

**Health Safety Net (HSN) Special Circumstances &  
Bad Debt Web Application User Guide**

**March 6, 2013**

**Revision History**

August 28, 2008	Initial release
January 2012	Updates and Signature Page
November 5, 2012	Added process for submission of bad debt applications.
November 30, 2012	Updated column header names and birth date format for bad debt applications.

**Table of Contents**

1. Overview.....	1
1.1 Introduction .....	1
1.2 INET User Registration.....	1
2. Step by Step Process to File.....	1
2.1 Log In to INET .....	1
2.2 INET Main Menu .....	3
2.3 Special Circumstances Home Page .....	4
2.4 Filing a New Application .....	4
2.4.1 <i>Medical Hardship</i> .....	5
2.4.2 <i>Confidential Minors and Battered/Abused</i> .....	6
2.5 Applicant General Information .....	6
2.6 Family Members .....	7
2.7 Income Information.....	8
2.8 Medical Expenses.....	10
2.9 Additional Information.....	11
2.10 PDF All.....	11
2.11 Eligibility Verification.....	12
2.12 Facility Calculation.....	12
2.13 Submit Application.....	14
3. Existing Application .....	15
5. Bad Debt Applications .....	16
5.1 How to Access the Bad Debt Application.....	16
5.2 How to Manually Submit an Application .....	17
5.2.1 Required Information.....	18
5.2.2 Non-U.S. Residents.....	19
5.2.3 No Patient Information .....	20
5.3 How to Batch Upload Applications .....	21
5.4 How to Export Applications.....	21
5.5 How to View Applications.....	22
5.5.1 Search Applications by Application ID .....	22
5.5.2 Search Applications by Name.....	22

*Special Circumstances & Bad Debt Web Application User Guide*

5.5.3	Search Applications by SSN.....	23
5.5.4	Display All Applications.....	23
5.5.5	Batch File CSV File Format .....	23
5.6	Duplicate Applications .....	27
5.7	Races .....	28
5.8	States .....	29

## **1. Overview**

This is a user guide for filing a *Special Circumstances Application or Bad Debt Application* using the Health Safety Net's INET Web application. Questions involving the submission of a special circumstances application or bad debt application should be directed to HSN's Help Desk at (800) 609-7232 or [hsnhelpdesk@state.ma.us](mailto:hsnhelpdesk@state.ma.us).

### **1.1 Introduction**

The HSN has deployed a web application for collecting *Special Circumstances Applications* electronically. Beginning on November 1<sup>st</sup>, 2012, electronic collection of *Bad Debt Applications* will also occur. Providers must connect to the HSN's "INET" web site at: <https://dhcfpinet.hcf.state.ma.us/> to submit these applications.

A new menu item under the Special Circumstances Filing Applications menu item has been added for accessing bad debt applications. Please note that additional references in this guide to the phrase "*Special Circumstances Web Application*" will be abbreviated as "SPECIR".

### **1.2 INET User Registration**

Users who will enter data and submit SPECIR or bad debt applications must be registered for the INET application. Users may submit a request to the HSN for registration. After a registration request for adding new INET user is processed, the registered user will receive the login credentials via email.

To add or delete new INET users contact the HSN Help Desk at (800) 609-7232 or [hsnhelpdesk@state.ma.us](mailto:hsnhelpdesk@state.ma.us).

## **2. Step by Step Process to File**

The following describes all the necessary steps to complete and submit the SPECIR electronically.

### **2.1 Log In to INET**

Log in to INET at <https://dhcfpinet.hcf.state.ma.us/> and use the login credentials provided by the HSN.

## Special Circumstances & Bad Debt Web Application User Guide

The screenshot shows a web browser window with the URL <https://chfa.health.state.ma.us/inet/>. The page header identifies the organization as the "Center for Health Information and Analysis (formerly Division of Health Care Finance & Policy)". The main heading is "INET Login for Registered Users".

Below the heading, there are two lines of text: "This is a subscription site and requires registration with the Center for Health Information and Analysis prior to using the site." and "Regular maintenance is scheduled between 8:00AM to 5:00PM daily. This site may be unavailable and/or delays may occur during these hours."

The login form contains the following fields and elements:

