Screens EP-S-025 EPSDT Referral Appt Inquiry

## General Information

This screen displays information stored on the EPSDT Screening and Appointment Tracking File that is related to the last three referral appointments made for the selected screening record. The Provider/Member Help-line may access this function.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT025VA
MAPSET	EP025VA
TRAN ID	VB25

SAMPLE	<b>EPSDT Referral Appt Inquiry (EP-S-025)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eli- gible for DMAS-administered programs.  N/A
3	TRANSPORTATION ASSISTANCE		This one-position field indic- ates whether or not trans-

	EPSDT Transportation Assistance Indicator (DE8244)		portation assistance is required .  N/A
4	APPT DATE EPSDT Referral Appointment Date (DE8240)		Date of the referral appointment.  N/A
5	APPT TIME EPSDT Referral Appointment Time (DE8241)		Time of the referral appointment.  N/A
6	VERIFY CODE EPSDT Referral Verification Code (DE8233)		A code which identifies whether or not a screening appointment was kept. If the appointment was missed, the code indicates the reason.  N/A
7	RESCREEN DUE DATE EPDST Referral Reappointment Review Date (DE8234)		The date by which a missed referral appointment should be rescheduled.  N/A
8	RESCREEN DATE EPSDT Referral Reappointment Date (DE8235)		The rescheduled appointment date for a missed referral appointment.  N/A
9	RESCREEN TIME EPSDT Referral Reappointment Time (DE8236)		The time of the rescheduled appointment for a missed referral appointment.  N/A
10	PROVIDER NUMBER National Provider Identifier (DE4700)	Edits: Messages:  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  N/A

11	PHONE NUMBER Provider Phone Number (DE4090)		The provider's phone number.  N/A
12	LOCATION Provider Locality Code (DE4089)	Edits: N/A Messages: N/A	The county in which a provider is located. The county in which a provider is located.
13	NAME Provider Name (DE4085)	Edits: Messages:	The name of the provider.  N/A

NAVIGATION		EPSDT Referral Appt Inquiry (EP-S-025)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
SUB MENU	Returns to the EPSDT Main Menu.	EP-S-100 ( )
MAIN	Returns to the MMIS Main Menu.	RF-S-010 (R)
PAGE DOWN	Allows the user to page forward through a series of requested data.	N/A
PAGE UP	Allows the user to page backward through a series of requested data.	RF-S-010 ( )
RETURN	Returns to the previous screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8063	ALREADY AT THE START OF THE FILE	Information message. No action needed.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8064	NO MORE RECORDS ON FILE	Information message.
8097	RECORDS DISPLAYED	Information message. No action

		needed.
8061	REFERRAL APPOINTMENT FILE CLOSED	Information message.
8121	REFERRAL APPOINTMENT RECORD FOR THIS APPOINTMENT IS NOT PRESENT	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Referral Appointment Inquiry from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Referral Appt Inquiry screen (EP-S-025).
OR
From the EPSDT Screening and Referral Appointment Main Menu Provider/Recipient Help-Line (EP-S-019) screen:
1. Choose Referral Appointment Inquiry from the Selection drop-menu.
OR
From the EPSDT Screening Appt Inquiry (EP-S-027) screen:
1. Choose the Referral Inquiry button.

# Screens EP-S-026 EPSDT Appointment Verification

## General Information

This screen is used to manually verify any one of the Screen, Re-screen, Referral Screen, or Referral Re-screen Dates stored on the EPSDT Appointment Tracking Segment of the EPSDT Master File. This is a restricted function and it is not accessible by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	EPT026VA
MAPSET	EP026VA
TRAN ID	VB26

SAMPLE	<b>EPSDT Appointment Verification (EP-S-026)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eli- gible for DMAS-administered programs.  N/A
3	TRANSPORTATION ASSISTANCE		This one-position field indic- ates whether or not trans-

	EPSDT Transportation Assistance Indicator (DE8244)		portation assistance is required .  N/A
4	APPT DATE EPSDT Referral Appointment Date (DE8240)		Date of the referral appointment.  N/A
5	APPT TIME EPSDT Referral Appointment Time (DE8241)		Time of the referral appointment.  N/A
6	VERIFY CODE EPSDT Referral Verification Code (DE8233)		A code which identifies whether or not a screening appointment was kept. If the appointment was missed, the code indicates the reason.  N/A
7	RESCREEN DUE DATE EPDST Referral Reappointment Review Date (DE8234)		The date by which a missed referral appointment should be rescheduled.  N/A
8	RESCREEN DATE EPSDT Referral Reappointment Date (DE8235)		The rescheduled appointment date for a missed referral appointment.  N/A
9	RESCREEN TIME EPSDT Referral Reappointment Time (DE8236)		The time of the rescheduled appointment for a missed referral appointment.  N/A
10	PROVIDER NUMBER National Provider Identifier (DE4700)	Edits: Messages:  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  N/A

11	PHONE NUMBER Provider Phone Number (DE4090)		The provider's phone number.  N/A
12	LOCATION Provider Locality Code (DE4089)	Edits: N/A Messages: N/A	The county in which a provider is located. The county in which a provider is located.
13	NAME Provider Name (DE4085)	Edits: Messages:	The name of the provider.  N/A

NAVIGATION		EPSDT Appointment Verification (EP-S-026)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ENTER	Processes the entered data.	N/A
SUB MENU	Returns to the EPSDT Main Menu screen.	EP-S-100 (R)
INQUIRY	Allows navigation to the EPSDT Screening Appointment Inquiry screen.	EP-S-027 (B)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
REFRESH	Command that allows the user to redisplay the current screen.	N/A
RETURN	Returns to the previous screen.	N/A
UPDATE	Command button to save information entered in an update screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8063	ALREADY AT THE START OF THE FILE	Information message. No action needed.
8028	CHOOSE PAGE DOWN TO VIEW MORE RECORDS	Information message.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.

139	FUNCTION IS INVALID	Information message.
8064	NO MORE RECORDS ON FILE	Information message.
8097	RECORDS DISPLAYED	Information message. No action needed.
8061	REFERRAL APPOINTMENT FILE CLOSED	Information message.
8121	REFERRAL APPOINTMENT RECORD FOR THIS APPOINTMENT IS NOT PRESENT	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Referral Appointment Inquiry from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Referral Appt Inquiry screen (EP-S-025).
OR
From the EPSDT Screening and Referral Appointment Main Menu Provider/Recipient Help-Line (EP-S-019) screen:
1. Choose Referral Appointment Inquiry from the Selection drop-menu.
OR
From the EPSDT Screening Appt Inquiry (EP-S-027) screen:
1. Choose the Referral Inquiry button.

# Screens EP-S-027 EPSDT Screening Appt Inquiry

## General Information

This screen is used to select a particular screening appointment record. This screen may be accessed by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT027VA
MAPSET	EP027VA
TRAN ID	VB27

SAMPLE	<b>EPSDT Screening Appt Inquiry (EP-S-027)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
5	APPT DATE		The date a screening should be performed.

	EPSDT Screening Appointment Date (DE8205)		N/A
6	TIME EPSDT Screening Appointment Time (DE8209)		The time of day that a screening appointment has been scheduled.  N/A
7	PROVIDER NAME Provider Name (DE4085)		The name of the provider.  N/A
8	PROVIDER ID National Provider Identifier (DE4700)	Edits: Messages:  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  N/A
9	LOC CODE Provider Locality Code (DE4089)	Edits: N/A Messages: N/A	Display the county in which the provider is located.  N/A
10	STATUS EPSDT Screen Verification Code (DE8215)	Edits: Messages:	A code which identifies whether or not a screening appointment was kept. If the appointment was missed, the code indicates the reason.  N/A

NAVIGATION	EPSDT Screening Appt Inquiry (EP-S-027)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)
SUB MENU	Returns to the EPSDT Main Menu screen.	EP-S-100 (R)

MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
PAGE DOWN	Allows the user to page forward through a series of requested data.	N/A
PAGE UP	Allows the user to page backward through a series of requested data.	N/A
Referral Inquiry	Allows navigation to the EPSDT Referral Appt Inquiry screen.	EP-S-025 (B)
RETURN	Returns to the previous screen.	N/A
Screen Inquiry	Allows navigation to the EPSDT Screening Information Appointment Inquiry Screen.	EP-S-024 (B)

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8035	ALREADY AT THE FIRST REQUESTED SCREENING APPOINTMENT	Information message.
8036	ALREADY AT THE LAST REQUESTED SCREENING APPOINTMENT	Information message.
8039	APPOINTMENT CROSS-REFERENCE FILE CLOSED	Information message.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
139	FUNCTION IS INVALID	Information message.
8040	REQUESTED INFORMATION IS NOT PRESENT ON CROSS-REFERENCE FILE	Information message.
8037	SELECT AN APPOINTMENT AND CHOOSE THE DESIRED FUNCTION	Information message.
8038	TOO MANY SELECTIONS SELECT ONLY ONE APPOINTMENT.	Select only one appointment.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.

4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Main Menu - Provider/Recipient Help-Line from the Selection drop-menu.
7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu - Provider/Recipient Help-line screen (EP-S-019).
9. Enter an enrollee number.
10. Choose the Screening Appointment Inquiry or the Referral Appointment Inquiry Selection drop-menu.
11. You see the EPSDT Screening Appt Inquiry screen (EP-S-027).

# Screens EP-S-028 EPSDT Screening Appointment Add

## General Information

This on-line screen is used to enter data to ADD appointment information into the EPSDT Appointment Cross Reference File (EP-F-010). Because of its add functionality, this screen will not be accessed by the Provider/Member Help-line personnel.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	EPT028VA
MAPSET	EP028VA
TRAN ID	VB28

SAMPLE	<b>EPSDT Screening Appointment Add (EP-S-028)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)		<p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.</p>

2	<b>ENROLLEE NAME</b> Enrollee Full Name (DE3003)		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
3	<b>SCREEN TYPE</b> EPSDT Screen Type (DE8101)		<p>This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).</p> <p>This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening). System Displayed.</p>
4	<b>SCREENING APPOINTMENT SOURCE</b> EPSDT Screening Appointment Source (DE8212)	Edits: Must be 'B', 'D', 'E', 'P', 'U' or blank. Messages: 8069- ENTER A VALID SOURCE.	<p>Identifies who set up the screening appointment. E (Enrollee), P (Provider), D (DMAS), B (DMAS BACKOUT) or U (Unable to contact).</p> <p>Identifies who set up the screening appointment. E (Enrollee), P (Provider), D (DMAS), B (DMAS BACKOUT) or U (Unable to contact).          ADD (R/U)          Enter the source code which identifies who set up the screening appointment.          UPDATE (R/U)          Enter the change to the source code which identifies who set up the screening appointment.</p>
5	<b>SCREENING APPOINTMENT</b>	Edits: Must be in MM/DD/CCYY format.	The date a screening should be performed.

	<p>DATE</p> <p>EPSDT Screening Appointment Date (DE8205)</p>	<p>Messages:</p> <p>8079- SCREENING DATE IS INVALID. RE-ENTER IN MM/DD/CCYY FORMAT.</p>	<p>The date a screening should be performed. Format is MMDDCCYY.</p> <p>ADD (R/U) Enter the date a screening should be performed.</p> <p>UPDATE (R/U) Enter the change to the date a screening should be performed.</p>
6	<p>SCREENING APPOINTMENT TIME</p> <p>EPSDT Screening Appointment Time (DE8209)</p>	<p>Edits:</p> <p>Must be in HH:MM format.</p> <p>Messages:</p> <p>8078- SCREENING TIME IS INVALID. RE-ENTER IN HH:MM FORMAT.</p>	<p>The time of day that a screening appointment has been scheduled.</p> <p>The time of day that a screening appointment has been scheduled. Format is HHMM.</p> <p>ADD (R/U) Enter the time of day that a screening appointment is scheduled.</p> <p>UPDATE (R/U) Enter the change to the time of day a screening appointment has been scheduled.</p>
7	<p>SCREENING APPOINTMENT DUE DATE</p> <p>EPSDT Appointment Due Date (DE8203)</p>		<p>For newly eligible recipients, this is the date before which their first screening should be performed.</p> <p>For newly eligible recipients, this is the date before which their first screening should be performed. System Displayed.</p>
8	<p>RESCREENING APPOINTMENT SOURCE</p> <p>EPSDT Re-screening Appointment Source (DE8256)</p>		<p>Identifies who set up the rescreening appointment. E (Enrollee), D (DMAS), P (Provider), or U (Unable to contact).</p> <p>Identifies who set up the rescreening appointment. E (Enrollee), D (DMAS), P</p>

			(Provider), or U (Unable to contact). System Displayed.
9	<p>RESCREENING APPOINTMENT DATE</p> <p>EPSDT Re-Screening Appointment Date (DE8222)</p>		<p>The date that a missed rescreening appointment has been rescheduled.</p> <p>The date that a missed rescreening appointment has been rescheduled. System Displayed.</p>
10	<p>RESCREENING APPOINTMENT TIME</p> <p>EPSDT Re-screen Appointment Time (DE8226)</p>		<p>The time a rescheduled screening appointment will occur.</p> <p>The time a rescheduled screening appointment will occur. System Displayed.</p>
11	<p>RESCREENING APPOINTMENT DUE DATE</p> <p>EPSDT Referral Appointment Due Date (DE8231)</p>		<p>The date by which a rescreening referral appointment should be set up.</p> <p>The date by which a rescreening referral appointment should be set up. System Displayed.</p>
12	<p>PROVIDER NUMBER</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Must be a valid provider number.</p> <p>Messages:</p> <p>8070- ENTER A VALID PROVIDER NUMBER.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p>	<p>A unique identification number assigned to a screening provider.</p> <p>A unique identification number assigned to a screening provider.</p> <p>ADD (R/U) Enter a unique identification number assigned to a screening provider.</p> <p>UPDATE (R/U) Enter the change to the identification number assigned to a screening provider.</p>
13	<p>LOCATION</p> <p>Provider Locality Code (DE4089)</p>	<p>Edits:</p> <p>Enter a valid county in which a provider is located</p> <p>Messages:</p> <p>4947- Provider Locality Invalid</p>	<p>Display the county in which the provider is located</p> <p>Enter a valid county in which a provider is located.</p>

14	PROVIDER NAME Provider Name (DE4085)	Edits: Messages:	The name of the screening provider.  The name of the screening provider. System Displayed.
15	TRANSPORTATION PROVIDER National Provider Identifier (DE4700)	Edits: Must be a valid provider number. Messages: "PLEASE ENTER A VALID PROVIDER NUMBER"  This field may contain the Transportation Provider's nine digit Legacy ID or the Provider's ten digit Atypical Provider Identifier (API). The API, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.	A unique identification number assigned to a transportation provider.  A unique identification number assigned to a transportation provider. ADD (O/U) Enter the unique identification number assigned to a transportation provider. UPDATE (O/U) Enter the change to the identification number assigned to the transportation provider.
16	LOCATION Provider Locality Code (DE4089)	Edits: Enter a valid county in which a provider is located. Messages: 4947- Provider Locality Invalid.	Display the county in which the provider is located. Enter a valid county in which a provider is located.
17	TRANSPORTATION PROVIDER NAME Provider Name (DE4085)	Edits: Messages:	The name of the transportation provider.  The name of the transportation provider. System Displayed.
18	ENROLLEE MAILING ADDRESS (LINE 1) Enrollee Additional Address Name (DE3114)	Edits: Messages:	Additional name information for the enrollee address information such as 'care of' or 'attention' information.  Additional name information for the enrollee address information such as 'care of' or 'attention' information. System Displayed.
19	ENROLLEE MAILING ADDRESS (LINE 2) Enrollee Street	Edits: Messages:	The street address of the enrollee.  The street address of the

	Address (DE3115)		enrollee. System Displayed.
20	ENROLLEE MAILING ADDRESS CITY Enrollee City Name (DE3116)	Edits: Messages:	Name of the city in which the enrollee lives.  Name of the city in which the enrollee lives. System Displayed.
21	ENROLLEE MAILING ADDRESS STATE Enrollee State Code (DE3117)	Edits: Messages:	State abbreviation of the state in which the enrollee lives.  State abbreviation of the state in which the enrollee lives. System Displayed.
22	ENROLLEE MAILING ADDRESS ZIP CODE Enrollee ZIP Code (DE3118)	Edits: Messages:	Zip code of the area in which the enrollee lives.  Zip code of the area in which the enrollee lives. System Displayed.
23	ENROLLEE PHONE NUMBER Enrollee Telephone Number (DE3095)	Edits: Messages:	The telephone number of the enrollee as given to the enrolling agency.  The telephone number of the enrollee as given to the enrolling agency. System Displayed.

NAVIGATION		EPSDT Screening Appointment Add (EP-S-028)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ADD	Performs ADD to the EPSDT Appointment Cross Reference File (EP-F-010).	N/A
SUB MENU	Returns to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
REFRESH	Redisplays the current screen EP-S-028 contents, void of any current operator entered updates.	N/A
RETURN	Returns to the EPSDT Screening and Referral Appointment Main Menu.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8071	ADD/UPDATE NOT PERFORMED NO CHANGES WERE MADE TO THE RECORD.	Information message. No action needed.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8080	DUPLICATE RECORD FOUND	Information message.
8070	ENTER A VALID PROVIDER NUMBER	Enter a valid Provider Number. See the field definitions for formatting/requirements for this field.
8069	ENTER A VALID SOURCE	Enter a valid Source. See the field definitions for formatting/requirements for this field.
8081	ERROR ENCOUNTERED WHILE ADDING TO FILE	Information message.
8075	ERROR WRITING TO LOG FILE	Information message.
15	FUNCTION CHOSEN IS INVALID	Choose another function.
8074	LOG FILE CLOSED; RECORD NOT WRITTEN	Information message.
4947	PROVIDER LOCALITY INVALID	Enter a valid Provider Locality code
8082	RECORD ADDED	Information message.
8079	SCREENING DATE IS INVALID RE-ENTER IN MM/DD/CCYY FORMAT.	Re-enter data in format described.
8078	SCREENING TIME IS INVALID RE-ENTER IN HH:MM FORMAT.	Re-enter data in format described.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.
7. Choose Enter.

8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Add Screening Appointment from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Screening Appointment Add screen (EP-S-028).

# Screens EP-S-029 EPSDT Referral Appointment Add

## General Information

This on-line screen is used to enter data to add referral appointment information to the EPSDT Referral Appointment Cross Reference file (EP-F-023). Processing will permit a maximum of six referral appointments for each screening appointment previously. If the first referral appointment has been accepted, additional referral appointments may be added via the Update Referral Appointment Option on EP-S-020. Because of its add functionality, this screen will not be accessed by the Provider/Member Help-line personnel.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Add
PROGRAM	EPT029VA
MAPSET	EP029VA
TRAN ID	VB29

SAMPLE	<b>EPSDT Referral Appointment Add (EP-S-029)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	ENROLLEE ID Enrollee Per- manent Iden- tification Number (DE3093)		<p>The DMAS-admin-istered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>The DMAS-admin-istered identification number that is used to tie all claims for a</p>

			single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.
2	SCREEN TYPE EPSDT Screen Type (DE8101)		<p>This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening).</p> <p>This one-character field identifies the type of screening as D (Dental Screening), H (Hearing Screening), M (Medical Screening), or V (Vision Screening). System Displayed.</p>
3	ENROLLEE NAME Enrollee Full Name (DE3003)		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
4	SCREEN DATE EPSDT Screening Appointment Date (DE8205)		<p>The date a screening should be performed.</p> <p>The date a screening should be performed. System Displayed.</p>
5	TIME EPSDT Screening Appointment Time (DE8209)		<p>The time of day that a screening appointment has been scheduled.</p> <p>The time of day that a</p>

			screening appointment has been scheduled. System Displayed.
6	REFERRAL APPOINTMENT DATE EPSDT Referral Appointment Date (DE8240)	Edits: Must be in MM/DD/CCYY OR MMDDCCYY format. Must be a date that is greater than the Screening Appointment Date and must fall between the range of 90 days past and 15 months into the future of the current date. Up to six referral appointment dates/times may be entered for a screening appointment. If the first referral appointment has been accepted, additional referral appointments may be added via the Update Referral Appointment Option on EP-S-020. Messages: 8083- REFERRAL DATE IS INVALID. RE-ENTER IN MM/DD/CCYY OR MMDDCCYY FORMAT. 8143- DATE RANGE IS: 90 DAYS PAST/15 MONTHS FUTURE. 8144- REFERRAL DATE MUST BE GREATER THAN SCREEN DATE.	Date of the referral appointment.  Date of the referral appointment. Format is MMDDCCYY or MM/DD/CCYY. ADD (R/U) Enter the date of the referral appointment. UPDATE (R/U) Enter the change to the date of the referral appointment.
7	REFERRAL APPOINTMENT TIME EPSDT Referral Appointment Time (DE8241)	Edits: Must be in HH:MM or HHMM format. Up to six referral appointment dates and times may be entered for a screening appointment. If the first referral appointment date/time has been accepted, additional referral appointments may be added via the Update Referral Appointment Option on EP-S-020. Messages: 8084- REFERRAL TIME IS INVALID. RE-ENTER IN HH:MM OR HHMM FORMAT.	Time of the referral appointment.  Time of the referral appointment. Format is HHMM or HH:MM. ADD (R/U) Enter the time of the referral appointment. UPDATE (R/U) Enter the change to the time of the referral appointment.
8	RESCHEDULED DATE EPSDT Referral Reappointment Date (DE8235)		The rescheduled appointment date for a missed referral appointment.  The rescheduled appointment date for a missed referral appointment. System Displayed.
9	REFERRAL		The time of the res-

	<p>TIME</p> <p>EPSDT Referral Reappointment Time (DE8236)</p>		<p>cheduled appointment for a missed referral appointment.</p> <p>The time of the rescheduled appointment for a missed referral appointment. System Displayed.</p>
10	<p>APPOINTMENT DUE DATE</p> <p>EPSDT Referral Appointment Due Date (DE8231)</p>		<p>The date by which a referral appointment should be set up.</p> <p>The date by which a referral appointment should be set up. System Displayed.</p>
11	<p>PROVIDER NUMBER</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Must be a valid provider number.</p> <p>Messages:</p> <p>8070- ENTER A VALID PROVIDER NUMBER.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p>	<p>A unique identification number assigned to a provider.</p> <p>A unique identification number assigned to a provider.</p> <p>ADD (R/U)</p> <p>Enter the unique identification number assigned to a provider for the referral appointment.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the unique identification number assigned to a provider for the referral appointment.</p>
12	<p>LOC</p> <p>Provider Locality Code (DE4089)</p>	<p>Edits:</p> <p>Must enter valid Provider Locality code.</p> <p>Messages:</p> <p>4947- Provider Locality Invalid</p>	<p>Displays the county in which a provider is located.</p> <p>Enter a valid county in which a provider is located.</p>
13	<p>TRANSP ASST?</p> <p>EPSDT Transportation Assist-</p>	<p>Edits:</p> <p>Must be BLANK, 'Y', or 'N'.</p> <p>Messages:</p>	<p>This one-position field indicates whether or</p>

ance Indicator (DE8244)	8137- ENTER A VALID TRANSPORTATION ASSISTANCE.	not transportation assistance is required .  This one-position field indicates whether or not transportation assistance is required. Must be BLANK, 'Y', or 'N'. ADD (O/U) Enter the to determine if transportation assistance is required. May be left blank. UPDATE (O/U) Enter the change as to determine if transportation assistance is required.
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NAVIGATION		
EPSDT Referral Appointment Add (EP-S-029)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ADD	Performs add to the EPSDT referral Appointment Cross reference File (EP-F-023).	N/A
ENTER	Processes the entered data.	N/A
SUB MENU	Returns the user to the EPSDT Main Menu screen.	EP-S-100 (R)
MAIN	Returns to MMIS Main Menu.	RF-S-010 (R)
REFRESH	Redisplays the current screen EP-S-029 contents, void of any current operator entered updates.	N/A
RETURN	Returns to the previous screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8071	ADD/UPDATE NOT PERFORMED NO CHANGES WERE MADE TO	Information message. No action needed.

	THE RECORD.	
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8070	ENTER A VALID PROVIDER NUMBER	Enter a valid Provider Number. See the field definitions for formatting/requirements for this field.
8137	ENTER A VALID TRANSPORTATION ASSISTANCE	Enter a valid Transportation Code. See the field definitions for formatting/requirements for this field.
8081	ERROR ENCOUNTERED WHILE ADDING TO FILE	Information message.
8098	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8075	ERROR WRITING TO LOG FILE	Information message.
15	FUNCTION CHOSEN IS INVALID	Choose another function.
8074	LOG FILE CLOSED; RECORD NOT WRITTEN	Information message.
4947	PROVIDER LOCALITY INVALID	Enter a valid Provider Locality code
8082	RECORD ADDED	Information message.
8061	REFERRAL APPOINTMENT FILE CLOSED	Information message.
8083	REFERRAL DATE IS INVALID RE-ENTER IN MM/DD/CCYY FORMAT.	Enter a valid referral date. See the field definitions for valid data and formatting. (Example: 01/06/2001 is correct date formatting.)
8087	REFERRAL RECORD ALREADY EXISTS PERFORM AN UPDATE FUNCTION.	Move to the maintenance screen to update the referral record.
8084	REFERRAL TIME IS INVALID RE-ENTER IN HH:MM FORMAT.	Re-enter the referral time in proper format. (Ex: 08:15)
8062	REQUESTED DATA NOT PRESENT	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
3. Choose the EPSDT Menu from the Selection drop-menu.
4. Choose Enter.
5. You see the EPSDT Menu (EP-S-000).
6. Choose Screening and Referral Appointment Menu from the Selection drop-menu.

7. Choose Enter.
8. You see the EPSDT Screening and Referral Appointment Main Menu screen (EP-S-020).
9. Choose Add Referral Appointment from the Selection drop-menu.
10. Enter data in all fields.
11. You see the EPSDT Referral Appointment Add (EP-S-029).
If you do NOT enter data in all fields:
1. You see the EPSDT Screening Appointment Inquiry screen (EP-S-023).
2. Make a referral selection on this screen.

# Screens EP-S-030 EPSDT Member Selection Display

## General Information

This screen displays when a member has been previously assigned more than one member identification number.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT030VA
MAPSET	EP030VA
TRAN ID	VB30

SAMPLE	<b>EPSDT Member Selection Display (EP-S-030)</b>
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There is no Sample

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Cri- teria Message	Field Instructions
1	ENROLLEE ID (KEYED IN) Enrollee Per- manent Iden- tification Number (DE3093)	Edits: N/A	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (R/P) Enter the Enrollee ID on which you wish to inquire.  N/A
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
3	SEL (DE0000)	Edits: Must be an "X" or "S". Messages: "Enter an	'EXCLUDE'  N/A

		"X" or "S" in this field."	
4	ENROLLEE ID Enrollee Permanent Identification Number (DE3093)	Edits: N/A	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.  N/A
5	TYPE Person Identifier Type Code (DE3949)		Type of person ID.  N/A
6	BEGIN DATE Enrollee Eligibility Begin Date (DE3010)		The date from which an enrollee may begin to receive DMAS-administered program benefits for a particular continuous period.  N/A
7	END DATE Enrollee Eligibility End Date (DE3011)		The date through which an enrollee is approved to receive DMAS-administered program benefits for a particular continuous period.  N/A
8	MSG (DE0000)		'EXCLUDE'  N/A

NAVIGATION	EPSDT Member Selection Display (EP-S-030)	
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ENTER	Returns control to the calling program which executes with the member ID selected by the user.	N/A
SUB MENU	Returns to EPSDT Main Menu.	N/A
MAIN	Returns to MMIS Main Menu.	N/A

## Error Messages

Error	Description	Resolution
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
139	FUNCTION IS INVALID	Information message.

8110	SELECT AN ENROLLEE ID AND CHOOSE ENTER	Information message.
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## Screen Access

To see this screen:
1. Enter only the enrollee number.
2. Choose Enter.
From any of these screens:
EPSDT Case Update (EP-S-001)
EPSDT Screening Record Inquiry (EP-S-002)
EPSDT Abnormality Treatment Inquiry (EP-S-003)
EPSDT Case Inquiry - Provider/Recipient Help-line (EP-S-013)
EPSDT Abnormality Treatment Update (EP-S-015)
EPSDT Screening and Referral Appointment Main Menu - Provider/Recipient Help-line (EP-S-019)
EPSDT Screening and Referral Appointment Main Menu (EP-S-020).

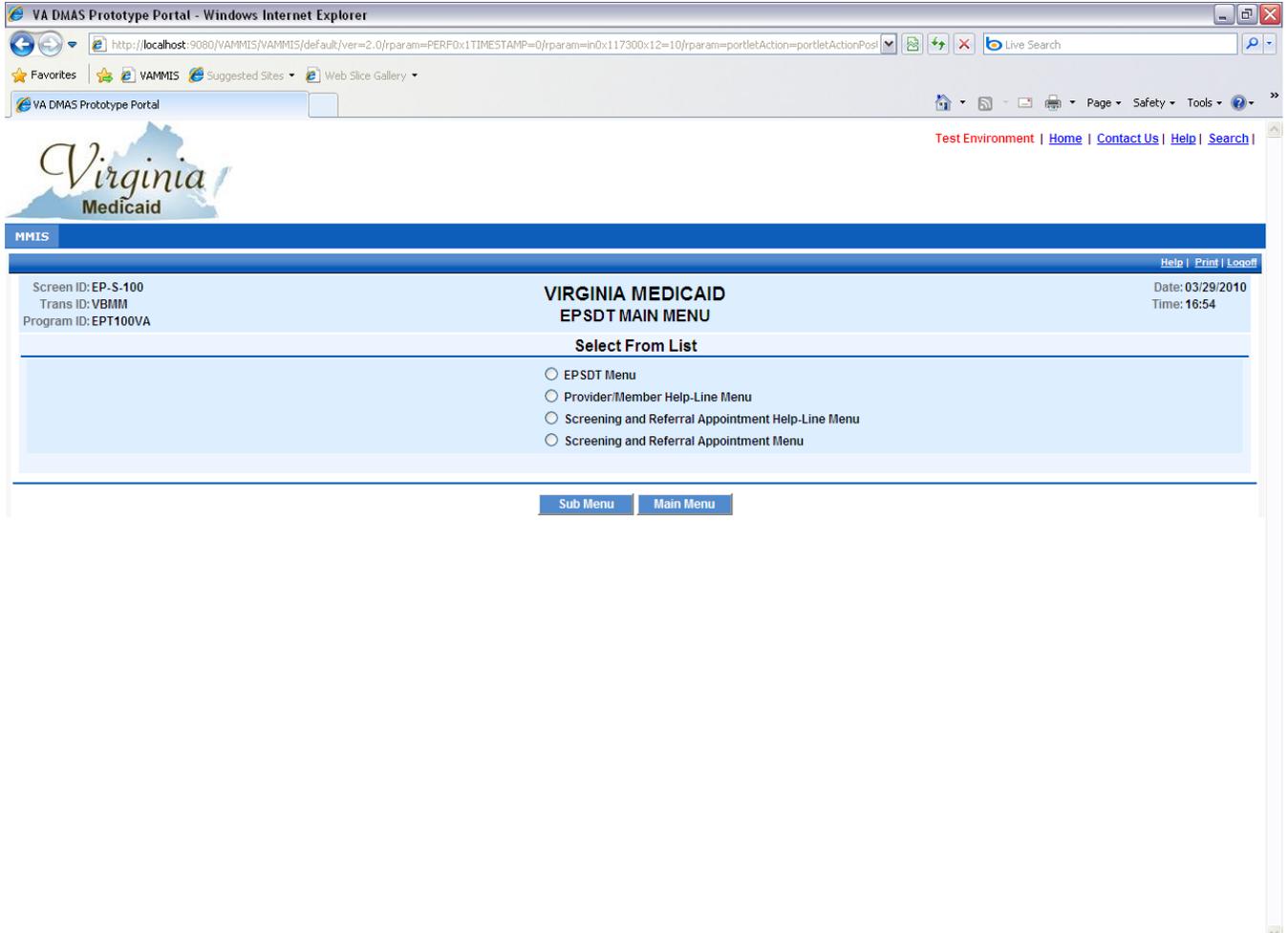
# Screens EP-S-100 EPSDT MAIN MENU

## General Information

This screen provides access to all EPSDT functionality.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	EPT100VA
MAPSET	EP100VA
TRAN ID	VBMM

SAMPLE	<b>EPSDT MAIN MENU (EP-S-100)</b>
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## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	TRANSACTION ID (DE0000)	Edits: Must be VBMM; 4 character identification of the transaction.	'EXCLUDE'  'EXCLUDE'
2	PROGRAM NAME (DE0000)	Edits: Must be EPT100VA; 7 character identification of the program processing transaction VBMM.	'EXCLUDE'  'EXCLUDE'
3	SCREEN TITLE	Edits:	'EXCLUDE'

(DE0000)	Proper title of the EPT100VA screen; must be VA DMAS EPSDT MAIN MENU.	'EXCLUDE'
4 SYSTEM DATE (DE0000)	Edits: Must be format MM/DD/CCYY where: MM= 2-digit month (values 1 thru 12) DD = 2-digit day (values 1 thru 31) CCYY = 4-digit year including century.	'EXCLUDE'  'EXCLUDE'
5 SYSTEM TIME (DE0000)	Edits: Must be format HH:MM where: HH = 2 digit hour (values 01 thru 24) MM = 2 digit minute (values 01 thru 59)	'EXCLUDE'  'EXCLUDE'
6 SELECTION (DE0000)	Edits: Must be a valid selection: 1- EPSDT Menu; 2 - Provider/Recipient Help-Line Menu; 3 - Screening and Referral Appointment Help-Line Menu or 4 - Screening and Referral Appointment Menu.	The selections allowed by this screen. Selections are: EPSDT Menu Provider/Recipient Help-Line Menu Screening and Referral Appointment Help-Line Menu Screening and Referral Appointment Menu. INQUIRY (R/P) Select the desired option you wish to inquire.  The selections allowed by this screen. Selections are: EPSDT Menu Provider/Recipient Help-Line Menu Screening and Referral Appointment Help-Line Menu Screening and Referral Appointment Menu. ADD (R/P) UPDATE (R/P) Select the desired option you wish to add or update.

NAVIGATION		EPSDT MAIN MENU (EP-S-100)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
SUB MENU	Invokes the EPSDT Main Menu.	N/A

MAIN MENU	Returns to the MMIS Main Menu.	N/A
PROVIDER/MEMBER HELP-LINE MENU	Invokes the EPSDT Main Menu - Provider/Member Help-line.	N/A
RUTURN	Returns to the MMIS Main Menu.	N/A
SCREENING AND REFERRAL APPOINTMENT HELP-LINE MENU	Invokes the EPSDT Screening and Referral Appointment Main Menu - Provider/Member Help-line.	N/A
SCREENING AND REFERRAL APPOINTMENT MENU	Invokes the EPSDT Screening and Referral Appointment Main Menu.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8000	ENTER A VALID OPTION	Enter a valid Option. See the field definitions for valid options.
139	FUNCTION IS INVALID	Information message.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the EPSDT icon.
2. You see the EPSDT Main Menu (EP-S-100).
Note: The User must have appropriate Security to access this Transaction Code.

