



Louisiana Medicaid Management Information System (LMMIS)

Electronic Clinical Data Inquiry (ICD10) User Manual

Date Created: 03/16/2017 Date Modified: 06/06/2023

Prepared By Technical Communications Group

PROJECT INFORMATION

| Document Title | Louisiana Medicaid Management Information Systen Electronic Clinical Data Inquiry (ICD10) User Manual | n (LMMIS) | _ |
|----------------|--|-----------|---------------|
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| | Revision History | | |
| Date | Description of Change | LIFT | Ву |
| 03/16/17 | Initial draft | | Bria Beathley |
| 08/07/18 | Updated as per LAMedicaid Secure Redesign | 10733 | J. Lavigne |
| 12/03/18 | Updated as per DXC Rebranding LIFT | 11467 | J. Lavigne |
| 07/16/20 | Updated screenshots for LAMedicaid Unsecure Redesign | 11689 | J. Lavigne |
| 11/09/20 | Updated document as per Gainwell Rebrand. | 12081 | J. Lavigne |
| 06/06/23 | Updated document to change support email address. | N/A | J. Lavigne |

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1.0 ACCESSING THE APPLICATION

This section provides information on how to access the **Electronic Clinical Data Inquiry -ICD10** application via Provider Login. It includes instructions on how to establish an online account with Louisiana Medicaid and complete the Login ID and password process.

The Louisiana Department of Health (LDH) determines who is an authorized user defining all user access capabilities. Directions for establishing a valid online provider account are available on the Louisiana Medicaid website at <u>www.lamedicaid.com</u> under the **Website Enrollment** link located under **Provider Tools** on the left side of the main menu.

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| PROVIDER TOOLS | FRAUD AND ABUSE | |
| TRAINING/POLICY UPDATES | MEVS | eτ |
| CLAIMS AND BILLING | PROVIDER ENROLLMENT | |
| FEE SCHEDULES | PROVIDER LOCATOR TOOL | gi |
| MEDICAID PROGRAMS | PROVIDER LOGIN | ΕA |
| & INITIATIVES | PROVIDER MANUALS | ۶h |
| RESOURCES : | PROVIDER UPDATES | U |
| SEARCH | REMITTANCE ADVICE | iy |
| | REVS | ul in |
| | TPL RECOVERY REQUEST | ol |
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Providers who are experiencing difficulty in establishing an account or with the application may contact the Gainwell Technologies **Technical Support Desk at 1-877-598-8753**, Monday – Friday 8:00 a.m. – 5:00 p.m. CT or request support by e-mailing <u>lamedicaid@gainwelltechnologies.com</u>.

In order to access the **Electronic Clinical Data Inquiry - ICD10 application**, or any other secure application, users must navigate through the Provider Login section of the Louisiana Medicaid web site.

Open a web browser and enter the URL for Louisiana Medicaid at <u>www.lamedicaid.com</u>. Click the **Provider Login** link under **Provider Tools** on the left side of the main menu to continue.

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| ABOUT US | Alanta | |
| PROVIDER TOOLS | FRAUD AND ABUSE | |
| TRAINING/POLICY | MEVS | letherapy billing for EarlySteps providers and recycled claims, see here. |
| CLAIMS AND BILLING | PROVIDER ENROLLMENT | |
| FEE SCHEDULES | PROVIDER LOCATOR TOOL | ligibility and Reporting Requirements Updates 10/26/20 |
| MEDICAID PROGRAMS & INITIATIVES | PROVIDER LOGIN | 1EALTH, PEDIATRIC DAY HEALTH CARE, REHABILITATION AND PERSONAL CARE SERVICES DUE TO HURRICANE DELTA - |
| RESOURCES I | PROVIDER MANUALS | Phase of General Distribution Funding 10/02/20 y Using MEVS 09/29/20 |

At the Provider Login screen, users may read through the Notice to Users. In order to continue, users must enter their 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID in the field provided and enter the characters from the CAPTCHA image before clicking the **Next** button.