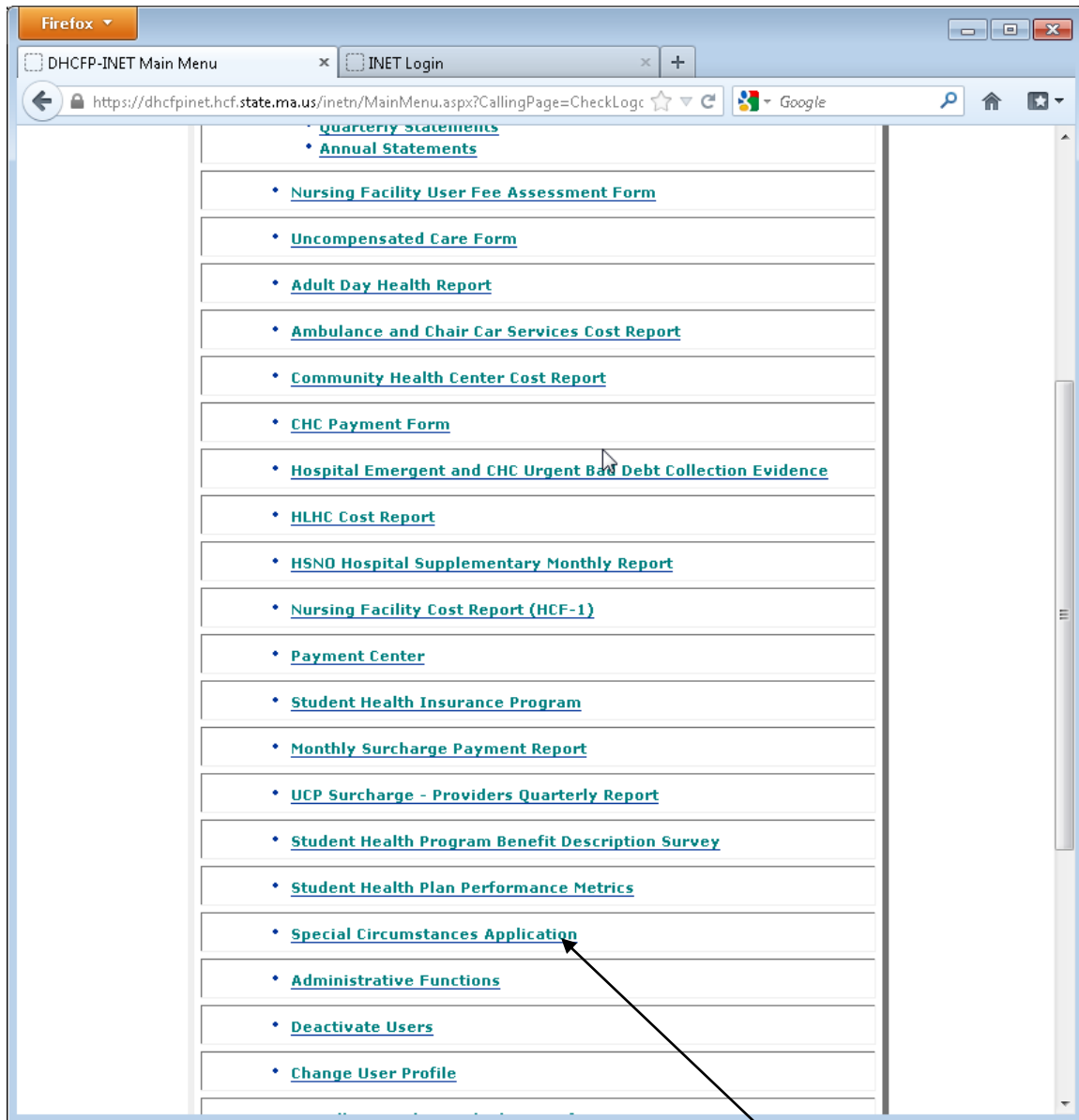
- "Enter your User ID" text box
- "Enter your Password" text box
- A CAPTCHA image showing the number "931600" with the text "Enter the code shown:" next to it.
- A blue "Login" button.

Below the form, there are two links: "If you are not a registered user of this site, you can find out how to register with the Center for Health Information and Analysis by clicking here" and "To see the Center for Health Information and Analysis' website, click here".

At the bottom, there is a note: "If you have problems logging on, please call the Center for Health Information and Analysis' Help Desk at 1-800-609-7232." and a footer with "Copyright © 2002 - 2009 Center for Health Information and Analysis Commonwealth of Massachusetts" and a "Privacy Policy" link.

**⚠ Caution:** Inactivity for 20 minutes will cause the internet session to time-out, and you will lose any unsaved data!

## 2.2 INET Main Menu



After a successful login, the INET main menu will be displayed. Click the “**Special Circumstances Application**” menu choice to proceed.

### **2.3 Special Circumstances Home Page**



External Users will see two menu items in the left pane: “**Filing Application**” and “**Logout**”.

“**Filing Application**” is described in 2.4. “**Admin Tasks**” is for use by the Health Safety Net only.

The “**Logout**” link exits SPECIR and INET and returns the user to the [INET Login](#).

### **2.4 Filing a New Application**

To create a new application, click the “**Filing Application/New Application**” menu in the left pane.



Select/Enter appropriate information in the “**Create Special Circumstances Application**” screen and click “**Create Application**” button.

## Special Circumstances & Bad Debt Web Application User Guide

Applications can be submitted for Medical Hardship, Confidential Minors and Battered/Abused.

Applications can be submitted for Medical Hardship, Confidential Minors and Battered/Abused.

The SSN/TIN field is required. If a person has no SSN or TIN, please fill in 999-99-9999 or 000-00-0000

### 2.4.1 Medical Hardship

The following describes all the necessary steps to complete and successfully submit a Medical Hardship Application electronically:

1. Enter the “[Applicant General Information](#)”.
2. Enter the “[Family Members Information](#)”.
3. Enter the “[Income Information](#)”.
4. Enter the “[Medical Expenses Information](#)”.
5. Enter the “[Additional Information](#)”.
6. Make sure steps 1 through 5 are completed successfully. Enter the “[Eligibility Verification](#)” information.
7. Before proceeding to step 1, make sure all the data entered from Step 1 through Step 6 are correct. Enter the “[Facility Calculation](#)”.



## Special Circumstances & Bad Debt Web Application User Guide

8. This is the last step for completing a “Medical Hardship” application. If the applicant appears eligible for Medical Hardship, “**Submit Application**” submenu will appear in the “**Facility Use Only**” main menu. Enter the “[Submit Application](#)” information.
9. Print the completed application in PDF format.
10. Applicant or person completing the application on behalf of applicant must sign and date the application. In addition, the user must add the name of the submitter to the provider acknowledgement and send it along with the supporting documentation to the Health Safety Net.

### 2.4.2 Confidential Minors and Battered/Abused

The following describes all the necessary steps to complete and successfully submit a Confidential Minors or Battered/Abused Application electronically:

1. Enter the “[Applicant General Information](#)”.
2. Enter the “[Family Members Information](#)”. Not applicable for Confidential Minors.
3. Enter the “[Income Information](#)”.
4. Enter the “[Additional Information](#)”.
5. Enter the “[Eligibility Verification](#)”.
6. Before proceeding make sure all the data entered from Step 1 through Step 5 are correct. Enter the “[Facility Calculation](#)”.

