

Data Link

	Number 07-003	Page 1 of 23
Cross Reference N/A	Reference N/A	
Date August 2007	Response required N/A	

NOTE: Data Link 07-003 Replaces Data Link 07-002

Subject: Availability of Enrolment and Payment Reports via Electronic Data Transfer (EDT)

As a Primary Care physician you currently receive paper enrolment and payment reports every month. In the late fall of 2007 the ministry will begin providing some of these reports via EDT.

The documents listed below will provide you and your vendor with the information to change identified reports to EDT.

- **Report Name and Payment Model Chart:**
A chart listing all the reports by primary care model that will be available via EDT.
- **File Name Layout for Reports:**
Each report is assigned a two digit identifier to assist you with identification of the report.
- **Enrolment Report Record Layouts:**
Patient Summary, Patient Details, Target Population and Service
- **Payment Report Record Layouts:**
Base Rate & Comprehensive Care Capitation Payment Detail, Comprehensive Care Capitation Payment Detail, Base Rate & Comprehensive Care Reconciliation Detail, Comprehensive Care Capitation Payment Reconciliation Detail and Detail Categorization of Claims Report

Note:

- All pertinent information, including when and how you will be able to receive your reports via EDT, will be provided nearer to the date of the reports' availability.
- Although receiving your reports via EDT is not mandatory, it is recommended. Paper reports will continue to be available. You will continue to receive paper reports for three months after registering for EDT.
- The material contained in the rest of this document is technical in nature.

If you have questions, please contact the ministry Service Support Contact Centre at:
1 800 262-6524

1. Report Name and Payment Model Chart

The Report Name and Payment Model chart below lists the report titles along the left hand side. Each current Primary Care Model is listed along the top. The report is designated for either the group lead, solo physician or the report is Not Applicable N/A for that group.

Report Name	Family Health Network	Family Health Group	Group Health Centre	Comp Care Model	Rural & Northern Physician Group	St. Joseph's Health Centre	South Eastern Academic Medical	Family Health Org	Weeneebayko Health Ahtuskaywin	Community Sponsored Agreement (CSA)
Enrolment Detail	Solo	Solo	Group	Solo	Solo	Solo	Solo	Solo	Solo	N/A
Enrolment Summary	Solo	Solo	Group	Solo	Solo	Solo	Solo	Solo	Solo	N/A
Preventive Care/ Target Population	Solo	Solo	Group	Solo	Solo	Solo	Solo	Solo	Solo	N/A
Detail Categorization of Claims	Choice	N/A	Group	N/A	N/A	N/A	Group	Choice	N/A	N/A
Base Rate and Comprehensive Care Capitation Payment Detail	Choice	N/A	Group	N/A	N/A	N/A	N/A	Choice	N/A	N/A
Base Rate and Comprehensive Care Capitation Payment Reconciliation	Choice	N/A	Group	N/A	N/A	N/A	N/A	Choice	N/A	N/A
Comprehensive Care Capitation Payment Detail	N/A	Solo	N/A	Solo	Group	Group	Group	N/A	Group	Group
Comprehensive Care Capitation Payment Reconciliation Detail	N/A	Solo	N/A	Solo	Group	Group	Group	N/A	Group	Group

2. File Name Layout for Reports

Your system must be able to identify each report received in your EDT mailbox. The list of reports should appear as menu selection options.

The table below is the Report Name Chart. The chart displays the Report Name and the two digit identifier assigned to each report for identification. For example, the Enrolment Report – Patient Summary has been assigned the letters **ES**.

Report Name Chart

Report Name (as seen in EDT Mailbox Subject Field – full report names shown on page 2)	Report Type 2 Digit Identifier
Enrol Patient Summary	ES
Enrol Patient Detail	ED
Prevent Care / Target Pop	TP
Detail Ctgy of Claims	CT
B Rate & CC Cap Detail	BC
B Rate & CC Cap Recon	BR
CC Capitation Detail	CD
CC Capitation Recon	CR

The report file name is located under **ITEM** in your EDT mailbox as shown below:

DOWNLOAD	Government of Ontario	2007-01-31			
	Electronic Data Transfer				
	Download File Menu				
Mailbox: MOH1234		UNDELIVERED:(0)			
SEL STAT	ITEM	SUBJECT	Size(K)	DATE	TIME
U	LEES4567.114	Enrolment Patient Summ	87	20070131	23:23:23
PROTOCOL: Z		end...			
Place "*" next to the item to select it for DOWNLOAD or DELETE					
PFKEYS: 3-EXIT 4-BACK 6-FORWARD 8-SELNEW 9-DELETE 10-DOWNLOAD					

Here's how you decipher the file name **LEES4567** shown under the Item column above:

- L** = First alpha character is a unique identifier
- E** = Next alpha character is the report month
(A = Jan, B = Feb, C = March,.....L=December), in this case E = May
- ES** = Next 2 alpha characters are the unique identifiers for the report,
ES = Enrolment Report Patient Summary
- 4567** = numerical sequence to avoid overwriting the file
- .114** = internal to the Ministry

Therefore, the report file name in the above sample EDT mailbox refers to a Primary Care model's Enrolment Report – Patient Summary for the month of May.

3. Report Record Layouts

The reports will be sent as unformatted text files to your EDT mailbox. Text files allow you or your vendor to format the text for readability and ease of use based on your specific needs.

3.1 Enrolment Report Record Layouts – Patient Summary

The following tables describe the record layouts for each record type within the Enrolment Report – Patient Summary.

Layout for record type ‘R’ (report information):

ESRPCR60R1-EOCT 31, 2006

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	R = Report
Report Name	04	10	X	PRP60R1-E
Report Date	14	12	X	YYYYMMDD

Layout for record type ‘G’ (group information):

ESGFHGFAAAFHG1

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	G = Group Information
Group Type	04	03	X	Group (Grp) or Solo (Sol)
Group Number	07	04	X	Physician’s Group Number
Group Name	11	75	X	Group Name

Layout for record type 'P' (physician information):

ESP991124DOE, JOHN ADAM

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	P = Physician
Physician Number	04	06	X	Physician Billing Number
Physician Name	10	75	X	Last, first middle

Layout for record type '1' (address line 1):

ES1DR. J DOE

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	1
Physician Title and Name	04	36	X	Title, first initial last name

Layout for record type '2' (address line 2):

ES2123 MAIN STREET

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	2
Line 1	04	36	X	Street Number and Name

Layout for record type '3' (address line 3):

ES3SUITE 301

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	3
Line 2	04	36	X	Suite, Box Number, Rural Route...

Layout for record type '4' (address line 4):

ES4TORONTO, ON

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	4
City, province	04	36	X	City and Province

Layout for record type '5' (address line 5):

ES5M4T 2T1

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ES = Enrolment Summary
Record Type	03	01	X	5
Postal Code	04	07	X	Postal Code

3.2 Enrolment Report Record Layouts – Patient Details

The reports will be sent as unformatted text files to your EDT mailbox. Text files allow you or your vendor to format the text for readability and ease of use based on your specific needs.

The following tables describe the record layouts for each record type within the Enrolment Report – Patient Details.

Layout for record type ‘R’ (report information):

EDRPCR60R1-EOCT 01, 2006OCT 31, 2006

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	R = Report Information
Report Name	04	10	X	PRP60R1-E
Report Date	14	12	X	YYYYMMDD

Layout for record type ‘G’ (group information):

EDGFHGFAAAFHG1

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	G = Group Information
Group Type	04	03	X	Group (Grp) or Solo (Sol)
Group Number	07	04	X	Physician’s Group Number
Group Name	11	75	X	Name of the Group

Layout for record type 'P' (physician information):

EDP991124DOE, JOHN ADAM

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	P
Physician Number	04	06	X	Physician Billing number
Physician Name	10	75	X	Last, first, middle name

Layout for record type '1' (address line 1):

ED1DR. J DOE

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	1
Physician Title and Name	04	36	X	Title, first initial last name

Layout for record type '2' (address line 2):

ED2123 MAIN STREET

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	2
Line 1	04	36	X	Street Number and Name

Layout for record type '3' (address line 3):

ED3SUITE 301

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	3
Line 2	04	36	X	Suite, Box, Rural Route....

