Illinois Healthcare and Family Services
MEDI - Registration Toolbox

Welcome to the Illinois portal for EDI exchange. This portal is available to the public
for Uploading/Downloading Batch transactions, or Real-Time Direct Data Entry, or DDE.

If you are a first time user, please make sure you complete your registration. It
consists of two steps:

> 1) MEDI Registration for your *personal* access to the website, and
> 2) IEC Registration for your *business* access to applications. IEC registration is
>   required for you to access the Electronic Health Record / Provider Incentive
>   Payment (PIP) application, if you are eligible for PIP.

If you are a non-Illinois resident desiring to register, after you Press REGISTER,
you will link to the Security Agreement, afterwhich you will Click-on:
Non-Illinois Resident Accept. This will take you to a page to PRINT an application,
and complete it hardcopy for mailing. Credentials will be mailed to you after approved,
for completing the process.

If you are trying to register a provider, and they are registered already, and have
two Administrators (max limit):

> 1) you may request removal of an Inactive Administrator, or
> 2) an Active Administrator may remove an Inactive Administrator.

If you are billing for a group of providers, you will:

> 1) Register your business,
> 2) Then follow steps to Request and Receive approval to initiate
>   Batch transactions for a service provider enrolled with HFS.

If you are registering to Download the Electronic Remittance (835), you will
follow specific Registration steps.

If you wish to status Claims, you may inquire Real-Time, or submit a Batch Claim
status transaction (276/277). This process will status electronic and hardcopy
submitted claims.

HFS desires your experience using the Medi/IEC to be as productive as possbile.
If you have problems, please contact us. We also welcome suggestions to make this
help document as useful as possible. If you don't see a specific topic you are researching,
please see the Bookmarks on the left margin.

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MEDI - Getting Started

Access to the Medical Electronic Data Interchange (MEDI) website is provided once you have successfully obtained a 'digital certificate' from Illinois Central Management Services (CMS).

In order to get started, you must:
1. Register in MEDI webiste
2. Receive authorization to view Medicaid Information

MEDI - User Registration

(create a State of Illinois Digital Certificate)

1. Goto website: http://www.myhfs.illinois.gov/
2. Click-on Register in top-left corner
3. Read State of Illinois Digital Certificate Subscriber Agreement.
4. Scroll to the bottom of agreement
5. If you have a State of Illinois driver's license or Illinois State Identification card, click-on the Illinois Resident Accept button. Otherwise, click on Non-Illinois Resident Accept.

   NOTE: **Non-Illinois Residents** will mail in a Digital Identification application form before completing the registration steps. After Selecting Non-Resident acceptance, on the next page Click-on: Application and Instructions. You will complete and mail-in the application. After processing your application, credentials will be returned to you, to allow continuing your Registration.

6. Follow the instructions to Register, then create your User ID and Password.
7. After completing the Step steps above, you may LOGIN to Medi system. The first time you Login you will be prompted to COMPLETE a User-Profile and ACCEPT the Medi Security Agreement.
8. After successfully registering to access Medi website, you will Register in IEC.

IEC - Getting Started

Purpose
The Interenet Electronic Claims (IEC) System's main purpose is to provide Users with the ability to perform basic processing, including submitting claims, viewing claim status, downloading remittance advice, and accessing other HFS information online through a web interface.

System Availability
The IEC System is designed to be available 24-hours a day 7 days a week.

Functions
Users of the MEDI System will have access to certain IEC functions depending on the authorizations they are granted. Below is a list of the functions that may be available to you.

Eligibility Inquiry
Recipient eligibility inquiry provides recipient eligibility information for a specified eligibility period.

Claim Status
The Claim Status Inquiry is only available 8AM - 5PM CST Monday - Friday.

Upload File(s)
Allows an authorized user to upload one or more transactions and more than one transaction type.

Download File(s)
Allows an authorized user to download one or more transactions and more than one transaction type.

Remittance Advice (835)
Allows the user to view and download ERAs.

