

Medicaid Administrative Claiming



School Based Service

Web Application User Guide

For Wisconsin Medicaid
SBS Providers

Table of Contents

Introduction.....	pg. 1
Login.....	pg. 2
New User Registration.....	pg. 3-4
Registering MAC/SBS Provider Numbers.....	pg. 5-6
Forgot Password Help.....	pg. 7-8
MAC/SBS Home Page.....	pg. 9
Update Provider Numbers.....	pg. 10-11
Update User Profile.....	pg. 12-13
Active Users List.....	pg. 14
Upload Roster File.....	pg. 15
Agreement of Confidentiality.....	pg. 16
SBS Upload Roster File page.....	pg. 17
SBS Thank You Page.....	pg. 18
Opening and Saving Your SBS Medicaid Eligible Student List.....	pg. 19-22
Converting Your Text File to Microsoft Excel.....	pg. 23-24

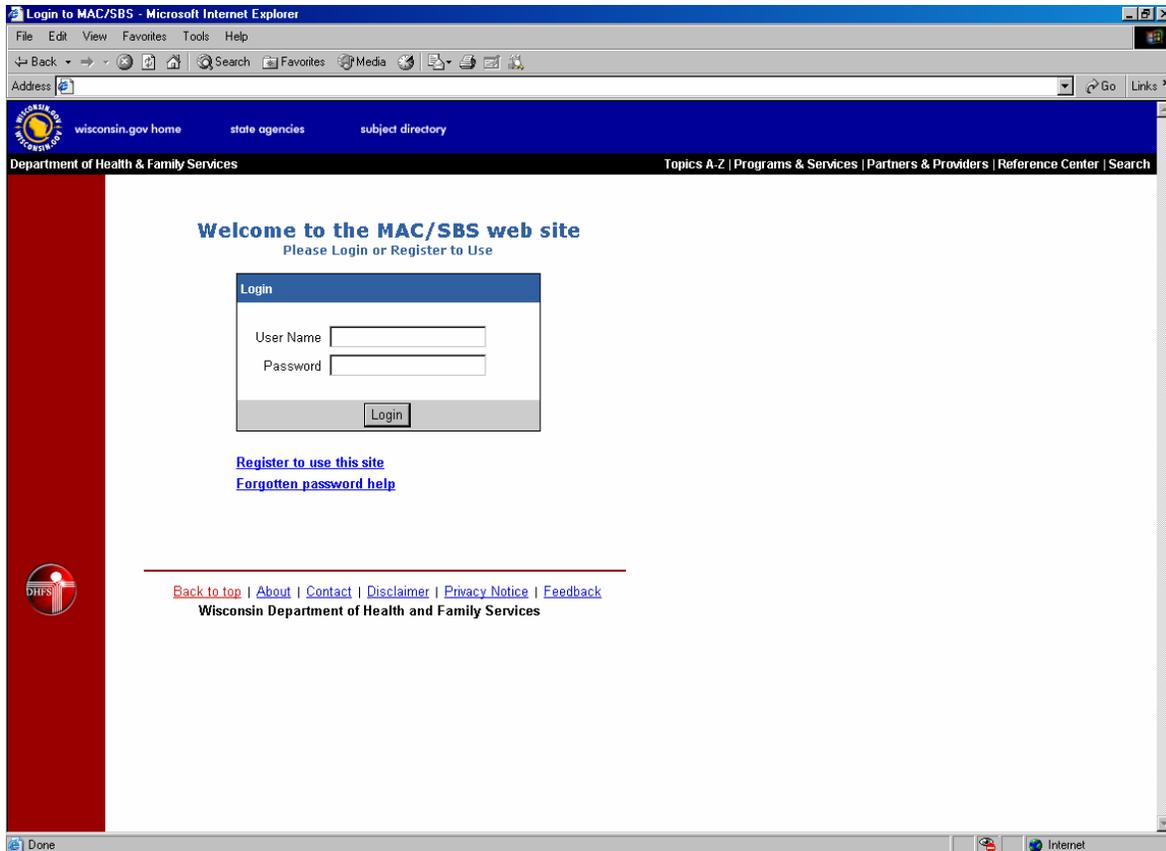
Introduction

Wisconsin Medicaid School Based Service providers may use the Medicaid Administrative Claiming (MAC)/ School Based Service (SBS) Web site to receive a report of Medicaid-eligible students in the provider's school district/Cooperative Educational Service Agency (CESA). Wisconsin Medicaid will send the report of Medicaid-eligible students to each SBS provider via e-mail after the provider submits the “Registration to Receive Report of Medicaid-Eligible Students for School-Based Services Providers” and a valid student roster via the Web site. The report, which will facilitate Medicaid eligibility verification and billing, will be formatted in a password-protected, encrypted text file.

This document guides a user through the necessary steps to receive the report of Medicaid-eligible students.

If you have any questions not covered in this user guide, please contact the EDI Helpdesk at (866) 416-4979.

Login



Users who have previously registered for the MAC/SBS Web Application must login by:

- Entering their **User Name**.
- Entering their **Password**.
- Selecting **Login** to advance to the next screen and begin using the application.

Site Registration

Users who have not previously registered for the MAC/SBS Web Application must select “Register to use the site” to access the “New User Registration” page.

Forgotten Passwords

If a user forgets his or her password, he or she must select “Forgotten password help.”

New User Registration

New User Registration

Please enter your information, then choose **Register**. To complete your registration, you will be asked to enter the providers that you will be associating with this user.

Name — First **User Name**

Name — Last **Password**

Address 1 **Retype Password**

Address 2

City

State / ZIP Code WI ZIP Plus 4

E-Mail

Confirm E-Mail

Telephone

Ext

Fax

Notes:

- Fields in **blue** are required.
- User names must have at least 6 characters.
- The password is case sensitive, must be a minimum of 8 characters, and must include at least one alphabetic and one numeric character.

Select a **personal reminder question** that will be asked to confirm your identity if you forget your password.

What is your mother's maiden name? **Question Response**

Users will be asked to enter or select the following information (all items in blue are required):

Name — First and Last

Enter the user's first and last name.

Address 1

Enter the user's address.

Address 2

If additional space is needed, continue to enter the user's address in this space.

City

Enter the user's city.

State / ZIP

Enter the user's state and ZIP code.

E-Mail

Enter the user's e-mail address. E-mail addresses are not case sensitive.

Confirm E-Mail

The e-mail address entered in this field must match the address entered in the "E-mail" field.

Telephone

Enter the user's telephone number, including extension if applicable.

Fax

Enter the user's fax number (optional).

User Name

User names must be at least six characters long and can be alphanumeric (e.g., abcd123). User names are not case sensitive. Each user is required to select a unique user name and password.

Password

Passwords must be at least eight characters long and contain at least one letter character and one numeric character. Passwords are case sensitive.

Retype Password

As a security check, users will be asked to retype their password.

Select a Personal Reminder Question

Users are required to choose one of the following questions from the drop-down box:

“What is your mother's maiden name?”

“What is your father's middle name?”

“What are the last four digits of your Social Security number?”

“What was the name of your high school as a child?”

Question Response

Users are required to enter the answer to the question they selected. The maximum length of this response is 25 characters. Question responses are case sensitive. This feature is used to confirm a user's identity if a password is forgotten.

Clear

Select "Clear" to erase all the fields previously entered.

Register

Select "Register" to submit the registration information and continue to the next screen.

