

MACSIS REPORTS AND FILES FOR BOARDS/PROVIDERS

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<http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml>

Encrypted File Name	Report/File Name/ Description	Files Contained in the Encrypted File	Created By	Distributed	Frequency	Purpose	Board/Provider Action
Notify/Outlier/Caution Reports							
XXX.DDMONYY.encrypted.outliers.board.nonmcd.zip 31M.23DEC07.encrypted.outliers.board.nonmcd.zip	Full Board Listing - Non-MCD	XXX.HIPAA.BD.CAUTION.NON.DDMONYY.PDF 76B.HIPAA.BD.CAUTION.NON.13MAR04.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims (by Board) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.outliers.mcd.zip 31M.23DEC07.encrypted.outliers.mcd.zip	Full Board Listing - MCD	XXX.HIPAA.BD.CAUTION.MCD.DDMONYY.PDF 76B.HIPAA.BD.CAUTION.MCD.13MAR04.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims (by Board) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.holds.board.mcd.zip 83B.23DEC07.encrypted.holds.board.mcd.zip	Full Board Listing - MCD Holds	XXX.HIPAA.BD.HOLD.MCD.DDMONYY.PDF 83B.HIPAA.BD.HOLD.MCD.22DEC07.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims by (Board and Provider) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.holds.board.nonmcd.zip 83B.23DEC07.encrypted.holds.board.nonmcd.zip	Full Board Listing - Non-MCD Holds	XXX.HIPAA.BD.HOLD.NON.DDMONYY.PDF 83B.HIPAA.BD.HOLD.NON.23DEC07.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims (by Board) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.outliers.provider.nonmcd.zip 31M.23DEC07.encrypted.outliers.provider.nonmcd.zip	Board by Provider - Non-MCD	XXX.UPI.HIPAA.PROV.CAUTION.NON.DDMONYY.PDF 31M.10157.HIPAA.PROV.CAUTION.NON.22DEC07.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims (by Board) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.outliers.provider.mcd.zip 31M.23DEC07.encrypted.outliers.provider.mcd.zip	Board by Provider - MCD	XXX.UPI.HIPAA.PROV.CAUTION.MCD.DDMONYY.PDF 31M.10123.HIPAA.PROV.CAUTION.MCD.22DEC07.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims (by Board) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.holds.provider.mcd.zip 83B.23DEC07.encrypted.holds.provider.mcd.zip	Board by Provider - MCD Holds	XXX.UPI.HIPAA.PROV.HOLD.MCD.DDMONYY.PDF 83B.6830.HIPAA.PROV.HOLD.MCD.22DEC07.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims by (Board and Provider) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
XXX.DDMONYY.encrypted.holds.provider.nonmcd.zip 83B.23DEC07.encrypted.holds.provider.nonmcd.zip	Board by Provider - Non-MCD Holds	XXX.UPI.HIPAA.PROV.HOLD.NON.DDMONYY.PDF 83B.6830.HIPAA.PROV.HOLD.NON.23DEC07.PDF	ODMH	/county/extracts	weekly - available Monday A.M.	Identify un-finalized claims (by Board) that have a large number of service units or the allowed amount is greater than \$400.	Boards should review claims with provider to determine if they have been erroneously billed.
Claims Extracts							
mondd.encrypted.claims.old.extract.XXX.zip dec22.encrypted.claims.old.extract.25B.zip	Old Claims Extract	mondd.claims.extract.old.format.XXX dec22.claims.extract.old.format.25B	ODMH	/county/extracts	weekly	Identify all claims for a Board no matter what the status.	Board determined.
mondd.encrypted.claims.new.extract.XXX.zip dec22.encrypted.claims.new.extract.25B.zip	New Claims Extract	mondd.claims.extract.new.format.XXX dec22.claims.extract.new.format.25B					
HIPAA EDI Reports							
	Overnight Reports	XXX.DDMONYYYY.OVERNIGHT.1.REPORT.PDF 09B.05MAR2007.OVERNIGHT.1.REPORT.PDF	ODMH	email /hipaa/reports	daily	Gives you the status as to whether file passed the Overnight Process which performs a "surface" examination.	If a file was rejected, notify provider.
	Overnight Reports	XXX.OVERNIGHT.1.DDMONYYYY.TXT 09B.OVERNIGHT.1.04AUG2007.TXT	ODMH	/hipaa/reports	daily	Copy of the email Overnight Report that was sent.	If a file was rejected, notify provider.
