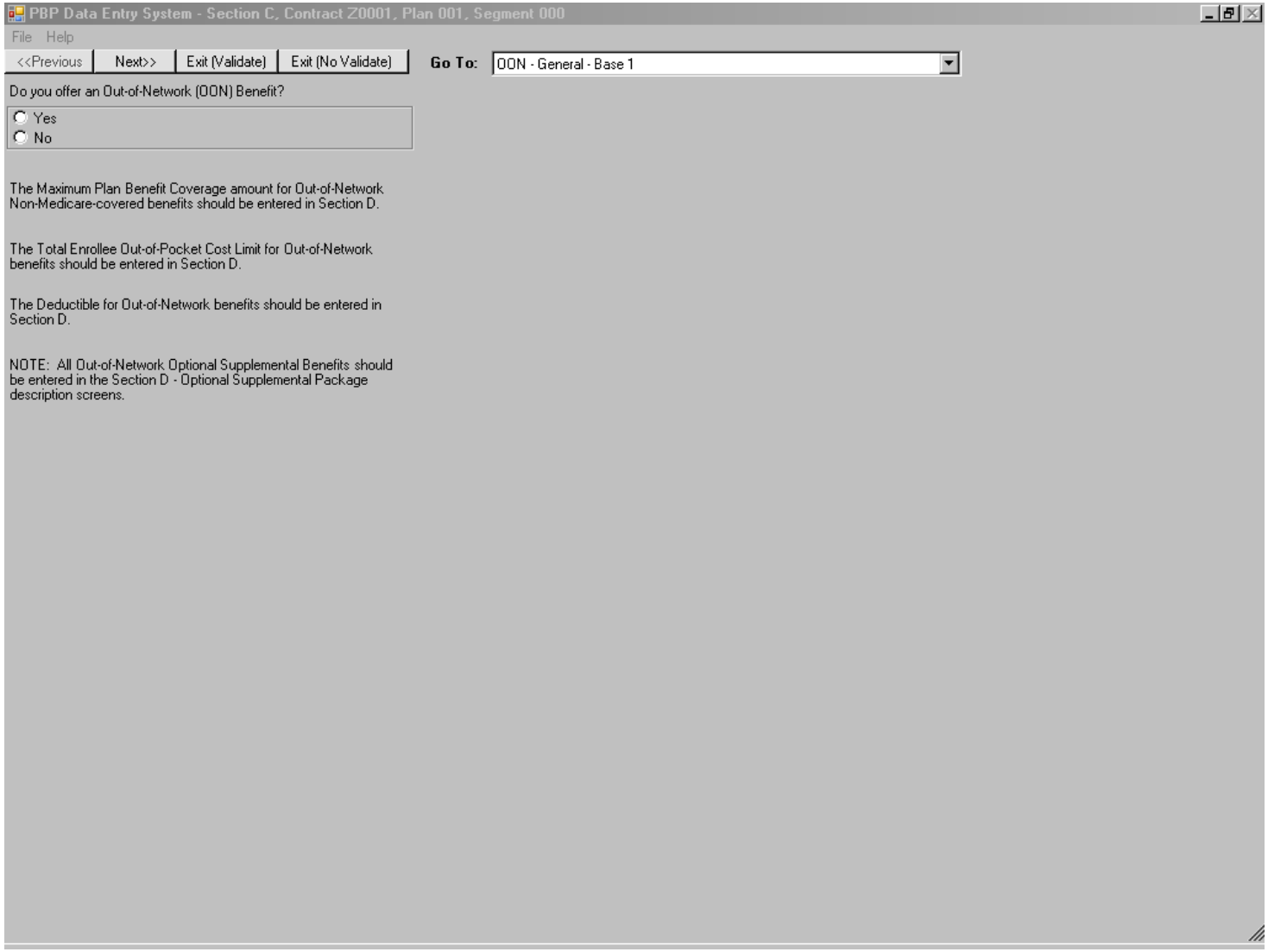
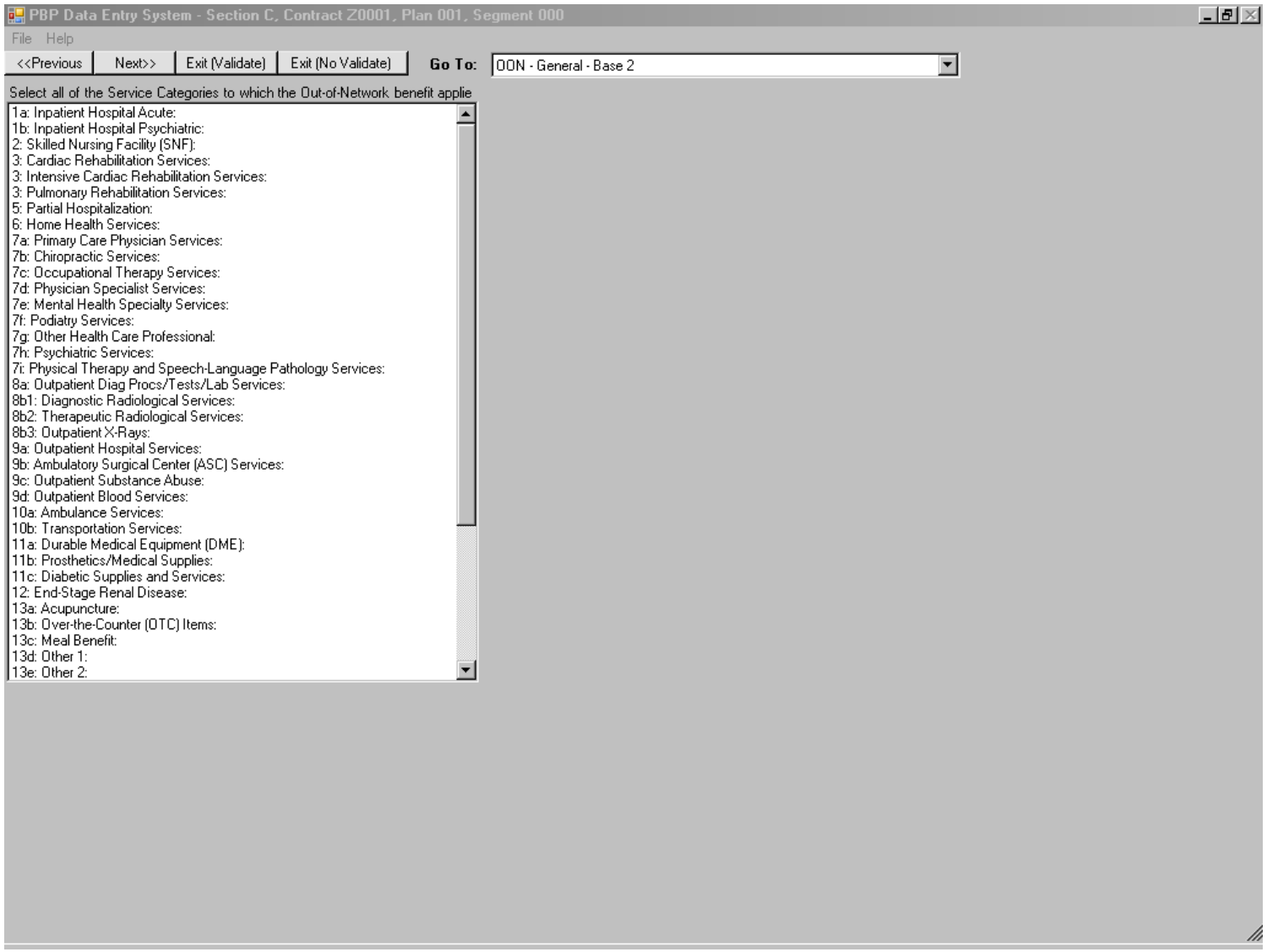
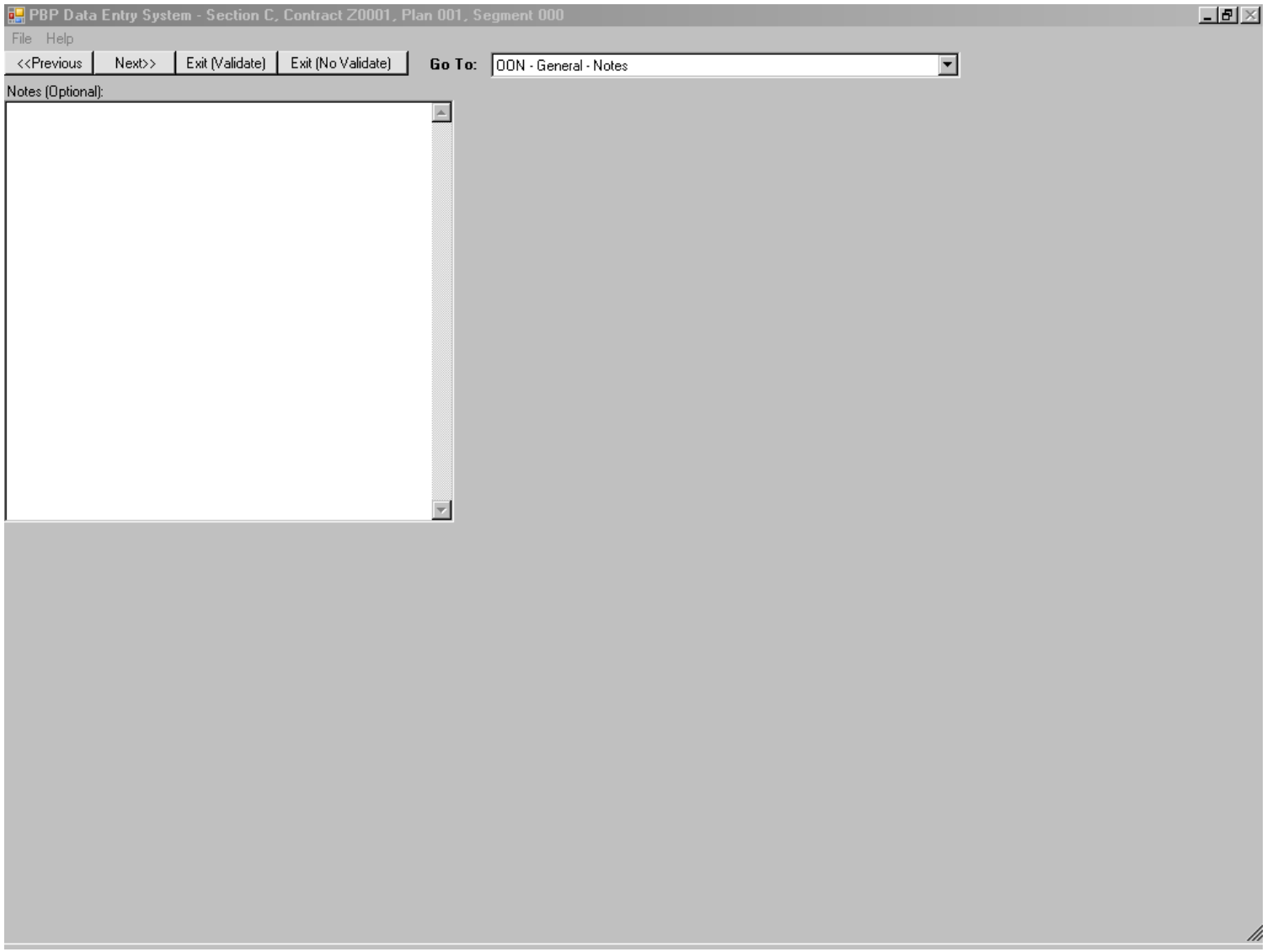
Section C- OON- General- Base 1 Screen