# Screens MI-S-000 Maternal and Infant Care Information

## General Information

This on-line inquiry and update screen displays information about MICC participating Members that may be revised by Fiscal Agent authorized operators and appropriate DMAS personnel. This data is stored on the MICC Master File.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update
PROGRAM	MIT000VA
MAPSET	MI000VA
TRAN ID	VBMO

SAMPLE	<b>Maternal and Infant Care Information (MI-S-000)</b>
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		8455- NO CASE MANAGEMENT DATA IS PRESENT FOR THIS ENROLLEE.	<p>INQUIRE (R/U) Enter the valid Enrollee ID number of which you wish to inquire.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>UPDATE (R/U) Enter the Enrollee ID number to which you wish to change data.</p>
2	ENROLLEE NAME Enrollee Full Name (DE3003)		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
3	CM LAST ACT DATE Log Date (DE5704)		<p>Date of the action of the log.</p> <p>Date of the action of the log. System Displayed.</p>
4	TRANSACTION Log Action Type (DE5702)	<p>Edits:</p> <p>Messages:</p>	<p>A code indicating the type of action for a log.</p> <p>A code indicating the type of action for a log. System Displayed.</p>
5	LINE NUMBER (DE0000)	<p>Edits:</p> <p>Numeric 1-10 only. The numeric value may not be entered that exceeds the number of Case Management Records that an enrollee has on the MICC Master File.</p> <p>Messages:</p> <p>8459- ENTER A LINE NUMBER AND CHOOSE ENTER.</p> <p>8460- INVALID LINE NUMBER.</p>	<p>The number of Case Management Records that an enrollee has on the MICC Master File. Use this field in update mode.</p> <p>The number of Case Management Records that an enrollee has on the MICC Master File.</p> <p>UPDATE (R/U)</p>

			Enter the line number of the record you wish to change.
6	<p>PROVIDER ID</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Must represent a valid provider ID on the Provider Master Data Store. The Provider Type (DE 4006) must represent a Physician, Health Clinic, Nurse Midwife, or Case Management Provider.</p> <p>Once the NPI mandate has been implemented, a valid NPI will be required. Legacy IDs will no longer be accepted by the process.</p> <p>Messages:</p> <p>The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.</p> <p>8092- PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP. 8070- ENTER A VALID PROVIDER ID. 8922- NPI REQUIRED.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p>	<p>The ID Number of the Medicaid provider who provided the Maternal MICC Care Coordination Report on the enrollee. Use this field in update mode.</p> <p>A unique identification number assigned to a provider. Valid provider ID on Provider Master Data Store, Provider type must reflect a Physician, Health Clinic, Nurse Midwife, Case Management Provider or Nurse Practitioner.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the unique identification number assigned to a provider.</p>
7	<p>MICC TYPE</p> <p>Case Management (MICC) Type (DE8401)</p>	<p>Edits:</p> <p>Must be 'I' or 'M'.</p> <p>For type 'I', Current Date must be less than the enrollee's 7th birthdate. For type 'M', Current Date must be greater than or equal to the enrollee's 10th birthdate.</p> <p>Messages:</p> <p>8462- ENTER A VALID MICC TYPE. 8465- MICC TYPE/AGE MISMATCH.</p>	<p>Indicates whether the recipient receiving case management services is an infant or a mother. Use this field in update mode.</p> <p>Indicates whether the recipient receiving case management services is an infant or a mother. Must be 'I' or 'M'. - For type 'I', Current Date must be less than the enrollee's 7th birth date. - For type 'M', Current Date must be greater than or equal to the enrollee's 10th birth date.</p>

			<p>UPDATE (R/U) Enter the indicator change for whether the recipient receiving case management services is an infant or a mother.</p>
8	<p>RISK LEVEL Case Management (MICC) Level of Risk (DE8484)</p>	<p>Edits: Must be blank, '0', '1', or '2'. Messages: 8463- ENTER A VALID RISK LEVEL.</p>	<p>Indicates the level of risk whether high, medium or low. Use this field in update mode. Indicates the level of risk whether high, medium or low. Must be blank, '0', '1', or '2'. UPDATE (R/U) Enter the indicator change to the risk level.</p>
9	<p>MICC BEGIN DATE Case Management (MICC) Begin Date (DE8403)</p>	<p>Edits: Must be a valid date. Must not be less than 07011989 and not greater than the Current Date. Since implementation of the Retroactive Enrollment Process, the Case Management Begin Date may be any valid date that is not earlier than the retroactive entry cutoff date from the system parameters table. The Case Management Begin Date is greater than or equal to one of the enrollee's the Fee-For-Service Enrollments accept the date else move FFS begin date to Case Management Begin Date. The enrollee's Aid Category must not be PD 080. Messages: 8476 - ENTER A VALID BEGIN DATE. 8481 - NEW BEGIN DATE CANNOT BE LESS THAN ELIGIBILITY BEGIN DATE. 8482 - NEW BEGIN DATE CANNOT BE GREATER THAN NEW END DATE. 8523 - HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE. 8524 - PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE. 8525 - BEGIN DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY. 8531 - ENROLLEE IS NOT ELIGIBLE FOR THIS DATE. 8534 - NOT ELIGIBLE FOR THE GIVEN DATE, FFS BEGIN DATE IS MOVED.</p>	<p>The date on which the recipient began receiving case management (MICC) services. Use this field in update mode. The date on which the recipient began receiving case management (MICC) services. Must be a valid date format (MMDDCCYY). Must not be less than 07011989 and not greater than the Current Date. UPDATE (R/U) Enter the change to the date on which the recipient began receiving case management (MICC) services.</p>

10	<p><b>END DATE</b></p> <p>Case Management (MICC) End Date (DE8489)</p>	<p>Edits:</p> <p>Must be a valid date.</p> <p>Must be greater than or equal to the Begin Date (DE 8403).</p> <p>For MICC Type (DE 8401) equal 'I', the END DATE may not be greater than the last day of the month of the enrollee's 2nd birthday. The Case Management End Date should not be greater than the Fee-For-Service Enrollment date.</p> <p>The Case Management End Date is required when the Outcome Report Indicator equal Y.</p> <p>Messages:</p> <p>8477- ENTER A VALID END DATE.</p> <p>8470- END DATE REQUIRED WHEN OUTCOME REPORT IS 'Y'.</p> <p>8480- NEW END DATE CANNOT BE GREATER THAN ELIGIBILITY END DATE.</p> <p>8475- LATEST REC MUST HAVE ZERO OR BLANK END DATE.</p>	<p>The date the enrollee is no longer a participant in BabyCare or MICC. Use this field in update mode.</p> <p>The date the enrollee is no longer a participant in BabyCare or MICC. Must be a valid date format (MMDDCCYY). Must be greater than or equal to the Begin Date. For MICC Type equal 'I', the END DATE may not be greater than the last day of the month of the enrollee's 2nd birthday.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the date the enrollee is no longer a participant in BabyCare or MICC.</p>
11	<p><b>OUTCOME REPORT</b></p> <p>Case Management (MICC) Outcome Report Received (DE8404)</p>	<p>Edits:</p> <p>Must be 'Y' or 'N'.</p> <p>Can not be 'Y' with an open ended Case Management End Date.</p> <p>Messages:</p> <p>8471- ENTER A VALID OUTCOME REPORT.</p>	<p>Indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS. Use this field in update mode.</p> <p>Indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS. Must be 'Y' or 'N'.</p> <p>UPDATE (R/U)</p> <p>Enter that which indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS.</p>
12	<p><b>END REASON</b></p> <p>Case Management (MICC) Cancel Reason (DE8486)</p>	<p>Edits:</p> <p>Valid values are '00', 01, 02, 03, 04, 05, 06, 08, 88, 98 or 99.</p> <p>A value of 88 is system generated and may not be updated.</p> <p>If the MICC END DATE is greater than zero, the end reason may not be 00.</p> <p>Messages:</p>	<p>This field indicates the reason the enrollee was canceled from the program. Use this field in update mode.</p> <p>This field indicates the reason the enrollee was canceled from the pro-</p>

		<p>8372- BEGIN AND END DATE RANGE OVERLAPS.</p> <p>8472- ENTER A VALID END REASON.</p> <p>8464- END DATE/END REASON MISMATCH.</p>	<p>gram. Use the On-line HELP system to find valid codes for this field.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the value which indicates the reason the enrollee was canceled from the program.</p>
13	<p>EXPECTED DELIVERY</p> <p>Maternal Risk Expected Delivery Date (DE8412)</p>	<p>Edits:</p> <p>Must be a valid date.</p> <p>Only valid for mothers.</p> <p>Messages:</p> <p>8468- EXPECTED DELIVERY DATE NOT GREATER THAN CASE BEGIN DATE.</p> <p>8469- EXPECTED DELIVERY DATE 12 MONTHS BEYOND BEGIN DATE.</p> <p>8466- EXPECTED DELIVERY DATE NOT ALLOWED FOR INFANTS.</p> <p>8467- MUST ENTER VALID EXPECTED DELIVERY DATE.</p>	<p>The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen. Use this field in update mode.</p> <p>The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen. Must be a valid date with MMDDCCYY format.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen.</p>
14	<p>ENR</p> <p>Case Management Pending Enrollment Indicator (DE8406)</p>	<p>Edits:</p> <p>Must be either blank, 'E', 'P', or 'U'.</p> <p>Messages:</p> <p>8473- ENTER A VALID PEND ENRL INDICATOR.</p>	<p>Identifies whether or not the eligible enrollee has been enrolled in MICC or BabyCare. Use this field in update mode.</p> <p>Identifies whether or not the eligible enrollee has been enrolled in MICC or BabyCare. Use the On-line HELP system to find valid codes for this field.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which identifies whether or not the eligible enrollee has been enrolled in MICC or BabyCare.</p>

15	<p>LINE NUMBER</p> <p>Calculated (DE0002)</p>	<p>Edits:</p> <p>Numeric 1-10 only. The number of Case Management Records that an enrollee has on the MICC Master File.</p> <p>Messages:</p> <p>8527- NO MICC RECORD ON FILE FOR THIS ENROLLEE/SEQ NBR</p>	<p>The number of Case Management Records that an enrollee has on the MICC Master File.</p> <p>The number of Case Management Records that an enrollee has on the MICC Master File. System Displayed.</p>
16	<p>PROVIDER ID</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Messages:</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.</p>	<p>The ID Number of the Medicaid provider who provided the Maternal MICC Report on the enrollee.</p> <p>The ID Number of the Medicaid provider who provided the Maternal MICC Report on the enrollee. System Displayed.</p>
17	<p>MICC TYPE</p> <p>Case Management (MICC) Type (DE8401)</p>		<p>Indicates whether the recipient receiving case management services is an infant or a mother.</p> <p>Indicates whether the recipient receiving case management services is an infant or a mother. System Displayed.</p>
18	<p>RISK LEVEL</p> <p>Case Management (MICC) Level of Risk (DE8484)</p>		<p>Indicates the level of risk whether high, medium or low.</p> <p>Indicates the level of risk whether high, medium or low. System Displayed.</p>
19	<p>MICC BEGIN DATE</p> <p>Case Management (MICC) Begin Date (DE8403)</p>	<p>Edits:</p> <p>If MICC Begin date is greater than Fee-For-Service begin date accept the given date else move Fee-For-Service begin date.</p> <p>Messages:</p> <p>8534 - NOT ELIGIBLE FOR THE GIVEN DATE,</p>	<p>The date on which the recipient began receiving case management (MICC) services.</p> <p>The date on which the recipient began receiving</p>

		FFS BEGIN DATE IS MOVED.	case management (MICC) services. System Displayed.
20	END DATE Case Management (MICC) End Date (DE8489)		The date the enrollee is no longer a participant in BabyCare or MICC.  The date the enrollee is no longer a participant in BabyCare or MICC. System Displayed.
21	OUTCOME REPORT Case Management (MICC) Outcome Report Received (DE8404)		Indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS.  Indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS. System Displayed.
22	END REASON Maternal Outcome Reason Code (DE8430)		The reason that the mother is no longer receiving care coordination services.  The reason that the mother is no longer receiving care coordination services. System Displayed
23	EXPECTED DELIVERY Maternal Risk Expected Delivery Date (DE8412)		The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen.  The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen. System Displayed.
24	ENR Case Management Pending Enrollment		Identifies whether or not the eligible enrollee has been enrolled in MICC or BabyCare.

Indicator (DE8406)		Identifies whether or not the eligible enrollee has been enrolled in MICC or BabyCare. System Displayed.
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NAVIGATION		Maternal and Infant Care Information (MI-S-000)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ELIG	Branch to Eligibility data screen.	RS-S-015 (B)
ENTER	Displays participating member data.	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (R)
MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)
SCROLL UP	Allows the user to view the next group of Case Management Records that an member has on the MICC Master File.	N/A
SCROLL DOWN	Allows the user to view the previous group of Case Management Records that an member has on the MICC Master File.	N/A
REFRESH	Redisplays the current screen MI-S-000 contents, void of any current operator entered updates.	N/A
UPDATE	Allows the user to update the information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
8071	ADD/UPDATE NOT PERFORMED NO CHANGES WERE MADE TO THE RECORD.	Information message. No action needed.
8485	ALREADY AT THE END OF THE FILE	Information message. No action needed.
8484	ALREADY AT THE START OF THE FILE	Information message. No action needed.
8372	BEGIN AND END DATE RANGE OVERLAPS	Enter another date. See the field definitions for specifications on the date to be entered.
8525	BEGIN DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.

30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8470	END DATE REQUIRED WHEN OUTCOME REPORT IS 'Y'	Enter a valid End Date. See the field definitions for valid end date specifications.
8464	END DATE/END REASON MISMATCH	Enter a valid end reason code for the end date. See the field definitions for formatting/requirements for this field.
8479	ENROLLEE DATE OF BIRTH IS INVALID	Information message.
8478	ENROLLEE NOT ELIGIBLE	Check the Enrollee ID for Medicaid Eligibility.
8458	ENROLLEE NOT FOUND ON MASTER DATABASE	The Enrollee ID number entered is not found on the Master Database. Correct the Enrollee ID or cancel the transaction.
8459	ENTER A LINE NUMBER AND CHOOSE ENTER	Enter the line number of the desired Case Management record and choose Enter.
8461	ENTER A LINE NUMBER AND CHOOSE ENTER	Enter the line number of the desired Case Management record and choose Enter.
8476	ENTER A VALID BEGIN DATE	Enter a Valid Begin Date. See the field definitions for formatting and requirements for this field.
8477	ENTER A VALID END DATE	Enter valid values according to error message specifications.
8472	ENTER A VALID END REASON	Enter a valid End Reason. See the field definitions for valid Enrollee ID specifications.
8462	ENTER A VALID MICC TYPE	Enter a valid MICC Type. See the field definitions for formatting/requirements for this field.
8471	ENTER A VALID OUTCOME REPORT	Enter a valid Outcome Report. See the field definitions for formatting/requirements for this field.
8473	ENTER A VALID PEND ENRL INDICATOR	Enter a valid ENR indicator. See the field definitions for formatting/requirements for this field.
8070	ENTER A VALID PROVIDER NUMBER	Enter a valid Provider Number. See the field definitions for formatting/requirements for this field.
8463	ENTER A VALID RISK LEVEL	Enter a valid Risk Level indicator. See the field definitions for formatting/requirements for this field.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8457	ERROR WHILE READING TSQ	Information message.
8469	EXPECTED DELIVERY DATE 12 MONTHS BEYOND BEGIN DATE	Enter Expected Delivery date that is not 12 months after Begin Date. See the field definitions for formatting/requirements for this field.
8466	EXPECTED DELIVERY DATE NOT ALLOWED FOR INFANTS	Expected Delivery date is not entered for infant enrolled
8468	EXPECTED DELIVERY DATE	Enter Expected Delivery date, which is greater than

	NOT GREATER THAN CASE BEGIN DATE	Begin Date. See the field definitions for formatting/requirements for this field.
139	FUNCTION IS INVALID	Information message.
8474	INVALID CROSS EDIT; EFFECTIVE DATE/OUTDATED	Check field for valid data and re-enter.
8460	INVALID LINE NUMBER	Enter a valid line number. If necessary, see the field definitions for valid data/formatting.
8475	LATEST REC MUST HAVE ZERO OR BLANK END DATE	Enter the valid end date. See the field definitions for formatting/requirements for this field.
8465	MICC TYPE/AGE MISMATCH	Enter the valid MICC type/age code. See the field definitions for formatting/requirements for this field.
8467	MUST ENTER VALID EXPECTED DELIVERY DATE	Enter a valid Expected Delivery date. See the field definitions for formatting/requirements for this field.
8482	NEW BEGIN DATE CANNOT BE GREATER THAN NEW END DATE	Enter a valid Begin Date which is not greater than End Date. See the field definitions for formatting/requirements for this field.
8481	NEW BEGIN DATE CANNOT BE LESS THAN ELIGIBILITY BEGIN DATE	Enter a valid Begin Date which is not less than eligibility begin date. See the field definitions for formatting/requirements for this field.
8480	NEW END DATE CANNOT BE GREATER THAN ELIGIBILITY END DATE	Enter a valid End Date which is not greater than eligibility end date. See the field definitions for formatting/requirements for this field.
8455	NO CASE MANAGEMENT DATA IS PRESENT FOR THIS ENROLLEE	Information message. No action needed.
8456	NO MORE DATA IN THE TABLE	Information message.
8534	NOT ELIGIBLE FOR THE GIVEN DATE, FFS BEGIN DATE IS MOVED	Informational message.
8483	RECORD IS CHANGED; SCREEN IS REFRESHED	Information message. No action needed.
8073	RECORD UPDATED	Information message. No action needed.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).
3. Select the DMAS Maternal/Infant Care Information Update radio button.
4. Choose Enter.
5. You see the Maternal and Infant Care Information screen (MI-S-000).

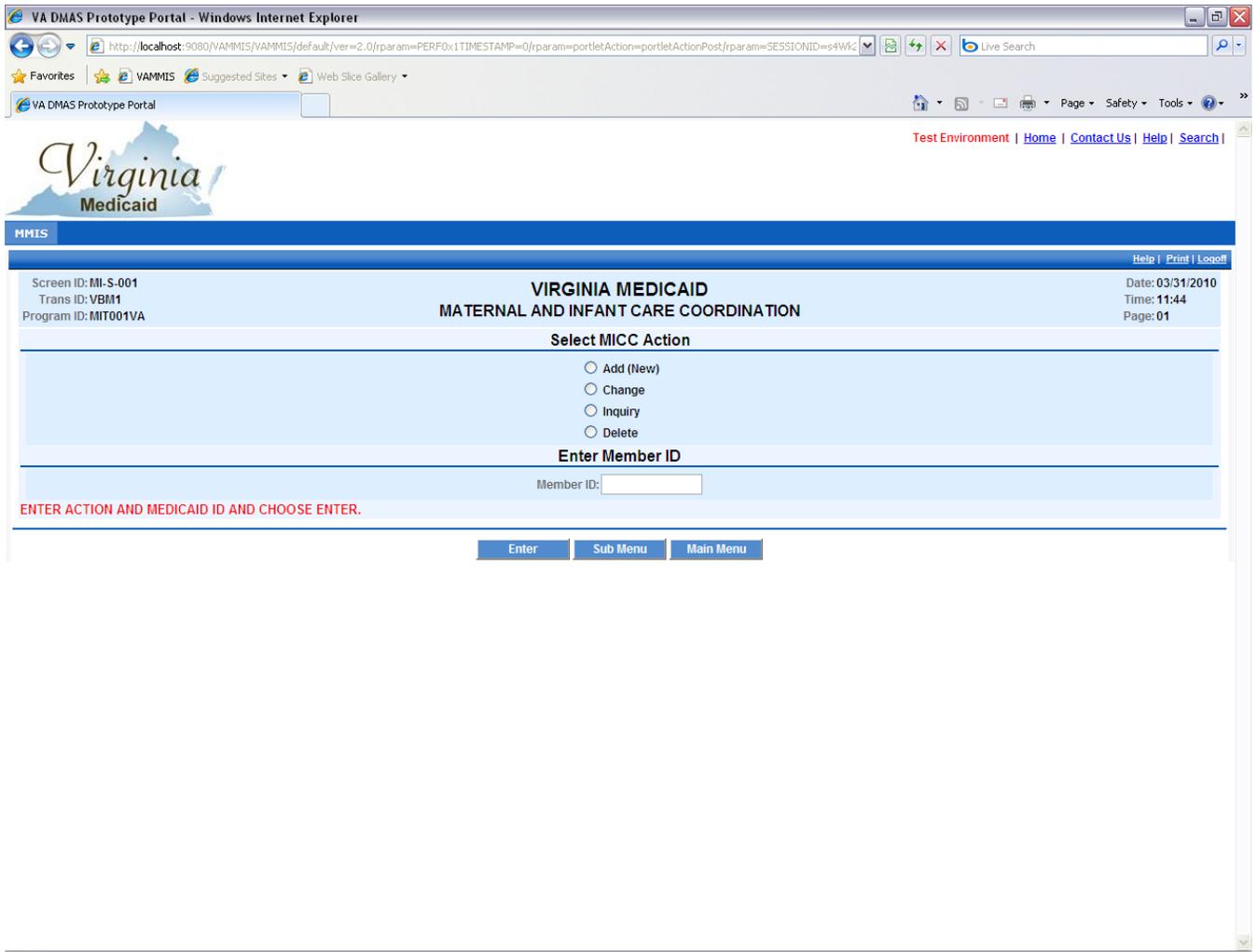
# Screens MI-S-001 Maternal and Infant Care Coordination Services

## General Information

This screen is used to Inquire, Add, Change, and Delete information on the MICC Master File by DMAS- and FA-authorized users. This screen is not for use by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT001VA
MAPSET	MI001VA
TRAN ID	VBM1

SAMPLE	<b>Maternal and Infant Care Coordination Services (MI-S-001)</b>
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## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ACTION Calculated (DE0002)	Edits: Must be 'A' for adding a record, or 'C' for changing a record, or 'I' for inquiry functionality. 'D' may be entered, but it will not physically remove the data element from the	The selection field for the type of transaction desired. INQUIRY (R/U) Click on the Inquiry selection.  The selection fields for Adding, Changing or Deleting data. ADD (R/U) Click on the Addition selection to add a record. UPDATE (R/U)

	<p>MICC Master File.</p> <p>Messages:</p> <p>8487- ENTER ACTION FIELD FOR PROCESSING.</p> <p>8490- CHOOSE A VALID ACTION.</p>	<p>Click on the Change selection to update a record.</p> <p>DELETE (R/U)</p> <p>Click on the Deletion selection to delete a record. This selection may be entered, but it will not physically remove the data element form the MICC Master File.</p>
2	<p>ID NUMBER</p> <p>Enrollee Permanent Identification Number (DE3093)</p> <p>Edits:</p> <p>Must be a valid medicaid number on the Enrollee Master Data Store.</p> <p>Messages:</p> <p>8014- ENROLLEE ID NOT ON FILE.</p> <p>8351- ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE.</p> <p>8488- ENTER ENROLLEE ID FOR PROCESSING.</p> <p>8489- ENTER VALID VALUE FOR ENROLLEE ID.</p> <p>8491- ENROLLEE NOT ON ELIGIBILITY.</p> <p>8492- ENROLLEE ALREADY PRESENT; CANNOT ADD AGAIN.</p> <p>8494- ENROLLEE NOT ELIGIBLE FOR MICC SERVICES.</p> <p>8495- ENROLLEE'S BIRTH DATE IS NOT ON RECIPIENT DATABASE.</p> <p>8519- ENROLLEE HAS NO ASSESSMENT DATA ON FILE TO DELETE.</p>	<p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>INQUIRY (R/U)</p> <p>Enter the valid Medicaid number you wish to inquire.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File.</p> <p>ADD (R/U)</p> <p>Enter the valid Medicaid number you wish to add.</p> <p>UPDATE (R/U)</p> <p>Enter the valid Medicaid number for the record you wish to make changes to.</p>
3	<p>MESSAGE</p> <p>(DE0000)</p>	<p>'EXCLUDE'</p> <p>'EXCLUDE'</p>

Function (B) or (M)	Action	Branch To (B) or Return To (R)
ADD (NEW)	Allows navigation to the MICC Infant Expanded Services screen, if the member is an infant; Allows navigation to the MICC Maternal Expanded Services screen, if the member is a mother.	N/A
CHANGE	Allows navigation to the MICC Infant Expanded Services screen, if the member is an infant; Allows navigation to the MICC Maternal Expanded Services screen, if the member is a mother.	N/A
DELETE	Allows navigation to the MICC Infant Expanded Services screen, if the member is an infant; Allows navigation to the MICC Maternal Expanded Services screen, if the member is a mother.	RF-S-010 (B)
SUB MENU	Returns to the MICC Main Menu screen, MI-S-100.	N/A
INQUIRY	Allows navigation to the MICC Infant Expanded Services screen, if the member is an infant; Allows navigation to the MICC Maternal Expanded Services screen, if the member is a mother.	N/A
MAIN MENU	Returns to MMIS Main Menu.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8490	CHOOSE A VALID ACTION	Choose a selection from the radio button menu.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8496	CURRENTLY ENROLLED IN AN HMO RECORD CANNOT BE ADDED.	Information message. No action needed.
8492	ENROLLEE ALREADY PRESENT; CANNOT ADD AGAIN	Information message. No action needed.
8519	ENROLLEE HAS NO ASSESSMENT DATA ON FILE TO DELETE	Information message. No action needed.
8518	ENROLLEE HAS REACHED 2 YEARS OF AGE; ENTRY REJECTED	Information message. No action needed.

8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8494	ENROLLEE NOT ELIGIBLE FOR MICC SERVICES	Check the enrollee for MICC eligibility. See the on-line HELP system for instructions.
8491	ENROLLEE NOT ON ELIGIBILITY	Check the Enrollee ID for Medicaid Eligibility.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or cancel the transaction.
8495	ENROLLEE'S BIRTH DATE IS NOT ON RECIPIENT DATABASE	Information message. No action needed.
8493	ENROLLEE'S MICC TYPE NOT FOUND	Information message.
8486	ENTER ACTION AND MEDICAID ID AND CHOOSE ENTER	Enter valid values according to error message specifications.
8487	ENTER ACTION FIELD FOR PROCESSING	Select an Action and choose Enter.
8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8489	ENTER VALID VALUE FOR ENROLLEE ID	Enter a valid Enrollee ID. See the field definitions for formatting/ requirements for this field.
8352	ERROR ACCESSING MICC MASTER FILE	Information message.
15	FUNCTION CHOSEN IS INVALID	Choose another function.
8350	MICC MASTER FILE NOT OPEN	Information message.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).
3. Select the Maternal/Infant Coordination Care Services radio button.

4. Choose Enter.

5. You see the Maternal and Infant Care Coordination Services screen (MI-S-001).

# Screens MI-S-002 MICC Infant Expanded Services - Infant Risk Screen

## General Information

This screen is used to update and inquire about Infant Risk Assessment data. The information displayed on the screen is data originally entered from the DMAS-17 form, Infant Risk Assessment (MI-I-002), by Fiscal Agent authorized personnel. Access by the Provider/ Member Help-line is restricted.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT002VA
MAPSET	MI002VA
TRAN ID	VBM2

SAMPLE	<b>MICC Infant Expanded Services - Infant Risk Screen (MI-S-002)</b>
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MMIS

Screen ID: MI-S-002  
 Trans ID: VBM2  
 Program ID: MIT002VA

**VIRGINIA MEDICAID**  
**MICC INFANT SERVICES**

Member ID: [REDACTED] Sequence Nbr: 01 Action: UPDATE  
 Name: [REDACTED] Race: [REDACTED] Gender: [REDACTED] DOB: [REDACTED]  
 SSN: [REDACTED] FIPS: 770

**Infant Risk Screen**

New Risk: [ ] Update Date : 08/12/2009 A

Medical: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Social: [Y] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] Nutritional: [ ] [ ]

Comments: [ ]

Referral: [ ] [ ]

Provider Signature?: [Y]

Screen Date : 07/28/2009 Provider ID: [REDACTED]

UPDATE DATA AND CHOOSE ENTER.

Enter Update Clear Form Refresh Delete MICC Eligibility Outcome Return Sub Menu

**Field Definitions**

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ID Enrollee Per- manent Iden- tification Number (DE3093)	Messages: 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE. 8409- ENROLLEE NOT ON RECIPIENT ENROLLEE TABLE. 8488- ENTER ENROLLEE ID FOR PROCESSING.	The DMAS-administered iden- tification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (O/P) Enter the Infant MICC identification number about which you wish to inquire. The DMAS-administered iden- tification number that is used to tie all

			claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.
2	SEQUENCE NBR MICC Sequence Number (DE8397)	Edits: Messages: 8513- NO RISK ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER.	This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. INQUIRY (R/U) Enter the number of MICC or BabyCare enrollments on file under this enrollment number on which you wish to inquire.  This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. System Displayed.
3	NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  The name of the individual eligible for DMAS-administered programs. System Displayed.
3	RACE Enrollee Race Code (DE3006)		A code indicating the enrollee's racial origin.  A code indicating the enrollee's racial origin. System Displayed.
4	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  A code indicating the sex of the enrollee. System Displayed.
5	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
6	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Dis-

			played.
7	CITY/COUNTY MMIS Locality Code based on Postal Code (DE5254)		Identifies the provider or enrollee city/county locality.  Identifies the provider or enrollee city/county locality. System Displayed.
8	NEW RISK MICC New Risk Indicator (DE8385)	Edits: 'Y' or 'N'.  Messages: 8094- NEW RISK MUST BE 'Y'. 8095- ENTER 'N' OR SPACE. 8438- TO ADD ANOTHER RISK, ENTER 'Y' ON NEW RISK LEVEL.	Indicates whether or not the assessment is for a new infant case.  Indicates whether or not the assessment is for a new infant case. Valid codes are 'Y' or 'N'. ADD (R/U) Enter the valid code which indicates whether or not the assessment is for a new infant case. UPDATE (R/U) Enter the change to the code which indicates whether or not the assessment is for a new infant case.
9	LAST ACTIVITY Infant Risk Last Update Date (DE8088)		This is the date of the last update to the Infant Risk segment.  This is the date of the last update to the Infant Risk segment. System Displayed.
10	(LAST ACTIVITY CODE)  Infant Risk Last Update Code (DE8089)		This field represents the last type of update performed on the Infant Risk Segment.  This field represents the last type of update performed on the Infant Risk Segment. System Displayed.
11	ACTION (DE0000)	Edits:  Displays whether the screen is being used for INQUIRY, UPDATE, or ADDITION.  Messages:	Displays what the screen is being used for - INQUIRY.  Displays whether the screen is being used for. Values are UPDATE, ADDITION or INQUIRY. System Displayed.
30	1 Medical (Developmentally Delayed) Infant Risk Med-	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.	Reflects whether or not the infant is developmentally delayed in the Medical Risk category.

	<p>ical Condition - Developmentally Delayed (DE8637)</p>	<p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the infant is developmentally delayed in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant is developmentally delayed in the Medical Risk category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant is developmentally delayed in the Medical Risk category.</p>
31	<p>2 (Medical - Genetic Condition) Infant Risk Medical Condition - Genetic (DE8638)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the infant has a genetic condition in the Medical Risk category.  Reflects whether or not the infant has a genetic condition in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has a genetic condition in the Medical Risk category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a genetic condition in the Medical Risk category.</p>
32	<p>3 (Medical - Birth Weight Condition) Infant Risk Medical Condition - Birth Weight (DE8639)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the infant has a birth weight condition in the Medical Risk category.  Reflects whether or not the infant has a birth weight condition in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p>

			<p>ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has a birth weight condition in the Medical Risk category.</p> <p>UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a birth weight condition in the Medical Risk category.</p>
33	<p>4 (Medical - Chronic Condition)</p> <p>Infant Risk Medical Condition - Chronic Illness (DE8640)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has a chronic condition in the Medical Risk category.</p> <p>Reflects whether or not the infant has a chronic condition in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has a chronic condition in the Medical Risk category.</p> <p>UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a chronic condition in the Medical Risk category.</p>
34	<p>5 (Medical - Fetal Alcohol Syndrome)</p> <p>Infant Risk Medical Condition - Fetal Alcohol Syndrome (DE8641)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has fetal alcohol syndrome in the Medical Risk category.</p> <p>Reflects whether or not the infant has fetal alcohol syndrome in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has fetal alcohol syndrome in the Medical Risk category.</p>

			<p>UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a fetal alcohol syndrome in the Medical Risk category.</p>
35	<p>6 (Medical - High Risk) Infant Risk Medical Condition - High Risk (DE8642)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant is at high risk in the Medical Risk category.  Reflects whether or not the infant is at high risk in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant is at high risk in the Medical Risk category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant is at high risk in the Medical Risk category.</p>
36	<p>7 (Medical - Care Condition) Infant Risk Medical Condition - Care Coordination (DE8643)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has a care condition in the Medical Risk category.  Reflects whether or not the infant has a care condition in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has a care condition in this Medical Risk category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a care condition in this Medical Risk category.</p>

37	8 (Medical - Assessment) Infant Risk Medical Condition - Illegal Drug Exposure in Utero (DE8644)	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the infant has an assessment in this Medical Risk category.  Reflects whether or not the infant has an assessment in this Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant had an assessment in this Medical Risk category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant had an assessment in this Medical Risk category.
38	9 (Medical - Failure to Thrive) Infant Risk Medical Condition - Failure to Thrive (DE8645)	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the infant has failure to thrive in the Medical Risk category.  Reflects whether or not the infant has failure to thrive in the Medical Risk category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has failure to thrive in this Medical Risk category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has failure to thrive in this Medical Risk category.
40	1 Social (Language Barrier) Infant Risk Social Condition - Language Barrier (DE8646)	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0',	Reflects whether or not the infant has a language barrier in the Social category.  Reflects whether or not the infant has a language barrier condition in

		'1', OR "9', OR SPACE.	<p>the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which reflects whether or not the infant has a language barrier condition in the Social category.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which reflects whether or not the infant has a language barrier condition in the Social category.</p>
41	2 (Social - Maternal Absence) Infant Risk Social Condition - Maternal Absence (DE8647)	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the infant has a maternal absence in the Social category.</p> <p>Reflects whether or not the infant has a maternal absence in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which reflects whether or not the infant has a maternal absence in the Social category.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which reflects whether or not the infant has a maternal absence in the Social category.</p>
42	3 (Social - Parental Substance Abuse) Infant Risk Social Condition - Paternal Substance Abuse (DE8648)	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the infant has parental substance abuse in the Social category.</p> <p>Reflects whether or not the infant has parental substance abuse in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields</p>

			<p>which reflects whether or not the infant has parental substance abuse in the Social category.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which reflects whether or not the infant has parental substance abuse in the Social category.</p>
43	<p>4 (Social - Physically Handicapped Caregiver)</p> <p>Infant Risk Social Condition - Physically Handicapped Caregiver (DE8649)</p>	<p>Edits:</p> <p>'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has a physically handicapped caregiver in the Social category.</p> <p>Reflects whether or not the infant has a physically handicapped caregiver in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which reflects whether or not the infant has a physically handicapped caregiver in the Social category.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which reflects whether or not the infant has a physically handicapped caregiver in the Social category.</p>
44	<p>5 (Social - Mentally Handicapped Caregiver)</p> <p>Infant Risk Social Condition - Mentally Handicapped Caregiver (DE8650)</p>	<p>Edits:</p> <p>'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has a mentally handicapped caregiver in the Social category.</p> <p>Reflects whether or not the infant has a mentally handicapped caregiver in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which reflects whether or not the infant has a mentally handicapped caregiver in the Social category.</p>

			<p>UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a mentally handicapped caregiver in the Social category.</p>
45	<p>6 (Social - Homeless) Infant Risk Social Condition - Homeless (DE8651)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant is homeless in the Social category.</p> <p>Reflects whether or not the infant is homeless in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant is homeless in the Social category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant is homeless in the Social category.</p>
46	<p>7 (Social - Mother Under 18) Infant Risk Social Condition - Under 18 (DE8652)</p>	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has a mother under 18 in the Social category.</p> <p>Reflects whether or not the infant has a mother under 18 in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has a mother under 18 in the Social category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has a mother under 18 in the Social category.</p>

47	8 (Social - Suspected Abuse) Infant Risk Social Condition - Suspected Abuse (DE8653)	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the infant has suspected abuse in the Social category.  Reflects whether or not the infant has suspected abuse in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has suspected abuse in the Social category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has suspected abuse in the Social category.
48	9 (Social - Non-Compliant) Infant Risk Social Condition - Non Compliant (DE8654)	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the infant has non-complaint in the Social category. Reflects whether or not the infant has non-complaint in the Social category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the codes in the various fields which reflects whether or not the infant has non complaint in the Social category. UPDATE (O/U) Enter the changes to the codes in the various fields which reflects whether or not the infant has non-complaint in the Social category.
50	1 Nutritional (Psychological Counseling) Maternal Outcome Client Needs - Psychological Coun-	Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	This field indicates whether or not the mother's need for psychological counseling of Care Coordination assistance was met.  This field indicates whether or not the

	seling (DE8455)		<p>mother's need for psychological counseling of Care Coordination assistance was met. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which indicates whether or not the mother's need for psychological counseling of Care Coordination assistance was met.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which indicates whether or not the mother's need for psychological counseling of Care Coordination assistance was met.</p>
51	2 (Nutritional - Inadequate Diet) Infant Risk Nutritional Condition - Inadequate Diet (DE8656)	<p>Edits: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the infant has an inadequate diet in this category.</p> <p>Reflects whether or not the infant has an inadequate diet in this category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which reflects whether or not the infant has inadequate diet in this category.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which reflects whether or not the infant has an inadequate diet in this category.</p>
55	COMMENTS Infant Risk Medical Condition Comment (DE8496)	<p>Edits: None.</p>	<p>This field contains comments about medical conditions detected during the Infant Risk Screen.</p> <p>This field contains comments about medical conditions detected during the Infant Risk Screen.</p> <p>ADD (O/U)</p> <p>Enter any comments about medical</p>

			<p>conditions detected during the Infant Risk Screen.</p> <p>UPDATE (O/U)</p> <p>Enter any change to the comments about medical conditions detected during the Infant Risk Screen.</p>
60	<p>1 Referral (Care Coordination)</p> <p>Infant Risk Referral Condition - Care Coordination (DE8657)</p>	<p>Edits:</p> <p>'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has care coordination in this Referral category.</p> <p>Reflects whether or not the infant has care coordination in this Referral category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the infant has care coordination in this Referral category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the infant has care coordination in this Referral category.</p>
61	<p>2 (Referral - No Care Coordination)</p> <p>Infant Risk Referral Condition - No Care Coordination (DE8658)</p>	<p>Edits:</p> <p>'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has no care coordination in this Referral category.</p> <p>Reflects whether or not the infant has no care coordination in this Referral category. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields which reflects whether or not the infant has no care coordination in this Referral category.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the codes in the various fields which reflects whether or not the infant has no care coordination in this Referral category.</p>

75	<p>(COMMENT)</p> <p>Infant Risk Referral Condition - No Care Coordination Description (DE8499)</p>	<p>Edits:</p> <p>None.</p>	<p>This text field indicates the infant's No Care Coordination Description that was determined during the Infant Risk Screen.</p> <p>This text field indicates the infant's No Care Coordination Description that was determined during the Infant Risk Screen.</p> <p>ADD (O/U) Enter the text which applies to the infant's No Care Coordination Description that was determined during the Infant Risk Screen.</p> <p>UPDATE (O/U) Enter the change to the text which applies to the infant's No Care Coordination Description that was determined during the Infant Risk Screen.</p>
88	<p>PROVIDER SIGNATURE?</p> <p>Infant Risk Screen Provider Signature Indicator (DE8411)</p>	<p>Edits:</p> <p>This field must be entered as ' Y' in order for the assessment to be written to the MICC Master File.</p> <p>Messages:</p> <p>8508- MUST BE 'Y'; PROVIDER SIGNATURE REQUIRED.</p>	<p>Indicates whether or not the Infant Risk Screen was signed by the screening provider.</p> <p>Indicates whether or not the Infant Risk Screen was signed by the screening provider. This field must be entered as ' Y' in order for the assessment to be written to the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the Infant Risk Screen was signed by the screening provider.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the Infant Risk Screen was signed by the screening provider.</p>
89	<p>SCREEN DATE</p> <p>Infant Risk Report Date (DE8452)</p>	<p>Edits:</p> <p>Must be a valid date. Risk Screen Date must not be less than 07011989 and not greater than the Current Date. If MICC and Outcome data is present</p>	<p>The date the Infant Risk Report on the recipient was completed.</p> <p>The date the Infant Risk Report on the recipient was completed. Must be a valid date with format of</p>

		<p>on MI-S-003 and MI-S-004, the Risk Screen Date must be less than: 1) Infant MICC Report Date (DE 8458), and 2) Infant Outcome Report Date (DE 8467).</p> <p>Since implementation of the Retroactive Enrollment Process, the Risk Screen Date may be any valid date that is not earlier than the retroactive entry cutoff date from the system parameters table.</p> <p>Messages:</p> <p>8090- LAST SCREENING DATE GREATER THAN THE CURRENT DATE.</p> <p>8091- LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p> <p>8523- HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE.</p> <p>8524- PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE</p> <p>8530 - SCREEN DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY.</p> <p>8531- ENROLLEE IS NOT ELIGIBLE FOR THIS DATE.</p> <p>8530-SCREEN DATE IS MORE THAN 18 MONTHS PAST</p>	<p>MMDDCCYY. Risk Screen Date cannot be less than 07011989 and cannot be greater than the Current Date.</p> <p>If MICC and Outcome data is present on MI-S-003 and MI-S-004, the Risk Screen Date must be less than: 1) Infant MICC Report Date, and 2) Infant Outcome Report Date.</p> <p>ADD (R/U) Enter the date the Infant Risk Report on the recipient was completed.</p> <p>UPDATE (R/U) Enter the change to the date the Infant Risk Report on the recipient was completed.</p>
90	<p>PROVIDER ID</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Must be a valid provider ID on the Provider Master Data Store. The Provider Type (DE 4006) must represent a Physician, Health Clinic, Nurse Midwife, or Case Management Provider,</p> <p>Once the NPI mandate has been imple-</p>	<p>The ID Number of the Medicaid provider who provided the Infant Risk Report on the enrollee.</p> <p>The ID Number of the Medicaid provider who provided the Infant Risk Report on the enrollee. Must be a valid provider ID on the Provider</p>

		<p>mented, a valid NPI will be required. Legacy IDs will no longer be accepted by the process.</p> <p>Messages:</p> <p>The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p> <p>8092- PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP. 8096- ENTER A VALID PROVIDER ID. 8437- PROVIDER ID HAS CHANGED. ENTER 'Y' IN NEW RISK TO CREATE OPEN ASSEMENT. 8502- PROVIDER ID IS INVALID. 8922- NPI REQUIRED.</p>	<p>Master Data Store. The Provider Type must represent a Physician, Health Clinic, Nurse Midwife, or Case Management Provider.</p> <p>ADD (R/U) Enter the ID Number of the Medicaid provider who provided the Infant Risk Report on the enrollee.</p> <p>UPDATE (R/U) Enter the change to the ID Number of the Medicaid provider who provided the Infant Risk Report on the enrollee.</p>
91	(PROVIDER NAME) Provider Name (DE4085)	<p>Edits:</p> <p>Messages:</p>	<p>The name of the provider.</p> <p>The name of the provider. System Displayed.</p>

NAVIGATION		
MICC Infant Expanded Services - Infant Risk Screen (MI-S-002)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CLEAR FORM	Clears the screen of any newly entered data.	N/A
DELETE	Allows the user to delete the risk information for	N/A

	the member displayed on the screen.	
ELIG	Branches to the Eligibility Data screen.	RS-S-015 (B)
ENTER	Processes the entered data	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (B)
MAIN MENU	Returns to the VaMMIS Main System Menu.	RF-S-010 (R)
MICC	Allows navigation to the MICC Infant Expanded Services - Infant MICC Record (Page 2) screen.	MI-S-003 (B)
SCROLL DOWN	Allows the user to page forward and display the next risk information for the member.	N/A
OUTCOME	Allows navigation to the MICC Infant Expanded Services - Infant Outcome Report (Page 3) screen.	MI-S-004 (B)
SCROLL UP	Allows the user to page backward and display the previous risk information for the member.	N/A
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Return to the previous screen.	N/A
UPDATE	Allows the user to update the risk information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8139	AT LEAST ONE CONDITION MUST BE PRESENT	Enter one condition to continue processing.
8499	CHOOSE THE DELETE KEY TO DELETE RECORD	Choose the Delete button to delete the record.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
8528	CONSENT DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.
68	DATA REFRESHED	Information message.
8088	DATE IS INVALID FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	Enter a valid date. See the field definitions for specifications on the date to be entered.
8518	ENROLLEE HAS REACHED 2 YEARS OF AGE; ENTRY REJECTED	Information message. No action needed.

