



Introduction

Welcome!

The AHCCCS Reinsurance System Training Manual is designed to help facilitate your passage through the PMMIS* Reinsurance System, via the Arizona Department of Administration (DOA) mainframe.

* Prepaid Medical Management Information System

Objectives

By the time you have completed this manual, you'll be able to do the following:

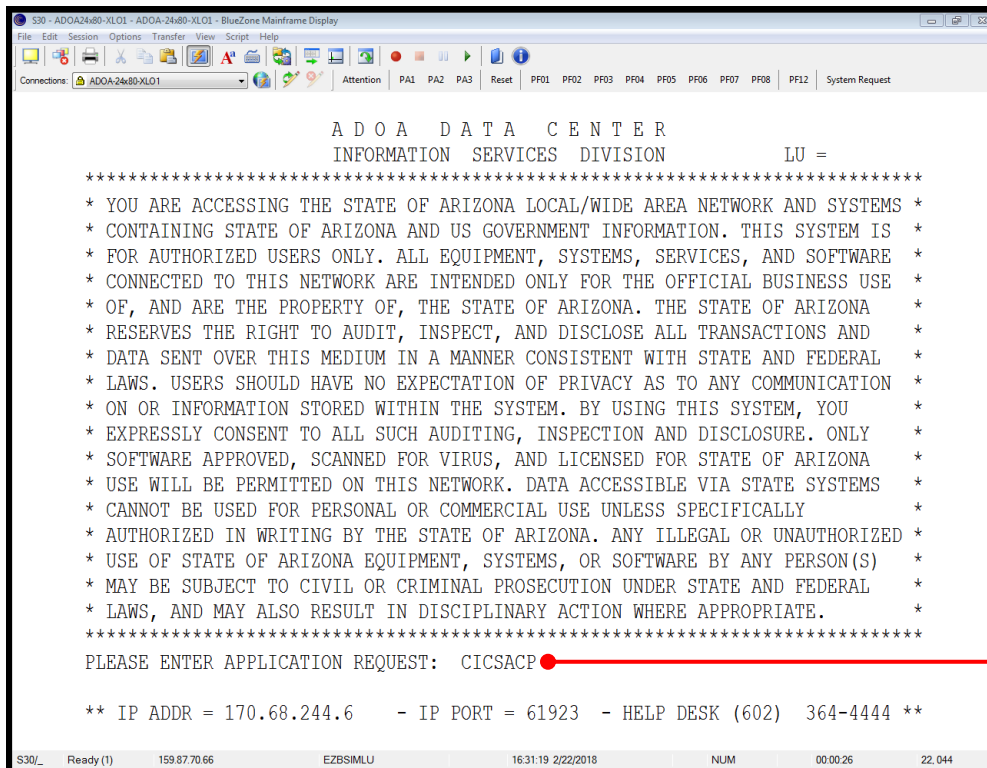
- Complete the PMMIS sign on process
- Effectively maneuver through the Reinsurance system
- Understand pend reasons and how to appropriately audit associated Reinsurance Cases and associated encounters

Overview

In the following sections, you will be presented information set up in a standard format. The various screens you will be using will be displayed, along with detailed information about each screen.

Sign on procedure

The screen below is the first screen that will appear when signing onto the PMMIS system, at this point you enter your application request sign on. (Please note that PMMIS has been switched to black and white for the sake of clarity, stock colors may be seen further below.)



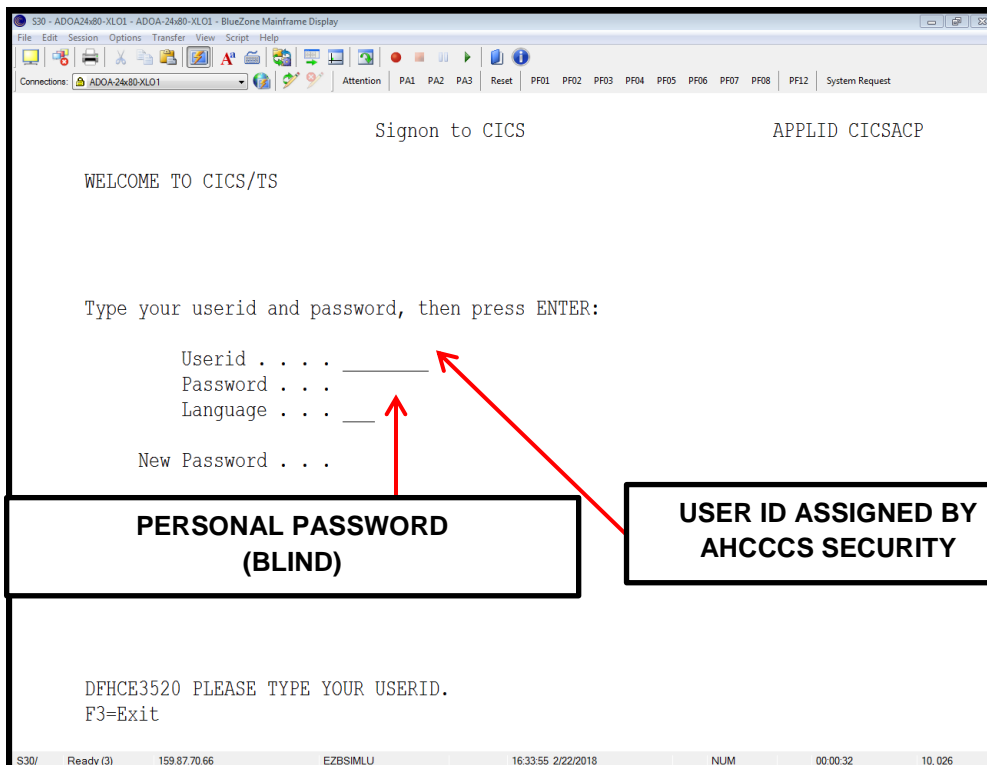
* Pressing the ENTER key either executes a function or initiates a confirmation dialog for any information you altered on a screen. Be aware of any changes you make prior to pressing enter.

