



PALMETTO GBA®

A CELERIAN GROUP COMPANY

A CMS Medicare Administrative Contractor

Direct Data Entry (DDE) User's Guide Section 1: Introduction and Connectivity

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ACRONYMS

Acronym	Description
A	
ACS	Automated Correspondence System
ADR	Additional Development Request
ADJ	Adjustment
APC	Ambulatory Payment Classification
ASC	Ambulatory Surgical Center
ANSI	American National Standards Institute
B	
C	
CAH	Critical Access Hospital
CARC	Claim Adjustment Reason Code
CLIA	Clinical Laboratory Improvement Amendments of 1988
CMG	Case-mix Group
CMHC	Community Mental Health Center
CMN	Certificate of Medical Necessity
CMS	Centers for Medicare & Medicaid Services
CO	Contractual Obligation

Acronym	Description
CORF	Comprehensive Outpatient Rehabilitation Facility
CPT	Current Procedural Terminology
CWF	Common Working File
D	
DCN	Document Control Number
DDE	Direct Data Entry
DME	Durable Medical Equipment
DRG	Diagnosis Related Grouping
DSH	Disproportionate Share Hospital
E	
EDI	Electronic Data Interchange
EGHP	Employer Group Health Plan
EMC	Electronic Media Claims
ERA	Electronic Remittance Advice
ESRD	End Stage Renal Disease
F	
FDA	Food and Drug Administration
FI	Fiscal Intermediary

Acronym	Description
FISS	Fiscal Intermediary Standard System
FQHC	Federally Qualified Health Centers
G	
H	
HCPC	Healthcare Common Procedure Code
HCPCS	Healthcare Common Procedure Coding System
HHA	Home Health Agency
HHPPS	Home Health Prospective Payment System
HICN	Beneficiary's Medicare number (previously Health Insurance Claim Number)
HIPPS	Health Insurance Prospective Payment System (the coding system for home health claims)
HMO	Health Maintenance Organization
HPSA	Health Professional Shortage Area
HRR	Hospital Readmission Reduction
HSA	Health Service Area
HSP	Hospital Specific Payment
HSR	Hospital Specific Rate
I	
ICD	Internal Classification of Diseases
ICN	Internal Control Number
IDE	Investigational Device Exemption
IEQ	Initial Enrollment Questionnaire
IME	Indirect Medical Education
IPPS	Inpatient Prospective Payment System
IRF	Inpatient Rehabilitation Facility
IRS	Internal Revenue Service
J	
JJ	Jurisdiction J (Alabama, Georgia & Tennessee)
JM	Jurisdiction M (South Carolina, North Carolina, Virginia & West Virginia)
K	
L	
LGHP	Large Group Health Plan
LOS	Length of Stay
LTR	Lifetime Reserve days
M	
MA	Medicare Advantage Plan
MAC	Medicare Administrative Contractor
MCE	Medicare Code Editor
MR	Medical Review
MSA	Metropolitan Statistical Area
MSN	Medicare Summary Notice
MSP	Medicare Secondary Payer

Acronym	Description
N	
NDC	National Drug Code
NIF	Not in File
NPI	National Provider Identifier
O	
OCE	Outpatient Code Editor
OMB	Office of Management and Budget
OPM	Office of Personnel Management
OPPS	Outpatient Prospective Payment System
ORF	Outpatient Rehabilitation Facility
OSC	Occurrence Span Code
OTAF	Obligated To Accept in Full
OT	Occupational Therapy
P	
PC	Professional Component
PHS	Public Health Service
PPS	Prospective Payment System
PR	Patient Responsibility
PRO	Peer Review Organization
PS&R	Provider Statistical and Reimbursement Report
PT	Physical Therapy
Q	
R	
RA	Remittance Advice
RHC	Rural Health Clinic
RTP	Return To Provider
S	
SNF	Skilled Nursing Facility
SSA	Social Security Administration
SSI	Supplemental Security Income
SLP	Speech Language Pathology
SMSA	Standard Metropolitan Statistical Area
T	
TC	Technical Component
TOB	Type of Bill
U	
UB	Uniform Billing
UPC	Universal Product Code
UPIN	Unique Physician Identification Number
URC	Utilization Review Committee
V	
W	
X	
X-Ref	Cross-reference
Y	
Y2K	Year 2000
Z	

DIRECT DATA ENTRY (DDE) USER'S GUIDE BREAKDOWN

Refer to the following sections of the DDE User Guide for detailed information about using the DDE screens.