8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or cancel the transaction.
8520	ENROLLEE'S SCREEN DATE IS AFTER 2 YEARS OF AGE	Information message.
8055	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8096	ENTER A VALID PROVIDER ID	Enter a Valid Provider ID. See the field definitions for formatting/ requirements for this field.
8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8095	ENTER 'N' OR SPACE	Enter a value of 'N' or space. See the field definitions for explanation of valid values.
8093	ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE	Enter a value of 'Y', 'N' or 'U', or '1', '0' or '9' or space. See the field definitions for explanation of valid values.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
8452	ERROR WHILE UPDATING LOG FILE	Information message.
8405	FIRST RISK SCREEN DISPLAYED	Information message. No action needed.
139	FUNCTION IS INVALID	Information message.
8090	LAST SCREENING DATE GREATER THAN THE CURRENT DATE	Check Screen Date. See the field definitions for formatting and requirements for this field.
8089	LAST SCREENING DATE LESS THAN 07/01/1989	Date is prior to start of the MICC (Baby Care) Program. Check Screening Date. See the field definitions for formatting and requirements for this field.
8091	LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE	Check Screen Date. See the field definitions for formatting/requirements for this field.
8451	LOG FILE NOT OPEN	Information message.

8350	MICC MASTER FILE NOT OPEN	Information message.
8508	MUST BE 'Y'; PROVIDER SIGNATURE REQUIRED	Enter 'Y' in Provider Signature field. See the field definitions for formatting/requirements for this field.
8094	NEW RISK MUST BE 'Y'	Enter 'Y' in new risk field. See the field definitions for formatting/requirements for this field.
8517	NO ASSESSMENTS TO UPDATE ENTER 'Y' IN NEW RISK TO OPEN AN ENROLLMENT.	Enter 'Y' in New Risk field to open an enrollment. See the field definitions for formatting/requirements for this field.
8402	NO MORE MICC SEGMENTS ON FILE	Information message. No action needed.
8454	NO MORE RISK SCREENS ON FILE	Information message. No action needed.
8403	NO OUTCOME DATA ON FILE	Information message. No action needed.
8409	NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER	Information message. No action needed.
8513	NO RISK ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER	Information message. No action needed.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
8497	PROCEED TO ENTER MICC DATA	Enter the data to be added and choose the Enter button.
8437	PROVIDER ID HAS CHANGED ENTER 'Y' IN NEW RISK TO CREATE OPEN ASSESSMENT.	Verify Provider ID, if correct enter 'Y' in New Risk field. See the field definitions for formatting/requirements for this field.
8502	PROVIDER ID IS INVALID	Information message.
8092	PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP	Enter a valid Provider ID. See the field definitions for valid data/formatting of Provider IDs.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
4120	RECORDS DISPLAYED	Information message. No action needed.
8498	RISK DATA WILL NOT BE SAVED IF MICC DATA IS NOT ENTERED	Information message. No action needed.
8530	SCREEN DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.
8438	TO ADD ANOTHER RISK, ENTER 'Y' ON NEW RISK LEVEL	Enter 'Y' in New Risk field to add another risk. See the field definitions for formatting/requirements for this field.
43	UNIDENTIFIED SECURITY	User not authorized for the transaction.

	ERROR	
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.
8411	VALUE MUST BE 'Y', 'N', OR SPACE	Enter a value within the given parameters.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).
3. Select the Maternal/Infant Coordination Care Services radio button.
4. Choose Enter.
5. You see the Maternal and Infant Care Coordination Services screen (MI-S-001).
6. Select the radio button beside the desired action (Addition, Change or Delete).
7. Enter a valid (infant) Medicaid number.
8. Choose Enter.
9. You see the MICC Infant Expanded Services - Infant Risk screen (MI-S-002).

# Screens MI-S-003 MICC Infant Expanded Services - Infant MICC Record

## General Information

This screen permits authorized DMAS and Fiscal Agent (FA) personnel to update and inquire on Infant Risk Report data. The information displayed on the screen is originally entered by FA staff from the DMAS-51 form, Maternal and Infant Care Coordination Record (MI-I-003). Access by the Provider/Member Help-line is restricted.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT003VA
MAPSET	MI003VA
TRAN ID	VBM3

SAMPLE	<b>MICC Infant Expanded Services - Infant MICC Record (MI-S-003)</b>
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MMIS

Screen ID: MI-S-003  
 Trans ID: VBM3  
 Program ID: MIT003VA

**VIRGINIA MEDICAID**  
**MICC INFANT SERVICES**

Member ID: [REDACTED] Sequence Nbr: 01 Action: UPDATE  
 Name: [REDACTED] Race: [REDACTED] Gender: [REDACTED] DOB: 07/07/2009  
 SSN: [REDACTED] FIPS: 770

Infant MICC Record

Caretaker Data Occupation: 0 Marital Status: [REDACTED] Update  
 Education [REDACTED] Education [REDACTED]  
 Provider Name: [REDACTED] Provider ID: [REDACTED] MICC Begin [REDACTED]  
 Psych/Social: 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 Medical: 38 39 40 41 42 43 44 45 46 47 48  
 Nutritional: 49 50 51 52 53 54 55 56 57 58 59 60 61 62  
 Risk Level: 0 Coordinator Signature/Date?: Y

UPDATE DATA AND CHOOSE ENTER.

- Enter
- Update
- Clear Form
- Refresh
- Delete
- Risk
- Eligibility
- Outcome
- Return
- Sub Menu

Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ID Enrollee Permanent Identification Number (DE3093)	Edits: Messages: 8001- ENROLLEE ID IS INVALID. 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE. 8351- ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE. 8488- ENTER ENROLLEE ID FOR PROCESSING.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (O/P) Enter the new iden- tification number that is to

			<p>be inquired.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.</p>
2	<p>NAME</p> <p>Enrollee Full Name (DE3003)</p>		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
3	<p>SSN</p> <p>Enrollee Social Security Number (SSN) (DE3034)</p>		<p>The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.</p> <p>The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Displayed.</p>
4	<p>CITY/COUNTY</p> <p>MMIS Locality Code based on Postal Code (DE5254)</p>		<p>Identifies the provider or enrollee city/county locality.</p> <p>Identifies the provider or enrollee city/county locality. System Displayed.</p>
5	<p>RACE</p> <p>Enrollee Race Code (DE3006)</p>		<p>A code indicating the enrollee's racial origin.</p> <p>A code indicating the enrollee's racial origin. System Displayed.</p>
6	<p>SEX</p>		<p>A code indicating the sex</p>

	Enrollee Sex Code (DE3007)		of the enrollee.  A code indicating the sex of the enrollee. System Displayed.
7	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
8	LAST ACTIVITY Infant MICC Last Update Date (DE8090)		The last date the Infant MICC Segment was updated.  The last date the Infant MICC Segment was updated. System Displayed.
9	(LAST ACTIVITY CODE) Infant MICC Last Update Code (DE8091)		The last update type performed on the Infant MICC Segment.  The last update type performed on the Infant MICC Segment. System Displayed.
10	CARETAKER DATA: OCCUPATION Maternal MICC Occupation (DE8420)	Edits: Valid values are 0, 1, 2 and 9.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	The occupation of the mother.  The occupation of the mother. Use the On-line HELP system to find valid codes for this field. ADD (R/U) Enter the occupation of the mother. UPDATE (R/U) Enter the change to the occupation of the mother.
11	CARETAKER DATA: MARITAL STATUS Infant MICC Caretaker Marital (DE8461)	Edits: Valid values are: 'M', 'S' and 'U'. If 0, 1 or 9 is entered they will be converted by the system to 'M', 'S' or 'U'.  Messages:	The marital status of the caretaker.  The marital status of the caretaker. Use the On-line HELP system to find valid codes for this field.

			<p>ADD (R/U) Enter the marital status of the caretaker.</p> <p>UPDATE (R/U) Enter the change to the marital status of the caretaker.</p>
12	<p>CARETAKER DATA: EDUCATION LEVEL</p> <p>Infant MICC Caretaker Education (DE8460)</p>	<p>Edits: Valid values are 0, 1, 2 and 9.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>The education level of the caretaker.</p> <p>The education level of the caretaker. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (R/U) Enter the educational level of the caretaker.</p> <p>UPDATE (R/U) Enter the change to the educational level of the caretaker.</p>
13	<p>PRIOR PREGNANCIES: LIVEBIRTHS</p> <p>Maternal MICC Live Births (DE8421)</p>	<p>Edits: Numeric, 0 - 9.</p> <p>Messages: VALID VALUES ARE 0 - 9.</p>	<p>The number of prior pregnancies resulting in live births.</p> <p>The number of prior pregnancies resulting in live births. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of prior pregnancies resulting in live births.</p> <p>UPDATE (O/U) Enter the change to the number of prior pregnancies resulting in live births.</p>
14	<p>PRIOR PREGNANCIES: ABORTIONS</p> <p>Maternal MICC Abortions (DE8422)</p>	<p>Edits: Numeric, 0 thru 9.</p> <p>Messages: ERRORS DETECTED CORRECT HIGHLIGHTED FIELDS.</p>	<p>The number of prior pregnancies that were aborted.</p> <p>The number of prior pregnancies that were abor-</p>

			<p>ted. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of prior pregnancies that were aborted.</p> <p>UPDATE (O/U) Enter the change to the number of prior pregnancies that were aborted.</p>
15	<p>PRIOR PREGNANCIES: MISCARRIAGES</p> <p>Maternal MICC Miscarriages (DE8490)</p>	<p>Edits: Numeric, 0 thru 9.</p> <p>Messages: ERRORS DETECTED CORRECT HIGHLIGHTED FIELDS.</p>	<p>This is the number of pregnancies that resulted in miscarriage.</p> <p>This is the number of pregnancies that resulted in miscarriage. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of pregnancies that resulted in miscarriage.</p> <p>UPDATE (O/U) Enter the change to the number of pregnancies that resulted in miscarriage.</p>
16	<p>PRIOR PREGNANCIES: STILLBIRTHS</p> <p>Maternal MICC Stillbirths (DE8423)</p>	<p>Edits: Numeric, 0 thru 9.</p> <p>Messages: ERRORS DETECTED CORRECT HIGHLIGHTED FIELDS.</p>	<p>The number of pregnancies that resulted in stillbirths.</p> <p>The number of pregnancies that resulted in stillbirths. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of pregnancies that resulted in stillbirths.</p> <p>UPDATE (O/U) Enter the change to the number of pregnancies</p>

			that resulted in stillbirth.
17	EDC Maternal MICC Expected Delivery Date (DE8495)	Edits: A valid date must be entered on Maternal Cases only. If this data is entered on an Infant Case, it will not be written to the MICC Master File. Messages: ERRORS DETECTED CORRECT HIGHLIGHTED FIELDS.	The enrollee's expected delivery date from the Maternal Care Coordination form.  The enrollee's expected delivery date from the Maternal Care Coordination form. A valid date must be entered on Maternal Cases only. Format must be MMDDCCYY. If this data is entered on an Infant Case, it will not be written to the MICC Master File. ADD (R/U) Enter the enrollee's expected delivery date from the Maternal Care Coordination form. UPDATE (R/U) Enter the change to the enrollee's expected delivery date from the Maternal Care Coordination form.
18	WEEKS GESTATION WHEN PRENATAL CARE BEGAN Maternal MICC Weeks Gestation (DE8424)	Edits: Numeric data, 0 - 52, must be entered on Maternal Cases only. If this data is entered on an Infant Case, it will not be written to the MICC Master File. Messages: ERRORS DETECTED CORRECT HIGHLIGHTED FIELDS.	The week of gestation that the mother began prenatal care.  The week of gestation that the mother began prenatal care. Use the On-line HELP system to find valid codes for this field. ADD (R/U) Enter the week of gestation that the mother began prenatal care. UPDATE (R/U) Enter the change to the week of gestation that the mother began prenatal care.

19	<b>PROVIDER NAME</b> Provider Name (DE4085)	Edits:  Messages:	The name of the provider.  The name of the provider. System Generated.
20	<b>PROVIDER NBR</b> National Provider Identifier (DE4700)	Edits: A Provider on the Provider Master Data Store and Provider Type (DE 4006) and represents a Physician, Health Clinic, Nurse Midwife, Case Management Provider or Nurse Practitioner.  Once the NPI mandate has been implemented, a valid NPI will be required. Legacy IDs will no longer be accepted by the process.  Messages: The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.  8092- PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP. 8096- ENTER A VALID PROVIDER ID. 8502- PROVIDER ID IS INVALID. 8922- NPI REQUIRED.	The ID Number of the Medicaid provider who provided the Infant MICC Report on the enrollee.  The ID Number of the Medicaid provider who provided the Infant MICC Report on the enrollee. Must be a valid Provider on the Provider Master Data Store and Provider Type must represent a Physician, Health Clinic, Nurse Midwife, Case Management Provider or Nurse Practitioner. ADD (R/U) Enter the ID number of the Medicaid provider who provided the Infant MICC report on the enrollee. UPDATE (R/U) Enter the change to the ID number of the Medicaid provider who provided the Infant MICC report on the enrollee.
21	<b>MICC BEGIN DATE</b> Infant MICC Report Date (DE8458)	Edits: Valid date. Cannot be less than 07011989 or greater than the Current Date. If the Outcome Report Date (DE 8467) is present on screen, MI-S-004, the MICC Begin Date must be greater than the Outcome Report Date. The retroactive enrollment process permits entry of a Micc Begin Date that is not	The date the Infant MICC Report on the enrollee was completed.  The date the Infant MICC Report on the enrollee was completed. Must be valid date in

		<p>earlier than the retroactive entry cutoff date from the system parameters table. If MICC Begin date is greater than enrollee's Fee-For-Service begin date continue else move FFS Begin date to MICC begin date. The MICC begin Date must not be at a time when the Enrollee is enrolled under the PD 080 Aid Category. The MICC begin Date must be a date that is less than the enrollee's second birthday.</p> <p>Messages:</p> <p>8055 - ENTER A VALID DATE.  8088 - DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.  8089 - VISIT DATE LESS THAN 07/01/1989.  8090 - VISIT DATE GREATER THAN THE CURRENT DATE.  8091 - VISIT DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING  8523 - HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE.  8524 - PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE.  8531 - ENROLLEE IS NOT ELIGIBLE FOR THIS DATE.  8532 - VISIT DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY.  8533 - VISIT DATE IS PAST THE SECOND BIRTHDAY.  8534 - NOT ELIGIBLE FOR THE GIVEN DATE, FFS BEGIN DATE IS MOVED.</p> <p>MICC DATE CANNOT BE &gt;THAN OUTCOME DATE.</p>	<p>MMDDCCYY format. Cannot be less than 07011989 or greater than the Current Date. If the Outcome Report Date is present on screen MI-S-004, the MICC Begin Date must be greater than the Outcome Report Date.</p> <p>ADD (R/U)  Enter the date the Infant MICC report on the enrollee was completed.</p> <p>UPDATE (R/U)  Enter the change to the date the Infant MICC report on the enrollee was completed.</p>
22	22 PSYCH/SOCIAL (CONFLICT) Infant MICC Psychosocial Assessment - Conflict (DE8666)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR	Reflects whether or not the infant has conflict in the psychosocial category.

		SPACE	<p>Reflects whether or not the infant has conflict in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has conflict in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has conflict in the psychosocial category.</p>
23	<p>23 (PSYCH/SOCIAL - POOR SUPPORT) Infant MICC Psychosocial Assessment - Poor Support System (DE8660)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has a poor support system in the psychosocial category.</p> <p>Reflects whether or not the infant has a poor support system in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has a poor support system in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant</p>

			has a poor support system in the psychosocial category.
24	24 (PSYCH/SOCIAL - POOR MOTIVATION) Infant MICC Psychosocial Assessment - Unmotivated Care-giver (DE8681)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the infant has poor motivation in the psychosocial category. Reflects whether or not the infant has poor motivation in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. ADD (O/U) Enter the indicator which reflects whether or not the infant has poor motivation in the psychosocial category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has poor motivation in the psychosocial category.
25	25 (PSYCH/SOCIAL - RELIGIOUS) Infant MICC Psychosocial Assessment - Religious (DE8665)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the infant has religious factors in the psychosocial category. Reflects whether or not the infant has a religious factor in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. ADD (O/U)

			<p>Enter the indicator which reflects whether or not the infant has religious factors in the psychosocial category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has religious factors in the psychosocial category.</p>
26	<p>26 (PSYCH/SOCIAL - HOUSING NEEDS)</p> <p>Infant MICC Psychosocial Assessment - Housing Needs (DE8675)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has housing needs in the psychosocial category.</p> <p>Reflects whether or not the infant has housing needs in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not the infant has housing needs in the psychosocial category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has housing needs in the psychosocial category.</p>
27	<p>27 (PSYCH/SOCIAL - HEALTH NEEDS)</p> <p>Infant MICC Psychosocial Assessment - Health Needs (DE8667)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has health needs in the psychosocial category.</p> <p>Reflects whether or not the infant has health</p>

			<p>needs in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has health needs in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has health needs in the psychosocial category.</p>
28	<p>28 (PSYCH/SOCIAL - FOOD FUNDS) Infant MICC Psychosocial Assessment - Insufficient Funds for Food (DE8668)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has insufficient funds for food in the psychosocial category.</p> <p>Reflects whether or not the infant has insufficient funds for food in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has insufficient funds for food in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has insufficient funds for food in the psychosocial</p>

			category.
29	29 (PSYCH/SOCIAL - TRANSPORTATION NEEDS) Infant MICC Psychosocial Assessment - Transportation Needs (DE8676)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the infant has transportation needs in the psychosocial category.  Reflects whether or not the infant has transportation needs in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. ADD (O/U) Enter the indicator which reflects whether or not the infant has transportation needs in the psychosocial category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has transportation needs in the psychosocial category.
30	30 (PSYCH/SOCIAL - NEGLECT) Infant MICC Psychosocial Assessment - Neglect (DE8679)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the infant has neglect in the psychosocial category.  Reflects whether or not the infant has neglect in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. ADD (O/U) Enter the indicator which

			<p>reflects whether or not the infant has neglect in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has neglect in the psychosocial category.</p>
31	<p>31 (PSYCH/SOCIAL - CHILDCARE NEEDS) Infant MICC Psychosocial Assessment - Care Needs (DE8674)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has child care needs in the psychosocial category.</p> <p>Reflects whether or not the infant has child care needs in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has child care needs in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has child care needs in the psychosocial category.</p>
32	<p>32 (PSYCH/SOCIAL - MULTIPLE MEDICAL PROVIDERS) Infant MICC Psychosocial Assessment - Multiple Providers (DE8691)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has multiple providers in the psychosocial category.</p> <p>Reflects whether or not the infant has multiple providers in the psychosocial category.</p>

			<p>cial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has multiple providers in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has multiple providers in the psychosocial category.</p>
33	<p>33 (PSYCH/SOCIAL - MENTAL RETARDATION)</p> <p>Infant MICC Psychosocial Assessment - Mentally Retarded (DE8673)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant is mentally retarded in the psychosocial category.</p> <p>Reflects whether or not the infant is mentally retarded in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant is mentally retarded in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant is mentally retarded in the psychosocial category.</p>

			egory.
34	<p>34 (PSYCH/SOCIAL - CAREGIVER HANDICAP)</p> <p>Infant MICC Psychosocial Assessment - Caregiver Handicap (DE8690)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant is caregiver handicap in the psychosocial category.</p> <p>Reflects whether or not the infant is caregiver handicap in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant is caregiver handicap in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant is caregiver handicap in the psychosocial category.</p>
35	<p>35 (PSYCH/SOCIAL - MATERNAL ABSENCE)</p> <p>Infant MICC Psychosocial Assessment - Maternal Absence (DE8670)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has maternal absence in the psychosocial category.</p> <p>Reflects whether or not the infant has maternal absence in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which</p>

			<p>reflects whether or not the infant has maternal absence in the psychosocial category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has maternal absence in the psychosocial category.</p>
36	<p>36 (PSYCH/SOCIAL - PROTECTIVE SERVICES)</p> <p>Infant MICC Psychosocial Assessment - Protective Services (DE8671)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has protective services in the psychosocial category.</p> <p>Reflects whether or not the infant has protective services in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not the infant has protective services in the psychosocial category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has protective services in the psychosocial category.</p>
37	<p>37 (PSYCH/SOCIAL - EMOTIONAL BONDING)</p> <p>Infant MICC Psychosocial Assessment - Poor Emotional Bonding (DE8672)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has poor emotional bonding in the psychosocial category.</p> <p>Reflects whether or not the infant has poor emo-</p>

			<p>tional bonding in the psychosocial category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has poor emotional bonding in the psychosocial category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has poor emotional bonding in the psychosocial category.</p>
38	<p>38 MEDICAL (MULTIPLE GESTATIONS) Maternal MICC Medical Assessment - Multiple Gestations (DE8601)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. This data element applies to Maternal Cases only. If this field is data entered on a Infant Case Type, it will not be included on the MICC Master File.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the mother has multiple gestation in the medical category.</p> <p>Reflects whether or not the mother has multiple gestation in the medical category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. This data element applies to Maternal Cases only. If this field is data entered on a Infant Case Type, it will not be included on the MICC Master File.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the mother has multiple gestation in the medical</p>

			category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the mother has multiple gestation in the medical category.
39	39 (MEDICAL - PRIOR LOW BIRTH WEIGHT) Maternal MICC Medical Assessment - Prior Pre-term Birth Weight (DE8602)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. This data element applies to Maternal Cases only. If this field is data entered on a Infant Case Type, it will not be included on the MICC Master File. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the mother has prior pre-term birth weight in the medical category.  Reflects whether or not the mother has prior pre-term birth weight in the medical category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. This data element applies to Maternal Cases only. If this field is data entered on a Infant Case Type, it will not be included on the MICC Master File. ADD (O/U) Enter the indicator which reflects whether or not the mother has prior pre-term birth weight in the medical category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the mother has prior pre-term birth weight in the medical category.
40	40 (MEDICAL - ADVANCED MATERNAL AGE) Maternal MICC Med-	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.	Reflects whether or not the mother has an advanced maternal age

	<p>ical Assessment - Advanced Maternal Age (DE8608)</p>	<p>This data element applies to Maternal Cases only. If this field is data entered on a Infant Case Type, it will not be included on the MICC Master File.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>in the medical category.</p> <p>Reflects whether or not the mother has an advanced maternal age in the medical category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. This data element applies to Maternal Cases only. If this field is data entered on a Infant Case Type, it will not be included on the MICC Master File.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the mother has as advanced maternal age in the medical category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the mother has advanced maternal age in the medical category.</p>
41	<p>41 (MEDICAL - MEDICAL CONDITION) Infant MICC Medical Assessment - Medical Condition (DE8488)</p>	<p>Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>This field indicates the infant's MICC medical condition.</p> <p>This field indicates the infant's MICC medical condition. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which indicates the infant's</p>

			MICC medical condition. UPDATE (O/U) Enter the change to the code which indicates the infant's MICC medical condition.
42	42 (MEDICAL - GENETIC DISORDER) Infant MICC Medical Assessment - Genetic Disorder (DE8684)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the infant has a genetic disorder in the medical category.  Reflects whether or not the infant has a genetic disorder in the medical category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. ADD (O/U) Enter the indicator which reflects whether or not the infant has a genetic disorder in the medical category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a genetic disorder in the medical category.
43	43 (MEDICAL - PREVIOUS FETAL DEATH) Infant MICC Medical Assessment - Infant Morbidity (DE8683)	Edits: Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. 'Y', 'N', 'U', or blank. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE	Reflects whether or not the infant has morbidity in the medical category.  Reflects whether or not the infant has morbidity in the medical category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. 'Y', 'N', 'U',

			<p>or blank.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has morbidity in the medical category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has morbidity in the medical category.</p>
44	<p>44 (MEDICAL - POOR PREGNANCY EXPERIENCE)</p> <p>Infant MICC Medical Assessment - Lack of Risk Knowledge (DE8686)</p>	<p>Edits:</p> <p>Valid values are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has a lack of knowledge in the medical category.</p> <p>Reflects whether or not the infant has a lack of knowledge in the medical category. Valid codes are: 'N', 'Y' or 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has a lack of knowledge in the medical category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a lack of knowledge in the medical category.</p>
45	<p>45 (MEDICAL - CHRONIC ILLNESS)</p> <p>Infant MICC Medical Assessment - Chronic Illness (DE8685)</p>	<p>Edits:</p> <p>This field may be entered on Infant Cases only. Valid values are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File.</p>	<p>Reflects whether or not the infant has a chronic illness in the medical category.</p> <p>Reflects whether or not the infant has a chronic ill-</p>

		<p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>ness in the medical category. This field may be entered on Infant Cases only. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File. ADD (O/U) Enter the indicator which reflects whether or not the infant has a chronic illness in the medical category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a chronic illness in the medical category.</p>
46	<p>46 (MEDICAL - DEVELOPMENT DELAY) Infant MICC Medical Assessment - Developmentally Delayed (DE8689)</p>	<p>Edits: This field may be entered on Infant Cases only. Valid values are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has development delay in the medical category.  Reflects whether or not the infant has development delay in the medical category. This field may be entered on Infant Cases only. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File.</p>

			<p>ADD (O/U) Enter the indicator which reflects whether or not the infant has development delay in the medical category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has development delay in the medical category.</p>
47	<p>47 (MEDICAL - APNEA) Infant MICC Medical Assessment - Apnea (DE8682)</p>	<p>Edits: This field may be entered on Infant Cases only. Valid values are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has Apnea in the medical category.</p> <p>Reflects whether or not the infant has Apnea in the medical category. This field may be entered on Infant Cases only. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has Apnea in the medical category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a Apnea in the medical category.</p>
48	<p>48 (MEDICAL - LOW BIRTH WEIGHT) Infant MICC Medical Assessment - Low</p>	<p>Edits: This field may be entered on Infant Cases only. Valid values are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data ele-</p>	<p>Reflects whether or not the infant has a low birth weight in the medical cat-</p>

	<p>Birth Weight (DE8692)</p>	<p>ment will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>egory.</p> <p>Reflects whether or not the infant has a low birth weight in the medical category. This field may be entered on Infant Cases only. Valid codes are 'N', 'Y', 'U', or blank. If 0, 1 or 9 are data entered, the data element will be converted to 'N' or 'Y' or 'U', respectively. If this field is data entered on Maternal Case it will not be included on the MICC Master File.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has a low birth weight in the medical category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a low birth weight in the medical category.</p>
49	<p>49 NUTRITIONAL (PRE-PREGNANCY OVERWEIGHT) Maternal MICC Nutritional Assessment - Pre-pregnancy Overweight (DE8610)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: Y', 'N', 'U', or blank. If this field is data entered on an Infant Case, it will not be written to the MICC Master File.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the mother has pre-pregnancy overweight in the nutritional category.</p> <p>Reflects whether or not the mother has pre-pregnancy overweight in the nutritional category. This field may be entered on Maternal Cases only. Valid codes are: Y', 'N', 'U', or blank. If this field is data entered on an Infant Case, it will not be written to the MICC Master File.</p> <p>ADD (O/U)</p>

			<p>Enter the indicator which reflects whether or not the mother has pre-pregnancy overweight in the nutritional category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the mother has pre-pregnancy overweight in the nutritional category.</p>
50	<p>50 (NUTRITIONAL - PRE-PREGNANCY UNDERWEIGHT) Maternal MICC Nutritional Assessment - Pre-pregnancy Underweight (DE8611)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. If this field is data entered on an Infant Case, it will not be written to the MICC Master File. Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the mother has pre-pregnancy underweight in the nutritional category.  Reflects whether or not the mother has a pre-pregnancy underweight in the nutritional category. This field may be entered on Maternal Cases only. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. If this field is data entered on an Infant Case, it will not be written to the MICC Master File. ADD (O/U) Enter the indicator which reflects whether or not the mother has pre-pregnancy underweight in the nutritional category. UPDATE (O/U) Enter the change to the indicator which reflects whether or not the mother has pre-pregnancy underweight in the nutritional category.</p>

51	<p>51 (NUTRITIONAL - EXCESSIVE NAUSEA/VOMITING)</p> <p>Maternal MICC Nutritional Assessment - Nausea (DE8616)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the mother has excessive nausea in the nutritional category.</p> <p>Reflects whether or not the mother has excessive nausea in the nutritional category. This field may be entered on Maternal Cases only. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not the mother has excessive nausea in the nutritional category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the mother has excessive nausea in the nutritional category.</p>
52	<p>52 (NUTRITIONAL - EXCESS WEIGHT GAIN)</p> <p>Infant MICC Nutritional Assessment - Excessive Weight Gain (DE8622)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has excessive weight gain in the nutritional category.</p> <p>Reflects whether or not the infant has excessive weight gain in the nutritional category. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not</p>

			<p>the infant has excessive weight gain in the nutritional category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has excessive weight gain in the nutritional category.</p>
53	<p>53 (NUTRITIONAL - INADEQUATE WEIGHT GAIN)</p> <p>Infant MICC Nutritional Assessment - Inadequate Weight Gain (DE8450)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>This field indicates whether or not the infant has an inadequate weight gain for the nutritional category.</p> <p>This field indicates whether or not the infant has an inadequate weight gain for the nutritional category. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not the infant has as inadequate weight gain for the nutritional category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has as inadequate weight gain for the nutritional category.</p>
54	<p>54 (NUTRITIONAL - POOR BASIC DIET)</p> <p>Infant MICC Nutritional Assessment - Poor Diet Information (DE8694)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has poor diet information for the nutritional category.</p> <p>Reflects whether or not the infant has poor diet</p>

			<p>information for the nutritional category. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has poor diet information for the nutritional category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the mother has poor diet information for the nutritional category.</p>
55	<p>55 (NUTRITIONAL - SPECIAL FORMULA) Infant MICC Nutritional Assessment - Special Formula Prescribed (DE8636)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>This field indicates the infant's nutritional assessment for a special formula.</p> <p>This field indicates the infant's nutritional assessment for a special formula. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has nutritional assessments for a special formula.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has nutritional assessments for a special formula.</p>

56	<p>56 (NUTRITIONAL - MEDICAL CONDITION AFFECTS DIET)</p> <p>Infant MICC Nutritional Assessment - Medical Condition (DE8494)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U' , respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>This field indicates whether or not the infant has a MICC nutritional assessment for a medical condition that affects diet.</p> <p>This field indicates whether or not the infant has a MICC nutritional assessment for a medical condition that affects diet. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U' , respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has a MICC nutritional assessment for a medical condition that affects diet.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a MICC nutritional assessment for a medical condition that affects diet.</p>
57	<p>57 (NUTRITIONAL - INADEQUATE COOKING FACILITY)</p> <p>Infant MICC Nutritional Assessment - Inadequate Cooking Facility (DE8492)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U' , respectively.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>This field indicates the infant's MICC nutritional cooking facility assessment.</p> <p>This field indicates the infant's MICC nutritional cooking facility assessment. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U' , respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not</p>

			<p>the infant's MICC nutritional cooking facility is inadequate.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant's MICC nutritional cooking facility is inadequate.</p>
58	<p>58 (NUTRITIONAL - TEENAGE MOTHER)</p> <p>Infant MICC Nutritional Assessment - Teenage Mother (DE8493)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>This field indicates whether or not the infant has a MICC nutritional assessment for a teenage mother.</p> <p>This field indicates whether or not the infant has a MICC nutritional assessment for a teenage mother. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not the infant's MICC nutritional assessment is for a teenage mother.</p> <p>UPDATE (O/U)</p> <p>Enter the changes to the indicator which reflects whether or not the infant's MICC nutritional assessment is for a teenage mother.</p>
59	<p>59 (NUTRITIONAL - ANEMIA)</p> <p>Infant MICC Nutritional Assessment - Anemia (DE8623)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has Anemia in the nutritional category.</p> <p>Reflects whether or not the infant has Anemia in the nutritional category.</p> <p>Valid codes are: 'Y', 'N',</p>

			<p>'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has Anemia in the nutritional category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has Anemia in the nutritional category.</p>
60	<p>60 (NUTRITIONAL - INADEQUATE SUCK) Infant MICC Nutritional Assessment - Inadequate Sucking (DE8698)</p>	<p>Edits: This field may be entered on Infant Cases only. Valid values are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. If this data is entered on a Maternity Case, it will not be written on the MICC Master File.</p> <p>Messages: PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has an inadequate sucking in the nutritional category.</p> <p>Reflects whether or not the infant has an inadequate sucking in the nutritional category. This field may be entered on Infant Cases only. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. If this data is entered on a Maternity Case, it will not be written on the MICC Master File.</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has as inadequate sucking in the nutritional category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has as inadequate sucking in the nutritional category.</p>

61	<p>61 (NUTRITIONAL - BREAST FEEDING PROBLEMS)</p> <p>Infant MICC Nutritional Assessment - Breast Feeding Problems (DE8695)</p>	<p>Edits:</p> <p>This field may be entered on Infant Cases only. Valid values are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. This data element applies to an Infant Case Type (DE 8401 = 'I'. If this data is entered on a Maternity Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has a breast feeding problem in this nutritional category.</p> <p>Reflects whether or not the infant has a breast feeding problem in the nutritional category. This field may be entered on Infant Cases only. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. This data element applies to an Infant Case Type (DE 8401 = 'I'. If this data is entered on a Maternity Case, it will not be written on the MICC Master File.</p> <p>ADD (O/U)</p> <p>Enter the indicator which reflects whether or not the infant has a breast feeding problem in the nutritional category.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the indicator which reflects whether or not the infant has a breast feeding problem in the nutritional category.</p>
62	<p>62 (NUTRITIONAL - POOR USE OF SPECIAL FORMULA)</p> <p>Infant MICC Nutritional Assessment - Poor Use of Formula (DE8696)</p>	<p>Edits:</p> <p>This field may be entered on Infant Cases only. Valid values are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. If this data is entered on a Maternity Case, it will not be written on the MICC Master File.'</p> <p>Messages:</p> <p>PLEASE ENTER: N/Y/U OR 0/1/9 OR SPACE</p>	<p>Reflects whether or not the infant has a poor use of formula in this nutritional category.</p> <p>Reflects whether or not the infant has a poor use of formula in the nutritional category. This field may be entered on Infant Cases only. Valid codes</p>

			<p>are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is entered, the field will be converted to 'N', 'Y' or 'U', respectively. If this data is entered on a Maternity Case, it will not be written on the MICC Master File.'</p> <p>ADD (O/U) Enter the indicator which reflects whether or not the infant has a poor use of formula in the nutritional category.</p> <p>UPDATE (O/U) Enter the change to the indicator which reflects whether or not the infant has a poor use of formula in the nutritional category.</p>
63	<p>63 CURRENT SUBSTANCE ABUSE WEEKLY (ALCOHOL)</p> <p>Maternal MICC Current Alcohol Abuse Weekly Frequency (DE8527)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week alcohol is currently abused by the mother.</p> <p>Indicates the number of times per week alcohol is currently abused by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week alcohol is currently abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week alcohol is currently abused by the mother.</p>
64	<p>63 (CURRENT SUBSTANCE</p>	<p>Edits:</p>	<p>Indicates the number of</p>

	<p>ABUSE DAILY - ALCOHOL)</p> <p>Maternal MICC Current Alcohol Abuse Daily Frequency (DE8536)</p>	<p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>times per day alcohol is currently abused by the mother.</p> <p>Indicates the number of times per day alcohol is currently abused by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day alcohol is currently abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day alcohol is currently abused by the mother.</p>
65	<p>64 (CURRENT SUBSTANCE ABUSE WEEKLY - COCAINE)</p> <p>Maternal MICC Current Cocaine Abuse Weekly Frequency (DE8528)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week cocaine is currently used by the mother.</p> <p>Indicates the number of times per week cocaine is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week cocaine is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week cocaine is currently used by the mother.</p>
66	<p>64 (CURRENT SUBST ABUSE</p>	<p>Edits:</p>	<p>Indicates the number of</p>

	<p>DAILY - COCAINE) Maternal MICC Current Cocaine Abuse Daily Frequency (DE8537)</p>	<p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>times per day cocaine is currently used by the mother.</p> <p>Indicates the number of times per day cocaine is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day cocaine is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day cocaine is currently used by the mother.</p>
67	<p>65 (CURRENT SUBSTANCE ABUSE WEEKLY - NARCOTICS) Maternal MICC Current Narcotics Abuse Weekly Frequency (DE8529)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week narcotics are currently used by the mother.</p> <p>Indicates the number of times per week narcotics are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week narcotics are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week narcotics are currently used by the mother.</p>

