## **Inpatient Certifications File Specifications**

On a daily basis, the health plan shall submit to the state agency an updated file of inpatient certifications/prior authorization and discharges of all members. The file shall include information on all newly authorized/approved inpatient stays and all inpatient discharges that have occurred since the previous report. The health plan shall submit the data in a pipe-delimited text file with the following nine fields:

Field Name	Description
ProviderNPI	The 10-character NPI of the hospital where the member was admitted.
ProviderName	The name of the hospital where the member was admitted.
ProviderCity	The city of the hospital where the member was admitted.
MemberDCN	The member's 8-character Medicaid DCN. REMEMBER TO INCLUDE LEADING ZEROS, where appropriate.
AdmissionDate	The admission date for the specified inpatient episode, formatted as mm/dd/yyyy. Do not include the time.
DischargeDate	The discharge date from the specified inpatient episode, if known, formatted as mm/dd/yyyy. Do not include the time. If the discharge date is unknown, it should be left blank, and should be updated in a subsequent file when known.
AdmissionDiagnosisCode	The ICD10 diagnosis code for the primary admitting diagnosis or, if unknown, the ICD10 code that was used for the inpatient approval request. DO NOT include decimals in the code – please simply omit them. So F34.4 would be reported as F344.
AdmissionDiagnosisText	The diagnosis description associated with the ICD10 diagnosis code above.
HealthPlanProviderID	The 9-character MCO's MoHealthNet PlanID, which will start with "81".

The data file shall be provided daily (including weekends and holidays) to MO HealthNet Division (MHD) via a secure process specified by MHD and subject to period updates. At present, the specified method is through an FTP site. A user ID and password will be provided by MHD to the MCO. The FTP address and instructions for setting up the connection, logging on, and uploading files, will also be provided by MHD. The health plan shall receive notification and new instructions for any changes made by MHD to the file submission process.