* In case of log in issues call AHCCCS help desk
(602) 417-4451

**CICSACP
NOT CASE SENSITIVE
PRESS ENTER TO CONTINUE**

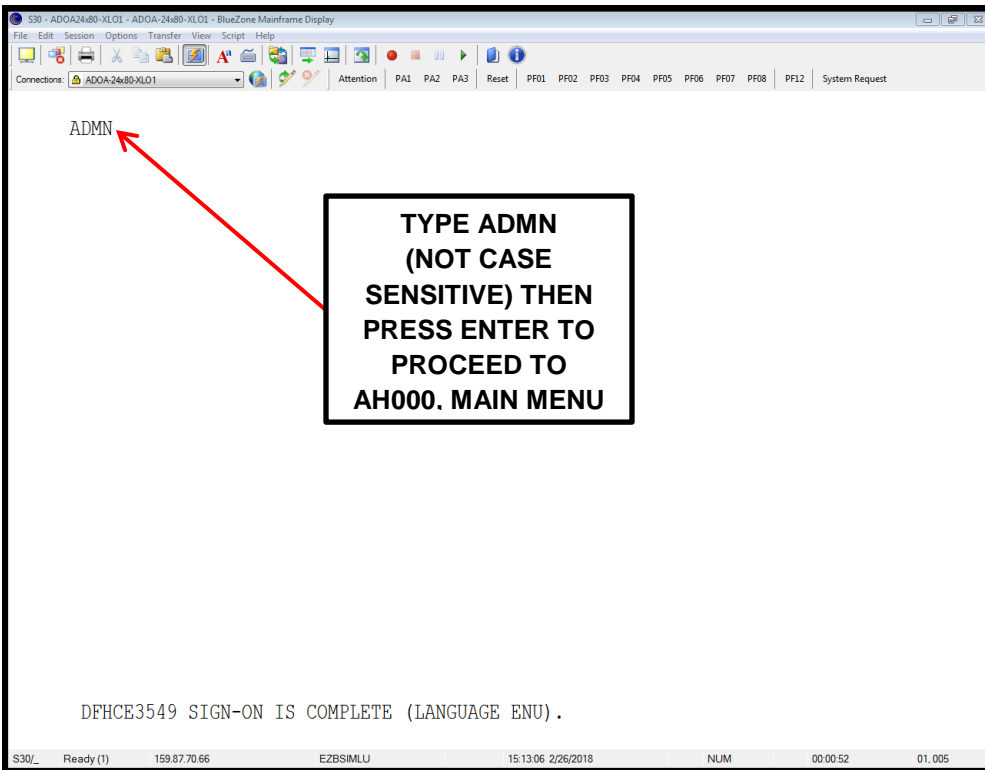
Next Step

Then you will enter your User ID and Password



* New PMMIS users will enter their AHCCCS Security Sign-on as their Password and follow system instructions

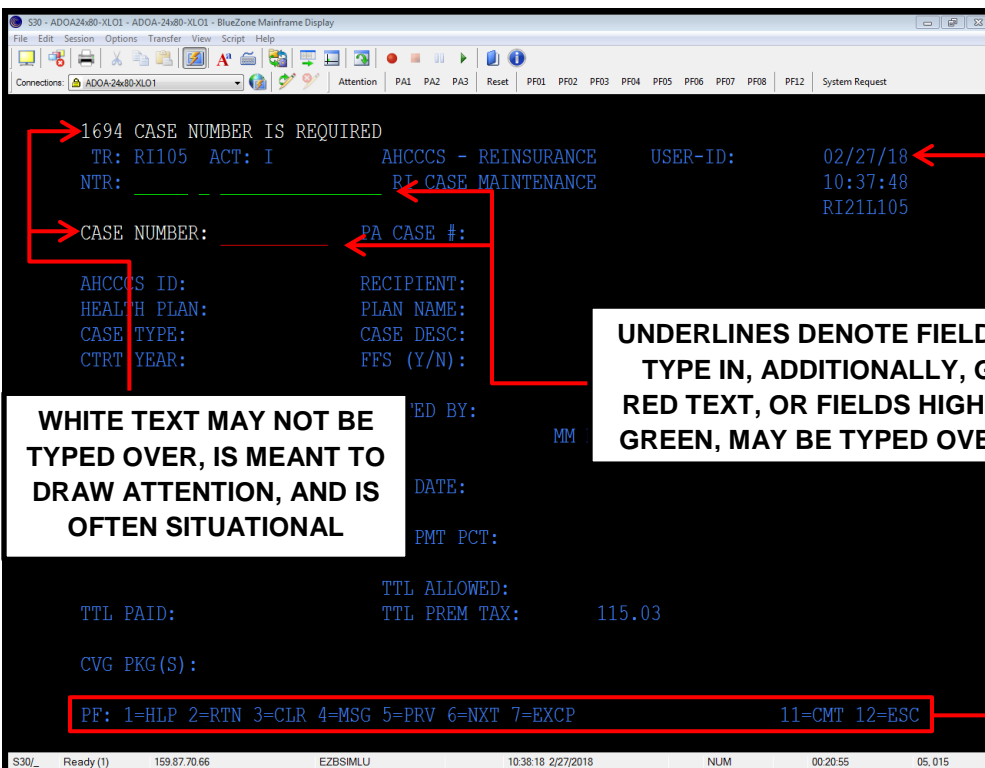
SIGN-ON (Continued)



EXTRA FORMAT

The extra system is based on various menu lists. Each menu has its own list of screens that can be accessed regarding that menu title. Your security level will only allow you to access certain screens.

There are certain elements that are consistent across several screens. These elements are detailed below as well as further in this manual. (Please note that the background color as well as the color of various text fields will vary depending on your display settings, colors represented below are stock settings.)



BLUE TEXT MAY NOT BE ALTERED AND IS INFORMATIONAL

UNDERLINES DENOTE FIELDS YOU CAN TYPE IN, ADDITIONALLY, GREEN OR RED TEXT, OR FIELDS HIGHLIGHTED IN GREEN, MAY BE TYPED OVER AS WELL

WHITE TEXT MAY NOT BE TYPED OVER, IS MEANT TO DRAW ATTENTION, AND IS OFTEN SITUATIONAL

PF MEANS "PROGRAM FUNCTION", THE NUMBERS REPRESENT THE FUNCTION KEYS ON YOUR KEYBOARD (F1, F2, ETC.), AND WHAT FOLLOWS THE "=" SYMBOL IS A SHORT HAND DESCRIPTION OF WHAT THAT KEY DOES ON THIS SCREEN.

