

# **FIVS-DUA Export Interface**

## **TD 5195 and 5203**

Functional Specifications Document

(FSD)

**Date: 7/28/2021**

**Version 3.1**

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## 1.0 Document Control

Version	Details of Change	Changed Sections	Author	Date
1.0	Initiate Document		Karen O'Donnell	10/01/20
1.5	Update File Layout and Business Rules		Karen O'Donnell	10/06/20
2.0	Update Business Rules		Karen O'Donnell	10/07/20
2.5	Update File Layout and move Business Rules for Updates to TD 5203 FSD		Karen O'Donnell	10/08/20
3.0	Update File Layout and update business rules		Karen O'Donnell	10/26/20
4.0	Update sections related to 5203	Update Filename, Title, 2.0 and 4.0	Thomas Schrama	7/28/2021

## 2.0 Introduction

Data from UI Online for claimants that currently have an identity issue set up for their claim, is sent to the FIVS system for review and identifying fraud trends.

The file is produced and moved automatically to the export folder on the SMB then transferred to the FTP folder.

## 3.0 Export File to FIVS

### 3.1.1 File Layout – Export to FIVS

Position	Field	Data Type	Description	Field Notes
1	Claimant ID	String	Unique identifier for the claimant.	Required. Cannot be blank.
2	Claim ID	String	Unique identifier for the claim associated with the claimant.	Required. Cannot be blank.
3	Claim Filed Date	Date/Time	Date/time the initial claim was submitted.	Required. Cannot be blank.
4	ID Type	String	Type of ID for the Claimant (SSN, ITIN, etc.)	Required. Cannot be blank.
5	ID	String	ID for the Claimant	Required. Cannot be blank.
6	Street 1 (Residential)	String	Address used at the time of filing (or updated). If both a residential/ mailing address are provided during initial registration, put residential address in this field.	Required. Cannot be blank.
7	Street 2 (Residential)	String	Address used at the time of filing (or updated). If both a residential/ mailing address are provided during initial registration, put residential address in this	Optional. Leave blank if no data available.

			field.	
8	City (Residential)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put residential address in this field.	Required. Cannot be blank.
9	State (Residential)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put residential address in this field.	Required. Cannot be blank.
10	Zip (Residential)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put residential address in this field.	Required. Cannot be blank.
11	Street 1 (Mailing)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put mailing address in this field.	Optional. Leave blank if no data available.
12	Street 2 (Mailing)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put mailing address in this field.	Optional. Leave blank if no data available.
13	City (Mailing)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put mailing address in this field.	Optional. Leave blank if no data available.
14	State (Mailing)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put mailing address in this field.	Optional. Leave blank if no data available.
15	Zip (Mailing)	String	Address used at the time of filing (or updated). If both a residential/mailling address are provided during initial registration, put mailing address in this field.	Optional. Leave blank if no data available.
16	First Name	String	Legal Name	Optional. Leave blank if no data available.
17	Middle Initial	String	Legal Name	Optional. Leave blank if no data available.
18	Last Name	String	Legal Name	Required. Cannot be blank.
19	Date Of Birth	Date	Date of Birth of the Claimant	Optional. Leave blank if no data available.
20	IP Address	String	IP Address used during initial claim filing (or upon subsequent login). If not available for initial claim, IP address first used to log onto UI Online	Optional. Leave blank if no data available.
21	Routing Number	String	Bank routing number provided with initial filing (or updated)	Optional. Leave blank if no data available.
22	Bank Account Number	String	Bank account number provided with initial filing (or updated)	Optional. Leave blank if no data available.
23	Phone Number	String	Phone number provided with initial claim filing. If more than one phone number is collected, use cell phone vs. home phone. Format: #####	Optional. Leave blank if no data available.
24	Can Contact By SMS	Boolean	Flag indicating that the claimant has approved contacting them via SMS with the provided phone number.	Optional. Leave blank if no data available.

25	Email	String	Email address provided with initial claim filing.	Optional. Leave blank if no data available.
26	Claim Type	String	Free form	Optional. Leave blank if no data available.
27	Claim Status	String	Free form	Optional. Leave blank if no data available.
28	Payment Method	String	Direct Deposit, Debit Card, or Paper Check	Optional. Leave blank if no data available.
29	Number of Dependents	Integer	Number of dependents claimed on initial claim.	Optional. Leave blank if no data available.
30	Taxes are Withheld	String	Code representing the type of taxes being withheld (i.e. State, Federal or Both)	Optional. Leave blank if no data available.
31	State Drivers License Number	String	Driver's license number provided with initial claim filing.	Optional. Leave blank if no data available.
32	Issuing State	String	State that goes with the DL.	Optional. Leave blank if no data available.
33	Identity Issue Exists	String	Y/N indicating if an identity issue already exists.	Required. Cannot be blank.

**Note: Future enhancements TD 5332 FIVS – Verify identity of claimant regardless of claim will remove claim and claim status from the export file.**

## 4.0 Business Rules

Business Rule ID	Business Rules
1.0	One file containing the following data in .csv format: <ul style="list-style-type: none"> <li>Initial claims</li> <li>Reopen claims</li> </ul>
2.0	Records will be sent based on the following business rules: <ul style="list-style-type: none"> <li>IP Address: the IP Address that was used when the claim was filed/reopened</li> <li>Address (Mailing/Residential): Address that was entered on the initial claim OR most recent address for the claimant if they existed previously</li> <li>Bank Information: Bank account that was entered on the initial claim OR most recent account information for the claimant if they existed previously                             <ul style="list-style-type: none"> <li>Send all status codes</li> <li>Do NOT send Debit Card account information</li> </ul> </li> </ul>
3.0	The records will also put a Verification Hold on the claimant when an initial claim is submitted, and claimant never referred to FIVS before.
4.0	File naming convention: <ul style="list-style-type: none"> <li>OUT\MA_CLAIMS_{date}.CSV</li> </ul>
5.0	File folder: \Benefits\FIVS\OUT\
6.0	File is to be transferred via SFTP
7.0	File will be sent daily using the following batches <ul style="list-style-type: none"> <li>2406D_OUTBOUND_FIVS_FILES</li> <li>UIOLFM_FOR_2406_BATCH_MOVEIT</li> <li>156D_BEN_FIVS_DUA_EXPORT_ARCH_POST</li> <li>156D_BEN_FIVS_DUA_EXPORT_DELETE</li> </ul>