Section	Section Title	Descriptive Language
1	Introduction & Connectivity	This section introduces you to the Direct Data Entry (DDE) system, and provides a list of the most common acronyms as well navigational tips to include function keys, shortcuts, and common claim status and locations. This section also provides screen illustrations with instructions for signing on, the main menu display, signing off, and changing passwords.
2	Checking Beneficiary Eligibility	This section explains how to access beneficiary eligibility information via the Common Working File (CWF) screens, Health Insurance Query Access (HIQA) and Health Insurance Query for HHAs (HIQH), to verify and ensure correct information is submitted on your Medicare claim. Screen examples and field descriptors are also provided.
3	Inquiries (Main Menu Option 01)	This section provides screen illustrations and information about the inquiry options available in DDE, such as viewing inquiry screens to check the validity of diagnosis codes, revenue codes, and HCPCS codes, checking beneficiary/patient eligibility, check the status of claims, view Additional Development Requests (ADRs) letters, Medicare check history, and home health payment totals.
4	Claims & Attachments (Main Menu Option 02)	This section includes instructions, screen illustrations, and field descriptions on how to enter UB-04 claim information, including home health requests for anticipated payment (RAPs), hospice notice of elections (NOEs), and roster bill data entry.
5	Claims Correction (Main Menu Option 03)	This section provides instructions, screen illustrations, and field descriptions on how to correct claims that are in the Return to Provider (RTP) file, adjust or cancel finalized claims.
6	Online Reports (Main Menu Option 04)	This section provides information on certain provider-specific reports that are available through the DDE system.

This publication was current at the time it was published. Medicare policy may change so links to the source documents have been provided within the document for your reference.

This publication was prepared as a tool to assist providers and is not intended to grant rights or impose obligations. Although every reasonable effort has been made to assure the accuracy of the information within these pages, the ultimate responsibility for the correct submission of claims and response to any remittance advice lies with the provider of services.

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This publication is a general summary that explains certain aspects of the Medicare Program, but is not a legal document. The official Medicare Program provisions are contained in the relevant laws, regulations, and rulings.

Any changes or new information superseding the information in this guide are provided in the Medicare May 2018 Medicare Part A and HHH Bulletins/Advisories are available at www.PalmettoGBA.com/medicare.

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1.A. INTRODUCTION, ACRONYMS AND NAVIGATIONAL TIPS

DDE User's Guide Section 1.A. introduces you to the Direct Data Entry (DDE) system, and provides a list of the most common acronyms as well navigational tips to include function keys, shortcuts, and common status and locations. Section 1.B. provides screen illustrations with instructions for signing on and signing off of the DDE system.

The DDE system is available to providers as follows:

Monday to Friday	6:00 a.m. to 8:00 p.m. ET
Saturday	6:00 a.m. to 4:00 p.m. ET
Sunday	Not available

1.A.1. Introduction

Direct Data Entry (DDE) Online Remote Terminal Access was designed as an integral part of the Fiscal Intermediary Standard System (FISS). It gives Medicare providers direct access to information on their claims. The FISS is a menu driven system. The menu item chosen determines the system's functional capability. The Main Menu includes the following sub-menus: Inquiry, Claim Entry and Attachment, Claim Correction and Online reports. A DDE Medicare provider may perform the following functions electronically:

- Submit UB-04 claims
- Correct, adjust, and cancel claims
- Perform inquiries such as beneficiary/patient eligibility, claims history, revenue codes, diagnosis codes, etc.
- View certain online reports

1.A.2. Direct Data Entry (DDE) IDs

DDE User ID numbers are assigned to **individuals** at each facility who utilize the DDE system. Each user must have an individual DDE User ID. One ID can access multiple provider numbers. For security reasons, it is the provider's responsibility to notify the Palmetto GBA Provider Contact Center toll-free at 855-696-0705 (JM) or 877-567-7271 (JJ) when an employee who has been assigned a DDE ID leaves your company so that we can delete their ID.

1.A.3. Access and Security Measures

As part of our security recertification process, providers are required to certify user access annually. If this recertification information is not verified and returned, access will be terminated.