EXTRA FORMAT (CONTINUED)

After logging into the system you will see the menu listed below.

TR: AH000 AHCCCS - PMMIS 02/26/18
NTR: _____ MAIN MENU 15:14:47
AH00M000

1. CASE MANAGEMENT	11. ALTCS MEDICAL ELIGIBILITY (CATS)
2. ENCOUNTERS	12. ALTCS FINANCIAL ELIGIBILITY (LEDS)
3. SYSTEM SERVICE REQUEST	13. ALTCS GENERAL INQUIRY/MAINTENANCE
4. HEALTH PLAN	14. ELIGIBILITY QUALITY CONTROL/FRAUD
5. INFORMATION MANAGEMENT	15. REINSURANCE
6. PROVIDER	16. (AVAILABLE)
7. RECIPIENT	17. FINANCE
8. REFERENCES	18. CLAIMS
9. UR/QA	19. SVES - WTPY REQUEST/RESPONSE
10. SECURITY	20. KIDS CARE (KEDS)

ENTER SELECTION: 15 ← **TYPE 15, HIT ENTER**

PF: 1=HLP 3=CLR 4=MSG 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 15:19:18 2/26/2018 NUM 00.07.04 19.046

TR: RI000 AHCCCS - REINSURANCE SYSTEM 02/26/18
NTR: _____ MAIN MENU 15:26:46
RI00L000

1. RI CASE FUNCTIONS
2. RI ERROR CORRECTION
3. RI TABLE MAINTENANCE
4. RI PRIOR AUTHORIZATION
5. AUDIT TRAIL

ENTER SELECTION: _____

PF: 1=HLP 2=RTN 3=CLR 4=MSG 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 15:27:00 2/26/2018 NUM 00.14.46 22.047

*** HELP SCREEN**

* See the next page for details regarding the help screen.

HELP SCREEN

Below you can see an example help screen for RI105. The subjects will vary but the layout is consistent. See below for details.

THE SCREEN NUMBER ON WHICH YOU PRESSED THE HELP KEY

TR: RI105 ACT: I AHCCCS - INFORMATION REFERENCING 02/27/18
HELP MENU 12:05:05
AH04L006

SEL	SUB	SEQ	TITLE
01	01	01	RI105I - RI CASE MAINTENANCE SCREEN
01	02	02	RI105I - RI CASE MAINTENANCE SCREEN - OVERVIEW
02	01	01	RI105I - RI CASE MAINTENANCE SCREEN - ACTION CODES
03	01	01	RI105I - RI CASE MAINTENANCE SCREEN - PF KEYS.

VARIOUS SUBJECTS REGARDING THE SCREEN ON WHICH YOU PRESSED THE HELP KEY

TYPE AN "S" IN THIS FIELD AND PRESS ENTER TO VIEW THE TOPIC

RETURN TO THE PREVIOUS SCREEN

IF THERE ARE MULTIPLE PAGES OF INFORMATION, YOU CAN NAVIGATE THROUGH THEM USING THESE KEYS

PF: 2=RTN 7=UP 8=DWN 10=TOP 11=BOT

EXTRA FORMAT (CONTINUED)

TR: RI100 AHCCCS - REINSURANCE SYSTEM 02/26/18
NTR: RI CASE FUNCTIONS 15:32:03
RI00L100

Screen Number	Description
(RI103) 01.	INQ MED ENCOUNTER
(RI104) 02.	INQ FACIL ENCOUNTER
(RI107) 03.	INQ DRUG ENCOUNTER
(RI105) 04.	INQ DENTAL ENCOUNTER
(RI127) 05.	ENCOUNTER ASSOCIATION
(RI120) 06.	RI PAYMENT SUMMARY
(RI110) 07.	RI PMT RATE SUMMARY
(RI113) 08.	RI ERROR OVERRIDE INQ
(RI115) 09.	RI150) 19. RCP CASE CREATION LVL
(RI114) 10.	TRANSPLANT OUTLIER CALCULATION

*** PMMIS SCREEN NUMBER**

*** SELECTION NUMBERS**

ENTER SELECTION: _ ACT: _

PF: 1=HLP 2=RTN 3=CLR 4=MSG 12=ESC

SCREEN DESCRIPTIONS

* The screen number you're currently on is displayed next to "TR:" To go to a specific screen you can enter the screen number you want to go to next to the "NTR:" line or type the selection number next to the screen description in the "ENTER SELECTION" field.

RATHER THAN PRESS THE F KEYS ON YOUR KEYBOARD, YOU MAY ALSO CLICK ON PF01, PF02, PF03, ETC., THESE REPRESENT THE F KEYS ON YOUR KEYBOARD

YOUR USER ID IS DISPLAYED HERE ON MOST SCREENS

6738 HEALTH PLAN ID IS REQUIRED
 TR: RI103 ACT I AHCCCS - REINSURANCE USER-ID: 02/27/18
 NTR: RI HEALTH PLAN CASE SUMMARY 06:46:23
 RI21P103

HEALTH PLAN ID: _____
 CONTRACT YEAR: ** CASE TYPE: *** CASE STATUS: *

(S)EL	CASE TYPE	CASE STATUS	CASE NUMBER	AHCCCS ID	RECIPIENT NAME

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=104 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

THIS SECTION OF THE SCREEN TELLS YOU WHAT YOUR F KEYS WILL DO ON THIS SCREEN:

- F1 = HELP SCREEN**
- F2 = RETURN TO PREVIOUS SCREEN**
- F3 = CLEAR SCREEN OF DATA**
- F4 = DISPLAY ERROR CODE DETAILS**
- F5 = GO TO RI104**
- F7 = PAGE UP THROUGH DATA**
- F8 = PAGE DOWN THROUGH DATA**
- F10 = GO TO TOP OF LIST**
- F11 = GO TO BOTTOM OF LIST**
- F12 = EXIT THE PROGRAM**

THIS WILL VARY BY SCREEN

0156 AHCCCS ID IS REQUIRED
 TR: RI104 ACT I AHCCCS - REINSURANCE USER-ID: 02/27/18
 NTR: RI HEALTH PLAN CASE SUMMARY 08:00:16
 RI21P104

AHCCCS ID: _____

(S)EL	CASE NUMBER	HEALTH PLAN ID	CONTRACT YEAR	CASE TYPE	AHCCCS ID

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=103 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

* The "s" key consistently stands for "select" and is found on many screens. Please remember this for future reference.