| | LOUISIANA MEDICAID |
|-------------------------|--|
| g <mark>a</mark> ınwell | Provider Login |
| Help | Please enter your 10-digit National Provider Identifier (NPI) or 7-Digit Medicaid Provider ID |
| | Note: Non-FFS Behavioral Health Providers should use their NPI to login. |
| | For security purposes, please enter the characters from the CAPTCHA image |
| | |
| | |
| | NOTICE TO USERS |
| | This is Louisiana's Medicaid information and is the property of Gainwell Technologies and Louisiana Department of Health. It is for authorized use only. Users (authorized or unauthorized) have no explicit or implicit expectation of privacy. |
| | Any or all uses of this website and all files on this system may be intercepted, monitored, recorded, copied, audited, inspected, and disclosed to authorized site, Louisiana Department of Health, and law enforcement personnel, as well as authorized officials of other agencies, both domestic and foreign. By using this system, the user consents to such interception, monitoring, recording, copying, auditing, inspection, and disclosure at the discretion of authorized site or Louisiana Department of Health. |
| | Unauthorized or improper use of this website may result in administrative disciplinary action and civil and criminal penalties. <u>By continuing to</u> access this website you indicate your awareness of and consent to these terms and conditions of use. LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning. |
| | NEXT |

At the User Login screen, users must input their Login ID and Password before clicking the **Next** button to continue.

Note: Login ID and Password are case sensitive.

| LOUISIANA MEDICAID |
|---|
| You are here : LAMedicaid.com |
| User Login |
| Please enter your Restricted Applications' Login ID and Password. Remember the Login ID and Password are case sensitive. |
| Login ID |
| testing |
| Password |
| ••••• |
| Need help? |
| Forgot Your Login ID? |
| Forgot Your Password? |
| Forgot login ID and Password? |
| PREVIOUS NEXT |

Users will be directed to the Provider Applications page where they can access their authorized applications



- Submitter Contact Information Submitter Linked Providers
- Weekly Remittance Advices

Click the Electronic Clinical Data Inquiry - ICD10 link to continue.

| Batch Eligibility Verification System Batch Eligibility Verification System Pilot Chisholm Paragraph 10 File Download Claim Status Inquiry (5010 Version) Clear Claim Connection EFT Authorization Electronic Clinical Data Inquiry - ICD10 Electronic Clinical Data Inquiry - ICD9 Electronic Prior Authorization | Restricted Provider Applications |
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| Batch Eligibility Verification System Pilot Chisholm Paragraph 10 File Download Claim Status Inquiry (5010 Version) Clear Claim Connection EFT Authorization Electronic Clinical Data Inquiry - ICD10 Electronic Clinical Data Inquiry - ICD9 Electronic Prior Authorization | Batch Eligibility Verification System |
| Chisholm Paragraph 10 File Download Claim Status Inquiry (5010 Version) Clear Claim Connection EFT Authorization Electronic Clinical Data Inquiry - ICD10 Electronic Clinical Data Inquiry - ICD9 Electronic Prior Authorization Cleater Data Remit 925 | Batch Eligibility Verification System Pilot |
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| Electronic Clinical Data Inquiry - ICD9 Electronic Prior Authorization Electronic Romit 925 | Electronic Clinical Data Inquiry - ICD10 |
| Electronic Prior Authorization | Electronic Clinical Data Inquiry - ICD9 |
| | Electronic Prior Authorization |

2.0 USING THE APPLICATION

New Functionality

Please note that with the new redesign, backwards navigation throughout any application can be done by clicking on the breadcrumb trail located on the blue ribbon at the top of any screen.

Users also have access to a **Print** screen button located on the top right hand corner of every screen.



The Electronic Clinical Data Inquiry (eCDI) Web Application provides a secure, web based tool for providers to submit clinical data inquiries on the following aspects of a recipient's health services history:

- Clinical Drug Inquiry
- Outpatient Procedures
- Ancillary Services
- Emergency Room Services
- Physician/EPSDT Encounters
- Specialist Services
- Lab and X-Ray Services
- Inpatient Services

| Electronic Clinic | al Data | Inqu | iry - ICD1 | .0 |
|--|------------|------|----------------|--------------|
| Recipient's Medicaid ID Number or CCN: | | | FIND RECIPIENT | CLEAR FIELDS |
| Recipient's Date of Birth: | mm/dd/yyyy | | | |
| | | | | |
| | | | | |
| | | | | |

In order to receive the clinical data reports, the user must enter **Medicaid ID Number** or **16-digit CCN** (Card Control Number) and Date of Birth. Click on the Find Recipient button to proceed.