68	<p>65 (CURRENT SUBSTANCE ABUSE DAILY - NARCOTICS)</p> <p>Maternal MICC Current Narcotics Abuse Daily Frequency (DE8538)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day narcotics are currently used by the mother.</p> <p>Indicates the number of times per day narcotics are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day narcotics are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day narcotics are currently used by the mother.</p>
69	<p>66 (CURRENT SUBSTANCE ABUSE WEEKLY - MARIJUANA)</p> <p>Maternal MICC Current Marijuana Abuse Weekly Frequency (DE8530)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week marijuana is currently used by the mother.</p> <p>Indicates the number of times per week marijuana is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week marijuana is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week marijuana is currently used by the</p>

			mother.
70	<p>66 (CURRENT SUBSTANCE ABUSE DAILY - MARIJUANA)</p> <p>Maternal MICC Current Marijuana Abuse Daily Frequency (DE8539)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day marijuana is currently used by the mother.</p> <p>Indicates the number of times per day marijuana is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day marijuana is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day marijuana is currently used by the mother.</p>
71	<p>67 (CURRENT SUBSTANCE ABUSE WEEKLY - SEDATIVES)</p> <p>Maternal MICC Current Sedatives Abuse Weekly Frequency (DE8531)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week sedatives are currently used by the mother.</p> <p>Indicates the number of times per week sedatives are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week sedatives are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week sedatives are currently used by the</p>

			mother.
72	<p>67 (CURRENT SUBSTANCE ABUSE DAILY - SEDATIVES)</p> <p>Maternal MICC Current Sedatives Abuse Daily Frequency (DE8540)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day sedatives are currently abused by the mother.</p> <p>Indicates the number of times per day sedatives are currently abused by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day sedatives are currently abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day sedatives are currently abused by the mother.</p>
73	<p>68 (CURRENT SUBSTANCE ABUSE WEEKLY - AMPHETAMINES)</p> <p>Maternal MICC Current Amphetamines Abuse Weekly Frequency (DE8532)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>This is the number of times per week amphetamines are currently used by the mother.</p> <p>This is the number of times per week amphetamines are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week amphetamines are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per</p>

			week amphetamines are currently used by the mother.
74	<p>68 (CURRENT SUBSTANCE ABUSE DAILY - AMPHETAMINES)</p> <p>Maternal MICC Current Amphetamines Abuse Daily Frequency (DE8541)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day amphetamines are currently used by the mother.</p> <p>Indicates the number of times per day amphetamines are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per day amphetamines are currently used by the mother.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day amphetamines are currently used by the mother.</p>
75	<p>69 (CURRENT SUBSTANCE ABUSE WEEKLY- INHALANTS)</p> <p>Maternal MICC Current Inhalants Abuse Weekly Frequency (DE8533)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week inhalants are currently used by the mother.</p> <p>Indicates the number of times per week inhalants are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per week inhalants are currently used by the mother.</p>

			<p>UPDATE (O/U) Enter the change to the number of times per week inhalants are currently used by the mother.</p>
76	<p>69 (CURRENT SUBSTANCE ABUSE DAILY-INHALANTS) Maternal MICC Current Inhalants Abuse Daily Frequency (DE8542)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day inhalants are currently abused by the mother.  Indicates the number of times per day inhalants are currently abused by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day inhalants are currently abused by the mother. UPDATE (O/U) Enter the change to the number of times per day inhalants are currently abused by the mother.</p>
77	<p>70 (CURRENT SUBSTANCE ABUSE WEEKLY-TOBACCO) Maternal MICC Current Tobacco Abuse Weekly Frequency (DE8534)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week tobacco is currently used by the mother.  Indicates the number of times per week tobacco is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week tobacco</p>

			<p>is currently used by the mother.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per week tobacco is currently used by the mother.</p>
78	<p>70 (CURRENT SUBSTANCE ABUSE DAILY-TOBACCO)</p> <p>Maternal MICC Current Tobacco Abuse Daily Frequency (DE8543)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day tobacco is currently used by the mother.</p> <p>Indicates the number of times per day tobacco is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per day tobacco is currently used by the mother.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day tobacco is currently used by the mother.</p>
79	<p>71 (CURRENT SUBSTANCE ABUSE WEEKLY - OTHER)</p> <p>Maternal MICC Current Other Substance Abuse Weekly Frequency (DE8535)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week some other substance is currently used by the mother.</p> <p>Indicates the number of times per week some other substance is currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p>

			<p>Enter the number of times per week some other substance is currently used by the mother.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per week some other substance is currently used by the mother.</p>
80	<p>71 (CURRENT SUBSTANCE ABUSE DAILY - OTHER)</p> <p>Maternal MICC Current Other Substance Abuse Daily Frequency (DE8544)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day other substances are currently used by the mother.</p> <p>Indicates the number of times per day other substances are currently used by the mother. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per day other substances are currently used by the mother.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day other substances are currently used by the mother.</p>
81	<p>72 PRIOR SUBSTANCE ABUSE WEEKLY (ALCOHOL)</p> <p>Maternal MICC Prior Alcohol Abuse Weekly Frequency (DE8554)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week alcohol was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week alcohol was abused by the mother, prior to preg-</p>

			<p>nancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week alcohol was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week alcohol was abused by the mother, prior to pregnancy.</p>
82	<p>72 (PRIOR SUBSTANCE ABUSE DAILY - ALCOHOL)</p> <p>Maternal MICC Prior Alcohol Abuse Daily Frequency (DE8545)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day alcohol was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day alcohol was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day alcohol was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day alcohol was abused by the mother, prior to pregnancy.</p>
83	<p>73 (PRIOR SUBSTANCE ABUSE WEEKLY -</p>	<p>Edits: This field may be entered on Maternal</p>	<p>Indicates the number of</p>

	<p>COCAINE) Maternal MICC Prior Cocaine Abuse Weekly Frequency (DE8555)</p>	<p>Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>times per week cocaine was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week cocaine was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week cocaine was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week cocaine was abused by the mother, prior to pregnancy.</p>
84	<p>73 (PRIOR SUBSTANCE ABUSE DAILY - COCAINE) Maternal MICC Prior Cocaine Abuse Daily Frequency (DE8546)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day cocaine was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day cocaine was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day cocaine was abused by the mother, prior to pregnancy.</p>

			<p>UPDATE (O/U) Enter the change to the number of times per day cocaine was abused by the mother, prior to pregnancy.</p>
85	<p>74 (PRIOR SUBSTANCE ABUSE WEEKLY - NARCOTICS) Maternal MICC Prior Narcotics Abuse Weekly Frequency (DE8556)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week narcotics were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week narcotics were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week narcotics were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week narcotics were abused by the mother, prior to pregnancy.</p>
86	<p>74 (PRIOR SUBSTANCE ABUSE DAILY - NARCOTICS) Maternal MICC Prior Narcotic Abuse Daily Frequency (DE8547)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day narcotics were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day narcotics were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-</p>

			<p>line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day narcotics were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day narcotics were abused by the mother, prior to pregnancy.</p>
87	<p>75 (PRIOR SUBSTANCE ABUSE WEEKLY - MARIJUANA)</p> <p>Maternal MICC Prior Marijuana Abuse Weekly Frequency (DE8557)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written to the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week marijuana was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week marijuana was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week marijuana was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week marijuana was abused by the mother, prior to pregnancy.</p>
88	<p>75 (PRIOR SUBSTANCE ABUSE DAILY - MARIJUANA)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant</p>	<p>Indicates the number of times per day marijuana was abused by the</p>

	<p>Maternal MICC Prior Marijuana Abuse Daily Frequency (DE8548)</p>	<p>Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>mother, prior to pregnancy.</p> <p>Indicates the number of times per day marijuana was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day marijuana was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day marijuana was abused by the mother, prior to pregnancy.</p>
89	<p>76 (PRIOR SUBSTANCE ABUSE WEEKLY - SEDATIVES) Maternal MICC Prior Sedatives Abuse Weekly Frequency (DE8558)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written to the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week sedatives were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week sedatives were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week sedatives were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the</p>

			number of times per week sedatives were abused by the mother, prior to pregnancy.
90	<p>76 (PRIOR SUBSTANCE ABUSE DAILY- SEDATIVES)</p> <p>Maternal MICC Prior Sedatives Abuse Daily Frequency (DE8549)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day sedatives was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day sedatives was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per day sedatives was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day sedatives was abused by the mother, prior to pregnancy.</p>
91	<p>77 (PRIOR SUBSTANCE ABUSE WEEKLY- AMPHETAMINES)</p> <p>Maternal MICC Prior Amphetamines Abuse Weekly Frequency (DE8559)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week amphetamines were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week amphetamines were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p>

			<p>ADD (O/U) Enter the number of times per week amphetamines were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week amphetamines were abused by the mother, prior to pregnancy.</p>
92	<p>77 (PRIOR SUBSTANCE ABUSE DAILY-AMPHETAMINES) Maternal MICC Prior Amphetamines Abuse Daily Frequency (DE8550)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day amphetamines were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day amphetamines were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day amphetamines were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day amphetamines were abused by the mother, prior to pregnancy.</p>
93	<p>78 (PRIOR SUBSTANCE ABUSE WEEKLY - INHALANTS) Maternal MICC Prior Inhalants Abuse</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p>	<p>Indicates the number of times per week inhalants were abused by the mother, prior to pregnancy.</p>

	<p>Weekly Frequency (DE8560)</p>	<p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week inhalants were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week inhalants were abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per week inhalants were abused by the mother, prior to pregnancy.</p>
94	<p>78 (PRIOR SUBSTANCE ABUSE DAILY-INHALANTS) Maternal MICC Prior Inhalants Abuse Daily Frequency (DE8551)</p>	<p>Edits: This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day inhalants were abused by the mother, prior to pregnancy.  Indicates the number of times per day inhalants were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day inhalants were abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per day inhalants were abused by the mother, prior to</p>

			pregnancy.
95	<p>79 (PRIOR SUBSTANCE ABUSE WEEKLY - TOBACCO)</p> <p>Maternal MICC Prior Tobacco Abuse Weekly Frequency (DE8561)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week tobacco was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week tobacco was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week tobacco was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week tobacco was abused by the mother, prior to pregnancy.</p>
96	<p>79 (PRIOR SUBSTANCE ABUSE DAILY- TOBACCO)</p> <p>Maternal MICC Prior Tobacco Abuse Daily Frequency (DE8552)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day tobacco was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day tobacco was abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day tobacco</p>

			<p>was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day tobacco was abused by the mother, prior to pregnancy.</p>
97	<p>80 (PRIOR SUBSTANCE ABUSE WEEKLY - OTHER)</p> <p>Maternal MICC Prior Other Substance Abuse Weekly Frequency (DE8562)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week other substances were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week other substances were abused by the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the Online HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per week other substances were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per week other substances were abused by the mother, prior to pregnancy.</p>
98	<p>80 (PRIOR SUBSTANCE ABUSE DAILY - OTHER)</p> <p>Maternal MICC Prior Other Substance Abuse Daily Frequency (DE8553)</p>	<p>Edits:</p> <p>This field may be entered on Maternal Cases only. Valid values are: 00-99 or blank. If this data is entered on an Infant Case, it will not be written on the MICC Master File.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day other substances were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day other substances were abused by</p>

			<p>the mother, prior to pregnancy. This field may be entered on Maternal Cases only. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day other substances were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day other substances were abused by the mother, prior to pregnancy.</p>
99	<p>CURRENT SUBSTANCE ABUSE WEEKLY (DESCRIPTION)</p> <p>Maternal MICC Current Weekly Substance Abuse Type Description (DE8736)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the description of other substance(s) that are currently abused by the mother on a weekly basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the description of other substance(s) that are currently abused by the mother on a weekly basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>ADD (O/U) Enter the description of other substance(s) that are currently abused by the mother on a weekly basis.</p> <p>UPDATE (O/U) Enter the change to the</p>

			description of other substance(s) that are currently abused by the mother on a weekly basis.
100	<p>CURRENT SUBSTANCE ABUSE DAILY (DESCRIPTION)</p> <p>Maternal MICC Current Daily Substance Abuse Type Description (DE8735)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the description of other substance(s) that are currently abused by the mother on a daily basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the description of other substance(s) that are currently abused by the mother on a daily basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>ADD (O/U) Enter the description of other substance(s) that are currently abused by the mother on a daily basis.</p> <p>UPDATE (O/U) Enter the change to the description of other substance(s) that are currently abused by the mother on a daily basis.</p>
101	<p>PRIOR SUBSTANCE ABUSE WEEKLY (DESCRIPTION)</p> <p>Maternal MICC Prior Weekly Substance Abuse Type Description (DE8738)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the description of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy. This information is entered into the</p>

			<p>MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the description of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>ADD (O/U) Enter the description of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the description of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy.</p>
102	<p>PRIOR SUBSTANCE ABUSE DAILY (DESCRIPTION)</p> <p>Maternal MICC Prior Daily Substance Abuse Type Description (DE8737)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the description of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the description of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy. This information is</p>

			<p>entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p><b>ADD (O/U)</b> Enter the description of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy.</p> <p><b>UPDATE (O/U)</b> Enter the change to the description of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy.</p>
103	<p><b>SIGNIFICANT FINDINGS</b></p> <p>Infant MICC Significant Findings (DE8732)</p>	<p><b>Edits:</b></p> <p>None.</p>	<p>Reflects any significant findings that have been entered on the Infant Care Coordination Record.</p> <p>Reflects any significant findings that have been entered on the Infant Care Coordination Record.</p> <p><b>ADD (O/U)</b> Enter the significant findings that have been entered on the Infant Care Coordination Record.</p> <p><b>UPDATE (O/U)</b> Enter the change to the significant findings that have been entered on the Infant Care Coordination Record.</p>
104	<p><b>RISK LEVEL</b></p> <p>Case Management (MICC) Level of Risk (DE8484)</p>	<p><b>Edits:</b></p> <p>This field is system generated. Valid values are blanks, 0, 1 and 2. HIGH RISK represented by 2, will be indicated if:</p>	<p>Indicates the level of risk whether high, medium or low.</p> <p>Indicates the level of risk whether high, medium or low. System Generated.</p>

		<p>1) Any of the Infant Medical Risk Conditions is equal to 'Y', namely data elements 8637 thru 8645, or;  2) If 10 or more Assessments on this data entry screen is equal to 'Y'.</p> <p>MED RISK represented by 1, will be indicated if:  1) The enrollee's caretaker is under 18, (DE 8652 = 'Y'), or;  2) The enrollee is homeless, (DE 8651 = 'Y'), or;  3) The enrollee's caretaker is retarded, (DE 8650 = 'Y') and any other Assessment on the Risk Screen, MI-S-002, is equal to 'Y', or ;  4) If 5 to 9 Assessments on this data entry screen are equal to 'Y'.</p> <p>Low Risk, represented by 0, will be indicated if any combination of Assessments are equal to 'Y' on the Infant Risk Screen, MI-S-002 and/or this screen .</p>	
105	<p>COORDINATOR SIGNATURE/DATE?  Infant MICC Coordinator Signature Indicator (DE8384)</p>	<p>Edits:  'N' or 'Y'. This field must be equal to 'Y' for this assessment to be added to the MICC Master File. If 1 is entered into this field, it will be converted to 'Y' on the MICC Master File.</p> <p>Messages:  COORDINATOR SIGNATURE MUST BE PRESENT ON CARE CCORDINATION SEGMENT.  MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED.</p>	<p>Reflects whether or not the MICC Coordinator's Signature was present on the Care Coordination Assessment Form.</p> <p>Reflects whether or not the MICC Coordinator's Signature was present on the Care Coordination Assessment Form. The values are 'N' or 'Y'. This field must be equal to 'Y' for this assessment to be added to the MICC Master File. If 1 is entered into this field, it will be converted to 'Y' on the MICC Master File.</p> <p>ADD (R/U)  Enter indicator which reflects whether signature was present.</p> <p>UPDATE (R/U)  Enter change to indicator</p>

			which reflects whether signature was present.
107	ACTION (DE0000)	Edits: Displays whether the screen is being used for INQUIRY, UPDATE, or ADDITION	Displays what the screen is being used for - INQUIRY.  Displays whether the screen is being used for UPDATE, ADDITION or INQUIRY. System Displayed.
108	SEQUENCE NBR MICC Sequence Number (DE8397)	Edits: Messages: 8514- NO MICC ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER. 8409- NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER.	This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. INQUIRY (R/P) Enter the number of MICC or BabyCare enrollments on file under this enrollment number on which you wish to inquire.  This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. System Displayed.

NAVIGATION		<b>MICC Infant Expanded Services - Infant MICC Record (MI-S-003)</b>	
Function (B) or (M)	Action	Branch To (B) or Return To (R)	
SCROLL UP	Allows the user to page backward and display the previous MICC information for the member.	N/A	
CLEAR FORM	Clears the screen of any newly entered data.	N/A	
DELETE	Allows the user to delete update the Infant MICC Report information for the member displayed on the screen.	N/A	
ELIG	Branches to the Eligibility Data screen.	RS-S-015 (B)	

ENTER	Processes the entered data.	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (B)
SCROLL DOWN	Allows the user to page forward and display the next MICC information for the member.	N/A
MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)
OUTCOME	Allows navigation to the MICC Infant Expanded Services Infant Outcome Report Page 3 screen.	MI-S-004 (B)
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Returns to the previous screen.	N/A
RISK	Allows navigation to the MICC Infant Expanded Services Risk Screen Page 1.	MI-S-002 (B)
UPDATE	Allows the user to update the Infant MICC Report information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8440	ADD NEW RISK FIRST AND THEN ADD NEW MICC RECORD	Information message.
8139	AT LEAST ONE CONDITION MUST BE PRESENT	Enter one condition to continue processing.
8499	CHOOSE THE DELETE KEY TO DELETE RECORD	Choose the Delete button to delete the record.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
68	DATA REFRESHED	Information message.
8088	DATE IS INVALID FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	Enter a valid date. See the field definitions for specifications on the date to be entered.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or can-

		cel the transaction.
8055	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8096	ENTER A VALID PROVIDER ID	Enter a Valid Provider ID. See the field definitions for formatting/ requirements for this field.
8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8093	ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE	Enter a value of 'Y', 'N' or 'U', or '1', '0' or '9' or space. See the field definitions for explanation of valid values.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
8425	FIRST MICC SEGMENT DISPLAYED	Information message. No action needed.
139	FUNCTION IS INVALID	Information message.
8090	LAST SCREENING DATE GREATER THAN THE CURRENT DATE	Check Screen Date. See the field definitions for formatting and requirements for this field.
8089	LAST SCREENING DATE LESS THAN 07/01/1989	Date is prior to start of the MICC (Baby Care) Program. Check Screening Date. See the field definitions for formatting and requirements for this field.
8091	LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE	Check Screen Date. See the field definitions for formatting/requirements for this field.
8451	LOG FILE NOT OPEN	Information message.
8350	MICC MASTER FILE NOT OPEN	Information message.
8510	MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED	Enter 'Y' in Coordinator Signature field. See the field definitions for formatting/requirements for this field.
8514	NO MICC ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER	Information message. No action needed.
8426	NO MORE MICC SEGMENTS ON FILE	Information message. No action needed.
8448	NO OPEN ASSESSMENTS ON FILE FOR THIS PROVIDER	Information message. No action needed.
8403	NO OUTCOME DATA ON FILE	Information message. No action needed.
8409	NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER	Information message. No action needed.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.

8534	NOT ELIGIBLE FOR THE GIVEN DATE, FFS BEGIN DATE IS MOVED	Informational message.
8502	PROVIDER ID IS INVALID	Information message.
8092	PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP	Enter a valid Provider ID. See the field definitions for valid data/formatting of Provider IDs.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
4120	RECORDS DISPLAYED	Information message. No action needed.
8498	RISK DATA WILL NOT BE SAVED IF MICC DATA IS NOT ENTERED	Information message. No action needed.
29	TOP OF THE PAGE	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.
8532	VISIT DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).
3. Select the Maternal/Infant Coordination Care Services radio button.
4. Choose Enter.
5. You see the Maternal and Infant Care Coordination Services screen (MI-S-001).
6. Select the radio button beside the desired action (Addition, Change or Delete).
7. Enter a valid (infant) Medicaid number.
8. Choose Enter.
9. You see the MICC Infant Expanded Services - Infant Risk screen (MI-S-002).
10. Choose the MICC button.
11. You see the MICC Maternal Expanded Services - Infant MICC Record screen (MI-S-003).

# Screens MI-S-004 MICC Infant Expanded Services - Infant Outcome Report

## General Information

This screen permits authorized DMAS and Fiscal Agent (FA) personnel to update and inquire on Infant Outcome Report data. The information displayed on the screen is originally entered from the DMAS-52, Infant Outcome Report (MI-I-004) by FA staff. The Provider/Member Help-line may not access this function.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT004VA
MAPSET	MI004VA
TRAN ID	VBM4

SAMPLE	<b>MICC Infant Expanded Services - Infant Outcome Report (MI-S-004)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/vanmmis/New/default?ver=2.0/rparam=PERFOx1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSIONID=yD/rmyI/vv

VA DMAS Prototype Portal

Test Environment | Home | Contact Us | Help | Search |

Virginia Medicaid

MMIS

Screen ID: MI-S-004  
Trans ID: VBM14  
Program ID: MIT004VA

**VIRGINIA MEDICAID  
MICC INFANT EXPANDED SERVICES**

Date: 03/29/2010  
Time: 12:39  
Page: 03

Member ID: [REDACTED] Sequence Nbr: 01 Action: UPDATE  
Name: [REDACTED] Race: [REDACTED] Gender: [REDACTED]  
SSN: [REDACTED] FIPS: 70 DOB: [REDACTED]

**Infant Outcome Report**

Provider #1: [REDACTED] Update Date: [REDACTED]  
ID(S): [REDACTED]

Birthweight LBS: [REDACTED] OZS: [REDACTED] APGAR 1Minute: [REDACTED] 5 Minutes: [REDACTED] Date(s)#1: [REDACTED]  
Reason(s)#1: [REDACTED] Age At Death Months: [REDACTED] Weeks: [REDACTED] Cause: [REDACTED] Closed Date: [REDACTED]  
Total Visits: [REDACTED] Care Began: [REDACTED] Mother Received MICC: [REDACTED]  
Health Status: [REDACTED] Living Situation: [REDACTED] # EPSDT Visits: [REDACTED] WIC: [REDACTED]  
Height Feet: [REDACTED] Inches: [REDACTED] Weight LBS: [REDACTED] OZS: [REDACTED]  
1 2 3 4 5 6 7 8 9 10 11  
Member Needs: [REDACTED]  
Coordinator Signature?: [REDACTED]

UPDATE DATA AND CHOOSE ENTER.

Enter Update Clear Form Refresh Delete MICC Risk Eligibility Return Sub Menu Main Menu

571 (8,11) Local intranet 105%

start Outlook Today - Mic... Host Access Transfor... My Documents Customized Screen S... VA DMAS Prototype P... HodConn:RIC1DW2C... 12:39 PM

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ID Enrollee Permanent Identification Number (DE3093)	Messages: 8001- ENROLLEE ID IS INVALID. 8002- ENTER AN ENROLLEE ID. 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE. 8351- ENROLLEE NUMBER NOT FOUND ON MICC	The DMAS-administered iden- tification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRE (R/P) Enter the next ID number you wish to inquire. The DMAS-administered iden- tification number that is used to tie all

		MASTER FILE.	claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.
2	SEQUENCE NBR MICC Sequence Number (DE8397)	Edits: Messages: 8409- NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER. 8515- NO OUTCOME ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER.	This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. INQUIRY (C/U) Enter the number of MICC or BabyCare enrollments on file under this enrollment number in which you wish to inquire. This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. System Displayed.
3	NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  The name of the individual eligible for DMAS-administered programs. System Displayed.
4	RACE Enrollee Race Code (DE3006)		A code indicating the enrollee's racial origin.  A code indicating the enrollee's racial origin. System Displayed.
5	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  A code indicating the sex of the enrollee. System Displayed.
6	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
7	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Displayed.

8	CITY/COUNTY MMIS Locality Code based on Postal Code (DE5254)		Identifies the provider or enrollee city/-county locality.  Identifies the provider or enrollee city/-county locality. System Displayed.
9	LAST ACTIVITY Infant Outcome Last Update Date (DE8092)		The date of the last update performed on the Infant Outcome Segment.  The date of the last update performed on the Infant Outcome Segment. System Displayed.
10	(LAST ACTIVITY CODE) Infant Outcome Last Update Code (DE8093)		The last type of update performed on the Infant Outcome Segment. The last type update performed on the Infant Outcome Segment. System Displayed.
11	PROVIDER IDS National Provider Identifier (DE4700)	<p>Edits:</p> <p>Valid provider ID on the Provider Master Data Store. The Provider Type field (DE 4006) must represent a Physician, Health Clinic, Nurse Midwife, Nurse Practitioner or Case Management Provider.</p> <p>Once the NPI mandate has been implemented, a valid NPI will be required. Legacy IDs will no longer be accepted by the process.</p> <p>Messages:</p> <p>The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID</p>	<p>The ID Number of the Medicaid provider who provided the Infant Outcome Report on the enrollee.</p> <p>The ID Number of the Medicaid provider who provided the Infant Outcome Report on the enrollee. Valid provider ID on the Provider Master Data Store. The Provider Type field must represent a Physician, Health Clinic, Nurse Midwife, Nurse Practitioner or Case Management Provider.</p> <p>ADD (R/U) Enter the ID number of the Medicaid provider who provided the Infant Outcome report on the enrollee.</p> <p>UPDATE (R/U) Enter the change to the ID number of the Medicaid provider who provided the Infant Outcome report on the enrollee.</p>

		<p>and must be entered and/or displayed on the screen whenever both numbers are present.</p> <p>8502- PROVIDER ID IS INVALID.  8096- ENTER A VALID PROVIDER ID.  8448- NO OPEN ASSESSMENTS ON FILE FOR THIS PROVIDER.  8922- NPI REQUIRED.</p>	
12	(PROVIDER NAME) Provider Name (DE4085)		<p>The name of the provider.</p> <p>The name of the provider. System Displayed.</p>
14	BIRTHWEIGHT Infant Outcome Birth Weight (DE8468)	<p>Edits:  Numeric. The 2 rightmost positions represent ounces and will be valued with 00 thru 16. The 2 leftmost positions represent pounds and will be valued with 00 thru 17.</p> <p>Messages:  pounds : ENTER VALUES - 00 THRU 17  ounces : ENTER VALUES - 00 THRU 16</p>	<p>The birth weight of the infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces.</p> <p>The birth weight of the infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces. The 2 rightmost positions represent ounces and will be valued with 00 thru 16. The 2 leftmost positions represent pounds and will be valued with 00 thru 17.</p> <p>ADD (O/U)  Enter the birth weight pounds and ounces of the infant.</p> <p>UPDATE (O/U)  Enter the change to the birth weight pounds and ounces of the infant.</p>
15	APGAR 1 MINUTE Infant Outcome APGAR 1 Minute (DE8469)	<p>Edits:  Valid values are: 00 thru 10 and 99.</p> <p>Messages:  8379- MUST BE '00' THRU '10' OR '99'.  8378- ENTER APGAR VALUE.</p>	<p>The APGAR 1 Minute score for the infant.</p> <p>The APGAR 1 Minute score for the infant. Use the On-line HELP system to find the valid codes for this field.</p> <p>ADD (R/U)  Enter the APGAR 1 Minute score of the infant.</p> <p>UPDATE (R/U)  Enter the change to the APGAR 1 Minute score of the infant.</p>

16	<p>APGAR 5 MINUTE</p> <p>Infant Outcome APGAR 5 Minute (DE8470)</p>	<p>Edits:</p> <p>Valid values are: 00 thru 10 and 99.</p> <p>Messages:</p> <p>8379- MUST BE '00' THRU '10' OR '99'.</p> <p>8378- ENTER APGAR VALUE.</p>	<p>The APGAR 5 Minute score for the infant.</p> <p>The APGAR 5 Minute score for the infant. Use the On-line HELP system to find the valid codes for this field.</p> <p>ADD (R/U) Enter the APGAR 5 Minute score for the infant.</p> <p>UPDATE (R/U) Enter the change to the APGAR 5 Minute score of the infant.</p>
17	<p>DATE(S) CLOSED</p> <p>Infant Outcome Report Date (DE8467)</p>	<p>Edits:</p> <p>Valid date. Cannot be less than 07011989. Cannot be greater than the Current Date. The Outcome Date cannot be less than the Infant Risk Date (DE 8452). The enrollee must be FFS enrolled at the time that MICC Services are closed.</p> <p>Messages:</p> <p>8511- CLOSE DATE GREATER THAN THE CURRENT DATE.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p> <p>8523- HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE.</p> <p>8524- PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE.</p> <p>8531- ENROLLEE IS NOT ELIGIBLE FOR THIS DATE.</p>	<p>The date the Infant Outcome Report on the recipient was completed.</p> <p>The date the Infant Outcome Report on the recipient was completed. Valid date format is MMDDCCYY. Cannot be less than 07011989. Cannot be greater than the Current Date. The Outcome Date cannot be less than the Infant Risk Date.</p> <p>ADD (R/U) Enter the date the Infant Outcome report on the recipient was completed.</p> <p>UPDATE (R/U) Enter the change to the date the Infant Outcome report on the recipient was completed.</p>
18	<p>REASON(S) #1</p> <p>Infant Outcome Reason (DE8626)</p>	<p>Edits:</p> <p>Valid values are 1, 2, 3, 4, 5, 6, 7, 8, or 9.</p> <p>Messages:</p> <p>8382- VALUE MUST BE, '1' THRU '9'.</p>	<p>This field represents the Infant Outcome Reason.</p> <p>This field represents the Infant Outcome Reason. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (R/U) Enter the code which represents the Infant Outcome Reason.</p> <p>UPDATE (R/U)</p>

			Enter the change to the code which represents the Infant Outcome Reason.
20	TOTAL VISITS Infant Outcome Total Visits (DE8474)	Edits: 00 - 98, 99 Messages: 8383- VALUE MUST BE '00' THRU '99'.	The total number of prenatal visits by the mother during the pregnancy.  The total number of prenatal visits by the mother during the pregnancy. Use On-line Help system to find valid codes for this field. ADD (O/U) Enter the number of prenatal visits by the mother during pregnancy. UPDATE (O/U) Enter the change to the number of prenatal visits by the mother during pregnancy.
21	CARE BEGAN Infant Outcome Care Began (DE8475)	Edits: 00 thru 52, 99 Messages: ENTER VALID VALUE - 00 THRU 52 AND 99	The week of gestation when the mother began receiving prenatal care.  The week of gestation when the mother began receiving prenatal care. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the week(s) of gestation when the mother began receiving prenatal care. UPDATE (O/U) Enter the change to the week(s) of gestation when the mother began receiving prenatal care.
22	AGE AT DEATH Infant Outcome Age at Death (DE8472)	Edits: Numeric. The 2 leftmost positions may be valued with 00 thru 24 and represent months. The 1 rightmost position, representing weeks must be valued with 0 thru 9. Messages: months - ENTER VALID VALUE - 00 THRU 24 weeks - ENTER VALID VALUES - 1 THRU 9	The date of the infant's death. High-order two positions record age in months; low order two positions record number of weeks in last month for age.  The date of the infant's death. High-order two positions record age in months; low order two positions record number of weeks in last month for age. Numeric. The 2 leftmost positions may be valued with 00 thru 24 and represent months. The 2 right-

			<p>most positions, representing weeks must be valued with 00 thru 52.</p> <p>ADD (O/U) Enter the months and week of infant's age at death.</p> <p>UPDATE (O/U) Enter the change to the months and weeks of infant's age at death.</p>
23	<p>CAUSE</p> <p>Infant Outcome Cause of Death (DE8473)</p>	<p>Edits: Valid values are 1 thru 5 and 9.</p> <p>Messages: ENTER VALID VALUES 1/2/3/4/5/9</p>	<p>The cause of the infant's death.</p> <p>The cause of the infant's death. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the code for the cause of the infant's death.</p> <p>UPDATE (O/U) Enter the change to the code for the cause of the infant's death.</p>
24	<p>MOTHER RECEIVED MICC</p> <p>Infant Outcome Mother Received MICC (DE8476)</p>	<p>Edits: Valid values are 'N', 'Y', 'U' or blank. If 0, 1 or 9 is data entered, the editing program will convert this value to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>Indicates if the mother received MICC services during pregnancy.</p> <p>Indicates if the mother received MICC services during pregnancy. Valid codes are 'N', 'Y', 'U' or blank. If 0, 1 or 9 is data entered, the editing program will convert this value to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the valid code which indicates if the mother received MICC services during pregnancy.</p> <p>UPDATE (O/U) Enter the change to the code which indicates if the mother received MICC services during pregnancy.</p>
25	<p>HEALTH STATUS</p> <p>Infant Outcome Health Status (DE8477)</p>	<p>Edits: Valid values are 1 thru 4 and 9.</p> <p>Messages: ENTER VALID VALUES 1/2/3/4 AND 9</p>	<p>Indicates the infant's health status at age two years.</p> <p>Indicates the infant's health status at age two years. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the valid code which indicates the infant's health status at age two</p>

			years. UPDATE (O/U) Enter the change to the code which indicates the infant's health status at age two years.
26	LIVING SITUATION Infant Outcome Living Situation (DE8478)	Edits: Valid values are 1 thru 3 and 9. Messages: ENTER VALID VALUE - 1/2/3/9	Indicates the infant's living situation at age two years.  Indicates the infant's living situation at age two years. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the valid code which indicates the infant's living situation at age two years. UPDATE (O/U) Enter the change to the code which indicates the infant's living situation at age two years.
27	# EPSDT VISITS Infant Outcome EPSDT Visits (DE8479)	Edits: Valid values are 00 thru 99. Messages: 8383- VALUE MUST BE '00' THRU '99'.	The total number of EPSDT visits during the first two years.  The total number of EPSDT visits during the first two years. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the total number of EPSDT visits during the first two years. UPDATE (O/U) Enter the change to the total number of EPSDT visits during the first two years.
28	WIC Infant Outcome Receiving WIC (DE8480)	Edits: Valid values are: 'N', 'Y', or 'U'. If 0, 1 or 9 is data entered, the data element will be converted by the editing program to 'N', 'Y' or 'U', respectively. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	Indicates if the infant is receiving WIC benefits.  Indicates if the infant is receiving WIC benefits. Valid codes are: 'N', 'Y', or 'U'. If 0, 1 or 9 is data entered, the data element will be converted by the editing program to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indicates if the infant is receiving WIC benefits.

			<p>UPDATE (O/U) Enter the change to the code which indicates if the infant is receiving WIC benefits.</p>
29	<p>HEIGHT Infant Outcome Height at Age 2 (DE8481)</p>	<p>Edits: The 2 leftmost positions represent feet and must be 00 thru 04. The 2 rightmost positions represent inches and must be valued with 00 thru 12. Messages: feet : ENTER VALID VALUE - 1/2/3 inches: ENTER VALID VALUE - 00 THRU 12</p>	<p>The height of the infant at the age of two years. High order two positions are feet; low order two positions are inches. The height of the infant at the age of two years. High order two positions are feet; low order two positions are inches. The 2 leftmost positions represent feet and must be 00 thru 04. The 2 rightmost positions represent inches and must be valued with 00 thru 12. ADD (O/U) Enter the height in feet and inches, of the infant at the age of two years. UPDATE (O/U) Enter the change to the height in feet and inches, of the infant at the age of two years.</p>
30	<p>WEIGHT Infant Outcome Weight at Age 2 (DE8482)</p>	<p>Edits: Numeric, the 2 leftmost bytes will be valued with 00 thru 17 and represents pounds. The 2 rightmost bytes will be valued with 00 thru 16 and represents ounces. Messages: pounds: ENTER VALUES - 00 THRU 17 ounces: ENTER VALUES - 00 THRU 16</p>	<p>The weight of the infant at the age of two years. High-order two (2) positions are pounds and low-order two (2) positions are ounces. The weight of the infant at the age of two years. High-order two (2) positions are pounds and low-order two (2) positions are ounces. The 2 leftmost bytes will be valued with 00 thru 17 and represents pounds. The 2 rightmost bytes will be valued with 00 thru 16 and represents ounces. ADD (O/U) Enter the weight in pounds and ounces, of the infant at the age of two years. UPDATE (O/U) Enter the change to the weight in pounds and ounces, of the infant at the age of two years.</p>
31	<p>1 CLIENT NEEDS (CHILD CARE)</p>	<p>Edits:</p>	<p>This field indicates whether or not the</p>

	<p>Infant Outcome Client Needs - Child Care (DE8624)</p>	<p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>client need for child care was met. This field indicates whether or not the client need for child care was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for child care was met.</p> <p>UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for child care was met.</p>
32	<p>2 (CLIENT NEEDS - FOOD STAMPS) Infant Outcome Client Needs - Food Stamps (DE8625)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the client need for food stamps was met.</p> <p>This field indicates whether or not the client need for food stamps was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for food stamps was met.</p> <p>UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for food stamps was met.</p>
33	<p>3 (CLIENT NEEDS - HOUSING) Infant Outcome Client Needs - Housing (DE8627)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the client need for housing was met.</p> <p>This field indicates whether or not the client need for housing was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>ADD (O/U) Enter the codes in the various fields to indicate whether or not the client</p>

			needs for housing was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for housing was met.
34	4 (CLIENT NEEDS - NUTRITION COUNSELING) Infant Outcome Client Needs - Nutrition Counseling (DE8628)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the client need for nutrition counseling was met.  This field indicates whether or not the client need for nutrition counseling was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for nutrition counseling was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for nutrition counseling was met.
35	5 (CLIENT NEEDS - PARENTING EDUCATION) Infant Outcome Client Needs - Parenting Education (DE8629)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the client need for parenting education was met.  This field indicates whether or not the client need for parenting education was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for parenting education was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for parenting edu-

			cation was met.
37	<p>6 (CLIENT NEEDS - HOME HEALTH SERVICES)</p> <p>Infant Outcome Client Needs - Home Health Services (DE8630)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages:</p> <p>8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the client need for home health services was met.</p> <p>This field indicates whether or not the client need for home health services was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields to indicate whether or not the client needs for home health services was met.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the codes in the various fields to indicate whether or not the client needs for home health services was met.</p>
38	<p>7 (CLIENT NEEDS - EMPLOYMENT)</p> <p>Infant Outcome Client Needs - Employment (DE8631)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages:</p> <p>8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the client need for employment was met.</p> <p>This field indicates whether or not the client need for employment was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>ADD (O/U)</p> <p>Enter the codes in the various fields to indicate whether or not the client needs for employment was met.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the codes in the various fields to indicate whether or not the client needs for employment was met.</p>
39	<p>8 (CLIENT NEEDS - COUNSELING)</p> <p>Infant Outcome Client Needs - Counseling (DE8632)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages:</p>	<p>This field indicates whether or not the client need for counseling was met.</p> <p>This field indicates whether or not the client need for counseling was met. Valid codes are: 'Y', 'N', 'U', or blank.</p>

		8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for counseling was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for counseling was met.
40	9 (CLIENT NEEDS - SCHOOL ENROLLMENT) Infant Outcome Client Needs - School Enrollment (DE8633)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the client need for school enrollment was met.  This field indicates whether or not the client need for school enrollment was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for school enrollment was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for school enrollment was met.
41	10 (CLIENT NEEDS - JOB TRAINING) Infant Outcome Client Needs - Job Training (DE8634)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the client need for job training was met.  This field indicates whether or not the client need for job training was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for job training was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or

			not the client needs for job training was met.
42	11 (CLIENT NEEDS - TRANSPORTATION) Infant Outcome Client Needs - Transportation (DE8712)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File.  Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the client need for transportation was met.  This field indicates whether or not the client need for transportation was met. Valid codes are: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered into this field, it will be converted to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the codes in the various fields to indicate whether or not the client needs for transportation was met. UPDATE (O/U) Enter the change to the codes in the various fields to indicate whether or not the client needs for transportation was met.
50	COORDINATOR SIGNATURE? Infant Outcome Coordinator Signature Indicator (DE8389)	Edits: Valid values are: 'Y', 'N', or 'U'. If 0, 1 or 9 are data entered into this field, program processing will convert the data element to 'N', 'Y' or 'U' on the MICC Master File.  Messages: COORDINATOR SIGNATURE MUST BE PRESENT ON THE OUTCOME SEGMENT. 8510- MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED.	This field indicates whether or not the MICC's Coordinator signature was present on the Infant Outcome Report.  This field indicates whether or not the MICC's Coordinator signature was present on the Infant Outcome Report. Valid codes are: 'Y', 'N', or 'U'. If 0, 1 or 9 are data entered into this field, program processing will convert the data element to 'N', 'Y' or 'U' on the MICC Master File. ADD (O/U) Enter the valid code to indicate whether or not the MICC's Coordinator signature was present on the Infant Outcome Report. UPDATE (O/U) Enter the change to the code which indicates whether or not the MICC's Coordinator signature was present on the Infant Outcome Report.
52	ACTION (DE0000)	Edits: Displays whether the screen is	Displays what the screen is being used for - INQUIRY.

	being used for INQUIRY, UPDATE, or ADDITION.	Displays whether the screen is being used for UPDATE, ADDITION or INQUIRY. System Displayed.
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NAVIGATION		
MICC Infant Expanded Services - Infant Outcome Report (MI-S-004)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CLEAR FORM	Clears the screen of any newly entered data.	N/A
DELETE	Allows the user to delete the MICC Infant Expanded Services Infant Outcome Report Page 3 information for the member displayed on the screen.	N/A
ELIG	Branches to the Eligibility Data Screen.	RS-S-015 (B)
ENTER	Processes the entered data.	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (B)
MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)
MICC	Allows navigation to the MICC Infant Expanded Services Risk Screen Infant MICC Record - Page 2.	MI-S-003 (B)
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Returns to the previous screen.	N/A
RISK	Allows navigation to the MICC Infant Expanded Services Risk Screen Page 1.	MI-S-002 (B)
UPDATE	Allows the user to update the MICC Infant Expanded Services Infant Outcome Report Page 3 information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8499	CHOOSE THE DELETE KEY TO DELETE RECORD	Choose the Delete button to delete the record.
8020	CHOOSE UPDATE TO MODIFY	Choose the Update button.