DDE User IDs will be revoked and deleted from the system after 30 days of being inactive. DDE IDs cannot be re-activated once this has occurred. Notification will not be sent out prior to deletion; therefore, DDE users should monitor their IDs closely to ensure they are not revoked. This issue can be avoided by signing on to DDE at least once every 29 days so that your ID remains active.

Providers whose IDs have been revoked will need to apply for a new ID through the EDI Enrollment packet or the Online DDE Enrollment Form located on the Palmetto GBA website. Normal processing time to receive a new DDE User ID is 15 business days.

To ensure the security of Medicare data, Palmetto GBA Systems Security is required to review the Violation Detail Report on a daily basis and notify individuals who may have entered their password incorrectly when attempting to access the EDC application. An email, which includes information regarding the violation, will be sent to the EDI contact on record for the facility. A response explaining why the errors occurred is required. The response is maintained as documentation for auditing purposes.

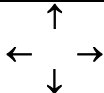
The email notification of the violation will be received from SYSTEMS.SECURITY with a palmettogba.com or a bcbssc.net domain name. Please respond to this email with your brief explanation in a timely manner to avoid termination of the listed DDE IDs. Please do not include any secure information in your response, such as your DDE password.

1.A.4. Provider Contact Center Numbers

Please check the *DDE User's Guides* for answers to your question before you contact Customer Support. The guidelines in the *DDE User's Guide* may answer your question and eliminate the need for you to contact a Customer Support Representative. For questions and information not covered in this guide please call the Provider Contact Center at 855-696-0705 (JM) or 877-567-7271 (JJ).

1.A.5. Keyboard

The following table provides an overview of common keyboard commands and their respective functions, and language related to navigating the DDE system.

Command/Term	Function
Cursor	The cursor is the flashing underline that identifies where you are (in what field you are located) on the screen.
	Use the keyboard arrow keys to move one character at a time in any direction within a field.
[TAB]	Press the tab key to advance to the next field.
[SHIFT]-[TAB]	Press and hold down the SHIFT key, while you press the TAB key to move back to the previous field. When your cursor is in the top field, this [SHIFT]-[TAB] will move your cursor to the bottom field.
n	In examples shown in this guide, an 'n' indicates a variable number from 0 to 9. One or more numbers may show as variables. For example, '72n' represents the numbers 720-729, while '72nnn' represents the numbers 72000-72999.
[CTRL]-[R]	If your screen freezes or locks up, press and hold down the Control key , while you press the letter ' R '. This will reset the screen. Note: Do not use this key combination if you see the clock symbol '(X)' displayed at the bottom of the screen (see next term).
(X) ⊕	One of these clock symbols displays at the bottom of the screen when the system is processing your request. Do not press any key until the symbol goes away and the blinking cursor returns.
[END]	Press the [END] key to clear, or delete, the value in a field. Do not use the spacebar to clear a field, as spaces may be recognized as a character in FISS

1.A.5.a. – Keyboard Function Keys

The keyboard function keys (also referred to as Program Function keys), are used to initiate the functions as specified in the following table. Your keyboard may identify these keys as [PF1], [PF2], [PF3], etc. or as [F1], [F2], [F3], etc.

Function Key	Function
[F1]	The FISS Help Function – Press [F1] to obtain a description of a reason code.
[F2]	Revenue Code Jump – From claim page 2 (MAP1712), press [F2] to jump to MAP171D for the first Revenue Code in error. Also, if your cursor is placed on a specific Revenue Code line on page 2, press [F2] to jump to the same Revenue Code on MAP171D.
[F3]	Exiting a Claim, Menu or Submenu – Depending on the location of the cursor in the system, press [F3] to exit a claim, menu or submenu and return to the previous screen.
[F4]	Exiting the System – Pressing [F4] exits the entire system or terminates the session. After pressing [F4], type 'CSSF LOGOFF' and then press [ENTER] to complete the exit process.
[F5]	Scrolling Backwards in a Screen Page – Not all information on a page may be seen on the screen at one time. To review hidden data from the same screen page, press [F5] to scroll backwards.
[F6]	Scrolling Forward in a Screen Page – To view hidden data from the same screen page, press [F6] to scroll forward.
[F7]	View Previous Page – Press [F7] to review a previous page or move backward one page at a time.
[F8]	Page Forward – Press [F8] to view the next page or to move forward one page at a time.
[F9]	Updating Data – Due to the system's design, a claim will not be accepted until either all front-end edits are corrected or the system is instructed to reject or return the claim. By pressing [F9], the system will return claim errors for correction and update and store data entered while in the entry or correction transaction mode.
[F10]	Scroll Left – Moves left to columns 1-80 within a claim record. This also allows access to the last page of beneficiary/patient history when in claim summary by beneficiary's Medicare Number.
[F11]	Scroll Right – Moves right to columns 81-132.