Registering MAC/SBS Provider Numbers

Register for MAC/SBS Providers - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Media

Address Go Links

MEDICAID ADMINISTRATIVE CLAIMING & SCHOOL BASED SERVICES

Login Register Forgot Password Help

Register Provider Numbers

Please enter the providers that you will be associating with this user. To complete your registration, select **Done**.

Add a Provider: Enter the SBS or MAC Provider Number, then choose '**Confirm Add**'. If confirmed, choose '**Add**' to add the provider to your list.

Remove a Provider: Select a provider from the Selected Providers drop-down list, then choose **Remove**.

MAC/SBS Provider Number:

Selected Providers:

Confirm Add Remove Clear Done

To Add a Provider

Enter the ten-digit NPI provider number, then choose "Confirm Add" to verify that the provider number was entered correctly. Once confirmed, the user must choose "Add" to add the provider to his or her list.

To Remove a Provider

Select the provider on the Selected Providers drop-down list, then choose "Remove."

MAC/SBS Provider Number

Enter the ten-digit NPI provider number of the provider to be added.

Selected Providers

This field displays those providers currently in the user's provider list.

Confirm Add

Select "Confirm Add" once the provider number has been entered.

Add

The user must select "Add" once the provider number and name have been entered. The provider number will then be added to the user's list.

Remove

Select the provider number to remove it from the Selected Provider drop-down list, then choose "Remove."

Clear

Select "Clear" to erase all the fields previously entered.

Done

Select "Done" to complete the registration process.

Once registration is successfully submitted, an e-mail will be sent to the e-mail address the user entered when registering his or her account.

To complete the registration process, the user must select the link in the e-mail, which will activate the user's newly created ID allowing them to begin using the MAC/SBS Web Application.

Forgotten Password Help (Step 1)

Forgotten Password - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Media

Address

Medicaid Administrative Claiming
MAC & SBS
School Based Service

MEDICAID ADMINISTRATIVE CLAIMING & SCHOOL BASED SERVICES

Login Register Forgot Password Help

Forgotten Password Help

Please enter your User Name and E-Mail address, then choose **Get Password Reminder**.
Fields in **blue** are required.

User Name

E-Mail

Clear Get Password Reminder

Done Internet

Users who have forgotten their password may request that it be e-mailed to them by:

Entering their **User Name**.

Entering their **E-mail** address.

Selecting **Get Password Reminder** to advance to the next screen and receive their password reminder question.

Forgotten Password Help (Step 2)

Forgotten Password - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Media

Address Go Links

Medicaid Administrative Claiming
MAC & SBS
School Based Service

MEDICAID ADMINISTRATIVE CLAIMING & SCHOOL BASED SERVICES

Login Register Forgot Password Help

Forgotten Password Help

Please enter the correct Reminder Question response and your password will be sent to you shortly via e-mail.

User Name

E-Mail

Reminder Question

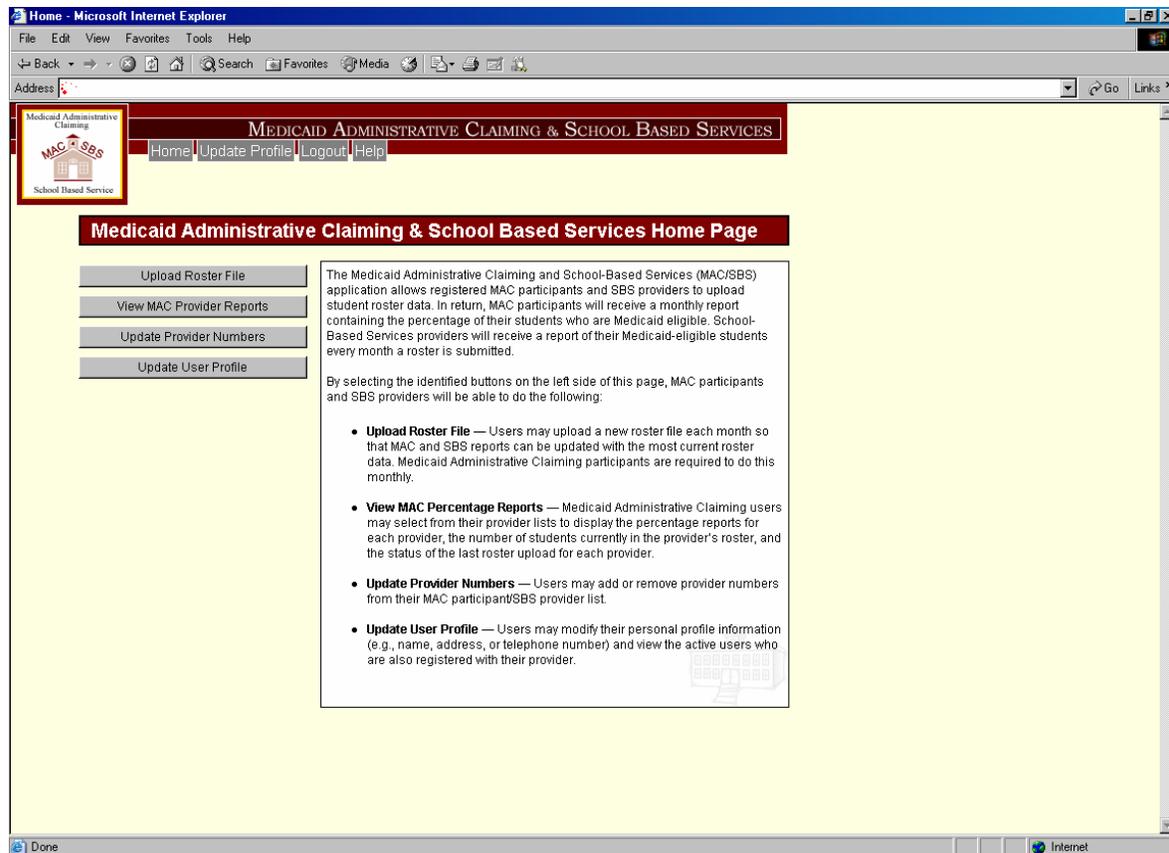
Question Response

Clear Submit

Done Internet

To receive a forgotten password by e-mail, users will be prompted with their password reminder question. Users must answer the question correctly in the **Question Response** field and press **Submit** to receive their password by e-mail.

MAC/SBS Home Page



After logging into the MAC/SBS Web Application, the user will advance to the MAC/SBS Home Page. Select the buttons on the left side of this page to do the following:

Upload Roster File — Users may upload a new roster file each month so that MAC and SBS reports can be updated with the most current roster data. Medicaid Administrative Claiming participants are required to do this monthly.

View MAC Percentage Reports — Medicaid Administrative Claiming (MAC) users may select from their provider lists to display the percentage reports for each provider, the number of students currently in the provider's roster, and the status of the last roster upload for each provider.

Update Provider Numbers — Users may add or remove provider numbers from their MAC participant/SBS provider list.

Update User Profile — Users may modify their personal profile information (e.g., name, address, or telephone number) and view the active users who are also registered with their provider.

Update Provider Numbers

Update MAC/SBS Providers - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Search Favorites Media

Address

Medicaid Administrative Claiming
MAC/SBS
School Based Service

MEDICAID ADMINISTRATIVE CLAIMING & SCHOOL BASED SERVICES

Home Update Profile Logout Help

Update Provider Numbers

Add a Provider: Enter the SBS or MAC Provider Number, then choose **Confirm Add**. If confirmed, choose **Add** to add the provider to your list.