Enter the “[Submit Application](#)”.


### 2.5 Applicant General Information

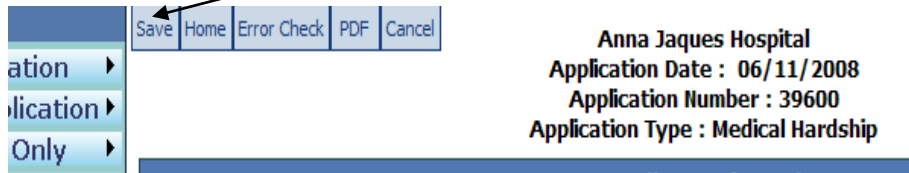
Once a new application is created, the “**Applicant General Information**” page appears as a default data entry screen as shown below.



The screenshot shows a web application interface for 'Anna Jaques Hospital'. At the top, it displays 'Application Date : 09/03/2008', 'Application Number : 39667', and 'Application Type : Medical Hardship'. The main section is titled 'I. Applicant Information' and contains a form with the following fields: Last Name, Middle Name, First Name, SSN (with 'TIN' and 'DOB' dropdowns), Home Phone, Work Phone, Ext., Street Address, City, State (dropdown), Zip, Race, Ethnicity, Spoken Language (dropdown), Written Language (dropdown), and Has Insurance (checkbox). Below this section are sections for 'II. Applicant's Mailing Address', 'III. Applicant for Insurance Use', and 'IV. Contact Person's Mailing Address'. A blue sidebar on the left contains navigation links: 'Filing Application', 'Current Application', 'Facility Use Only', 'Admin Tasks', and 'Logout'. An arrow points from the text above to the 'Applicant Information' section of the form.

The user can also get to the “**Applicant General Information**” page via the “**Current Application**” left pane menu.

- The user must enter data in all required fields (\*) in the first tab “**1. Applicant Information**”.
- If applicable, enter data in tabs “**2. Applicant’s Mailing Address**”, “**3. Applying for Someone Else**” and “**4. Contact Person’s Mailing Address**”.
- Save by clicking on the blue “**Save**” button  on the “**Applicant General Information**” screen.

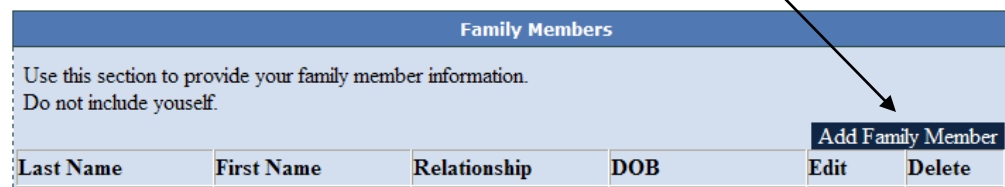


## 2.6 Family Members

Select the “**Family Members**” submenu from the “**Current Application**” menu as shown below.




- To add a family member, click the “**Add Family Member**” link on the “**Family Members**” screen as shown in the example below.



- Enter all the required (\*) family member’s information and all applicable optional information in the “**Family Member Detail**” screen as shown in the example below and click “**OK**” button to save the data.

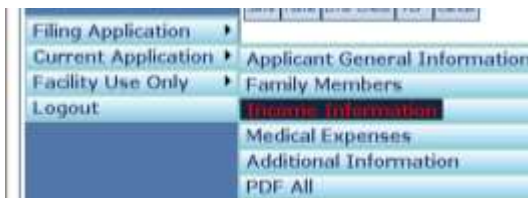
- To edit or delete a family member’s information click the corresponding “**Edit**” or “**Delete**” button in “**Family Members**” screen as shown below.

Last Name	First Name	Relationship	DOB	Edit	Delete
jones	penelope	Spouse	07/07/1971	Edit	Delete
jones	peter	Child	05/31/1992	Edit	Delete

- Save by clicking on the blue “**Save**” button  on the “**Family Members**” screen.

## 2.7 Income Information

Select the “**Income Information**” submenu from the “**Current Application**” menu as shown below.



The user needs to enter all applicable income information – Earned Income and Unearned Income.

### **Earned Income**

- To add an earned income, click the “**Add Earned Income**” link on the “**Income**” screen as shown in the example below.

## Special Circumstances & Bad Debt Web Application User Guide

- Enter all the required (\*) earned income information and all applicable optional information in the “**Earned Income Detail**” screen as shown in the example below and click “OK” button to save the data.

Earned Income Detail

Family Member Name	Total Employees
Employer Name	Earned Amount
Employer Address	
Payment Frequency	Income Type
Documentation	

OK Cancel

- To edit or delete a Earned Income information click the corresponding “**Edit**” or “**Delete**” button in “**Earned Income**” screen as shown below.

2. Earned Income

use this section to provide your earned income information.

[Add Earned Income](#)

Employer Name	Employer Address	Amount Earned	Edit	Delete
cvs	test	3,000	Edit	Delete

- Save by clicking on the blue “**Save**” button  on the “**Income**” screen.

### Unearned Income

- To add other income, click the “**Add Unearned Income**” link on the “**Income**” screen as shown in the example below.

2. Unearned Income

use this section to provide your unearned income information.

[Add Unearned Income](#)

Income Amount	Payment Frequency	Income Type	Edit	Delete
---------------	-------------------	-------------	------	--------

3. No Income

- Enter all the required (\*) unearned income information in the “**Unearned Income Detail**” screen as shown in the example below and click “OK” button to save the data.

