IWTIF Format Specification Version 20.05

Overview

The IWTIF (Import Wizard Transaction Import Format) is a transaction import specification for Import Wizard that allows transactions and applicable case and master data to be imported to Medisoft version 17 or later. This format is basically a multi-segment, comma separated value (CSV) file with each row (*aka* segment) representing a Medisoft entity *e.g.* Patient, CPT, DX, Guarantor. Each segment is identified by a pre-defined tag placed at the beginning of the row. Each line starts with an identifier tag and ends with a CR/LF. The tag names must be spelled exactly and must be in UPPERCASE.

Import Wizard parses the information made available in the IWTIF format and logs what data was written to Medisoft and what data was rejected by Import Wizard and why.

The IWTIF file allows the storage of multiple patients and multiple patient encounters in a single input file. Each patient encounter begins with a line of comma delimited patient info followed by various lines of information related to that patient encounter all of which are optional. The scope of an encounter is from one PATIENT tag to the next PATIENT tag (or the end of the file).

Terms used

- Master Data- data that can exist independently in the database. Thus patient demographics, CPT, ICD, insurance company information, providers, etc are master data. See tags other than TRN below.
- Transaction Set Data- data that cannot exist in the database without master information existing first. Thus, Case and Charges are Transaction Set Data. See tag TRN below.

Patient Encounter- The "PATIENT:" tag begins a scope for master information import and the "TRN:" tag begins transaction import for the encounter. Thus, the first tag in an encounter must be PATIENT: and the last tag (group) must be TRN (if any). Several patient encounters can be included in each import file. Lines and tags should be in the order shown.

Basic IWTIF schema

The IWTIF is laid out as follows, required lines are marked with an "*" and material inside brackets "<>" are used for explanatory purposes and these would typically be replaced with actual data in a production input file:

PATIENT:< patient layout here>*

GUARANTOR:<guarantor layout here if a guarantor is applicable>

PROVIDER:<layout for provider>*

REFBY: < layout for referring provider>

ADDRESS: < layout for address object>

INSURANCE#1:<layout here for primary insurance carrier>

POLICY#1:<Policy number for insurance #1 goes here>,<Group number for insurance #1 goes here><Marital

Status>,<Student Status>,<Relationship to Insured>

INSURANCE#2:< layout here for secondary insurance carrier >

POLICY#2:<Policy number for insurance #2 goes here>,<Group number for insurance #2>,<EMPTY>,

<EMPTY>,<Relationship to Insured>

DESCRIPTION: <Case Name here>

DX#1:<layout for one diagnosis code here> *

DX#2:<layout for one diagnosis code here>

DX#3:<layout for one diagnosis code here>

DX#4:<layout for one diagnosis code here>

CPT#1:<layout for one procedure code here>*

CPT#2:<layout for one procedure code here >

CPT#3:<layout for one procedure code here >

CPT#4:<layout for one procedure code here >

CPT#5:<layout for one procedure code here >

CPT#6:<layout for one procedure code here >

TRN:DOS, <one CPT num. designation >,UNITS, CHARGE, < DX num. designation ><POS><Modifiers>*

TRN:DOS, <one CPT num. designation >,UNITS, CHARGE, < DX num. designation ><POS><Modifiers>

TRN:DOS, <one CPT num. designation >,UNITS, CHARGE, < DX num. designation ><POS><Modifiers>

TRN:DOS, <one CPT num. designation >,UNITS, CHARGE, < DX num. designation ><POS><Modifiers>

TRN:DOS, <one CPT num. designation >,UNITS, CHARGE, < DX num. designation ><POS><Modifiers>

TRN:DOS, <one CPT num. designation >,UNITS, CHARGE, < DX num. designation ><POS><Modifiers>

Explanation of the basic elements

DX# - Diagnosis Code employed typically represented by an ICD-9 or ICD-10 code

CPT# - Transaction code used. Typically, this would be a CPT-4 code.

TRN: - Tag indicates that all master information pertaining to an encounter is complete and now we will use that information to build relationships representing a transaction.

DOS- Date of Service in either American or ISO date formats "MM/DD/YYYY" or "YYYYMMDD".

UNITS- Number of units of procedure administered

CHARGE - Amount billed for one unit of the procedure

POS - Place of Service code

Modifiers - Modifier codes used for billing

Explanation of the various segments

Each patient encounter must begin with a "PATIENT:" tag and the "TRN:" tag begins a transaction import for the encounter. Thus, the first segment in the file must be PATIENT and TRN tags if used, must be the last tags at the end of an encounter. Multiple encounters can be included per import file. TRN segments can be omitted all together if the intent is to import the master data only. All other segments are optional and can be specified in any order. Specifically, you can omit:

- 1) GUARANTOR Segment
- 2) DX segments
- 3) DX pointers in the TRN segment
- 4) Charge in the TRN segment
- 5) POS code
- 6) Modifiers
- 7) DESCRIPTION (i.e., Case Name)

The only expectation is that you should not have an INSURANCE #2 without an INSURANCE #1 (above or below). Same goes for CPT and DX, you can't have a CPT#2 without a CPT#1 or a DX#2 without a DX#1.