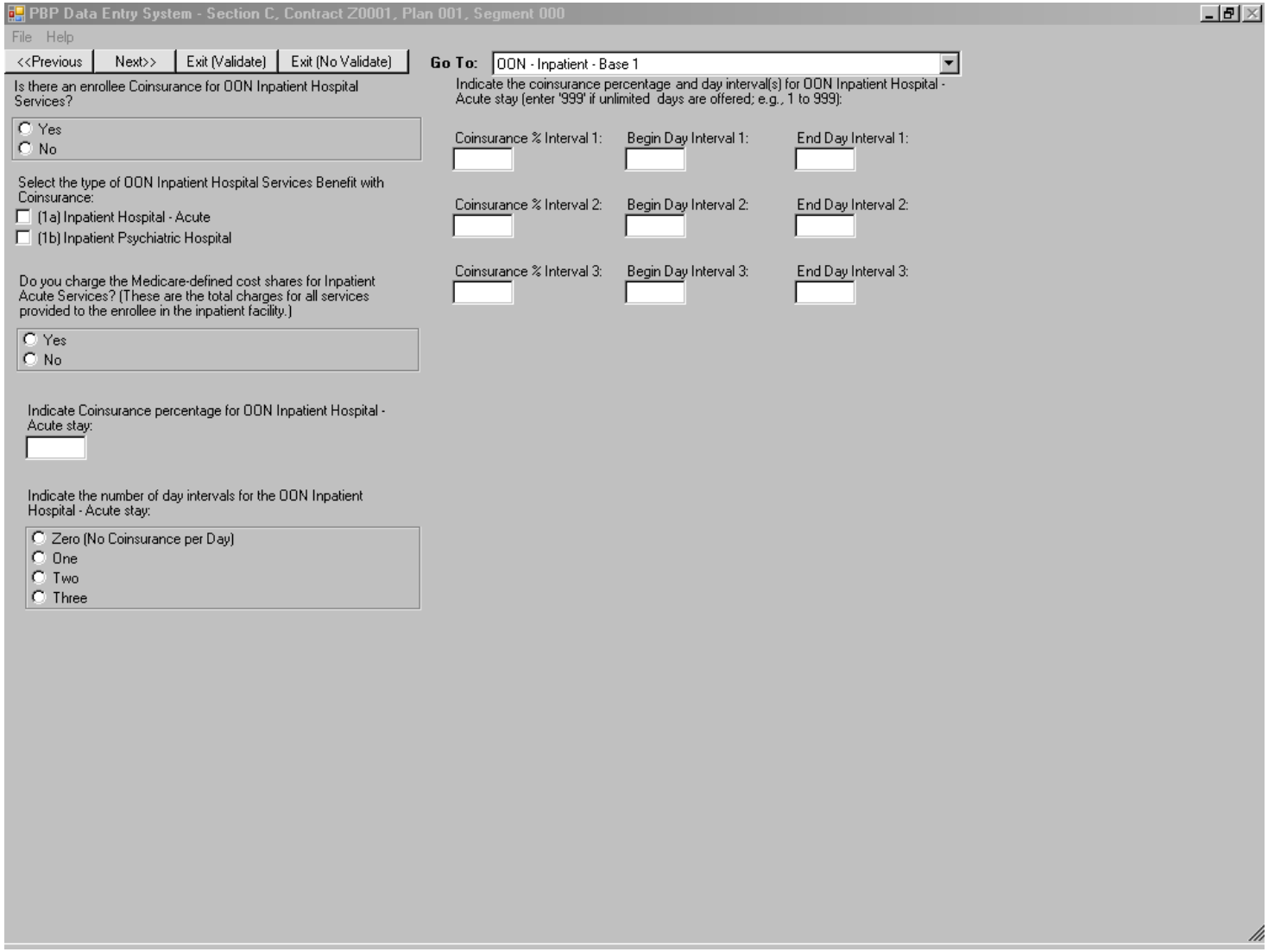
Section C- OON- General- Base 2 Screen



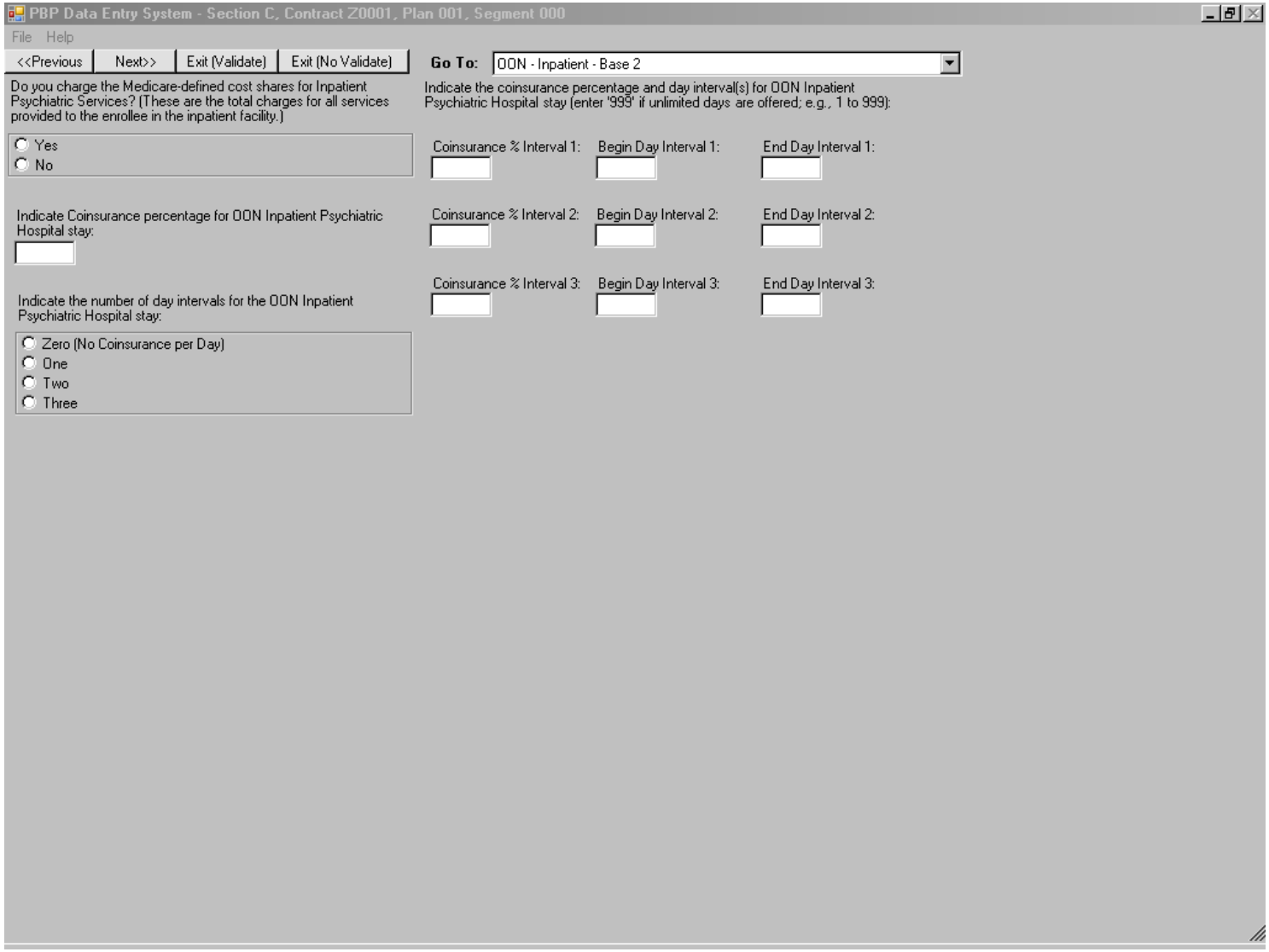
Section C- OON- General- Notes Screen



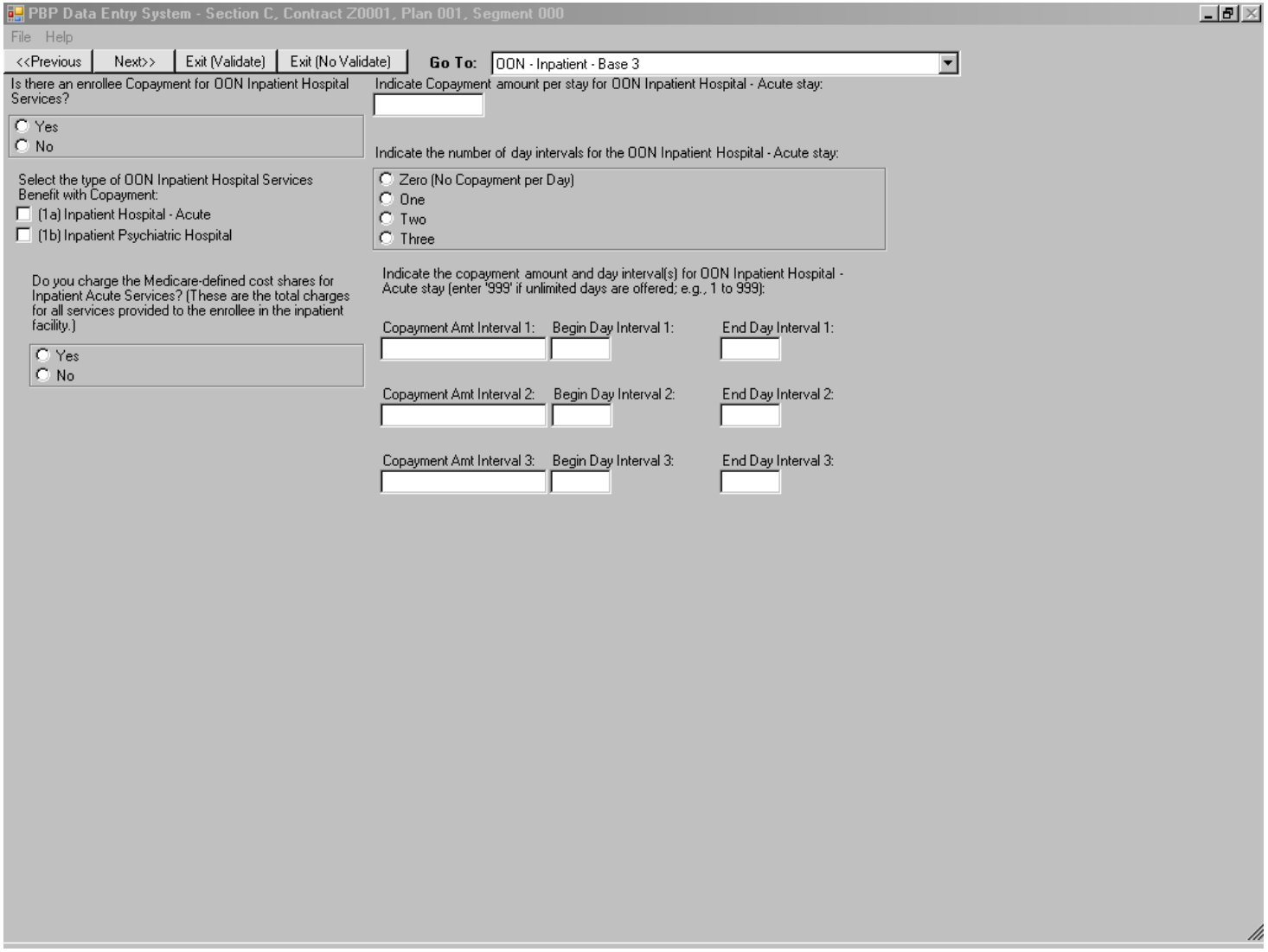
Section C- OON- Inpatient- Base 1 Screen