| Electronic Clinic | al Data Inq | uiry - ICD10 |) |
|---|--------------------|----------------|--------------|
| Recipient's Medicaid ID Number or CCN: | 11040234479311 | FIND RECIPIENT | CLEAR FIELDS |
| Recipient's Date of Birth: | (ii. (ii. /1984 📷 | | |
| Recipient's Name: | E min LOU | | |
| Recipient's Sex: | M Recipient's Age: | 33 | |
| Clinical Drug Inquiry | | | |
| Physician/EPSDT Encounters | | | |
| Outpatient Procedures | | | |
| Specialist Services | | | |
| Ancillary Services | | | |
| Lab and X-Ray Services | | | |
| Emergency Room Services | | | |
| Inpatient Services | | | |

Once the recipient has been properly identified to the e-CDI application (and any alerts like the one shown above have been cleared), the user may specify the clinical data to view by clicking on one of the eight buttons:

- Clinical Drug Inquiry
- Outpatient Procedures
- Ancillary Services
- Emergency Room Services
- Physician/EPSDT Encounters
- Specialist Services
- Lab and X-Ray Services
- Inpatient Services

2.1 Clinical Drug Inquiry

If the user selects the **Clinical Drug Inquiry** button from the e-CDI Main Menu, then the e-CDI will respond with a prescription history, listed in reverse chronological order, detailing the number, date of service (DOS), Brand or Trade name of the pharmaceutical, a generic description of the pharmaceutical, the strength of the dosage, the route of delivery of the drug, the quantity of items that filled the prescription, the number of days the prescription should supply, a code for Provider Type (PT), and a code for the Provider Specialty (PS):

| e-C | DI | Clinical I | Drug Inqu | iiry | | | | | | | |
|-----------------------|----------|-----------------------|--------------------------|-----------------------------------|-----------|----------|-------------------|-------------|----|----|--|
| cipi | ent's Me | dicaid ID Number or C | CN: | | | | | | | | |
| ecipi | ent's Da | te of Birth: | 10/77/73081 | | | | | | | | |
| cipi | ent's Na | me: | 30103861200488888 | | | | | | | | |
| ecipi | ent's Se | x: | F Recipient's Age: | 23 | | | | | | | |
| lter :L: lick l | Pelow | TILTER | listory Period: | | | | | | | | |
| This | Month | ⊖Prior Month ⊖La | st 12 Months Paic fil | d Prescription lled this month | s 00 | | | | | | |
| | | PRESCR | NPTIONS ARE LISTED IN F | REVERSE CHRO | NOLOGICAL | ORDER (M | Vlost Recent Rx F | irst) | | | |
| lum | DOS | Brand/Trade Name | Generic Description | Health Plan Identifier | Strength | Route | Quantity | Days Supply | рт | PS | |
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You can modify the contents of the report by clicking on the radio buttons for *This Month, Prior Month, or Last 12 Months.*

2.2 Physical/EPSDT Encounters

If the user selects the **Physical/EPDST Encounters** button from the e-CDI Main Menu, then the e-CDI will respond with a history of Physical/EPDST services, listed in reverse chronological order, detailing the number, date of service (DOS), the Diagnosis Code (ICD9), the Diagnosis Code (ICD10), the Procedure Code for the service, a description of the procedure, a code for Provider Type (PT), and a code for the Provider Specialty (PS).

| cipie | nt's Medic | aid ID Numl | per or CCN: | 1000071477 | | | | |
|----------|-------------|--------------|-------------|--------------|-------------------------------|------------------------------|----|----------|
| Recipie | nt's Date o | f Birth: | | 10/17/1108 | | | | |
| Recipie | nt's Name | | | | ANNAL CONTRACT | | | |
| Recipie | nt's Sex: | | | F Recipie | nt's Age: 23 | | | |
| | | | | | | | | |
| Click be | low to Sel | ect the Phys | ician Encou | inters Histo | ry Period: | | | |
| • Last I | fonth | Last 6 Me | onths 🤇 | Last 12 Mo | nths | | | |
| | PHYSICI. | AN/EPSDT E | NCOUNTERS | ARE LISTED | IN REVERSE CHRONOLOGICAL ORDE | R (Most Recent First |) | |
| Num | DOS | DX9 | DX10 | Proc Code | Proc Description | Health Plan Identifier | рт | PS |
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You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*