Remove a Provider: Select a provider from the Selected Providers drop-down list, then choose **Remove**.

MAC/SBS Provider Number

Selected Providers

- 12345678 - TEST PROVIDER ONE
- 87654321 - TEST PROVIDER TWO

Confirm Add Remove Clear Done

To Add a Provider

The user must enter the ten-digit NPI provider number, then choose "Confirm Add" to verify that the provider number was entered correctly. Once confirmed, the user must choose "Add" to add the provider to the list.

To Remove a Provider

Select the provider on the Selected Providers drop-down list, then choose "Remove."

MAC/SBS Provider Number

Enter the ten-digit NPI provider number of the provider to be added.

Selected Providers

This field displays those providers currently in the user's provider list.

Confirm Add

Select "Confirm Add" once the provider number and name have been entered.

Add

Select "Add" to confirm the provider number and name entered. The provider number will then be added to the user's list.

Remove

Select the provider number to remove from the Selected Provider drop-down list, then choose "Remove."

Clear

Select "Clear" to erase all the fields previously entered.

Done

Select "Done" to complete the MAC/SBS provider number update and return to the main menu.

Update User Profile

Update User Profile

Name — First **User Name**

Name — Last **Password**

Address 1 **Retype Password**

Address 2 **Active Users List**

City

State / ZIP Code **ZIP Plus 4**

E-Mail

Confirm E-Mail

Telephone

Fax

Notes:

- Fields in **blue** are required.
- The password is case sensitive, must be a minimum of 8 characters, and must include at least one alphabetic and one numeric character.
- Confirm E-Mail is required when changing your E-Mail address.

Select a **personal reminder question** that will be asked to confirm your identity if you forget your password.

Question Response

The following fields can be modified if the user needs to update his or her user profile:

Note: User Name is the only field that cannot be changed.

Name — First and Last

Enter the user's first and last name.

Address 1

Enter the user's address.

Address 2

If additional space is needed, continue to enter the user's address in this space.

City

Enter the user's city.

State / ZIP Code

Enter the user's state and ZIP code.

E-Mail

Enter the user's e-mail address. E-mail addresses are not case sensitive.

Confirm E-Mail

The e-mail address entered in this field must match the address entered in the "E-mail" field.

Telephone

Enter the user's telephone number, including extension if applicable.

Fax

Enter the user's fax number, if applicable.

User Name

This field cannot be updated.

Password

Passwords must be at least eight characters long and contain at least one letter character and one numeric character. Passwords are case sensitive.

Retype Password

As a security check, users will be asked to retype their password.

Select a Personal Reminder Question

Users are required to choose one of the following questions from the drop-down box:

“What is your mother's maiden name?”

“What is your father's middle name?”

“What are the last four digits of your Social Security number?”

“What was the name of your high school as a child?”

Question Response

Users are required to enter the answer to the question they selected. The maximum length of this response is 25 characters. Question responses are case sensitive. This feature is used to confirm a user's identity if a password is forgotten.

Reset

Select "Reset" to reset the fields to their original values.

Update Profile

Select "Update Profile" to submit their modified profile information.

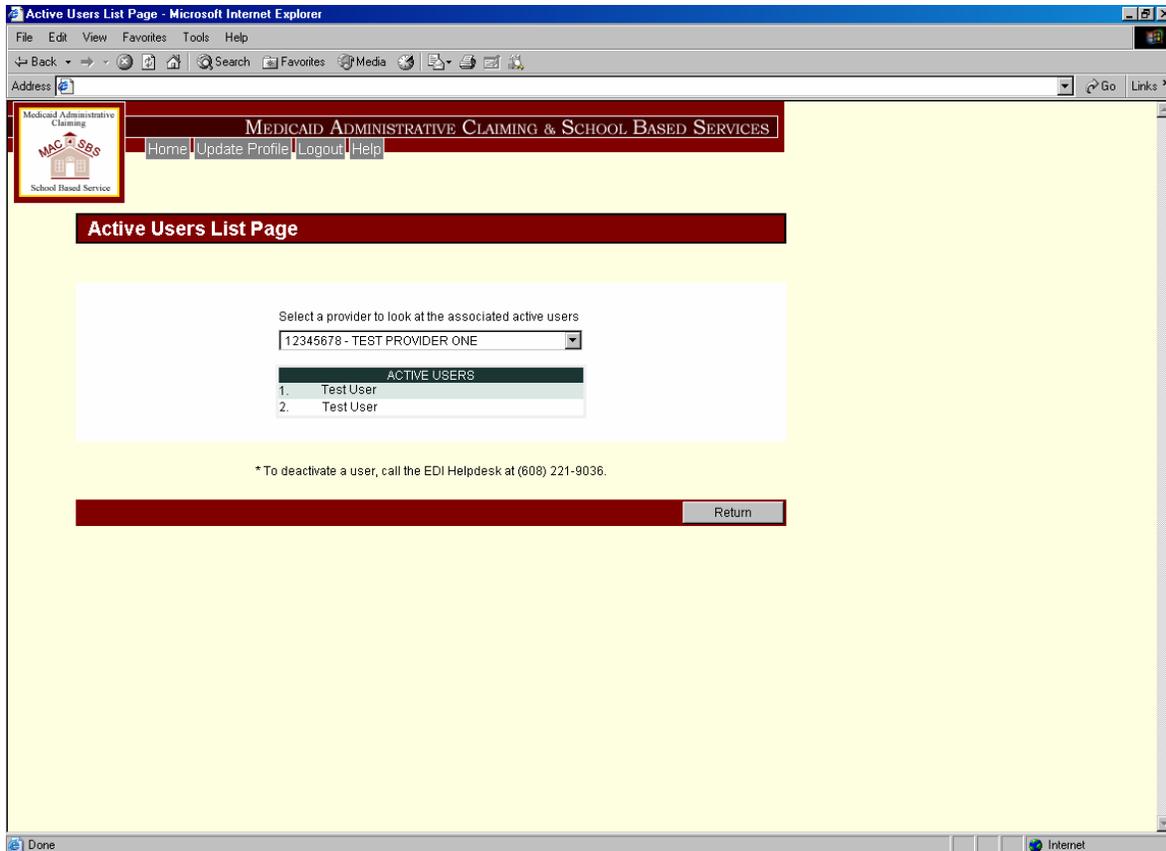
Cancel

Select "Cancel" to return to the Main Menu without making any changes to their profile.

Active Users List

Select "View Users" to view the list of users that are active and are also registered with your provider numbers.

Active Users List



Any new user that has registered to use the MAC/SBS web site is an active user and may use the web site. To disallow a user from submitting roster files or viewing information regarding your roster file uploads, you must deactivate them.