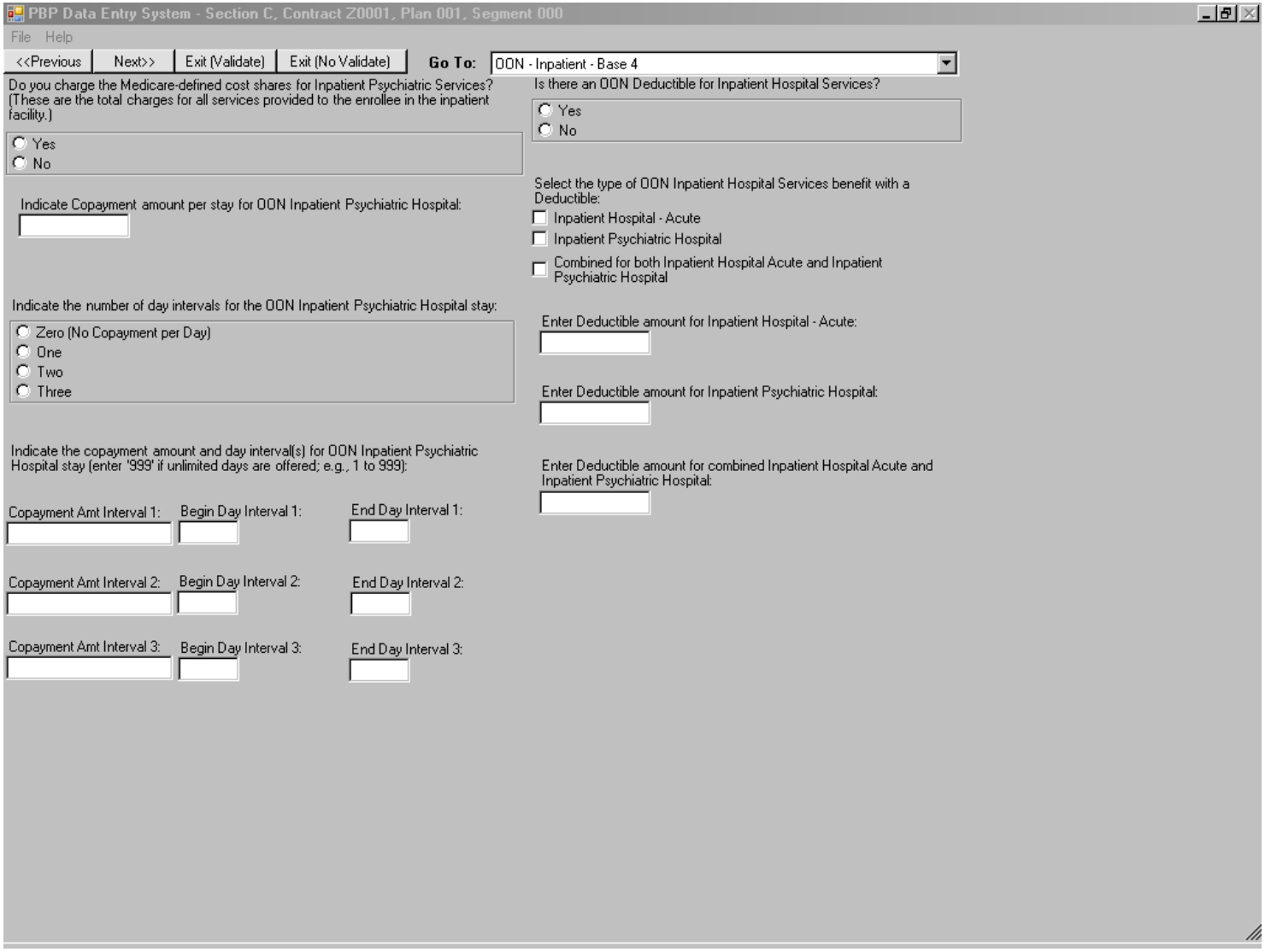
Section C- OON- Inpatient- Base 2 Screen



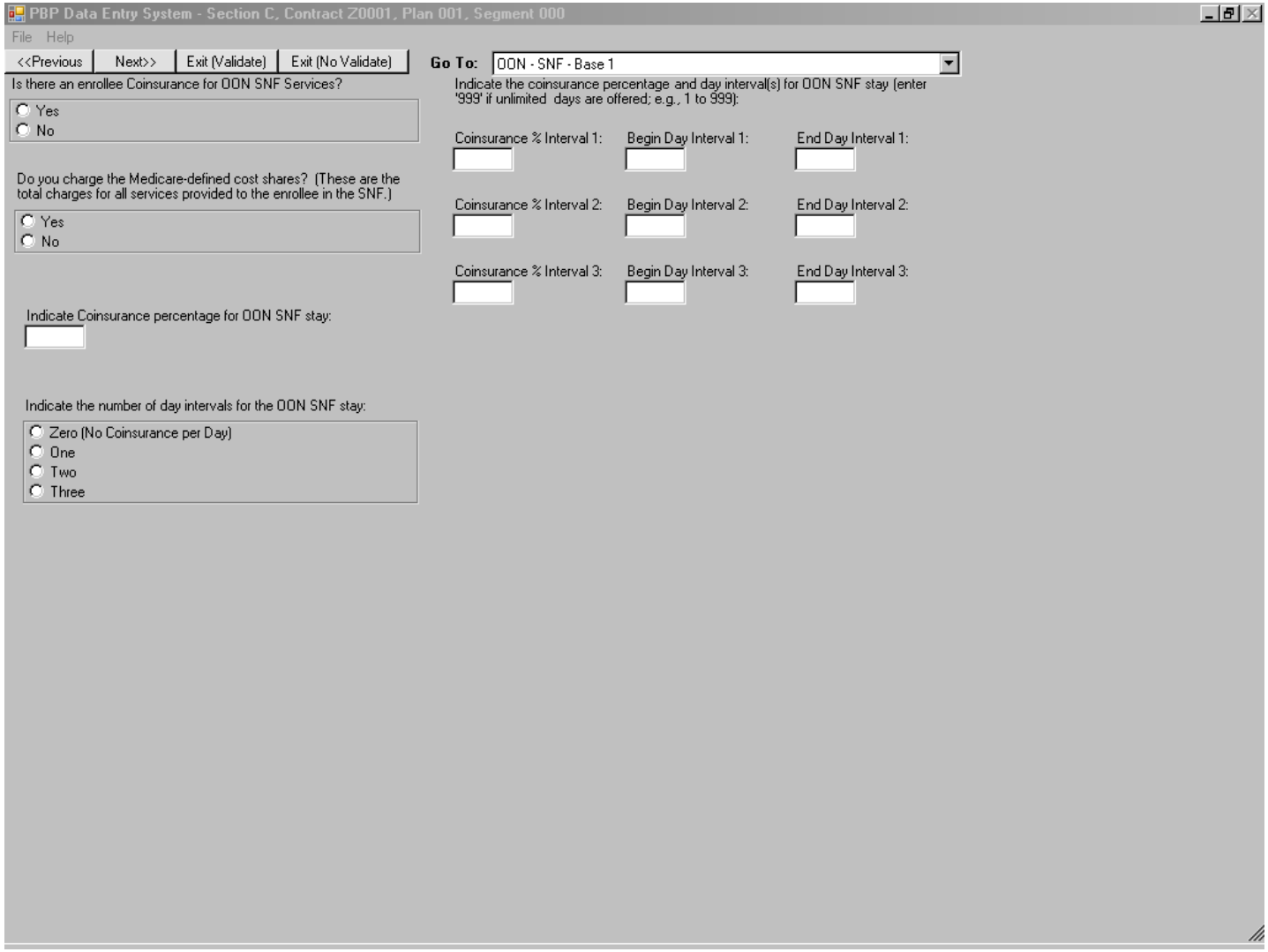
Section C- OON- Inpatient- Base 3 Screen



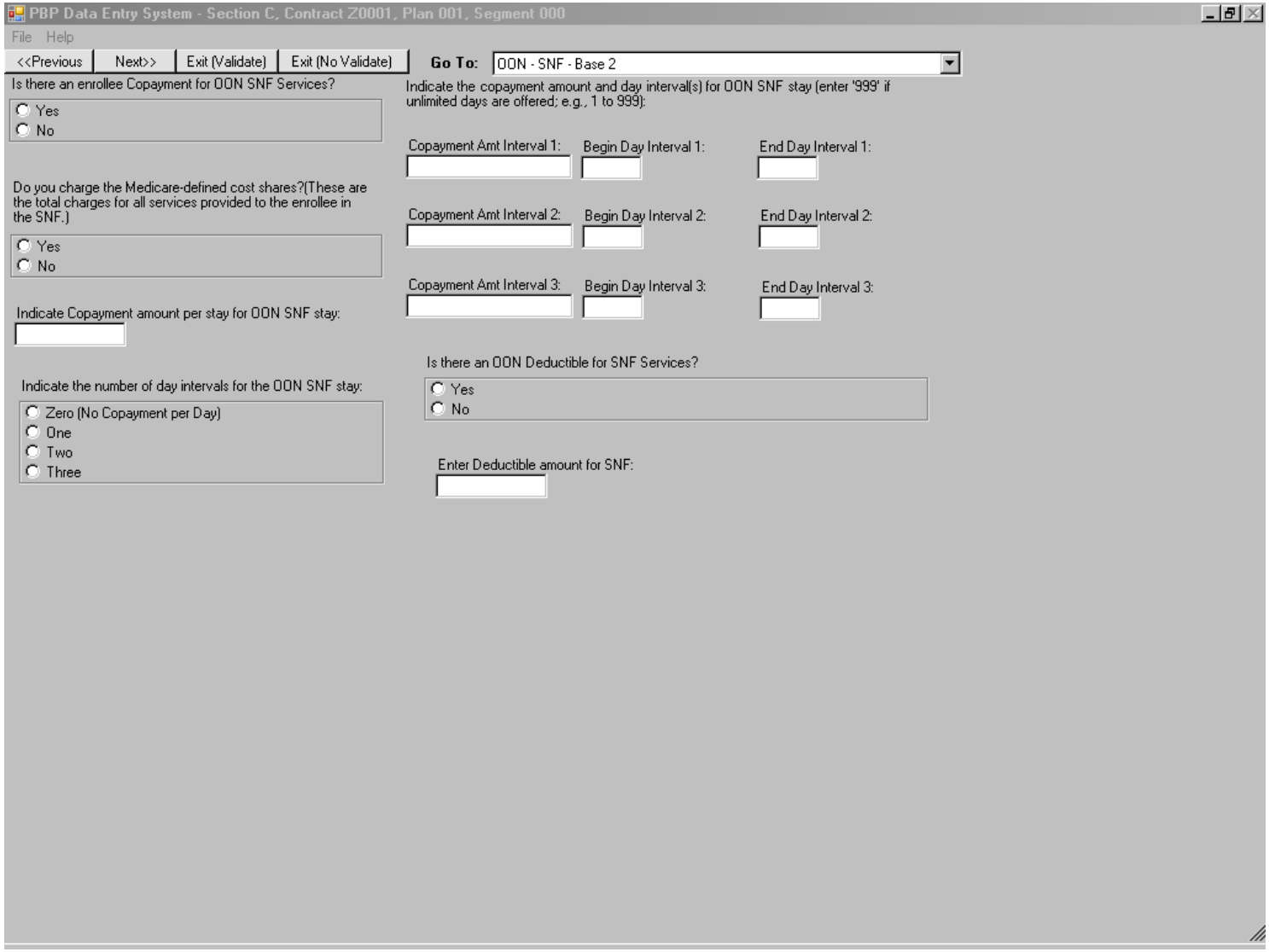
Section C- OON- Inpatient- Base 4 Screen