The TRN segment layout is as follows:

TRN: DOS,CPT,Units,Charge,Dx#1,Dx#2,Dx#3,Dx#4,POS,MOD#1,MOD#2,MOD#3,MOD#4,Dx#5,Dx#6,Dx#7,Dx#8,Dx#9,Dx#10,Dx#11,Dx#12

(DOS, CPT and Units are required. Everything after this is not. You can use up to 12 DXs but all are optional. Charge is also optional. You must have all the fields leading up to any data object that is populated even if they are populated with empty data fields (i.e. just commas to mark the field))

An actual TRN segment could look like this:

TRN:8/16/09,1,3,65.00,4,3,,,11,50,,,,,,,,,

The explanation of this transaction segment is on "8/16/09 3 units of CPT#1 was delivered at \$65 per unit on diagnosis of DX#4 and DX#3, the POS is 11 and the only modifier is 50". There were only two DX codes so the positions for the third and fourth diagnosis code pointers are blank. There is only one modifier (which is "50"), the other modifiers (MOD#2, MOD#3, MOD#4) are all blank. The additional diagnosis codes DX#5 through DX#12 are also blank.

Rules when using the IWTIF:

- 1) The first data element in each line is a pre-defined identifier label *a.k.a* "tag". It cannot deviate from the standard format, spelling and style and is delimited with a colon.
- 2) Each encounter in the IWTIF is imported as a new case into Medisoft.
- 3) TRN segments always start with the "TRN:" tag, followed by the Date of Service, followed by the number designation representing the CPT code being used for this transaction (i.e. "CPT#1" would be "1"), followed by the number of units for that procedure, followed by the amount billed per unit of CPT (no dollar sign), followed by number designation representing all DX codes that are applicable on that transaction.
- 4) Patients (and other master information) will only be added to the Medisoft DB if they do not currently exist in there. For example, if a patient with a matching SSN already exists in the Medisoft DB then Import Wizard simply uses that Chart# for the encounter.
- 5) If no insurance company is sent in a patient encounter, then cash payment is assumed when the building case for that encounter.
- 6) Procedure (CPT) and diagnosis (DX) codes must come over as standard HCPCS CPT or ICD9 or ICD10.
- 7) DOS, CPT and Units are required on a transaction (i.e. TRN segment), everything after this is not required. Only one CPT is allowed on each transaction line but up to 12 DX codes are allowed but all are optional. Charge is also optional.
- 8) Import Wizard can handle more than 6 transactions (or procedures), simply list them in the same style (i.e. CPT#7, CPT #8, etc.). While Import Wizard can bring in more than 4 DX codes on an encounter, only 4 can be used in the Medisoft GUI by default, but additional transaction lines can easily be added to the Medisoft interface and fields for those additional DX codes are already in the Medisoft database (this is determined by a setting in the Data Entry tab of the Program Options).
- 9) Biller must set both the default POS and TOS codes as well as the correct POS and TOS codes on each Procedure code in Medisoft. Typically, these POS and TOS codes will be set either before importing data or after the first import of a CPT code.