	Weekly Process Report	XXX.DDMONYYYY.WEEKLY.PROCESS.REPORT.1.PDF 09B.07AUG2007.WEEKLY.PROCESS.REPORT.1.PDF	ODMH	email	weekly	Notifies boards that the pre-processing of their claims files has been completed for the week.	Examine the summary reports that have been placed in your /county/<board>/hipaa/reports/ sub-directory
EDI Edit Reports							
XXX.encrypted.edit.zip 25B.encrypted.edit.zip							

Encrypted File Name	Report/File Name/ Description	Files Contained in the Encrypted File	Created By	Distributed	Frequency	Purpose	Board/Provider Action
	000 PREDI-J	PRXXX000.PRN PR25B000.PRN	Diamond	/hipaa/reports	one per batch	Provides time stamped detail of EDI functions performed on a batch.	Review and determine the overall error rate for a batch and decide whether to post.
	001 PREDI-D	PRXXX001.PRN PR25B001.PRN	Diamond	/hipaa/reports	one per batch	Provides a summary of each claim submitted within the batch.	None
	002 PREDI-C	PRXXX002.PRN PR25B002.PRN	Diamond	/hipaa/reports	one per batch	Notify provider so they may resubmit. Shows records that have missing or invalid data.	These claims are not posted to Diamond.
	003 PREDI-N	PRXXX003.PRN PR25B003.PRN	Diamond	/hipaa/reports	one per batch	Shows records that have errors that are non-critical.	Requires follow-up.
	004 PREDI-A	PRXXX004.PRN PR25B004.PRN	Diamond	/hipaa/reports	one per batch	Determine if valid authorization exists. Function is turned off.	None
	005 PREDI-P	PRXXX005.PRN PR25B005.PRN	Diamond	/hipaa/reports	one per batch	Identify logic used in pricing and adjudication.	Review pricing to make sure provider is billing correct amount, especially under-billing.
EDI Post Reports							
XXX.encrypted.post.zip 25B.encrypted.post.zip							
	101 POST Report	PRXXX101.PRN PR25B101.PRN	Diamond	/hipaa/reports	one per batch	Lists all claims with changes in pricing/adjudication between edit and post.	Research potential duplicates to avoid overpayment.
	102 OPLST	PRXXX102.ASC PR25B102.ASC	Diamond	/hipaa/reports	one per batch	Lists all accepted claims in the batch.	Review claims.
Payment Files							
ERA835-XXX.JULYY.ENCRP.ZIP ERA835-25B.35107.ENCRP.ZIP							
	RA (Remittance Advice) Each Provider	RA.XXXUPIN.JULYY RA.45B06755N.26207	ODADAS	/county/ra	weekly (Monday)	Agency payments in MACSIS in printable format.	Send to provider.
	RA (Remittance Advice) Each Board	RA.XXXXXN.JULYY RA.LICKBN.26207	ODADAS	/county/ra	weekly (Monday)	Board payments in MACSIS in printable format.	Review.
	RJ (Reject Report) Each Provider	RJ.XXXUPIN.JULYY RJ.45B06755N.26207	ODADAS	/county/ra	weekly (Monday)	Listing of all agency reversed/rejected claims .	Send to provider.
	RJ (Reject Report) Each Board	RJ.XXXXXN.JULYY RJ.LICKBN.26207	ODADAS	/county/ra	weekly (Monday)	Listing of all Board reversed/rejected claims .	Review.
	ERA (Electronic Remittance Advice) Each Provider	XXXUPI.JUL 25B01043.314	ODADAS	/county/ra	weekly (Monday)	Agency payments in MACSIS in an electronic format.	Send to provider.
	ERA (Electronic Remittance Advice)	XXXXX.JUL FRANB.314	ODADAS	/county/ra	weekly (Monday)	Board payments in MACSIS in an electronic format.	Individual Board usage.
	835 HIPAA Remittance File	NXXXOUPJULYY N87B001345.20407	ODADAS	/county/ra	weekly (Monday)	Agency payments in MACSIS in a HIPAA Compliant 835 file format.	Send to provider.
	835 Summary Report	SXXX835Summary.NJULYY S45B835Summary.N08207	ODADAS	/count/ra	weekly (Monday)	Summary file of all 835 payment files created for the current week for a board.	Individual Board usage.
	Mismatch Reports	MM..XXXXX.JULYY MM.WOODB.08907	ODADAS	/county/ra	weekly	Reports claims that have incorrect security codes based on the Company code.	If the claim has not been finalized, then two Boards should work together to determine who is responsible for the claim and make the necessary corrections.