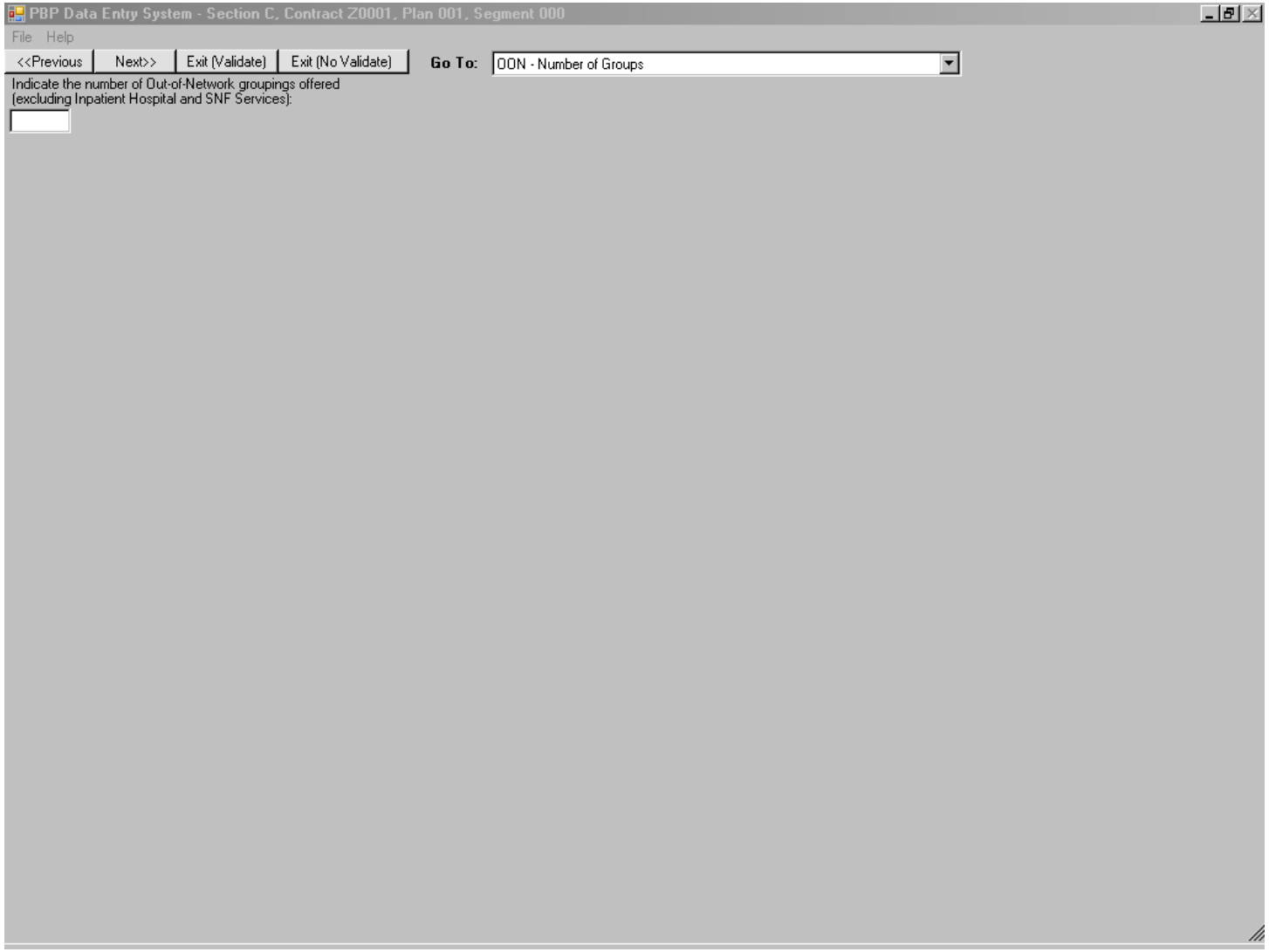
Section C- OON- SNF- Base 1 Screen



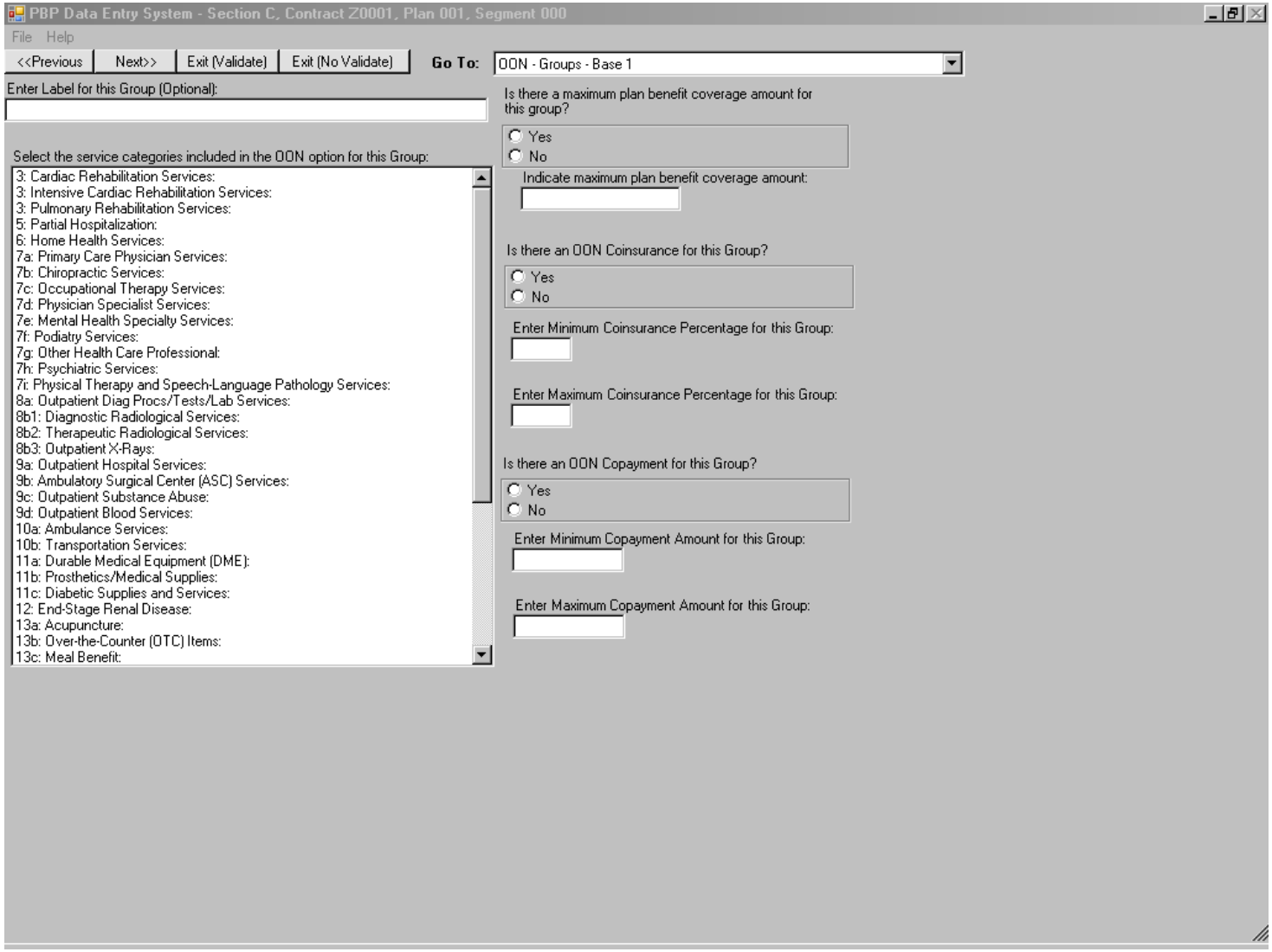
Section C- OON- SNF- Base 2 Screen



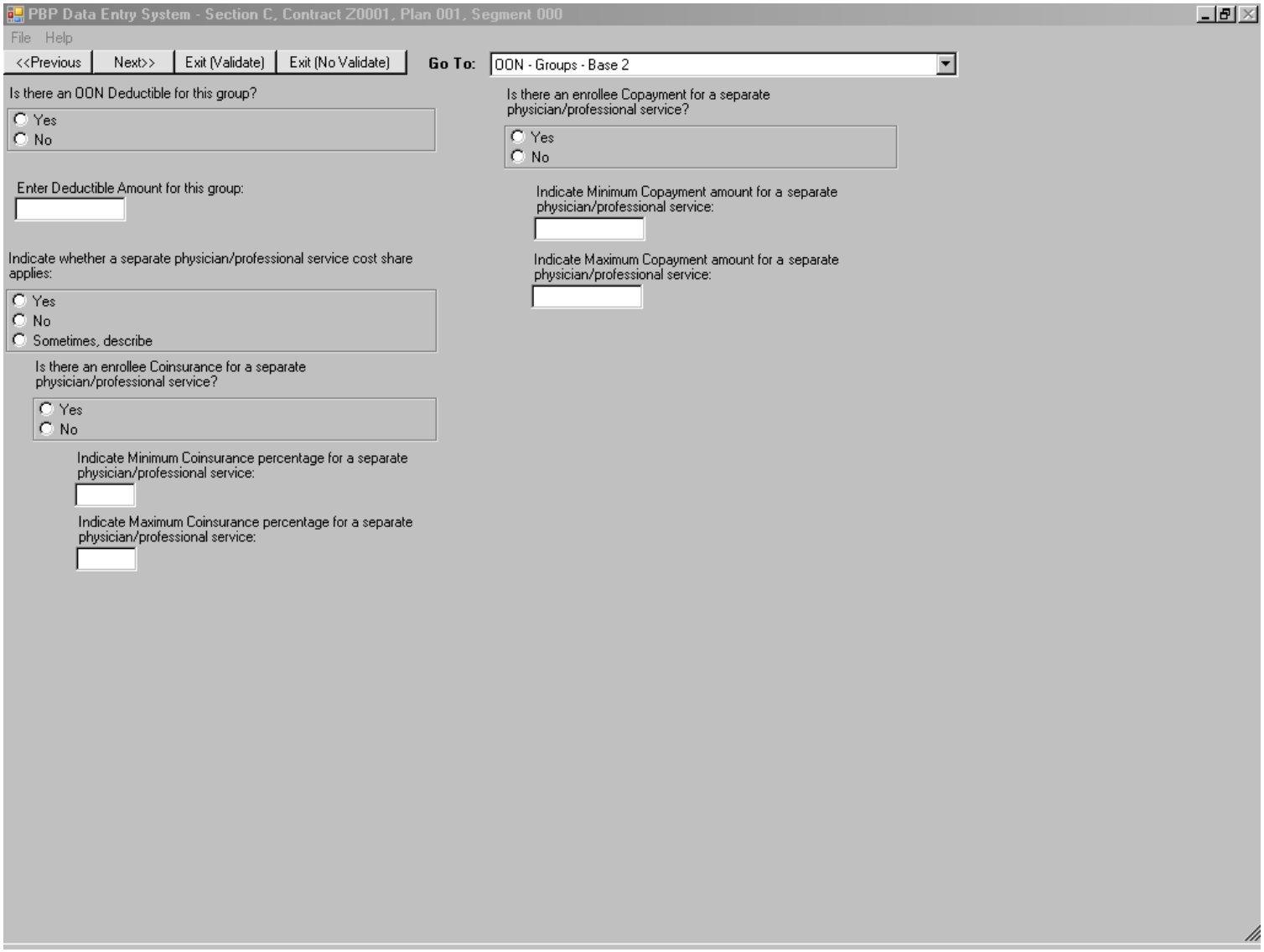
Section C- OON- Number of Groups Screen



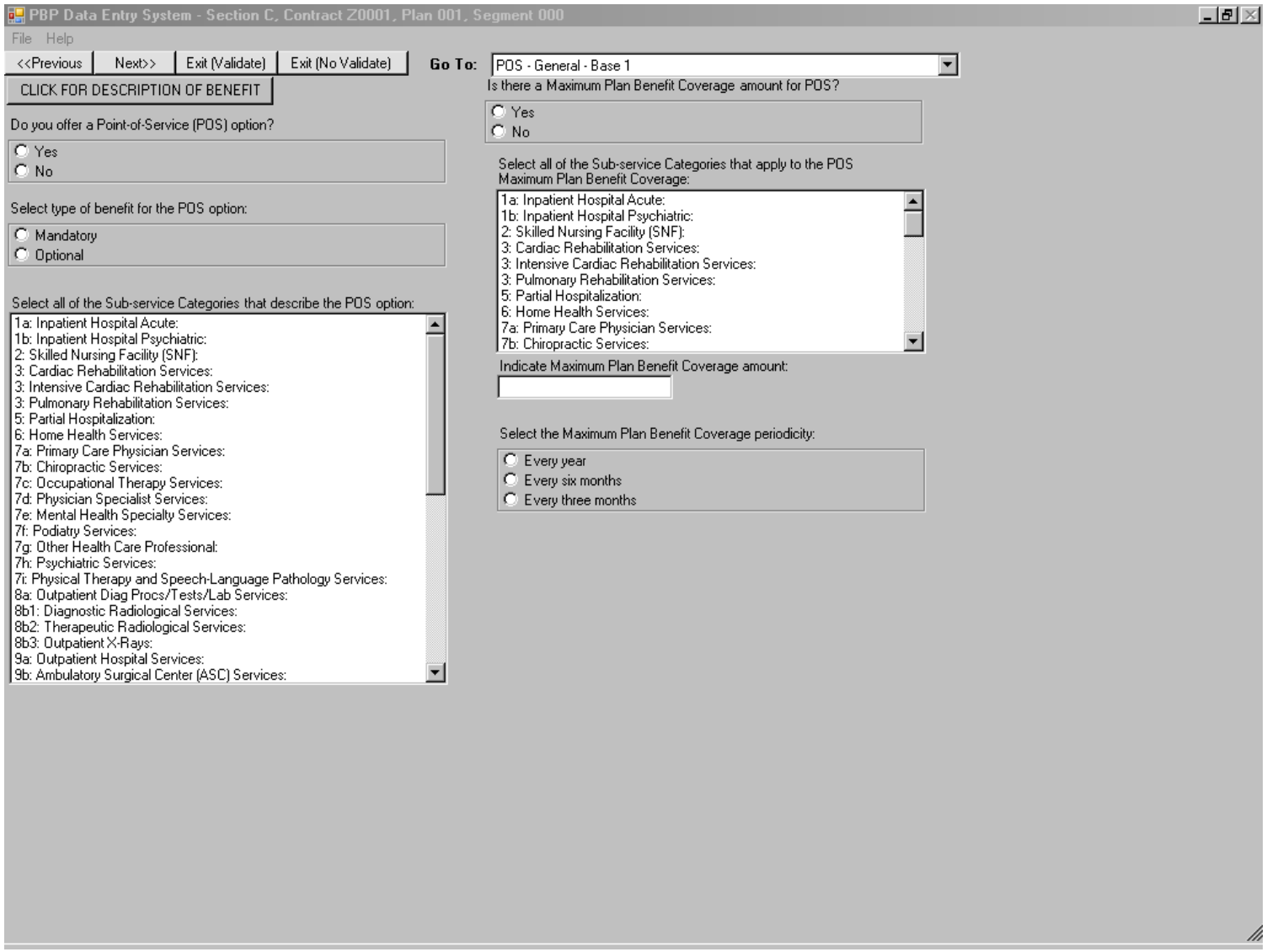
Section C- OON-Groups - Base 1 Screen



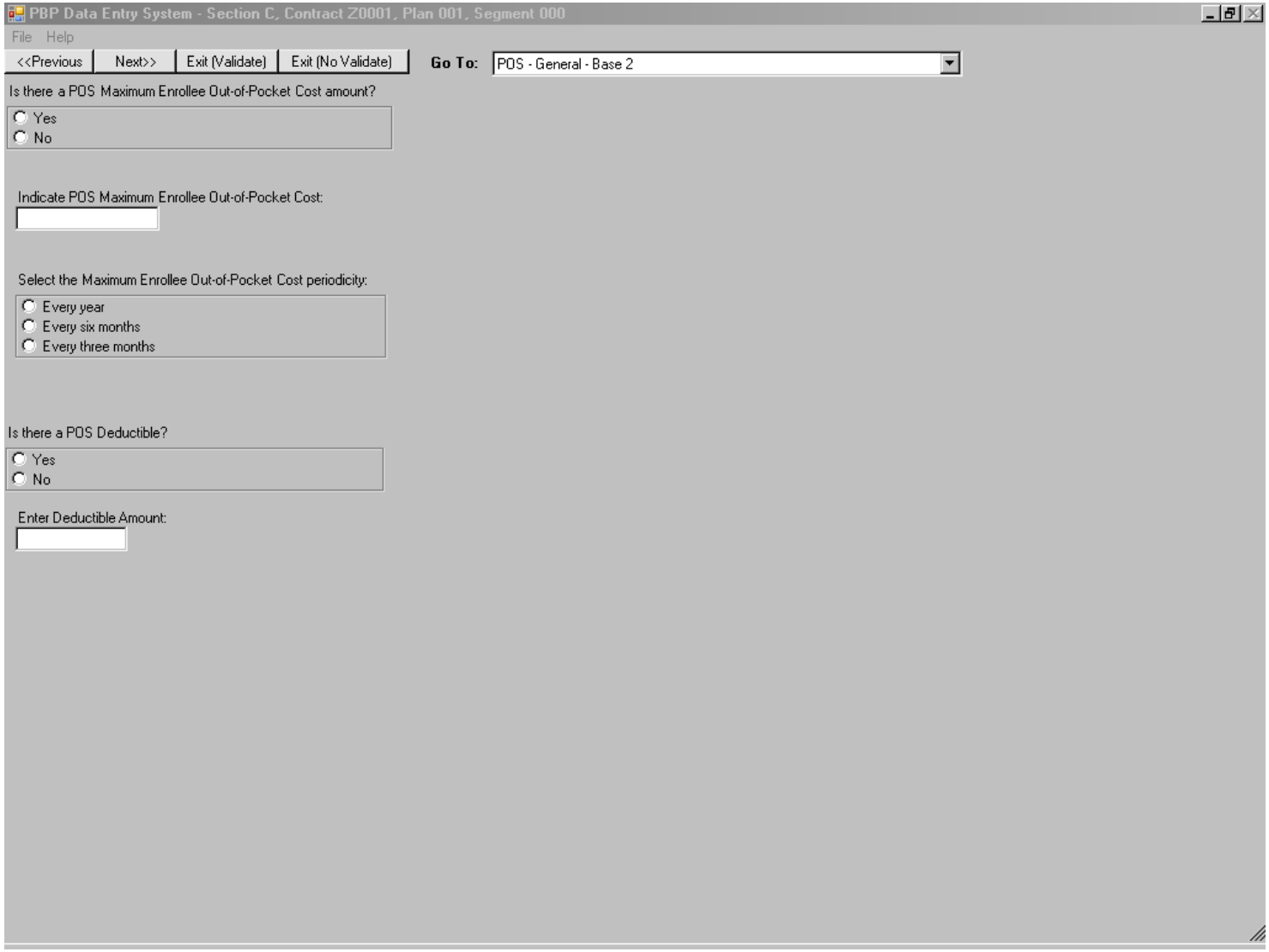
Section C- OON-Groups - Base 2 Screen


PBP Data Entry System - Section C, Contract Z0001, Plan 001, Segment 000
File Help
<<Previous
Next>>
Exit (Validate)
Exit (No Validate)
Go To:
OON - Groups - Base 2
Is there an OON Deductible for this group?
Yes
No
Enter Deductible Amount for this group:
Indicate whether a separate physician/professional service cost share applies:
Yes
No
Sometimes, describe
Is there an enrollee Coinsurance for a separate physician/professional service?
Yes
No
Indicate Minimum Coinsurance percentage for a separate physician/professional service:
Indicate Maximum Coinsurance percentage for a separate physician/professional service:
Is there an enrollee Copayment for a separate physician/professional service?
Yes
No
Indicate Minimum Copayment amount for a separate physician/professional service:
Indicate Maximum Copayment amount for a separate physician/professional service:

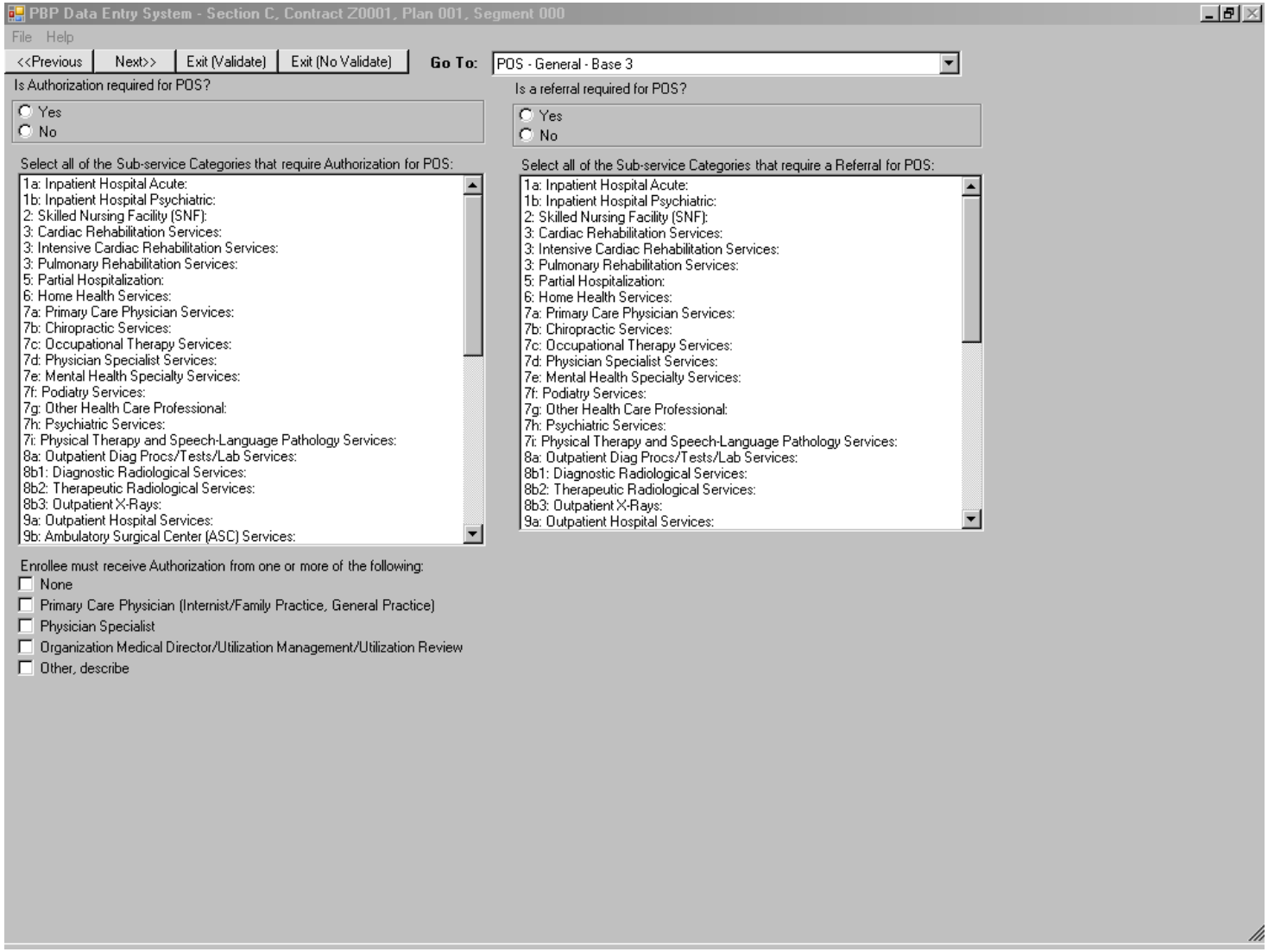
Section C- POS-General - Base 1 Screen



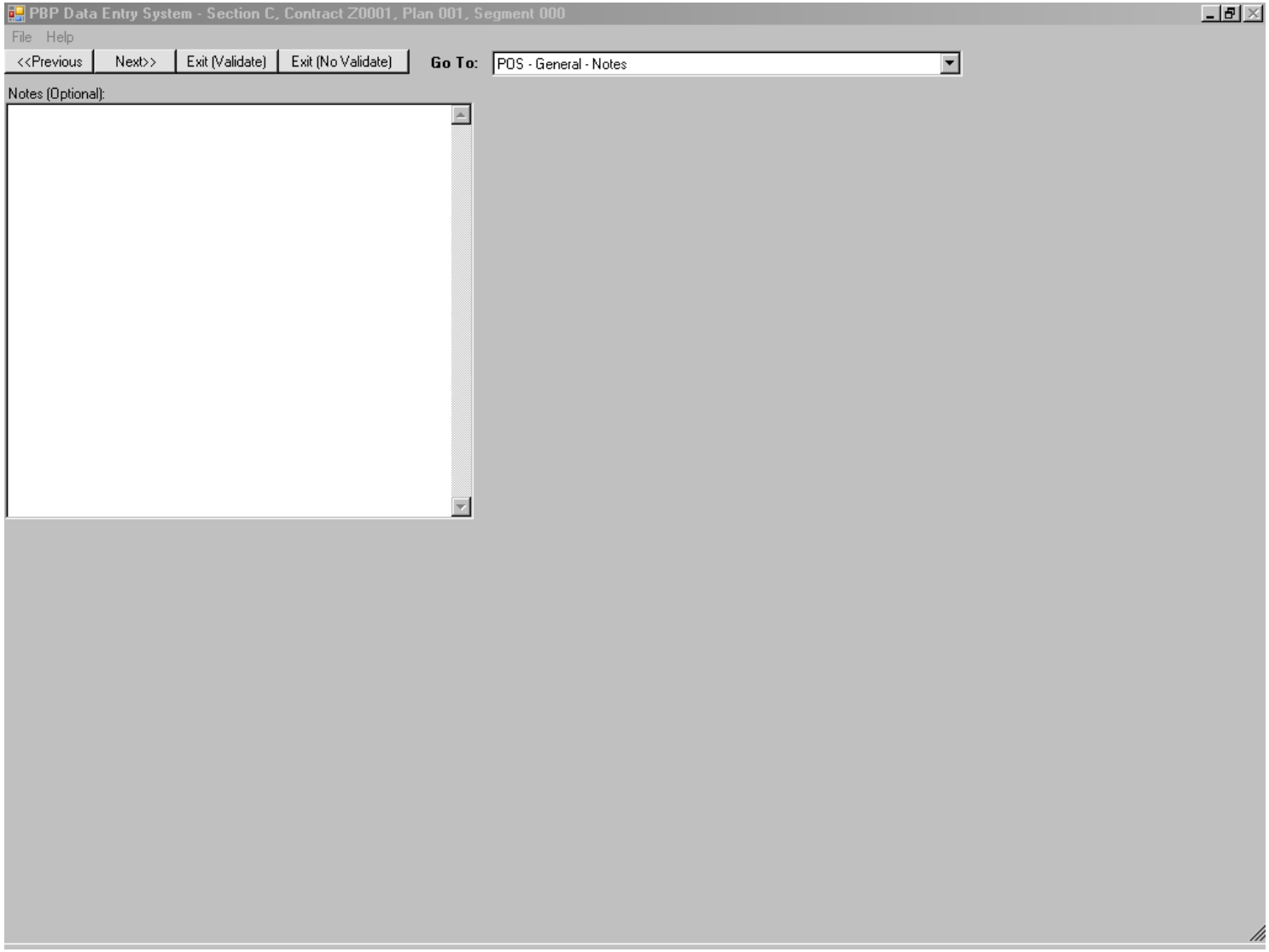
Section C- POS-General - Base 2 Screen



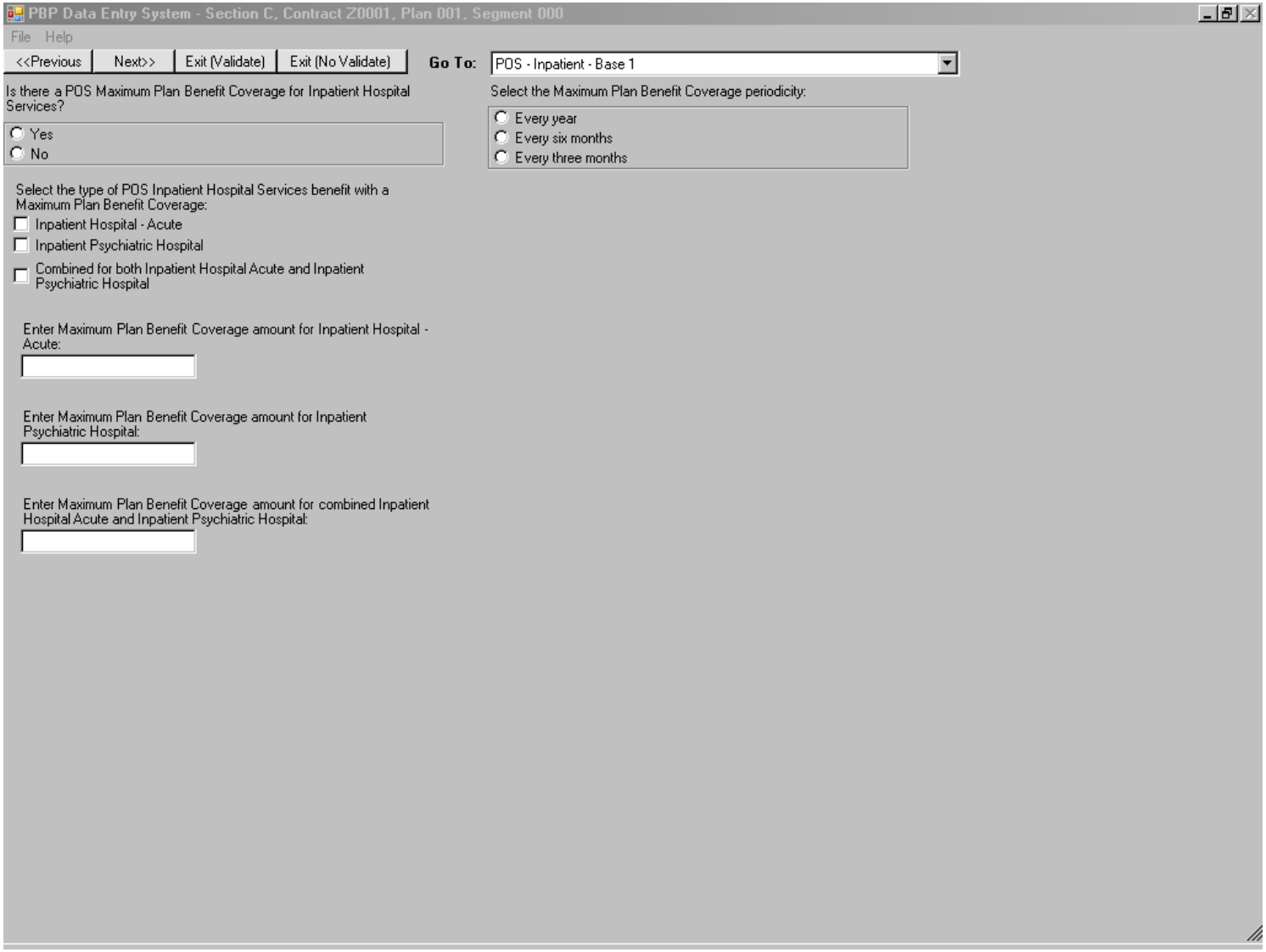
Section C- POS-General - Base 3 Screen



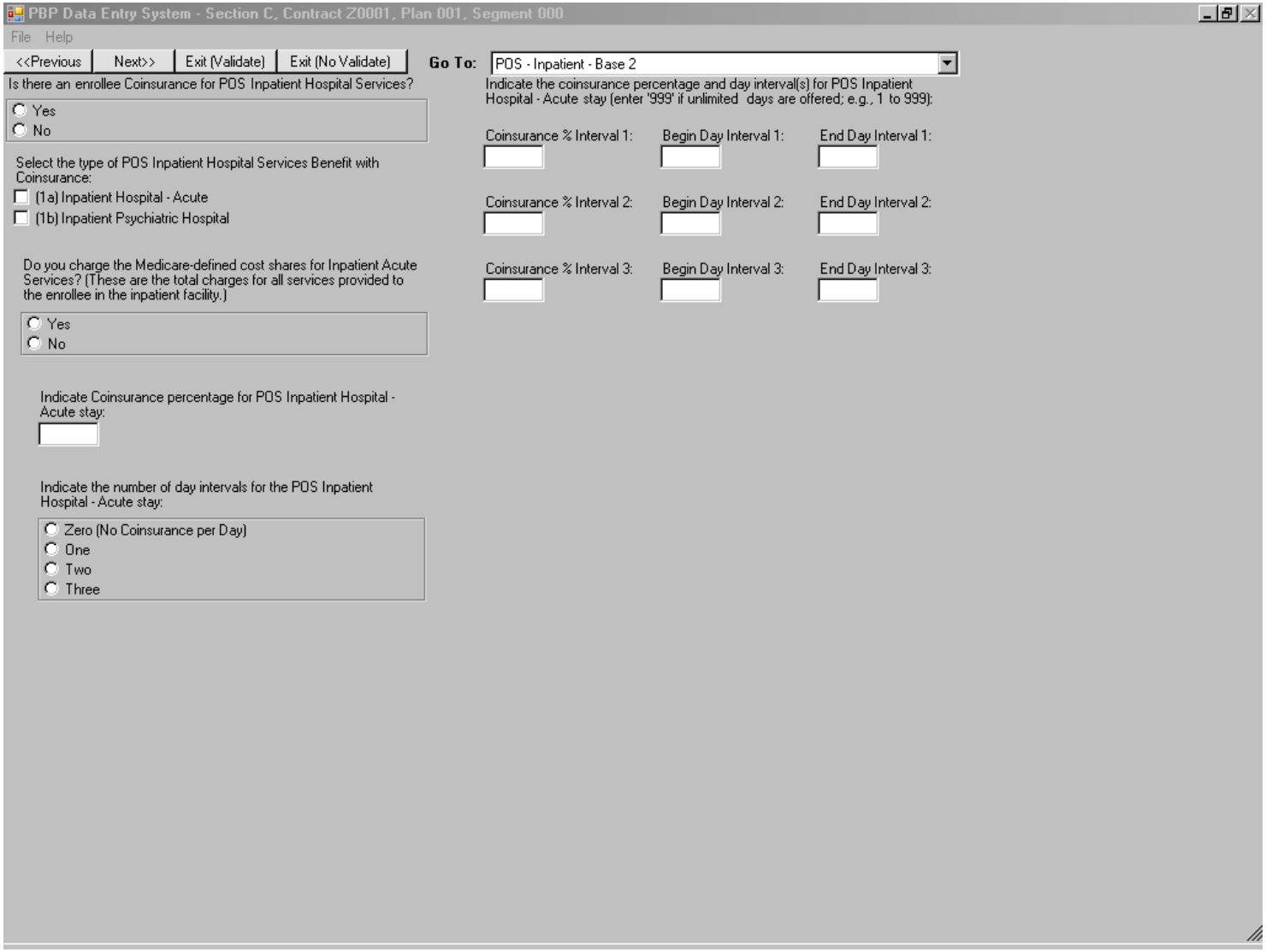