Unearned Income Detail

Family Member Name	Income Type
Unearned Income Name	Unearned Amount
Payment Frequency	Documentation

OK Cancel

## Special Circumstances & Bad Debt Web Application User Guide

- To edit or delete a Unearned Income information click the corresponding “**Edit**” or “**Delete**” button in “**Unearned Income**” screen as shown below.

2. Unearned Income

use this section to provide your unearned income information.

Add Unearned Income

Income Amount	Payment Frequency	Income Type	Edit	Delete
3,456	Bi-Weekly	Railroad Retirement	Edit	Delete

- Save by clicking on the blue “**Save**” button  on the “**Income**” screen.

### 2.8 Medical Expenses

This section is applicable for Medical Hardship application.

Select the “**Medical Expenses**” submenu from the “**Current Application**” menu as shown below.

- Filing Application
- Current Application
  - Applicant General Information
  - Family Members
  - Income Information
  - Medical Expenses**
  - Additional Information
- Facility Use Only
- Admin Tasks
- Logout
- PDF All

The user needs to enter all applicable medical expense information.

To add a medical expense, click the “**Add Medical Expense**” link on the “**Medical Expenses**” screen as shown in the example below.

Medical Expenses

use this section to provide your family's medical expenses information.

Add Medical Expense

Provider Name	Patient Name	Service Date	Charges	Edit	Delete
Harvard	Smith,Rose	05/11/2008	444,440	Edit	Delete

- Enter all the required (\*) medical expense information in the “**Medical Expense Detail**” screen as shown in the example below and click “**OK**” button to save the data.

Medical Expense Detail

\*Healthcare Provider Name: Other Non-HSN Provider

\*Enter Non-HSN Provider Name: [Text Field]

\*Patient Name: Applicant

\*Type of Service: inpatient

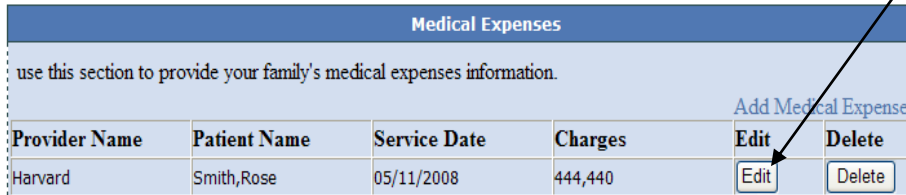
\*Charges: 5,000

\*Date of Service: 06/06/2008 (mm/dd/yyyy)


OK Cancel

## Special Circumstances & Bad Debt Web Application User Guide

- To edit or delete a Medical Expense information click the corresponding “**Edit**” or “**Delete**” button in “**Medical Expenses**” screen as shown below.

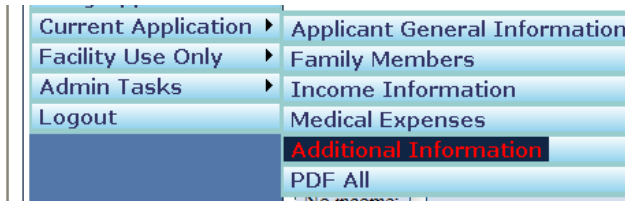



Medical Expenses					
use this section to provide your family's medical expenses information.					
<a href="#">Add Medical Expense</a>					
Provider Name	Patient Name	Service Date	Charges	Edit	Delete
Harvard	Smith,Rose	05/11/2008	444,440	<input type="button" value="Edit"/>	<input type="button" value="Delete"/>

- Save by clicking on the blue “**Save**” button  on the “**Medical Expenses**” screen.

### 2.9 Additional Information

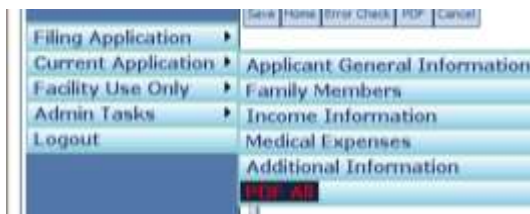
Select the “**Additional Information**” submenu from the “**Current Application**” menu as shown below.



- Enter any additional information in the provided text area in the “**Additional Information**” screen. The comments here that relate to this application.
- Save by clicking on the blue “**Save**” button  on the “**Additional Information**” screen.

### 2.10 PDF All

Select the “**PDF All**” submenu from the “**Current Application**” menu as shown below.

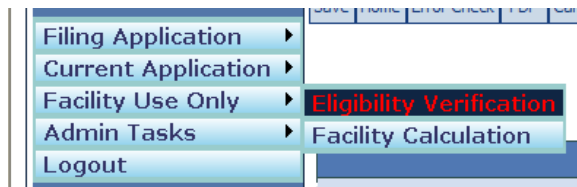



Selecting the “**PDF All**” link generates a PDF file of the filed special circumstances application. The user will have the option to either “**Save**” or “**Open**” the PDF.



### 2.11 Eligibility Verification

Select the “**Eligibility Verification**” submenu from the “**Facility Use Only**” menu as shown below.



- The user must enter data in all required fields (\*) in the second tab “**2. Residency Documentation**”.
- Save by clicking on the blue “**Save**” button  on the “**Eligibility Verification** screen” screen.

### 2.12 Facility Calculation

Select the “**Facility Calculation**” submenu from the “**Facility Use Only**” menu as shown below.



### Medical Hardship

Medical Hardship eligibility will be determined by the HSN and not within this application. This application will be used to enter Medical Hardship applications.