***To deactivate a user, call the EDI Helpdesk at (866) 416-4979 with your Provider ID, Provider Address and the username you want to deactivate.**

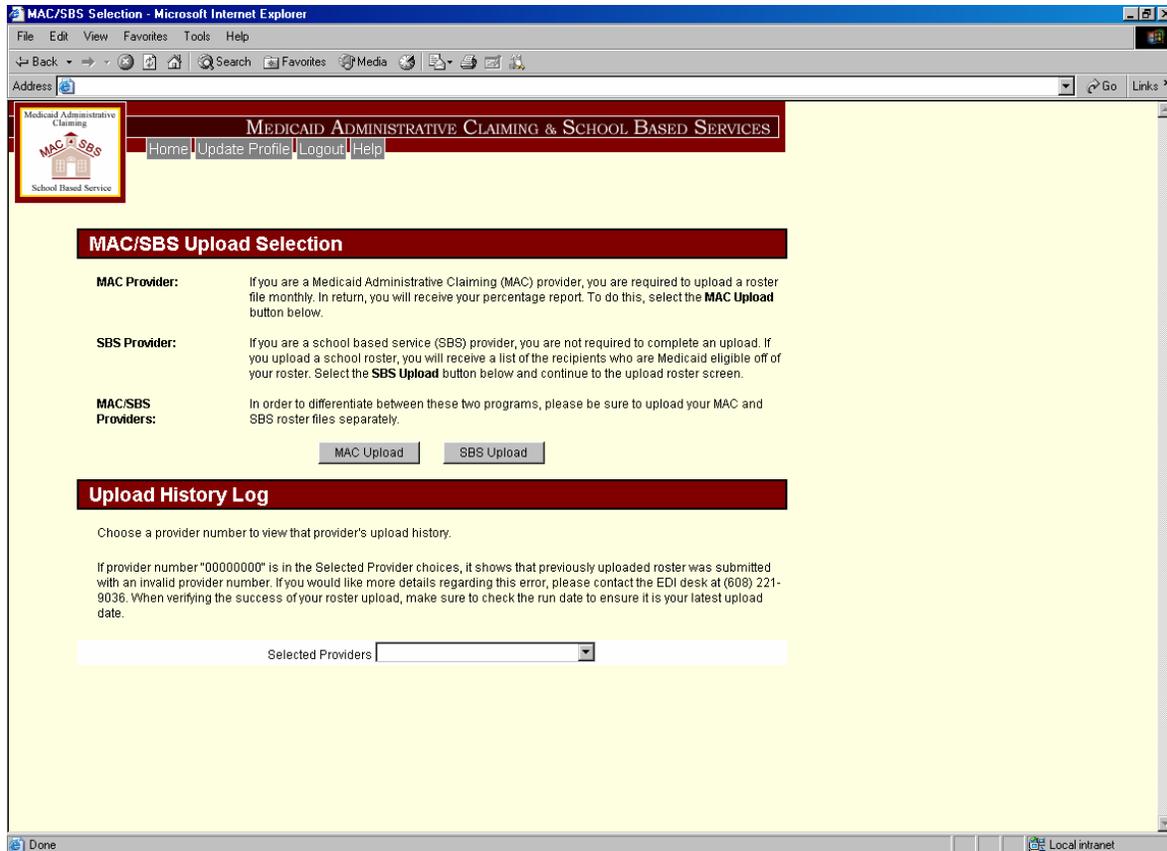
View Users

To view the list of active users for your provider number, select a provider number from the drop-down menu.

Return

Select "Return" to return to the Update User Profile page.

Upload Roster File



MAC Upload

To upload your MAC roster file and receive a percentage report, select the **MAC Upload** button.

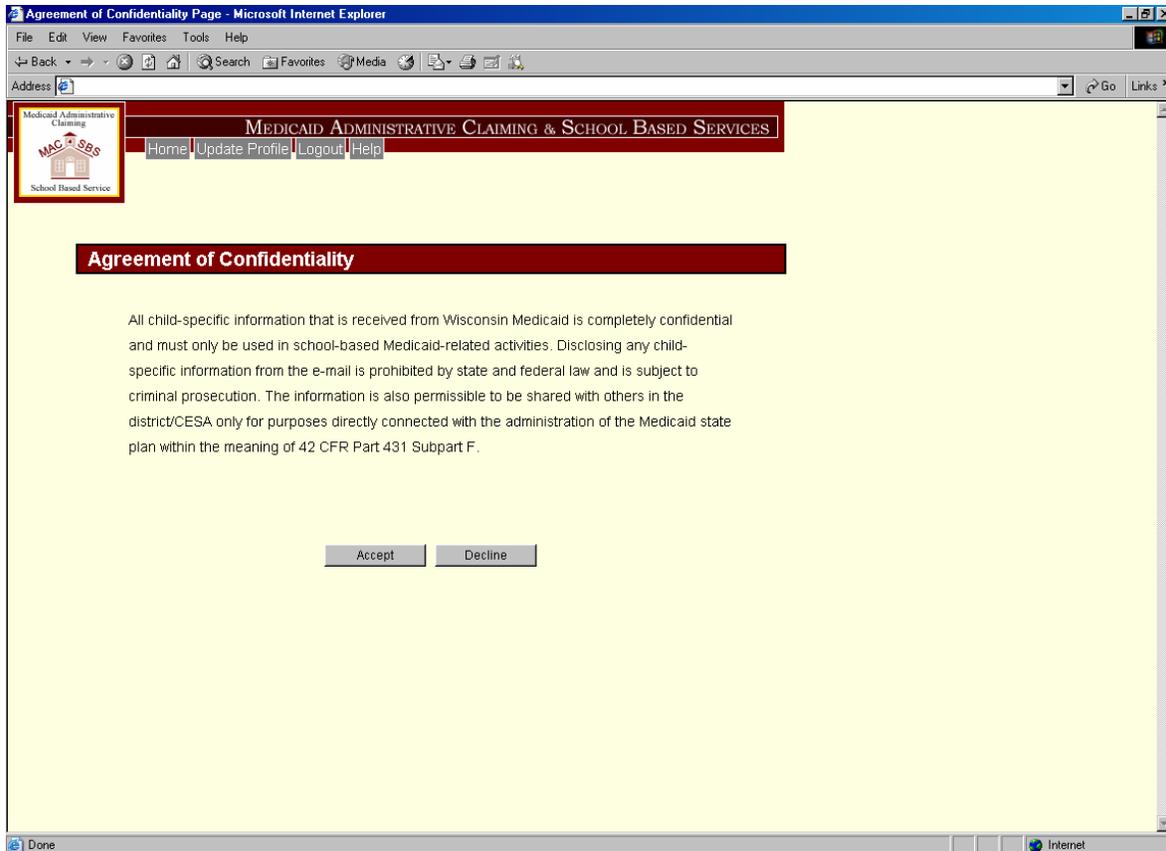
SBS Upload

To upload your SBS roster file and receive a Medicaid eligible student list, select the **SBS Upload** button.

Upload History Log

Select a provider that you would like to view from the **Selected Providers** menu then, select **View Upload Status** to view any errors that may have occurred in your upload.

Agreement of Confidentiality



Click **Accept** to agree to the confidentiality terms and to proceed to the SBS Upload Roster File page. Click **Decline** if you do not agree to these terms and you will return to the previous page.

SBS Upload Roster File page

SBS Upload Roster File

School-Based Services (SBS) providers may upload their Student Roster File(s) on this page. An e-mail acknowledgement will be sent within 24 hours of submission.

Users may select a Student Roster File by using the **Browse** button and then selecting **Upload** to upload the file. **Uploading a new file will replace all previously uploaded roster information on file.** Only files in the approved format may be uploaded. The file size must not exceed 10 MB.

All child-specific information that is received from Wisconsin Medicaid is completely confidential and must only be used in school-based Medicaid-related activities. Disclosing any child-specific information from the e-mail is prohibited by state and federal law and is subject to criminal prosecution. The information is also permissible to be shared with others in the district/CESA only for purposes directly connected with the administration of the Medicaid state plan within the meaning of 42 CFR Part 431 Subpart F. By selecting **Upload** you agree to these terms.

