## 2015 Oregon CVR Rejection/Error Messages

<table>
<thead>
<tr>
<th>Section of CVR</th>
<th>Error #</th>
<th>Error Message</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL</td>
<td>100</td>
<td>REJECT: VERSION NUMBER INCORRECT</td>
</tr>
<tr>
<td>Top</td>
<td>102</td>
<td>REJECT: CCARE NUMBER IS MISSING OR INVALID</td>
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<tr>
<td></td>
<td>103</td>
<td>REJECT: CCARE NUMBER &amp; DOB DON'T MATCH</td>
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<td>104</td>
<td>REJECT: CCARE ELIGIBILITY HAS EXPIRED</td>
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<td>105</td>
<td>REJECT: SSN INVALID ON NEW ENROLLMENT/ELIGIBILITY</td>
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<td>106</td>
<td>REJECT: CCARE NUMBER NOT FOUND IN OREGON MASTER</td>
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<tr>
<td>1-7</td>
<td>100</td>
<td>REJECT: SERVICE SITE NUMBER INVALID</td>
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<td>8</td>
<td>201</td>
<td>REJECT: PATIENT NUMBER MISSING/INVALID</td>
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<td>301</td>
<td>REJECT: VISIT DATE MISSING OR INVALID</td>
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<td></td>
<td>302</td>
<td>REJECT: TWO VISITS IN SAME DAY</td>
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<td>303</td>
<td>REJECT: CCARE VISIT GREATER THAN 12 MONTHS</td>
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<td>351</td>
<td>WARNING: CCARE VISIT &gt; 12 MONTHS, DATA ONLY</td>
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<td>401</td>
<td>REJECT: DATE OF BIRTH MISSING/INVALID</td>
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<td>402</td>
<td>REJECT: FEMALE CLIENT'S AGE OVER 60 YEARS</td>
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<td>403</td>
<td>REJECT: DOB DOES NOT MATCH RGX MASTER RECORD</td>
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<td>404</td>
<td>REJECT: DOB DOES NOT MATCH OREGON MASTER RECORD</td>
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<td>405</td>
<td>REJECT: CLIENT's AGE IS LESS THAN 10 YEARS</td>
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<td>501</td>
<td>REJECT: GENDER CODE REQUIRED FOR FIRST VISIT</td>
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<td>502</td>
<td>REJECT: GENDER CODE INVALID</td>
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<td>503</td>
<td>REJECT: GENDER CODE DOES NOT MATCH MASTER RECORD</td>
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<td>601</td>
<td>REJECT: RACE CODE REQUIRED FOR FIRST VISIT</td>
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<td>602</td>
<td>REJECT: RACE FIELD CONTAINS INVALID DATA</td>
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<td>603</td>
<td>REJECT: ETHNICITY FIELD IS BLANK/INVALID</td>
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<td>701</td>
<td>REJECT: ADDITIONAL DEMOGRAPHICS INVALID</td>
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<td>801</td>
<td>REJECT: ZIP CODE REQUIRED F/FIRST VISIT</td>
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<td>802</td>
<td>REJECT: ZIP CODE LESS THAN 02000</td>
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<td>702</td>
<td>REJECT: LAST CHLAMYDIA &lt; 25 IS MISSING/INVALID</td>
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<td>703</td>
<td>REJECT: LAST CHLAMYDIA TEST DATE IS INVALID</td>
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<td>704</td>
<td>LAST PAP &gt; 20 IS MISSING/INVALID</td>
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<td>705</td>
<td>LAST PAP TEST DATE IS INVALID</td>
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<td>Section of CVR</td>
<td>Error #</td>
<td>Error Message</td>
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<td>9</td>
<td>901</td>
<td>REJECT: SOURCE OF PAYMENT MISSING/INVALID</td>
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<td>902</td>
<td>REJECT: CCARE SOP CCARE/AGE IS &gt;20 BUT SSN BLANK</td>
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<td>903</td>
<td>REJECT: CCARE BUT POVERTY OVER 185%</td>
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<td>904</td>
<td>REJECT: SOP 2 DUPS A PRIOR '2' OR '8' BILLING</td>
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<td>905</td>
<td>REJECT: SOP '8/10' DUPS A PRIOR '8/10' BILLING</td>
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<td>906</td>
<td>REJECT: SOP '8/10' CODED/ELIG. FOR MEDICAID, SOP 2</td>
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<td>907</td>
<td>REJECT: NAME REQUIRED FOR SOP 8 OR 10</td>
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<td>909</td>
<td>REJECT: SSN REQUIRED FOR SOURCE OF PAY 8 OR 10</td>
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<td>919</td>