Section C- POS-General – Notes Screen



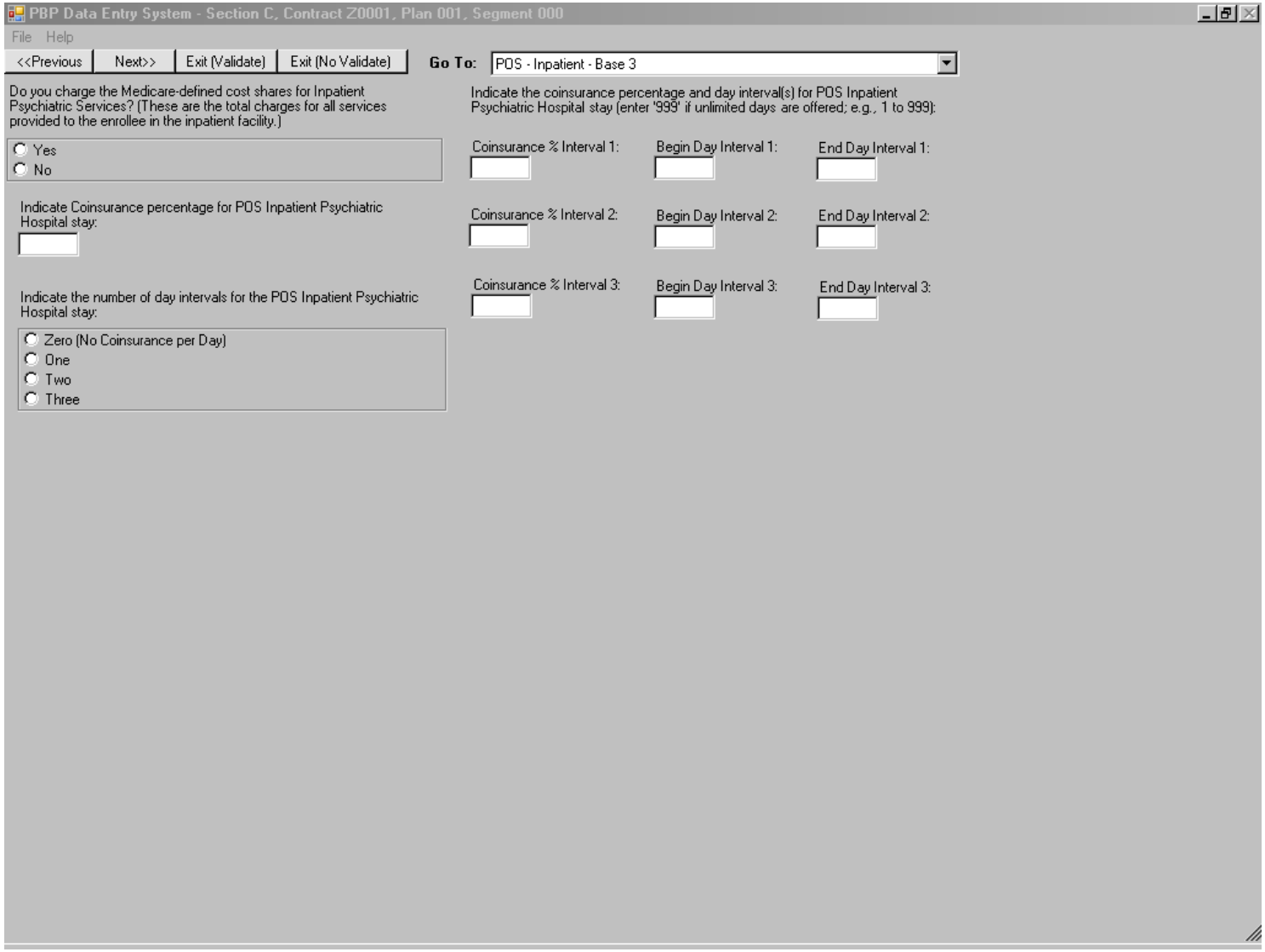
Section C- POS-Inpatient – Base 1 Screen



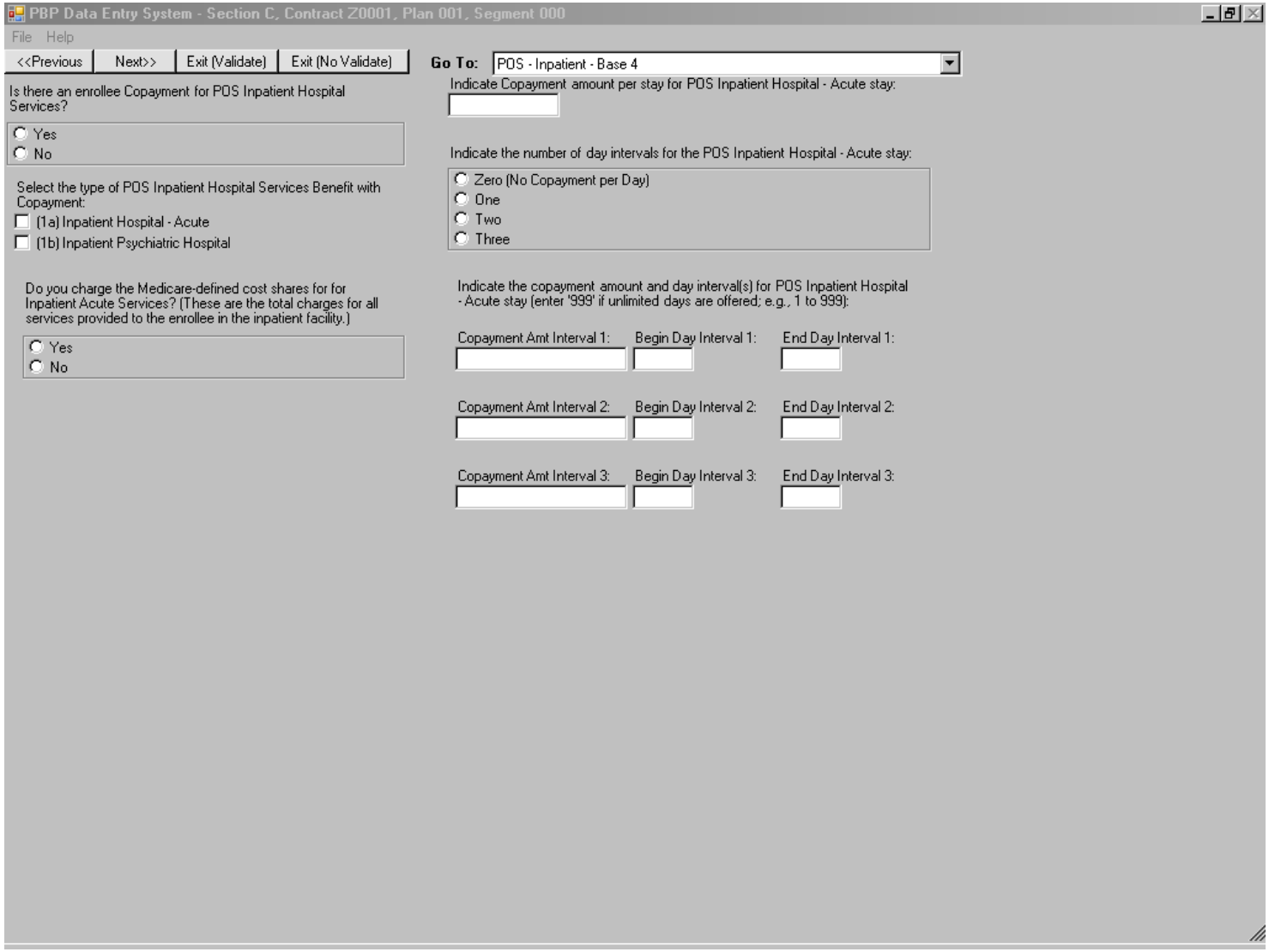
Section C- POS-Inpatient – Base 2 Screen



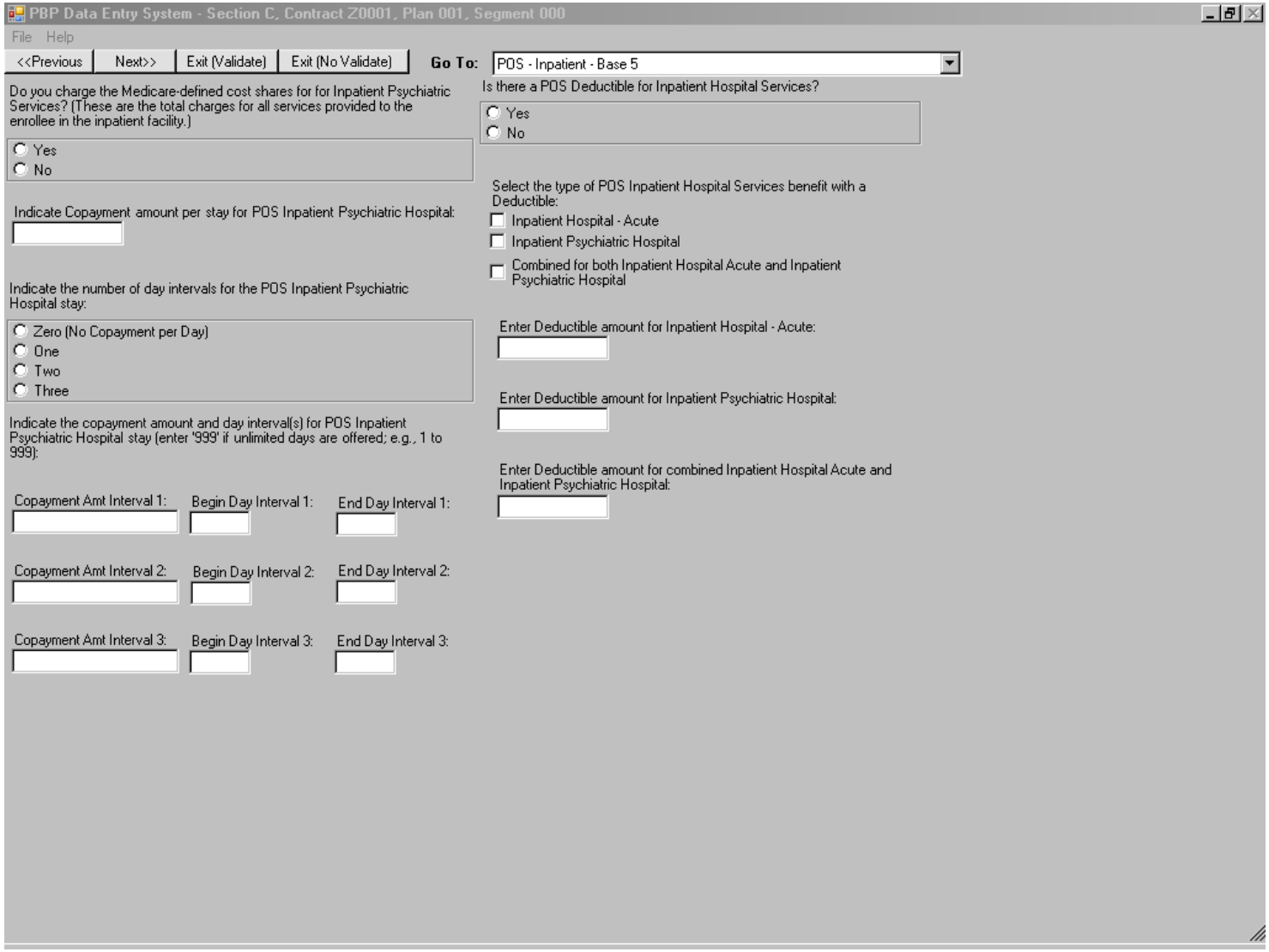
Section C- POS-Inpatient – Base 3 Screen