Be sure to select your **SBS** roster file:

To ensure that student roster files are received in time to generate a MAC percentage report or SBS Medicaid-Eligible Student List for the following month, users must follow the schedule below, submitting their files on and after the First Submit Date and ensuring that their roster file has been processed and that all of its records are valid by the Submission Deadline. The MAC Percentage Reports will be available online and an e-mail will be sent with the SBS Medicaid-Eligible Student Lists on each Report Available Date.

First Submit Date	Valid Roster Date	Report Available Date	Reporting Month
02/07/06	02/24/06	03/06/06	March
03/07/06	03/32/06	04/10/06	April
04/11/06	04/28/06	05/08/06	May
05/09/06	05/26/06	06/05/06	June
06/06/06	06/30/06	07/10/06	July
07/11/06	07/28/06	08/07/06	August
08/08/06	08/25/06	09/04/06	September
09/05/06	09/29/06	10/09/06	October
10/10/06	10/27/06	11/06/06	November
11/07/06	11/24/06	12/04/06	December
12/05/06	12/29/06	01/08/07	January

Right click and choose **Save Target As** to download the [ROSTER_CONVERT.zip](#) file. Refer to the [Student Roster File Format Specifications](#) for more information.

Browse

Select “Browse” to search for your SBS roster file on your computer.

Upload

Select “Upload” to upload the file selected in the Browse box.

Reset

Select “Reset” to clear the information in the Browse box.

Cancel

Select “Cancel” to return to the MAC/SBS Selection page.

SBS Thank You Page

Thank You For Submitting A SBS Roster File.

Users may check back in 24 hours to check the status of their Roster File. If the Roster File contains errors, the user will need to correct them and resubmit the entire file.

To ensure that student roster files are received in time to generate a MAC percentage report or SBS Medicaid-Eligible Student List for the following month, users must follow the schedule below, submitting their files on and after the First Submit Date and ensuring that their roster file has been processed and that all of its records are valid by the Submission Deadline. The MAC Percentage Reports will be available online and an e-mail will be sent with the SBS Medicaid-Eligible Student Lists on each Report Available Date.

First Submit Date	Valid Roster Date	Report Available Date	Reporting Month
02/07/06	02/24/06	03/06/06	March
03/07/06	03/32/06	04/10/06	April
04/11/06	04/28/06	05/08/06	May
05/09/06	05/26/06	06/05/06	June
06/06/06	06/30/06	07/10/06	July
07/11/06	07/28/06	08/07/06	August
08/08/06	08/25/06	09/04/06	September
09/05/06	09/29/06	10/09/06	October
10/10/06	10/27/06	11/06/06	November
11/07/06	11/24/06	12/04/06	December
12/05/06	12/29/06	01/08/07	January

[Upload Again](#) [Upload Home](#) [Done](#)

Upload Again

Select “Upload Again” to upload another SBS roster file.

Upload Home

Select “Upload Home” to be taken to the MAC/SBS Upload Selection page.

Done

Select “Done” to be taken to the Home Page.

Logout

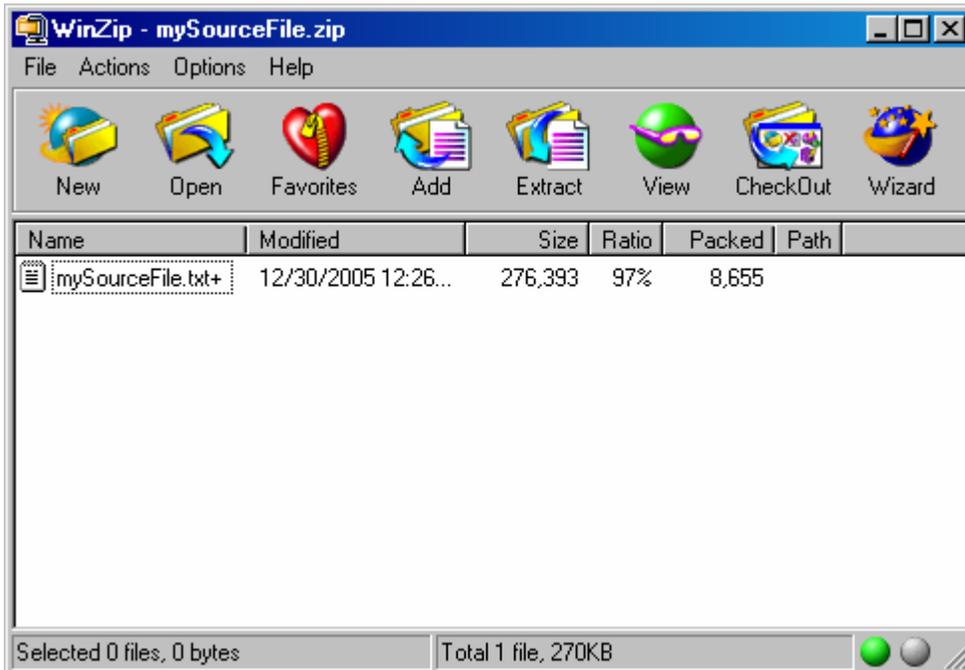
Users are suggested to logout of the MAC/SBS Web site, when finished, by selecting the “Logout” button at the top of the application or closing their browser.

Opening and Saving Your SBS Medicaid Eligible Student List

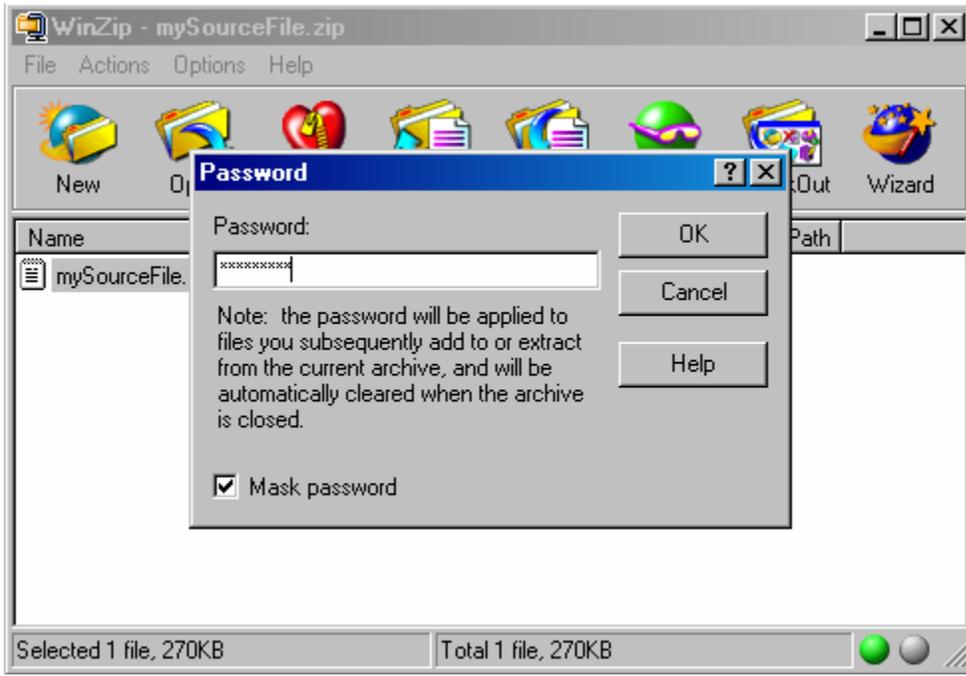
After SBS providers submit a roster file to Wisconsin Medicaid, Wisconsin Medicaid will send a report of Medicaid-eligible students to each SBS provider via e-mail. The report, which will facilitate Medicaid eligibility verification and Billing, will be formatted in a password-protected, encrypted text file and sent to the contact listed on the SBS provider registration form.