**MANUALLY TYPE IN THE
CASE NUMBER HERE**

TR: RI105 ACT: I AHCCCS - REINSURANCE USER-ID: 02/27/18
NTR: RI CASE MAINTENANCE 08:48:48
RI21L105

CASE NUMBER: R PA CASE #:

AHCCCS ID: RECIPIENT:
HEALTH PLAN: PLAN NAME:
CASE TYPE: CASE DESC:
CTRT YEAR: FFS (Y/N):

CASE STA: CREATED BY:
ON: 10/02/2017 MM REVIEW DATE:

BEGIN DATE: 10/01/2017 THRU DATE: 09/30/2018

DEDUCTIBLE: .00 RI PMT PCT: .75

TTL PAID: 11223.63 TTL ALLOWED: 14964.84
TTL PREM TAX: 228.97

CVG PKG(S): BEH

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=PRV 6=NXT 7=EXCP 10=PMT 11=CMT 12=ESC

* Case Status
A=Active
C=Closed
I=Inactive
H=Hold
P=Pend
R=Reactivated

**F11 WILL TAKE
YOU TO RI106,
RI CASE
COMMENTS**

**F6 WILL TAKE YOU TO RI120,
UNLESS YOUR CASE IS A
TRANSPLANT, IF WHICH
CASE IT LEADS TO RI110**

**F10 WILL TAKE YOU TO RI130,
RI PAYMENT SUMMARY**

1694 CASE NUMBER IS REQUIRED

TR: RI106 ACT: I AHCCCS - REINSURANCE USER ID: 02/27/18
NTR: RI CASE COMMENT SCREEN 11:58:34
RI23L105

CASE NUMBER: _____

AHCCCS-ID:
HEALTH PLAN:

COMMENTS

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=105 7=UP 8=DWN 9=CNF 10=TOP 11=BOT 12=ESC

**ACT, SHORT FOR ACTION,
I STANDS FOR INQUIRY
AND C FOR CHANGE. YOU
MAY ONLY VIEW NOTES IN
INQUIRY MODE, TO ADD
OR CHANGE NOTES,
SWITCH TO CHANGE
MODE. TO CHANGE
MODES TYPE OVER
EITHER "I" OR "C" AND
PRESS ENTER.**

**CASE NOTES WILL
BE SEEN HERE**

**PF KEYS (F KEYS) AND THEIR
FUNCTIONS, AS MENTIONED PREVIOUSLY**

S30 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

TR: RI120 ACT C AHCCCS - REINSURANCE USER-ID: 02/27/18
 NTR: RI CASE SUMMARY 14:03:03
 RI21L120

CASE NUMBER: PA CASE NO:
 DENTAL HEALTH/TRAUMATIC BRAIN INJURY

AHCCCS ID:
 CRT YEAR: 36 STATUS: A

DEDUCTIBLE: 0.00 TTL PAYABLE: 11229.63
 TTL RCVR: 0.00 TTL PREM TX: 228.97

ALLOWED AMT: 14964.84 LIABILITY: 14964.84 TOTAL PAID: 11452.60
 CASE TOTAL: 14964.84 RI PERCENT: 77.5 PAYMENT DUE: 0.00

S ***** *
 A CRN F ST APPR AMT OVRD AMT PAID AMT BEG DATE END DATE
 _ 173 L PY 8265.22 7568.34 5676.26 10/01/17 10/31/17
 _ 173 L PY 7987.38 7396.50 5547.38 11/01/17 11/30/17
 _ 180 L IP 0065.22 0.00 0.00 12/01/17 12/31/17

ACT: (S)ELECT (E)DIT E(X)CLUDE (P)ERM EXCLUDE (T)RANSFER (D)ENY (V)IEW PRICE
 PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=105 6=116 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 14:19:32 2/27/2018 NUM 04.02.10 05.015

REFER TO RF779 FOR ENCOUNTER STATUS

REFER TO RF754 FOR FORM TYPE

REPORTED CONTRACTORS PAID AMOUNT, APPROVED AMOUNT, OR AHCCCS ALLOWED BASED ON ENCOUNTERED INFORMATION

THE LETTER SURROUNDED BY PARENTHESES CAN BE TYPED IN THIS FIELD IN ORDER TO PERFORM THE ACTIONS SEEN HERE.

S30 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

3091 PRESS PF9 TO CONFIRM UPDATE OF CURRENT RECORD

TR: RI810 ACT: C AHCCCS - REINSURANCE USER-ID: 02/27/18
 NTR: RI FORM UB92 15:47:54
 EDIT/AUDIT CYCLE COMPLETE RI21L810

CASE #: PANEL: 1
 CASE #: PA #:
 DENTAL CARE CENTER PR TYP: 22
 : M MODE: 1

C NO:
 017 CID: L.R.D.:
 SRC: 4 DIS HR: BILL TYP: 213
 COS: 18

SUB CAP CODE AMT: AMT:
 CD: AMT:

MDC APP: MDC PAID: CN1 CD: 06
 MDC COIN AMT: MDC DEDUCT: SUB CAP: 00

PF: 1=HLP 2=RTN 3=CLR 4=OVR 5=PRI 6=NXT 7=PYR 8=CMT 9=CNF 10=263 11=261 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 15:51:44 2/27/2018 NUM 00.04.16 03.007

RI EDITS MAY APPEAR IN THIS SECTION, PRESS F4 FOR FURTHER DETAILS ON EDIT DEFINITION

F6 WILL ADVANCE YOU THROUGH SEVERAL PANELS OF INFORMATION, YOU MAY ALSO TYPE THE PANEL NUMBER INTO THE FIELD IN THE UPPER RIGHT AND HIT ENTER TO NAVIGATE

SUB CAP CODE

SHOWS OTHER PAYER INFORMATION

THE RI SCREEN YOU ARRIVE AT AFTER SELECTING THE ENCOUNTER ON THE PREVIOUS SCREEN IS DEPENDENT ON THE FORM TYPE. IT MAY BE RI215 FOR PHARMACY, RI205 FOR PROFESSIONAL, RI810 FOR ANY UB92 FORM, OR RI203 FOR DENTAL.