	THIS RECORD	
8511	CLOSE DATE GREATER THAN THE CURRENT DATE	Enter a closed date that falls before the current date. See the field definitions for explanation of valid end and begin dates.
68	DATA REFRESHED	Information message.
8088	DATE IS INVALID FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	Enter a valid date. See the field definitions for specifications on the date to be entered.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or cancel the transaction.
8055	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8096	ENTER A VALID PROVIDER ID	Enter a Valid Provider ID. See the field definitions for formatting/ requirements for this field.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8378	ENTER APGAR VALUE	Enter a valid APGAR value. See the field definitions for formatting/requirements for this field.
8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8389	ENTER VALUE '00' THRU '12'	Enter valid values according to error message specifications.
8388	ENTER VALUE '00' THRU '24'	Enter valid values according to error message specifications.
8387	ENTER VALUE '00' THRU '40'	Enter a value of '00' thru '40'. See the field definitions for explanation of valid values.
8376	ENTER VALUES '00' THRU '16'	Enter a value of '00' thru '16'. See the field definitions for explanation of valid values.
8377	ENTER VALUES '00' THRU '17'	Enter a value of '00' thru '17'. See the field definitions for explanation of valid values.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.

8017	ERROR WHILE UPDATING	Information message.
139	FUNCTION IS INVALID	Information message.
8089	LAST SCREENING DATE LESS THAN 07/01/1989	Date is prior to start of the MICC (Baby Care) Program. Check Screening Date. See the field definitions for formatting and requirements for this field.
8091	LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE	Check Screen Date. See the field definitions for formatting/requirements for this field.
8451	LOG FILE NOT OPEN	Information message.
8350	MICC MASTER FILE NOT OPEN	Information message.
8379	MUST BE '00' THRU '10' OR '99'	Enter a value of '00' thru '10' or '99'. See the field definitions for explanation of valid values.
8510	MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED	Enter 'Y' in Coordinator Signature field. See the field definitions for formatting/requirements for this field.
8448	NO OPEN ASSESSMENTS ON FILE FOR THIS PROVIDER	Information message. No action needed.
8515	NO OUTCOME ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER	Information message. No action needed.
8409	NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER	Information message. No action needed.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
8502	PROVIDER ID IS INVALID	Information message.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.
8383	VALUE MUST BE '00' THRU '99'	Enter a value of '00' thru '99'. See the field definitions for explanation of valid values.
8381	VALUE MUST BE '1', '2', '3', OR '4'	Enter a value within the given parameters.
8384	VALUE MUST BE '1', '2', OR '3'	Enter a value within the given parameters.
8385	VALUE MUST BE 'Y' OR 'N'	Enter a valid value.
8380	VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE	Enter a value of 'Y', 'N' or 'U', or '1', '0' or '9' or space. See the field definitions for explanation of valid values.
8382	VALUE MUST BE, '1' THRU '9'	Enter a numeric value between '1' and '9'. See the field definitions for an explanation of these values.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).
3. Select the Maternal/Infant Coordination Care Services radio button.
4. Choose Enter.
5. You see the Maternal and Infant Care Coordination Services screen (MI-S-001).
6. Select the radio button beside the desired action (Addition, Change or Delete).
7. Enter a valid (infant) Medicaid number.
8. Choose Enter.
9. You see the MICC Infant Expanded Services - Infant Risk screen (MI-S-002).
Note: You can also access this screen from the Infant MICC Record screen (MI-S-003).
1. Choose the Outcome button.
2. You see the MICC Infant Expanded Services - Infant Outcome Report screen (MI-S-004).

# Screens MI-S-005 MICC Maternal Expanded Services - Maternity Risk

## General Information

This screen permits update and inquiry of Maternity Risk Data. The information displayed on the screen is originally entered from the DMAS-16 form, Maternity Risk Assessment (MI-I-001), by Fiscal Agent personnel. This screen is not accessible by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT005VA
MAPSET	MI005VA
TRAN ID	VBM5

SAMPLE	<b>MICC Maternal Expanded Services - Maternity Risk (MI-S-005)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/VAMMIS/VAMMIS/default/ver=2.0/rparam=PERF0x1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSIONID=ENJXK

File Edit View Favorites Tools Help

VA DMAS Prototype Portal

Test Environment | Home | Contact Us | Help | Search |



MMIS

Screen ID: MI-S-005  
Trans ID: VBM15  
Program ID: MIT005VA

**VIRGINIA MEDICAID**  
**MICC MATERNAL EXPANDED SERVICES**

Date: 03/26/2010  
Time: 17:12  
Page: 01

Member ID: [REDACTED] Sequence Number: 01 Action: UPDATE  
Name: [REDACTED] Race: [REDACTED] Gender: [REDACTED] DOB: [REDACTED]  
SSN: [REDACTED] FIPS: [REDACTED]

**Maternity Risk Screen**

New Pregnancy:  EDD: 01202010 Update Date: 08/10/2009

Medical: 1 2 3 4 5 6 7

Substance Abuse: 8 9 10 11 12 13 14 15 16  
 Weekly:          
 Daily:

Social: 1 2 3 4 5 Nutritional: 1 2 3 4

Referral: 1 2 3 4 5 6 7 8

Provider Signature?:  Screen Date: 07312009  
 Provider ID: [REDACTED] Name: [REDACTED]

FIRST RISK SCREEN DISPLAYED.

Enter Update Clear Form Refresh Delete MICC Eligibility Outcome Return Sub Menu Main Menu

495 (7,15) Local intranet 100%

start I... S... S... H... D... d... B... M... F... T... M... V... H... 5:12 PM

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ID Enrollee Permanent Identification Number (DE3093)	Messages: 8001- ENROLLEE ID IS INVALID. 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (O/P) Enter the next ID number on which you wish to

			<p>inquire.</p> <p>The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.</p>
2	<p>SEQUENCE NBR</p> <p>MICC Sequence Number (DE8397)</p>	<p>Edits:</p> <p>Messages:</p> <p>8513- NO RISK ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER.</p>	<p>This field represents the number of MICC or BabyCare enrollments on file under this enrollment number.</p> <p>INQUIRY (C/U)</p> <p>Enter the number of MICC or BabyCare enrollments on file under this enrollment number in which you wish to inquire.</p> <p>This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. System Displayed.</p>
3	<p>NAME</p> <p>Enrollee Full Name (DE3003)</p>		<p>The name of the individual eligible for DMAS-administered programs.</p> <p>The name of the individual eligible for DMAS-administered programs. System Displayed.</p>
4	<p>RACE</p> <p>Enrollee Race Code (DE3006)</p>		<p>A code indicating the enrollee's racial origin.</p> <p>A code indicating the enrollee's racial origin. System Displayed.</p>
5	<p>SEX</p> <p>Enrollee Sex Code (DE3007)</p>		<p>A code indicating the sex of the enrollee.</p> <p>A code indicating the sex of</p>

			the enrollee. System Displayed.
6	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
7	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Displayed.
8	CITY/COUNTY MMIS Locality Code based on Postal Code (DE5254)		Identifies the provider or enrollee city/county locality.  Identifies the provider or enrollee city/county locality. System Displayed.
9	ACTION (DE0000)	Edits: Displays whether the screen is being used for INQUIRY, UPDATE, or ADDITION.	Displays what the screen is being used for - INQUIRY.  Displays whether the screen is being used for UPDATE, ADDITION or INQUIRY. System Displayed.
14	NEW PREGNANCY MICC New Pregnancy Indicator (DE8405)	Edits: 'Y' or 'N'. Messages: 8094- NEW RISK MUST BE 'Y'. 8095- ENTER 'N' OR SPACE.	Indicates whether or not the Risk or Care Coordination Information entered is for a new pregnancy or an existing pregnancy. Indicates whether or not the Risk or Care Coordination Information entered is for a new pregnancy or an existing pregnancy. Use the On-line Help system to find valid codes for the

			<p>field.</p> <p>ADD (R/U) Enter the code which indicates whether or not the Risk or Care Coordination Information entered is for a new pregnancy or an existing pregnancy.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the Risk or Care Coordination Information entered is for a new pregnancy or an existing pregnancy.</p>
15	<p>LAST ACTIVITY</p> <p>Maternal MICC Last Update Date (DE8096)</p>		<p>The date of the last update applied to the Maternal MICC Segment.</p> <p>The date of the last update applied to the Maternal MICC Segment. System Displayed.</p>
16	<p>(LAST ACTIVITY CODE)</p> <p>Maternal MICC Last Update Code (DE8097)</p>		<p>The last type of update performed on the Maternal MICC Segment.</p> <p>The last type of update performed on the Maternal MICC Segment. System Displayed.</p>
18	<p>EXPECTED DELIVERY DATE</p> <p>Maternal Risk Expected Delivery Date (DE8412)</p>	<p>Edits:</p> <p>Must be in format MMDDCCYY or MM/DD/CCYY.</p> <p>Messages:</p> <p>8055- ENTER A VALID DATE.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p> <p>8509- EXPECTED DELIVERY DATE LESS THAN SCREEN DATE.</p>	<p>The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen.</p> <p>The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen. Must be in format MMDDCCYY or MM/DD/CCYY.</p> <p>ADD (R/U)</p>

			<p>Enter the recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen.</p>
20	<p>1 MEDICAL (HYPERTENSION)</p> <p>Maternal Risk Medical Condition - Hypertension (DE8563)</p>	<p>Edits:</p> <p>'Valid values are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has hypertension.</p> <p>Reflects whether or not the mother has hypertension. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has hypertension.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has hypertension.</p>
21	<p>2 (MEDICAL - DIABETES)</p> <p>Maternal Risk Medical Condition - Diabetes (DE8564)</p>	<p>Edits:</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has diabetes.</p> <p>Reflects whether or not the mother has diabetes. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has diabetes.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects</p>

			whether or not the mother has diabetes.
22	3 (MEDICAL - MULTIPLE GESTATION) Maternal Risk Medical Condition - Multiple Gestations (DE8565)	Edits: Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	Reflects whether or not the mother has multiple gestation.  Reflects whether or not the mother has multiple gestation. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother has multiple gestation. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has multiple gestation.
23	4 (MEDICAL - PREVIOUS LOW WEIGHT) Maternal Risk Medical Condition - Previous Low Weight (DE8566)	Edits: Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	Reflects whether or not the mother has previous low weight.  Reflects whether or not the mother has previous low weight. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother has previous low weight. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has previous low weight.
24	5 (MEDICAL - ADVANCED AGE)	Edits: Messages:	Reflects whether or not the mother has advanced age.

	<p>Maternal Risk Medical Condition - Advanced Age (DE8567)</p>	<p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has advanced age. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.  ADD (O/U)  Enter the code which reflects whether or not the mother has advanced age.  UPDATE (O/U)  Enter the change to the code which reflects whether or not the mother has advanced age.</p>
25	<p>6 (MEDICAL - CASE COORDINATION)  Maternal Risk Medical Condition - Case Coordination (DE8568)</p>	<p>Edits:  Messages:  8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has case coordination.  Reflects whether or not the mother has case coordination. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.  ADD (O/U)  Enter the code which reflects whether or not the mother has case coordination.  UPDATE (O/U)  Enter the change to the code which reflects whether or not the mother has case coordination.</p>
26	<p>COMMENTS  Maternal Risk Medical Condition Comment (DE8487)</p>		<p>This field contains comments about medical conditions detected during the Maternity Risk Screen.  This field contains comments about medical conditions detected during the</p>

			<p>Maternity Risk Screen. ADD (O/U) Enter any comments detected about the medical conditions. UPDATE (O/U) Enter the changes to the comments detected about the medical conditions.</p>
27	<p>7 (MEDICAL - PREVIOUS FETAL DEATH) Maternal Risk Medical Condition - Fetal Death (DE8569)</p>	<p>Edits: Messages:</p>	<p>Reflects whether or not the mother had previous fetal death.</p> <p>Reflects whether or not the mother had previous fetal death. 'Valid codes are: 'N', 'Y', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother had previous fetal death. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother had previous fetal death.</p>
30	<p>8 SUBSTANCE ABUSE WEEKLY (ALCOHOL) Maternal Risk Substance Abuse Weekly Frequency - Alcohol (DE8722)</p>	<p>Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week alcohol is abused by the mother.</p> <p>Indicates the number of times per week alcohol is abused by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week alcohol is abused by the mother. UPDATE (O/U) Enter the change to the number of times per week</p>

			alcohol is abused by the mother.
31	<p>9 (SUBSTANCE ABUSE WEEKLY - COCAINE)</p> <p>Maternal Risk Substance Abuse Weekly Frequency - Cocaine (DE8723)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week cocaine is abused by the mother.</p> <p>Indicates the number of times per week cocaine is abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week cocaine is abused by the mother.</p> <p>UPDATE (O/U) Enter the change to number of times per week cocaine is abused by the mother.</p>
32	<p>10 (SUBSTANCE ABUSE WEEKLY - NARCOTICS)</p> <p>Maternal Risk Substance Abuse Weekly Frequency - Narcotics (DE8724)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week narcotics are abused by the mother.</p> <p>Indicates the number of times per week narcotics are abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week narcotics are abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week narcotics are abused by the mother.</p>
33	<p>11 (SUBSTANCE ABUSE WEEKLY - MARIJUANA)</p> <p>Maternal Risk Substance Abuse Weekly Frequency - Marijuana</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week marijuana is abused by the mother.</p> <p>Indicates the number of times per week marijuana</p>

	(DE8725)		<p>is abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week marijuana is abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week marijuana is abused by the mother.</p>
34	<p>12 (SUBSTANCE ABUSE WEEKLY - SEDATIVES)</p> <p>Maternal Risk Substance Abuse Weekly Frequency - Sedatives (DE8726)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week sedatives are abused by the mother.</p> <p>Indicates the number of times per week sedatives are abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week sedatives are abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week sedatives are abused by the mother.</p>
35	<p>13 (SUBSTANCE ABUSE WEEKLY - AMPHETAMINES)</p> <p>Maternal Risk Substance Abuse Weekly Frequency - Amphetamines (DE8727)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week amphetamines are abused by the mother.</p> <p>Indicates the number of times per week amphetamines are abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week amphetamines</p>

			are abused by the mother. UPDATE (O/U) Enter the change to the number of times per week amphetamines are abused by the mother.
36	14 (SUBSTANCE ABUSE WEEKLY - INHALANTS) Maternal Risk Substance Abuse Weekly Frequency - Inhalants (DE8728)	Edits: Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per week inhalants are abused by the mother.  Indicates the number of times per week inhalants are abused by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week inhalants are abused by the mother. UPDATE (O/U) Enter the change to the number of times per week inhalants are abused by the mother.
37	15 (SUBSTANCE ABUSE WEEKLY - TOBACCO) Maternal Risk Substance Abuse Weekly Frequency - Tobacco (DE8729)	Edits: Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per week tobacco is abused by the mother.  Indicates the number of times per week tobacco is abused by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week tobacco is abused by the mother. UPDATE (O/U) Enter the change to the number of times per week tobacco is abused by the mother.
38	16 (SUBSTANCE ABUSE WEEKLY -	Edits: Messages:	Indicates the number of times per week other sub-

	<p>OTHER SUBSTANCES)</p> <p>Maternal Risk Substance Abuse Weekly Frequency - Other (DE8730)</p>	<p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>stances are abused by the mother.</p> <p>Indicates the number of times per week other substances are abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week other substances are abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week other substances are abused by the mother.</p>
39	<p>(MATERNAL SUBSTANCE ABUSE WEEKLY DESCRIPTION)</p> <p>Maternal Risk Weekly Substance Abuse Type Description (DE8734)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the name of other substance (s) that are abused by the mother on a weekly basis. This information is entered into the MICC Master File from the Maternal Risk Form or DMAS-16.</p> <p>This field contains the name of other substance (s) that are abused by the mother on a weekly basis. This information is entered into the MICC Master File from the Maternal Risk Form or DMAS-16.</p> <p>ADD (O/U) Enter the name of other substance(s) that are abused by the mother on a weekly basis.</p> <p>UPDATE (O/U) Enter the change to the name of other substance (s) that are abused by the mother on a weekly basis.</p>
40	<p>8 SUBSTANCE ABUSE DAILY (ALCOHOL)</p>	<p>Edits:</p>	<p>Indicates the number of</p>

	<p>Maternal Risk Substance Abuse Daily Frequency - Alcohol (DE8713)</p>	<p>00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>times per day alcohol is abused by the mother.</p> <p>Indicates the number of times per day alcohol is abused by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per day alcohol is abused by the mother.  UPDATE (O/U)  Enter the change to the number of times per day alcohol is abused by the mother.</p>
41	<p>9 (SUBSTANCE ABUSE DAILY - COCAINE)  Maternal Risk Substance Abuse Daily Frequency - Cocaine (DE8714)</p>	<p>Edits:  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day cocaine is abused by the mother.</p> <p>Indicates the number of times per day cocaine is abused by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per day cocaine is abused by the mother.  UPDATE (O/U)  Enter the change to the number of times per day cocaine is abused by the mother.</p>
42	<p>10 (SUBSTANCE ABUSE DAILY - NARCOTICS)  Maternal Risk Substance Abuse Daily Frequency - Narcotics (DE8715)</p>	<p>Edits:  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day narcotics are abused by the mother.</p> <p>Indicates the number of times per day narcotics are abused by the mother. Use the On-line HELP system to find valid codes for this</p>

			<p>field.</p> <p>ADD (O/U) Enter the number of times per day narcotics are abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day narcotics are abused by the mother.</p>
43	<p>11 (SUBSTANCE ABUSE DAILY - MARIJUANA)</p> <p>Maternal Risk Substance Abuse Daily Frequency - Marijuana (DE8716)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day marijuana is abused by the mother.</p> <p>Indicates the number of times per day marijuana is abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day marijuana is abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day marijuana is abused by the mother.</p>
44	<p>12 (SUBSTANCE ABUSE DAILY - SEDATIVES)</p> <p>Maternal Risk Substance Abuse Daily Frequency - Sedatives (DE8717)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day sedatives are abused by the mother.</p> <p>Indicates the number of times per day sedatives are abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day sedatives are abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day sedatives are abused by</p>

			the mother.
45	13 (SUBSTANCE ABUSE DAILY - AMPHETAMINES) Maternal Risk Substance Abuse Daily Frequency - Amphetamines (DE8718)	Edits: Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day amphetamines are abused by the mother.  Indicates the number of times per day amphetamines are abused by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day amphetamines are abused by the mother. UPDATE (O/U) Enter the change to the number of times per day amphetamines are abused by the mother.
46	14 (SUBSTANCE ABUSE DAILY - INHALANTS) Maternal Risk Substance Abuse Daily Frequency - Inhalants (DE8719)	Edits: Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day inhalants are abused by the mother.  Indicates the number of times per day inhalants are abused by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day inhalants are abused by the mother. UPDATE (O/U) Enter the change to the number of times per day inhalants are abused by the mother.
47	15 (SUBSTANCE ABUSE DAILY - TOBACCO) Maternal Risk Substance Abuse Daily Frequency - Tobacco (DE8720)	Edits: Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day tobacco is abused by the mother.  Indicates the number of times per day tobacco is

			<p>abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day tobacco is abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day tobacco is abused by the mother.</p>
48	<p>16 (SUBSTANCE ABUSE DAILY - OTHER SUBSTANCES)</p> <p>Maternal Risk Substance Abuse Daily Frequency - Other (DE8721)</p>	<p>Edits:</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day other substances are abused by the mother.</p> <p>Indicates the number of times per day other substances are abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day other substances are abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day other substances are abused by the mother.</p>
49	<p>(MATERNAL SUBSTANCE ABUSE DAILY DESCRIPTION)</p> <p>Maternal Risk Daily Substance Abuse Type Description (DE8733)</p>	<p>Edits:</p> <p>Messages:</p>	<p>This field contains the name of other substance (s) that are abused by the mother on a daily basis. This information is entered into the MICC Master File from the Maternal Risk Form or DMAS-16.</p> <p>This field contains the name of other substance (s) that are abused by the mother on a daily basis.</p>

			<p>This information is entered into the MICC Master File from the Maternal Risk Form or DMAS-16.</p> <p>ADD (O/U) Enter the name of other substance(s) that are abused by the mother on a daily basis.</p> <p>UPDATE (O/U) Enter the change to the name of other substance (s) that are abused by the mother on a daily basis.</p>
50	<p>1 SOCIAL (TEENAGER)</p> <p>Maternal Risk Social Condition - Teenager (DE8571)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother is a teenager.</p> <p>Reflects whether or not the mother is a teenager. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code reflecting whether or not the mother is a teenager.</p> <p>UPDATE (O/U) Enter the change to the code reflecting whether or not the mother is a teenager.</p>
51	<p>2 (SOCIAL - NON-COMPLIANT)</p> <p>Maternal Risk Social Condition - Non Compliant (DE8572)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother is non-compliant.</p> <p>Reflects whether or not the mother is non-compliant. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother is non-compliant.</p> <p>UPDATE (O/U) Enter the change to the code which reflects</p>

			whether or not the mother is non-compliant.
52	3 (SOCIAL - MENTAL RETARDATION) Maternal Risk Social Condition - Mental Retardation (DE8573)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	Reflects whether or not the mother has mental retardation.  Reflects whether or not the mother has mental retardation. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother has mental retardation. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has mental retardation.
53	4 (SOCIAL - ABUSED) Maternal Risk Social Condition - Abuse (DE8574)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	Reflects whether or not the mother has been abused.  Reflects whether or not the mother has been abused. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother has been abused. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has been abused.
54	5 (SOCIAL - SHELTER/HOMELESS) Maternal Risk Social Condition - Shelter or Homeless (DE8575)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages:	Reflects whether or not the mother is in a shelter or homeless.  Reflects whether or not the

		8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	mother is in a shelter or homeless. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother is in a shelter or homeless. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother is in a shelter or homeless.
60	1 NUTRITIONAL (WEIGHT CONDITION) Maternal Risk Nutritional Condition - Weight (DE8576)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	Reflects whether or not the mother has a weight condition.  Reflects whether or not the mother has a weight condition. Y, 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which reflects whether or not the mother has a weight condition. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has a weight condition.
61	2 (NUTRITIONAL - DIET MODIFICATION) Maternal Risk Nutritional Condition - Diet Modification (DE8577)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.	Reflects whether or not the mother requires a diet modification.  Reflects whether or not the mother requires a diet modification. Y, 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be

			<p>converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother requires a diet modification.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother required a diet modification.</p>
62	<p>3 (NUTRITIONAL - POOR DIET)</p> <p>Maternal Risk Nutritional Condition - Poor Diet (DE8578)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has a poor diet.</p> <p>Reflects whether or not the mother has a poor diet. Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has a poor diet.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has a poor diet.</p>
63	<p>4 (NUTRITIONAL - TEENAGER)</p> <p>Maternal Risk Nutritional Condition - Teenager (DE8579)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother is a teenager.</p> <p>Reflects whether or not the mother is a teenager. Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother is a teenager.</p> <p>UPDATE (O/U) Enter the change to the code which reflects</p>

			whether or not the mother is a teenager.
70	<p>1 REFERRAL (CARE COORDINATION SERVICES)</p> <p>Maternal Risk Referral - Care Coordination Services (DE8519)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether or not a referral for Care Coordination Services is needed.</p> <p>This field indicates whether or not a referral for Care Coordination Services is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which indicates whether or not a referral for Care Coordination Services is needed.</p> <p>UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for Care Coordination Services is needed.</p>
71	<p>2 (REFERRAL - NUTRITION SERVICES)</p> <p>Maternal Risk Referral - Nutrition Services (DE8520)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether a not a referral for Nutrition Services is needed.</p> <p>This field indicates whether or not a referral for Nutrition Services is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which indicates whether or not a referral for Nutrition Services is needed.</p> <p>UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for Nutrition Services is</p>

72	<p>3 (REFERRAL - HOMEMAKER SERVICES) Maternal Risk Referral - Homemaker Services (DE8521)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>needed. This field indicates whether a not a referral for Home- maker Services is needed. This field indicates whether or not a referral for Home- maker Services is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indic- ates whether or not a refer- ral for Homemaker Services is needed. UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for Homemaker Services is needed.</p>
73	<p>4 (REFERRAL - PARENTING CLASSES) Maternal Risk Referral - Parent Class (DE8522)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether a not a referral for par- enting classes is needed. This field indicates whether or not a referral for par- enting classes is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indic- ates whether or not a refer- ral for parenting classes is needed. UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for parenting classes is needed.</p>

74	<p>5 (REFERRAL - GLUCOSE MONITORING) Maternal Risk Referral - Glucose Monitoring (DE8523)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether a not a referral for Glucose Monitoring is needed.</p> <p>This field indicates whether or not a referral for Gluc- ose Monitoring is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indic- ates whether or not a refer- ral for Glucose Monitoring is needed. UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for Glucose Monitoring is needed.</p>
75	<p>6 (REFERRAL - SMOKING CESSATION) Maternal Risk Referral - Smoking (DE8524)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether a not a referral for Smoking Cessation is needed.</p> <p>This field indicates whether or not a referral for Smoking Cessation is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indic- ates whether or not a refer- ral for Smoking Cessation is needed. UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for Smoking Cessation is needed.</p>

76	<p>7 (REFERRAL - SUBSTANCE ABUSE) Maternal Risk Referral - Substance Abuse (DE8525)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether a not a referral for Substance Abuse is indicated.</p> <p>This field indicates whether or not a referral for Substance Abuse is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which indicates whether or not a referral for Substance Abuse is needed.</p> <p>UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for Substance Abuse is needed.</p>
77	<p>8 (REFERRAL - NO CARE COORDINATION SERVICES) Maternal Risk Referral - No Care Coordination (DE8526)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>This field indicates whether a not a referral for No Care Coordination Services is indicated.</p> <p>This field indicates whether or not a referral for No Care Coordination Services is needed. 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the value will be converted to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which indicates whether or not a referral for No Care Coordination Services is needed.</p> <p>UPDATE (O/U) Enter the change to the code which indicates whether or not a referral for No Care Coordination Services is needed.</p>

79	<p>(RISK REFERRAL CONDITIONS COMMENTS)</p> <p>Maternal Risk Referral Condition Comment (DE8394)</p>	<p>Edits: None.</p>	<p>This field contains any comments about Referral Risk conditions that were present on the Maternal and/or Infant Risk screen.</p> <p>This field contains any comments about Referral Risk conditions that were present on the Maternal and/or Infant Risk screen. ADD (O/U) Enter any comments about Referral Risk conditions that were present on the Maternal and/or Infant Risk screen. UPDATE (O/U) Enter the change to the comments about Referral Risk conditions that were present on the Maternal and/or Infant Risk screen.</p>
93	<p>PROVIDER SIGNATURE?</p> <p>Maternal Risk Screen Provider Signature Indicator (DE8410)</p>	<p>Edits: 'Y' , Must be set to 'Y' in order fro the record to be written to the MICC Master File.</p> <p>Messages: 8508- MUST BE 'Y'; PROVIDER SIGNATURE REQUIRED.</p>	<p>Indicates whether or not the risk screen was signed by the screening provider.</p> <p>Indicates whether or not the risk screen was signed by the screening provider. Valid codes are 'Y' or 'N'. Must be set to 'Y' in order for the record to be written to the MICC Master File. ADD (R/U) Enter the code which indicates whether or not the risk screen was signed by the screening provider. UPDATE (R/U) Enter the change to the code which indicates whether or not the risk screen was signed by the screening provider.</p>

94	<p>SCREEN DATE</p> <p>Maternal Risk Report Date (DE8409)</p>	<p>Edits:</p> <p>Valid date.          Cannot be less than 07011989.          Cannot be greater than the Current Date.          If MICC and Outcome data is present on MI-S-006 and MI-S-007, the Risk Screen Date must be less than: 1) Maternal MICC Report Date (DE 8409), and 2) Maternal Outcome Report Date (DE 8429). With implementation of the retroactive enrollment process, the Risk Screen Date may be any valid date that is not earlier than the retroactive entry cutoff date from the system parameters table. The enrollee must be FFS enrolled at the time of the Risk Screen Date. The enrollee must not be PD 080 enrolled at the time of the MICC Risk Screen.</p> <p>Messages:</p> <p>8055- ENTER A VALID DATE.          8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.          8089- LAST SCREENING DATE LESS THAN 07/01/1989.          8090- LAST SCREENING DATE GREATER THAN THE CURRENT DATE.          8091- LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING.          8523 - PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE.          8524 - HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE.          8530 - SCREEN DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY.          8531 - ENROLLEE IS NOT ELIGIBLE FOR THIS DATE.</p>	<p>The date that the Maternal Risk Report on the recipient was completed.</p> <p>The date that the Maternal Risk Report on the recipient was completed. Must be valid date format, MMDDCCYY. Cannot be less than 07011989 or greater than the Current Date. If MICC and Outcome data is present on MI-S-006 and MI-S-007, the Risk Screen Date must be less than: 1) Maternal MICC Report Date, and 2) Maternal Outcome Report Date.          ADD (R/U)          Enter date that the Maternal Risk Report on the recipient was completed.          UPDATE (R/U)          Enter the change to the date that the Maternal Risk Report on the recipient was completed.</p>
95	<p>PROVIDER ID</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Valid provider ID on the Provider Master Data Store. The provider type (DE 4006) must also represent a Physician, Nurse</p>	<p>The ID Number of the Medicaid provider who provided the Maternal Risk</p>

	<p>Practitioner, Nurse Midwife, Health Clinic or a Case Management Provider.</p> <p>Messages:</p> <p>The Provider's Legacy ID or NPI may be entered into this field initially during the Legacy ID/NPI Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p> <p>8502- PROVIDER ID IS INVALID. 8092- PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP. 8437- PROVIDER ID HAS CHANGED. ENTER 'Y' IN NEW RISK TO CREATE OPEN ASSESSMENT. 8922- NPI REQUIRED.</p>	<p>Report on the enrollee.</p> <p>The ID Number of the Medicaid provider who provided the Maternal Risk Report on the enrollee. ID Number must be valid on the Provider Master Data Store. The provider type must also represent a Physician, Nurse Practitioner, Nurse Midwife, Health Clinic or a Case Management Provider.</p> <p>ADD (R/U) Enter the ID Number of the Medicaid provider who provided the Maternal Risk Report on the enrollee.</p> <p>UPDATE (R/U) Enter the change to the ID Number of the Medicaid provider who provided the Maternal Risk Report on the enrollee.</p>
96	<p>NAME</p> <p>Provider Name (DE4085)</p>	<p>The name of the provider.</p> <p>The name of the provider. System Generated.</p>

NAVIGATION		MICC Maternal Expanded Services - Maternity Risk (MI-S-005)
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CLEAR FORM	Clears the screen of any newly entered data.	N/A
DELETE	Allows the user to delete the risk information for the member displayed on the screen.	N/A
ELIG	Branches to the Eligibility Data Screen.	RS-S-015 (B)
ENTER	Processes the entered data.	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (B)

MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)
MICC	Allows navigation to the MICC Maternal Expanded Services Maternity MICC Record - Page 2 screen.	MI-S-006 (B)
SCROLL DOWN	Allows the user to page forward and display the next risk information for the member.	N/A
OUTCOME	Allows navigation to the MICC Maternal Expanded Services Pregnancy Outcome Report - Page 3 screen.	MI-S-007 (B)
SCROLL UP	Allows the user to page backward and display the previous risk information for the member.	N/A
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Returns to the previous screen.	N/A
UPDATE	Allows the user to update the risk information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8512	ADD RISK SEGMENT BEFORE ADDING MICC SEGMENT	Information message.
8139	AT LEAST ONE CONDITION MUST BE PRESENT	Enter one condition to continue processing.
8499	CHOOSE THE DELETE KEY TO DELETE RECORD	Choose the Delete button to delete the record.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
8528	CONSENT DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.
68	DATA REFRESHED	Information message.
8088	DATE IS INVALID FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	Enter a valid date. See the field definitions for specifications on the date to be entered.
8412	DATE IS INVALID; FORMAT MUST BE MMDDCCYY OR MM/DD/CCYY	Date must be in MMDDCCYY or MM/DD/CCYY format. See the field definitions for specifications on the date to be entered.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN	Check the Enrollee ID for valid formatting and try the

	THE DATABASE	task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or cancel the transaction.
8055	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8096	ENTER A VALID PROVIDER ID	Enter a Valid Provider ID. See the field definitions for formatting/ requirements for this field.
8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8095	ENTER 'N' OR SPACE	Enter a value of 'N' or space. See the field definitions for explanation of valid values.
8093	ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE	Enter a value of 'Y', 'N' or 'U', or '1', '0' or '9' or space. See the field definitions for explanation of valid values.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
8452	ERROR WHILE UPDATING LOG FILE	Information message.
8509	EXPECTED DELIVERY DATE LESS THAN SCREEN DATE	Enter Expected Delivery Date that is not less than Screen Date. See the field definitions for formatting/requirements for this field.
8405	FIRST RISK SCREEN DISPLAYED	Information message. No action needed.
139	FUNCTION IS INVALID	Information message.
8090	LAST SCREENING DATE GREATER THAN THE CURRENT DATE	Check Screen Date. See the field definitions for formatting and requirements for this field.
8089	LAST SCREENING DATE LESS THAN 07/01/1989	Date is prior to start of the MICC (Baby Care) Program. Check Screening Date. See the field definitions for formatting and requirements for this field.
8091	LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE	Check Screen Date. See the field definitions for formatting/requirements for this field.
8451	LOG FILE NOT OPEN	Information message.
8350	MICC MASTER FILE NOT OPEN	Information message.
8503	MUST BE NUMERIC	Data must be only numeric. See the field definitions for

		valid data/formatting this field.
8508	MUST BE 'Y'; PROVIDER SIGNATURE REQUIRED	Enter 'Y' in Provider Signature field. See the field definitions for formatting/requirements for this field.
8094	NEW RISK MUST BE 'Y'	Enter 'Y' in new risk field. See the field definitions for formatting/requirements for this field.
8516	NO ASSESSMENTS TO UPDATE ENTER 'Y' IN NEW PREGNANCY FOR NEW ENROLLMENT.	Information message.
8454	NO MORE RISK SCREENS ON FILE	Information message. No action needed.
8403	NO OUTCOME DATA ON FILE	Information message. No action needed.
8409	NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER	Information message. No action needed.
8513	NO RISK ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER	Information message. No action needed.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
8497	PROCEED TO ENTER MICC DATA	Enter the data to be added and choose the Enter button.
8437	PROVIDER ID HAS CHANGED ENTER 'Y' IN NEW RISK TO CREATE OPEN ASSESSMENT.	Verify Provider ID, if correct enter 'Y' in New Risk field. See the field definitions for formatting/requirements for this field.
8502	PROVIDER ID IS INVALID	Information message.
8092	PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP	Enter a valid Provider ID. See the field definitions for valid data/formatting of Provider IDs.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
4120	RECORDS DISPLAYED	Information message. No action needed.
8498	RISK DATA WILL NOT BE SAVED IF MICC DATA IS NOT ENTERED	Information message. No action needed.
8530	SCREEN DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.
8438	TO ADD ANOTHER RISK, ENTER 'Y' ON NEW RISK LEVEL	Enter 'Y' in New Risk field to add another risk. See the field definitions for formatting/requirements for this field.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.

8411	VALUE MUST BE 'Y', 'N', OR SPACE	Enter a value within the given parameters.
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## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).
3. Select the Maternal/Infant Coordination Care Services radio button.
4. Choose Enter.
5. You see the Maternal and Infant Care Coordination Services screen (MI-S-001).
6. Select the radio button beside the desired action (Addition, Change or Delete).
7. Enter a valid (maternal) Medicaid number.
8. Choose Enter.
9. You see the MICC Maternal Expanded Services - Maternity Risk screen (MI-S-005).