<td>REJECT: SOP 11 IS INVALID FOR FEMALES</td>
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<td>920</td>
<td>REJECT: SOP 11 Requires MED SVC 20 OR COUNS SVC 3</td>
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<td>930</td>
<td>REJECT: SOP 11 AND POV 8 REQUIRE MED SVC 18</td>
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<tr>
<td>9A</td>
<td>912</td>
<td>REJECT: DIAGNOSIS CODE INVALID</td>
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<tr>
<td>9B</td>
<td>913</td>
<td>REJECT: SOP 8 OR 10, 9B IS BLANK/INVALID</td>
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<td></td>
<td>914</td>
<td>REJECT: INS. BILLED(9B) IS YES BUT 17A IS BLANK</td>
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<tr>
<td>9C</td>
<td>915</td>
<td>REJECT: 9C IS 1, 17A MUST BE COMPLETED W/NC</td>
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<tr>
<td>18</td>
<td>1801</td>
<td>REJECT: CLIENT INS. STATUS IS MISSING/INVALID</td>
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<tr>
<td>10</td>
<td>1001</td>
<td>REJECT: INCOME/FAMILY SIZE REQUIRED FOR 1st VISIT</td>
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<td></td>
<td>1002</td>
<td>REJECT: UNK. INCOME NOT ALLOWED FOR SOP '8'</td>
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<td>1004</td>
<td>REJECT: INVALID INCOME, DECIMAL IN FIELD</td>
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<td></td>
<td>1051</td>
<td>WARNING: INCOME EXCEEDS $10,000 MONTHLY</td>
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<td>1052</td>
<td>WARNING: FAMILY SIZE GREATER THAN 15</td>
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<tr>
<td>11</td>
<td>1101</td>
<td>REJECT: HLTH INS. ENROLLMENT FIELD IS INVALID</td>
</tr>
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</table>
## 2015 Oregon CVR Rejection/Error Messages

### D. Exhibit 8

<table>
<thead>
<tr>
<th>Section of CVR</th>
<th>Error #</th>
<th>Error Message</th>
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</thead>
<tbody>
<tr>
<td><strong>12</strong> PURPOSE OF VISIT (Check One)</td>
<td>1201</td>
<td>REJECT: VISIT ALREADY ON FILE</td>
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<tr>
<td></td>
<td>1204</td>
<td>REJECT: PURPOSE OF VISIT MISSING OR INVALID</td>
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<tr>
<td></td>
<td>1207</td>
<td>REJECT: SUPPLY ONLY VISIT; NEW CLIENT</td>
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<tr>
<td></td>
<td>1210</td>
<td>REJECT: PURPOSE OF VISIT 1,2,5, INVALID FOR MALE</td>
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<td>1211</td>
<td>REJECT: POV 5 NOT BILLABLE FOR CCARE SOP</td>
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<td>1212</td>
<td>REJECT: POV 9 IS NOT BILLABLE FOR CCARESOP 10</td>
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<tr>
<td></td>
<td>1213</td>
<td>REJECT: MALE W/ SOP 8, TOV 4, V252 &amp; 1 TIME BYE</td>
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<tr>
<td><strong>12A</strong></td>
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<td></td>
</tr>
<tr>
<td><strong>13A. MEDICAL SERVICES (Check all Applicable)</strong> Exam &amp; Lab Services</td>
<td>1301</td>
<td>REJECT: MEDICAL SERVICES INVALID</td>
</tr>
<tr>
<td></td>
<td>1302</td>
<td>REJECT: MALE CLIENT HAS FEMALE SERVICES CODED</td>
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<tr>
<td></td>
<td>1303</td>
<td>REJECT: MEDICAL SERVICES 20 AND 35 ON SAME VISIT</td>
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<tr>
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<td>1305</td>
<td>REJECT: FEMALE CLIENT HAS MALE SERVICES</td>
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<tr>
<td></td>
<td>1306</td>
<td>REJECT: TOV 1,2,OR 3 BUT NO MEDICAL SERVICES</td>
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<tr>
<td></td>
<td>1307</td>
<td>REJECT: FEMALE MEDICAL SVC 20 WITH DIAG V252</td>
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<td>1308</td>
<td>REJECT: MALE MEDICAL SVC 20 WITH DIAG NOT = V252</td>
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<td></td>
<td>1309</td>
<td>REJECT: STERILIZATION NOT ALLOWED WITH 1 TIME BYE</td>
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<td>1310</td>
<td>REJECT: MEDICAL SVC 20 AND AGE IS LT 21</td>
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<tr>
<td><strong>13A. CONT. MEDICAL SERVICES (Check all Applicable)</strong> STD Related Services</td>
<td>1301</td>
<td>REJECT: MEDICAL SERVICES INVALID</td>
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<tr>
<td></td>
<td>1302</td>
<td>REJECT: MALE CLIENT HAS FEMALE SERVICES CODED</td>
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<tr>
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<td>1303</td>
