

Managed Care Plan Attestation Download Process and Data Element Dictionary

General Information

The online ACA Self Attestation Form shall be used to register and certify a physician's eligibility to provide the specified Evaluation and Management (E&M) and Vaccine Administration services for which the Patient Protection and Affordable Care Act (ACA) and 42 *Code of Federal Regulations* (CFR) 447 enhanced payments are made.

This ACA Primary Care Physician Self Attestation data shall be made available for download to Managed Care Plans (MCPs) for use in determining whether the physician rendering or supervising the service has personally attested to the following:

- A physician, as defined in 42 CFR 440.50 with a specialty designation of family medicine, general internal medicine, pediatric medicine or a subspecialty within one of the listed specialties

AND

- Meeting at least one of the following qualifications:
 - Board certified in a specialty or subspecialty that is recognized by the American Board of Medical Specialties (ABMS), American Board of Physician Specialties (ABPS) or American Optometric Association (AOA)
- OR
- At least 60 percent of total claims billed or paid for the most recently completed calendar year or, for newly eligible physicians, the prior month, were for E&M (99201 – 99499) and Vaccine Administration (90460, 90461, 90471 – 90474, or their successors) services or local codes that correspond to these E&M and Vaccine Administration codes

MCPs are not required to use the California Department of Health Care Services (DHCS) self attestation data and may utilize a proprietary registry. However, if a plan chooses to use their own registry system, proposed arrangements must be submitted to the DHCS for review and approval prior to use.

For additional questions/information regarding the ACA self attestation process, please contact the Telephone Service Center (TSC) at 1-800-541-5555, choose options 4 and 2, and then follow the prompts to speak with the POS/Internet Help Desk. The POS/Internet Help Desk is available from 6 a.m. to midnight, seven days a week.

Download Process

The ACA Primary Care Physician Self Attestation Data shall reside on the California DHCS Medi-Cal website under Transaction Services. MCPs may access this data the same way they would access/download their encounter data using the same user ID and password.

The self attestation data file shall be provided in the form of an encrypted zipped comma delimited (*.csv), ASCII file to allow MCPs to easily manipulate the data to suit their individual needs. The columns shall be delimited by the "|" (pipe) character, and thus the attestation data will not contain any special formatting or be in report format. The password to decrypt the zipped file shall be the same password that is used to log on to Transactions Services on the Medi-Cal website.

The ACA Primary Care Physician Self Attestation File shall be updated, as a full replacement file, at approximately 4 a.m. each day. This file will contain all existing attestation data plus any updates that were made the previous day. MCPs should perform the following actions to download the self attestation file:

1. Go to the California DHCS' Medi-Cal website:
<http://www.medi-cal.ca.gov/>.
2. Click the "Transactions" Tab.
3. Enter MCP User ID.
Note: MCPs who do not have a User ID and Password should contact DHCS to request/register for logon credentials.
4. Enter MCP Password.
5. Click the "Submit" Button.
6. Click the "ACA Attest – MCO Download" Link.
7. Click the "UUUUUUUUUCCYMMDD.zip" Link.
Note: "UUUUUUUUU" represents the MCP User ID.
8. Open/save the zipped file using a zip/un-zip utility and the MCP password.
9. The un-zipped/decrypted "csv" file is delimited by the "|" (pipe) character. Import into Microsoft Excel or the proprietary system for use to suit individual needs.

ACA Primary Care Physician Self Attestation File – Data Element Dictionary

The ACA Primary Care Physician Self Attestation File captures most of the data provided by physicians wishing to attest to their eligibility to provide specified E&M or Vaccine Administration services for which the ACA and 42 CFR 447 enhanced payments are made. The following Data Element Dictionary describes each individual field, format, and length on the self attestation file.

Important Note: Depending on the number of non-physician medical practitioners, board certifications and/or updates made by the user, the self attestation file can contain multiple rows that correspond to a single physician/record. Therefore, a single attestation record shall consist of the first row of the "Attest_ID"/"NPI_id" to the row immediately prior to the next "Attest_ID"/"NPI_id".