# Screens MI-S-006 MICC Maternal Expanded Services - Maternity MICC Record Screen

## General Information

This screen permits update and inquiry of Maternal Care Coordination data. The information displayed on the screen is data originally entered from the DMAS-50 form, Maternal and Infant Care Coordination Assessment (MI-I-003), by Fiscal Agent personnel. The Provider/Member Help-line will not be allowed access to this function.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT006VA
MAPSET	MI006VA
TRAN ID	VBM6

SAMPLE	<b>MICC Maternal Expanded Services - Maternity MICC Record Screen (MI-S-006)</b>
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**MMIS**

Member	Provider	Reference	Claims	Financial	Service Auth	Automated Mailing	SURS	MARS	EPSDT	MICC	TPL	Assessment	Drugs
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Screen ID: MI-S-006      **VIRGINIA MEDICAID**      Date: 05/01/2010  
 Trans ID: VBM6      **MICC MATERNAL EXPANDED SERVICES**      Time: 11:55  
 Program ID: MIT006VA      Page: 02

Member ID: [REDACTED]      Sequence Number: 01      Action: INQUIRY  
 Name: [REDACTED]      Race: 1      Gender: F      DOB: [REDACTED]  
 SSN: [REDACTED]      FIPS: 015

**Maternity MICC Record**

Occupation: 0	Marital Status: 1	Education Level: 0	Update Date: 08/10/2009
Prior Pregnancies: Livebirths: 00	Abortions: 0	Miscarriages: 0	Stillbirths: 0
EDD: 01/20/2010		Weeks Gestation When Parental Care Began: 15	MICC Begin Date: 07/31/2009
Provider Name: [REDACTED]	Provider ID: [REDACTED]		
Psych/Social: 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37		Medical: 38 39 40 41 42 43 44 45 46 47 48	
N N N N N N N N N N Y N N		N N N N N N N	
Nutritional: 49 50 51 52 53 54 55 56 57 58 59 60 61 62			
N N N N N Y N N N N N			
Current Substance Abuse: 63 64 65 66 67 68 69 70 71			
Weekly:			
Daily:			
Prior Substance Abuse: 72 73 74 75 76 77 78 79 80			
Weekly:			
Daily:			
Risk Level: 0	Coordinator Signature/Date: Y		

RECORDS DISPLAYED. Scroll Up | Scroll Down

Enter	Update	Clear Form	Refresh	Delete	Risk	Eligibility	Outcome	Return	Sub Menu	Main Menu
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**Field Definitions**

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ID Enrollee Permanent Identification Number (DE3093)	Messages: 8001- ENROLLEE ID IS INVALID. 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE. 8351- ENROLLEE NUMBER NOT FOUND ON MICC	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (O/P) Enter the next ID number on which you wish to inquire.  The DMAS-administered identification

		MASTER FILE. 8488- ENTER ENROLLEE ID FOR PROCESSING.	number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.
2	NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  The name of the individual eligible for DMAS-administered programs. System Displayed.
3	RACE Enrollee Race Code (DE3006)		A code indicating the enrollee's racial origin.  A code indicating the enrollee's racial origin. System Displayed.
4	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  A code indicating the sex of the enrollee. System Displayed.
5	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
6	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Displayed.
7	CITY/COUNTY (CODE) MMIS Locality Code based on Postal Code (DE5254)	Edits: Messages:	Identifies the provider or enrollee city/-county locality.  Identifies the provider or enrollee city/-county locality. System Displayed.
8	LAST ACTIVITY Maternal MICC Last Update Date (DE8096)		The date of the last update applied to the Maternal MICC Segment.  The date of the last update applied to the Maternal MICC Segment. System Displayed.
9	(LAST ACTIVITY CODE)		The last type of update performed on the Maternal MICC Segment.

	Maternal MICC Last Update Code (DE8097)		The last type of update performed on the Maternal MICC Segment. System Displayed.
10	OCCUPATION Maternal MICC Occupation (DE8420)	Edits: Valid values are: 0, 1, 2 or 9. Messages: 8506- ENTER VALUE '0', '1', '2', OR '9'.	The occupation of the mother.  The occupation of the mother. Use the On-line HELP system to find valid codes for this field. ADD (R/U) Enter the code for the occupation of the mother. UPDATE (R/U) Enter the change to the code for the occupation of the mother.
11	MARITAL STATUS Maternal MICC Marital Status (DE8418)	Edits: 'S', 'M', or 'U'. If 0, 1 or 9 is data entered, the processing program will convert the values to: 'M' or 'S' or 'U'. Messages: 8505- ENTER VALUE; MUST BE 'U', 'S', 'M', OR '0', '1', '9'.	The marital status of the recipient.  The marital status of the recipient. Use the On-line HELP system to find valid codes for this field. ADD (R/U) Enter the code for the marital status. UPDATE (R/U) Enter the change to the code for the marital status.
12	EDUCATION LEVEL Maternal MICC Education Level (DE8419)	Edits: Valid values are: 0, 1, 2 or 9. Messages: 8504- ENTER VALUE '0', '1', '2', OR '9'.	The education level of the mother.  The education level of the mother. Use the On-line HELP system to find valid codes for this field. ADD (R/U) Enter the code for the educational level of the mother. UPDATE (R/U) Enter the change to the code for the educational level of the mother.
13	LIVEBIRTHS Maternal MICC Live Births (DE8421)	Edits: 00 thru 98, 99; Messages: 8503- MUST BE NUMERIC.	The number of prior pregnancies resulting in live births.  The number of prior pregnancies resulting in live births. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of prior pregnancies resulting in live births.

			<p>UPDATE (O/U) Enter the change to the number of prior pregnancies resulting in live births.</p>
14	<p>ABORTIONS Maternal MICC Abortions (DE8422)</p>	<p>Edits: 00 thru 98, 99; Messages: 8503- MUST BE NUMERIC.</p>	<p>The number of prior pregnancies that were aborted.</p> <p>The number of prior pregnancies that were aborted. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of prior pregnancies that were aborted. UPDATE (O/U) Enter the change to the number of prior pregnancies that were aborted.</p>
15	<p>MISCARRIAGES Maternal MICC Miscarriages (DE8490)</p>	<p>Edits: 0 - 8 9 Messages: 8503- MUST BE NUMERIC.</p>	<p>This is the number of pregnancies that resulted in miscarriage.</p> <p>This is the number of pregnancies that resulted in miscarriage. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of pregnancies that resulted in miscarriage. UPDATE (O/U) Enter the changes to the number of pregnancies that resulted in miscarriage.</p>
16	<p>STILLBIRTHS Maternal MICC Stillbirths (DE8423)</p>	<p>Edits: 0 - 8 9 Messages: 8503- MUST BE NUMERIC.</p>	<p>The number of pregnancies that resulted in stillbirths.</p> <p>The number of pregnancies that resulted in stillbirths. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of pregnancies that resulted in stillbirths. UPDATE (O/U) Enter the change to the number of pregnancies that resulted in stillbirths.</p>
17	<p>EDC Maternal MICC Expected Delivery Date (DE8495)</p>	<p>Edits: Valid date format of MMDDCCYY or MM/DD/CCYY Messages:</p>	<p>The enrollee's expected delivery date from the Maternal Care Coordination form.</p> <p>The enrollee's expected delivery date</p>

		<p>8055- ENTER A VALID DATE.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p>	<p>from the Maternal Care Coordination form. Must be valid date format of MMDDCCYY or MM/DD/CCYY.</p> <p>ADD (R/U)</p> <p>Enter the enrollee's expected delivery date from the Maternal Care Coordination form.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the enrollee's expected delivery date from the Maternal Care Coordination form.</p>
18	<p>WEEKS GESTATION WHEN PRENATAL CARE BEGAN</p> <p>Maternal MICC Weeks Gestation (DE8424)</p>	<p>Edits:</p> <p>Must be value 00 thru 40.</p> <p>Messages:</p> <p>8507- ENTER VALUE '00' THRU '40'.</p>	<p>The week of gestation that the mother began prenatal care.</p> <p>The week of gestation that the mother began prenatal care. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (R/U)</p> <p>Enter the week of gestation that the mother began prenatal care.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the week of gestation that the mother began prenatal care.</p>
19	<p>PROVIDER NAME</p> <p>Provider Name (DE4085)</p>	<p>Edits:</p> <p>Messages:</p>	<p>The name of the provider.</p> <p>The name of the provider. System Displayed.</p>
20	<p>PROVIDER NBR.</p> <p>National Provider Identifier (DE4700)</p>	<p>Edits:</p> <p>Valid provider ID on the Provider Database. Provider Type (DE 4006) and represents a Physician, Case Management Provider, Nurse Midwife, Nurse Practitioner or a Health Clinic.</p> <p>Once the NPI mandate has been implemented, a valid NPI will be required. Legacy IDs will no longer be accepted by the process.</p> <p>Messages:</p>	<p>The ID Number of the Medicaid provider who provided the Maternal MICC Report on the enrollee.</p> <p>The ID Number of the Medicaid provider who provided the Maternal MICC Report on the enrollee. Valid provider ID on the Provider Master Data Store. Provider Type must represent a Physician, Case Management Provider, Nurse Midwife, Nurse Practitioner or a Health Clinic.</p> <p>ADD (R/U)</p> <p>Enter the ID Number of the Medicaid provider who provided the Maternal MICC Report on the enrollee.</p> <p>UPDATE (R/U)</p>

		<p>The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p> <p>8092- PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP.  8096- ENTER A VALID PROVIDER ID.  8502- PROVIDER ID IS INVALID.  8922- NPI REQUIRED.</p>	<p>Enter the change to the ID Number of the Medicaid provider who provided the Maternal MICC Report on the enrollee.</p>
21	<p>MICC BEGIN DATE  Maternal MICC Report Date (DE8417)</p>	<p>Edits:  Valid date.  Cannot be less than 07011989.  Cannot be greater than the Current Date.  If the Outcome Report Date (DE 8429) is present on screen, MI-S-007, the MICC Visit Date must be less than the Outcome Report Date.  With implementation of retroactive enrollment, the visit date may not be earlier than the retroactive entry cutoff date from the system parameters table. The enrollee must be FFS enrolled at the time of the Visit Date. The</p>	<p>The date the Maternal MICC Report on the recipient was completed.</p> <p>The date the Maternal MICC Report on the recipient was completed. Must be valid date format MMDDCCYY. Date cannot be less than 07011989 or greater than the Current Date.  If the Outcome Report Date is present on screen, MI-S-007, the MICC Visit Date must be greater than the Outcome Report Date.  ADD (R/U)  Enter the date the Maternal MICC Report on the recipient was completed.  UPDATE (R/U)  Enter the change to the date the Maternal MICC Report on the recipient was completed.</p>

		<p>enrollee should not be PD 080 enrolled.</p> <p>Messages:</p> <p>8055- ENTER A VALID DATE.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p> <p>8091- LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE.</p> <p>8523- HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE.</p> <p>8524- PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE.</p> <p>8531- ENROLLEE IS NOT ELIGIBLE FOR THIS DATE.</p> <p>8532- VISIT DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY.</p>	
22	<p>22 PSYCH/SOCIAL (CONFLICT)</p> <p>Maternal MICC Psychosocial Assessment - Conflict (DE8587)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has a conflict in the home.</p> <p>Reflects whether or not the mother has a conflict in the home. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has a conflict in the home.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has a conflict in the home.</p>
23	<p>23 (PSYCH/SOCIAL - POOR SUPPORT)</p> <p>Maternal MICC Psychosocial Assessment - Poor Support</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p>	<p>Reflects whether or not the mother has a poor support system.</p> <p>Reflects whether or not the mother has a poor support system. Valid codes are</p>

	System (DE8581)	<p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has a poor support system.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has a poor support system.</p>
24	<p>24 (PSYCH/SOCIAL - POOR MOTIVATION)</p> <p>Maternal MICC Psychosocial Assessment - Poor Motivation (DE8592)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother is poorly motivated.</p> <p>Reflects whether or not the mother is poorly motivated. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother is poorly motivated.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother is poorly motivated.</p>
25	<p>25 (PSYCH/SOCIAL - RELIGIOUS)</p> <p>Maternal MICC Psychosocial Assessment - Religious (DE8586)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has religious factors affecting pregnancy.</p> <p>Reflects whether or not the mother has religious factors affecting pregnancy. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has religious factors affecting pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has religious factors affecting pregnancy.</p>
26	<p>26 (PSYCH/SOCIAL - HOUSING NEEDS)</p> <p>Maternal MICC</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will</p>	<p>Reflects whether or not the mother has housing needs.</p>

	Psychosocial Assessment - Housing Needs (DE8594)	<p>be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has housing needs. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has housing needs.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has housing needs.</p>
27	27 (PSYCH/SOCIAL - HEALTH NEEDS) Maternal MICC Psychosocial Assessment - Health Needs (DE8588)	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has health needs.</p> <p>Reflects whether or not the mother has health needs. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has health needs.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has health needs.</p>
28	28 (PSYCH/SOCIAL - FOOD FUNDS) Maternal MICC Psychosocial Assessment - Food Funds (DE8589)	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has insufficient funds for food.</p> <p>Reflects whether or not the mother has insufficient funds for food. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has insufficient funds for food.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has insufficient funds for food.</p>
29	29 (PSYCH/SOCIAL - TRANSPORTATION NEEDS)	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will</p>	<p>Reflects whether or not the mother has transportation needs.</p>

	Maternal MICC Psychosocial Assessment - Transport Needs (DE8595)	<p>be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has transportation needs. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has transportation needs.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has transportation needs.</p>
30	30 (PSYCH/SOCIAL - NEGLECT) Maternal MICC Psychosocial Assessment - Neglect (DE8599)	<p>Edits: 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has suffered neglect or abuse.</p> <p>Reflects whether or not the mother has suffered neglect or abuse. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has suffered neglect or abuse.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has suffered neglect or abuse.</p>
31	31 (PSYCH/SOCIAL - CHILDCARE NEEDS) Maternal MICC Psychosocial Assessment - Child Care (DE8593)	<p>Edits: 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has childcare needs.</p> <p>Reflects whether or not the mother has childcare needs. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has childcare needs.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has childcare needs.</p>
32	32 (PSYCH/SOCIAL - MULTIPLE)	<p>Edits: 'Y', 'N', 'U', or blank. If '0', '1' or</p>	<p>Reflects whether or not the mother has multiple medical providers.</p>

	MEDICAL PROVIDERS) Maternal MICC Psychosocial Assessment - Multiple Providers (DE8609)	'9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.	Reflects whether or not the mother has multiple medical providers. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. ADD (O/U) Enter the code which reflects whether or not the mother has multiple medical providers. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has multiple medical providers.
33	33 (PSYCH/SOCIAL - MENTAL RETARDATION) Maternal MICC Psychosocial Assessment - Mental Retardation (DE8600)	Edits: 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.	Reflects whether or not the mother has mental retardation.  Reflects whether or not the mother has mental retardation. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. ADD (O/U) Enter the code which reflects whether or not the mother has mental retardation. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has mental retardation.
34	34 (PSYCH/SOCIAL - CAREGIVER HANDICAP) Infant MICC Psychosocial Assessment - Caregiver Handicap (DE8690)	Edits: 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. This field applies to Infant Case types only and will not be written to the MICC Master File if data entered on a Maternal Case Type. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.	Reflects whether or not the infant has a caregiver handicap.  Reflects whether or not the infant has a caregiver handicap. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. ADD (O/U) Enter the code which reflects whether or not the infant has a caregiver handicap. UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has a caregiver handicap.
35	35 (PSYCH/SOCIAL - MATERNAL ABSENCE)	Edits: 'Y', 'N', 'U', or blank. If '0', '1' or	Reflects whether or not the infant has maternal absence.

	<p>Infant MICC Psychosocial Assessment - Maternal Absence (DE8670)</p>	<p>'9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. This field applies to Infant Case types only and will not be written to the MICC Master File if data entered on a Maternal Case Type.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has maternal absence. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U) Enter the code which reflects whether or not the infant has maternal absence.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has maternal absence.</p>
36	<p>36 (PSYCH/SOCIAL - PROTECTIVE SERVICES) Infant MICC Psychosocial Assessment - Protective Services (DE8671)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. This field applies to Infant Case types only and will not be written to the MICC Master File if data entered on a Maternal Case Type.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has an protective services.</p> <p>Reflects whether or not the infant has protective services. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U) Enter the code which reflects whether or not the infant has protective services.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has protective services.</p>
37	<p>37 (PSYCH/SOCIAL -EMOTIONAL BONDING) Infant MICC Psychosocial Assessment - Poor Emotional Bonding (DE8672)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'. This field applies to Infant Case types only and will not be written to the MICC Master File if data entered on a Maternal Case Type.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has poor emotional bonding.</p> <p>Reflects whether or not the infant has poor emotional bonding. Valid codes are 'Y', 'N', 'U', or blank. If '0', '1' or '9' is data entered, the field will be written on the MICC Master File as 'N', 'Y' or 'U'.</p> <p>ADD (O/U) Enter the code which reflects whether or not the infant has poor emotional bonding.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has poor emotional bonding.</p>
38	<p>38 (MEDICAL - MULTIPLE GESTATIONS)</p>	<p>Edits: 'Y', 'N', 'U', '0', '1', '9' or blank.</p>	<p>Reflects whether or not the mother has multiple gestation.</p>

	Maternal MICC Medical Assessment - Multiple Gestations (DE8601)	<p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has multiple gestation. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has multiple gestation.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has multiple gestation.</p>
39	<p>39 (MEDICAL - PRIOR PRE-TERM BIRTH WEIGHT)</p> <p>Maternal MICC Medical Assessment - Prior Pre-term Birth Weight (DE8602)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the mother has prior pre-term birth weight.</p> <p>Reflects whether or not the mother has prior pre-term birth weight. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has prior pre-term birth weight.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has prior pre-term birth weight.</p>
40	<p>40 (MEDICAL - ADVANCED MATERNAL AGE)</p> <p>Maternal MICC Medical Assessment - Advanced Maternal Age (DE8608)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data</p>	<p>Reflects whether or not the mother has advanced maternal age.</p> <p>Reflects whether or not the mother has advanced maternal age. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to</p>

		<p>entered on an Infant Case Type.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has advanced maternal age.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has advanced maternal age.</p>
41	<p>41 (MEDICAL - MEDICAL CONDITION)</p> <p>Maternal MICC Medical Assessment - Medical Condition (DE8604)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has a medical condition.</p> <p>Reflects whether or not the mother has a medical condition. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has a medical condition.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has a medical condition.</p>
42	<p>42 (MEDICAL - GENETIC DISORDER)</p> <p>Maternal MICC Medical Assessment - Genetic (DE8603)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has a genetic disorder.</p> <p>Reflects whether or not the mother has a genetic disorder. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has a genetic disorder.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which</p>

			reflects whether or not the mother has a genetic disorder.
43	43 (MEDICAL - PREVIOUS FETAL DEATH) Maternal MICC Medical Assessment - Previous Fetal Death (DE8606)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother has had previous fetal death.  Reflects whether or not the mother has had previous fetal death. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother has had previous fetal death. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has had previous fetal death.
44	44 (MEDICAL - POOR PREGNANCY EXPERIENCE) Maternal MICC Medical Assessment - Previous Poor Pregnancy (DE8580)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother has had poor pregnancy experience.  Reflects whether or not the mother has had poor pregnancy experience. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother has had poor pregnancy experience. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has had poor pregnancy experience.
45	45 (MEDICAL - CHRONIC ILLNESS) Infant MICC Medical	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to	Reflects whether or not the infant has chronic illness.  Reflects whether or not the infant has

	Assessment - Chronic Illness (DE8685)	'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternity Case, it will not be written to the MICC Master File.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	chronic illness. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the infant has chronic illness. UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has chronic illness.
46	46 (MEDICAL - DEVELOPMENTAL DELAY) Infant MICC Medical Assessment - Developmentally Delayed (DE8689)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternity Case, it will not be written to the MICC Master File.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the infant has developmental delay.  Reflects whether or not the infant has developmental delay. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the infant has developmental delay. UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has developmental delay.
47	47 (MEDICAL - APNEA) Infant MICC Medical Assessment - Apnea (DE8682)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternity Case, it will not be written to the MICC Master File.  Messages: 8093- ENTER 'N', 'Y', OR 'U';	Reflects whether or not the infant has apnea.  Reflects whether or not the infant has apnea. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.

		OR '0', '1', OR "9', OR SPACE.	ADD (O/U) Enter the code which reflects whether or not the infant has apnea. UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has apnea.
48	48 (MEDICAL - LOW BIRTH WEIGHT) Infant MICC Medical Assessment - Low Birth Weight (DE8692)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternity Case, it will not be written to the MICC Master File. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.	Reflects whether or not the infant has low birth weight.  Reflects whether or not the infant has low birth weight. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the infant has low birth weight. UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has low birth weight.
49	49 (NUTRITIONAL - PRE-PREGNANCY OVERWEIGHT) Maternal Outcome Client Needs - Home Health Services (DE8427)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Cases only. If this field is valued on a Infant Case, it will not be written to the MICC Master File. Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.	This field indicates whether or not the mother's need for pre-pregnancy overweight assistance was met.  Reflects whether or not the mother's need for pre-pregnancy overweight assistance was met. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother's need for pre-pregnancy overweight assistance was met. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother's

			need for pre-pregnancy overweight assistance was met.
50	50 (NUTRITIONAL - PRE-PREGNANCY OVERWEIGHT) Maternal MICC Nutritional Assessment - Pre-pregnancy Overweight (DE8610)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Cases only. If this field is valued on a Infant Case, it will not be written to the MICC Master File.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother has pre-pregnancy underweight.  Reflects whether or not the mother has pre-pregnancy underweight. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother has pre-pregnancy underweight. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has pre-pregnancy underweight.
51	51 (NUTRITIONAL - EXCESSIVE NAUSEA AND VOMITING) Maternal MICC Nutritional Assessment - Nausea (DE8616)	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Cases only. If this field is valued on a Infant Case, it will not be written to the MICC Master File.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother has excessive nausea.  Reflects whether or not the mother has excessive nausea. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother has excessive nausea. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has excessive nausea.
52	52 (NUTRITIONAL - EXCESS WEIGHT GAIN) Maternal MICC Nutritional Assessment -	Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC	Reflects whether or not the mother has an excessive weight gain.  Reflects whether or not the mother has an excessive weight gain. Valid codes

	Excessive Weight Gain (DE8613)	<p>Master File.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has an excessive weight gain.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has an excessive weight gain.</p>
53	<p>53 (NUTRITIONAL - INADEQUATE WEIGHT GAIN)</p> <p>Maternal MICC Nutritional Assessment - Inadequate Weight Gain (DE8612)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has an inadequate weight gain.</p> <p>Reflects whether or not the mother has an inadequate weight gain. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the mother has an inadequate weight gain.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the mother has an inadequate weight gain.</p>
54	<p>54 (NUTRITIONAL - POOR BASIC DIET)</p> <p>Maternal MICC Nutritional Assessment - Poor Diet (DE8618)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9', OR SPACE.</p>	<p>Reflects whether or not the mother has a poor basic diet.</p> <p>Reflects whether or not the mother has a poor basic diet. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data</p>

			<p>entered on an Infant Case Type.  ADD (O/U)  Enter the code which reflects whether or not the mother has a poor basic diet.  UPDATE (O/U)  Enter the change to the code which reflects whether or not the mother has a poor basic diet.</p>
55	<p>55 (NUTRITIONAL - SPECIAL DIET)  Maternal MICC Nutritional Assessment - Special Diet (DE8615)</p>	<p>Edits:  'Y', 'N', 'U', or blank.  Messages:  8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the mother has a special diet.  Reflects whether or not the mother has a special diet. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.  ADD (O/U)  Enter the code which reflects whether or not the mother has a special diet.  UPDATE (O/U)  Enter the change to the code which reflects whether or not the mother has a special diet.</p>
56	<p>65 (NUTRITIONAL - MEDICAL CONDITION AFFECTS DIET)  Maternal MICC Nutritional Assessment - Medical Diet Condition (DE8614)</p>	<p>Edits:  'Y', 'N', 'U', or blank.  Messages:  8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the mother has a medical condition which affects diet.  Reflects whether or not the mother has a medical condition which affects diet. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.  ADD (O/U)  Enter the code which reflects whether or not the mother has a medical condition which affects diet.  UPDATE (O/U)  Enter the change to the code which reflects whether or not the mother has a</p>

			medical condition which affects diet.
57	57 (NUTRITIONAL - INADEQUATE COOKING FACILITY) Maternal MICC Nutritional Assessment - Inadequate Cooking Facilities (DE8619)	Edits: 'Y', 'N', 'U', or blank.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother has an inadequate cooking facility.  Reflects whether or not the mother has an inadequate cooking facility. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother has an inadequate cooking facility. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has an inadequate cooking facility.
58	58 (NUTRITIONAL - TEENAGE MOTHER) Maternal MICC Nutritional Assessment - Teenager (DE8620)	Edits: 'Y', 'N', 'U', or blank.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother is age 18 or under.  Reflects whether or not the mother is age 18 or under. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type. ADD (O/U) Enter the code which reflects whether or not the mother is age 18 or under. UPDATE (O/U) Enter the change to the code which reflects whether or not the mother is age 18 or under.
59	59 (NUTRITIONAL - ANEMIA) Maternal MICC Nutritional Assessment - Anemia (DE8621)	Edits: 'Y', 'N', 'U', or blank.  Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.	Reflects whether or not the mother has anemia.  Reflects whether or not the mother has anemia. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the edit-

			<p>ing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother has anemia.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother has anemia.</p>
60	<p>60 (NUTRITIONAL - INADEQUATE SUCK)</p> <p>Infant MICC Nutritional Assessment - Inadequate Sucking (DE8698)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternal Case, it will not be written to the MICC Master File.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has inadequate sucking.</p> <p>Reflects whether or not the infant has inadequate sucking. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U) Enter the code which reflects whether or not the infant has inadequate sucking.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the infant has inadequate sucking.</p>
61	<p>61 (NUTRITIONAL - BREAST-FEEDING PROBLEMS)</p> <p>Infant MICC Nutritional Assessment - Breast Feeding Problems (DE8695)</p>	<p>Edits: 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternal Case, it will not be written to the MICC Master File.</p> <p>Messages: 8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR "9", OR SPACE.</p>	<p>Reflects whether or not the infant has a breast feeding problem.</p> <p>Reflects whether or not the infant has a breast feeding problem. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U) Enter the code which reflects whether or</p>

			<p>not the infant has a breast feeding problem.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the infant has a breast feeding problem.</p>
62	<p>62 (NUTRITIONAL - POOR USE OF FORMULA)</p> <p>Infant MICC Nutritional Assessment - Poor Use of Formula (DE8696)</p>	<p>Edits:</p> <p>'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Infant Cases only. If this field is valued on a Maternal Case, it will not be written to the MICC Master File.</p> <p>Messages:</p> <p>8093- ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE.</p>	<p>Reflects whether or not the infant has poor use of formula.</p> <p>Reflects whether or not the infant has poor use of formula. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the infant has poor use of formula.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the infant has poor use of formula.</p>
63	<p>63 CURRENT SUBSTANCE ABUSE WEEKLY (ALCOHOL)</p> <p>Maternal MICC Current Alcohol Abuse Weekly Frequency (DE8527)</p>	<p>Edits:</p> <p>00-99 or blank.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week alcohol is currently abused by the mother.</p> <p>Indicates the number of times per week alcohol is currently abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per week alcohol is currently abused by the mother.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per week alcohol is currently abused by the mother.</p>
64	<p>63 CURRENT SUBSTANCE ABUSE DAILY (ALCOHOL)</p> <p>Maternal MICC Cur-</p>	<p>Edits:</p> <p>00-99 or blank.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day alcohol is currently abused by the mother.</p> <p>Indicates the number of times per day</p>

	<p>rent Alcohol Abuse Daily Frequency (DE8536)</p>		<p>alcohol is currently abused by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per day alcohol is currently abused by the mother.  UPDATE (O/U)  Enter the change to the number of times per day alcohol is currently abused by the mother.</p>
65	<p>64 (CURRENT SUBSTANCE ABUSE WEEKLY - COCAINE)  Maternal MICC Current Cocaine Abuse Weekly Frequency (DE8528)</p>	<p>Edits:  00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week cocaine is currently used by the mother.    Indicates the number of times per week cocaine is currently used by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per week cocaine is currently used by the mother.  UPDATE (O/U)  Enter the change to the number of times per week cocaine is currently used by the mother.</p>
66	<p>64 (CURRENT SUBSTANCE ABUSE DAILY - COCAINE)  Maternal MICC Current Cocaine Abuse Daily Frequency (DE8537)</p>	<p>Edits:  00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day cocaine is currently used by the mother.    Indicates the number of times per day cocaine is currently used by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per day cocaine is currently used by the mother.  UPDATE (O/U)  Enter the change to the number of times per day cocaine is currently used by the mother.</p>
67	<p>65 (CURRENT SUBSTANCE ABUSE WEEKLY - NARCOTICS)  Maternal MICC Current Narcotics Abuse Weekly Frequency (DE8529)</p>	<p>Edits:  00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week narcotics are currently used by the mother.    Indicates the number of times per week narcotics are currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p>

			<p>ADD (O/U) Enter the number of times per week narcotics are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week narcotics are currently used by the mother.</p>
68	<p>65 (CURRENT SUBSTANCE ABUSE DAILY-NARCOTICS)</p> <p>Maternal MICC Current Narcotics Abuse Daily Frequency (DE8538)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day narcotics are currently used by the mother.</p> <p>Indicates the number of times per day narcotics are currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day narcotics are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day narcotics are currently used by the mother.</p>
69	<p>66 (CURRENT SUBSTANCE ABUSE WEEKLY - MARIJUANA)</p> <p>Maternal MICC Current Marijuana Abuse Weekly Frequency (DE8530)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week marijuana is currently used by the mother.</p> <p>Indicates the number of times per week marijuana is currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week marijuana is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week marijuana is currently used by the mother.</p>
70	<p>66 (CURRENT SUBSTANCE ABUSE DAILY - MARIJUANA)</p> <p>Maternal MICC Current Marijuana Abuse Daily Frequency (DE8539)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day marijuana is currently used by the mother.</p> <p>Indicates the number of times per day marijuana is currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p>

			<p>ADD (O/U) Enter the number of times per day marijuana is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day marijuana is currently used by the mother.</p>
71	<p>67 (CURRENT SUBSTANCE ABUSE WEEKLY - SEDATIVES)</p> <p>Maternal MICC Current Sedatives Abuse Weekly Frequency (DE8531)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week sedatives are currently used by the mother.</p> <p>Indicates the number of times per week sedatives are currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week sedatives are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week sedatives are currently used by the mother.</p>
72	<p>67 (CURRENT SUBSTANCE ABUSE DAILY - SEDATIVES)</p> <p>Maternal MICC Current Sedatives Abuse Daily Frequency (DE8540)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day sedatives are currently abused by the mother.</p> <p>Indicates the number of times per day sedatives are currently abused by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day sedatives are currently abused by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day sedatives are currently abused by the mother.</p>
73	<p>68 (CURRENT SUBSTANCE ABUSE WEEKLY - AMPHETAMINES)</p> <p>Maternal MICC Current Amphetamines Abuse Weekly Fre-</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>This is the number of times per week amphetamines are currently used by the mother.</p> <p>This is the number of times per week amphetamines are currently used by the mother. Use the On-line HELP system</p>

	quency (DE8532)		to find valid codes for this field. ADD (O/U) Enter the number of times per week amphetamines are currently used by the mother. UPDATE (O/U) Enter the change to the number of times per week amphetamines are currently used by the mother.
74	68 (CURRENT SUBSTANCE ABUSE DAILY - AMPHETAMINES) Maternal MICC Current Amphetamines Abuse Daily Frequency (DE8541)	Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day amphetamines are currently used by the mother.  Indicates the number of times per day amphetamines are currently used by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day amphetamines are currently used by the mother. UPDATE (O/U) Enter the change to the number of times per day amphetamines are currently used by the mother.
75	69 (CURRENT SUBSTANCE ABUSE WEEKLY - INHALANTS) Maternal MICC Current Inhalants Abuse Weekly Frequency (DE8533)	Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per week inhalants is currently used by the mother.  Indicates the number of times per week inhalants is currently used by the mother. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week inhalants is currently used by the mother. UPDATE (O/U) Enter the change to the number of times per week inhalants is currently used by the mother.
76	69 (CURRENT SUBSTANCE ABUSE DAILY - INHALANTS) Maternal MICC Cur-	Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day inhalants are currently abused by the mother.  Indicates the number of times per day

	<p>rent Inhalants Abuse Daily Frequency (DE8542)</p>		<p>inhalants are currently abused by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per day inhalants are currently abused by the mother.  UPDATE (O/U)  Enter the change to the number of times per day inhalants are currently abused by the mother.</p>
77	<p>70 (CURRENT SUBSTANCE ABUSE WEEKLY - TOBACCO)  Maternal MICC Current Tobacco Abuse Weekly Frequency (DE8534)</p>	<p>Edits:  00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week tobacco is currently used by the mother.  Indicates the number of times per week tobacco is currently used by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per week tobacco is currently used by the mother.  UPDATE (O/U)  Enter the change to the number of times per week tobacco is currently used by the mother.</p>
78	<p>70 (CURRENT SUBSTANCE ABUSE DAILY - TOBACCO)  Maternal MICC Current Tobacco Abuse Daily Frequency (DE8543)</p>	<p>Edits:  00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day tobacco is currently used by the mother.  Indicates the number of times per day tobacco is currently used by the mother. Use the On-line HELP system to find valid codes for this field.  ADD (O/U)  Enter the number of times per day tobacco is currently used by the mother.  UPDATE (O/U)  Enter the change to the number of times per day tobacco is currently used by the mother.</p>
79	<p>71 (CURRENT SUBSTANCE ABUSE WEEKLY - OTHER)  Maternal MICC Current Other Substance Abuse Weekly Frequency (DE8535)</p>	<p>Edits:  00-99 or blank.  Messages:  VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week some other substance is currently used by the mother.  Indicates the number of times per week some other substance is currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p>

			<p>ADD (O/U) Enter the number of times per week some other substance is currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per week some other substance is currently used by the mother.</p>
80	<p>71 (CURRENT SUBSTANCE ABUSE DAILY - OTHER)</p> <p>Maternal MICC Current Other Substance Abuse Daily Frequency (DE8544)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day other substances are currently used by the mother.</p> <p>Indicates the number of times per day other substances are currently used by the mother. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day other substances are currently used by the mother.</p> <p>UPDATE (O/U) Enter the change to the number of times per day other substances are currently used by the mother.</p>
81	<p>72 PRIOR SUBSTANCE ABUSE WEEKLY (ALCOHOL)</p> <p>Maternal MICC Prior Alcohol Abuse Weekly Frequency (DE8554)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week alcohol was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week alcohol was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week alcohol was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week alcohol was abused by the mother, prior to pregnancy.</p>
82	<p>72 PRIOR SUBSTANCE ABUSE DAILY (ALCOHOL)</p> <p>Maternal MICC Prior Alcohol Abuse Daily</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day alcohol was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day alcohol was abused by the mother, prior to pregnancy.</p>

	Frequency (DE8545)		to pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day alcohol was abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per day alcohol was abused by the mother, prior to pregnancy.
83	73 (PRIOR SUBSTANCE ABUSE WEEKLY - COCAINE)  Maternal MICC Prior Cocaine Abuse Weekly Frequency (DE8555)	Edits: 00-99 or blank.  Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per week cocaine was abused by the mother, prior to pregnancy.  Indicates the number of times per week cocaine was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week cocaine was abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per week cocaine was abused by the mother, prior to pregnancy.
84	73 (PRIOR SUBSTANCE ABUSE DAILY - COCAINE)  Maternal MICC Prior Cocaine Abuse Daily Frequency (DE8546)	Edits: 00-99 or blank.  Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day cocaine was abused by the mother, prior to pregnancy.  Indicates the number of times per day cocaine was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day cocaine was abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per day cocaine was abused by the mother, prior to pregnancy.
85	74 (PRIOR SUBSTANCE	Edits: 00-99 or blank.	Indicates the number of times per week narcotics were abused by the mother,

	<p>ABUSE WEEKLY - NARCOTICS)</p> <p>Maternal MICC Prior Narcotics Abuse Weekly Frequency (DE8556)</p>	<p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>prior to pregnancy.</p> <p>Indicates the number of times per week narcotics were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per week narcotics were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per week narcotics were abused by the mother, prior to pregnancy.</p>
86	<p>74 (PRIOR SUBSTANCE ABUSE DAILY - NARCOTICS)</p> <p>Maternal MICC Prior Narcotic Abuse Daily Frequency (DE8547)</p>	<p>Edits:</p> <p>00-99 or blank.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day narcotics were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day narcotics were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per day narcotics were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day narcotics were abused by the mother, prior to pregnancy.</p>
87	<p>75 (PRIOR SUBSTANCE ABUSE WEEKLY - MARIJUANA)</p> <p>Maternal MICC Prior Marijuana Abuse Weekly Frequency (DE8557)</p>	<p>Edits:</p> <p>00-99 or blank.</p> <p>Messages:</p> <p>VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week marijuana was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week marijuana was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per week marijuana was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times</p>

			per week marijuana was abused by the mother, prior to pregnancy.
88	75 (PRIOR SUBSTANCE ABUSE DAILY - MARIJUANA) Maternal MICC Prior Marijuana Abuse Daily Frequency (DE8548)	Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day marijuana was abused by the mother, prior to pregnancy.  Indicates the number of times per day marijuana was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per day marijuana was abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per day marijuana was abused by the mother, prior to pregnancy.
89	76 (PRIOR SUBSTANCE ABUSE WEEKLY - SEDATIVES) Maternal MICC Prior Sedatives Abuse Weekly Frequency (DE8558)	Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per week sedatives were abused by the mother, prior to pregnancy.  Indicates the number of times per week sedatives were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the number of times per week sedatives were abused by the mother, prior to pregnancy. UPDATE (O/U) Enter the change to the number of times per week sedatives were abused by the mother, prior to pregnancy.
90	76 (PRIOR SUBSTANCE ABUSE DAILY - SEDATIVES) Maternal MICC Prior Sedatives Abuse Daily Frequency (DE8549)	Edits: 00-99 or blank. Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.	Indicates the number of times per day sedatives were abused by the mother, prior to pregnancy.  Indicates the number of times per day sedatives were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (O/U)

			<p>Enter the number of times per day sedatives were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day sedatives were abused by the mother, prior to pregnancy.</p>
91	<p>77 (PRIOR SUBSTANCE ABUSE WEEKLY - AMPHETAMINES)</p> <p>Maternal MICC Prior Amphetamines Abuse Weekly Frequency (DE8559)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week amphetamines were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week amphetamines were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per week amphetamines were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per week amphetamines were abused by the mother, prior to pregnancy.</p>
92	<p>77 (PRIOR SUBSTANCE ABUSE DAILY - AMPHETAMINES)</p> <p>Maternal MICC Prior Amphetamines Abuse Daily Frequency (DE8550)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day amphetamines were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day amphetamines were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of times per day amphetamines were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of times per day amphetamines were abused by the mother, prior to pregnancy.</p>
93	<p>78 (PRIOR SUBSTANCE ABUSE WEEKLY - INHALANTS)</p> <p>Maternal MICC Prior</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week inhalants were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week</p>