<td>REJECT: MEDICAL SERVICES 20 AND 35 ON SAME VISIT</td>
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<td>1306</td>
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<td>REJECT: STERILIZATION NOT ALLOWED WITH 1 TIME BYE</td>
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<td>1310</td>
<td>REJECT: MEDICAL SVC 20 AND AGE IS LT 21</td>
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<tr>
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<td>13A. COUNSELING EDUCATION PROVIDED (Check all Applicable)</td>
<td>1401</td>
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<tr>
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<td>1402</td>
<td>REJECT: COUNSELING SERVICES 03, 04, 07/SAME VISIT</td>
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<td></td>
<td>1403</td>
<td>REJECT: TOV 4 BUT NO COUNSELING SERVICES</td>
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<tr>
<td></td>
<td>1404</td>
<td>REJECT: FEMALE CLIENT HAS MALE COUNSELING SVC</td>
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<tr>
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<td>Error Message</td>
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<td>19 1901 REJECT: PREG INTENTION SCREENING IS INVALID</td>
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<tr>
<td>13B 14B PROVIDER OF MEDICAL SERVICES/COUNSELING/EDUCATION SERVICES (Mark all that Apply)</td>
<td>No rejections.</td>
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<tr>
<td>15A 15B PRIMARY CONTRACEPTIVE METHOD (Complete before and after blocks) BEFORE VISIT AFTER VISIT</td>
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<tr>
<td>5A HIGHLY EFFECTIVE MODERATELY EFFECTIVE LESS EFFECTIVE</td>
<td>06 - Male Condom 19 - Female Condom 21 - Contraceptive Sponge 20 - Withdrawal 08 - NFP/FAM 07 - Spermicide 09 - Other Method 13 - Abstinence 10 - None</td>
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<tr>
<td>01 - Female Sterilization 02 - Oral Contraceptives 17 - Hormonal Patch 18 - Vaginal Ring 04 - Diaphragm/Cap</td>
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<tr>
<td>15B IF NONE AT THE END OF THIS VISIT, GIVE REASON. Pregnant 1 - Planned 8 - Unplanned 3 - Seeking Pregnancy 6 - Not Sexually Active 7 - Other</td>
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<tr>
<td>16 REFERRAL INFORMATION (Check all applicable) 02 - High Risk Pregnancy 15 - Adoption 03 - Abortion 01 - Prenatal 16 - Breast Evaluation 12 - Mammography or U.S.</td>
<td>1601 REJECT: REFERRAL SERVICES 05 AND 06 ON SAME VISIT 1602 REJECT: REFERRAL SERVICES 01, 02, 03 FEMALE ONLY</td>
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<tr>
<td>1601 - Sterilization 06 - Infertility 07 - NFP/FAM 04 - STD 17 - Colposcopy 06 - Other Medical 10 - Social Services 09 - Nutrition 13 - Substance Abuse 14 - Abuse/Violence 11 - None</td>
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<tr>
<td>Section of CVR</td>
<td>Error #</td>
<td>Error Message</td>
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</tr>
<tr>
<td>17A 17</td>
<td>1701</td>
<td>REJECT: BILLING PROCEDURES MISSING/INVALID</td>
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<tr>
<td>17</td>
<td>1703</td>
<td>REJECT: ONE ANNUAL VISIT (01) EVERY ELEVEN MONTHS</td>
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<tr>
<td>17A 17</td>
<td>1704</td>
<td>REJECT: QUANTITY CODED BUT SUPPLY CODE IS BLANK</td>
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<td>17A 17</td>
<td>1705</td>
<td>REJECT: SUPPLY CODED BUT SUPPLY QUANTITY BLANK</td>
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<tr>
<td>17A 17</td>
<td>1706</td>
<td>REJECT: INVALID CONTRACEPTIVE SUPPLY CODE</td>
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<td>17A 17</td>
<td>1707</td>
<td>REJECT: SUPPLY QUANTITY EXCEEDS THE LIMIT</td>
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<td>17A 17</td>
<td>1708</td>
<td>REJECT: EXPLANATION CODE INVALID</td>
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<td>17A 17</td>
<td>1709</td>
<td>REJECT: QUANTITY CODED BUT UNIT PRICE BLANK</td>
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<td>17A 17</td>
<td>1710</td>
<td>REJECT: UNIT PRICE COMPLETED BUT QTY NOT CODED</td>
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<td>17A 17</td>
<td>1711</td>
<td>REJECT: UNIT PRICE EXCEEDED</td>
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<tr>
<td>17A 17</td>
<td>1712</td>
<td>REJECT: SOP 10 WITH NO SUPPLIES CODED</td>
</tr>
<tr>
<td>17A 17</td>
<td>1714</td>
<td>REJECT: SUPPLIES (09 OR 13), AFTER 1/1/2006</td>
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<tr>
<td>17A 17</td>
<td>1716</td>
<td>REJECT: PVT INS FROM WEB IS YES, BUT 17A IS BLANK</td>
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</tbody>
</table>