- 10) Import Wizard does not import payment related data (i.e. payments, co-payments, etc.).
- 11) If no description and/or fee is imported for CPT and ICD codes than these should be entered by the biller prior to creating claims in Medisoft. These should be saved to the individual transaction and diagnosis codes.
- 12) If no Guarantor is provided in a patient encounter than the Patient is assumed to be the Guarantor.
- 13) DX#1 on any encounter is set to the Primary Diagnosis on the case for that encounter.
- 14) If a value is provided in the code column for Provider, Referring Provider, Address or Insurance Carrier in the import file (i.e. Provider Code, Address Code or Insurance Code) than an attempt will be made to retrieve that record in Medisoft matching on that code only. If a record cannot be retrieved by a lookup on the code column than a new record will be created using the code supplied in the import file. If a value is **not** provided in the code column for Provider, Referring Provider, Address or Insurance Carrier in the import file then the Import Wizard will test to see if a matching record exists based on name, phone, and zip code. If a matching entity is found, then the code for that entity will be used. If no matching entity is found than a new record will be created with a generated code and it will be used.
- 15) With version 17 of Medisoft a new field was added for Patients and Guarantors called "Middle Name" to comply with ARRA certification. We renamed the Middle Initial field to Middle Name and increased the size to 25 characters.
- 16) Left the Middle Initial field in the Import Wizard to allow backward compatibility with previous format specifications but starting with Medisoft V17 we recommend using the Middle Name field rather than the Middle Initial field as this is pulled in various reports and claim forms in Medisoft.
- 17) Marital Status & Student Status are only pulled from the POLICY#1 segment and ignored in the POLICY#2 segment as these are captured one time for each case.
- 18) While imported Diagnosis codes show up on the individual transaction lines they are not written to the case.
- 19) All secondary insurances added to a case by Import Wizard are assumed not to be "Automatic Crossover". This is because if a secondary insurance is set up as an "Automatic Crossover" then a secondary claim will not be billed unless the biller manually changes that setting.
- 20) If a patient's social security number comes in as 999-99-9999 then Import Wizard will write that patient with a blank SSN unless First Name, Last Name and D.O.B. match a patient already extant in the database.
- 21) If a transaction is sent with a zero-charge amount then Import Wizard will check to see if that procedure exists in Medisoft, if it does exist than it will pull the amount in Charge Amount A from that procedure and use it in the transaction. If the procedure code does not already exist in Medisoft than Import Wizard will create the transaction with a zero-dollar charge.
- 22) In later versions of Medisoft the Provider IDs were moved from the PINs tab (which was eliminated to a new Provider IDs tab). This accompanied the creation of a new data table in Medisoft for the storage of provider and practice IDs which is locked by McKesson and cannot be written to externally. While the Import Wizard will write the provider information to Medisoft the biller will have to manually set up those provider IDs.
- 23) If any segment does not have data (i.e. there is no Referring Physician) then we suppress the entire segment. Do not send a tag with no data. The expectation is that if you send an empty segment, we will import an empty segment.
- 24) If a future Date of Service (DOS) is processed the year will flip to the 20th Century rather than the 21st Century (i.e. 2/1/1915 rather than 2/1/2015). A future DOS would typically be either an error or fraud so this shouldn't be a problem and hopefully will even draw attention to a bad DOS.
- 25) Since Import Wizard uses comma delimited fields, any fields that contain commas or other special characters must be encapsulated in quotation marks (i.e. "Jones Clinic, LLC").
- 26) Import Wizard only handles Primary and Secondary Insurance. No Tertiary Insurance is imported.
- 27) We added a new tag to the IWTIF format "DESCRIPTION:" which can be followed by up to 30 characters. The data sent in that tag will be populated to the Case Description field. This field should be placed before the DX and CPT codes and TRN. If this field is not populated than it is automatically filled with the name of the primary insurance. If there is no primary insurance than it is filled with the tag "SELF PAY".

IWTIF Format Spec with Data Fields

PATIENT: "Chart", "First Name", "Last Name", "Middle Initial", "Address 1", "Address 2", "City", "St", "Zip", "Work Ph", "Ext", "Home Ph", "SSN", "Sex", "Marital Status", Date Of Birth, "Preferred language", "Race", "Ethnicity" GUARANTOR: "Chart", "First Name", "Last Name", "Middle Initial", "Address 1", "Address 2", "City", "St", "Zip", "Work Ph", "Ext", "Home Ph", "SSN", "Sex", "Marital Status", Date Of Birth

PROVIDER: "Provider Code", "First name", "Last name", "Middle initial", "Credentials", "Street 1", "Street 2", "City", "State", "Zip Code", "Phone", "Fax", "SSN or Fed Tax ID", "Federal Tax ID Indicator", "License Number", "UPIN", "National Provider Identifier"

REFBY: "Provider Code", "First name", "Last name", "Middle initial", "Credentials", "Street 1", "Street 2", "City", "State", "Zip Code", "Phone", "Fax", "SSN or Fed Tax ID", "Federal Tax ID Indicator", "License Number", "UPIN", "National Provider Identifier"

ADDRESS: "Address Code", "Full Title", "Last Name", "First Name", "Middle Initial", "Address Line 1", "Address Line 2", "City", "State", "Zip", "Phone", "Extension", "FAX Number", "Insurance Code 1", "Insurance Code 2", "Address Type" INSURANCE#1: "Insurance Code", "Insurance Type", "Insurance Name", "Address Line 1", "Address Line 2", "City", "State", "Zip Code", "Phone", "Extension", "Fax"

POLICY#1:"Insurance #1 Policy number", "Insurance #1 Group number", "Marital Status", "Student Status", "Relationship to Insured"

INSURANCE#2:"Insurance Code", "Insurance Type", "Insurance Name", "Address Line 1", "Address Line 2", "City", "State", "Zip Code", "Phone", "Extension", "Fax"

POLICY#2:"Insurance #2 Policy number", "Insurance #2 Group number", , , , "Relationship to Insured"

DESCRIPTION: "Case Description"

DX#1:"Diagnosis Code", "Code Description", "ICD9 Code", "ICD Version#"

DX#2:"Diagnosis Code", "Code Description", "ICD9 Code", "ICD Version#"

DX#3:"Diagnosis Code", "Code Description", "ICD9 Code", "ICD Version#"

DX#4:"Diagnosis Code", "Code Description", "ICD9 Code", "ICD Version#"

CPT#1:"Transaction Code", "Code Description", "Code Type"

CPT#2:"Transaction Code", "Code Description", "Code Type"

CPT#3:"Transaction Code", "Code Description", "Code Type"