	CSV Column Header Name	Field Name	Description	Format	Max Length
1.	Attest_ID	Attestation ID	Attestation sequence number systematically assigned by System.	Numeric	6
2.	NPI_id	Provider Number (NPI)	Provider Number or National Provider Identifier	Alphanumeric	10
3.	Name	Provider Name	Provider Name	Alphanumeric	28
4.	Email	Email Address	Email address in "emailid@domain" format	Alphanumeric	40
5.	CA_med_board_license	Medical License Number	California or Out-of-State Medical License Number	Alphanumeric	15
6.	CA_osteo_board_license	Osteopathic License Number	California or Out-of-State Osteopathic License Number	Alphanumeric	15
7.	MCO1	Managed Care Plan Code (#1)	Code Number of Managed Care Plan Provider Contracts With	Numeric	3
8.	MCO2	Managed Care Plan Code (#2)	Code Number of Managed Care Plan Provider Contracts With	Numeric	3
9.	MCO3	Managed Care Plan Code (#3)	Code Number of Managed Care Plan Provider Contracts With	Numeric	3
10.	MCO4	Managed Care Plan Code (#4)	Code Number of Managed Care Plan Provider Contracts With	Numeric	3
11.	MCO5	Managed Care Plan Code (#5)	Code Number of Managed Care Plan Provider Contracts With	Numeric	3
12.	Attest_Specialty	Attestation To Physician Specialty	Indicates Provider has attested to being a Physician practicing in an ACA eligible Specialty Or Sub-Specialty	Alphanumeric (TRUE/FALSE)	5
13.	Attest_date	Attestation To Physician Specialty Date & Time	Indicates Date & Time Provider has attested to being a Physician practicing in an ACA eligible Specialty Or Sub-Specialty	Date & Time (MM/DD/CCYY) (HH:MM:SS AM/PM)	N/A

	CSV Column Header Name	Field Name	Description	Format	Max Length
14.	Speciality1	Specialty/Sub-Specialty Code (#1)	<p>Indicates the Specialty/Sub-Specialty the Physician practices or is certified in:</p> <p>001 - Family Medicine</p> <p>002 - Family Medicine - Adolescent Medicine</p> <p>003 - Family Medicine - Family Practice</p> <p>004 - Family Medicine - Family Physicians</p> <p>005 - Family Medicine - Geriatric Medicine</p> <p>006 - Family Medicine - Hospice and Palliative Medicine</p> <p>007 - Family Medicine - Obstetrics</p> <p>008 - Family Medicine - Sleep Medicine</p> <p>009 - Family Medicine - Sports Medicine</p> <p>010 - Internal Medicine</p> <p>011 - Internal Medicine - Adolescent Medicine</p> <p>012 - Internal Medicine - Cardiology</p> <p>013 - Internal Medicine - Advanced Heart Failure and Transplant Cardiology</p> <p>014 - Internal Medicine - Allergy/Immunology</p> <p>015 - Internal Medicine - Cardiovascular Disease</p> <p>016 - Internal Medicine - Endocrinology</p> <p>017 - Internal Medicine - Critical Care Medicine</p> <p>018 - Internal Medicine - Clinical Cardiac Electrophysiology</p> <p>019 - Internal Medicine - Endocrinology/Diabetes and Metabolism</p> <p>020 - Internal Medicine – Gastroenterology</p> <p>021 - Internal Medicine - Geriatric Medicine</p> <p>022 - Internal Medicine - Hematology</p> <p>023 - Internal Medicine - Hematology/Oncology</p> <p>024 - Internal Medicine - Hospice and Palliative Medicine</p> <p>025 - Internal Medicine - Infectious Disease</p> <p>026 - Internal Medicine - Interventional Cardiology</p> <p>027 - Internal Medicine - Medical Oncology</p> <p>028 - Internal Medicine - Nephrology</p> <p>029 - Internal Medicine – Oncology</p>	Numeric	3

	CSV Column Header Name	Field Name	Description	Format	Max Length
			030 - Internal Medicine - Pulmonary Diseases 031 - Internal Medicine - Rheumatology 032 - Internal Medicine - Sleep Medicine 033 - Internal Medicine - Sports Medicine 034 - Internal Medicine - Transplant Hepatology 035 - Pediatrics 036 - Pediatrics - Adolescent Medicine 037 - Pediatrics - Adolescent Medicine/Adolescent & Young Adult 038 - Pediatrics - Child Abuse 039 - Pediatrics - Developmental - Behavioral 040 - Pediatrics - Hospice and Palliative 041 - Pediatrics - Medical Toxicology 042 - Pediatrics - Neonatology 043 - Pediatrics - Neonatal - Perinatal Medicine 044 - Pediatrics - Neurodevelopmental Disabilities 045 - Pediatrics - Allergy/Immunology 046 - Pediatrics - Cardiology 047 - Pediatrics - Critical Care Medicine 048 - Pediatrics - Emergency Medicine 049 - Pediatrics - Endocrinology 050 - Pediatrics – Gastroenterology 051 - Pediatrics - Hematology - Oncology 052 - Pediatrics - Infectious Diseases 053 - Pediatrics - Nephrology 054 - Pediatrics - Pulmonology 055 - Pediatrics - Rheumatology 056 - Pediatrics - Sleep Medicine 057 - Pediatrics - Sports Medicine 058 - Pediatrics - Transplant Hepatology	Numeric	3
15.	Speciality2	Specialty/Sub-Specialty Code (#2)	Indicates the Specialty/Sub-Specialty the Physician practices or is certified in Note: Please see Speciality1 for Specialty/Sub-Specialty Codes.		