To open and view the list of students who are covered under Medicaid from the roster submitted, the user must have Microsoft Windows XP or WinZip 8.1 SR1 (or newer version) installed on the computer. (If you need to download WinZip 8.1 SR1, please see the email that contained the file.) Second, the user must download the zip file, sent in your email, to your computer and name it like "MyFile.Zip".

If you are using **WinZip 8.1 SR1**, double click on the zip file.

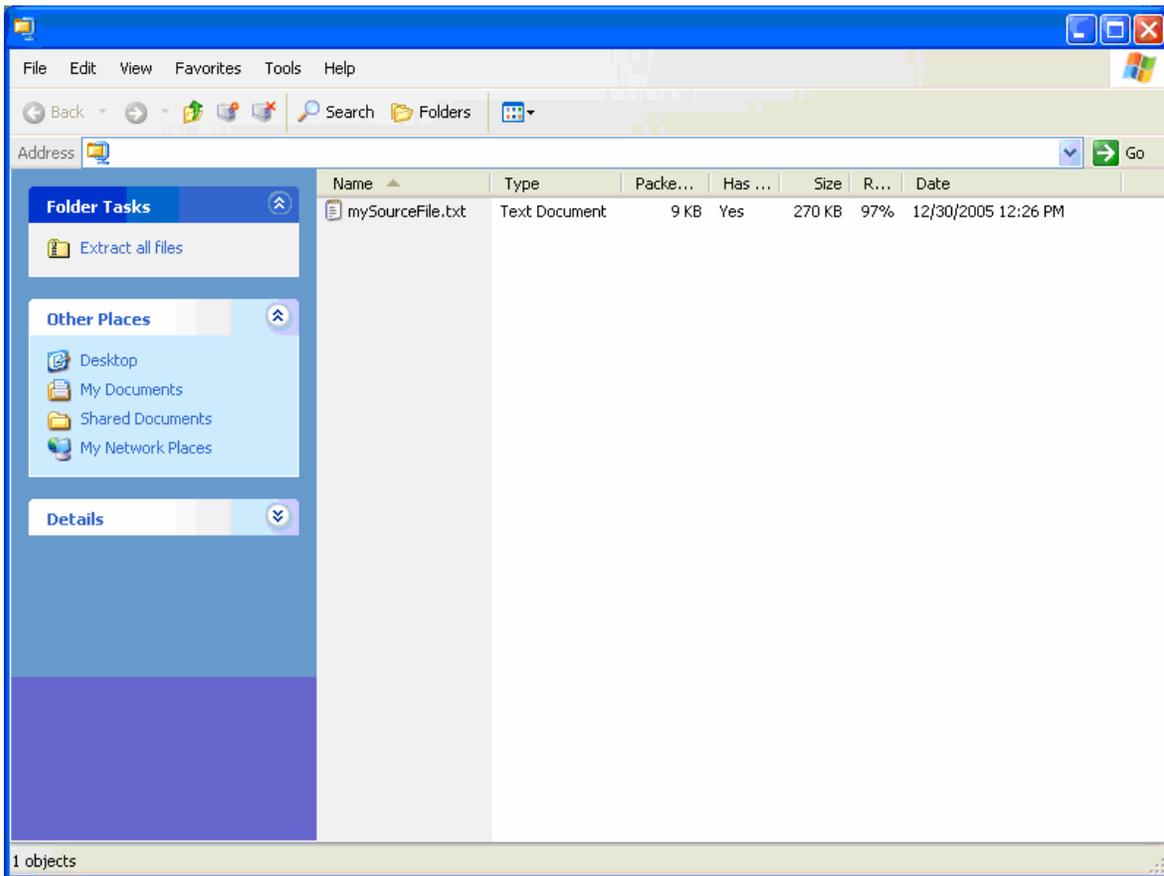


Next, double click on the .txt file.

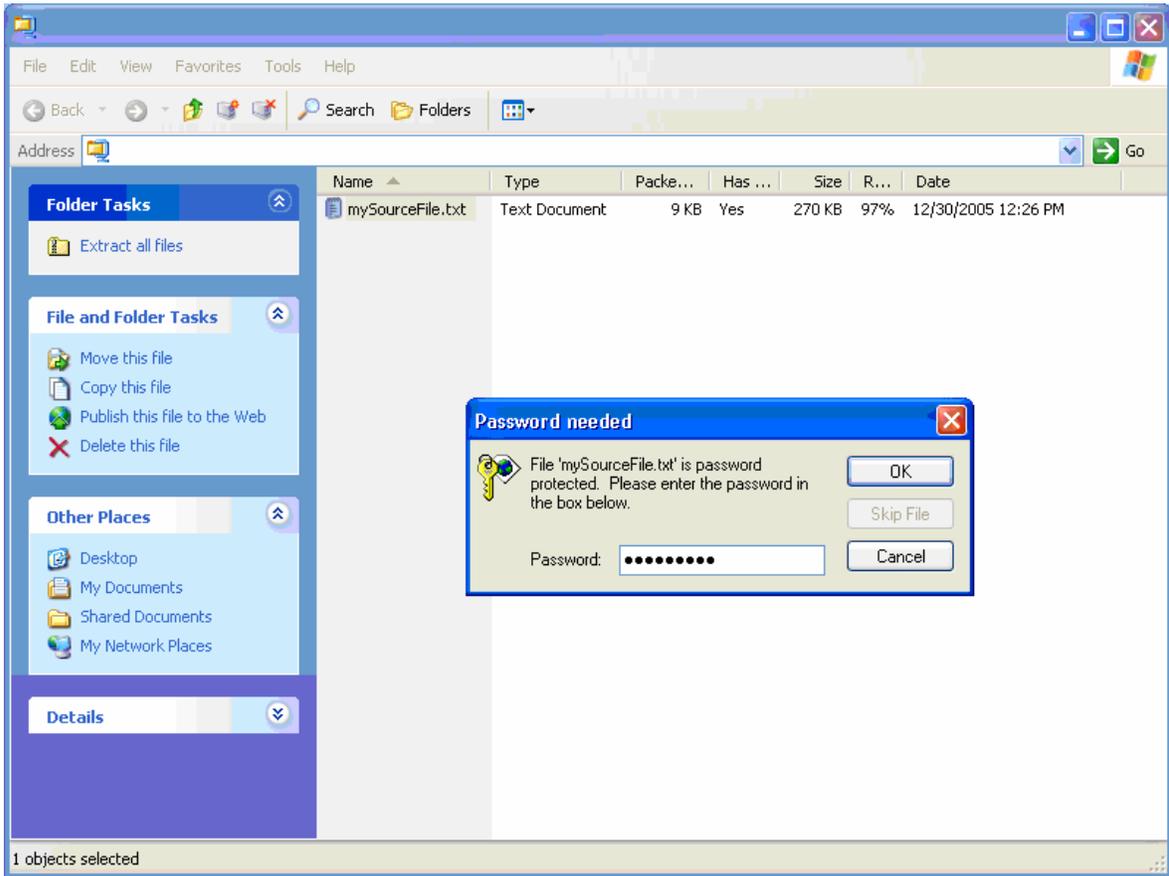


Type in the password written on the “Registration to Receive Report of Medicaid-Eligible Students for School-Based Services Providers” form and click “OK”. (Skip to page 23)

If you are using **Microsoft Windows XP**, double click on the zip file.