2.3 Outpatient Procedures

If the user selects the **Outpatient Procedures** button from the e-CDI Main Menu, then the e-CDI will respond with a history of outpatient procedures, listed in reverse chronological order, detailing the number, date of service (DOS), the Diagnosis Code (ICD9), the Diagnosis Code (ICD10), the Procedure Code, a description of the procedure, a code for Provider Type (PT), and a code for the Provider Specialty (PS):

| Accipient's Date of Birth: ccipient's Name: ccipient's Name: ccipient's Sax: F Recipient's Age: 23 Control Control | P |
|--|----|
| Accipient's Name: Recipient's Name: Recipient's Sex: F Recipient's Age: 23 Hick below to Select the OP Inst. History Period: Last Month Clast 5 Months Clast 12 Months CUTPATIENT PROCEDURES INST. ARE LISTED IN REVERSE CHRONOLOGICAL ORDER (Most Recent Proc First) Num DOS DX9 DX10 Proc Code Proc Description Health PI Identifier PT Identifier I | PS |
| Recipient's Sex: F Recipient's Age: 23 Slick below to Select the OP Inst. History Period: Slick below to Select the OP Inst. History Period: Start Month Clast 6 Months Last 12 Months OUTPATIENT PROCEDURES INST. ARE LISTED IN REVERSE CHRONOLOGICAL ORDER (Most Recent Proc First) Proc Num D05 DX9 DX10 Proc Proc Description Health Planfifer PT Image: Start Sector | PS |
| OUTPATIENT PROCEDURES INST. ARE LISTED IN REVERSE CHRONOLOGICAL ORDER (Most Recent Proc First) Num D05 DX9 DX10 Proc Code Proc Description Health Plan Identifier PT Image: | PS |
| Bit k below to Select the OP Inst. History Period: Last North | PS |
| Last Honths Last 12 Months VUTPATIENT PROCEDURES INST. ARE LISTED IN REVERSE CHRONOLOGICAL ORDER (Most Recent Proc First) Num D05 DX9 DX10 Proc Code Proc Description Health Plan Identifier PT Image: Ima | PS |
| OUTPATIENT PROCEDURES INST. ARE LISTED IN REVERSE CHRONOLOGICAL ORDER (Most Recent Proc First) Num D05 DX9 DX10 Proc Code Proc Description Health Plan Identifier PT Image: Im | PS |
| Num DDS DX9 DX10 Proc Code Proc Description Health Plan Identifier PT Image: | PS |
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You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*

2.4 Specialist Services

If the user selects the **Specialist Services** button from the e-CDI Main Menu, then the e-CDI will respond with a history of specialist services, listed in reverse chronological order, detailing the number, date of service (DOS), the Procedure Code for the service, a description of the procedure, a code for Provider Type (PT), and a code for the Provider Specialty (PS):

| acinic | otir Modic | aid ID Num | hor or CCN: | | | | | |
|--------------------|-------------|-------------------------|----------------------------------|----------------------|------------------------------|----|----|--|
| recipie Recipie | nt's Date o | aid ID Numi f Birth: | ber or CCN: | | | | | |
| Recipie | nt's Name: | | | | | | | |
| Recipie | nt's Sex: | | F Recipient's Age: | 23 | | | | |
| | | | | | | | | |
| Click be | low to Sele | ect the Spec | cialist Services History Period: | - | | | | |
| ® Last № | lonth | 🔍 Last 6 Mo | onths Cast 12 Months | | | | | |
| | RE | FERRALS AF | RE LISTED IN REVERSE CHRONOLO | GICAL ORDER (Most Re | cent Referral First) | | | |
| Num | DOS | Proc Code | Proc Description | | Health Plan Identifier | РТ | PS | |
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You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*

2.5 Ancillary Services

If the user selects the **Ancillary Services** button from the e-CDI Main Menu, then the e-CDI will respond with a history of ancillary services, listed in reverse chronological order, detailing the number, date of service (DOS), the Procedure Code for the service, a description of the procedure, a code for Provider Type (PT), and a code for the Provider Specialty (PS).

| And | cilla | ry Se | rvices | | | | | |
|----------|-------------|--------------|------------------------|---------------------------------------|---------------------|------------------------------|----|----|
| Recipie | nt's Medica | aid ID Numb | per or CCN: | | | | | |
| Recipie | nt's Date o | f Birth: | 1947711398 | i i i i i i i i i i i i i i i i i i i | | | | |
| Recipie | nt's Name: | | 0.000 | Reference - | | | | |
| Recipie | nt's Sex: | | F Recipie | nt's Age: 23 | | | | |
| | | | | | | | | |
| Click be | low to Sele | ect the Serv | ices History Period: | | | | | |
| ●Last M | lonth OLa | ast 6 Month | s Cast 12 Months | | | | | |
| | ANCI | LARY SERVI | CES ARE LISTED IN REVE | IRSE CHRONOLOGICAL | . ORDER (Most Recer | nt Proc First) | | |
| Num | DOS | Proc Code | Proc Description | | | Health Plan Identifier | РТ | PS |
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You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*