Direct Data Entry (DDE)
Allows real-time entry and submission of claims.

Registration
Once you have registered MEDI successfully, you will be able to access your (MEDI) Home page. From there, you will register your Business; you will regsiter as:
1. An **Enrolled Medicaid Provider**, or
2. **Non-Enrolled Business** User

Enrolled Medicaid Providers will automatically have access to IEC transactions. A **Non-Enrolled Busness** User must Request and Receive Authorization from an Enrolled Medicaid Provider to initiate Internet Electronic Claims (IEC) transactions. Example, if you are a Physcian Group Billing entity,
1. You will Register your Business (i.e., billing group),
2. Then Request Authorization from each Enrolled Physcian to initiate Transactions on their behalf.
3. Each Enrolled Physician must Approve (your) Authorization Request for your Non-Enrolled Business to initiate IEC transactions.

IEC - Business Registration

There are two types of BUSINESS registration in the Medi system:
- **Administrator**: able to Approve, Deny or Delegate IEC activity (limit of two per business)
- **Employee**: will only have access to IEC Transactions under Administrator (unlimited count)

When you register a business following these steps, you will automatically receive Administrator status. Your business may have up to TWO administrators.   If you need to remove an Administrator, please see NOTE below. If your business is Enrolled with HFS to provide services to Medicaid Clients, please follow Step 1, otherwise follow Step 2 below.

1. **ADMINISTRATOR (HFS enrolled Medicaid service provider)**
   a. Click-on MEDI from the myHFS Home (page)
   b. Click-on Registration Menu in top-left corner
   c. Click-on Medicaid Provider
   d. Complete the fields required on the Provider Registration page. Required information is from your HFS enrollment on the Provider Information Sheet. If you need this sheet, please contact Provider Participation Unit at: 217.782.0538
   e. Click-on Submit. If you receive a 'Provider Not Found' error message, PLEASE VERIFY you are entering the EXACT spelling as listed on the Provider Information Sheet. The system only allows 5 attempts to register. If you are unsuccessful, you will be forwarded to the MEDI Exit page and your account will be locked.
   f. Once you have submitted the provider registration and it has been verified as first-time registration, you will be directed to continue, and you have completed the registration. If the provider number is already registered, continue with Step g.
   g. The MEDI System will direct you to the Duplicate - Provider page. On this page, to become an administrator for the provider number already registered, Click the radio-button to Select Option II.
   h. Click Submit.

2. **ADMINISTRATOR (business not enrolled with HFS)**
   a. ADMINISTRATOR REGISTRATION (of your business)
   b. Click-on MEDI from the myHFS Home (page)
   c. Click-on Registration Menu in top-left corner
   d. Click-on Other Business
   e. Complete the fields required on the page
   f. Click-on Submit
   g. Request Provider Authorization for each HFS enrolled - medical service provider
      NOTE: If you are the Administrator of a Business that is not an Enrolled Medical Service provider, your will not have access to any transactions in Medi. Your business must be Authorized to initiate transactions. For each individual Enrolled Service Provider, your business must Request and be Approve to initiate transactions.

NOTE: **If an Administrator needs removed**, an Active Administrator may remove an Inactive Administrator following the steps on Page #. If both Administrators are Inactive, you may remove one, please Fax a request, following the Steps below to:

   HFS SECURITY OFFICER
   Fax: 217-785-2335
   A. Explain specific requested changes, include reason(s) for change(s)
   B. Specify the exact Administrator Names to receive change(s)
   C. Have Signed by Provider, or Provider Representative, include Title
   D. Document request on your business letterhead
   E. Include contact information: Phone# & Email

IEC - Employee Registration

Obtain the Employee Registration Key from your business Medi Administrator. Your business Administrator will find the Employee Registration Key on the Manage My Account page.