The following section is an example of a “**Medical Hardship**” determination within the Facility Calculation Tab of the Facility Use Only subsystem. This section contains the following tabs:

**General Information:** Displays demographic information of the applicant.

The screenshot shows the '1. General Information' section of a web form. It contains several input fields: Last Name (jones), Middle Name (empty), First Name (paul), SSN/TIN (444444444), DOB (09221970), Sex (M), Home Phone (1111111111), Work Phone (empty), and Ext (empty). Below this section are two tabs: '2.Applicant Eligibility Summary' and '3.Eligibility Message Area'.

**Applicant Eligibility Summary:** Family Size, Family Income, % of Federal Poverty Level (FPL). The provider **MUST** click the “**Calculate**” button to determine eligibility. Any time the provider makes changes to the schedules, the provider must click the “**Calculate**” button to update information.

The screenshot shows the '2.Applicant Eligibility Summary' section. It contains three input fields: Family Size (6), Family Income (30000), and % of FPL (105.62). Below these fields is a 'Calculate' button. Below this section is a tab labeled '3.Eligibility Message Area'.

**Eligibility Message Area:** This area displays appropriate messages once the “Calculate” button in the “*Applicant Eligibility Summary*” has been clicked.

The screenshot shows the '3.Eligibility Message Area' section. It contains a text area with the message: 'FAMILY IS NOT ELIGIBLE FOR MEDICAL HARDSHIP.' Below this section is a blue 'Save' button.

Save by clicking on the blue “**Save**” button  on the “**Facility Calculation**” screen.

### **Confidential Minors, Battered/Abused**

The following section is an example of a “**Confidential Minors, Battered/Abused**” determination within the Facility Calculation Tab of the Facility Use Only subsystem. This section contains the following tabs:



**General Information:** Displays demographic information of the applicant.

The screenshot shows the '1. General Information' section of the application. It contains several input fields: Last Name (sd), Middle Name, First Name (self), SSN/TIN (00000000), DOB (08/08/1998), Sex (F), Home Phone, Work Phone, and Ext.

**Applicant Eligibility Summary:** Family Size, Family Income, % of Federal Poverty Level (FPL), HSN Partial Deductible. The provider **MUST** click the “**Calculate**” button to determine eligibility.

The screenshot shows the '2. Applicant Eligibility Summary' section. It includes input fields for Family Size (1), Family Income (26130), % of FPL (251.15), and HSN Partial Deductible (2,128.80). A 'Calculate' button is located below these fields.

**Eligibility Message Area:** This area displays appropriate messages once the “**Calculate**” button in the “*Applicant Eligibility Summary*” has been clicked.

The screenshot shows the '3. Eligibility Message Area' section. It displays a message: 'The applicant is eligible for HSN Partial'. Below the message are three radio button options: 'Approved applicant', 'Approved Partial applicant', and 'Denied'.

**Eligibility Period:** Submit Date, Determination Date, Eligibility Begin Date and Eligibility End Date are pre-populated.

Save by clicking on the blue “**Save**” button  on the “**Facility Calculation**” screen.

### 2.13 Submit Application

This is the last step for completing a **SPECIR** application.

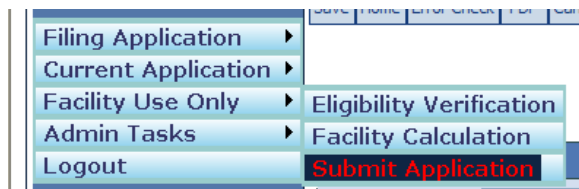
**NOTE:** For Medical Hardship application the “**Submit Application**” submenu will appear in the “**Facility Use Only**” main menu **ONLY** if the applicant appears eligible for Medical Hardship.

If the submit application tab does not appear, the registered user should revisit each page of the application and click the “**Save**” button. The “**Submit**” button will appear.

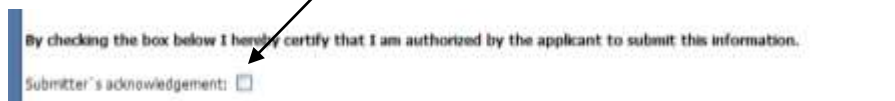
The following describes all the necessary steps to complete and successfully submit a **SPECIR** Application electronically:

- Verify that all the sections in the “**Current Application**” menu are completed and saved.
- Verify that all the sections in the “**Facility Use Only**” menu are completed, eligibility is calculated and information is saved.

Select the “**Submit Application**” submenu from the “*Facility Use Only*” menu as shown below.



- Acknowledge the accuracy of the application by checking the Submitter’s acknowledgement checkbox.



- Submit by clicking on the blue “**Submit**” button  on the top left side of the “**Acknowledgement**” screen.