Layout for record type '4' (address line 4):

ED4TORONTO, ON

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	4
City, province	04	36	X	City and Province

Layout for record type '5' (address line 5):

ED5M4T 2T1

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	5
Postal Code	04	07	X	Postal Code

Layout for record type 'A' (assigned report):

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	A = Assigned Report
Patient's Last Name	04	15	X	Last Name of Patient
Patient's First Name	19	10	X	First Name of Patient
Patient's Health Number	29	10	X	Ten digit Health Number – <i>doesn't include Version Code</i>
Effective Date	39	10	X	Enrolment Effective Date
End Date	49	10	X	Date Enrolment Ended
Termination Reason	59	19	X	Why Enrolment Ended

Layout for record type 'E' (enrolled report):

EDEDVIDSON DANNY 46142977212006-11-01

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	E = Enrolled Report
Patient's Last Name	04	15	X	Last Name of Patient
Patient's First Name	19	10	X	First Name of Patient
Patient's Health Number	29	10	X	Ten digit Health Number – <i>doesn't include Version Code</i>
Effective Date	39	10	X	Enrolment Effective Date
End Date	49	10	X	Date Enrolment Ended
Termination Reason	59	19	X	Why Enrolment Ended

Layout for record type ‘P’ (pre-member report):

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	M = Pre-Member Report
Patient’s Last Name	04	15	X	Last Name of Patient
Patient’s First Name	19	10	X	First Name of Patient
Patient’s Health Number	29	10	X	Ten digit Health Number – <i>doesn’t include Version Code</i>
Effective Date	39	10	X	Enrolment Effective Date
End Date	49	10	X	Date Enrolment Ended
Termination Reason	59	19	X	Why Enrolment Ended

Layout for record type ‘U’ (unconfirmed report):

EDUANDERSON JOHN 11013312032006-07-152006-11-3084 ENDED BY MOH

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	U = Unconfirmed Report
Patient’s Last Name	04	15	X	Last Name of Patient
Patient’s First Name	19	10	X	First Name of Patient
Patient’s Health Number	29	10	X	Ten digit Health Number – <i>doesn’t include Version Code</i>
Effective Date	39	10	X	Enrolment Effective Date
End Date	49	10	X	Date Enrolment Ended
Termination Reason	59	19	X	Why Enrolment Ended

Layout for record type 'B' (batch totals):

EDB00010

FIELDNAME	FIELD STARTING POSITION	LENGTH	FORMAT (X = alphanumeric)	FIELD DESCRIPTION
Report Type	01	02	X	ED = (Enrolment Details)
Record Type	03	01	X	B = Batch Totals
Total Records	04	05	X	Total Number of Records

3.3 Target Population and Service Report Record Layouts

The reports will be sent as unformatted text files to your EDT mailbox. Text files allow you or your vendor to format the text for readability and ease of use based on your specific needs.

Group Header Record - Total Length 125 Characters

Field Name	Start Position	Length	Format	Description / Comments
Header ID	1	3	A	'GRP' for Group Header
Report ID	4	10	A	'PCRP60R1-P' for PCRP32YA or PCRP32YB
Report Date	14	10	D	Report run date YYYYMMDD
Beginning Report Period	24	10	D	The start date of the reporting period
End Report Period	34	10	D	The end date of the reporting period
Group Type	44	3	A	Type of Group (GRP or SOL)
Group ID	47	4	A	The Group ID
Group Name	51	75	A	The name of the group of physicians

Physician Header Record - Total Length 177 Characters

Field Name	Start Position	Length	Format	Description / Comments
Header ID	1	3	A	'PHY' for physician record header
Physician Number	4	6	A	Assigned physician billing number for Primary Care Network
Physician Stakeholder	10	10	A	10 digit stakeholder number that represents the billing number
Physician Last Name	20	30	A	Physician Last Name
Physician First Name	50	20	A	Physician First Name
Physician Middle Name	70	20	A	Physician Middle Name
Physician Title	90	3	A	Physician Title
Physician Address line 1	93	25	A	Physician Address line 1
Physician Address line 2	118	25	A	Physician Address line 2
Physician City	143	25	A	Physician City
Physician Province	168	3	A	Physician Province code
Physician Postal Code	171	6	A	Physician Postal Code

Patient Header Record - Total Length 70 Characters

Field Name	Start Position	Length	Format	Description / Comments
Header ID	1	3	A	'PAT' for Patient record header
Health Number	4	10	A	Assigned 10 digit patient health number
Patient Last Name	14	30	A	Patient Last Name
Patient First Name	44	20	A	Patient First Name
Age of Patient	64	6	N	Number of Years, ZZZZ.9

Detail Record - Total Length 14 Characters

Field Name	Start Position	Length	Format	Description / Comments
Header ID	1	3	A	'DET' for Detail record header
Service Date	4	10	D	Date the patient received the service - YYYYMMDD
Service Type, 'I', 'M', 'P', or 'Z'.	14	1	A	Date the patient received service for this claim

4.0 Payment Record Layouts

The reports will be sent as unformatted text files to your EDT mailbox. Text files allow you or your vendor to format the text for readability and ease of use based on your specific needs.