1. Click-on Registration Menu in top-left corner
2. Click-on Employee Registration
3. Complete the fields required on the Employee Registration page, this includes entering the Employee Registration Key.
4. Click-on Submit

Warning: the Employee Registration Key is case-sensitive and must be entered exactly. The system only allows 5 attempts to register. If you are unsuccessful, you will be forwarded to the MEDI Exit page and your account will be locked.

5. Once an Employee is registered, the Administrator must login and follow these steps to change the Authorization status to ACCEPT:
6. Click-on MEDI from the myHFS Home (page)
7. Click-on Manage My Account in top-left corner
8. Select your Business Association and Click-on Authorization
9. Click-on Change Emp Auth
10. If you also want to add application access for an employee, follow these two steps:
    a. Click-on the dropdown box next to the application name
    b. Select the appropriate authorization level.
11. Click-on Accept under Registration Status

Warning: the Business Administrator CANNOT register an Employee under their LOGIN. If an Administrator attempts to register an Employee under their login, they will automatically be changed to an Employee registration status.

If you do mistakenly register yourself as an Employee. To correct your registration and return it to Administrator status, please follow ADMINISTRATOR Steps again.

IEC - Change an Administrator or Employee Status

1. **ADMINISTRATOR**

If you are an active administrator for a business, and another administrator for the same business has left or returned, you may need to change the status for the other administrator. All active administrators of a business can change the status of any other administrator for the same business.

   a. Click-on Manage My Account in the left-side navigation bar.
   b. Select the business for which you want to provide employee authorizations from the Manage My MEDI Account page by clicking on the Select radio button next to the HFS ID Number.
   c. Click Authorization button located on the right-side of the Business Associations header. This will take you to an authorization menu customized for the business type.
   d. Click Change Emp Auth button.
   e. Change the administrator's status and click Submit.

2. **EMPLOYEE**

If you are an active administrator for a business, and an Employee for the same business has left or returned, you may need to change the status for the Employee.

   a. Click-on Manage My Account in the left-side navigation bar.
   b. Select the business for which you want to provide employee authorizations from the Manage My MEDI Account page by clicking on the Select radio button next to the HFS ID Number.
   c. Click Authorization button located on the right-side of the Business Associations header. This will take you to an authorization menu customized for the business type.
   d. Click Change Emp Auth button.
   e. Change the Employee's status and click Submit.

IEC - Remove a Business

There may be times when you need to indicate you are no longer working or associated with a business.

1. Click-on Manage My Account. The Manage My MEDI Account page is displayed with your current business associations.
2. Select the business for which you want to terminate your relationship. To do this, click the Select radio button next to the business you want to select it.
3. Click-on the Display button located on the top or bottom of the page.
4. Verify this is the business you want to terminate by checking the HFS ID Number and business type. Click on the Change button located on the top or bottom of the page.
5. Click the "Click Here if You No Longer Work for this Business" check box to select it, and click Submit.

IEC - Request Medicaid Provider Authorization

To request provider authorization, you must be an administrator for a business that is not a Medicaid provider.

1. Click on Manage My Account in the left-side navigation bar.
2. Select the business for which you want to review provider authorizations from the Manage My MEDI Account page by clicking on the Select radio button next to the HFS ID Number.

   TIP: The same employer may be registered more than once as different business types (e.g. a provider/payee). If the names are the same, be sure to check the business type as well as the business name before you make your selection.

3. Click on: Authorization button. This will take you to the appropriate Authorization Menu page for the business type.
4. Click on: Req Provider Auth button. Only non-provider businesses will have this option. The authorizations the business has already requested or received are listed at the bottom of the page. Any removed authorizations will not be displayed.
5. Complete the provider number and provider name fields, IMPORTANT: select an application from the dropdown list, answer the claim preparer question and click the Submit button.

   Warning: If you are unsuccessful in requesting provider authorization five (5) times, you will be locked out of the MEDI System, and you will have to contact Network Services to have your account reset.

6. If there are no errors, you will be returned to the Request Provider Authorization page to review the status of your authorization requests.