Member Reports							
	Daily Membership Maintenance - Critical Errors (IEL045R1)		ODMH	mailed	weekly	Report ERR01 error(s): a) missing last name or first name, b) any part of DOB = zeroes or c) last name is less than 2 characters.	Make Diamond corrections and clear term reason and term date.
	Medicaid Number Check Digit Error Report (IEL010R1)		ODMH	mailed	weekly	Report Medicaid IDs that a) fail a check digit routine or b) are not in MedElig.	No specific board action is required. (May want to perform some analysis on the bad Med ID.)

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	Daily Membership Maintenance - Electronic Duplicates (IEL046R1)		ODMH	mailed	weekly	Report EDUP1,2,3 errors: EDUP1 - same SSN and Date of Birth; EDUP2 - same SSN and DOB off by one digit; EDUP3 - Same DOB and one SSN is all 5's.	Notify Providers of correct UCI or if correction was invalid, make Diamond corrections and clear term reason and term date.
	Members With More than One RMF Medicaid Number (IEL007R1)		ODMH	mailed	weekly	Identify Diamond members that have more than one Medicaid ID that matches the first 6 of last name, date of birth, gender and SSN to ODJFS, Medicaid information.	Identify the appropriate Medicaid ID and enter it in the member's Medicaid field, in Diamond. Note: These members didn't have a MCD ID in Diamond.
	Medicaid/Diamond Comparison Errors (IEL010R2)		ODMH	mailed	weekly	Identify Diamond members with MCD ID that have a DOB different than the DOB in ODJFS.	Research and change the Diamond DOB. Will have to have the MedElig override flag set, if the ODJFS DOB is incorrect.
	Duplicate Records by SSN - as of DDMMCCYY (IEL035R1)		ODMH	mailed	weekly	Identify Diamond members with the same SSN but a different date of birth.	Review corrections made by member maintenance staff.
	Potential Duplicates - as of ddmmyy, possibly known as Matchkey Report (IEL035R2)		ODMH	mailed	weekly	Identify Diamond members, in an extract, with the same a) first 8 of LN, b) first char of FN, c) DOB and d) gender.	Review corrections made by member maintenance staff.
	Potential Medicaid Eligible Clients (IEL038R1)		ODMH	mailed	weekly	Identify Diamond members, with no MCD ID that match the SSN on a MedElig record.	Review corrections made by member maintenance staff.
Member Extracts							
affil.DDMONYY.encrypted.xxx.zip affil.05nov07.encrypted.25B.zip	Affiliation Extracts	affil.mondd.encrypted.XXX affil.nov05.encrypted.25B	ODMH	/county/extracts	weekly	Identify all members with an affiliation record(s).	Board determined.
mcp.YYYYJJJ.encrypted.groupXXX.zip mcp.2008313.encrypted.group25B.zip	MCP Provider Extracts	mcpfile.groupXXX mcpfile.group25B	ODMH	/county/extracts	weekly (Monday A.M.)	Identify members'MCP provider numbers	Board determined.
mondd.encrypted.member.extract.xxx.zip dec22.encrypted.member.extract.25B.zip	Member Extracts	mondd.member.extract.XXX nov10.member.extract.25B	ODMH	/county/extracts	weekly	Identify all members and their eligibility by Board/Group/Consortium.	Board determined.
Retro-MCD Files							
medmondd.encrypted.groupxxx.zip mednov10.encrypted.group25b.zip							
		hmondd.ret.clm.groupXXX hjul20.ret.clm.group25b	ODMH	/county/extracts	bi-weekly	Claims that were processed as non-MCD but can now be processed as Medicaid - Member span is already fixed. (File in claims extract format)	If the claim has a PROCSTAT of "F" or "P" the Board reverses the original claim, splits the claim, refreshes header and re-bills as Medicaid. If the claim has a PROCSTAT of "U", refresh the header then re-price and re-adjudicate the claim. (This would mean additional funds for board if claims are payable by Medicaid).
		hmondd.ret.mbr.groupXXX hjul20.ret.mbr.group25b	ODMH	/county/extracts	bi-weekly	File containing members who need their eligibility fixed due to retroactive Medicaid eligibility.	Board makes corrections to member eligibility.
		hmondd.ret.clmfxmbr.groupXXX hjul20.ret.clmfxmbr.group25b	ODMH	/county/extracts	bi-weekly	Claims that were processed as non-MCD but can now be processed as Medicaid - Member retro file must be worked first (mondd.ret.mbr.group_bd). (File in claims extract format)	If the claim has a PROCSTAT of "F" or "P" the Board reverses the original claim, splits the claim, refreshes header and re-bills as Medicaid. If the claim has a PROCSTAT of "U", refresh the header then re-price and re-adjudicate the claim. (This would mean additional funds for board if claims are payable by Medicaid).

