



## **CBO AGENCY ACCOUNT REACTIVATION RECORD SPECIFICATIONS**

Accounts which are in the patient accounting historical file must be reactivated to an active status in order to post transactions. If accounts are not active, account history comment and close and return transactions submitted by a vendor will reject.

Account reactivation transaction files are provided by the vendor in the form of text files containing batches of account reactivation transaction records. These batch files will be provided on the same day as batch files of account history comments or close and return transactions. Two account reactivation transaction records will be required for each unique account in an account history comment file or close and return file provided. These reactivation records will be sent in complete batches with each batch having a header record, up to 98 reactivation records and a trailer record. Multiple batches can be included in a single text file with each batch having a unique sequence number in the header record. Reactivation batches are posted the same day they are received.

The batch header record required for each batch is described in the section below titled "CBO AGENCY ACCOUNT REACTIVATION BATCH HEADER RECORD SPECIFICATIONS".

The reactivation record specifications are described in the section below titled "CBO AGENCY ACCOUNT REACTIVATION RECORD SPECIFICATIONS".

The batch trailer record required for each batch is described in the section below titled "CBO AGENCY ACCOUNT REACTIVATION BATCH TRAILER RECORD SPECIFICATIONS".

Reactivation records must be provided in **separate files for each Medical Center**. Files should be placed in the facility sub-folders in the agency's Broward Health network directory. The facility sub-folders are titled as follows:

U202 = BHMC, U203 = BHN, U204 = BHIP, U206 = BHCS



## FILE NAMING CONVENTION

The file name should have the following naming convention: "VVVVVVJJrrMMDDYYxx.txt" where:

"VVVVVV" = Vendor Name (or abbreviation) up to six characters.

"JJ" = Product Line up to two characters. (AK- Acknowledgement, 18-Reactivations, 7M- Comments, 93-Close & Returns)

"rr" = Hospital code (BG, IP, CS, NB, LG).

"MMDDYY" = Creation date of the acknowledgment file.

"xx" = Sequence no for multiple files – "01" if only one file.



**CBO AGENCY ACCOUNT REACTIVATION HEADER RECORD SPECIFICATIONS**

<b><u>FIELD NO.</u></b>	<b><u>FIELD NAME</u></b>	<b><u>POSITION</u></b>	<b><u>LENGTH</u></b>	<b><u>DATA TYPE</u></b>	<b><u>DATA FORMAT</u></b>
1	Transaction code	1	1	Text	"D"
2	Blank	2	4	Text	Must be blank
3	Batch type	6	2	Numeric	"71".
4	Blank	8	3	Text	Must be blank
5	Batch sub-type	11	1	Numeric	"A"
6	Blank	12	8	Text	Must be blank
7	Batch date	20	6	Date	MMDDYY. Must be valued. Use the current date.
8	User ID	26	3	Text	"V18"
9	Blank	29	1	Text	Must be blank
10	Job name	30	6	Text	Must be 6 characters. Assigned by IT, refer to Vendor Fact Sheet
11	Blank	36	1	Text	Must be blank
11	Batch sequence	37	3	Numeric	Sequential batch number starting with 001.



Must be three digits.  
Do not duplicate sequence numbers within a specific job name.

**CBO AGENCY ACCOUNT REACTIVATION RECORD SPECIFICATIONS**

<u>FIELD NO.</u>	<u>FIELD NAME</u>	<u>POS</u>	<u>LEN</u>	<u>DATA TYPE</u>	<u>DATA FORMAT</u>
1	Record code	1	2	Text	"18"
2	Patient number	3	12	Numeric	Left zero fill. All 12 positions must be filled. From the input File "Patient Number"
3	Format indicator	15	1	Text	"D"
4	Blank	16	61	Text	Must be blank
4	Reactivate indicator	77	1	Text	"X" or "B"

Two records must be created for each account with "X" and "B" in the "Reactivate indicator" field in position 77.

Example batch with two transactions per unique account:

```

D 71 A 010819REA NB18DA 500
18000233646776D X
18000233646776D B
18000245248211D X
18000245248211D B
18000254980447D X
18000254980447D B
98 006006

```



**CBO AGENCY ACCOUNT HISTORY COMMENT TRAILER RECORD SPECIFICATIONS**

<b><u>FIELD NO.</u></b>	<b><u>FIELD NAME</u></b>	<b><u>POSITION</u></b>	<b><u>LENGTH</u></b>	<b><u>DATA TYPE</u></b>	<b><u>DATA FORMAT</u></b>
1	Trailer identifier	1	2	Numeric	"98"
2	Blank	3	3	Text	Must be blank
3	Transaction count-1	6	3	Numeric	These positions contain the number of records in the batch. Maximum number of transactions is 98. include leading zeros (ex. 009)
4	Transaction count-2	9	3	Numeric	These positions contain the number of records in the batch. Maximum number of transactions is 98. include leading zeros (ex. 009)