NOTE: For the IEC System only, there is a 2-3 business day waiting period after authorization is granted before transactions can be exchanged. This is required in order to update HFS's X12N translator software.

IEC - Approve Authorization Request

To authorize a business to act on behalf of a provider, you must be an active administrator for a business that is an Enrolled Medicaid provider.

1. Click on the Manage My Account link in the left-side navigation bar
2. Select the provider business for which you want to provide authorizations by clicking on the Select radio button next to the HFS ID Number.

   Note: The business type must be "PROVIDER" and you must be an active administrator for the provider business.

3. Click on: Authorization button. This will take you to the Provider Authorization Menu page.
4. Click on: Business Auth button. A list of businesses that have request authorization will be displayed.
5. An initial request will be displayed in PENDING status. You may place the authorization request in ACTIVE or INACTIVE status by clicking Accept or Reject respectively, or leave it in PENDING status. You may also change any previous authorizations the provider's administrators have granted or revoked.
6. If the authorization request is for the Internet Electronic Claims (IEC) System, you will also need to authorize the specific transactions. Review the Authorize Transactions for the IEC System topic for more information.
7. Once you have completed your authorization changes, click on a Submit button to submit the changes. Review the information about the Provider Business Authorization page for more detailed information on completing this process.

   Warning: The business cannot do work on behalf of the provider unless the authorization request is Accepted (ACTIVE status).

8. If there are no errors, you will be returned to the Provider Business Authorization page to review the status of the provider's authorization requests.

IEC - Payee Registration - 835

To register as a payee:
1. From myHFS HOME, click-on MEDI link at top of page .
2. Click-on: REGISTRATION MENU from the left-side navigation bar.
3. Click-on: PAYEE REGISTRATION
4. Complete the fields required on the PAYEE REGISTRATION page.
5. Click-on: SUBMIT

NOTE: 835 Downloads will not be available for 7-10 business days after registration.

835 Search

The purpose of the ERA Search page is to allow users to search for ERA files for a specific Payee. When a user first accesses the ERA Listing page, they will select a Payee for whom they want to view ERA's. ERA's will only be available from the time that a Payee registered in MEDI and is set up in Commerce Manager forward. Any 835s prior to that date will not be available for viewing in the IEC System. The user is required to enter search criteria by Voucher Number or Voucher Date in order to limit the number of ERA files displayed. Users will also have the ability to search by a combination of the three search fields:
1. Voucher Date Range
2. Voucher Number
3. Voucher Type (Professional, Institutional, and Pharmacy).

Voucher Date Range search must contain a From and To Date, and will be limited to a maximum search range of seven days. A search cannot be performed for a date in the future. Going forward, when a user in IEC enters a date range, the farthest back they can retrieve files from IEC will be the date they first used the system and will be limited to a year from thed date the 835 was made available for download. The search criteria will remain in the search boxes after a search is performed for the user's reference. The user will have the ability to perform a new search by entering new criteria.

835 Download Problems

If you do not find an 835 for Download:
1. Verify the Voucher has been released from the Illnois State Comptroller using the business TIN#.
2. Verify that your Business has the Payee registered under Manage My Account.
   From MEDI Home, please Click-on: Manage My Account to verify the Payee is registered.

IEC - Supported HIPAA Transactions

The Illinois Department of Healthcare and Family Services currently supports the following HIPAA Transactions and Versions though the IEC system:

270 Recipient Eligibility Request - 005010X279A1
271 Recipient Eligibility Response - 005010X279A1
835 Health Care Claim Payment/Advice - 005010X221A1
837I Institutional Claims - 005010X222A1
837P Professional Claims - 005010X223A2
999 Functional Acknowledgement - 005010X231A1
824 Application Advice - 004050X166

IEC - Navigation & Help Information

There are navigational links available on each page. The following links are located below and to the right of the window tab name. Look for these links in the upper right side of the screen. These links include:

1. **HELP** - Page-level Help documentation

2. **PREVIOUS** - move to the previous page

4. **NEXT** - move to the next page

5. **SUBMIT** - to submit the information entered

6. **RESET -** If you make a mistake when entering information on a page, click the Rese**t** button to return the entered fields to their original values.