1.A.6. Status/Location Codes

The Status/Location (S/LOC) code for Medicare DDE screens indicates whether a particular claim is paid, suspended, rejected, returned for correction, etc. The six-character alphanumeric code is made up of a combination of four sub-codes: the claim status, processing type, location, and additional location information. Each S/LOC code is made up of two alpha characters followed by four numeric characters. For example, P B9997 is a status location code.

- The first position (position a) is the claim's current status. In this example 'P' indicates that the claim has been *paid* (or *partially paid*).
- The second position (position b) is the claim processing type. In the example, 'B' indicates *batch*.
- The third and fourth positions (positions cc) are the location of the claim in FISS. In the example, '99' indicates that the *session terminated*, which essentially means that the processing of the claim is completed.
- The last two positions (positions dd) are for additional location information. In the example, '97' indicates that the provider's claim is *final on-line*.

A provider may perform certain transactions when there is a specific S/LOC code on the claim. Other transactions cannot be done at all with certain S/LOC codes. The following table provides descriptions of the S/LOC code components.

FISS S/LOC Codes			
Status (Position a)	Processing Type (Position b)	Driver Location (Positions cc)	Location (Positions dd)
A = Good	M = Manual	01 = Status/Location	00 = Batch Process

FISS S/LOC Codes			
Status (Position a)	Processing Type (Position b)	Driver Location (Positions cc)	Location (Positions dd)
I = Inactive S = Suspense M = Manual Move P = Paid/Partial Pay R = Reject D = Deny T = RTP U = Ret to PRO	O = Off-line B = Batch	02 = Control 04 = UB-04 Data 05 = Consistency (I) 06 = Consistency (II) 15 = Administrative 25 = Duplicate 30 = Entitlement 35 = Lab/HPCPC 40 = ESRD 50 = Medical Policy 55 = Utilization 60 = ADR 63 = HHPPS Pricer 65 = PPS/Pricer 70 = Payment 75 = Post Pay 80 = MSP Primary 85 = MSP Secondary 90 = CWF 99 = Session Term AA-ZZ = User defined	01 = Common 02 = Adj. Orbit 10 = Inpatient 11 = Outpatient 12 = Special Claims 13 = Medical Review 14 = Program Integrity 16 = MSP 18 = Prod. QC 19 = System Research 21 = Waiver 65 = Non DDE Pacemaker 66 = DDE Pacemaker 67 = DDE Home Health 96 = Payment Floor 97 = Final Online 98 = Final Off-line 99 = Final Purged/ Awaiting CWF Response 22-64 = User defined 68-79 = User defined AA-ZZ = User defined

1.A.7. Document Control Number (DCN)

The DCN number is located on the remittance advice. This number must be used with adjustment/ cancellation bills.

Field Position	Field	Definition
1 - 1	Century Code	Code used to indicate the century in which the DCN was established. Valid values include: 1 = 1900-1999 2 = 2000 +
2 - 3	Year	The last two digits of the year during which the claim was entered. This is system generated.
4 - 6	Julian Date	Julian days corresponding to the calendar entry date of the claim. This is system generated.
7 - 10	Batch Sequence	Primary sequencing field, beginning with 0000 and ending with 9999. This is system generated with automated DCN assignment.
11 - 12	Claim Sequence	Secondary sequencing field, beginning with 00 and ending with 99.
13	Choices/Split	Site-specific field used on split bills. Valid values include: C = Medicare Choices Claim E = ESRD Managed Care V = VA Demo P = Encounter Claim 0 = When not used at a site