## BROWARD HEALTH AGENCY ACKNOWLEDGEMENT FILE SPECIFICATIONS

<u>POSITION</u>	<u>LENGTH</u>	<u>FIELD NAME</u>	<u>FORMAT</u>
01	08	Placement Report Name	*\$BAxxxx or *\$PXxxxx (xxxx = last four characters of the report name)
09	06	Vendor Name (or abbreviation)	XXXXXX – Left Justified
15	17	Placement Report Date Range	MM/DD/YY-MM/DD/YY (Placement date range from placement report title)
32	02	Hospital Code	<b>BG</b> (BHMC), <b>NB</b> (BHN), <b>IP</b> (BHIP), <b>CS</b> (BHCS)
34	05	Total Patient Count	99999 (Derived from agency’s processing of the file)
39	12	Total Account Balance	999999999.99 (Decimals = 2, Derived from agency’s processing of the file)

### FILE NAMING CONVENTION

One acknowledgment file should be produced for each placement report received by the agency. Each acknowledgment file should only contain data for a specific hospital’s placement report.

Acknowledgment files should be placed in the same Broward Health network directories that the corresponding placement reports were retrieved from.



## BROWARD HEALTH AGENCY ACKNOWLEDGEMENT FILE SPECIFICATIONS

The file name should have the following naming convention: “VVVVVJJrrMMDDYYxx.txt” where:

“VVVVVV” = Vendor Name (or abbreviation) up to six characters.

“JJ”= Product Line up to two characters. (AK- Acknowledgement, 18-Reactivations, 7M- Comments, 93-Close & Returns)

“rr” = Hospital code (BG, IP, CS, NB, LG).

“MMDDYY” = Creation date of the acknowledgment file.

“xx” = Sequence no for multiple files – “01” if only one file.



**CBO AGENCY PLACEMENT FILE #1 RECORD LAYOUT – PATIENT DEMOGRAPHIC INFORMATION**

Each patient record will consist of five lines of information.

<u>LINE</u>	<u>POSITION</u>	<u>LENGTH</u>	<u>COLUMN HEADER</u>	<u>DESCRIPTION</u>	<u>FORMAT/VALUE</u>
1	006	012	PT NO	PATIENT FINANCIAL NUMBER	
1	019	003	HSV	HOSPITAL SERVICE CODE	
1	023	014	TOTAL CHGS	TOTAL CHARGES	DECIMALS=2
1	039	003	DST	DISTRICT CODE	
1	043	035	PATIENT LAST NAME	PATIENT LAST NAME	
1	079	035	PATIENT ADDRESS LINE 1	PATIENT ADDRESS LINE 1	
2	009	008	ADMIT DATE	REGISTRATION DATE	MM/DD/YY
2	019	001	PT	PATIENT TYPE2	
2	023	014	ACCT BAL	CURRENT ACCOUNT BALANCE	DECIMALS=2
2	041	001	FC	FINANCIAL CLASS CODE	
2	043	025	PATIENT FIRST NAME	PATIENT FIRST NAME	
2	079	035	PATIENT ADDRESS LINE 2	PATIENT ADDRESS LINE 2	
3	009	008	DSCH DATE	DISCHARGE DATE	MM/DD/YY
3	019	001	SEX	PATIENT GENDER	
3	023	014	TOTAL PT PMTS	TOTAL PATIENT PAYMENT AMOUNT	
3	039	003	PTRP	PATIENT REPRESENTATIVE CODE	
3	043	025	PATIENT MIDDLE NAME	PATIENT MIDDLE NAME	
3	079	030	PATIENT CITY	PATIENT CITY	
4	009	008	PT DOB	PATIENT DATE OF BIRTH	MM/DD/YY
4	019	001	MAR	PATIENT MARITAL STATUS	
4	023	014	TOTAL INS PMTS	TOTAL INSURANCE PAYMENTS	DECIMALS=2
4	041	001	RESP	RESPONSIBILITY CODE	
4	043	011	PATIENT PHONE NO	PATIENT TELEPHONE NUMBER	
4	079	002	PATIENT STATE	PATIENT STATE	





**CBO AGENCY PLACEMENT FILE #1 RECORD LAYOUT – PATIENT DEMOGRAPHIC INFORMATION cont.**

<u>LINE</u>	<u>POSITION</u>	<u>LENGTH</u>	<u>COLUMN HEADER</u>	<u>DESCRIPTION</u>	<u>FORMAT/VALUE</u>
5	005	012	MED REC NO	PATIENT MEDICAL RECORD NUMBER	
5	019	001	AT	ACCOUNT TYPE	
5	023	014	TOTAL INS ADJS	TOTAL INSURANCE ADJUSTMENTS	DECIMALS=2
5	041	001	AGCY	AGENCY CODE	
5	043	009	PATIENT SSN	PATIENT SOCIAL SECURITY NUMBER	
5	079	010	PATIENT ZIP	PATIENT ZIP CODE	



**CBO AGENCY PLACEMENT FILE #2 RECORD LAYOUT – GUARANTOR/INSURANCE INFORMATION**

Each patient record will consist of five lines of information.