4.1 Base Rate & Comprehensive Care Capitation Payment Detail Report and CC Capitation Payment Detail Report

Each physician header will be followed by one or many patient detail records, followed by a physician trailer.

A – Alphabetic

N – Numeric

X – Alphanumeric

D – Date (YYYYMMDD)

S – Spaces

All alphabetic characters will be upper case unless otherwise specified. The last two digits of all dollar amount fields represent the pennies.

Group Header Record (one for each EDT header record) - Total Length 153 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'GRP' for Group record
Report ID	4	10	X	'PCCP05R2'
Report Date	14	8	D	Report Run Date
Beginning Report Period	22	8	D	The start date of the reporting period
End Report Period	30	8	D	The end date of the reporting period (normally the last day of the month)
RA Date	38	8	D	Date of RA
Group Type	46	3	A	Type of Group (GRP or SOL)
Group ID	49	4	X	Group ID (i.e. BAAA)
Group Name	53	75	A	Name of the Group
Group District	128	1	A	Initial of city of local OHIP Office
District Name	129	25	A	City of local OHIP office

Physician Header Record - Total Length 79 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PHY' for physician record
Physician Number	4	6	N	Assigned physician billing number
Physician Last Name	10	30	A	Last Name of Physician
Physician First Name	40	20	A	First Name of Physician
Physician Middle Name	60	20	A	Middle Name of Physician

Patient Detail Record Total Length 114 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PAT' for Patient detail record
Health Number	4	10	N	Assigned 10 digit patient health number
Patient Sex	14	1	A	M or F
Patient Last Name	15	30	A	Last Name of Patient
Patient First Name	45	20	A	First Name of Patient
Patient Date of Birth	65	8	D	YYYYMMDD Patient was Born
Patient Age	73	3	N	Age of the Patient
Start Period	76	8	D	Start of Payment Period
End Period	84	8	D	End of Payment Period
Member Days	92	3	N	Member Days
Base Rate Dollar Amount	95	9	N	If applicable
Base Rate Amount Sign	104	1	X	'-' if negative, blank otherwise
CC Cap Dollar Amount	105	9	N	If applicable
CC Cap Amount Sign	114	1	X	'-' if negative, blank otherwise

Physician Trailer Record - Total Length 29 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PTR' for physician trailer record
Patient Count	4	6	N	Count of patients enrolled
Base Rate Dollar Amount	10	9	N	Total physician base rate amount
Base Rate Amount Sign	19	1	X	'-' if negative, blank otherwise
CC Cap Dollar Amount	20	9	N	Total physician CC amount
CC Cap Amount Sign	29	1	X	'-' if negative, blank otherwise

4.2 Base Rate & Comprehensive Care Reconciliation Detail and

4.3 CC Capitation Payment Reconciliation Detail Reports

The reports will be sent as unformatted text files to your EDT mailbox. Text files allow you or your vendor to format the text for readability and ease of use based on your specific needs.

Group Header Record (one for each EDT header record) – Total Length 153 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'GRP' for Group record
Report ID	4	10	X	'PCCP41R1'
Report Date	14	8	D	Report Run Date
Beginning Report Period	22	8	D	Start date of the reporting period (normally the first of the month)
End Report Period	30	8	D	The end date of the reporting period (normally the last day of the month)
RA Date	38	8	D	Date of RA
Group Type	46	3	A	Type of Group (GRP or SOL)
Group ID	49	4	X	Group ID (i.e. BAAA)
Group Name	53	75	A	Name of the Group
Group District	128	1	A	Initial of city of local OHIP Office
District Name	129	25	A	City of local OHIP office

Physician Header Record - Total Length 79 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PHY' for physician record
Physician Number	4	6	N	Assigned physician billing number
Physician Last Name	10	30	A	Last Name of Physician
Physician First Name	40	20	A	First Name of Physician
Physician Middle Name	60	20	A	Middle Name of Physician