F10 LEADS TO EC263, ERROR AUDIT TRAIL. NOTE THAT YOU CAN'T RETURN TO THE PREVIOUS SCREEN ONCE YOU'RE AT EC263.

* Press enter once to reprocess the associated reinsurance encounter through encounters edits ensuring the 31/78 status. Press enter again to process through reinsurance edits and audits.

The error screen, for your viewing pleasure.

TR: RI810 ACT: C AHCCCS - REINSURANCE USER-ID: 02/28/18
 RI ERROR CD OVERRIDE/MESSAGE DISPLAY 10:54:22
 RI61L001

SEL RSN ERR LOC MESSAGE
 = =====
 3091 PRESS PF9 TO CONFIRM UPDATE OF CURRENT RECORD

ERROR CODE AND DESCRIPTION

**F1=Help Screen
 F2=Return to Previous Screen
 F3=Clear (if you've typed something)
 F4=Error Message Screen (error inception)
 F7=Page UP
 F8=Page Down**

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN

Transplant Screen

The following screen is seen when advancing from RI105 to a transplant case.

TR: RI110 ACT I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: TRANSPLANT CASE SUMMARY 10:37:53
 RI21L110
 TRANSPLANT

STAGE ORDER, SEQUENCE NUMBER, NAME, AND DESCRIPTION

REFER TO RF778 FOR STAGE NAME DESCRIPTION IF NECESSARY

STAGE DATE PARAMETER

ALLOWED AMT: 0.00 LIABILITY: 0.00 TOTAL PAID: 0.00
 CASE TOTAL: 0.00 RI PERCENT: .85 PAYMENT DUE: 0.00

A	OR	S	NAME	DESC	CTRT	PR	BEG DATE	END DATE	ST	PAID AMT
_	01	1	AUT10	OUTPATIENT ONLY EVAL	988439		10/01/2016	10/18/2016	A	0.00
_	02	1	AUT02	AUTOLOGOUS HARVEST	988439		10/01/2016	11/22/2016	A	0.00

THESE ACTIONS CAN BE APPLIED TO A STAGE.

**(S)ELECT = SELECTS THE STAGE, GOES TO RI115
 (E)DIT = GOES TO EDIT SCREEN, RI113
 (D)ENY = DENIES THE STAGE
 (R)ECOUP = RECOUP PREVIOUSLY PAID FUNDS**

ACT: (S)ELECT (E)DIT (D)ENY (R)ECOUP
 PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=105 6=STG 7=UP 8=DWN 19=EXCP

HELP SCREEN

After selecting the (E)DIT option on RI110.

S31 - ADOA2480-XL01 - ADOA-2480-XL01 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA-2480-XL01 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

TR: RI113 ACT: I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: STAGE MAINTENANCE 11:53:06
 RI21L113

CASE NUMBER: CASE TYPE: AUT AUTOLOGOUS BONE MARROW TRANSPL
 RECIPIENT NAME: AHCCCS ID:
 HEALTH PLAN: CTRT YEAR: 35 CASE STA: A

STAGE NUMBER: 10 OUTPATIENT ONLY EVALUATION SEQ NUM: 1
 STAGE NAME:
 STAGE BEGIN DATE:
 CONTRACT PROVIDER:
 CTRT PROVIDER NPI:
 BILLING PROVIDER:
 BILLING PROV NPI:
 PAYMENT AUTHORIZATION ID: A
 STAGE STATUS:

AMOUNT: 4712.
 LED: 0.00 APPROVED AMOUNT: 4712.00
 OUNT: 0.00 OVERRIDE AMOUNT: 0.00
 RATE CODE:

HELP SCREEN (points to PF: 1=HLP)

AHCCCS PAYMENT AUTHORIZATION CODE GOES HERE (points to PAYMENT AUTHORIZATION ID)

REFER TO RF779 FOR CASE STATUS (points to STAGE STATUS)

PF: 1=HLP 2=RTN 3=C 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 11:53:26 3/1/2018 NUM 01:19:10 05.020

Outlier Calculation (After keying F6 on RI113)

S31 - ADOA2480-XL01 - ADOA-2480-XL01 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA-2480-XL01 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

3018 RECORD(S) NOT FOUND
 TR: RI114 ACT I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: RI OUTLIER CALCULATION 12:32:56
 RI21L114

C TYPE: AUT AUTOLOGOUS BONE MARROW TRANSPLANT
 R AHCCCS ID:
 H CTRT YEAR: 35 STATUS: A
 C
 S SEQ NUMBER: 1

ONLY ACCESSIBLE TO CONTRACTORS IN INQUIRY MODE (points to ACT I)

BILLED CHARGES:
 LESS CORD BLOOD PROCUREMENT: (IF APPLICABLE)
 LESS CUTBACK CHARGES:
 LESS OUTLIER DEDUCTIBLE:
 CHARGES ABOVE DEDUCTIBLE:
 CHARGES AT 50%:
 COMPLETED COMPONENT CTRT RATE: (STG RATE: 0.00)
 CONTRACTOR:
 URSEMENT AMT: (IF APPLICABLE)
 TAL LIABILITY
 LESSER OF CTRT RATE/BILLED CHR: (PAID YTD: 0.00)
 FINAL CALCULATED OUTLIER PAYMENT: [REDACTED]

HELP SCREEN (points to PF: 1=HLP)

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=113 9=CNF 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 12:33:12 3/1/2018 NUM 01:58:56 05.015

After selecting a stage from RI110.