The left-side navigation bar provides context-relevant navigation within the IEC System and provides users access to business functionality available in the IEC system.   The available options are:

1. **Eligibility Inquiry** - This opens the Recipient Eligibility Inquiry Page.

2. **Remittance Advice** - This opens the Remittance Advice Search page.

3. **Claim Status Inquiry** - This opens the Claim Status Inquiry Page.

4. **Upload File(s)** - This opens the File Upload Page.

5. **Download File(s)** - This opens the File Download Page.

6. **Logout** - This opens the Logout Page.

7. **Help** - This opens a new browser with Help Information

8. **FAQ** - This opens a new browser with Frequently Asked Questions.

Page Names: You can tell what page you are on by looking at the window tab name located to the right of the navigation bar and below the Illinois Department of Healthcare and Family Services heading.

IEC - Batch Submission Guidelines

1. Any file to be uploaded needs to have a .txt or .dat file extension.

2. Data being uploaded must be in X12 format.

3. To send a file to HFS, use the Upload function.

4. To receive a file from HFS, use the Download function.

5. If the submitter is not authori zed, an 824 acknowledgement will be generated and will be available on the Download page within 24 hours.

6. If an uploaded file is not compliant, a 999 or 824 acknowledgement will be generated and will be available on the Download page. NOTE: You may recieve an 999 showing acceptance, meaning the transaction was readable, and a still recieve a 2nd: 999 documenting transaction non-compliance.

7. In order to successfully submit an X12 transmission to HFS, the sender and receiver id must be populated correctly in the ISA (Interchange Control Header) segment of the transmission. To find the **Sender Id**:

   a. Click on the 'Manage My Account'
   b. Select the Business (that you would like to submit transactions for)
   c. Click the 'Display' button
   d. Values for both inbound and outbound transmissions are included under the heading 'HIPAA - IEC System'

8. A Confirmation Number will be presented after your Upload, keep this for future reference.

NOTE: HFS has documented clarification of EDI submission requirements in Companion Guides. Please see these guides, as well as the EDI Home Page on the website for current issues.

IEC - Upload Overview

The IEC upload process allows an authorized user to upload one or more transactions and more than one transaction type. This process uses secure HTTP to transfer files.

After a file is successfully uploaded through the Upload page, the Upload Confirmation page will appear. This page will confirm that the file has been uploaded and will display the following information: Date, Time, Status, IEC Audit Number, and File Name(s). In addition to the immediate notification, an X12 999 will be available within a 24-hour period and any negative X12 824 will be available within a 24-hour period.

How do I Upload?

1. Click-on Upload File(s) link from the IEC menu bar on the left hand side of the page.

2. Choose the Entity you are submitting for, from "Entity" drop down box. This displays only Enrolled Providers for which the user is authorized to submit a transaction.

3. Select files to upload using the "Browse" and "Add File" buttons. Clicking the "Browse" button will produce a "pop-up" window that will display your local file directory.

4. Then select which file you want to upload, click "Open", and will see the file that was selected displayed in the text box next to the "Browse" button. Click on the "Add File" button. You will see the selected file in the "Files to be Uploaded" display box.

5. You can also delete any files displayed in the "Files to be Uploaded" display area. To do this, click the check box next to the unwanted file(s) and click on the "Remove File(s)" button located next to the "Add File" button.

6. After selecting files, click on the "Upload Files" button to begin the upload process.

7. Once the upload is completed, notification that your files were submitted successfully will be displayed on the Upload Confirmation page. Confirmation for those files submitted will include: Date, Time, Status, IEC Audit Number and File Name(s). You can repeat the process to upload additional files by clicking on the "Upload More File(s)" button located at the bottom of the confirmation page. In addition to the immediate notification, an X12 997 will be available within a 5-minute period and any negative X12 824 will be made available within a 24-hour period.