Field Position	Field	Definition
14	Origin	Code designating method of claim entry into the system. Valid values are: 0 = Unknown 1 = EMC/UB-04/CMS Format 2 = EMC Tape/UB-04/Other Format 3 = EMC Tape/Other ('Other' is defined as PRO Automated Adjustment for FISS) 4 = EMC Telecom/UB-04 (DDE Claim) 5 = EMC Telecom/Not UB-04 6 = Other EMC/UB-04 7 = Other EMC/Not UB-04 8 = UB-04 Hardcopy 9 = Other Hardcopy
15 - 17	Business Segment Identifier (BSI)	This is a three-position alphanumeric field. The first two characters are the jurisdiction code: For Fiscal Intermediary, Carrier and Regional Home Health Intermediary Workloads, the code is the Official United States Postal Service (USPS) state abbreviation for the state jurisdiction. For Durable Medical Equipment Regional Carriers, these two positions identify the DME region, for example Region A is RA. The next character identifies the type of Medicare FFS contract: Fiscal Intermediary (A), Carrier (B), Regional Home Health Intermediary (R), or Durable Medical Equipment Regional Carrier (D).
18 – 21	Home Health Split/Mass Adjustment/Future Area	Home Health Split: 'D' The DCN number has been altered due to a file fix to make the DCN unique 'H' In first position, system generated Trailer 15 or 16 adjustment 'P' In first position, system generated Post Pay activity 'R' In the first position, system generated Trailer 24 with a mask of 'O' for interrupted stay 'Q' Demo Code 62/63 and Qualifying Stay 'T' Unsolicited Adjustments 'U' Unsolicited Trailer 24 Responses 'Z' In first position, system generated for trailer '24' with mask 'N', adjustment for incorrect patient status on IPPS claims Mass Adjustment: User defined Future Area: positions 16 -21 reserved for future use
22-23	N/A	Reserved for future use

1.B. CONNECTIVITY INSTRUCTIONS AND MAIN MENU

Palmetto GBA's DDE system includes the **Jurisdiction M Region** (JM MAC FISS PROD). The JM MAC FISS PROD processing region consists of the following states:

Part A	Home Health / Hospice (HHH)		
North Carolina South Carolina Virginia West Virginia	Alabama Arkansas Florida Georgia Illinois	Indiana Kentucky Louisiana Mississippi New Mexico	North Carolina Ohio Oklahoma South Carolina Tennessee Texas

The JJ MAC processing region consists of the following states:

Part A
Alabama Georgia Tennessee

1.B.1. Connection Procedures

Once you have a connection established using the instructions provided by your Network Service Vendor, the Product Selection Screen will display.

Sign-on

- A. At the **PRODUCT SELECTION** screen, your cursor will be positioned at the arrow (====>) in the lower left hand corner. Select the number corresponding to **A3PTPX** and press **[ENTER]**.
- B. The TPX Sign-On screen (Figure 1) will display.