<u>LINE POSITION</u>	<u>LENGTH</u>	<u>COLUMN HEADER</u>	<u>DESCRIPTION</u>	<u>FORMAT/VALUE</u>	
1	002	012	PT NO	PATIENT FINANCIAL NUMBER	
1	015	035	GUARANTOR LAST NAME	GUARANTOR LAST NAME	
1	051	035	GUARANTOR ADDRESS LINE 1	GUARANTOR ADDRESS LINE 1	
1	087	004	PRIM INS	PRIMARY INSURANCE PLAN CODE	
1	100	020	TREATMENT AUTH NO	TREATMENT AUTHORIZATION NUMBER	
1	129	004	SEC INS	SECONDARY INSURANCE PLAN CODE	
2	003	010	GUAR PHONE	GUARANTOR TELEPHONE NUMBER	
2	015	025	GUARANTOR FIRST NAME	GUARANTOR FIRST NAME	
2	051	035	GUARANTOR ADDRESS LINE 2	GUARANTOR ADDRESS LINE 2	
2	087	012	PRIM INS BAL	PRIMARY INSURANCE BALANCE	DECIMALS=2
2	132	001	INS PRTY	SECONDARY INSURANCE PRIORITY	
3	004	009	GUAR SSN	GUARANTOR SOCIAL SECURITY	
3	015	025	GUARANTOR MIDDLE NAME	GUARANTOR MIDDLE NAME	
3	051	030	GUARANTOR CITY	GUARANTOR CITY	
3	087	011	POLICY NO	PRIMARY INSURANCE POLICY	
3	121	012	INS BAL	SECONDARY INSURANCE BALANCE	DECIMALS=2
4	001	012	PT BALANCE	PATIENT BALANCE	DECIMALS=2
4	015	008	GUAR DOB	GUARANTOR DATE OF BIRTH	MM/DD/YY
4	051	002	GUARANTOR STATE	GUARANTOR STATE	
4	087	006	GROUP NO	PRIMARY INSURANCE GROUP	
4	122	011	POLICY NO	SECONDARY INSURANCE POLICY	
5	051	010	GUARANTOR ZIP	GUARANTOR ZIP CODE	
5	127	006	GROUP NO	SECONDARY INSURANCE GROUP	



**CBO AGENCY PLACEMENT FILE #3 RECORD LAYOUT – INSURANCE INFORMATION**

Each patient record will contain information on up to four insurances.

<u>LINE</u>	<u>POSITION</u>	<u>LENGTH</u>	<u>COLUMN HEADER</u>	<u>DESCRIPTION</u>	<u>FORMAT/VALUE</u>
1	002	012	PT NO	PATIENT FINANCIAL NUMBER	
1	018	001	INS PRTY	INSURANCE PRIORITY	
1	020	004	INS PLAN	INSURANCE PLAN CODE	
1	041	025	INS ADDRESS LINE 1	INSURANCE ADDRESS LINE 1	
1	067	025	INS CITY	INSURANCE CITY	
1	093	002	INS STATE	INSURANCE STATE	
1	099	004	USER INS PLAN	INSURANCE PLAN FOR OVERRIDE	
1	104	008	USER INS CMPNT ID	INSURANCE OVERRIDE ID	SEE BELOW
1	113	020	USER INS PLAN MAIL-TO NAME AND ADDRESS	INSURANCE OVERRIDE INFORMATION	BASED ON THE VALUE IN THE INSURANCE OVERRIDE ID ABOVE
2	020	020	INS NAME	INSURANCE NAME	
2	041	025	INS ADDRESS LINE 2	INSURANCE ADDRESS LINE 2	
2	067	010	INS ZIP	INSURANCE ZIP CODE	

**INSURANCE OVERRIDE ID VALUES:**

- 5C49NAME = INSURANCE OVERRIDE NAME
- 5C49ADD1 = INSURANCE OVERRIDE ADDRESS LINE 1
- 5C49ADD2 = INSURANCE OVERRIDE ADDRESS LINE 2
- 5C49ADD3 = INSURANCE OVERRIDE ADDRESS LINE 3



## **CBO AGENCY ACCOUNT CLOSE AND RETURN TRANSACTION FILES**

Close and return transactions are required on accounts being returned to the CBO by a vendor.