IEC - Download Overview

The IEC download process allows an authorized user to download files which may contain one or more transactions and more than one transaction type. This process uses secure HTTP to transfer files.

How do I Download?

1. Click on the Download File(s) link from the IEC menu bar on the left hand side of the page.

2. Choose which Entity you are submitting for, from the "Entity" drop down box. This box displays only those Entities for which the IEC user is authorized to download a transaction.

3. Available files will appear in a file list area. A user may select one or more of the files displayed. A user may select multiple files at once. Those files not selected will remain available for download until the 'File available through' date has expired.

4. Enter the local file directory location to where the files should be downloaded/saved.

5. Press the "Download Files" button to begin the download process.

6. Notification that the file(s) have been downloaded will be available on the Download Confirmation Page. Confirmation for those files submitted will include: Date, Time, Status, IEC Audit Number and File Name(s).

IEC - Claim Status

IEC can be used to inquire for claim processing status. MEDI/IEC allows for either: Real-Time claim status using Direct Data Entry (DDE), or batch inquiries using the X12 276/277 transactions.

1. **DDE**: After a four to seven day wait period, the DDE system will provide you an immediate response on the status of a single claim for up to:
   a. 90 days from the Voucher Date for NIPS/Pharmacy claims, and
   b. 180 days from the Voucher Date for Institutional claims.
   c. DDE is available M-F 8 a.m. to 5 p.m. CST (excluding holidays).

NOTE: Status checks on claims with a Voucher Date older than 90/180 days must be performed using the batch 276 transaction described below. Batch claim status (276) goes back two years for voucher transactions.

2. **Batch**: After the four to seven day wait period, the batch system will allow you to perform either a single inquiry for a claim not meeting the DDE date criteria above (example: a claim with a voucher date older than prescribed above) or to perform an inquiry for multiple claims in one batch. Batch inquiries (276) are accumulated throughout the day and their corresponding response transactions (277) are returned the next business day. The uploading of batch files is available 24 hours a day, 7 days a week. Batch files submitted to the Department by 5 p.m. CT M-F will be processed that night and the corresponding responses (277) should be available the next business day.

For crosswalk information on Claim Status codes, please refer to a provider notice dated January 27, 2005, found under All Medical Assistance Providers Notices.

What is a 999 (Functional Acknowledgement)?

The 999 (Functional Acknowledgement) transaction is used as the first response to receiving a transmission. The 999 informs the submitter that the transmission arrived. In addition, the 999 can be constructed to send information about the syntactical quality of the transmission. See X12 Implementation Guide for futher explanation.

What is an 824 (Application Advice)?

The Application Advice (824) transaction set can be used to provide the ability to report the results of an application system's data content edits of transaction sets. It is designed to accommodate the business need of reporting the acceptance, rejection or acceptance with change of any transaction set. The Application Advice should not be used in place of a transaction set designed as a specific response to another transaction set. See X12 Implementation Guide for futher explanation.

Forgot Password

Username and Password and change it as needed.
1. Click on the Login option in the left-side navigation menu on the Medi website.
2. On the Login page, click on the Forgot Password button located at the bottom of the page.
3. Enter your driver's license number (xxxx-xxxx-xxxx)
4. Follow the instructions presented on Medi screen.

What is a "Claim Status Tracking Number"?

The Claim Stauts Tracking Number is defined as: "Unique identifier for the transaction, provided by the user." This field is for the USER'S assignment, so that you may assign a "name" to a transaction. When you receive the results - you are able to tie it back to the initial inquiry.