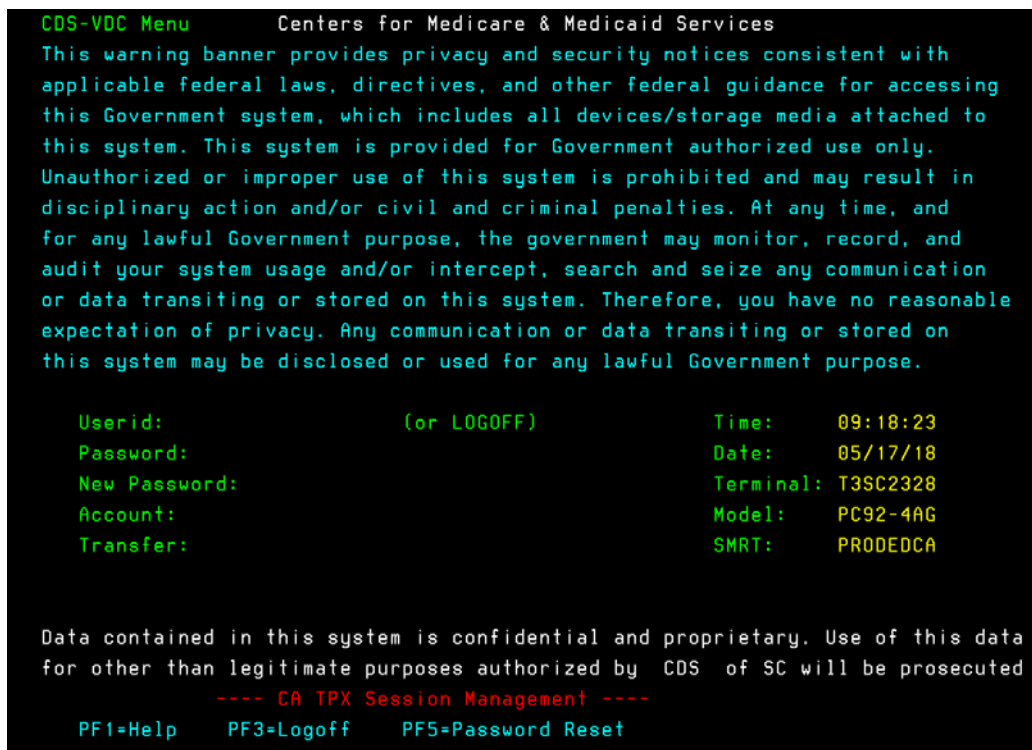


Figure 1 – CICS Sign On Screen

1. At the USERID prompt, type your DDE User ID and press **[TAB]**. DDE User ID numbers are assigned to individuals at each facility who utilize the DDE system.
2. At the PASSWORD prompt, type in your password and then press **[ENTER]**.

As you enter your default password, nothing will show on the screen but you will see the cursor move to the right. After you press **[ENTER]**, the system will prompt you to change the password. Follow the directions noted on the screen regarding password requirements when changing your password.

Note: Your password will expire every 30 days and you must make at least 12 password changes before you can repeat a previously used password. If you receive a notice that your password has **expired**, please follow the directions noted on the screen when changing your password. If you receive a notice that your password has been **revoked**, please refer to the Changing Passwords section. If you have not used DDE for several months, it may be automatically revoked and please contact the Palmetto GBA EDI Technology Support Center toll-free at 855-696-0705 (JM) or 877-567-7271 (JJ) for assistance.

After you correctly enter your User ID and password, a TPX Menu Screen similar to those shown in Figures 2a (JM) and 2b (JJ) will display.

```

TPX MENU FOR
PanelId - TEN0041
Terminal - T35C1729
Model - PC92-4AG
System - A3PTPX

Cmdkey=PF12/24      Jump=PA1      Menu=PA2
Print=NONE          Cmdchar=/

  Sessid      Sesskey      Session Description      Status
- FISPB2-1    PF           JM HAC FISS PROD - VA/HV
- FISPB2-2    PF           JM HAC FISS PROD - VA/HV
- FISUB2-1    PF           JM HAC FISS UAT - VA/HV
- FISUB2-2    PF           JM HAC FISS UAT - VA/HV
- FSSPNC      PF           JM HAC FISS PROD - N. Carolina
- FSSPNC2     PF           JM HAC FISS PROD - N. Carolina
- FSSUNC      PF           JM HAC FISS UAT - N. Carolina
- FSSUNC2     PF           JM HAC FISS UAT - N. Carolina
- FSSP5C      PF           JM HAC FISS PROD - SC/HHH
- FSSP5C2     PF           JM HAC FISS PROD - SC/HHH
- FSSUSC      PF           JM HAC FISS UAT - SC/HHH
- FSSUSC2     PF           JM HAC FISS UAT - SC/HHH
- TPXADMIN    PF           TPX Administration
- TSOEDCA     PF           TSO EDCA
- TSO6        PF           TSO SYS6
- VIEWVH1     PF           NON-Base JCL
- VIEWVH11    PF           CR-VIEW REPORTS

Command ==>
PF1=Help  PF7/19=Up  PF8/20=Down  PF10/22=Left  PF11/23=Right  H =Cmd Help