On a weekly basis, close and return transactions are provided by the vendor in the form of text files containing batches of close and return transactions. These transactions will be sent in complete batches with each batch having a header record, up to 98 close and return transaction records and a trailer record. Multiple batches can be included in a single text file with each batch having a unique sequence number in the header record. The weekly processing date for close and return batch files is Thursday and the transactions will be available to be viewed in the patient accounting system the following day after the nightly patient accounting system update.

The batch header record required for each batch is described in the section below titled "CBO AGENCY CLOSE AND RETURN BATCH HEADER RECORD SPECIFICATIONS".

The account history comment record specifications are described in the section below titled "CBO AGENCY CLOSE AND RETURN TRANSACTION RECORD SPECIFICATIONS".

The batch trailer record required for each batch is described in the section below titled "CBO AGENCY CLOSE AND RETURN BATCH TRAILER RECORD SPECIFICATIONS".

Close and return records must be provided in **separate files for each Medical Center**. Files should be placed in the facility sub-folders in the agency's Broward Health network directory. The facility sub-folders are titled as follows:

U202 = BHMC, U203 = BHN, U204 = BHIP, U206 = BHCS



## FILE NAMING CONVENTION

The file name should have the following naming convention: **"VVVVVVJJrrMMDDYYxx.txt"** where:

"VVVVVV" = Vendor Name (or abbreviation) up to six characters.

"JJ" = Product Line up to two characters. (AK- Acknowledgement, 18-Reactivations, 7M- Comments, 93-Close & Returns)

"rr" = Hospital code (BG, IP, CS, NB, LG).

"MMDDYY" = Creation date of the acknowledgment file.

"xx" = Sequence no for multiple files – "01" if only one file.



**CBO AGENCY CLOSE AND RETURN HEADER RECORD SPECIFICATIONS**

<b><u>FIELD NO.</u></b>	<b><u>FIELD NAME</u></b>	<b><u>POSITION</u></b>	<b><u>LENGTH</u></b>	<b><u>DATA TYPE</u></b>	<b><u>DATA FORMAT</u></b>
1	Transaction code	1	1	Text	"D"
2	Blank	2	4	Text	Must be blank
3	Batch type	6	2	Numeric	"02".
4	Blank	8	3	Text	Must be blank
5	Batch sub-type	11	1	Numeric	"6"
6	Blank	12	8	Text	Must be blank
7	Batch date	20	6	Date	MMDDYY. Must be valued. <b>(CURRENT DATE)</b>
8	User ID	26	3	Text	"V93"
9	Blank	29	1	Text	Must be blank
10	Job name	30	6	Text	Must be 6 characters. Assigned by IT, refer to Vendor Fact Sheet
11	Blank	36	1	Text	Must be blank
11	Batch sequence	37	3	Numeric	Sequential batch number starting with 001. Must be three digits. Do not duplicate sequence numbers within a specific job name.



**CBO AGENCY CLOSE AND RETURN TRANSACTION RECORD SPECIFICATIONS**

<u>FIELD NO.</u>	<u>FIELD NAME</u>	<u>POS</u>	<u>LEN</u>	<u>DATA TYPE</u>	<u>DATA FORMAT</u>
1	Record code	1	2	Text	“93”
2	Patient number	3	12	Numeric	Right justified. Left zero filled. Must be valued.
3.	Blank	15	2	Text	Must be blank
3	Service date	17	6	Date	MMDDYY. Must be valued. No future dates. <b>(USE CURRENT DATE)</b>
4	Service code	23	8	Numeric	From the list of close and returned codes below. Right justified. Left zero filled.
5	All zeros	31	9	Numeric	Must be valued with all zeros. No decimal point. Example: 000000000
6.	Asterisk	40	1	Text	“*”. Must be valued.

**Note:**

- **Two transactions per account** will be required using the above format when submitting close and return transactions.
- The **first transaction** will contain the service code that pertains to the vendor from the “Agency Close and Return Codes” list. This is needed to identify the vendor who submitted the close and return transactions.
- The **second transaction** will contain the pertinent close and return reason code from the “Close and Return Reason Codes” list . This is needed to provide the reason that the account is being closed and returned to the CBO.



**CBO AGENCY ACCOUNT HISTORY CLOSE AND RETURN TRAILER RECORD SPECIFICATIONS**

<b><u>FIELD NO.</u></b>	<b><u>FIELD NAME</u></b>	<b><u>POSITION</u></b>	<b><u>LENGTH</u></b>	<b><u>DATA TYPE</u></b>	<b><u>DATA FORMAT</u></b>
1	Trailer identifier	1	2	Numeric	"98"
2	Blank	3	3	Text	Must be blank
3	Transaction count-1	6	3	Numeric	These positions contain the number of records in the batch. Maximum number of transactions is 98. Include leading zeros (ex. 009)
4	Transaction count-2	9	3	Numeric	These positions contain the number of records in the batch. Maximum number of transactions is 98. Include leading zeros (ex. 009)