2.6 Lab and X-Ray Services

If the user selects the **Lab and X-Ray Services** button from the e-CDI Main Menu, then the e-CDI will respond with a history of lab and X-ray services, listed in reverse chronological order, detailing the number, date of service (DOS), the Diagnosis Code (ICD9), the Diagnosis Code (ICD10), the procedure code, and a description of the procedure.

| e-C | DI La | b an | d X-R | ay S | ervices | S |
|----------------------|--------------------------------|-----------------------|-------------|-----------------------|---------------------|------------------------------|
| Recipier Recipier | nt's Medicai nt's Date of I | l ID Number Sirth: | or CCN: | 0001307808 7773881 | | |
| Recipier | it's Name: | | F | Recinient's | Age: 23 | |
| pici | | | | | | |
| lick bel | ow to Selec | the Lab and | X-Ray Histo | ry Period: | | |
| East M | onth OL: | ist 6 Months | Last 12 | Months |] | |
| AB PRO | CEDURES AR | E LISTED IN R | EVERSE CHR | DNOLOGICA | L ORDER (Most Re | acent Proc First |
| Num | DOS | DX9 | DX10 | Proc Code | Proc Description | Health Plan Identifier |
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You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*

2.7 Emergency Room Services

If the user selects the **Emergency Room Services** button from the e-CDI Main Menu, then the e-CDI will respond with a history of emergency room services, listed in reverse chronological order, detailing the number, date of service (DOS), the Diagnosis Code (ICD9), the Diagnosis Code (ICD10), the Procedure Code for the service, a description of the procedure, a code for Provider Type (PT), and a code for the Provider Specialty (PS).

| e-C | DIE | • P | | | | | | | |
|---------|---------------|-------------|----------------|--------------|--|------------------------------|--------|-------|--|
| Recipie | nt's Medica | aid ID Numb | er or CCN: | 000071397 | | | | | |
| Recipie | nt's Date of | f Birth: | | 0,7777388 | | | | | |
| Recipie | nt's Name: | | | 1000 | Addition 1 | | | | |
| Recipie | nt's Sex: | | | F Recipier | nt's Age: 23 | | | | |
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| lick be | low to Sele | ct the ER H | istory Perio | d: | | | | | |
| Last M | fonth 🔍 | Last 6 Mont | hs Last | 12 Months |] | | | | |
| | | ED LUCTOD) | | | | - - | | | |
| Num | DOS | DX9 | DX10 | Proc Code | Proc Description | Health Plan Identifier | РТ | PS | |
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| | | | | | | < < P | rev N | evt>> | |
| T=Prov | vider Type, F | PS= Provide | r Specialty (i | move the c | rsor over the PT or PS column to display | a description | of the | code | |

You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*

2.8 Inpatient Services

If the user selects the **Inpatient Services** button from the e-CDI Main Menu, then the e-CDI will respond with a history of inpatient services, listed in reverse chronological order, detailing the number, to and from dates of service (DOS), the Primary Diagnosis Code for the service, the primary service description, the secondary diagnosis code, the secondary service description, the provider type (PT) code, and the provider specialty (PS) code.

| e-CDI Inpatient Services | | | | | | | |
|--------------------------|------------------------------|---|--|--------|------|--|--|
| Recipient's Medica | id ID Numb | er or CCN: | | | | | |
| Recipient's Date of | Birth: | 10077773001 | | | | | |
| Recipient's Name: | | -3-12-300-1-2004/00000 | | | | | |
| Recipient's Sex: | | F Recipient's Age: 23 | | | | | |
| CLICK DELOW to Sele | ct the IP Ins st 6 Months | t. History Period: Last 12 Months INPATIENT ADMISSIONS ARE LISTED IN REVERSE CHRONOLOGICAL OR | DER (Most Recent Adm First) | | | | |
| Num From DOS | Thru DOS | Diagnoses | Health Plan Identifier | РТ | PS | | |
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| | | describes (expected as a second | interation of Alexandra I | | | | |

You can modify the contents of the report by clicking on the radio buttons for *Last Month, Last 6 Months, or Last 12 Months.*