TR: RI115 ACT: I AHCCCS - REINSURANCE
 NTR: _____ TRANSPLANT STAGE DE

ASSOCIATED ENCOUNTERS

LOGOUS BONE MARROW TRANSPLANT
 OUTPATIENT ONLY EVALUATION
 FORM TYPE: (A, B, C, D, I, O, L) -
 RECIPIENT NAME: _____

A	CRN	TYP	STAT	ASSOCIATED	BILLE
-	17	A	PR	07/15/2017	88.0
-	17	A	PR	07/15/2017	25.0
-	17	A	PR	07/15/2017	47.0
-	17	A	PR	07/15/2017	75.0
-	17	A	PR	07/15/2017	250.00
-	17	A	PR	07/15/2017	42.00
-	17	A	PR	07/15/2017	74.00

FORM TYPE TOTAL: 2204.00 0.00 436.75
 GRAND TOTAL: 2204.00 0.00 436.75

ACT: (S)ELECT E(X)CLUDE (P)ERM EXCLUDE (D)ENY (T)RANSFER P(R)ICE
 PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=110 6=116 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 12:51:37 3/1/2018 NUM 02:17:21 05.018

YOU CAN SORT ENCOUNTERS BY CLAIM TYPE.

A = PROFESSIONAL
B = ALL UB TYPE CLAIMS (INPATIENT, OUTPATIENT, SKILLED NURSING FACILITY)
C = PHARMACY
D = DENTAL
I = INPATIENT
O = OUTPATIENT
L = SKILLED NURSING FACILITY

Reinsurance Payment Summary

TR: RI130 ACT I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: _____ RI PAYMENT SUMMARY 13:23:37
 RI311L130

CASE NUMBER:
 CASE TYPE: LIV LIVER TRANSPLANT

AHCCCS ID:
 CTRT YEAR: 35 STATUS: A

DEDUCTIBLE: 0.00 TTL PAYABLE: 202264.92
 TTL RCVRY: 0.00 TTL PREM TX: 3139.12
 37958.73 LIABILITY: 237958.73 TOTAL PAID: 157017.79
 37958.73 RI PERCENT: .85 PAYMENT DUE: 48386.25

TYPE "S" TO SELECT AN INVOICE AND GO TO RI135

INVOICE (S) NUMBER	CHECK NUMBER	PAID AMOUNT	PREMIUM TAX PAID	CHECK DATE
AC	21	153878.67	3139.12	2

HELP SCREEN **RETURN TO RI105**

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=105 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 13:23:44 3/1/2018 NUM 02:49:28 05.015

Recoupment Details

S31 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA-24&80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

TR: RI127 ACT I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: RI CASE AUDIT ADJUSTMENTS

CASE NUMBER: _____ AHCCCS ID: _____
 CASE TYPE: _____ CTRT YEAR: _____
 RECIPIENT: _____ HEALTH PLAN: _____

THE CRN AND RECOVERED AMOUNT WILL BE SHOWN HERE

DEDUCTIBLE: 0.00 TTL PAYABLE: _____
 TTL RCVRY: 0.00 TTL PREM TX: _____
 ALLOWED AMT: 237958.73 LIABILITY: 237958.73 TOTAL PAID: _____
 CASE TOTAL: 237958.73 RI PERCENT: .85 PAYMENT DUE: _____

THIS SCREEN IDENTIFIES WHEN THERE WAS AN ADJUSTMENT TO AN RI CASE FROM AN AUDIT REVIEW

TYP	A D J U S T M E N T DESCRIPTION	SEQ NUM	ADJUSTMENT AMOUNT
—	_____	—	_____
—	_____	—	_____
—	_____	—	_____
—	_____	—	_____
—	_____	—	_____
—	_____	—	_____
—	_____	—	_____

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=CAS 7=UP 8=DWN 9=CNF 10=TOP 11=BOT 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 14:54:54 3/1/2018 NUM 04:20:38 05.015

RI Override Summary

S31 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA-24&80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

TR: RI140 ACT I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: RI OVERRIDE SUMMARY 15:20:23
 RI311140

CASE NUMBER: _____
 CASE TYPE: _____
 RECIPIENT: _____ AHCCCS ID: _____
 HEALTH PLAN: _____ CTRT YEAR: 35 STATUS: A

DEDUCTIBLE: 0.00
 TTL RCVRY: 0.00 TTL PAYABLE: 202264.92
 ALLOWED AMT: 237958.73 LIABILITY: 237958.73 TOTAL PAID: 153878.67
 CASE TOTAL: 237958.73 RI PERCENT: .85 PAYMENT DUE: 48386.25

(S)EL	CRN/ SEQ	ERROR CODE	ERROR DESC	OVRD REASON	OVRD DATE
—	17	Z720	EXACT DUPLICATE FOUND	0015	20171204
—	17	A623	STATUS CODE B ALREADY PAID	0015	20171204
—	18	H583	REINSURANCE CLAIM RECEIVED	0015	20180118
—	18	H583	REINSURANCE CLAIM RECEIVED	0015	20180118
—	18	H583	REINSURANCE CLAIM RECEIVED	0015	20180216

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=105 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 15:22:15 3/1/2018 NUM 04:47:59 05.015

RI Covered Services

2478 6569 8806
 TR: RI325 ACT: I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: _____ RI COVERED SERVICES RI21L325

CASE TYPE/CVG PKG: _____
 FORM TYPE: 0
 ACTIVITY TYPE: 0

ACTIVITY FROM	ACTIVITY TO	EFFECTIVE BEG DATE	END DATE

HELP SCREEN

REFER TO RF776 FOR CASE TYPE

REFER TO RF754 FOR FORM TYPE

ENTER AN ACTIVITY TYPE HERE
 R=REVENUE CODES
 H=HCPC/CPT CODES
 D=DENTAL CODES
 N=NDC CODES

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 9=CNF 10=TOP 11=BOT 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 15:45:41 3/1/2018 NUM 05:11:25 06.026

An example of a completed RI325 screen.

TR: RI325 ACT: I AHCCCS - REINSURANCE USER-ID: 03/01/18
 NTR: _____ RI COVERED SERVICES RI21L325

CASE TYPE/CVG PKG: HEM HEMOPHILIA REINSURANCE
 FORM TYPE: I UB I/P
 ACTIVITY TYPE: R REVENUE CODE

ACTIVITY FROM	ACTIVITY TO	EFFECTIVE BEG DATE	END DATE
0000	0999	10/01/1994	

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 9=CNF 10=TOP 11=BOT 12=ESC

S31/ Ready (1) 159.87.70.66 EZBSIMLU 16:19:04 3/1/2018 NUM 05:44:48 03.007

* What you can see here is that for a HEM case type the I , inpatient, claim type is a covered service and that all revenue codes between 0000 to 0999 are accepted as of 10/01/1994.