CPT#4:"Transaction Code", "Code Description", "Code Type"

CPT#5:"Transaction Code", "Code Description", "Code Type"

CPT#6:"Transaction Code", "Code Description", "Code Type"

TRN:"DOS",CPT1, "Units","Charge",DX1,DX2,DX3,DX4,POS,MOD#1,MOD#2,MOD#3,MOD#4, DX5,DX6,DX7,DX8, ,DX9,DX10,DX11,DX12,

TRN:"DOS",CPT2, "Units","Charge",DX1,DX2,DX3,DX4,POS,MOD#1,MOD#2,MOD#3,MOD#4 DX5,DX6,DX7,DX8, ,DX9,DX10,DX11,DX12,

TRN:"DOS",CPT3, "Units","Charge",DX1,DX2,DX3,DX4,POS,MOD#1,MOD#2,MOD#3,MOD#4 DX5,DX6,DX7,DX8,,DX9,DX10,DX11,DX12,

TRN:"DOS",CPT4, "Units","Charge",DX1,DX2,DX3,DX4,POS,MOD#1,MOD#2,MOD#3,MOD#4 DX5,DX6,DX7,DX8, ,DX9,DX10,DX11,DX12,

TRN:"DOS",CPT5, "Units","Charge",DX1,DX2,DX3,DX4,POS,MOD#1,MOD#2,MOD#3,MOD#4 DX5,DX6,DX7,DX8, ,DX9,DX10,DX11,DX12,

TRN:"DOS",CPT6, "Units","Charge",DX1,DX2,DX3,DX4,POS,MOD#1,MOD#2,MOD#3,MOD#4 DX5,DX6,DX7,DX8, ,DX9,DX10,DX11,DX12,

Additional explanation of complex data elements

Last revision date: 03/06/21 Rev. 20.05

Patient

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
*	1	Chart	Text	15	Legacy number from exporting system. This data gets copied to 'Patient Id #2'. Import Wizard auto-generates medisoft style chart numbers for each patient record imported.
**	2	First Name	Text	20	chare numbers for each patient record imported.
**	3	Last Name	Text	20	
*	4	Middle Name	Text	25	
*	5	Address Line 1	Text	39	
	6	Address Line 2	Text	39	
*	7	City	Text	25	
*	8	State	Text	2	
*	9	Zip Code	Text	10	
	10	Work Phone	Text	13	
	11	Work Phone Ext.	Text	4	
	12	Home Phone		14	Telephone numbers must not use any brackets or dashes e.g. 8015620111
	13	Social Security #	Text	11	e.g. 528-33-3333
	14	Sex	Text	1	F (or Female)=Female else Male
	15	Marital Status	Text	1	Moved to Policy. Field #15 is no longer used in Patient
*	16	Birth Date	Date	10	American or universal date format e.g. 03/14/1977 or 19770314
	17	Preferred language	Text	30	Choices are: English, Spanish, Other, Arabic, Cantonese, French, German, Hindi, Italian, Japanese, Korean, Mandarin, Persian, Polish, Portugese, Romanian, Russian, Tagalog, Ukranian, Urdu, Vietnamese
	18	Race	Text	1	Choices are: I- American Indian or Alaska Native, A-Asian, B-Black, C- Caucasian, E- Other, P- Pacific Islander
	19	Ethnicity	Text	1	Choices are: H- "Hispanic" or N- "Not Hispanic"
	20	Email	Text	35	· ·
	21	Cell Phone	Text	13	Telephone numbers must not use any brackets or dashes e.g. 8015620111
	22	Fax Number	Text	13	Telephone numbers must not use any brackets or dashes e.g. 8015620111
	23	Other Phone	Text	13	Telephone numbers must not use any brackets or dashes e.g. 8015620111

Guarantor – Uses the same layout as Patient

Provider

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

Date = a YYYYMMDD format or MM/DD/YYYY (e.g. 20020625 or 06/25/2002).

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
					Legacy number from exporting system.
*	1	Provider Code	Text	5	Import Wizard auto-generates when
					blank
**	2	Provider First Name	Text	15	
**	3	Provider Last Name	Text	20	
*	4	Provider Middle Initial	Text	25	Medisoft versions 15 & below use 1
	5	Credentials	Text	10	e.g. M.D.
	6	Address Line 1	Text	30	
	7	Address Line 2	Text	30	
	8	City	Text	20	
	9	State	Text	2	
	10	Zip Code	Text	10	
	11	Work Phone	Numeric	13	
	12	Fax.	Numeric	13	
*	13	SSN or Federal Tax ID	Text	11	e.g. 528-33-3333
*	14	Federal Tax ID Indicator	Logical	1	T- Federal Tax ID, F- SSN
	15	License #	Text	15	
*	16	UPIN	Text	20	
*	17	National Provider Identifier	Text	15	NPI goes here.