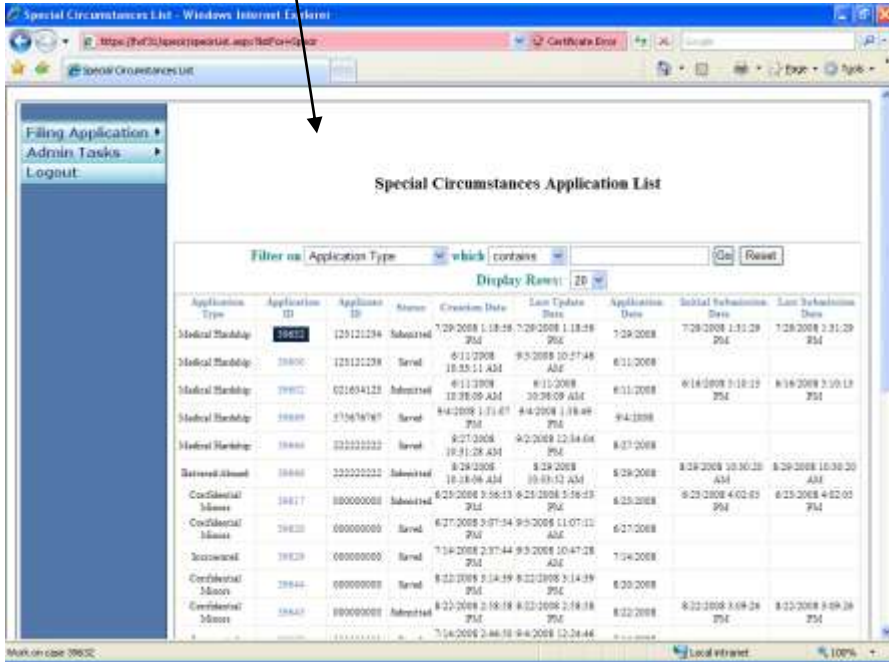
### 3. Existing Application

The following describes all the necessary steps to edit/update an already created and saved application. The provider that has been submitted cannot be edited unless a reopen request is granted. See Section 4 for details.

- Log in to the INET web application if not already logged in. (See Section 2.1, 2.2, 2.3)
- Select “Existing Applications” submenu from the “Filing Application” main menu
- Select the provider from the list provided.



- Click the “Application ID” from the displayed application list.



- Follow steps as needed to edit applicant information

## 5. Bad Debt Applications

This section describes how to:

- Access the bad debt web application.
- Submit bad debt applications.
- Batch upload multiple applications.
- Export existing applications to a CSV file.
- View existing applications.

### 5.1 How to Access the Bad Debt Application

You must be registered with the INET system in order to enter Bad Debt applications. If you are not registered with INET please go to INET User Registration and follow the steps in that section to register. Once registered, follow these steps to log in to INET and navigate to the Bad Debt application.



- 1 Log into INET as described in 2.1 Log in to INET.
- 2 Click on Special Circumstances Application menu item. See 2.2 INET Main Menu.
- 3 INET System displays the Special Circumstances Welcome page.
- 4 Click on Filing Application in the left menu.
- 5 Click on Create\|View Bad Debt Applications.
- 6 The INET system displays the Bad Debt Welcome web form.
- 7 Once you are on the Bad Debt Welcome web form you can:
  - i) Submit a new application.
  - ii) View existing applications.
  - iii) Batch upload applications.
  - iv) Export applications to a CSV file.
  - vi) Return to the INET Main menu.

## **5.2 How to Manually Submit an Application**

This section describes how to manually enter bad debt applications.

Bad debt applications should be submitted **ONLY** in those instances where a patient does not have an existing member id. Providers must ensure that all patient information is submitted for a referred eligibility record to be created.

Upon logging on to the main screen of the bad debt application, providers will see 3 radio buttons. One of the buttons must be selected in order for an application to be processed.

NOTE: The application will default to the “None of the above” button.

- None of the above – this button should be selected when a provider has all required information (as noted in 5.2.1) for an individual residing in the United States.
- By selecting this option, provider affirms that patient is not a resident of the United States – this button should be selected when a provider is submitting a bad debt application for a patient who is not a resident of the United States (please refer to section 5.2.2 below).
- By selecting this option, provider affirms that they have exhausted all efforts and have been unable to capture patient information – this button should be selected

## *Special Circumstances & Bad Debt Web Application User Guide*

when a provider does not have patient information as noted in section 5.2.3 below.

### **5.2.1 Required Information**

Providers should have all of the following pieces of information available prior to entering a bad debt application.

- First name
- Last name
- Middle Initial
- Street Address
- City
- State
- Zip Code
- Social Security Number
- Birth Date
- Race
- Gender

Once you have collected required patient information, providers can enter the application following these steps:

- 1 Log into INET and navigate to the Bad Debt application as described in How to Access the Bad Debt Application.
- 2 Click on New Application menu item.
- 3 The Bad Debt system displays the initial page of the application.
- 4 Select the provider you want to use for this application.
- 5 The Bad Debt system automatically fills in the current date for the application date.
- 6 Click on Submit.
- 7 The Bad Debt system displays page 2 of the application.
- 8 Enter the patient information into the form.  
Enter birth date in the format mm/dd/yyyy.  
Enter SSN in the format 000-00-000 or 000000000.  
Enter a 5-digit zip code.
- 9 Click on Submit button.

## *Special Circumstances & Bad Debt Web Application User Guide*

- 10 The Bad Debt system validates the patient information. If errors are detected, the system displays error messages below each field with an error. Correct these errors and then click on the Submit button again.
- 11 The Bad Debt system checks for duplicate applications by comparing the application entered to existing applications in the Bad Debt system. When a duplicate application is detected the Bad Debt system displays an error message. Update the application and attempt to submit it again. See Duplicate Applications below for more information.
- 12 When the patient information is valid the Bad Debt system saves the patient information in the Bad Debt system and displays a confirmation page indicating the information was successfully saved.
- 13 Providers needing to enter more applications should click on New Application and repeat the process.

### **5.2.2 Non-U.S. Residents**

There may be cases where a patient has a non-U.S. (foreign) address. For these cases only, providers should perform the following steps.

- 1 Log into INET and navigate to the Bad Debt application as described in How to Access the Bad Debt Application.
- 2 Click on New Application.
- 3 The Bad Debt system displays page 1 of the application.
- 4 The Bad Debt system automatically fills in the application date with the current date.
- 5 Select the provider you want to use for this application.
- 6 The Bad Debt system displays page 2 of the application.
- 6.1** The system populates Address, city, state and zip code fields with the provider's address information. NOTE: HSN staff may, at any time, request written proof from a provider verifying that a patient is not a resident of the United States.
- 7 Enter the patient's name, SSN and birth date. When the patient doesn't have an SSN enter 000000000.
- 8 Select the gender of the patient.
- 9 Select the race of the patient.
- 10 Click Submit.
- 11 The Bad Debt system validates the information you entered. If any patient information is invalid, the Bad Debt system displays error messages below the fields with errors.
- 12 The Bad Debt system checks for duplicate applications by comparing the application you entered to existing applications in the Bad Debt system. When a duplicate application is detected the Bad Debt system displays an error message. Update the

application and attempt to submit it again. See Duplicate Applications below for more information.