```

Figure 2a – JM TPX Menu Screen

```

TPX MENU FOR
Cmdkey=PF12/24      Jump=PA1      Menu=PA2      PanelId - TEN0041
PrInt=NONE          Cmdchar=^/      Terminal - T35C2090
Model - PC92-4AG
System - A3PTPX

  Sessid      Sesskey      Session Description      Status
- FISPA1-1    PF          JJ GA-A Prod
- FISPA1-2    PF          JJ GA-A Prod
- FISPA2-1    PF          JJ TN-A Prod
- FISPA2-2    PF          JJ TN-A Prod
- FISPA3-1    PF          JJ AL-A Prod
- FISPA3-2    PF          JJ AL-A Prod
- FISUA1-1    PF          JJ GA-A UAT
- FISUA1-2    PF          JJ GA-A UAT
- FISUA2-1    PF          JJ TN-A UAT
- FISUA2-2    PF          JJ TN-A UAT
- FISUA3-1    PF          JJ AL-A UAT
- FISUA3-2    PF          JJ AL-A UAT
- TPXADMIN    PF          TPX Administration
- TSDDCR      PF          TSD EDCR
- VIEWVH1     PF          NON-Base JCL
- VIEWVH10    PF          JJ CA-View Reports

Command ****>
PF1=Help  PF7/19=Up  PFA/20=Down  PF10/22=Left  PF11/23=Right  H =Cmd Help

```

Figure 2b – JJ TPX Menu Screen

- **North Carolina providers** should select the *JM MAC FISS Prod – N. Carolina* session from the menu by entering S on the green line. Then press [ENTER].
- **South Carolina Part A and HHH providers** should select the *JM MAC FISS PROD – SC/HHH* session from the menu by entering S on the green line. Then press [ENTER].
- **Virginia and West Virginia Part A providers** should select the *JM MAC FISS PROD – VA/WV* session from the menu by entering S on the green line. Then press [ENTER].
- **Alabama providers** should select the **JJ AL-A Prod** session from the menu by entering S on the green line. Then press [ENTER].
- **Georgia providers** should select the **JJ GA-A Prod** session from the menu by entering S on the green line. Then press [ENTER].
- **Tennessee providers** should select the **JJ TN-A Prod** session from the menu by entering S on the green line. Then press [ENTER].

1.B.2. Final Connectivity Instructions

Instructions listed below are for all providers:

1. Type **FSS0** (F, S, S, zero) directly over the screen message and press [ENTER].
Note: You must type a *numeric zero* when typing in FSS0. If you accidentally type an alpha 'O', the system will give you an error message.
2. The Main Menu (Figure 3) will display. Each menu option from the Main Menu displays a sub-menu for that option, which are Inquiries (01), Claims/Attachments (02), Claims Correction (03) sub-menus, and Online Reports (04) are explained in separate *DDE Guide* sections.

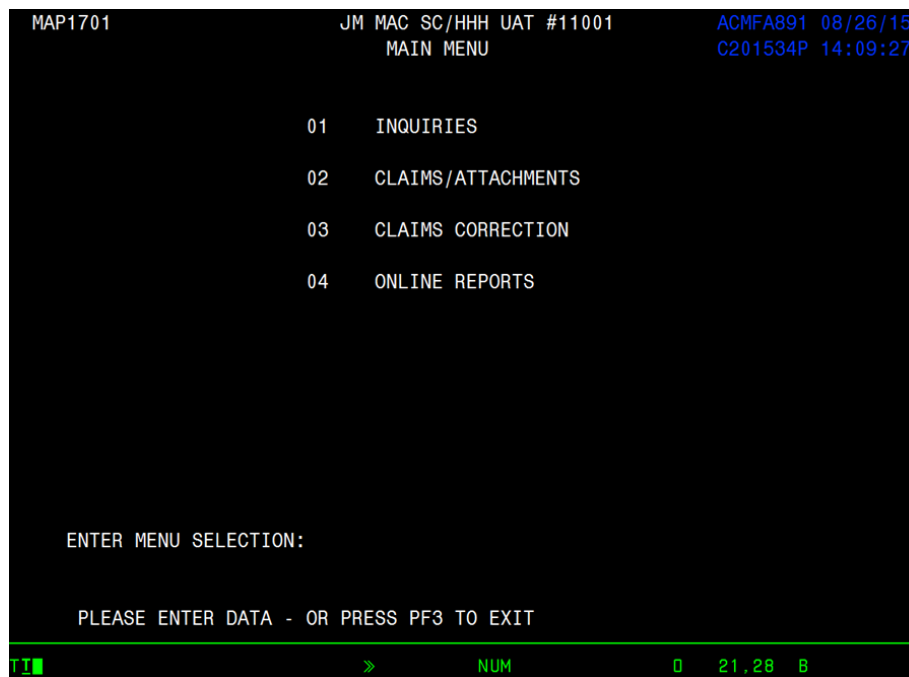


Figure 3 – The Main Menu

1.B.3. Sign-Off Procedures

To end communication between your terminal and Palmetto GBA's host system (FISS), you must sign off. The terminal will sign off automatically when the network is disabled.