RI Approved Amount Determination

S30 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA24&80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

1694 CASE NUMBER IS REQUIRED
 TR: RI290 ACT: I AHCCCS - REINSURANCE USER-ID: 03/02/18
 NTR: _____ RI APPROVED AMT DETERMINATION 10:45:20
 RI31L290

CASE: _____ LINKED CASE NO:
 CRN: _____ FORM: SUBCP CD: INPUT MD: FACTOR NDC:

RI: APPR: PAID: OVERRIDE:
 MDC: APPR: COIN: DEDUCT:
 OTH INS: MDC PD:
 AHC ALLOW: BILLED: PLAN PD:
 INTEREST:
 PLAN APPR:

PMT METHOD:

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=PRI 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 10:56:45 3/2/2018 NUM 01:33:58 05.009

* This screen details the RI approved amount for a specific CRN, except for transplants.

Prior Authorization Screen

S30 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA24&80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

I0630 ENTER MENU SELECTION(S) AND PRESS ENTER TO PROCESS
 TR: RI400 RAUTH REINSURANCE PA - MENU USER-ID: 03/02/18
 CMD: _____ 11:12:42
 RI00L400

CHOOSE "1" HERE → 1. PA CASE (RI410)
 2. AUTHORIZATION EVENT (RI420)

ENTER SELECTION: _____
 FUNCTION: _____ (BROWSE, ADD, CHANGE, DELETE, VIEW)
 KEY VALUES: _____ (PA/CASE #)
 _____ (EVENT SEQUENCE #)
 _____ (AHCCCS ID)
 _____ (EFFECTIVE DATE)
 _____ (HEALTH PLAN)

CHOOSE "B" FOR BROWSE →

PF: 1=HLP 2=MEN 10=RCP 12=EXT

S30_ Ready (1) 159.87.70.66 EZBSIMLU 11:13:14 3/2/2018 NUM 01:50:27 11.029

Prior Authorization screen RI410

S30 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA24&80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

I0595 SELECT ADD(A), CHANGE(C,U), EXPAND(E), REPLICATE(R), OR VIEW(V,I)
 TR: RI410 RCASE REINSURANCE PA CASE BROWSE USER-ID: 03/02/18
 11:37:42
 ALT/SEC ID: N RI31L410

ENTER "V" TO VIEW

SEL PA CASE NO AHCCCS ID EFFECTIVE DATES STA PLAN ID RI CASE NO

PF: 1=HLP 2=MEN 4=TOG 5=PRV 6=NXT 7=BKW 8=FWD 10=TOP 11=BOT 12=EXT

S30_ Ready (1) 159.87.70.66 EZBSIMLU 11.38.23 3/2/2018 NUM 02.15.36 06.008

RI Encounter Error Summary

S30 - ADOA24&80-XLO1 - ADOA-24&80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA24&80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

6569 6136
 TR: RI204 ACT I AHCCCS 02/18
 NTR: ERROR RI ENC 56:31
 1P204

YOU MUST POPULATE THE ERROR CODE FIELD TO GET ANY RESULTS

ERROR CODE: _____
 HEALTH PLAN: _____ ALL HEALTH PLANS
 CASE TYPE: _____

(S) CRN	CASE NUMBER	ENC STA	FRM TYP	ERR TYP	HEALTH PLAN	CTRT ID	CASE YEAR	APPROVED TYPE	AMOUNT

PF: 1=HLP 2=RTN 3=CLR 4=MSG 5=PRV 7=UP 8=DWN 10=TOP 11=BOT 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 12.08.55 3/2/2018 NUM 02.46.08 07.015

Audit Screens

TR: RI900 AHCCCS - REINSURANCE SYSTEM 03/02/18
 NTR: _____ AUDIT FUNCTIONS 12:20:50
 RI00L900

(RI901) 1. RI CASE (RI916) 16. RI TRANSPLANT EXCP CD
 (RI902) 2. RI ENCOUNTERS (RI917) 17. RI PA CASE
 (RI903) 3. TRANSPLANT STAGE (RI918) 18. RI PA EVENT
 (RI904) 4. TRANSPLANT STAGE ENCOUNTERS
 (RI905) 5. CASE ADJUSTMENT
 (RI906) 6. HEALTH PLAN YEAR
 (RI907) 7. HEALTH PLAN PARAMETERS
 (RI908) 8. TRANSPLANT STAGE CONTRACT
 (RI909) 9. COVERED SERVICES
 (RI910) 10. LINKED HEALTH PLAN IDS
 (RI911) 11. SPECIAL DEDUCTIBLES
 (RI912) 12. RI CASE TYPE MAINTENANCE
 (RI913) 13. TRANSPLANT STAGE TYPES
 (RI914) 14. FACTOR COVERAGE
 (RI915) 15. RI OUTLIER CALCULATION

ENTER SELECTION: __ ACT: I

PF: 1=HLP 2=RTN 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 12.21.00 3/2/2018 NUM 02.58.13 22.044

**ONLY THESE
 OPTIONS ARE
 AVAILABLE TO
 CONTRACTORS**

RI Case Audit Trail

TR: RI901 ACT: I AHCCCS - REINSURANCE USER-ID: 03/02/18
 NTR: _____ RI AUDIT TRAIL 12:43:05
 RI CASE RI21L901

CASE:

STATUS: A A
 HEALTH PLAN ID:
 CONTRACT YEAR:
 CASE TYPE:
 AHCCCS ID:
 BEGIN DATE: 10/01/2016 10/01/2016
 END DATE: 09/30/2017 09/30/2017
 PAYMENT PCT: .75 .75
 DEDUCTIBLE: 25000.00 25000.00
 TOTAL VALUE: 34154.48 34154.48
 PAID YTD: 6865.86 6865.86
 FFS IND: N N
 PRR PLAN AMT: .00 .00
 RI PA NUM:
 MM RVW DAT:
 MODIFICATION: 02/07/2018 06:44:37PM 015 01/03/2018 11:21:23PM 015

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 12.44.04 3/2/2018 NUM 03.21.17 06.038