- 13 When all patient information is valid, the Bad Debt system saves the patient information in the Bad Debt system and displays a confirmation page indicating the information was successfully saved.

### **5.2.3 No Patient Information**

There may be cases where a provider does not have any patient information to submit a Bad Debt application. These cases should be rare and occur only after a provider has performed due diligence and exhausted all available means of trying to collect patient information. For these cases only, providers should perform the following steps.

- 1 Log into INET and navigate to the Bad Debt application as described in How to Access the Bad Debt Application.
- 2 Click on New Application.
- 3 The Bad Debt system displays page 1 of the application.
- 4 The Bad Debt system automatically fills in the application date with the current date.
- 5 Select the provider you want to use for this application.
- 6 The Bad Debt system displays page 2 of the application.
- 7 Check the 1<sup>st</sup> checkbox at the top of the web form labeled: “By checking this box, provider affirms that they have exhausted all efforts and have been unable to capture patient information.”
- 8 The Bad Debt system fills in the first name, last name, street address, city, state, and zip code with the name and address of the provider you selected on page 1 of the application.
- 9 The Bad Debt system fills in 000000000 for the SSN.
- 10 Enter the estimated birth date of the patient.
- 11 Select the gender of the patient.
- 12 Select the race of the patient.
- 13 Click Submit.
- 14 The Bad Debt system validates the information you entered. If any patient information is invalid, the Bad Debt system displays error messages below the fields with errors.
- 15 When all patient information is valid, the Bad Debt system saves the patient information in the Bad Debt database and displays a confirmation page indicating the information was successfully saved.

**16 HSN BAD DEBT CLAIMS FOR THE CASES ABOVE (WHERE PATIENT INFORMATION IS NOT AVAILABLE) SHOULD NEVER BE SUBMITTED UNLESS A PROVIDER HAS SUBMITTED A BAD DEBT APPLICATION AS NOTED ABOVE.**

***5.3 How to Batch Upload Applications***

This section describes how to batch upload multiple applications.

- 1 Prepare a CSV file containing the Bad Debt applications to be uploaded based on the table titled Batch File CSV File Format below.
- 2 Log into INET and navigate to the Bad Debt application as described in How to Access the Bad Debt Application.
- 3 Click on Batch File Upload menu item.
- 4 Select the provider you want to submit these applications for.
- 5 Click on the Browse button and browse to the Bad Debt CSV file on your system that you created in step 1.
- 6 Click on Upload button.
- 7 The Bad Debt system reads and validates the CSV file. When errors are detected the Bad Debt system displays those errors at the bottom of the page. Correct the problems and attempt to upload the CSV file again.
- 8 The Bad Debt system checks whether any of the records in your batch upload file matches existing applications in the system, or matches other records in the batch upload file. When duplicates are detected the Bad Debt system displays error messages at the bottom of the page. In this case no records are uploaded from the batch upload file. Remove or correct the duplicate applications and try uploading the batch file again. See Duplicate Applications below for more information.
- 9 When no errors are detected the Bad Debt system saves the Bad Debt applications in the database and displays a message indicating the number of applications successfully read from the CSV file and saved into the database.
- 10 NOTE: Batch upload applications cannot be submitted for cases where no patient information is available or for patients with a foreign address.

***5.4 How to Export Applications***

This section describes how to export the applications submitted to HSN to a CSV file.

- 1 Log into INET and navigate to the Bad Debt application as described in How to Access the Bad Debt Application.
- 2 Click on Export Applications menu item.
- 3 Click on Export button.
- 4 The Bad Debt system retrieves all applications you submitted to HSN, generates a CSV file, and sends the CSV file to your browser.



## *Special Circumstances & Bad Debt Web Application User Guide*

- 5 Your browser should display a dialog box at the bottom of your browser with the question: “Do you want to open or save BadDebtApplications.csv from <Computer-Name>?” where <Computer-Name> is the name of your computer.
- 6 If you want to save the CSV file to your download folder click on save.
- 7 If you want to save the CSV file to a folder other than your download folder click on the down arrow in the Save button and select Save As.
- 8 Internet Explorer displays a Save As file dialog box.
- 9 Select the folder you want to save the CSV file to.
- 10 Change the file name if you desire to rename it.
- 11 Click on the “save” button to complete the download and save the CSV file to your computer.

### ***5.5 How to View Applications***

This section describes how to view applications submitted to HSN.

- 1 Log into INET and navigate to the Bad Debt application as described in How to Access the Bad Debt Application.
- 2 Click on Existing Applications.
- 3 The Bad Debt system displays all applications you entered into the system.
- 4 You can search for applications by Application ID, First Name, Last Name, or SSN.
- 5 You can page through the applications by clicking on the Previous or Next clicks at the top or bottom of the applications data grid.
- 6 Click on View button on the row of the application you want to view. The Bad Debt system will display the application information. You will not be able to edit the application information.

#### **5.5.1 Search Applications by Application ID**

- 1 Select Application ID in the Field drop down list.
- 2 Select the appropriate matching operation in the Operation drop down list.
- 3 Enter the application id into the criteria text box.
- 4 Click on Search.
- 5 The Bad Debt system searches for and displays the specified application.

#### **5.5.2 Search Applications by Name**

- 1 Select First Name or Last Name in the Field drop down list.

