**Appendix E: Control totals**

**Note:** the control totals are two separate tab-delimited data files.

1. **Claims file control totals layout and dictionary**

| **Data element** | **Name** | **Type** | **Max. length**  | **Required?** | **Description/valid values** | **Error threshold** |
| --- | --- | --- | --- | --- | --- | --- |
| CFCT1 | Payer | Text | 7 | Yes | Payer abbreviation. See lookup table CFCT1 | 0% |
| CFCT2 | File | Text | 10 | Yes | Valid values: medical, pharmacy, enrollment, provider, and premium | 0% |
| CFCT3 | Data\_Rows | Numeric | 8 | Yes | Count of data rows in the submitted file | 0% |
| CFCT4 | Amt\_Billed | Numeric | 12 | Yes | Sum of MC062 (medical) or PC035 (pharmacy) or PB010 (premium). Two explicit decimal places. Do not populate if File is enrollment or provider | 0% |
| CFCT5 | Amt\_Paid | Numeric | 12 | Yes | Sum of MC063 (medical) or PC036 (pharmacy). Two explicit decimal places. Do not populate if File is enrollment or provider | 0% |

1. **Claims file control totals example**

| **Payer** | **File** | **Data\_Rows** | **Amt\_Billed** | **Amt\_Paid** |
| --- | --- | --- | --- | --- |
| OMIP | Medical | 12345678 | 123456789.12 | 123456789.12 |
| OMIP | Pharmacy | 12345678 | 123456789.12 | 123456789.12 |
| OMIP | Enrollment | 12345678 |  |  |
| OMIP | Provider | 123456 |  |  |
| OMIP | Premium | 12345 | 123456789.12 |  |

1. **File naming convention is <payer abbreviation>\_<submitter abbreviation>\_totals\_<quarter>\_<file created date>.dat**

Example: OMIP\_OMIP\_totals\_2015Q2\_20150521\_010101.dat

1. **Member months control totals layout and dictionary**

| **Data element** | **Name** | **Type** | **Max. length**  | **Required?** | **Description/valid values** | **Error threshold** |
| --- | --- | --- | --- | --- | --- | --- |
| MMCT1 | Payer | Text | 7 | Yes | Payer abbreviation. See lookup table CFCT1 | 0% |
| MMCT2 | Method | Text | 1 | No | Placeholder for future compatibility | N/A |
| MMCT3 | Month | Date | 6 | Yes | CCYYMM | 0% |
| MMCT4 | Medical\_Members | Numeric | 8 | Yes | Count of members with medical coverage as of first of month. Do not populate if no medical members. | 0% |
| MMCT5 | Pharmacy\_Members | Numeric | 8 | Yes | Count of members with pharmacy coverage as of first of month. Do not populate if no pharmacy members. | 0% |

1. **Member months control totals example**

| **Payer** | **Method** | **Month** | **Medical\_Members** | **Pharmacy\_Members** |
| --- | --- | --- | --- | --- |
| OMIP |  | 201001 | 12345678 | 12345678 |
| OMIP |  | 201002 | 12345678 | 12345678 |
| OMIP |  | 201003 | 12345678 | 12345678 |
| OMIP |  | 201004 | 12345678 | 12345678 |
| OMIP |  | 201005 | 12345678 | 12345678 |
| OMIP |  | 201006 | 12345678 | 12345678 |
| OMIP |  | 201007 | 12345678 | 12345678 |
| OMIP |  | 201008 | 12345678 | 12345678 |
| OMIP |  | 201009 | 12345678 | 12345678 |
| OMIP |  | 201010 | 12345678 | 12345678 |
| OMIP |  | 201011 | 12345678 | 12345678 |
| OMIP |  | 201012 | 12345678 | 12345678 |

1. **File naming convention is <payer abbreviation>\_<submitter abbreviation>\_membership\_<quarter>\_<file created date>.dat**

Example: OMIP\_OMIP\_membership\_2015Q2\_20150521\_010101.dat

**Lookup Table CFCT1: Payer abbreviation**

This field contains up to seven characters which abbreviate the payer name. The list below is as inclusive as possible of mandatory reporters. However, if an entity is excluded from this list—but is contracted as a TPA or PBM by a listed mandatory reporter—that entity must also submit on behalf of the listed mandatory reporter.