To help the computer function at optimum speed, always sign off completely and correctly when you are not using the system.

1. Press **[F3]** from the Main Menu.
2. The screen will display **SESSION SUCCESSFULLY TERMINATED**.

Sign-Off

- A. Type '**CESF LOGOFF**' over the message and press **[ENTER]**.
 - B. Type **/K** to sign-off from the TPX Menu Screen and press **[ENTER]**.
3. Pull down the **Terminal** menu from the toolbar and select **Disconnect**.
 4. Pull down the **Terminal** menu again and select **Close**.

1.B.4. Changing Passwords

Your password will expire every thirty days. On the day after it expires, when you type your password, the system will automatically prompt you to change your password. Rules for passwords will display on the system when you change your password.

As a security mechanism, a password utility feature has been provided so that you will be able to reset a 'revoked' password. Instructions for resetting your password are outlined below. Please do not call the Palmetto GBA Provider Contact Center to have your password reset. As a security measure, *a password can only be reset by the user using the process outlined below once within a 24-hour period.*

To change your password, follow these steps:

1. When you log on for the first time or after your password has expired, you will enter your user ID and your existing (or default) password. After pressing [ENTER], the system will display the message, “Your password has expired. Please enter your new password.” The screen will now contain one ‘New Password’ field.
2. Your cursor will be located in the ‘New Password’ field. Type in your new password. Nothing will show on the screen as you type but you will see the cursor move to the right. After you have finished typing, press [ENTER].
3. Verify your new password by typing it identically again in the same ‘New Password’ field and press [ENTER].
4. The system displays the TPX Menu Screen. Follow via the instructions in Section 2 – Connection Instructions above to complete your sign-on.
Note: If you receive a notice that your password has been revoked, a password utility has been provided for your own password resets. Follow the instructions listed below:
 - a. Proceed to the CDS EDC TPX session screen.
 - b. Press [F5] as shown on the menu at the bottom of screen. The Self-Service Password Reset screen appears and prompts you to key in a valid RACF ID and PIN.
 - c. Press [ENTER].
 - d. A message will appear at the bottom of screen providing the new temporary password. Press [F12] to return to the TPX sign on screen.
Once returned to the TPX session sign-on screen, you can now sign-on using the new temporary password.
5. The following must be done to change your password:
 - A password can only be reset by the user once in a 24-hour period. You must wait the full 24 hours.
 - The password length must be eight (8) characters.
 - Passwords must begin with a letter and must have at least one (1) upper case, one (1) lower case, one (1) number and one (1) of these special characters @, #, or \$.
 - At least four (4) characters from the previous password must be changed.
 - Passwords may not be reused for at least 12 iterations.
 - The user’s name cannot be contained in the password.
 - Only three (3) consecutive characters of the user’s name allowed.
 - The RACF ID User ID cannot be contained in the password.
 - Only three (3) consecutive characters of the user ID are allowed.
 - No contiguous repeating of characters is allowed. This is not case sensitive (e.g., “Ppeg42c#” would not be allowed, however, “Pge42c#” would be allowed).
 - The following character strings are not allowed:

APPL	APR	AUG
ASDF	BASIC	CADAM DEC
DEMO	FEB	FOCUS
GAME	IBM	JAN
JUL	JUN	LOG
MAR	MAY	NET
NEW	NOV	OCT
PASS	ROS	SEP
SIGN	SYS	TEST
TSO	VALID	VTAM

XXX	1234	
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Please note that DDE User ID numbers are assigned to **individuals** at each facility who utilize the DDE system. Each user must have an individual DDE User ID. One ID can access multiple provider numbers. For security reasons, it is the provider's responsibility to notify the Palmetto GBA Provider Contact Center toll-free at 855-696-0705 (JM) or 877-567-7271 (JJ) when an employee who has been assigned a DDE ID leaves your company so that we can delete their ID.