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Provider/Vendor/Misc. Files							
hipaa_pricing_MMDDYY.zip hipaa_pricing_100509.zip	Provider Contract/pricing list	hipaa_pricing_A_F_mmddyy.xls hipaa_pricing_A_F_041904.xls hipaa_pricing_G_Z_mmddyy.xls hipaa_pricing_G_Z_041904.xls	ODMH	/county/common	weekly	List all the open provider contracts and procedure pricing in Diamond on and after July 1st, 2000. Missing contracts and missing PROCP records are flagged to show deficiencies in the Diamond build.	Review for accuracy of rates in Diamond with rates submitted by provider.
hipaa_benef.zip	Board Benefit Packages/Benefit Rules	hipaa_grupd_benef.xls hipaa_benef_brule.xls	ODMH	/county/common	on request	hipaa_grupd_benef.xls - Lists all board plans and benefit packages. hipaa_benef_brule.xls - Lists all benefit rules associated and the associated benefit package.	Board determined.
	PROVF/VENDR Extracts	provf.and.vendr.xls	ODMH	/county/common	weekly	Whole-file extracts (in the form an Excel spreadsheet) of PROVF.DAT and VENDR.DAT.	Board determined.
Medicaid Files/Reports							
	Total To Be Withheld For FYXX Medicaid Reconciliation		ODADAS	mailed	bi-weekly	Only done during reconciliation process and are not received by all Boards; only those who have providers that owe money.	Board Information. This amount will also be shown on the ERA's and RA's.
	MACSIS ODHS Claim Reversal Report		ODMH	mailed	bi-weekly	Reports MH claims that were rejected (reversed) by ODJFS.	Check to see why they were reversed. Have providers make any corrections necessary to re-bill if applicable.
YYYYMMDD_aod_mrvsl.encrypted.XXX.zip 20090410_aod_mrvsl.encrypted.25B.zip	Repayment for AOD MCD Manual Reversals in MACSIS	YYYYMMDD_aod_det_mrvsl_XXX.rtf (detail version) 20090410_aod_det_mrvsl_25B.rtf YYYYMMDD_aod_sum_mrvsl_XXX.rtf (summary version) 20090410_aod_sum_mrvsl_25B.rtf	ODMH	/county/extracts	quarterly	Identifies claims that were paid by ODJFS and manually reversed by Boards, but FFP has not yet been recovered from Boards. (You will only get these reports if there is money to be paid back.)	Payment for reversals to be paid to ODADAS and will then be paid by ODADAS to ODJFS.
YYYYMMDD_mh_mrvsl.encrypted.XXX.zip 20090410_mh_mrvsl.encrypted.25B.zip	Repayment for MH MCD Manual Reversals in MACSIS	YYYYMMDD_mh_det_mrvsl_XXX.rtf (detail version) 20090410_mh_det_mrvsl_25B.rtf YYYYMMDD_mh_sum_mrvsl_XXX.rtf (summary version) 20090410_mh_sum_mrvsl_25B.rtf	ODMH	/county/extracts	quarterly Letter is sent from MH/AOD MCD when files are ready.	Identifies claims that were paid by ODJFS and manually reversed by Boards, but FFP has not yet been recovered from Boards. (You will only get these reports if there is money to be paid back.)	Payment for reversals to be paid to ODMH and will then be paid by ODMH to ODJFS.
XXX.DDMONY.encrypted.odmh.ohext.errors.zip 02B.10SEP09.encrypted.odmh.ohext.errors.zip	ODMH MACSIS OHEXT EXTRACT ERROR REPORT	XXX.ODMH.OHEXT.ERROR.REPORT.DDMONY.PDF 02B.ODMH.OHEXT.ERROR.REPORT.10SEP2009.PDF	ODMH	/count/extracts	bi-weekly	Reports records not extracted due to invalid and not found Medicaid ID's. Also reports claims with negative or zero net amounts.	Review and identify whether member was Medicaid eligible during date of service and if so, fix Medicaid ID on member record. Ignore negative or zero net amount messages.
XXXXX error MMDDYY.zip CUYAA error 110708.zip	Ohio Medicaid Extract Report Messages for Trans Log 0000xxx Department ODADAS	XXXXX error MMDDYY.pdf CUYAA error 110708.pdf	ODADAS	emailed	bi-weekly	Reports records not extracted due to invalid and not found Medicaid ID's. Also reports claims with negative or zero amounts.	Review and identify whether member was Medicaid eligible during date of service and if so, fix Medicaid ID on member record. Ignore negative or zero net amount messages.