	Inhalants Abuse Weekly Frequency (DE8560)		<p>inhalants were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week inhalants were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week inhalants were abused by the mother, prior to pregnancy.</p>
94	<p>78 (PRIOR SUBSTANCE ABUSE DAILY - INHALANTS)</p> <p>Maternal MICC Prior Inhalants Abuse Daily Frequency (DE8551)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day inhalants were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day inhalants were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day inhalants were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day inhalants were abused by the mother, prior to pregnancy.</p>
95	<p>79 (PRIOR SUBSTANCE ABUSE WEEKLY - TOBACCO)</p> <p>Maternal MICC Prior Tobacco Abuse Weekly Frequency (DE8561)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week tobacco was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week tobacco was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week tobacco was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week tobacco was abused by the mother, prior to pregnancy.</p>

96	<p>79 (PRIOR SUBSTANCE ABUSE DAILY - TOBACCO)</p> <p>Maternal MICC Prior Tobacco Abuse Daily Frequency (DE8552)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day tobacco was abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day tobacco was abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day tobacco was abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per day tobacco was abused by the mother, prior to pregnancy.</p>
97	<p>80 (PRIOR SUBSTANCE ABUSE WEEKLY - OTHER)</p> <p>Maternal MICC Prior Other Substance Abuse Weekly Frequency (DE8562)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per week other substances were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per week other substances were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per week other substances were abused by the mother, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the number of times per week other substances were abused by the mother, prior to pregnancy.</p>
98	<p>80 (PRIOR SUBSTANCE ABUSE DAILY - OTHER)</p> <p>Maternal MICC Prior Other Substance Abuse Daily Frequency (DE8553)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: VALID VALUES ARE 00 THRU 99; OR SPACES.</p>	<p>Indicates the number of times per day other substances were abused by the mother, prior to pregnancy.</p> <p>Indicates the number of times per day other substances were abused by the mother, prior to pregnancy. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U) Enter the number of times per day other</p>

			<p>substances were abused by the mother, prior to pregnancy.  UPDATE (O/U)  Enter the change to the number of times per day other substances were abused by the mother, prior to pregnancy.</p>
99	<p>(Current Substance Abuse - Weekly (Description))  Maternal MICC Current Weekly Substance Abuse Type Description (DE8736)</p>	<p>Edits:  None.  Messages:</p>	<p>This field contains the name of other substance(s) that are currently abused by the mother on a weekly basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the name of other substance(s) that are currently abused by the mother on a weekly basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.  ADD (O/U)  Enter the name of other substance(s) that are currently abused by the mother on a weekly basis.  UPDATE (O/U)  Enter the change to the name of other substance(s) that are currently abused by the mother on a weekly basis.</p>
100	<p>(Current Substance Abuse - Daily (Description))  Maternal MICC Current Daily Substance Abuse Type Description (DE8735)</p>	<p>Edits:  None.  Messages:</p>	<p>This field contains the name of other substance(s) that are currently abused by the mother on a daily basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the name of other substance(s) that are currently abused by the mother on a daily basis. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.  ADD (O/U)  Enter the name of other substance(s) that are currently abused by the mother on a daily basis.  UPDATE (O/U)  Enter the change to the name of other substance(s) that are currently abused</p>

			by the mother on a daily basis.
101	<p>(Prior Substance Abuse - Weekly (Description))</p> <p>Maternal MICC Prior Weekly Substance Abuse Type Description (DE8738)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the name of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the name of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>ADD (O/U) Enter the name of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the name of other substance(s) that were abused by the mother on a weekly basis, prior to pregnancy.</p>
102	<p>(Prior Substance Abuse - Daily (Description))</p> <p>Maternal MICC Prior Daily Substance Abuse Type Description (DE8737)</p>	<p>Edits: None.</p> <p>Messages:</p>	<p>This field contains the name of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>This field contains the name of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy. This information is entered into the MICC Master File from the Maternal Care Coordination Form or DMAS-50.</p> <p>ADD (O/U) Enter the name of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy.</p> <p>UPDATE (O/U) Enter the change to the name of other substance(s) that were abused by the mother on a daily basis, prior to pregnancy.</p>
103	SIGNIFICANT FINDINGS	Edits:	Reflects any significant findings that

	<p>Maternal MICC Significant Findings (DE8731)</p>	<p>None. Messages: 8510- MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED.</p>	<p>have been entered on the Infant Care Coordination Record.  Reflects any significant findings that have been entered on the Infant Care Coordination Record. ADD (O/U) Enter the significant findings that have been entered on the Infant Care Coordination Record. UPDATE (O/U) Enter any change to the significant findings that have been entered on the Infant Care Coordination Record.</p>
<p>104</p>	<p>RISK LEVEL Case Management (MICC) Level of Risk (DE8484)</p>	<p>Edits: This field is system generated. Valid values are blank, 0, 1 and 2. HIGH RISK represented by 2, will be indicated if: 1) Any of the Maternal Risk Medical Risk Conditions, HYPERTENSION (DE 8563) or DIABETES (DE 8564) or MULTIPLE GESTATION (DE 8565) is equal to 'Y', or; 2) If any Substance Abuse Assessments, on MI-S-005, other than TOBACCO (DE 8720 or 8720) is equal to 'Y', however, Daily Alcohol Usage (DE 8713) must exceed one drink per day or Weekly Usage (DE 8722) must exceed 7 times per week; or 3) Social Risk - Teenager (DE 8571) is 'Y' on MI-S-005 and any Medical Risk on MI-S-005 (DE 8563 thru 8569) is 'Y'; or 4) Social Risk - Teenager (DE 8571) is 'Y' on MI-S-005 and any Substance Abuse, except Tobacco (DE 8720 and 8729) is greater than 00; or 5) 10 or more Assessments</p>	<p>Indicates the level of risk whether high, medium or low.  Indicates the level of risk whether high, medium or low. System Displayed.</p>

		<p>on this data entry screen is equal to 'Y'.</p> <p>MED RISK represented by 1, will be indicated if:</p> <ol style="list-style-type: none"> <li>1) The enrollee is under 18, (DE 8571 = 'Y'), or;</li> <li>2) The enrollee is homeless, (DE 8575 = 'Y'), or;</li> <li>3) The enrollee is retarded, (DE 8573 = 'Y') and any other Assessment on the Risk Screen , MI-S-005, is equal to 'Y', or ;</li> <li>4) If 5 to 9 Assessments on this data entry screen are equal to 'Y'.</li> </ol> <p>Low Risk, represented by 0, will be indicated if any combination of Assessments are equal to 'Y' on the Maternal Risk Screen, MI-S-005 and/or on this screen .</p> <p>Messages: INVALID RISK, VALUES ARE 0, 1, AND 2.</p>	
105	<p>COORDINATOR SIGNATURE/DATE: Maternal MICC Coordinator Signature Indicator (DE8383)</p>	<p>Edits: 'Y' must be entered. If not the record will not be written to the MICC Master File.</p> <p>Messages: 8510- MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED.</p>	<p>Reflects whether or not the MICC Coordinator's Signature was present on the Care Coordination Assessment Form.</p> <p>Reflects whether or not the MICC Coordinator's Signature was present on the Care Coordination Assessment Form. 'Y' must be entered. If not the record will not be written to the MICC Master File.</p> <p>ADD (O/U) Enter the code which reflects whether or not the MICC Coordinator's Signature was present on the Care Coordination Assessment Form.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the MICC</p>

			Coordinator's Signature was present on the Care Coordination Assessment Form.
107	SEQUENCE NBR. MICC Sequence Number (DE8397)	Messages: 8514- NO MICC ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER. 8409- NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER.	This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. INQUIRY (R/P) Enter the number of MICC or BabyCare enrollments on file under this enrollment number on which you wish to inquire.  This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. System Displayed.
108	ACTION (DE0000)	Edits: Displays whether the screen is being used for INQUIRY, UPDATE, or ADDITION.	Displays what the screen is being used for - INQUIRY.  Displays whether the screen is being used for UPDATE, ADDITION or INQUIRY. System Displayed.

NAVIGATION			<b>MICC Maternal Expanded Services - Maternity MICC Record Screen (MI-S-006)</b>		
Function (B) or (M)	Action	Branch To (B) or Return To (R)			
CLEAR FORM	Clears the screen of any newly entered data.	N/A			
DELETE	Allows the user to delete the maternity MICC record information for the member displayed on the screen.	N/A			
ELIG	Branches to the Eligibility Data Screen.	RS-S-015 (B)			
ENTER	Processes the entered data.	N/A			
SUB MENU	Returns to the MICC main Menu.	MI-S-100 (B)			
MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)			
SCROLL DOWN	Allows the user to page forward and display the next Maternal MICC information for the member.	N/A			
OUTCOME	Allows navigation to the MICC Maternal Expanded Services Pregnancy Outcome Report - Page 3 screen.	MI-S-007 (B)			
SCROLL UP	Allows the user to page backward and display	N/A			

	the previous Maternal MICC information for the member.	
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Returns to the previous screen.	N/A
RISK	Allows navigation to the MICC Maternal Expanded Services Maternity Risk Screen - Page 1.	MI-S-005 (B)
UPDATE	Allows the user to update the maternity MICC record information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8440	ADD NEW RISK FIRST AND THEN ADD NEW MICC RECORD	Information message.
8139	AT LEAST ONE CONDITION MUST BE PRESENT	Enter one condition to continue processing.
8499	CHOOSE THE DELETE KEY TO DELETE RECORD	Choose the Delete button to delete the record.
8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
68	DATA REFRESHED	Information message.
8088	DATE IS INVALID FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	Enter a valid date. See the field definitions for specifications on the date to be entered.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or cancel the transaction.
8055	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8096	ENTER A VALID PROVIDER ID	Enter a Valid Provider ID. See the field definitions for formatting/ requirements for this field.

8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8093	ENTER 'N', 'Y', OR 'U'; OR '0', '1', OR '9', OR SPACE	Enter a value of 'Y', 'N' or 'U', or '1', '0' or '9' or space. See the field definitions for explanation of valid values.
8504	ENTER VALUE '0', '1', '2', OR '9'	Enter a value of '0', '1', '2' or '9' or space. See the field definitions for explanation of valid values.
8506	ENTER VALUE '0', '1', '2', OR '9'	Enter a value of '0', '1', '2' or '9' or space. See the field definitions for explanation of valid values.
8507	ENTER VALUE '00' THRU '40'	Enter a value of '00' thru '40'. See the field definitions for explanation of valid values.
8505	ENTER VALUE; MUST BE 'U', 'S', 'M', OR '0', '1', '9'	Enter a value of 'U', 'S' 'M', '0', '1' or '9'. See the field definitions for explanation of valid values.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
8425	FIRST MICC SEGMENT DISPLAYED	Information message. No action needed.
139	FUNCTION IS INVALID	Information message.
8090	LAST SCREENING DATE GREATER THAN THE CURRENT DATE	Check Screen Date. See the field definitions for formatting and requirements for this field.
8089	LAST SCREENING DATE LESS THAN 07/01/1989	Date is prior to start of the MICC (Baby Care) Program. Check Screening Date. See the field definitions for formatting and requirements for this field.
8091	LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE	Check Screen Date. See the field definitions for formatting/requirements for this field.
8451	LOG FILE NOT OPEN	Information message.
8350	MICC MASTER FILE NOT OPEN	Information message.
8503	MUST BE NUMERIC	Data must be only numeric. See the field definitions for valid data/formatting this field.
8510	MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED	Enter 'Y' in Coordinator Signature field. See the field definitions for formatting/requirements for this field.
8514	NO MICC ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER	Information message. No action needed.
8426	NO MORE MICC SEGMENTS ON FILE	Information message. No action needed.
8454	NO MORE RISK SCREENS ON FILE	Information message. No action needed.

8403	NO OUTCOME DATA ON FILE	Information message. No action needed.
8409	NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER	Information message. No action needed.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
8437	PROVIDER ID HAS CHANGED ENTER 'Y' IN NEW RISK TO CREATE OPEN ASSESSMENT.	Verify Provider ID, if correct enter 'Y' in New Risk field. See the field definitions for formatting/requirements for this field.
8502	PROVIDER ID IS INVALID	Information message.
8092	PROVIDER TYPE IS INVALID; MUST BE PHYSICIAN, HLTH CLINIC, MIDWIFE OR NP	Enter a valid Provider ID. See the field definitions for valid data/formatting of Provider IDs.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
4120	RECORDS DISPLAYED	Information message. No action needed.
8498	RISK DATA WILL NOT BE SAVED IF MICC DATA IS NOT ENTERED	Information message. No action needed.
29	TOP OF THE PAGE	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.
8532	VISIT DATE EARLIER THAN CUTOFF DATE FOR RETROACTIVE ENTRY	Informational message.

## Screen Access

Choose the MICC button on either of the following screens to access this screen:
- MICC Maternal Expanded Services - Maternity Risk screen (MI-S-005).
- MICC Maternal Expanded Services - Pregnancy Outcome Report screen (MI-S-007).

# Screens MI-S-007 MICC Maternal Expanded Services - Pregnancy Outcome Report

## General Information

This screen permits update and inquiry of Maternal Outcome data. The information displayed on the screen is data originally entered from the DMAS-53 form, Pregnancy Outcome Report (MI-I-005). The Provider/Member Help-line will not be allowed access to this function.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry, Update, Add
PROGRAM	MIT007VA
MAPSET	MI007VA
TRAN ID	VBM7

SAMPLE	<b>MICC Maternal Expanded Services - Pregnancy Outcome Report (MI-S-007)</b>
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VA DMAS Prototype Portal - Windows Internet Explorer

http://localhost:9080/HATS\_Portlet/HATS\_Portlet/default;ver=2.0/rparam=PERF0:1TIMESTAMP=0/rparam=portletAction=portletActionPost/rparam=SESSION

VA DMAS Prototype Portal

Test Environment | Home | Contact Us | Help | Search

Virginia Medicaid

MMIS

Screen ID: MI-S-007  
Trans ID: VBM7  
Program ID: MIT007VA

**VIRGINIA MEDICAID**  
**MICC MATERNAL EXPANDED SERVICES**

Date: 04/02/2010  
Time: 12:03  
Page: 03 of 03

Member ID: [REDACTED] Sequence Nbr: 01 Action: UPDATE  
Name: [REDACTED] Race: [REDACTED] Gender: [REDACTED] DOB: [REDACTED]  
SSN: [REDACTED] FIPS: 187

**Pregnancy Outcome Report**

Provider ID #1: [REDACTED] Reason(s): 09 Update Date: 04/01/2010 C  
Outcome(s): [REDACTED]

Infant #1: Weight LBS: [REDACTED] OZS: [REDACTED] DOB: [REDACTED] APGAR:1 Minute [REDACTED] 5 Minute [REDACTED]  
#2: Weight LBS: [REDACTED] OZS: [REDACTED] DOB: [REDACTED] APGAR:1 Minute [REDACTED] 5 Minute [REDACTED]  
#3: Weight LBS: [REDACTED] OZS: [REDACTED] DOB: [REDACTED] APGAR:1 Minute [REDACTED] 5 Minute [REDACTED]

Weeks Gestation At Birth: [REDACTED]

Infant Risk Screen: Completed: N At Risk: N Refer to MICC: N Morbidity: [REDACTED]  
Other Services: Infant: EPDST: N WIC: N Care Began: [REDACTED]  
Mother: # Prenatal Visits: [REDACTED] WIC: N Postpartum/Family Plan: N

Member Needs: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15  
U U U U U U U U U U U U U U U U

Substance Abuse: 1 2 3 4 5 6 7 8 9  
Weekly: 99 99 99 99 99 99 99 99 0 [REDACTED]  
Daily: 99 99 99 99 99 99 99 99 0 [REDACTED]

Coordinator Signature?: Y Date(s) Closed: 07092003

UPDATE DATA AND CHOOSE ENTER.

Enter Update Clear Form Refresh Delete MICC Risk Eligibility Return Sub Menu Main Menu

491 (7,11) Local intranet 100% 12:03 PM

## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	MICC ID Enrollee Permanent Identification Number (DE3093)	Messages: 8002- ENTER AN ENROLLEE ID. 8011- ENTER MEDICAID ID FOR SCREENING DATA. 8014- ENROLLEE ID NOT ON FILE. 8021- ENROLLEE ID NOT FOUND IN THE DATABASE.	The DMAS-administered identification number that is used to tie all claims for a single enrollee together. This is the ID number that is used as the key to access the Claims History File. INQUIRY (O/P) Enter the next ID number on which you wish to inquire.  The DMAS-administered identification number that is used to tie all claims for a

		8351- ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE. 8488- ENTER ENROLLEE ID FOR PROCESSING.	single enrollee together. This is the ID number that is used as the key to access the Claims History File. System Displayed.
2	SEQUENCE NBR MICC Sequence Number (DE8397)	Edits: Messages: 8515- NO OUTCOME ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER. 8409- NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER.	This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. INQUIRY (C/U) Enter the number of MICC or BabyCare enrollments on file under this enrollment number you wish to inquire.  This field represents the number of MICC or BabyCare enrollments on file under this enrollment number. System Displayed.
3	NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  The name of the individual eligible for DMAS-administered programs. System Displayed.
4	RACE Enrollee Race Code (DE3006)		A code indicating the enrollee's racial origin.  A code indicating the enrollee's racial origin. System Displayed.
5	SEX Enrollee Sex Code (DE3007)		A code indicating the sex of the enrollee.  A code indicating the sex of the enrollee. System Displayed.
6	DOB Enrollee Birth Date (DE3005)		The enrollee's date of birth.  The enrollee's date of birth. System Displayed.
7	SSN Enrollee Social Security Number (SSN) (DE3034)		The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program.  The number used by SSA throughout a wage earner's lifetime to identify earnings under the Social Security Program. System Displayed.
8	CITY/COUNTY		Identifies the provider or enrollee city/-

	MMIS Locality Code based on Postal Code (DE5254)		county locality.  Identifies the provider or enrollee city/-county locality. System Displayed.
9	LAST ACTIVITY Maternal Outcome Last Update Date (DE8098)		The date of the last update applied to the Maternal Outcome Segment.  The date of the last update applied to the Maternal Outcome Segment. System Displayed.
10	(LAST ACTIVITY CODE) Maternal Outcome Last Update Code (DE8099)		This is the type of update last performed on the Maternal Outcome Segment.  This is the type of update last performed on the Maternal Outcome Segment. System Displayed.
11	DATE(S) CLOSED Maternal Outcome Report Date (DE8429)	Edits: Valid date. Cannot be less than 07011989. Cannot be greater than the Current Date. Outcome Report Date cannot be less than the Maternal Risk Date (DE 8409) or less than the MICC Report Date (DE 8417). The enrollee must be Medicaid Fee-For-Service at the time of the Outcome Report Date and not enrolled in the PD 080 Aid Category.  Messages: 8055- ENTER A VALID DATE. 8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY. 8511- CLOSE DATE GREATER THAN THE CURRENT DATE. 8523- HMO ENROLLED, NOT ELIGIBLE FOR THIS DATE.	The date the Maternal Outcome Report on the recipient was completed.  The date the Maternal Outcome Report on the recipient was completed. Must be valid date format, MMDDCCYY. Cannot be less than 07011989 and greater than the current date. Outcome Report Date cannot be less than the Maternal Risk Date or less than the MICC Report Date. ADD (R/U) Enter the date the Maternal Outcome Report on the recipient was completed. UPDATE (R/U) Enter the change to the date the Maternal Outcome Report on the recipient was completed.

		8524- PD 080 ENROLLED, NOT ELIGIBLE FOR THIS DATE. 8531- ENROLLEE IS NOT ELIGIBLE FOR THIS DATE.	
12	REASON(S) Maternal Outcome Reason Code (DE8430)	Edits: Numeric. 1 thru 9 Messages: 8382- VALUE MUST BE, '1' THRU '9'.	The reason that the mother is no longer receiving care coordination services.  The reason that the mother is no longer receiving care coordination services. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the reason that the mother is no longer receiving care coordination services. UPDATE (O/U) Enter the change to the reason that the mother is no longer receiving care coordination services.
13	OUTCOME(S) Maternal Outcome Pregnancy Outcome (DE8431)	Edits: Numeric, 1 thru 5. Messages: 8386- ENTER VALUE '1', '2', '3', '4', OR '5'.	The outcome of the mother's pregnancy.  The outcome of the mother's pregnancy. Use the On-line HELP system to find valid codes for this field. ADD (R/U) Enter the outcome of the mother's pregnancy. UPDATE (R/U) Enter the change to the outcome of the mother's pregnancy.
14	PROVIDER ID National Provider Identifier (DE4700)	Edits: Valid provider ID on the Provider Master Data Store. Valid provider types are Physician, Health Clinic, Nurse Midwife, Nurse Practitioner and Case Management Provider.  The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After	The ID Number of the Medicaid provider who provided the Maternal Outcome Report on the enrollee.  The ID Number of the Medicaid provider who provided the Maternal Outcome Report on the enrollee. Valid provider ID on the Provider Master Data Store. Valid provider types are Physician, Health Clinic, Nurse Midwife, Nurse Practitioner and Case Management Provider. ADD (R/U)

		<p>the Dual Usage Period, only the NPI will be accepted.</p> <p>Messages:</p> <p>The Provider's Legacy ID or NPI may be entered into this field initially during the Dual Usage Period. After the Dual Usage Period, only the NPI will be accepted.</p> <p>This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and must be entered and/or displayed on the screen whenever both numbers are present.</p> <p>8096- ENTER A VALID PROVIDER ID.  8502- PROVIDER ID IS INVALID.  8448- NO OPEN ASSESSMENTS ON FILE FOR THIS PROVIDER.  8922- NPI REQUIRED.</p>	<p>Enter the ID Number of the Medicaid provider who provided the Maternal Outcome Report on the enrollee.</p> <p>UPDATE (R/U)</p> <p>Enter the change to the ID Number of the Medicaid provider who provided the Maternal Outcome Report on the enrollee.</p>
15	(NAME) Provider Name (DE4085)		<p>The name of the provider.</p> <p>The name of the provider. System Displayed.</p>
16	INFANT #1 WEIGHT Maternal Outcome Infant #1 Birth Weight (DE8432)	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1' a valid birth weight must be entered as: Numeric. The 2 leftmost bytes represent the number of pounds. Valid values are 00 thru 17. The 2 rightmost bytes represent the number of ounces. Valid values are 00 thru 16, otherwise an entry is not required.</p>	<p>The birth weight of the first infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces.</p> <p>The birth weight of the first infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces. If Maternal Outcome, equal '1' a valid birth weight must be entered as numeric. The 2 leftmost bytes represent the number of pounds. Valid codes are 00 thru 17. The 2 rightmost bytes rep-</p>

		<p>Messages:</p> <p>8376- ENTER VALUES '00' THRU '16'.</p> <p>8377- ENTER VALUES '00' THRU '17'.</p>	<p>resent the number of ounces. Valid codes are 00 thru 16, otherwise an entry is not required.</p> <p>ADD (C/U)</p> <p>Enter the birth weight of the first infant.</p> <p>UPDATE (C/U)</p> <p>Enter the change to the birth weight of the first infant.</p>
17	<p>BIRTHDATE</p> <p>Maternal Outcome Infant #1 Birth Date (DE8433)</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1' a valid birth date must be entered as:</p> <p>Valid date;</p> <p>Cannot be less than 07011989;</p> <p>Cannot be greater than the Current Date.</p> <p>The difference between the birthdate of the first and second and third infant may not exceed 2 days.</p> <p>Messages:</p> <p>8055- ENTER A VALID DATE.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p>	<p>The birth date of the first infant.</p> <p>The birth date of the first infant. If Maternal Outcome, equal '1' a valid birth date must be entered as: MMDDCCYY. The date cannot be less than 07011989 or greater than the current date. The difference between the birthdate of the first and second and third infant may not exceed 2 days.</p> <p>ADD (C/U)</p> <p>Enter the birth date of the first infant.</p> <p>UPDATE (C/U) Enter the change to the birth date of the first infant.</p>
18	<p>INFANT #2 WEIGHT</p> <p>Maternal Outcome Infant #2 Birth Weight (DE8436)</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1' and the information for the first infant is present a valid birth weight may be entered as:</p> <p>Numeric.</p> <p>The 2 leftmost bytes represent the number of pounds. Valid values are 00 thru 17. The 2 rightmost bytes represent the number of ounces. Valid values are 00 thru 16, otherwise an entry is not required.</p> <p>Messages:</p> <p>8376- ENTER VALUES</p>	<p>The birth weight of the second infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces.</p> <p>The birth weight of the second infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces. If Maternal Outcome, equal '1' a valid birth weight must be entered as numeric. The 2 leftmost bytes represent the number of pounds. Valid codes are 00 thru 17. The 2 rightmost bytes represent the number of ounces. Valid codes are 00 thru 16, otherwise an entry is not required.</p> <p>ADD (C/U)</p> <p>Enter the birth weight of the second</p>

		'00' THRU '16'. 8377- ENTER VALUES '00' THRU '17'.	infant. UPDATE (C/U) Enter the change to the birth weight of the second infant.
19	BIRTHDATE Maternal Outcome Infant #2 Birth Date (DE8437)	Edits: If Maternal Outcome, DE 8431 equal '1' and the information for the first infant is present a valid birth date may be entered as: Numeric. If any of the fields for the second infant are entered, then all of the fields must be entered. Valid date; Cannot be less than 07011989; Cannot be greater than the Current Date. The difference between the birthdate of the first and second and third infant may not exceed 2 days. Messages: 8055- ENTER A VALID DATE. 8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	The birth date of the second infant.  The birth date of the second infant. If Maternal Outcome, equal '1' a valid birth date must be entered as: MMDDCCYY. The date cannot be less than 07011989 or greater than the current date. The difference between the birthdate of the first and second and third infant may not exceed 2 days. ADD (C/U) Enter the birth date of the second infant. UPDATE (C/U) Enter the change to the birth date of the second infant.
20	INFANT #3 WEIGHT Maternal Outcome Infant # 3 Birth Weight (DE8390)	Edits: If Maternal Outcome, DE 8431 equal '1' and the information for the second infant is present a valid birth weight may be entered as: Numeric. The 2 leftmost bytes represent the number of pounds. Valid values are 00 thru 17. The 2 rightmost bytes represent the number of ounces. Valid values are 00 thru 16, otherwise an	The birth weight of the third infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces.  The birth weight of the third infant. High-order two (2) positions are pounds and low-order two (2) positions are ounces. If Maternal Outcome, equal '1' a valid birth weight must be entered as numeric. The 2 leftmost bytes represent the number of pounds. Valid codes are 00 thru 17. The 2 rightmost bytes represent the number of ounces. Valid codes are 00 thru 16, otherwise an entry is not required.

		<p>entry is not required.</p> <p>If any of the fields for the third infant are entered, then all of the fields must be entered.</p> <p>Messages:</p> <p>pounds - ENTER VALUES - 00 THRU 17</p> <p>ounces - ENTER VALUES - 00 THRU 16</p>	<p>ADD (C/U)</p> <p>Enter the birth weight of the third infant.</p> <p>UPDATE (C/U)</p> <p>Enter the change to the birth weight of the third infant.</p>
21	<p>BIRTHDATE</p> <p>Maternal Outcome Infant # 3 Birth Date (DE8391)</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1' and the information for the third infant is present a valid birth weight may be entered as: Numeric.</p> <p>The 2 leftmost bytes represent the number of pounds. Valid values are 00 thru 17. The 2 rightmost bytes represent the number of ounces. Valid values are 00 thru 16, otherwise an entry is not required.</p> <p>If any of the fields for the third infant are entered, then all of the fields must be entered.</p> <p>Messages:</p> <p>8055- ENTER A VALID DATE.</p> <p>8088- DATE IS INVALID. FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.</p>	<p>The birth date of the third infant.</p> <p>The birth date of the third infant. If Maternal Outcome, equal '1' a valid birth date must be entered as: MMDDCCYY. The date cannot be less than 07011989 or greater than the current date. The difference between the birthdate of the first and second and third infant may not exceed 2 days.</p> <p>ADD (C/U)</p> <p>Enter the birth date of the third infant.</p> <p>UPDATE (C/U)</p> <p>Enter the change to the birth date of the third infant.</p>
22	<p>APGAR 1 MINUNTE</p> <p>Maternal Outcome Infant #1 APGAR 1 Minute (DE8434)</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required.</p> <p>Numeric. 00 thru 10, 99.</p> <p>Messages:</p>	<p>The APGAR 1 Minute score for the first infant.</p> <p>The APGAR 1 Minute score for the first infant. If Maternal Outcome, equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required. Use the On-line HELP system to find valid codes for this field.</p>

		8379- MUST BE '00' THRU '10' OR '99'.	ADD (C/U) Enter the APGAR 1 Minute score for the first infant. UPDATE (C/U) Enter the change to the APGAR 1 Minute score for the first infant.
23	5 MINUTE Maternal Outcome Infant #1 APGAR 5 Minute (DE8435)	Edits: If Maternal Outcome, DE 8431 equal '1' then a valid APGAR 5 min score must be entered, otherwise the entry is not required. Numeric. 00 thru 10, 99. Messages: 8379- MUST BE '00' THRU '10' OR '99'.	The APGAR 5 Minute score for the first infant.  The APGAR 5 Minute score for the first infant. If Maternal Outcome, equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required. Use the On-line HELP system to find valid codes for this field. ADD (C/U) Enter the APGAR 5 Minute score for the first infant. UPDATE (C/U) Enter the change to the APGAR 5 Minute score for the first infant.
24	APGAR 1 MINUTE Maternal Outcome Infant #2 APGAR 1 Minute (DE8438)	Edits: If Maternal Outcome, DE 8431 equal '1' and the information for the first infant is present, then a valid APGAR 1 min score may be entered, otherwise the entry is not required. If any of the fields for the second infant are entered, then all of the fields must be entered. Numeric. 00 thru 10, 99. Messages: 8379- MUST BE '00' THRU '10' OR '99'.	The APGAR 1 Minute score for the second infant.  The APGAR 1 Minute score for the second infant. If Maternal Outcome, equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required. Use the On-line HELP system to find valid codes for this field. ADD (C/U) Enter the APGAR 1 Minute score for the second infant. UPDATE (C/U) Enter the change to the APGAR 1 Minute score for the second infant.
25	5 MINUTE Maternal Outcome Infant #2 APGAR 5 Minute (DE8439)	Edits: If Maternal Outcome, DE 8431 equal '1' and the information for the first infant is present, then a valid APGAR 5 min score may be entered, otherwise the entry is not required.	The APGAR 5 Minute score for the second infant.  The APGAR 5 Minute score for the second infant. If Maternal Outcome, equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required. Use the On-line

		<p>If any of the fields for the second infant are entered, then all of the fields must be entered.</p> <p>Numeric. 00 thru 10, 99.</p> <p>Messages: 8379- MUST BE '00' THRU '10' OR '99'.</p>	<p>HELP system to find valid codes for this field.</p> <p>ADD (C/U) Enter the APGAR 5 Minute score for the second infant.</p> <p>UPDATE (C/U) Enter the change to the APGAR 5 Minute score for the second infant.</p>
26	<p>APGAR 1 MINUNTE</p> <p>Maternal Outcome Infant # 3 APGAR 1 Minute (DE8392)</p>	<p>Edits: If Maternal Outcome, DE 8431 equal '1' and the information for the second infant is present, then a valid APGAR 1 min score may be entered, otherwise the entry is not required. If any of the fields for the third infant are entered, then all of the fields must be entered.</p> <p>Numeric. 00 thru 10, 99.</p> <p>Messages: 8379- MUST BE '00' THRU '10' OR '99'.</p>	<p>The APGAR 1 Minute score for the third infant.</p> <p>The APGAR 1 Minute score for the third infant. If Maternal Outcome, equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (C/U) Enter the APGAR 1 Minute score for the third infant.</p> <p>UPDATE (C/U) Enter the change to the APGAR 1 Minute score for the third infant.</p>
27	<p>5 MINUTE</p> <p>Maternal Outcome Infant # 3 APGAR 5 Minute (DE8393)</p>	<p>Edits: If Maternal Outcome, DE 8431 equal '1' and the information for the second infant is present, then a valid APGAR 5 min score may be entered, otherwise the entry is not required. If any of the fields for the third infant are entered, then all of the fields must be entered.</p> <p>Numeric. 00 thru 10, 99.</p> <p>Messages: 8379- MUST BE '00' THRU '10' OR '99'.</p>	<p>The APGAR 5 Minute score for the third infant.</p> <p>The APGAR 5 Minute score for the third infant. If Maternal Outcome, equal '1' then a valid APGAR 1 min score must be entered, otherwise the entry is not required. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (C/U) Enter the APGAR 5 Minute score for the third infant.</p> <p>UPDATE (C/U) Enter the change to the APGAR 5 Minute score for the third infant.</p>
28	<p>WEEKS GESTATION</p> <p>Maternal Outcome Weeks Gestation (DE8440)</p>	<p>Edits: Numeric, 00 - 52, 99</p>	<p>The number of weeks of gestation at the time of birth.</p> <p>The number of weeks of gestation at the</p>

		<p>Messages:</p> <p>8387- ENTER VALUE '00' THRU '40'.</p>	<p>time of birth. Use the On-line HELP system to find valid codes for this field.</p> <p>ADD (O/U)</p> <p>Enter the number of weeks of gestation at the time of birth.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the number of weeks of gestation at the time of birth.</p>
29	<p>INFANT RISK SCREEN: COMPLETED</p> <p>Maternal Outcome Risk Completed (DE8441)</p>	<p>Edits:</p> <p>'Y', 'N', or 'U'</p> <p>If 0, 1 or 9 is data entered, the editing program will convert the data element to 'N', 'Y' or 'U', respectively.</p> <p>Messages:</p> <p>8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>Indicates whether or not the physician has completed a Risk Screen Report.</p> <p>Indicates whether or not the physician has completed a Risk Screen Report. Valid codes are 'Y', 'N', 'U', or blank. If 0, 1 or 9 is data entered, the editing program will convert this data to 'N', 'Y' or 'U' on the MICC Master File. This field applies to Maternal Case types only and will not be written to the MICC Master File if data entered on an Infant Case Type.</p> <p>ADD (O/U)</p> <p>Enter the code which reflects whether or not the physician has completed a Risk Screen Report.</p> <p>UPDATE (O/U)</p> <p>Enter the change to the code which reflects whether or not the physician has completed a Risk Screen Report.</p>
30	<p>INFANT RISK SCREEN: AT RISK</p> <p>Maternal Outcome Infant at Risk (DE8442)</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1', then an entry is required, otherwise the entry is not required.</p> <p>If COMPLETED, DE 8441 equal 'Y', then values are 'N', 'Y' must be entered, otherwise field may be left blank.</p> <p>If '0', '1', '8' or '9' are data entered, the editing program will convert these values to 'N', 'Y', blank or 'U', respectively.</p> <p>Messages:</p> <p>ENTER VALID VALUE</p>	<p>Indicates whether or not the infant was classified as 'at risk'.</p> <p>Indicates whether or not the infant was classified as 'at risk'. If Maternal Outcome, equal '1', then an entry is required, otherwise the entry is not required. If COMPLETED, equal 'Y', then codes are 'N', 'Y' or 'U' must be entered, otherwise field may be left blank. If '0', '1', '8' or '9' are data entered, the editing program will convert these codes to 'N', 'Y', blank or 'U', respectively.</p> <p>ADD (C/U)</p> <p>Enter the code which indicates whether or not the infant was classified as 'at risk'.</p>

		Y/N	UPDATE (C/U) Enter the change to the code which indicates whether or not the infant was classified as 'at risk'.
31	<p>INFANT RISK SCREEN: REFER TO MICC</p> <p>Maternal Outcome Infant Referred to MICC (DE8443)</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1', then an entry is required, otherwise the entry is not required.</p> <p>If COMPLETED, DE 8441 equal 'Y', then values are 'N', 'Y' must be entered, otherwise field may be left blank.</p> <p>If '0', '1', '8' or '9' are data entered, the editing program will convert these values to 'N', 'Y', blank or 'U', respectively.</p> <p>Messages:</p> <p>ENTER VALID VALUE Y/N</p>	<p>Indicates whether or not the infant was referred to care coordination.</p> <p>Indicates whether or not the infant was referred to care coordination. If Maternal Outcome, equal '1', then an entry is required, otherwise the entry is not required. If COMPLETED, equal 'Y', then values are 'N', 'Y' or 'U' must be entered, otherwise field may be left blank. If '0', '1', '8' or '9' are data entered, the editing program will convert these values to 'N', 'Y', blank or 'U', respectively.</p> <p>ADD (C/U) Enter the code which indicates whether or not the infant was referred to care coordination.</p> <p>UPDATE (C/U) Enter the change to the code which indicates whether or not the infant was referred to care coordination.</p>
32	<p>INFANT RISK SCREEN: MORBIDITY</p> <p>Maternal Outcome Infant Morbidity (DE8497)</p>	<p>Edits:</p> <p>'Y', 'N', 'U',</p> <p>If '0', '1', or '9' are data entered, the editing program will convert these values to 'N', 'Y' respectively.</p> <p>Messages:</p> <p>ENTER VALID VALUE Y/N</p>	<p>This field reflects whether or not the mother's infant thrived after birth.</p> <p>This field reflects whether or not the mother's infant thrived after birth. Valid codes are 'Y', 'N', or 'U'. If '0', '1', or '9' are data entered, the editing program will convert these values to 'N', 'Y' or 'U', respectively.</p> <p>ADD (O/U) Enter the code which reflects whether or not the mother's infant thrived after birth.</p> <p>UPDATE (O/U) Enter the change to the code which reflects whether or not the mother's infant thrived after birth.</p>
33	<p>OTHER SERVICES: INFANT: EPSDT</p> <p>Maternal Outcome Infant</p>	<p>Edits:</p> <p>If Maternal Outcome, DE 8431 equal '1', then an entry</p>	<p>Indicates whether or not the infant in receiving EPSDT services.</p>

	<p>EPSDT (DE8444)</p>	<p>is required, otherwise the entry is not required. Valid values are: Y', 'N' If '0', '1' are data entered, the editing program will convert these values to 'N', 'Y' respectively. Messages: ENTER VALID VALUE Y/N</p>	<p>Indicates whether or not the infant in receiving EPSDT services. If Maternal Outcome, equal '1', then an entry is required, otherwise the entry is not required. Valid codes are: Y', 'N', or 'U'. If '0', '1', or '9' are data entered, the editing program will convert these values to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indicates whether or not the infant in receiving EPSDT services. UPDATE (O/U) Enter the change to the code which indicates whether or not the infant in receiving EPSDT services.</p>
34	<p>OTHER SERVICES: INFANT: WIC Maternal Outcome Infant WIC (DE8445)</p>	<p>Edits: If Maternal Outcome, DE 8431 equal '1', then an entry is required, otherwise the entry is not required. Valid values are: Y', 'N' If '0', '1' are data entered, the editing program will convert these values to 'N', 'Y' respectively. Messages: ENTER VALID VALUE Y/N</p>	<p>Indicates whether or not the infant is receiving WIC services.  Indicates whether or not the infant is receiving WIC services. If Maternal Outcome, equal '1', then an entry is required, otherwise the entry is not required. Valid codes are: Y', 'N', or 'U'. If '0', '1', or '9' are data entered, the editing program will convert these values to 'N', 'Y' or 'U', respectively. ADD (O/U) Enter the code which indicates whether or not the infant is receiving WIC services. UPDATE (O/U) Enter the change to the code which indicates whether or not the infant is receiving WIC services.</p>
35	<p>OTHER SERVICES: INFANT: CARE BEGAN Maternal Outcome Weeks Care Began (DE8446)</p>	<p>Edits: Numeric. 00 - 40. Messages: ENTER VALID VALUE - 00 THRU 40</p>	<p>The weeks of gestation when the mother began receiving prenatal care.  The weeks of gestation when the mother began receiving prenatal care. Use the On-line HELP system to find valid codes for this field. ADD (O/U) Enter the weeks of gestation when the mother began receiving prenatal care. UPDATE (O/U) Enter the change to the weeks of gest-</p>

			ation when the mother began receiving prenatal care.
36	OTHER SERVICES: MOTHER: # PRENATAL VISITS  Maternal Outcome Prenatal Visits (DE8447)	Edits: Numeric. 00 - 99  Messages: ENTER VALID VALUES - 00 THRU 99	The total number of prenatal visits by the mother during the pregnancy.  The total number of prenatal visits by the mother during the pregnancy. Use the On-line HELP system to find valid cods for this field. ADD (O/U) Enter the total number of prenatal visits by the mother during the pregnancy. UPDATE (O/U) Enter the change to the total number of prenatal visits by the mother during the pregnancy.
37	OTHER SERVICES: MOTHER: WIC  Maternal Outcome WIC (DE8448)	Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', respectively.  Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	Indicates whether or not the mother received WIC supplemental food during pregnancy.  Indicates whether or not the mother received WIC supplemental food during pregnancy. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', respectively. ADD (R/U) Enter the code which indicates whether or not the mother received WIC supplemental food during pregnancy. UPDATE (R/U) Enter the change to the code which indicates whether or not the mother received WIC supplemental food during pregnancy.
38	OTHER SERVICES: MOTHER: POSTPARTUM/FAMILY PLAN  Maternal Outcome Family Planning (DE8449)	Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', respectively.  Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	Indicates whether or not the mother received a family planning or a postpartum examination.  Indicates whether or not the mother received a family planning or a postpartum examination. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', respectively.