| **Payer Name** | **Abbreviation** | **Mandatory Reporter for 2017** |
| --- | --- | --- |
| 4D Pharmacy Management Systems Inc. | FOURD |  |
| A & A DRUG CO. DBA SAV-RX PRESCRIPTION SERVICES | SAVRX | X |
| A & I BENEFIT PLAN ADMINISTRATORS INC | AI | X |
| AARP Medicare Rx | AARP |  |
| ACE AMERICAN INSURANCE COMPANY | AAIC |  |
| ACS, Inc. – Healthcare Headquarters | ACS |  |
| AETNA LIFE INSURANCE COMPANY | AETNA | X |
| Aetna Pharmacy Management (APM) | APM |  |
| AllCare Health Plan, Inc. | ALLCARE |  |
| American Specialty Health Networks | ASHN |  |
| Anthem Insurance Companies, Inc. | ANTHEM | X |
| Argus | ARGUS | X |
| Asuris Northwest Health | ASUR | X |
| ATRIO HEALTH PLANS, INC. | ATRIO | X |
| AUTORX | AUTORX | X |
| Benecard PBF | BENE |  |
| BioScrip | BIOS | X |
| BOON (Aetna line of business)  | BOON |  |
| Catamaran Hospice Services, LLC | CATHS |  |
| Catamaran PBM of Illinois, Inc. (formerly SXC Health Solutions, Inc.) | SXC |  |
| Catamaran PBM of Maryland, Inc. (formerly Catalyst Rx) | CATRX |  |
| Catamaran PBM Services, LLC (formerly RESTAT LLC Prescription Benefit Managers) | RESTAT |  |
| CIGNA Behavioral Health, Inc. | CBH |  |
| CIGNA Health and Life Insurance Company | CIGNAHL | X |
| CIGNA HealthCare | CHC |  |
| Community CCRx | CCCRX |  |
| Companion Life Insurance Company | CLIC |  |
| COMPTODAY | COMPT | X |
| CONNECTICUT GENERAL LIFE INSURANCE COMPANY | CIGNA | X |
| Coventry Healthcare | COV |  |
| CVS Caremark | CVS | X |
| Cypress Benefit Administrators | CBA |  |
| Cypress Care | CYP |  |
| Employee Benefit Management Services, Inc. | EBMS | X |
| Employee Health Insurance Management, Inc. | EHIM |  |
| Envision Pharmaceutical Services, Inc. | EPS | X |
| EnvisionRx Plus | ENVRXP | X |
| Express Scripts | EXPR | X |
| FAMILYCARE HEALTH PLANS, INC. | FCARE | X |
| FIRST HEALTH LIFE & HEALTH INSURANCE COMPANY | FHLTH | X |
| First Health Services Corporation | FHSC |  |
| First Script Network Services | FSNS |  |
| FutureScripts (Catamaran PBM of Pennsylvania) | FUTSCR |  |
| GREAT-WEST LIFE & ANNUITY INSURANCE COMPANY | GWL |  |
| GROUP & PENSION ADMINISTRATORS INC | GPADM |  |
| HARRINGTON HEALTH SERVICES INC | HARR | X |
| HCC LIFE INSURANCE COMPANY | HCC |  |
| Health Care Service Corporation | HCSC |  |
| HEALTH NET HEALTH PLAN OF OREGON INC. | HNOR | X |
| HEALTH NET LIFE INSURANCE COMPANY | HNOR | X |
| HEALTH PLAN OF CAREOREGON INC. | CAREOR | X |
| Health Republic Insurance Company | HRIC | X |
| HEALTHCARE MANAGEMENT ADMINISTRATORS, INC. | HMA | X |
| HealthMarkets | HMKT |  |
| HEALTHPLAN SERVICES, INC | HLTHPS | X |
| HealthSpring Prescription Drug Plan | HSPR |  |
| HealthTrans (Catamaran PBM of Colorado) | HTRANS |  |
| HM LIFE INSURANCE COMPANY | HMIG |  |
| HUMANA INSURANCE COMPANY | HUMANA | X |
| Humana Pharmacy Solutions | HPS | X |
| Independent Health - Pharmacy Benefit Dimensions® | IHPBD |  |
| KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST  | KP | X |
| Kroger Prescription Plans | KROGER | X |
| Leehar Distributors, Inc. (DBA LDI Integrated Pharmacy Services) | LDI | X |
| Lifewise Assurance Company | LWAC |  |