Patient Detail Record - Total Length 135 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PAT' for Patient detail record
Health Number	4	10	N	Assigned 10-digit patient health number
Patient Sex	14	1	A	M or F
Patient Date of Birth	15	8	D	YYYYMMDD Patient was born
Patient Last Name	23	30	A	Last Name of Patient
Patient First Name	53	20	A	First Name of Patient
Enrolment Start	73	8	D	If applicable, start date of patient enrolment
Enrolment End	81	8	D	If applicable, end date of patient enrolment
Application Processing Date	89	8	D	If applicable, date enrolment start or end was processed
Start Period	97	8	D	Start of Reconciliation Period
End Period	105	8	D	End of Reconciliation Period
Member Days	113	3	N	Member Days
Base Rate Dollar Amount	116	9	N	If applicable
Base Rate Amount Sign	125	1	X	'-' if negative, blank otherwise
CC Cap Dollar Amount	126	9	N	If applicable
CC Cap Amount Sign	135	1	X	'-' if negative, blank otherwise

Physician Trailer Record Total Length 23 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PTR' for physician trailer record
Base Rate Recon Dollar Amount	4	9	N	Total physician base rate reconciliation amount
Base Rate Recon Amount Sign	13	1	X	'-' if negative, blank otherwise
CC Cap Recon Dollar Amount	14	9	N	Total physician Comprehensive Care reconciliation amount
CC Cap Recon Amount Sign	23	1	X	'-' if negative, blank otherwise

4.4 Detail Categorization of Claims Report

The reports will be sent as unformatted text files to your EDT mailbox. Text files allow you or your vendor to format the text for readability and ease of use based on your specific needs.

Group Header Record (one for each EDT header record) - Total Length 124 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'GRP' for group record
Report ID	4	10	X	'PCCP26R1'
Report Date	14	8	D	Report Run Date
Beginning Report Period	22	8	D	Start date of the reporting period
End Report Period	30	8	D	End date of the reporting period
RA Date	38	8	D	Date of RA
Group ID	46	4	X	Group ID (i.e. BAAA)
Group Name	50	75	A	Name of Group

Physician Header Record - Total Length 175 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PHY' for physician record
Physician Number	4	6	N	Assigned physician billing number
Physician Last Name	10	30	A	Last Name of Physician
Physician First Name	40	20	A	First Name of Physician
Physician Middle Name	60	20	A	Middle Name of Physician
Physician Address Line1	80	32	X	Street Number and Name
Physician Address Line2	112	32	X	Suite Number, Box, Rural Route
Physician Address Line3	144	32	X	City, Province, Postal Code

Patient Detail Record - Total Length 41 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PAT' for patient detail record
Category	4	2	N	Claim Category 05 – Enrolled Patients 10 – Network Colleague 15 – Non-enrolled Patients 20 – WSIB 25 – Pre-network Payment Activation
Type	6	1	A	Type of Claim I – Included Service E – Excluded Service C – Combined (Both Included and Excluded)
Billing Group	7	4	X	Group claim was billed under
Roster Physician	11	6	N	Roster physician number (usually blank, except for colleague billings)
Health Number	17	10	N	Assigned 10-digit patient health number
Fee Code	27	5	X	Fee schedule code billed
Dollar Amount Paid	32	9	N	Dollar Amount Paid
Amount Paid Sign	41	1	X	'-' if negative, blank otherwise

Category Subtotal Record - Total Length 22 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'CSR' for category subtotal
Category	4	2	N	Claim Category 05 – Enrolled Patients 10 – Network Colleague 15 – Non-enrolled Patients 20 – WSIB 25 – Pre-network Payment Activation
Patient Count	6	7	N	Count of patients
Dollar Amount Paid	13	9	N	Dollar Amount Paid
Amount Paid Sign	22	1	X	'-' if negative, blank otherwise

Physician Trailer Record - Total Length 20 Characters

Field Name	Start Position	Length	Format	Description / Comments
Record ID	1	3	A	'PTR' for physician trailer
Patient Count	4	7	N	Count of patients
Dollar Amount Paid	11	9	N	Dollar Amount Paid
Amount Paid Sign	20	1	X	'-' if negative, blank otherwise