Note:

Referring Provider

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
*	1	Provider Code	Text	5	Legacy number from exporting system. Import Wizard auto-generates when

^{*} field improves quality of imported data, but can be left empty

^{**} field requires a value

^{*} field is desirable

^{**} Required field

					blank
**	2	Provider First Name	Text	15	
**	3	Provider Last Name	Text	20	
*	4	Provider Middle Initial	Text	25	Medisoft versions 15 & below use 1
	5	Credentials	Text	10	e.g. M.D.
	6	Address Line 1	Text	30	
	7	Address Line 2	Text	30	
	8	City	Text	20	
	9	State	Text	2	
	10	Zip Code	Text	10	
	11	Work Phone	Numeric	13	Telephone numbers must not use any brackets or dashes <i>e.g.</i> 8015620111
	12	Fax.	Numeric	13	
*	13	SSN or Federal Tax ID	Text	11	e.g. 528-33-3333
*	14	Federal Tax ID Indicator	Logical	1	1- Federal Tax ID, 0- SSN
	15	License #	Text	15	
*	16	UPIN	Text	20	
*	17	National Provider Identifier	Text	15	

Address (Medisoft entity for Attorneys, Employers, Facilities, Referral sources, and Other) Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
*	1	Address Code	Text	5	Import Wizard auto-generates when blank
**	2	Full Title	Text	30	Name of the business
	3	Last Name	Text	20	Last name of contact at the business
	4	First Name	Text	20	see above
	5	Middle Initial	Text	1	see above
*	6	Address Line 1	Text	39	
*	7	Address Line 2	Text	39	
*	8	City	Text	25	
*	9	State	Text	2	
*	10	Zip	Text	10	
*	11	Phone	Numeric	14	
*	12	Extension	Numeric	5	
*	13	FAX number	Numeric	14	Telephone numbers must not use any brackets or dashes

^{*} field is desirable

^{**} Required field

e.g. 8015620111

	14	Insurance Code 1	Text	13	
	15	Insurance Code 2	Text	13	
**	16	Address Type	Text	1	A=Attorney E=Employer F=Facility R=Referral source O=Other

Note:

Insurance Company

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

		, ,	(- 0		, -, ,
See notes below	Column#	Data Element	Data Type	Max. Length	Remark
*	1	Insurance Code	Text	5	Legacy number from exporting system
*	2	Insurance Type	Text	2	0=Commercial
					1=Medicaid Physician
					2=Medicare with Crossover
					3=Medicare
					4=Blue Shield
					5=Champus
					6=Worker's Compensation
					7=Blue Cross ? Physician
					8=HMO
					9=PPO
**	3	Insurance Name	Text	40	
*	4	Address Line 1	Text	39	
*	5	Address Line 2	Text	39	
*	6	City	Text	25	
*	7	State	Text	2	
*	8	Zip Code	Text	10	
*	9	Phone	Numeric	14	Telephone numbers must not use any brackets or
					dashes e.g. 8015620111
*	10	Extension	Numeric		
*	11	Fax	Numeric	14	

^{*} field improves quality of imported data, but can be left empty

^{**} field requires a value

Policy

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

Date = a YYYYMMDD format or MM/DD/YYYY (e.g. 20020625 or 06/25/2002).

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
*	1	Policy Number	Text	20	
*	2	Group Number	Text	20	
	3	Marital Status	Text	17	Married, Divorced, Legally separated, Widowed,
	3	Warten States	rext	1,	Single, Unknown
	4	Student Status	Text	11	Non-student, Part time, Full time
	5	Relationship to Insured:	Text	6	Spouse, Grandfather or Grandmother, Grandson or Granddaughter, Nephew or Niece, Adopted Child, Foster Child, Ward, Stepson or Stepdaughter, Self, Child, Employee, Unknown, Handicapped Dependent, Sponsored Dependent, Dependent of a Minor Dependent. Significant Other, Mother, Father, Emancipated Minor, Organ Donor, Cadaver Donor, Injured Plaintiff, Child Where Insured Has No Financial Responsibility, Life Partner, Other
	6	Pre Auth Number"	Text	25	Populates the "Prior Authorization Number" field on the Miscellaneous tab of the Case
	7	HospitalizationFrom	Date	10	Populates to the "Hospitalization From" date on the Condition tab of the Case
	8	HospitalizationTo	Date	10	Populates to the "Hospitalization To" date on the Condition tab of the Case

Note:

Description

Key for Type column:

Text = alpha characters (e.g. a, b, c)

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
*	1	Case Description	Text	30	This optional data will be used for the Case Description
Note: * field is desirabl	e				

^{*} field improves quality of imported data, but can be left empty

^{**} field requires a value

^{*} field is desirable

Dx

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

Date = a YYYYMMDD format or MM/DD/YYYY (e.g. 20020625 or 06/25/2002).