			<p>ADD (R/U) Enter the code which indicates whether or not the mother received a family planning or a postpartum examination.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother received a family planning or a postpartum examination.</p>
39	<p>1 CLIENT NEEDS (CHILD CARE) Maternal Outcome Client Needs - Child Care (DE8413)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.N</p>	<p>This field indicates whether or not the mother's need for child care was met.</p> <p>This field indicates whether or not the mother's need for child care was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for child care was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for child care was met.</p>
40	<p>2 (CLIENT NEEDS - FOOD STAMPS) Maternal Outcome Client Needs - Food Stamps (DE8414)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for food stamps was met.</p> <p>This field indicates whether or not the mother's need for food stamps was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for food stamps was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for food stamps was met.</p>
41	<p>3 (CLIENT NEEDS - HOUSING) Maternal Outcome Client</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program pro-</p>	<p>This field indicates whether or not the mother's need for housing was met.</p>

<p>Needs - Housing (DE8415)</p>	<p>cessing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for housing was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for housing was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for housing was met.</p>
<p>42 4 (CLIENT NEEDS - NUTRITION SERVICES) Maternal Outcome Client Needs - Nutrition Services (DE8425)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for nutrition services was met.</p> <p>This field indicates whether or not the mother's need for nutrition services was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for nutrition services was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for nutrition services was met.</p>
<p>43 5 (CLIENT NEEDS - HOMEMAKER SERVICES) Maternal Outcome Client Needs - Homemaker Services (DE8426)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for homemaker services was met.</p> <p>This field indicates whether or not the mother's need for homemaker services was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for homemaker services was met.</p> <p>UPDATE (R/U)</p>

			Enter the change to the code which indicates whether or not the mother's need for homemaker services was met.
44	6 (CLIENT NEEDS - HOME HEALTH) Maternal Outcome Client Needs - Home Health Services (DE8427)	Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the mother's need for home health services was met.  This field indicates whether or not the mother's need for home health services was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File. ADD (R/U) Enter the code which indicates whether or not the mother's need for home health services was met. UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for home health services was met.
45	7 (CLIENT NEEDS - EMPLOYMENT) Maternal Outcome Client Needs - Employment (DE8453)	Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File. Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	This field indicates whether or not the mother's need for employment was met.  This field indicates whether or not the mother's need for employment was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File. ADD (R/U) Enter the code which indicates whether or not the mother's need for employment was met. UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for employment was met.
46	8 (CLIENT NEEDS - SCHOOL ENROLLMENT) Maternal Outcome Client Needs - School Enrollment (DE8454)	Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File. Messages: 8380- VALUE MUST BE	This field indicates whether or not the mother's need for school enrollment was met.  This field indicates whether or not the mother's need for school enrollment was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program pro-

		'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.	<p>cessing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for school enrollment was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for school enrollment was met.</p>
47	<p>9 (CLIENT NEEDS - PSYCHOLOGICAL NEEDS)</p> <p>Maternal Outcome Client Needs - Psychological Counseling (DE8455)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's psychological needs were met.</p> <p>This field indicates whether or not the mother's psychological needs were met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's psychological needs were met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's psychological needs were met.</p>
48	<p>10 (CLIENT NEEDS - JOB TRAINING)</p> <p>Maternal Outcome Client Needs - Job Training (DE8456)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for job training was met.</p> <p>This field indicates whether or not the mother's need for job training was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for job training was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for job training was met.</p>
49	<p>11 (CLIENT NEEDS - TRANSPORTATION)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is</p>	<p>This field indicates whether or not the mother's need for transportation was</p>

	Maternal Outcome Client Needs - Transportation (DE8463)	<p>data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>met.</p> <p>This field indicates whether or not the mother's need for transportation was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for transportation was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for transportation was met.</p>
50	12 (CLIENT NEEDS - SUBSTANCE ABUSE TREATMENT) Maternal Outcome Client Needs - Substance Abuse Treatment (DE8464)	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for substance abuse treatment was met.</p> <p>This field indicates whether or not the mother's need for substance abuse treatment was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for substance abuse treatment was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for substance abuse treatment was met.</p>
51	13 (CLIENT NEEDS - SMOKING CESSATION) Maternal Outcome Client Needs - Smoking Cessation (DE8465)	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for smoking cessation was met.</p> <p>This field indicates whether or not the mother's need for smoking cessation was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p>

			<p>ADD (R/U) Enter the code which indicates whether or not the mother's need for smoking cessation was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for smoking cessation was met.</p>
52	<p>14 (CLIENT NEEDS - GLUCOSE MONITORING)</p> <p>Maternal Outcome Client Needs - Glucose Monitoring (DE8483)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for glucose monitoring was met.</p> <p>This field indicates whether or not the mother's need for glucose monitoring was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for glucose monitoring was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for glucose monitoring was met.</p>
53	<p>15 (CLIENT NEEDS - PARENTING)</p> <p>Maternal Outcome Client Needs - Parenting (DE8485)</p>	<p>Edits: 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>Messages: 8380- VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE.</p>	<p>This field indicates whether or not the mother's need for parenting was met.</p> <p>This field indicates whether or not the mother's need for parenting was met. Valid codes are 'Y', 'N', or 'U'. If 0, 1, or 9 is data entered. Program processing will convert this data to 'N', 'Y' or 'U', on the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the mother's need for parenting was met.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the mother's need for parenting was met.</p>
54	<p>1 SUBSTANCE ABUSE AT DELIVERY WEEKLY (-ALCOHOL)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages:</p>	<p>Indicates the number of times per week alcohol was abused by the mother during delivery.</p>

	Maternal Outcome Weekly Alcohol Abuse Frequency at Delivery (DE8510)	ENTER VALID VALUES - 00 THRU 99	Indicates the number of times per week alcohol was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per week alcohol was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per week alcohol was abused by the mother during delivery.
55	1 SUBSTANCE ABUSE AT DELIVERY DAILY (ALCOHOL) Maternal Outcome Daily Alcohol Abuse Frequency at Delivery (DE8501)	Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99	Indicates the number of times per day alcohol was abused by the mother during delivery.  Indicates the number of times per day alcohol was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per day alcohol was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per day alcohol was abused by the mother during delivery.
56	2 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - COCAINE) Maternal Outcome Weekly Cocaine Abuse Frequency at Delivery (DE8511)	Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99	Indicates the number of times per week cocaine was abused by the mother during delivery.  Indicates the number of times per week cocaine was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per week cocaine was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per week cocaine was abused by the mother dur-

			ing delivery.
57	<p>2 (SUBSTANCE ABUSE AT DELIVERY DAILY - COCAINE)</p> <p>Maternal Outcome Daily Cocaine Abuse Frequency at Delivery (DE8502)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day cocaine was abused by the mother during delivery.</p> <p>Indicates the number of times per day cocaine was abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per day cocaine was abused by the mother during delivery.</p> <p>UPDATE (O/U) Enter the change to the code which indicates the number of times per day cocaine was abused by the mother during delivery.</p>
58	<p>3 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - NARCOTICS)</p> <p>Maternal Outcome Weekly Narcotics Abuse Frequency at Delivery (DE8512)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week narcotics were abused by the mother during delivery.</p> <p>Indicates the number of times per week narcotics were abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per week narcotics were abused by the mother during delivery.</p> <p>UPDATE (O/U) Enter the change to the code which indicates the number of times per week narcotics were abused by the mother during delivery.</p>
59	<p>3 (SUBSTANCE ABUSE AT DELIVERY DAILY - NARCOTICS)</p> <p>Maternal Outcome Daily Narcotic Abuse Frequency at Delivery (DE8503)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day narcotics were abused by the mother during delivery.</p> <p>Indicates the number of times per daily narcotics were abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per daily narcotics were</p>

			<p>abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per daily narcotics were abused by the mother during delivery.</p>
60	<p>4 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - MARIJAUNA) Maternal Outcome Weekly Marijuana Abuse Frequency at Delivery (DE8513)</p>	<p>Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week marijuana was abused by the mother during delivery.  Indicates the number of times per week marijuana was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per week marijuana was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per week marijuana was abused by the mother during delivery.</p>
61	<p>4 (SUBSTANCE ABUSE AT DELIVERY DAILY - MARIJAUNA) Maternal Outcome Daily Marijuana Abuse Frequency at Delivery (DE8504)</p>	<p>Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day Marijuana was abused by the mother during delivery.  Indicates the number of times per day marijuana was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per day marijuana was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per day marijuana was abused by the mother during delivery.</p>
62	<p>5 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - SEDATIVES) Maternal Outcome Weekly Sedatives Abuse</p>	<p>Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week sedatives were abused by the mother during delivery.  Indicates the number of times per week sedatives were abused by the mother</p>

	<p>Frequency at Delivery (DE8514)</p>		<p>during delivery. Valid codes are 00-99 or blank.  ADD (O/U)  Enter the code which indicates the number of times per week sedatives were abused by the mother during delivery.  UPDATE (O/U)  Enter the change to the code which indicates the number of times per week sedatives were abused by the mother during delivery.</p>
63	<p>5 (SUBSTANCE ABUSE AT DELIVERY DAILY - SEDATIVES)  Maternal Outcome Daily Sedatives Abuse Frequency at Delivery (DE8505)</p>	<p>Edits:  00-99 or blank.  Messages:  ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day sedatives were abused by the mother during delivery.  Indicates the number of times per day sedatives were abused by the mother during delivery. Valid codes are 00-99 or blank.  ADD (O/U)  Enter the code which indicates the number of times per day sedatives were abused by the mother during delivery.  UPDATE (O/U)  Enter the change to the code which indicates the number of times per day sedatives were abused by the mother during delivery.</p>
64	<p>6 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - AMPHETAMINES)  Maternal Outcome Weekly Amphetamines Abuse Frequency at Delivery (DE8515)</p>	<p>Edits:  00-99 or blank.  Messages:  ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week amphetamines were abused by the mother during delivery.  Indicates the number of times per week amphetamines were abused by the mother during delivery. Valid codes are 00-99 or blank.  ADD (O/U)  Enter the code which indicates the number of times per week amphetamines were abused by the mother during delivery.  UPDATE (O/U)  Enter the change to the code which indicates the number of times per week amphetamines were abused by the mother during delivery.</p>

65	<p>6 (SUBSTANCE ABUSE AT DELIVERY DAILY - AMPHETAMINES)</p> <p>Maternal Outcome Daily Amphetamines Abuse Frequency at Delivery (DE8506)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day amphetamines were abused by the mother during delivery.</p> <p>Indicates the number of times per day amphetamines were abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per day amphetamines were abused by the mother during delivery.</p> <p>UPDATE (O/U) Enter the change to the code which indicates the number of times per day amphetamines were abused by the mother during delivery.</p>
66	<p>7 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - INHALANTS)</p> <p>Maternal Outcome Weekly Inhalants Abuse Frequency at Delivery (DE8516)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week inhalants were abused by the mother during delivery.</p> <p>Indicates the number of times per week inhalants were abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per week inhalants were abused by the mother during delivery.</p> <p>UPDATE (O/U) Enter the change to the code which indicates the number of times per week inhalants were abused by the mother during delivery.</p>
67	<p>7 (SUBSTANCE ABUSE AT DELIVERY DAILY - INHALANTS)</p> <p>Maternal Outcome Daily Inhalants Abuse Frequency at Delivery (DE8507)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day inhalants were abused by the mother during delivery.</p> <p>Indicates the number of times per day inhalants were abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per day inhalants were</p>

			<p>abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per day inhalants were abused by the mother during delivery.</p>
68	<p>8 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - TOBACCO) Maternal Outcome Weekly Tobacco Abuse Frequency at Delivery (DE8517)</p>	<p>Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week tobacco was abused by the mother during delivery.  Indicates the number of times per week tobacco was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per week tobacco was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per week tobacco was abused by the mother during delivery.</p>
69	<p>8 (SUBSTANCE ABUSE AT DELIVERY DAILY - TOBACCO) Maternal Outcome Daily Tobacco Abuse Frequency at Delivery (DE8508)</p>	<p>Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day tobacco was abused by the mother during delivery.  Indicates the number of times per day tobacco was abused by the mother during delivery. Valid codes are 00-99 or blank. ADD (O/U) Enter the code which indicates the number of times per day tobacco was abused by the mother during delivery. UPDATE (O/U) Enter the change to the code which indicates the number of times per day tobacco was abused by the mother during delivery.</p>
70	<p>9 (SUBSTANCE ABUSE AT DELIVERY WEEKLY - OTHER) Maternal Outcome Weekly Other Substance Abuse Frequency at</p>	<p>Edits: 00-99 or blank. Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per week other substances were abused by the mother during delivery.  Indicates the number of times per week other substances were abused by the</p>

	Delivery (DE8518)		<p>mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per week other substances were abused by the mother during delivery.</p> <p>UPDATE (O/U) Enter the change to the code which indicates the number of times per week other substances were abused by the mother during delivery.</p>
71	<p>9 (SUBSTANCE ABUSE AT DELIVERY DAILY - OTHER)</p> <p>Maternal Outcome Daily Other Substance Abuse Frequency at Delivery (DE8509)</p>	<p>Edits: 00-99 or blank.</p> <p>Messages: ENTER VALID VALUES - 00 THRU 99</p>	<p>Indicates the number of times per day other substances were abused by the mother during delivery.</p> <p>Indicates the number of times per day other substances were abused by the mother during delivery. Valid codes are 00-99 or blank.</p> <p>ADD (O/U) Enter the code which indicates the number of times per day other substances were abused by the mother during delivery.</p> <p>UPDATE (O/U) Enter the change to the code which indicates the number of times per day other substances were abused by the mother during delivery.</p>
72	<p>(COMMENTS)</p> <p>Maternal Outcome Weekly Substance Abuse Type Description (DE8387)</p>	<p>Edits: None.</p>	<p>This field contains the name of the substance used by the mother on a weekly basis and is added to the MICC Master File from the Pregnancy Outcome Report.</p> <p>This field contains the name of the substance used by the mother on a weekly basis and is added to the MICC Master File from the Pregnancy Outcome Report.</p> <p>ADD (O/U) Enter the name of the substance used by the mother on a weekly basis and is added to the MICC Master File from the Pregnancy Outcome Report.</p>

			<p>UPDATE(O/U) Enter the change to the name of the substance used by the mother on a weekly basis and is added to the MICC Master File from the Pregnancy Outcome Report.</p>
73	<p>(COMMENTS) Maternal Outcome Daily Substance Abuse Type Description (DE8386)</p>	<p>Edits: None.</p>	<p>This field contains the description or name of the substance used by the mother on a daily basis and is entered into the MICC Master File from the Pregnancy Outcome Report.</p> <p>This field contains the description or name of the substance used by the mother on a daily basis and is entered into the MICC Master File from the Pregnancy Outcome Report.</p> <p>ADD (O/U) Enter the description or name of the substance used by the mother on a daily basis and is entered into the MICC Master File from the Pregnancy Outcome Report.</p> <p>UPDATE (O/U) Enter the change to the description or name of the substance used by the mother on a daily basis and is entered into the MICC Master File from the Pregnancy Outcome Report.</p>
75	<p>COORDINATOR SIGNATURE? Maternal Outcome Coordinator Signature Indicator (DE8388)</p>	<p>Edits: Must be 'Y' to update and add an Assessment Record to the MICC Master File.</p> <p>Messages: 8510- MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED.</p>	<p>This field indicates whether or not the Pregnancy Outcome Report was signed by the MICC Coordinator.</p> <p>This field indicates whether or not the Pregnancy Outcome Report was signed by the MICC Coordinator. Must be 'Y' to update and add an Assessment Record to the MICC Master File.</p> <p>ADD (R/U) Enter the code which indicates whether or not the Pregnancy Outcome Report was signed by the MICC Coordinator.</p> <p>UPDATE (R/U) Enter the change to the code which indicates whether or not the Pregnancy Outcome Report was signed by the MICC Coordinator.</p>

76	ACTION (DE0000)	Edits: Displays whether the screen is being used for INQUIRY, UPDATE, or ADDITION.	Displays what the screen is being used for - INQUIRY.  Displays whether the screen is being used for UPDATE, ADDITION or INQUIRY. System Displayed.
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NAVIGATION		
MICC Maternal Expanded Services - Pregnancy Outcome Report (MI-S-007)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
CLEAR FORM	Clears the screen of any newly entered data.	N/A
DELETE	Allows the user to delete the Pregnancy Outcome Report information for the member displayed on the screen.	N/A
ELIG	Branches to the Eligibility Data Screen.	RS-S-015 (B)
ENTER	Processes the entered data.	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (B)
MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)
MICC	Allows navigation to the MICC Maternal Expanded Services Maternity MICC Record - Page 2 screen.	MI-S-006 (B)
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Returns to the previous screen	N/A
RISK	Allows navigation to the MICC Maternal Expanded Services Maternity Risk Screen - Page 1.	MI-S-005 (B)
UPDATE	Allows the user to update the Pregnancy Outcome Report information for the member displayed on the screen.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8499	CHOOSE THE DELETE KEY TO DELETE RECORD	Choose the Delete button to delete the record.

8020	CHOOSE UPDATE TO MODIFY THIS RECORD	Choose the Update button.
8511	CLOSE DATE GREATER THAN THE CURRENT DATE	Enter a closed date that falls before the current date. See the field definitions for explanation of valid end and begin dates.
68	DATA REFRESHED	Information message.
8088	DATE IS INVALID FORMAT MUST BE EITHER MMDDCCYY OR MM/DD/CCYY.	Enter a valid date. See the field definitions for specifications on the date to be entered.
8001	ENROLLEE ID IS INVALID	Enter a valid enrollee ID.
8021	ENROLLEE ID NOT FOUND IN THE DATABASE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8014	ENROLLEE ID NOT ON FILE	Check the Enrollee ID for valid formatting and try the task again. See the field definitions for valid Enrollee ID specifications.
8351	ENROLLEE NUMBER NOT FOUND ON MICC MASTER FILE	The Enrollee ID number entered is not found on the MICC Master Database. Correct the Enrollee ID or cancel the transaction.
8055	ENTER A VALID DATE	Enter a Valid Date. See the field definitions for formatting and requirements for this field.
8096	ENTER A VALID PROVIDER ID	Enter a Valid Provider ID. See the field definitions for formatting/ requirements for this field.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8488	ENTER ENROLLEE ID FOR PROCESSING	Research the field definitions and retry the enrollee ID. Enter a valid enrollee ID.
8387	ENTER VALUE '00' THRU '40'	Enter a value of '00' thru '40'. See the field definitions for explanation of valid values.
8386	ENTER VALUE '1', '2', '3', '4', OR '5'	Enter a numeric valid between '1' and '5'. See the field definitions for explanation of valid codes.
8376	ENTER VALUES '00' THRU '16'	Enter a value of '00' thru '16'. See the field definitions for explanation of valid values.
8377	ENTER VALUES '00' THRU '17'	Enter a value of '00' thru '17'. See the field definitions for explanation of valid values.
10	ERROR OCCURRED AT RECEIVE; TRANSACTION CANCELLED	Retry the transaction, if necessary.
8016	ERROR WHILE ACCESSING	Contact ACS Operations for assistance.
8017	ERROR WHILE UPDATING	Information message.
139	FUNCTION IS INVALID	Information message.
8089	LAST SCREENING DATE LESS	Date is prior to start of the MICC (Baby Care) Pro-

	THAN 07/01/1989	gram. Check Screening Date. See the field definitions for formatting and requirements for this field.
8091	LAST SCREENING DATE MUST BE LESS THAN MICC/OUTCOME LAST SCREENING DATE	Check Screen Date. See the field definitions for formatting/requirements for this field.
8451	LOG FILE NOT OPEN	Information message.
8350	MICC MASTER FILE NOT OPEN	Information message.
8379	MUST BE '00' THRU '10' OR '99'	Enter a value of '00' thru '10' or '99'. See the field definitions for explanation of valid values.
8510	MUST BE 'Y'; COORDINATOR SIGNATURE REQUIRED	Enter 'Y' in Coordinator Signature field. See the field definitions for formatting/requirements for this field.
8448	NO OPEN ASSESSMENTS ON FILE FOR THIS PROVIDER	Information message. No action needed.
8515	NO OUTCOME ASSESSMENT DATA ON FILE FOR THIS SEQUENCE NUMBER	Information message. No action needed.
8409	NO RECORD FOUND FOR THIS ENROLLEE AND/OR SEQUENCE NUMBER	Information message. No action needed.
8010	NO UPDATE HAS TAKEN PLACE	Information message. No action needed.
8502	PROVIDER ID IS INVALID	Information message.
8439	RECORD HAS BEEN ADDED/UPDATED	Information message. No action needed.
8097	RECORDS DISPLAYED	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.
32	UPDATE DATA AND CHOOSE ENTER	Update data, then choose the Enter button.
8383	VALUE MUST BE '00' THRU '99'	Enter a value of '00' thru '99'. See the field definitions for explanation of valid values.
8385	VALUE MUST BE 'Y' OR 'N'	Enter a valid value.
8380	VALUE MUST BE 'Y', 'N', OR 'U'; OR '1', '0', OR '9'; OR SPACE	Enter a value of 'Y', 'N' or 'U', or '1', '0' or '9' or space. See the field definitions for explanation of valid values.
8382	VALUE MUST BE, '1' THRU '9'	Enter a numeric value between '1' and '9'. See the field definitions for an explanation of these values.

## Screen Access

Choose the Outcome button on either of the following screens to access this screen:

- MICC Maternal Expanded Services - Maternity Risk screen (MI-S-005).

- MICC Maternal Expanded Services - Maternity MICC Record screen (MI-S-006).

# Screens MI-S-008 Maternal and Infant Care Information Inquiry

## General Information

This on-line inquiry screen displays information about MICC participating members, from on the MICC Master File. This screen is the only MICC information screen accessible by the Provider/Member Help-line.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	MIT008VA
MAPSET	MI008VA
TRAN ID	VBM8

SAMPLE	<b>Maternal and Infant Care Information Inquiry (MI-S-008)</b>
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			another inquiry is desired.
2	ENROLLEE NAME Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
5	LAST ACTIVITY DATE Log Date (DE5704)		Date of the action of the log.  N/A
6	CODE Log Action Type (DE5702)		A code indicating the type of action for a log.  N/A
7	DATA MICC Last Update Segment Type (DE8087)		This field represents the last segment that was updated or added on the MICC Master File.  N/A
8	CASE TYPE Case Management Pending Enrollment Indicator (DE8406)		Identifies whether or not the eligible has been enrolled in MICC or BabyCare.  N/A
9	SCREEN DATE Infant Risk Report Date (DE8452)		The date the Infant Risk Report on the recipient was completed.  N/A
10	PROV ID National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	The ID Number of the Medicaid provider who provided the Infant Risk Report on the enrollee.  N/A
11	EXPECTED DELIVERY		The recipient's expected date of confinement (delivery date) that

	Maternal Risk Expected Delivery Date (DE8412)		was entered on the Maternal Risk Screen.  N/A
12	MICC BEGIN DATE Infant MICC Report Date (DE8458)		The date the Infant MICC Report on the enrollee was completed.  N/A
13	PROVIDER ID National Provider Identifier (DE4700)	Edits: Messages:  This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	The ID Number of the Medicaid provider who provided the Infant MICC Report on the enrollee.  N/A
14	EXPECTED DELIVERY Maternal MICC Expected Delivery Date (DE8495)		The enrollee's expected delivery date from the Maternal Care Coordination form.  N/A
15	RPT Case Management (MICC) Outcome Report Received (DE8404)		Indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS.  N/A
16	END DATE Infant Outcome Report Date (DE8467)		The date the Infant Outcome Report on the recipient was completed.  N/A
17	RISK LEVEL Case Management (MICC) Level of Risk (DE8484)		Indicates the level of risk whether high, medium or low.  N/A

NAVIGATION	<b>Maternal and Infant Care Information Inquiry (MI-S-008)</b>	
Function (B) or (M)	Action	Branch To (B) or Return To (R)
ENTER	Processes the entered data.	N/A
SUB MENU	Returns to the MICC Main Menu screen.	MI-S-100 (R)
MAIN MENU	Returns to the VaMMIS Main Menu.	RF-S-010 (R)
SCROLL DOWN	Allows the user to page forward through a series of requested data.	N/A
SCROLL UP	Allows the user to page backward through a series of requested data.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
8485	ALREADY AT THE END OF THE FILE	Information message. No action needed.
8484	ALREADY AT THE START OF THE FILE	Information message. No action needed.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8355	ENROLLEE NOT FOUND IN RECIPIENT DATABASE	Information message.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
139	FUNCTION IS INVALID	Information message.
8350	MICC MASTER FILE NOT OPEN	Information message.
8062	REQUESTED DATA NOT PRESENT	Information message. No action needed.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:

1. Choose the MICC icon.

2. You see the MICC Main Menu screen (MI-S-100).

3. Select the DMAS Maternal/Infant Care Information Inquiry radio button.

4. Choose Enter.

5. You see the Maternal and Infant Care Information Provider/Recipient Help-Line screen (MI-S-008).

# Screens MI-S-009 Maternal and Infant Care Coordination Inquiry

## General Information

This on-line inquiry screen displays information about MICC participating Members that may be revised by FA-authorized operators and appropriate DMAS personnel. This data is stored on the MICC Master File and the Member Case Management Segment.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	MIT009VA
MAPSET	MI009VA
TRAN ID	VBM9

SAMPLE	<b>Maternal and Infant Care Coordination Inquiry (MI-S-009)</b>
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		MASTER DATABASE.	N/A
2	Enrollee Name Enrollee Full Name (DE3003)		The name of the individual eligible for DMAS-administered programs.  N/A
3	Last Activity Date Log Date (DE5704)		Date of the action of the log.  N/A
4	Transaction Log Action Type (DE5702)		A code indicating the type of action for a log.  N/A
5	Line Number Calculated (DE0002)		This calculated number of lines which have been updated.  N/A
6	Provider Identification Number National Provider Identifier (DE4700)	Edits: Messages: This field may contain the Provider's nine digit Legacy ID or the Provider's ten digit National Provider Identifier (NPI). The NPI, when available, will always take precedence over the Legacy ID and will be displayed on the screen whenever both numbers are present.	A unique identification number assigned to a provider.  N/A
7	MICC Type Case Management (MICC) Type (DE8401)		Indicates whether the recipient receiving case management services is an infant or a mother.  N/A
8	Risk Level Case Management (MICC) Level of Risk (DE8484)	Edits: Must be blank, '0', '1', or '2' Messages: INVALID RISK LEVEL	Indicates the level of risk whether high, medium or low.  N/A
9	MICC Begin Date Case Management (MICC) Begin Date	Edits: This date will be a valid date not less than 07/01/1989 and not greater than the Current Date.	The date on which the recipient began receiving case management (MICC) services.  N/A

	(DE8403)		
10	MICC End Date Case Management (MICC) End Date (DE8489)		The date the enrollee is no longer a participant in BabyCare or MICC.  N/A
11	Outcome Report Case Management (MICC) Outcome Report Received (DE8404)		Indicates whether or not the MICC provider has sent the outcome report on the enrollee to DMAS.  N/A
12	End Reason Case Management (MICC) Cancel Reason (DE8486)		This field indicates the reason the enrollee was cancelled from the program.  N/A
13	Expected Delivery Date Maternal Risk Expected Delivery Date (DE8412)		The recipient's expected date of confinement (delivery date) that was entered on the Maternal Risk Screen.  N/A
14	End Reason Case Management Pending Enrollment Indicator (DE8406)		Identifies whether or not the eligible has been enrolled in MICC or BabyCare.  N/A

NAVIGATION	<b>Maternal and Infant Care Coordination Inquiry (MI-S-009)</b>	
Function	Action	Branch To (B) or

(B) or (M)		Return To (R)
Enter	Processes the entered information.	N/A
SUB MENU	Returns to the Member Demographics screen.	RS-S-018 (R)
SCROLL DOWN	Allows the user to page forward through a series of requested data.	N/A
SCROLL UP	Allows the user to page backward through a series of requested data.	N/A
REFRESH	Command that allows the user to redisplay the current screen void of any user updates.	N/A
RETURN	Returns to the VaMMIS Main Menu.	RF-S-010 (R)

## Error Messages

Error	Description	Resolution
8485	ALREADY AT THE END OF THE FILE	Information message. No action needed.
8484	ALREADY AT THE START OF THE FILE	Information message. No action needed.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8458	ENROLLEE NOT FOUND ON MASTER DATABASE	The Enrollee ID number entered is not found on the Master Database. Correct the Enrollee ID or cancel the transaction.
8002	ENTER AN ENROLLEE ID	Enter an enrollee ID. See the field definitions for formatting/requirements for this field.
8457	ERROR WHILE READING TSQ	Information message.
139	FUNCTION IS INVALID	Information message.
8455	NO CASE MANAGEMENT DATA IS PRESENT FOR THIS ENROLLEE	Information message. No action needed.
8456	NO MORE DATA IN THE TABLE	Information message.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the Recipient icon.
2. You see the Recipient Subsystem Menu screen (RS-S-000).
3. Select the Enrollment radio button.
4. Choose Enter.
5. You see the Enrollment Menu screen (RS-S-001).

6. Select Enrollee radio button under Select Enrollment Type
7. Select the Inquiry radio button in the Select Function box.
8. Enter Enrollee ID number.
9. Choose Enter.
10. You see the Enrollment - Inquiry screen (RS-S-018).
11. Choose the MICC button.
12. You see the Maternal and Infant Care Information screen (MI-S-009).

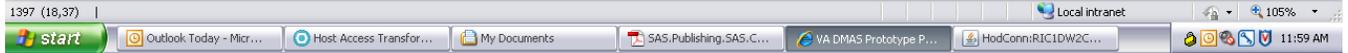
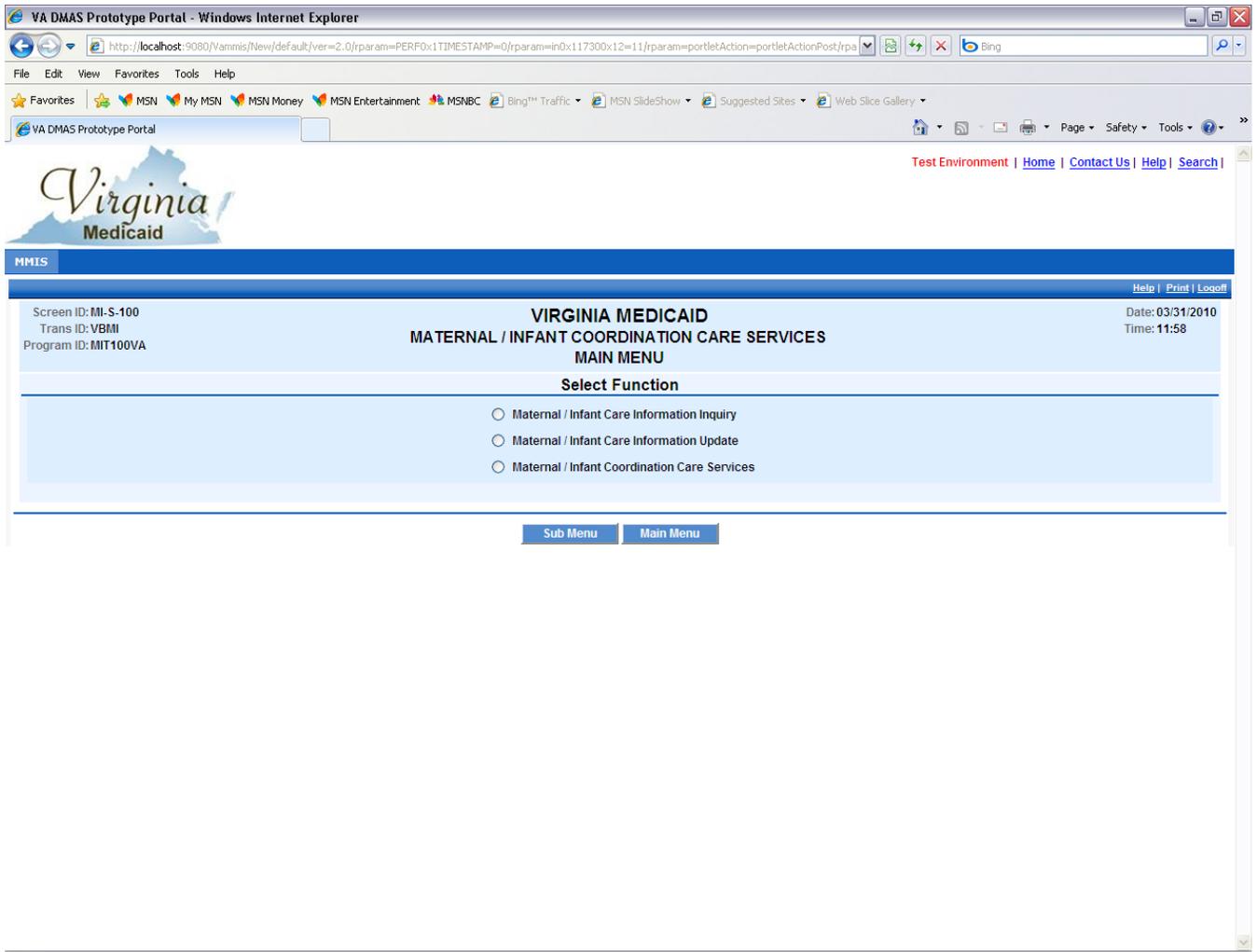
# Screens MI-S-100 MICC Main Menu Screen

## General Information

This on-line menu screen provides a list of the options available to DMAS for processing MICC information.

SOURCE/ORIGINATOR	Operator
USAGE	Inquiry
PROGRAM	MIT100VA
MAPSET	MI100VA
TRAN ID	VBMI

SAMPLE	<b>MICC Main Menu Screen (MI-S-100)</b>
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## Field Definitions

#	GSD Field Name Data Element Name (ID)	Edit Criteria Message	Field Instructions
1	TRANSACTION ID (DE0000)	Edits: Must be VBMI; 4 character identification of the transaction.	'EXCLUDE' 'EXCLUDE'
2	PROGRAM NAME (DE0000)	Edits: Must be MIT100VA; 7 character identification of the program processing transaction VBMI.	'EXCLUDE' 'EXCLUDE'

3	SCREEN TITLE (DE0000)	Edits: Proper title of the MI100VA screen; must be VA DMAS MATERNAL/INFANT COORDINATION CARE SERVICES MAIN MENU.	'EXCLUDE'  'EXCLUDE'
4	SYSTEM DATE (DE0000)	Edits: Must be format MM/DD/CCYY where : MM = 2-DIGIT MONTH (VALUES 1 THRU 12) DD = 2-DIGIT DAY (VALUES 1 THRU 31) CCYY = 4 DIGIT YEAR INCLUDING CENTURY.	'EXCLUDE'  'EXCLUDE'
5	SYSTEM TIME (DE0000)	Edits: Must be format HH:MM where: HH = 2-digit hour (values 01 thru 24) MM = 2-digit minute (values 01 thru 59).	'EXCLUDE'  'EXCLUDE'
6	SELECTION (DE0000)	Edits: Must be the value of 1, 2, or 3.	The available options which the menu provides are: - DMAS Maternal/Infant Care Information Inquiry - DMAS Maternal/Infant Care Information Update - Maternal/Infant Coordination Care Services INQUIRY (R/U) Select the desired option you wish to inquire.  The available options which the menu provides for Adds and Updates are: - DMAS Maternal/Infant Care Information Update - Maternal/Infant Coordination Care Services ADD (R/U) Select the Maternal/Infant Coordination Care Services option if you wish to add a transaction. UPDATE (R/U) Select the desired option on which you desire to make data changes.
7	MSG (DE0000)	Edits: N/A	'EXCLUDE'  'EXCLUDE'

NAVIGATION		
MICC Main Menu Screen (MI-S-100)		
Function (B) or (M)	Action	Branch To (B) or Return To (R)
<ENTER> SELECTION 1	Invokes the MATERNAL/INFANT CARE INFORMATION INQUIRY screen.	N/A
<ENTER> SELECTION 2	Invokes the MATERNAL/INFANT CARE INFORMATION UPDATE Screen.	N/A
<ENTER> SELECTION 3	Invokes the MATERNAL/INFANT CARE COORDINATION SERVICES screen.	N/A
MAIN	Returns to the MMIS Main Menu.	N/A
RETURN	Returns to the MMIS Main Menu.	N/A

## Error Messages

Error	Description	Resolution
42	ACCESS TO THE PROGRAM IS NOT AUTHORIZED	User does not have access to the screens chosen.
30	CICS ERROR; TRANSACTION CANCELLED	Contact ACS Operations for assistance.
8115	ENTER A SELECTION NUMBER	Enter valid values according to error message specifications.
15	FUNCTION CHOSEN IS INVALID	Choose another function.
87	INVALID SELECTION	Selection is invalid for this mode, enter another function.
43	UNIDENTIFIED SECURITY ERROR	User not authorized for the transaction.

## Screen Access

From the VaMMIS Main System Menu:
1. Choose the MICC icon.
2. You see the MICC Main Menu Screen (MI-S-100).