- 2 Select how you want the Bad Debt system to match on the name in the Operation drop down list.
- 3 Enter the patient's first name or last name into the criteria text box.
- 4 Click on Search.
- 5 The Bad Debt system locates the desired applications by matching on the first or last name and displays the records it finds.

### **5.5.3 Search Applications by SSN**

- 1 Select SSN in the Field drop down list.
- 2 Select the desired matching operation in the Operation drop down list.
- 3 Enter the SSN with or without hyphens: 000000000 or 000-00-0000 into the criteria text box.
- 4 Click on the Search button.
- 5 The Bad Debt system locates the desired applications by looking for matching SSNs and displays the records it finds.

### **5.5.4 Display All Applications**

To display all applications you entered into the system:

- 1 Click on Display All button.

### **5.5.5 Batch File CSV File Format**

You must follow these rules when creating a CSV Batch File:

- 1 Create the CSV file using a text editor like notepad or you may generate the CSV by a software program.
- 2 The first record in the CSV must contain the column headers as shown in the table below.
- 3 The column header names must be separated by a comma.
- 4 The column header names must be spelled exactly as shown in the table below.
- 5 The column header names must use the case exactly as shown in the table below. For example, for "last name" the name must be "Last Name".
- 6 The column headers must be listed in the order shown in the table below.
- 7 The 2<sup>nd</sup> and subsequent records must contain the patient records you want to submit to HSN as Bad Debt applications.

*Special Circumstances & Bad Debt Web Application User Guide*

- 8 You must create separate CSV batch files for each provider for which you desire to submit Bad Debt applications.
- 9 The number of characters in each data item must be less than or equal to the maximum length of the field as listed in the Length column in the table below.
- 10 You must separate data items with a comma.
- 11 You must surround each data item with double quotes.
- 12 You can put as many records into the CSV file as you desire as long as they are for one provider.
- 13 You may give the file any name you desire.
- 14 The file extension must be csv. Example: BadDebts.csv.

Column	Column Header	Length	Required?	Description
A	Last Name	20	Yes	The patient's last name.
B	First Name	15	Yes	The patient's first name.
C	Middle Initial	1	No	The patient's middle initial.
D	Street Address	30	Yes	The patient's street address.
E	City	30	Yes	The patient's city.
F	State	2	Yes	Two letter state abbreviation. Use Code from States table below.
G	Zip	5	Yes	5-digit zip code.
H	Birth Date	8	Yes	Format YYYY-MM-DD. Example: If the person was born on May 12, 1956 the birth date is formatted 1956-05-12. The birth date must be equal to or greater than January 1, 1912.
I	Gender	1	Yes	M or F.
J	SSN	9	Yes	You may leave out hyphen between the number groups or may use

				hyphens: Examples: 000000000 000-00-0000
K	Race	6	Yes	Use the Code from the Races table below. Example: When the patient is Caucasian put WHITE into this column.

### **5.6 Duplicate Applications**

This section describes how the Bad Debt system detects and reports duplicate applications during manual application data entry and batch upload operations.

You should review your applications prior to entering or batch uploading them to ensure they do not match any applications you previously entered or batch uploaded.

An application is considered a duplicate if the data fields below match corresponding fields in existing applications in the Bad Debt system or match records in a batch upload if you are submitting applications via the batch upload process:

- First name
- Middle initial
- Last name
- Date of Birth
- SSN

When you manually enter an application the Bad Debt system compares your manually entered application to existing records in the Bad Debt system. When a duplicate is detected the Bad Debt system displays an error message and aborts saving the application. Update the application and try submitting it again.

When you batch upload application the Bad Debt system compares the batch upload file records with existing records in the Bad Debt system and compares the batch upload file records to other records in the same batch upload file. When one or more duplicate applications are detected the Bad Debt system displays an error message for each duplicate batch file upload record. The Bad Debt system aborts the entire batch upload and doesn't save any records to the system.

### **5.7 Races**

Use these codes for the Races column in the Batch Upload CSV File.

<i>Description</i>	<i>Code</i>
Race Unknown	UNKNOW
Asian or Pacific Islander	ASIAN
Black-Not of Hispanic Origin	BLACK
Hispanic	HISPAN
American Indian or Alaskan American	INDIAN
Interracial	INTER
Caucasian	WHITE

### **5.8 States**

Use these codes for the State column in the Batch Upload CSV file.

<i>Full State Name</i>	<i>Code</i>
Alaska	AK
Alabama	AL
Arkansas	AR
Arizona	AR
California	CA
Colorado	CO
Connecticut	CT
District of Columbia	DC
Delaware	DE
Florida	FL

*Special Circumstances & Bad Debt Web Application User Guide*

Georgia	GA
Guam	GU
Hawaii	HI
Iowa	IA
Illinois	IL
Indiana	IN
Kansas	KS
Kentucky	KY
Louisiana	LA
Massachusetts	MA
Maryland	MD
Maine	ME
Michigan	MI
Minnesota	MN
Missouri	MO
Mississippi	MS
Montana	MT
North Carolina	NC
North Dakota	ND
Nebraska	NB
New Hampshire	NH
New Jersey	NJ

*Special Circumstances & Bad Debt Web Application User Guide*

New Mexico	NM
Nevada	NV
New York	NY
Ohio	OH
Oklahoma	OK
Oregon	OR
Pennsylvania	PA
Puerto Rico	PR
Rhode Island	RI
South Carolina	SC
South Dakota	SD
Tennessee	TN
Texas	TX
Utah	UT
Virginia	VA
Virgin Islands	VI
Vermont	VT
Washington	WA
Wisconsin	WI
West Virginia	WV
Wyoming	WY