	CSV Column Header Name	Field Name	Description	Format	Max Length
16.	Speciality3	Specialty/Sub-Specialty Code (#3)	Indicates the Specialty/Sub-Specialty the Physician practices or is certified in Note: Please see Speciality1 for Specialty/Sub-Specialty Codes.	Numeric	3
17.	Speciality4	Specialty/Sub-Specialty Code (#4)	Indicates the Specialty/Sub-Specialty the Physician practices or is certified in Note: Please see Speciality1 for Specialty/Sub-Specialty Codes.	Numeric	3
18.	Speciality5	Specialty/Sub-Specialty Code (#5)	Indicates the Specialty/Sub-Specialty the Physician practices or is certified in Note: Please see Speciality1 for Specialty/Sub-Specialty Codes.	Numeric	3
19.	Cancel	Physician Attestation Cancellation	Indicates Provider has cancelled their ACA Attestation Important Note: Effective 10/22/2013, this Field shall be moved to the Cert_Record_type and associated fields as a new Certification Record Type.	Alphanumeric (TRUE/FALSE)	5
20.	Cancel_date	Physician Attestation Cancellation Date & Time	Indicates Date & Time Provider has cancelled their ACA Attestation Important Note: Effective 10/22/2013, this Field shall be moved to the Cert_Record_type and associated fields as a new Certification Record Type.	Date & Time (MM/DD/CCYY) (HH:MM:SS AM/PM)	N/A
21.	Update_date	Header Information Last Update Date & Time	Indicates Date & Time Provider has attested or updated Header (Name, Email, License Numbers, MCP#s, Specialty/Sub-Specialty) information	Date & Time (MM/DD/CCYY) (HH:MM:SS AM/PM)	N/A
22.	NMP_Position	NMP Position ID	NMP sequence number systematically assigned by System. For example, the first NMP Record added shall have an NMP_Position of "1". The second/next NMP Record to be added shall have an NMP_Position of "2".	Numeric	2

	CSV Column Header Name	Field Name	Description	Format	Max Length
23.	NMP_Iteration	NMP Iteration/Update ID	Indicates the iteration/update sequence number associated with any changes to the NMP Record. For example, when a NMP Record is added, the NMP_Iteration shall be reflected as "1". The next time this same NMP Record is updated, the NMP_Iteration shall be reflected as "2".	Numeric	2
24.	NMP_NPI	NMP Provider Number (NPI)	Non-Physician Medical Practitioner (NMP) Provider Number or National Provider Identifier	Alphanumeric	10
25.	NMP_name	NMP Provider Name	NMP Provider Name	Alphanumeric	28
26.	NMP_Begin_date1	NMP Begin Date (#1)	The First Effective Begin Date of the Physician's professional responsibility for the NMP. Note: Each NMP, for the same NMP_Position/NMP_Iteration, up to 10, shall correspond to a single Row containing Begin and End Dates (#1 – #3) and the NMP Update Date/Time.	Date (MM/DD/CCYY)	N/A
27.	NMP_End_date1	NMP End Date (#1)	The First Effective End Date of the Physician's professional responsibility for the NMP. Note: Each NMP, for the same NMP_Position/NMP_Iteration, up to 10, shall correspond to a single Row containing Begin and End Dates (#1 – #3) and the NMP Update Date/Time.	Date (MM/DD/CCYY)	N/A
28.	NMP_Begin_date2	NMP Begin Date (#2)	The Second Effective Begin Date of the Physician's professional responsibility for the NMP. Note: Each NMP, for the same NMP_Position/NMP_Iteration, up to 10, shall correspond to a single Row containing Begin and End Dates (#1 – #3) and the NMP Update Date/Time.	Date (MM/DD/CCYY)	N/A

	CSV Column Header Name	Field Name	Description	Format	Max Length
29.	NMP_End_date2	NMP End Date (#2)	The Second Effective End Date of the Physician's professional responsibility for the NMP. Note: Each NMP, for the same NMP_Position/NMP_Iteration, up to 10, shall correspond to a single Row containing Begin and End Dates (#1 – #3) and the NMP Update Date/Time.	Date (MM/DD/CCYY)	N/A
30.	NMP_Begin_date3	NMP Begin Date (#3)	The Third Effective Begin Date of the Physician's professional responsibility for the NMP. Note: Each NMP, for the same NMP_Position/NMP_Iteration, up to 10, shall correspond to a single Row containing Begin and End Dates (#1 – #3) and the NMP Update Date/Time.	Date (MM/DD/CCYY)	N/A
31.	NMP_End_date3	NMP End Date (#3)	The Third Effective End Date of the Physician's professional responsibility for the NMP. Note: Each NMP, for the same NMP_Position/NMP_Iteration, up to 10, shall correspond to a single Row containing Begin and End Dates (#1 – #3) and the NMP Update Date/Time.	Date (MM/DD/CCYY)	N/A
32.	NMP_Entry_date	NMP Information Last Update Date & Time	Indicates Date & Time Physician has listed or updated the NMP information	Date & Time (MM/DD/CCYY) (HH:MM:SS AM/PM)	N/A