| LIFEWISE HEALTH PLAN OF OREGON INC.  | LWH | X |
| MAGELLAN BEHAVIORAL HEALTH SYSTEMS LLC | MAG |  |
| Magellan Rx Management, Inc. | MAGRX | X |
| Marion Polk Community Health Plan Advantage | MPCHPA |  |
| MAXCARE, LLC | MAXCARE | X |
| MAXORPLUS, LTD. | MAXORP | X |
| Medco Health Solutions, Inc. (ExpressScripts line of business) | MEDCO |  |
| MedImpact Healthcare Systems, Inc. | MEDIMP | X |
| MEGA LIFE AND HEALTH INSURANCE COMPANY  | MEGA |  |
| MHN SERVICES (Health Net line of business) | MHN | X |
| MID ROGUE HEALTH PLAN, INC. | MRIPA |  |
| MITCHELL INTERNATIONAL, INC. | MITCH | X |
| MODA Health (formerly ODS Health Plan Inc.) | ODS | X |
| myMatrixx | MYMAT |  |
| Navitus Health Solutions | NAV | X |
| NovoLogix | NOVO |  |
| OmedaRx, Inc. | OMEDARX | X |
| OMIP (c/o REGENCE BLUECROSS BLUESHIELD OF OREGON) | OMIP |  |
| OptumRx, Inc. | OPTUMRX | X |
| OREGON'S HEALTH CO-OP | ORCOOP | X |
| Pacific Source Community Health Plans, Inc. | PSCHP |  |
| PACIFICSOURCE ADMINISTRATORS INC | PSADM | X |
| PACIFICSOURCE HEALTH PLANS | PSHP | X |
| Partners Rx | PRX |  |
| PBM Plus, Inc. | PBMP | X |
| Pennsylvania Life Insurance Company | PENN |  |
| PharmAvail Benefit Management | PABM |  |
| Prescription Solutions | PRESOL |  |
| Prime Therapeutics | PRIME | X |
| PRINCIPAL LIFE INSURANCE COMPANY | PRIN |  |
| ProCare Rx PBM | PRORX | X |
| PROVIDENCE HEALTH PLAN | PROV | X |
| PTI - National Pharmaceutical Services | PTI | X |
| Ramsell Public Health Rx | RPHRX |  |
| REGENCE BLUECROSS BLUESHIELD OF OREGON | REG | X |
| REGENCE LIFE AND HEALTH INSURANCE COMPANY | REG |  |
| RegenceRx | REGRX |  |
| RxAmerica | RXAMER |  |
| RxMPSS | RXMPSS |  |
| RXSENSE PRESCRIPTION MANAGEMENT, LLC | RXSENSE | X |
| SAMARITAN HEALTH PLANS, INC. | SAM | X |
| SAV-RX PRESCRIPTION SERVICES | SAVRX | X |
| ScriptSave | SSAVE |  |
| Serve You Custom Prescription Management | SRVYOU | X |
| SHASTA ADMINISTRATIVE SVCS INC | SHASTA | X |
| SilverScript Ins. Co | SLVR | X |
| Sterling Retiree Rx | STER |  |
| STRATEGIC RESOURCE COMPANY (Aetna line of business) | SRC | X |
| SUN LIFE ASSURANCE COMPANY OF CANADA | SUN |  |
| SYMETRA LIFE INSURANCE COMPANY | SYM |  |
| Symphonix Health | SPHX | X |
| TIME INSURANCE COMPANY | TIME |  |
| Total Script | TOTAL |  |
| Transamerica Life Insurance Company | TLIC |  |
| TRILLIUM COMMUNITY HEALTH PLAN, INC. | TCHP | X |
| UHC MEDICARE ADVANTAGE (UnitedHealthCare Insurance Company line of business) | UHCM | X |
| UHCOR MEDICARE ADVANTAGE (UnitedHealthCare of Oregon line of business) | UHCORM | X |
| UMR INC | UMR | X |
| UNICARE LIFE & HEALTH INSURANCE COMPANY | UNICARE |  |
| UNIMERICA INSURANCE COMPANY | UNI |  |
| United American Insurance Company | UAIC | X |
| United Healthcare Services, Inc. | UHS | X |
| UNITEDHEALTHCARE INSURANCE COMPANY | UHC | X |
| UNITEDHEALTHCARE OF OREGON INC. | UHCOR | X |
| US Script, Inc. | USSCR | X |
| US-Rx Care, LLC | USRX |  |
| Walgreens Health Initiatives | WALG |  |
| Wellcare | WCARE | X |
| WellDyneRx | WELLD |  |
| WESTPORT INSURANCE CORPORATION | WEST |  |
| Windsor Rx | WIND |  |
| Zenith American Solutions, Inc. | ZENITH | X |