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See notes below	Column#	Data Element	Data Type	Max. Length	Remark
**	1	Diagnosis Code	Text	9	Preferably ICD9 Code
*	2	Code Description	Text	40	
*	3	ICD9 Code	Text	9	When ICD Version# is 10, this value <u>is</u> populated as ICD9 counterpart
	4	ICD Version#	Numeric	2	Blank or 9 to indicated that field #1 is ICD9, a 10 indicates it is an ICD10

Note:

CPT

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

Column#	Data Flamant			
0010	Data Element	Data Type	Max. Length	Remark
1	Transaction Code	Text	9	
2	Code Description	Text	40	Import Wizard enters to be determined when $\underline{\text{blank}}$
3	Code Type	Text	2	00=Procedure (CPT) 01=Procedure (unclassified) 02=Insurance Payment 03=Patient Payment 04=Adjustment Charge 05=Adjustment Credit 06=Secondary Insurance Payment 08=Insurance Adjustment 09=Tertiary Insurance Payment 10=Partial Primary Insurance Payment 11=Partial Secondary Insurance Payment 12=Partial Tertiary Insurance Payment 13=Insurance Charge Back 14=Inventory 15=Refund 16=Sales Tax 17=Sales Tax Payment
4	Payment Type	Text	2	0=Check 1=Cash 2=Credit Card
	2 3	Code DescriptionCode Type	2 Code Description Text 3 Code Type Text	2 Code Description Text 40 3 Code Type Text 2

^{*} field improves quality of imported data, but can be left empty

^{**} field requires a value

TRN

Key for Type column:

Text = alpha characters (e.g. a, b, c)

Numeric = numbers, whole and fractions e.g. (20.00,-7.50,-4,65)

Date = a YYYYMMDD format or MM/DD/YYYY (e.g. 20020625 or 06/25/2002).

Double = an eight-byte, double-precision, floating-point number

See notes below	Column#	Data Element	Data Type	Max. Length	Remark
**	1	DOS	Date	10	Date of service. Use American or universal
	7	DO3	Date	10	date format e.g. 03/14/1977 or 19770314
**	2	CPT	Text	2	CPT Designator
**	3	Units	Numeric	2	Number of Units to be Billed.
*	4	Charge	Double	2	Charge Amount in Dollars
*	5	DX#1	Numeric	1	DX#1 Designator
	6	DX#2	Numeric	1	DX#2 Designator
	7	DX#3	Numeric	1	DX#3 Designator
	8	DX#4	Numeric	1	DX#4 Designator
	9	POS	Text	2	Place of Service Code
	10	MOD#1	Text	2	Modifier #1
	11	MOD#2	Text	2	Modifier #2
	12	MOD#3	Text	2	Modifier #3
	13	MOD#4	Text	2	Modifier #4
	14	DX#5	Numeric	1	DX#5 Designator
	15	DX#6	Numeric	1	DX#6 Designator
	16	DX#7	Numeric	1	DX#7 Designator
	17	DX#8	Numeric	1	DX#8 Designator
	18	DX#9	Numeric	1	DX#9 Designator
	19	DX#10	Numeric	2	DX#10 Designator
	20	DX#11	Numeric	2	DX#11 Designator
	21	DX#12	Numeric	2	DX#12 Designator

Note:

Sample IWTIF Data File

PATIENT: "ACEV001", "IRIS", "ACEVEDO", "", "4444 TENESSEE AVENUE", "", "NEW PORT RICHEY", "FL", "34653", "3525067699", "", "7272071315", "580-06-1109", "F", "S", 11/14/1961 PROVIDER: "JJ001", "John", "Jones", "J", "MD", "234 Main Street", "Suite E", "Tampa", "FL", "33617", "8136248000", "8136248001", "555-22-4444", "0", "B-5004", "JJUPIN", "9876543210"