**THE DATE OF
 THE MOST
 RECENT ACTION**

**BROWSE
 THROUGH
 PRIOR
 ACTIONS BY
 PRESSING F8**

RI Encounter Audit Trail

```

S30 - ADOA24x80-XLO1 - ADOA-24x80-XLO1 - BlueZone Mainframe Display
File Edit Session Options Transfer View Script Help
Connections: ADOA24x80-XLO1
Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

TR: RI902 ACT: I AHCCCS - REINSURANCE USER-ID: 03/02/18
NTR: RI AUDIT TRAIL 13:18:59
RI ENCOUNTER RI21L902

CASE: CRN:

STATUS: PY PY
DESCRIPTION:
FORM TYPE: I I
APPROVED AMOUNT: 11659.88 11659.88
PAID AMOUNT: 2343.91 281.13
OVERRIDE AMOUNT: .00 .00
RATE CODE: 2210 2210
STATUS EFFECTIVE: 04/05/2017 04/05/2017
MODIFICATION: 11/07/2017 05:58:30PM 015 10/10/2017 05:56:12PM 015

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 10=263 12=ESC
S30_ Ready (1) 159.87.70.66 EZBSIMLU 13:21:53 3/2/2018 NUM 03:59:06 03.007
    
```

**THE DATE OF
THE MOST
RECENT ACTION**

**BROWSE
THROUGH
PRIOR
ACTIONS BY
PRESSING F8**

```

S30 - ADOA24x80-XLO1 - ADOA-24x80-XLO1 - BlueZone Mainframe Display
File Edit Session Options Transfer View Script Help
Connections: ADOA24x80-XLO1
Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

8999 4878
TR: RI905 ACT: I AHCCCS - REINSURANCE USER-ID: 03/02/18
NTR: RI AUDIT TRAIL 13:46:04
CASE ADJUSTMENTS RI21L905

CASE: ADJUSTMENT TYPE: SEQUENCE:
('A'UDIT OR 'O'THER) (001-005)

AMOUNT:
DESCRIPTION:
MODIFICATION:

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 12=ESC
S30_ Ready (1) 159.87.70.66 EZBSIMLU 13:49:21 3/2/2018 NUM 04:26:34 06.049
    
```

Audit Trail For Transplant Stages

S30 - ADOA24x80-XLO1 - ADOA-24x80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA24x80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

5450 NO RECORDS FOUND FOR SELECTION CRITERIA
TR: RI903 ACT: I AHCCCS - REINSURANCE USER-ID: 03/02/18
NTR: _____ RI AUDIT TRAIL 15:01:34
TRANSPLANT STAGE RI21L903

CASE: STAGE: SEQUENCE: 1
(NAME) (SEQ)

STATUS:
SERVICE BEG DATE:
SERVICE END DATE:
CONTRACT PROVIDER:
BILLING PROVIDER:
BILLING AMOUNT:
APPROVED AMOUNT:
PAID AMOUNT:
OVERRIDE AMOUNT:
RATE CODE:
PAY AUTHORIZATION:
MODIFICATION:

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 15:01:58 3/2/2018 NUM 05:39:11 06.025

S30 - ADOA24x80-XLO1 - ADOA-24x80-XLO1 - BlueZone Mainframe Display

File Edit Session Options Transfer View Script Help

Connections: ADOA24x80-XLO1 Attention PA1 PA2 PA3 Reset PF01 PF02 PF03 PF04 PF05 PF06 PF07 PF08 PF12 System Request

5450 NO RECORDS FOUND FOR SELECTION CRITERIA
TR: RI904 ACT: I AHCCCS - REINSURANCE USER-ID: 03/02/18
NTR: _____ RI AUDIT TRAIL 15:02:28
TRANSPLANT STAGE ENCOUNTERS RI21L904

CASE: STAGE: SEQUENCE: 1
CRN: (NAME) (SEQ)

STATUS:
FORM TYPE:
MODIFICATION:

PF: 1=HLP 2=RTN 3=CLR 4=MSG 7=UP 8=DWN 12=ESC

S30_ Ready (1) 159.87.70.66 EZBSIMLU 15:02:37 3/2/2018 NUM 05:39:50 06.025

Reports available via the AHCCCS SFTP Server for Contractor use and reference:

Reinsurance Pend Report RI91L205

Reinsurance Remittance Advice RI81L310

Reinsurance Case Summary RI91L105

Reinsurance Case Initiation RI91L100

Reinsurance Case Reconciliation RI91L315

(Available in Comma Delimited format or Report Text Format)

RI_COMMAFIL.RI91L100.INIT.HP_____.CSV

RI_COMMAFIL.RI91L105.SUMM.HP_____.CSV

RI_COMMAFIL.RI91L315.RECON.HP_____.CSV

RI_COMMAFIL.RI91L205.PEND.HP_____.CSV

RI_COMMAFIL.RI91L310.REMIT.HP_____.CSV

RI_91M100.INITIATION._____.TXT

RI_91M105.SUMMARY._____.TXT

RI_91M315.RECONCILIATION._____.TXT

RI_91M310.REMITTANCE._____.TXT

RI91L100 – Case Initiation Report

This report is a basic summary of case information for all cases created during the previous month's Reinsurance Case Creation cycle. It reports and details all Encounters that associated to those cases initiated within the reporting period.

RI91L105 – Case Summary Report

This report is a summary of case information for all cases active during the monthly RI cycle and lists Reinsurance Encounter status information for all Encounters associated to the case. It reports summary totals of Case Allowed, Liability, Premium Tax, and Paid amounts as well as detailed descriptions of each Encounter applied to the Reinsurance case.

RI91L315 – Case Reconciliation Report

This report is a basic summary of case information with a detailed listing of all Encounters that potentially apply to an active Reinsurance case but are not yet associated to the case. It includes Encounters in the Edit/Audit process to permit reconciliation of Encounter records with Reinsurance records.

RI91L205 – Pended RI Encounters

This report is a summary of case information for all active cases that have pending Reinsurance Encounters during that reporting period. It lists the edit codes, edit descriptions and edit counts.

RI91L310 – Remittance Advice

This report is generated after the monthly Reinsurance payment cycle. It is a summary of all financial activity applied to only those Reinsurance cases that were included in the payment run. Financial activity and Reinsurance Encounters detailed in the Remittance Advice include payments, replacements, voids and denials.