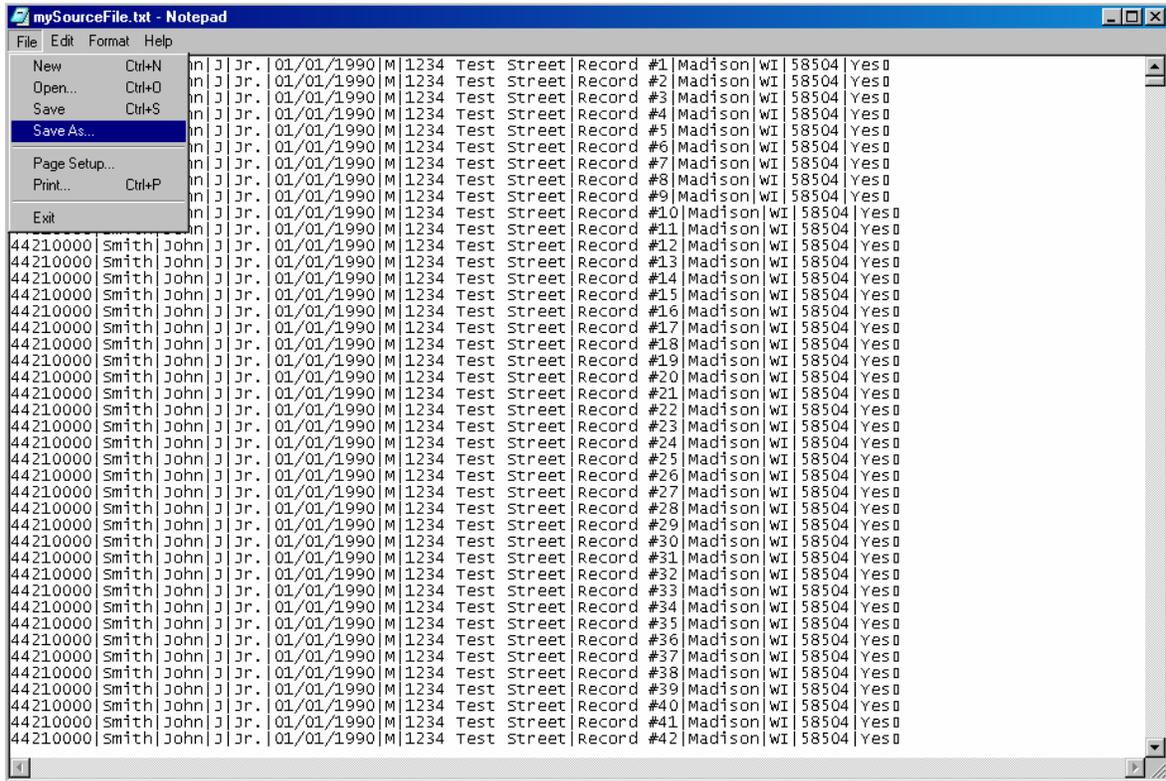


Next, double click on the .txt file.

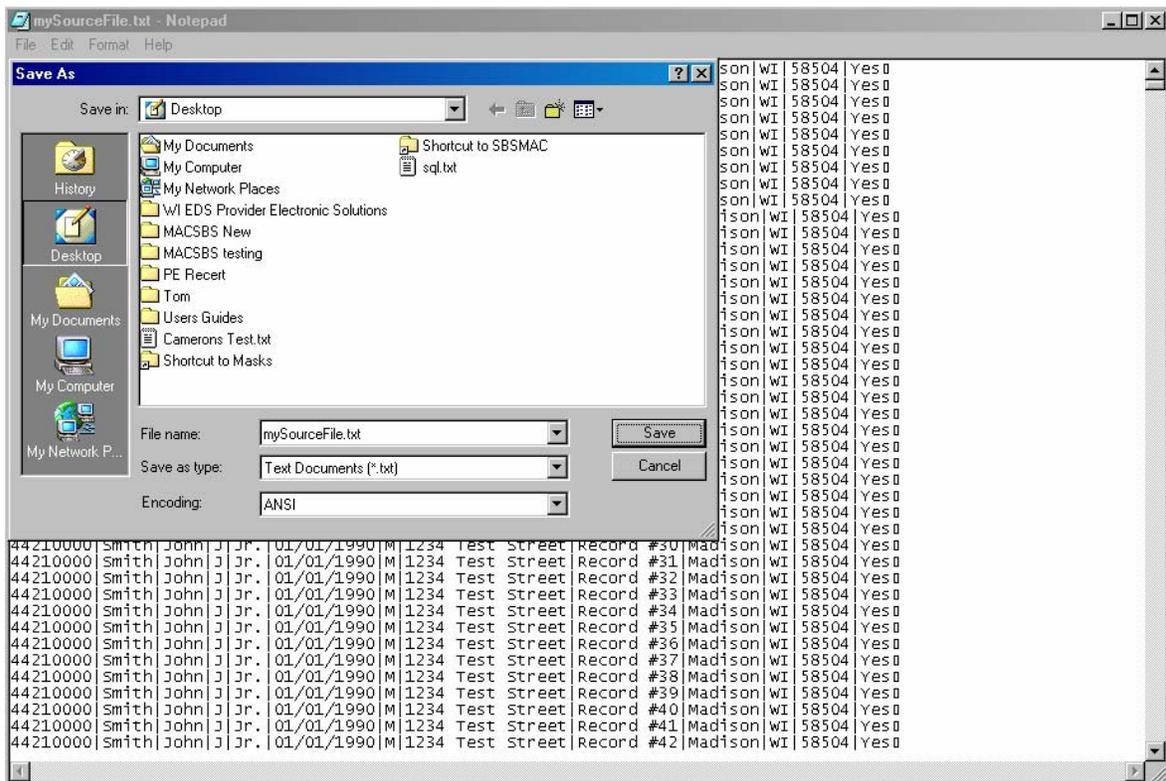


Type in the password written on the “Registration to Receive Report of Medicaid-Eligible Students for School-Based Services Providers” form and click “OK”.

Your Medicaid eligible student list should then appear. Once this file has opened, select “File” and then “Save As.”