^{*} field improves quality of imported data, but can be left empty

^{**} field requires a value

^{*} field improves quality of imported data, but can be left empty

^{**} field requires a value

```
REFBY: "JW001", "John", "Wayne", "W", "MD", "654 Ridgedale", "Suite B", "Tampa", "FL",
"33617", "8136242654", "8136243698", "569-12-4521", "0", "B-5004", "JWUPIN", "1234567890"
ADDRESS: "UCH00", "University Community Hospital",,,,232 Fletcher
Avenue,, "Tampa", "FL", "33619", "8139289875", "103", "8139284587",,, "F"
INSURANCE#1: ABPA,0,AMERICAN BENEFIT PLAN ADMINISTRATORS,234 MLK Blvd.,Suite 7860,
Talahassee, FL, 37896, 9045670000, 1103, 9045670001
POLICY#1: "XJWH11838450", "99999ZJ6", Married, Non-student, Spouse, "Preauth Number", 05/08/2015,
05/11/2016
INSURANCE#2: CIG00,8,Cigna,2525 Big Bucks Ln.,,Mesa,AZ,85438,2345678,,
POLICY#2: "XJWH1183234, "99999WJ6",,,Spouse,
DESCRIPTION: "201503212123456789-Test12345"
DX#1: "490.0", "Bronchitis", "490.0", 10
CPT#1: "86002", "Test CPT1- I made this up", "00"
CPT#2: "86003", "Test CPT2- I made this one up too", "00"
TRN: 08/31/2009,1,1,10.00,1,,,,11,50,,,,,,,,,,
TRN: 08/31/2009,2,1,10.00,1,,,,11,,,,,,,,,,,,
PATIENT: "ADAMS", "SANDRA", "ADAMS", "A", "555 LIGHTHOUSE WAY", "", "NEW PORT RICHEY", "FL", "34652", "3525167699", "", "7278480025", "265-45-1961", "F", "X", 07/21/1940
PROVIDER: "JJ001", "John", "Jones", "J", "MD", "234 Main Street", "Suite E", "Tampa", "FL"
"33617", "8136248000", "8136248001", "555-22-4444", "0", "B-5004", "JJUPIN", "9876543210"
ADDRESS: "SP00", "Shady Palms Nursing Home",,,,925 Nebraska
Avenue,, "Tampa", "FL", "33629", "8139259875", "102", "8139254587", "Insurance Code 1", "Insurance Code
INSURANCE#1: ABPA,0,AMERICAN BENEFIT PLAN ADMINISTRATORS,234 MLK Blvd.,Suite 7860,
Talahassee, FL, 37896, 9045670000, 1103, 9045670001
POLICY#1: "XJWH11838450", "99999ZJ6", Divorced, Non-student, Other, 4985376251, 05/07/2015, 05/08/2016
INSURANCE#2: CIG00,8,Cigna,2525 Big Bucks Ln.,,Mesa,AZ,85438,2345678,,
POLICY#2: "XJWH1183234", "99999WJ6",,,Other
DESCRIPTION: "Personal Injury Case"
DX#1: "490.0", "Bronchitis", "490.0", 10
CPT#1: "86006", "UCG-Qualitative Test Urine", "00"
CPT#2: "86300", "Heterophile Antibod/ Mono Test", "00"
TRN: 08/31/2009,1,1,10.00,1,,,,11,, ,,,,,,,,,,
TRN: 08/31/2009,2,2,10.00,1,,,,11,50,,,,,,,,,,
PATIENT: "AGADW000", "Dwight", "Again", "", "1742 N. 83rd Ave.", "", "Phoenix", "AZ", "85021", "", "4345777", "333-22-4444", "M", "M", "03/30/1932"
PROVIDER: "MS001", "Martin", "Sheen", "T", "MD", "123 Anywhere Place", "Suite 3", "Brandon", "FL", "33618", "8136241234", "8136245678", "51-0558456", "1", "C-6123", "MSUPIN", "9876543211"
INSURANCE#1: ABPA,0,AMERICAN BENEFIT PLAN ADMINISTRATORS,234 MLK Blvd.,Suite
7860, Talahassee, FL, 37896, 9045670000, 1103, 9045670001
POLICY#1: "XJWH11838450", "99999ZJ6", Single, "Full time", Other, 289365231, 05/10/2015, 05/11/2016
INSURANCE#2: ABC00,8,ABC HEALTH PLAN OF NEW YORK,555 International
Plaza,, Jacksonville, FL, 33799, 9042345678,,
POLICY#2: "XJWH1183234", "99999WJ6",,,Other
DESCRIPTION: "ABC Health Case"
DX#1: "491.1", "Test disease", "491.1", 10
DX#2: "491.2", "Test disease #2", "491.2", 10
DX#3: "491.3", "Test disease #3", "491.3", 10
CPT#1: "86006", "UCG-Qualitative Test Urine", "00"
TRN: 08/31/2009,1,1,10.00,1,2,3,,11,50,,,,,,,,,,
```

Addendum A- IWTIF version history

Last revision date: 03/06/21 Rev. 20.05

IWTIF V19.01- 02/01/13- Cleaned up document after review by Denny Jacob.

IWTIF V19.00- 01/31/13-

- 1) Addition of Marital Status, Student Status and Relationship to Insured in the Policy #1 and #2 segments (Marital Status and Student Status are only read from Policy #1).
- 2) Discontinued use of Marital Status in PATIENT segment field #15 as this is not used in the patient but in the Medisoft Case.
- 3) Import Wizard (V 4.0.0 and newer) discontinued support for Medisoft versions prior to V16, as noted in the first paragraph of page #1.
- 4) Corrected Date fields to show 8 characters rather than 10 characters as in "03/28/1977".
- 5) Cleaned up, corrected and added some items to "Rules when using the IWTIF" on pages three and four. Especially added items 17 19.