	CSV Column Header Name	Field Name	Description	Format	Max Length
33.	Cert_Record_type	Certification Record Type	Indicates the type of Certification/Qualification: ABMS – American Board Of Medical Specialties ABPS – American Board Of Physician Specialties AOA – American Optometric Association Qual1 – Board Certified by ABMS, ABPS, or AOA Qual2 – At least 60% of total claim volume are for eligible ACA services Ineli – Ineligible for ACA associated with a particular date range Cancl – Fully/completely ineligible for ACA Important Note: The “Cancl” Certification Record Type and its associated data shall only reside in this Field on or after 10/22/2013. Prior to this date, this data shall reside under the “Cancel” Field.	Alphanumeric	5
34.	Cert_Iteration	Certification Record Type Iteration/Update ID	Indicates the iteration/update sequence number associated with any changes to the Certification Record Type. For example, when a Qual1 Record Type is added, the Cert_Iteration shall be reflected as “1”. The next time this same Qual1 Record Type is updated, the Cert_Iteration shall be reflected as “2”.	Numeric	2
35.	Cert_Begin_date1	Certification Record Type Begin Date (#1)	The First Effective Begin Date of the ABMS, ABPS, AOA, Qual1, Qual2, Ineli, or Cancl Certification Record Type. Note: Each Physician, for the same Cert_Record_type/Cert_Iteration, shall correspond to a single Row containing Begin and End Dates (#1 – #3), Cert Update Date/Time, and Cert Checked Indicator.	Date (MM/DD/CCYY)	N/A

	CSV Column Header Name	Field Name	Description	Format	Max Length
36.	Cert_End_date1	Certification Record Type End Date (#1)	The First Effective End Date of the ABMS, ABPS, AOA, Qual1, Qual2, Ineli, or CancI Certification Record Type. Note: Each Physician, for the same Cert_Record_type/Cert_Iteration, shall correspond to a single Row containing Begin and End Dates (#1 – #3), Cert Update Date/Time, and Cert Checked Indicator.	Date (MM/DD/CCYY)	N/A
37.	Cert_Begin_date2	Certification Record Type Begin Date (#2)	The Second Effective Begin Date of the ABMS, ABPS, AOA, Qual1, Qual2, Ineli, or CancI Certification Record Type. Note: Each Physician, for the same Cert_Record_type/Cert_Iteration, shall correspond to a single Row containing Begin and End Dates (#1 – #3), Cert Update Date/Time, and Cert Checked Indicator.	Date (MM/DD/CCYY)	N/A
38.	Cert_End_date2	Certification Record Type End Date (#2)	The Second Effective End Date of the ABMS, ABPS, AOA, Qual1, Qual2, Ineli, or CancI Certification Record Type. Note: Each Physician, for the same Cert_Record_type/Cert_Iteration, shall correspond to a single Row containing Begin and End Dates (#1 – #3), Cert Update Date/Time, and Cert Checked Indicator.	Date (MM/DD/CCYY)	N/A
39.	Cert_Begin_date3	Certification Record Type Begin Date (#3)	The Third Effective Begin Date of the ABMS, ABPS, AOA, Qual1, Qual2, Ineli, or CancI Certification Record Type. Note: Each Physician, for the same Cert_Record_type/Cert_Iteration, shall correspond to a single Row containing Begin and End Dates (#1 – #3), Cert Update Date/Time, and Cert Checked Indicator.	Date (MM/DD/CCYY)	N/A
40.	Cert_End_date3	Certification Record Type End Date (#3)	The Third Effective End Date of the ABMS, ABPS, AOA, Qual1, Qual2, Ineli, or CancI Certification Record Type. Note: Each Physician, for the same Cert_Record_type/Cert_Iteration, shall correspond to a single Row containing Begin and End Dates (#1 – #3), Cert Update Date/Time, and Cert Checked Indicator.	Date (MM/DD/CCYY)	N/A

	CSV Column Header Name	Field Name	Description	Format	Max Length
41.	Cert_Entry_date	Certification Record Type Information Last Update Date & Time	Indicates Date & Time Physician has listed or updated the Certification Record Type information	Date & Time (MM/DD/CCYY) (HH:MM:SS AM/PM)	N/A
42.	Cert_Checked	Attestation To Certification Record Type	Indicates Physician has attested to being a particular Certification/Qualification: Note: Please see Cert_Record_type for specific Certification Record Types.	Alphanumeric (TRUE/FALSE)	N/A