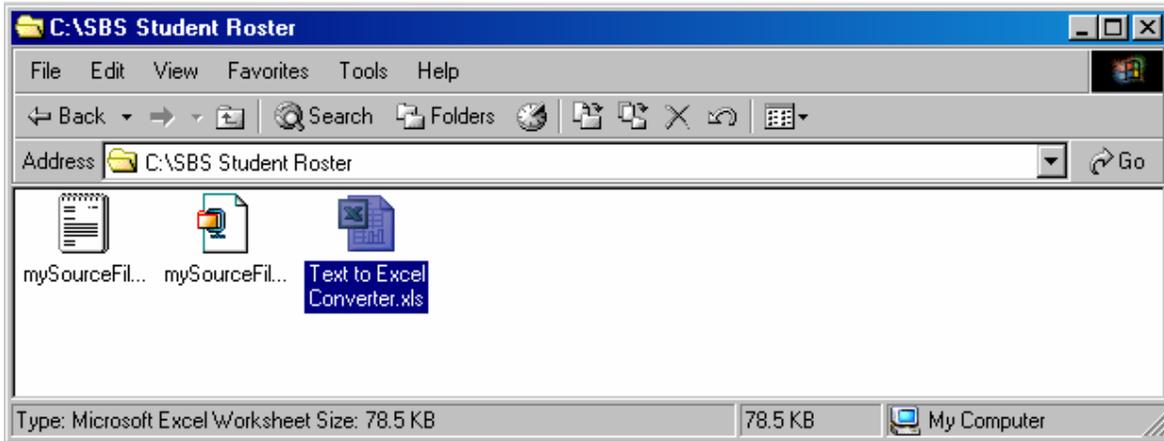
Navigate to the folder you would like to save your file in using the “Save in:” drop down menu, type the name you would like to save the file as, in the “File Name:” field and click “Save”.



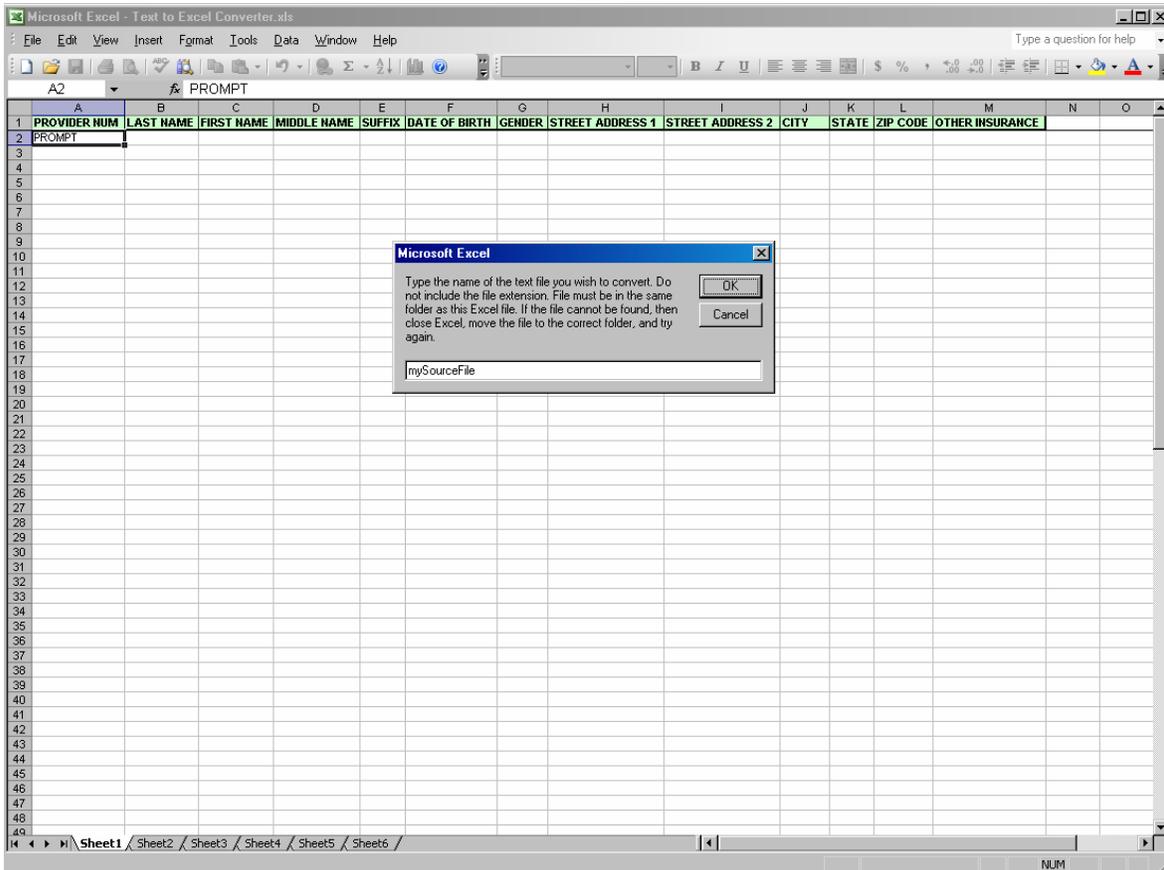
Converting Your Text File to Microsoft Excel

To convert your Medicaid eligible student list text file into an Excel document, you must download the “Text to Excel Converter”. This can be found in the “Help” section of the MAC/SBS Web Application.

Make sure your text file is in the same folder as the “Text to Excel Converter”. Then double click on the “Text to Excel Converter.xls”.



Once the “Text to Excel Converter” has been opened, type in the name of the text file without the file extension (eg. If your file name is mySourceFile.txt, you should type “mySourceFile”) and click “OK”. If you click cancel, the “Text to Excel Converter” will close.



The user should now read the pop-up message and click “OK”. It is important to wait until the file is completely done loading and you are prompted that the operation is complete and your file has been saved.

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	PROVIDER NUM	LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	DATE OF BIRTH	GENDER	STREET ADDRESS 1	STREET ADDRESS 2	CITY	STATE	ZIP CODE	OTHER INSURANCE		
2	Rec 37 of 3000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #1	Madison	VM	58504	Yes		
3	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #2	Madison	VM	58504	Yes		
4	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #3	Madison	VM	58504	Yes		
5	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #4	Madison	VM	58504	Yes		
6	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #5	Madison	VM	58504	Yes		
7	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #6	Madison	VM	58504	Yes		
8	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #7	Madison	VM	58504	Yes		
9	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #8	Madison	VM	58504	Yes		
10	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #9	Madison	VM	58504	Yes		
11	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #10	Madison	VM	58504	Yes		
12	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #11	Madison	VM	58504	Yes		
13	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #12	Madison	VM	58504	Yes		
14	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #13	Madison	VM	58504	Yes		
15	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #14	Madison	VM	58504	Yes		
16	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #15	Madison	VM	58504	Yes		
17	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #16	Madison	VM	58504	Yes		
18	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #17	Madison	VM	58504	Yes		
19	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #18	Madison	VM	58504	Yes		
20	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #19	Madison	VM	58504	Yes		
21	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #20	Madison	VM	58504	Yes		
22	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #21	Madison	VM	58504	Yes		
23	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #22	Madison	VM	58504	Yes		
24	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #23	Madison	VM	58504	Yes		
25	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #24	Madison	VM	58504	Yes		
26	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #25	Madison	VM	58504	Yes		
27	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #26	Madison	VM	58504	Yes		
28	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #27	Madison	VM	58504	Yes		
29	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #28	Madison	VM	58504	Yes		
30	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #29	Madison	VM	58504	Yes		
31	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #30	Madison	VM	58504	Yes		
32	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #31	Madison	VM	58504	Yes		
33	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #32	Madison	VM	58504	Yes		
34	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #33	Madison	VM	58504	Yes		
35	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #34	Madison	VM	58504	Yes		
36	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #35	Madison	VM	58504	Yes		
37	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #36	Madison	VM	58504	Yes		
38	44210000	Smith	John	J	Jr.	01/01/1990	M	1234 Test Street	Record #37	Madison	VM	58504	Yes		
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Once prompted the user should click “OK”. You may now view and use your Excel format Medicaid eligible student list.