Fake Path Problem

1. Go to tools in browser / Security-Internet (zone) / Custom Settings
2. Look for a setting 'Include local directory path when uploading files to a server'.
3. Click ENABLE
4. Click OK

Pop-Ups

1. Please make sure you are using Internet Explorer (browser).
2. The "POP-UP BLOCKER" setting under "Tools/Internet Options/Security" in your browser should be set to MEDIUM - the following steps detail How-To verify the setting:
   a. Under settings, please verify Filter Level is set to: "MEDIUM: Block most automatic pop-ups"
   b. Under SETTINGS Button, PLEASE CHECK: "Play a sound when a pop-up is blocked" and "Show Information Bar when a pop-up is blocked"

NOTE: You will need to Accept an Entrust Applet (security) when you LOGIN to the website. The PROMPT is presented in a Pop-Up

Contact Information

If you have problems with this web application, use the following contact information to contact HFS:

Network Services: DoIT Service Desk at 1-312-814-DoIT (3648), Option #1 - for Information Technology (IT), and then Option #2 - for HFS

HFS E-Mail
hfswebmaster@illinois.gov

Accessibility
See the State of Illinois accessibility standards

Glossary

-Batch - A group of transactions.

-Browser - A software application used to locate and display web pages.

-DCN - Document Control Number. Unique number assigned by HFS identifying the claim.

-Direct Data Entry (DDE) - A method for directly entering information into the IEC System for processing. The real-time submission and response of a single transaction.

-Download - To transfer data (usually a file) from a mainframe, network, or computer to a local computer. It is the opposite of upload.

-Download Inquiry Table - The IEC table that will be updated with batch files ready for upload.

-EDI - Electronic Data Interchange. The transfer of data between different organizations. ANSI has approved a set of EDI standards known as the X12 standards.

-**Entity** - An individual or organization with a relationship to HFS through MEDI. Example Entities are provider, provider group, billing service, and payee.

-HIPAA - Health Insurance Portability and Accountability Act. It is legislation governing health insurers and other entities that provide health insurance to consumers. These provisions are intended to protect health insurance coverage for workers and their families when they change or lose their jobs.

-Hyper link - A reference to another document. A link routes you to another document when it is clicked. -

-IEC - Internet Electronic Claims. The portion of the MEDI web site that securely transfers and routes HIPAA transactions from the client machine to HFS's translators. It performs uploads and downloads of batch transactions and will be DDE enabled.

-JDK - Java Development Kit. The Java programming libraries and development environment provided by Sun Microsystems.

-MEDI - Medical Electronic Data Interchange. The MEDI Authorization System provides a container for authorization information for access to HFS Internet applications.

-Medicaid - A program jointly funded by the states and the federal government that reimburses hospitals and physicians for providing care to qualifying people who cannot finance their own medical expenses.

-**Mercator** - the Company that produces a translator and extensions for managing translated data. HFS uses the Mercator Healthcare Integration Package to translate X12N data into its proprietary format.w to Navigate in IEC

-MMIS - Medicaid Management Information Systems

-NDC/Procedure Code - code identifying a specific service.

  Patient - An entity entitled to health care benefits because of his or her relationship to the subscriber. In Medicaid, the Patient must also be the Subscriber.

-Provider - Doctor, hospital, pharmacy, dentist rendering the medical services.

-Real-time - In a real-time mode, the sender sends a single request transaction to the receiver, either directly or through a switch (clearinghouse), and remains connected while the receiver processes the transaction and returns a response transaction to the original sender. Typically, response times range from a few seconds to around thirty seconds, and should not exceed one minute.

-Recipient - Individual receiving medical treatment.

-Submitter - Individual or organization requesting the information.

-Subscriber - The insured individual.

-Trace Number - Unique identifier for a transaction, assigned by the user.

-Transaction - Under HIPAA, this is the exchange of information between two parties to carry out financial or administrative activities related to health care.

-Transmission - An object (generally a file) containing multiple transactions.

-Upload - To transmit data from a computer to a mainframe, or network.

-**X12** - An ANSI-accredited group that defines EDI standards for many American industries, including health care insurance. Most of the electronic transaction standards proposed under HIPAA are X12 standards.