IWTIF V19.02-02/22/13-

- 1) Added note #20- If a patient's social security number comes in as 999-99-9999 then Import Wizard will write that patient with a blank SSN unless First Name, Last Name and D.O.B. match a patient already extant in the database.
- 2) Added note #21- If a transaction is sent with a zero-charge amount then Import Wizard will check to see if that procedure exists in Medisoft, if it does exist than it will pull the amount in Charge Amount A from that procedure and use it in the transaction. If the procedure code does not already exist in Medisoft than Import Wizard will create the transaction with a zero-dollar charge.
- 28) Added note #22- In later versions of Medisoft the Provider IDs were moved from the PINs tab (which was eliminated to a new Provider IDs tab). This accompanied the creation of a new data table in Medisoft for the storage of provider and practice IDs which is locked by McKesson and cannot be written to externally. While the Import Wizard will write the provider information to Medisoft the biller will have to manually set up those provider IDs.
- 3) Added email address to the Patient segment (field number 20).
- 4) Added four additional phone number fields to the Patient segment (field numbers 21 24).
- 5) Corrected Work Phone from 14 Characters "Numeric" to 13 Characters "Text" and corrected Work Phone Ext from 6 Characters "Numeric" to 4 Characters "Text".
- 6) Corrected Preferred Language from 45 Characters to 30 Characters and corrected the options available. Also eliminated "Appendix A ISO 639 standardized nomenclature known languages" and renamed "Appendix B-IWTIF version history"
- 7) Corrected Race and Ethnicity from 45 Characters to 1 Character and corrected the options available.

IWTIF V19.03- 03/26/13-

1) Clarification on rule # 14 page 4.

IWTIF V19.04- 06/15/13-

- 1) Added Place of Service (POS) TRN
- 2) Added 4 modifiers to TRN
- 3) Modified this format spec to reflect changes for 1 and 2 above.

IWTIF V19.05-06/19/13-

1) Corrected Sample IWTIF Data File (i.e. Fixed the second DX#2 for Dwight Again)

IWTIF V19.06- 07/12/14-

2) Added rule 24 to page 5, recommending that empty records not be added. Code was modified to add an empty record if one exists.

IWTIF V19.07- 01/17/15-

1) In Import Wizard version 4.4.4 Import Wizard was modified to import 10 or more transactions (TRN segments) in one encounter. Previously Import Wizard only handled up to 9 (more than that caused the CPT code to pick up the leading colon or space (i.e. ":86006" rather than "86006") when the CPT tag went from single digit to double digit (i.e. from "CPT#9:" to "CPT#10:"). Also added the explanation that if a future Date of Service (DOS) is processed in a TRN segment, the year will flip to the 20th Century rather than the 21st Century (i.e. 2/1/1915 rather than 2/1/2015). A future DOS would typically be either an error or fraud, so this shouldn't be a problem and hopefully will even draw attention to a bad DOS. Added note 25 to explain about how Import Wizard handles a future Date Of Service (DOS).

Also made a few other cleanup modifications to this document.

IWTIF V19.08- 01/18/15-

Worked with Denny to confirm the various fields in the format and make appropriate corrections.

IWTIF V19.09- 03/01/15-

Changed Address field Column #2 "Full Title" from 40 to 30 characters. Apparently Medisoft changed the database specification to 30 characters maximum at some point.

Added note number 26 on page 5 about fields that contain commas.

IWTIF V19.10- 03/02/15-

Note on fields that contain commas as well as First, Second and Third Insurance (Rules 26 and 27 on page 6).

IWTIF V19.11- 03/28/15-

Corrected explanation on page 3.

IWTIF V19.12-05/21/15-

Modified rule number 8 to reflect detail regarding the number of DX cans that can be imported with Import Wizard.

Corrected the example in the middle of page 3 regarding the TRN line.

29) Added case description field for Import Wizard 4.4.7. We added a new tag to the IWTIF format "DESCRIPTION:" which can be followed by up to 30 characters. The data sent in that tag will be populated to the Case Description field. This field should be placed before the DX and CPT codes and TRN.

IWTIF V20.00- 07/21/16-

Modified all statements to reflect the ability to handle 12 DXs and not just 4 DXs.

Rule #23 in "Rules when using the IWTIF" was duplicated so it was combined with Rule #7.

Added DX field #4 to signify whether the DX code is an ICD9 or ICD10 code.

Added Preauth and Hospitalization From and To dates to the Policy section.

IWTIF V20.01- 12/28/18-

Cleaned up some grammatical errors and improved the wording on some items for clarification.

IWTIF V20.02-5/11/19-

Cleaned up some grammatical errors and improved the wording on some items for clarification.

IWTIF V20.03-6/8/19-

Cleaned up some grammatical errors and improved the wording on some items for clarification.

Added additional information regarding how the Case Description field is automatically populated to Item #27 in the "Rules when using the IWTIF".

IWTIF V20.03- 1/5/21-

Cleaned up some grammatical errors and improved the wording on some items for clarification.

IWTIF V20.04-

Cleaned up some grammatical errors and improved the wording on some items for clarification.

IWTIF V20.05-3/6/21-

Cleaned up some typos and grammatical errors and improved the wording on some items for clarification, especially item #8 on page 3 and the TRN format on page #12.

Last revision date: 03/06/21 Rev. 20.05