VR_PRXXX351.DMMDDYY.ENCRP.ZIP VR_PR02B351.D012809.ENCRP.ZIP	ODMH Medicaid (ARA) Agency Reimbursement Accounting and Voucher File	PRXXX351.DMMDDYY.ASC (ARA) PR25B351.D080107.ASC VRXXX351.DMMDDYY.rtf (Voucher) VR02B351.D011409.rtf	ODMH	/county/extracts	bi-weekly	ARA lists all MH Medicaid reimbursement (FFP) for Board. Voucher is a summary of Medicaid reimbursement.	Reconcile with expected reimbursement and/or post to board system. The Voucher ties to the amount of the EFT payment.
PRXXX451.DMMDDYY.ASC.ENCRP.ZIP PR87B451.D063009.ASC.ENCRP.ZIP	ODADAS Medicaid (ARA) Agency Reimbursement Accounting for ODHS Pay Dates: mm/dd/ccyy- mm/dd/ccyy	PRXXX451.DMMDDYY.ASC PR25B451.D080107.ASC	ODADAS	/county/extracts	bi-weekly	Lists all AOD Medicaid reimbursement for Board.	Reconcile with expected reimbursement and/or post to board system.

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	ODADAS MACSIS Medicaid Reimbursement Report - Board Reimbursement Summary of Data to Human Services ODHS Pay Dates: mm/dd/ccyy-mm/dd/ccyy	Screen shot of the Voucher in PDF format is attached to an e-mail.	ODADAS	e-mailed	bi-weekly	Summary of Medicaid Reimbursement	Board information. Ties in to the amount of the EFT payment.
	ODADAS EFT		ODADAS	mailed	bi-weekly	Electronic Fund Transfer Notification	Post payment.
	ODMH EFT		ODMH	mailed	bi-weekly	Electronic Fund Transfer Notification	Post payment.
	OHEXT Ohio Medicaid Extract Claims Extraction Rpt to ODHS from ODMH Dept extract from (mm/dd/ccyy) to (mm/dd/ccyy) Transaction log 00000xxx		ODMH	MCD Coordinator	bi-weekly	Report of records extracted by company with department total.	Does not go to Board so there is no Board action.
	ODMH Transaction Log ODHS Summary Control Report		ODMH	MCD Coordinator	bi-weekly	Summary Report of records reversed and records posted to ODHS file.	Does not go to Board so there is no Board action.
Web Reports							
	APUPD	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODADAS	Web	weekly	Weekly APUPD run information by Company.	This report can be used to give the boards an approximate dollar amount as to what is owed to providers once they show up on remittance reports.
	Check Post	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODADAS	Web	weekly (Wednesday)	Weekly Check Post information by Company and UPI.	Boards can use this report as an estimate of what they will owe each provider. Providers can use this report as an estimate of what is owed them from the various boards.
	Claims Billing Report	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODADAS	Web	weekly (Monday)	Lists finalized claims by Company and UPI.	Boards can use this report to see how much money they have (should have) paid to a particular provider. Providers can use the report to see how much money they have (should have) been paid by a particular board.
	Claims Status Reports by Provider	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODMH	Web	monthly	Displays the number of claims and associated dollar amounts owed to a provider for claims received into MACSIS for a calendar month regardless of their current payment status.	This report can be used by a provider to ascertain the current status of claims received by MACSIS.
	Claims Remittance Tracking Report	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODMH	Web	monthly	Displays the number of claims and associated dollar amounts remitted to a Provider during a reporting period by the Board responsible for the remittance (finalized claims).	Used by Providers to identify which Boards owe them a remittance advice for a date range.
	Weekly Claims File Submissions by Board	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODMH	Web	weekly	Reports information about claim files submitted to the State for processing.	Used by boards to reconcile the files and claim lines that were submitted to the State and whether they were accepted or rejected.
	Weekly Claims File Submissions by Provider	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODMH	Web	weekly	Reports information about claim files submitted to the board for processing.	Used by providers to reconcile the files and claim lines that were submitted to their board and whether they were accepted or rejected.
	Provider (PROVF) and Vendor (VENDR) File Information	These reports are listed on the web at: http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/macsis/reports/index.shtml	ODMH	Web	weekly	MACSIS Provider Table (PROVF Keyword) Information sorted by MACSIS provider number and MACSIS short name and Vendor Table (VENDR Keyword) Information sorted by MACSIS name and MACSIS vendor number.	Informational.