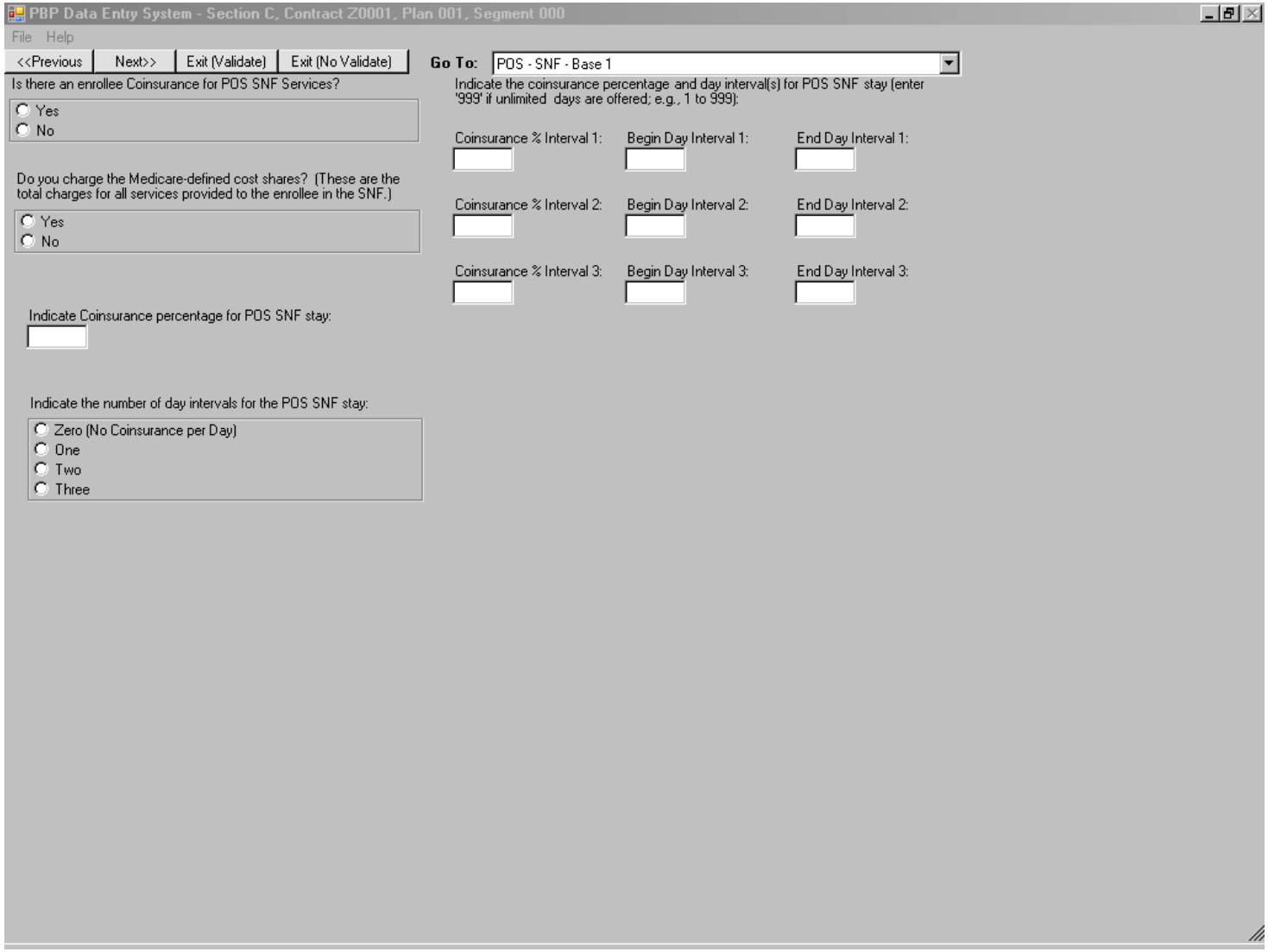
Section C- POS-Inpatient – Base 4 Screen



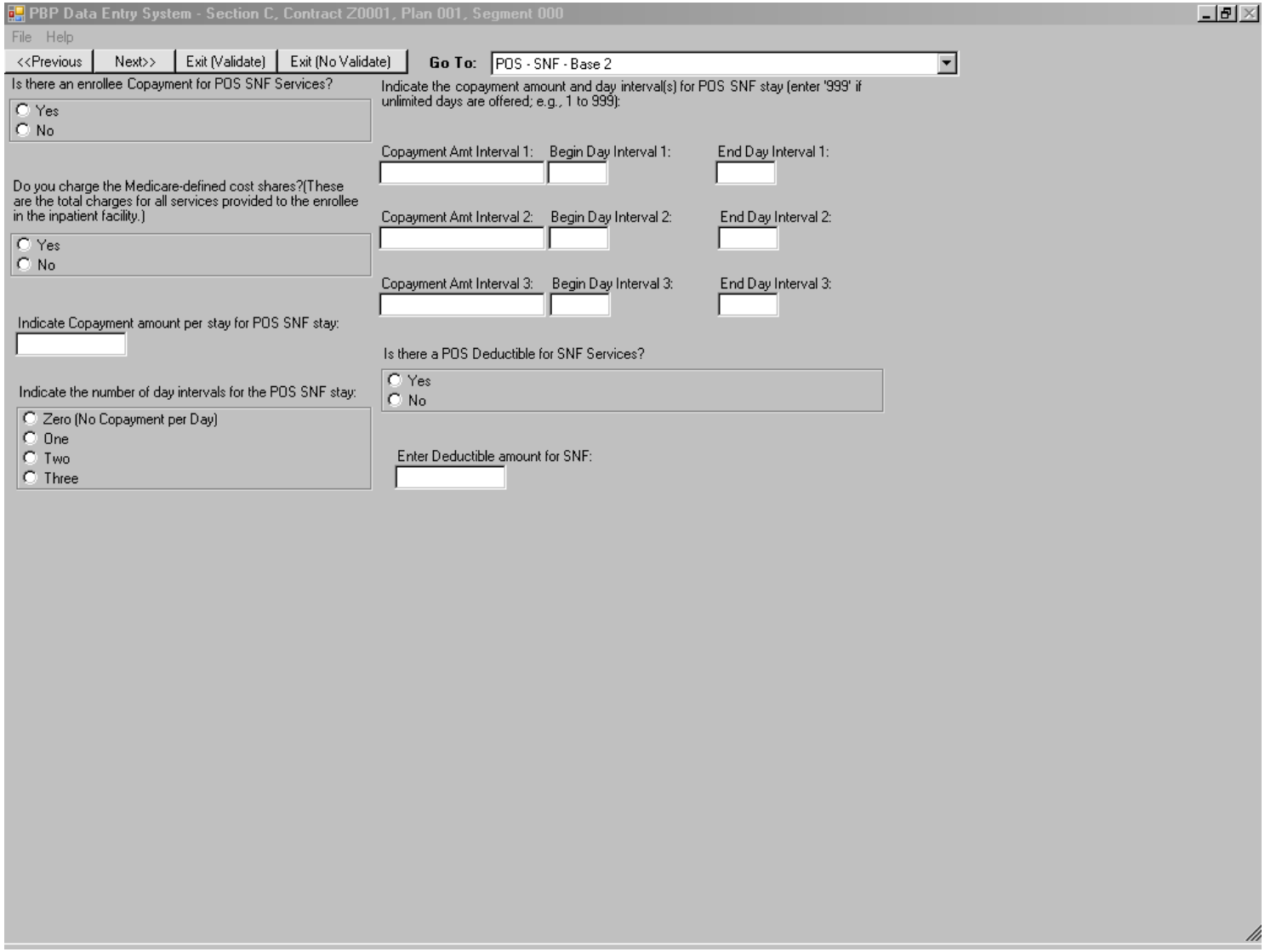
Section C- POS-Inpatient – Base 5 Screen



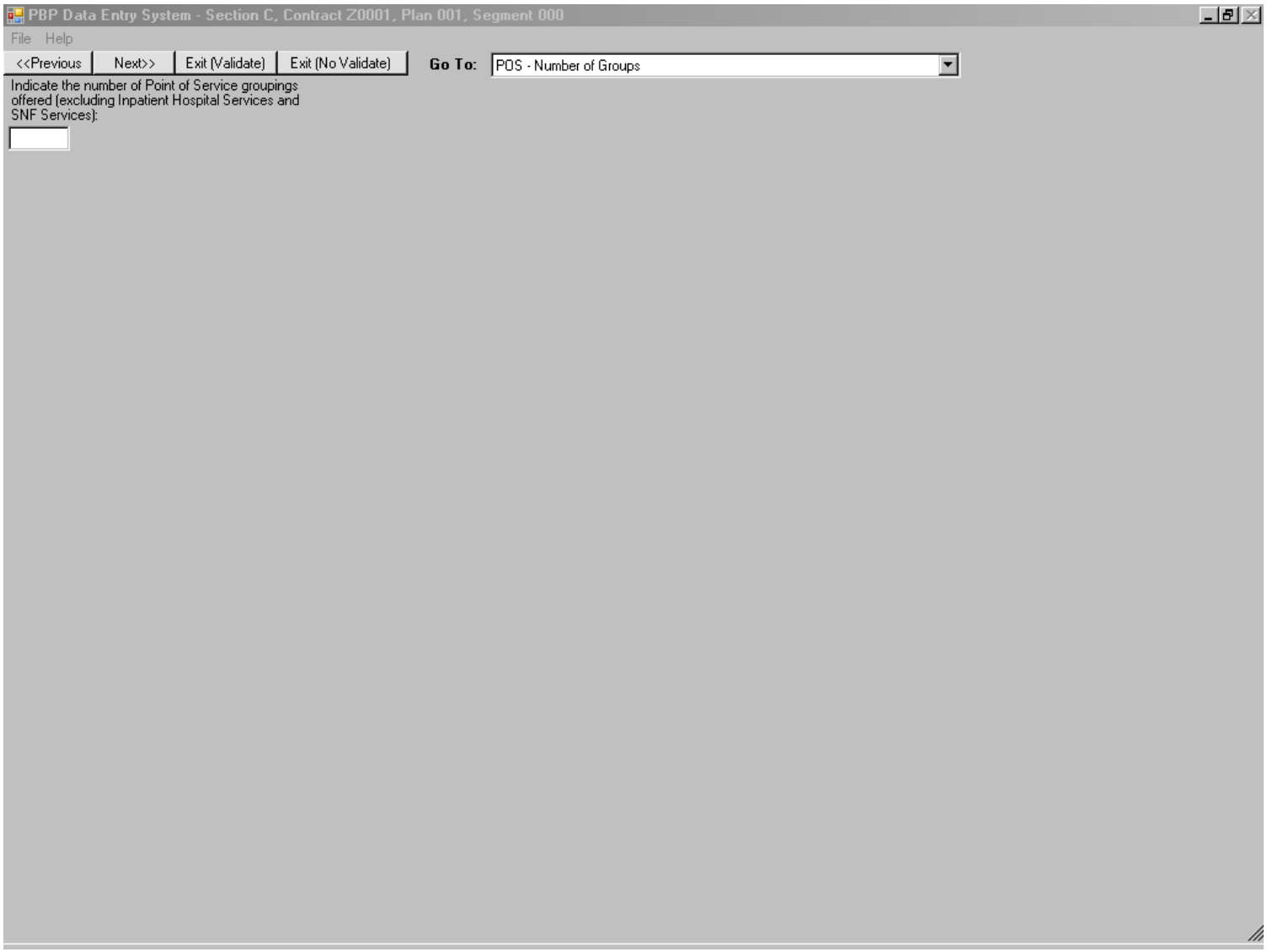
Section C- POS-SNF – Base 1 Screen



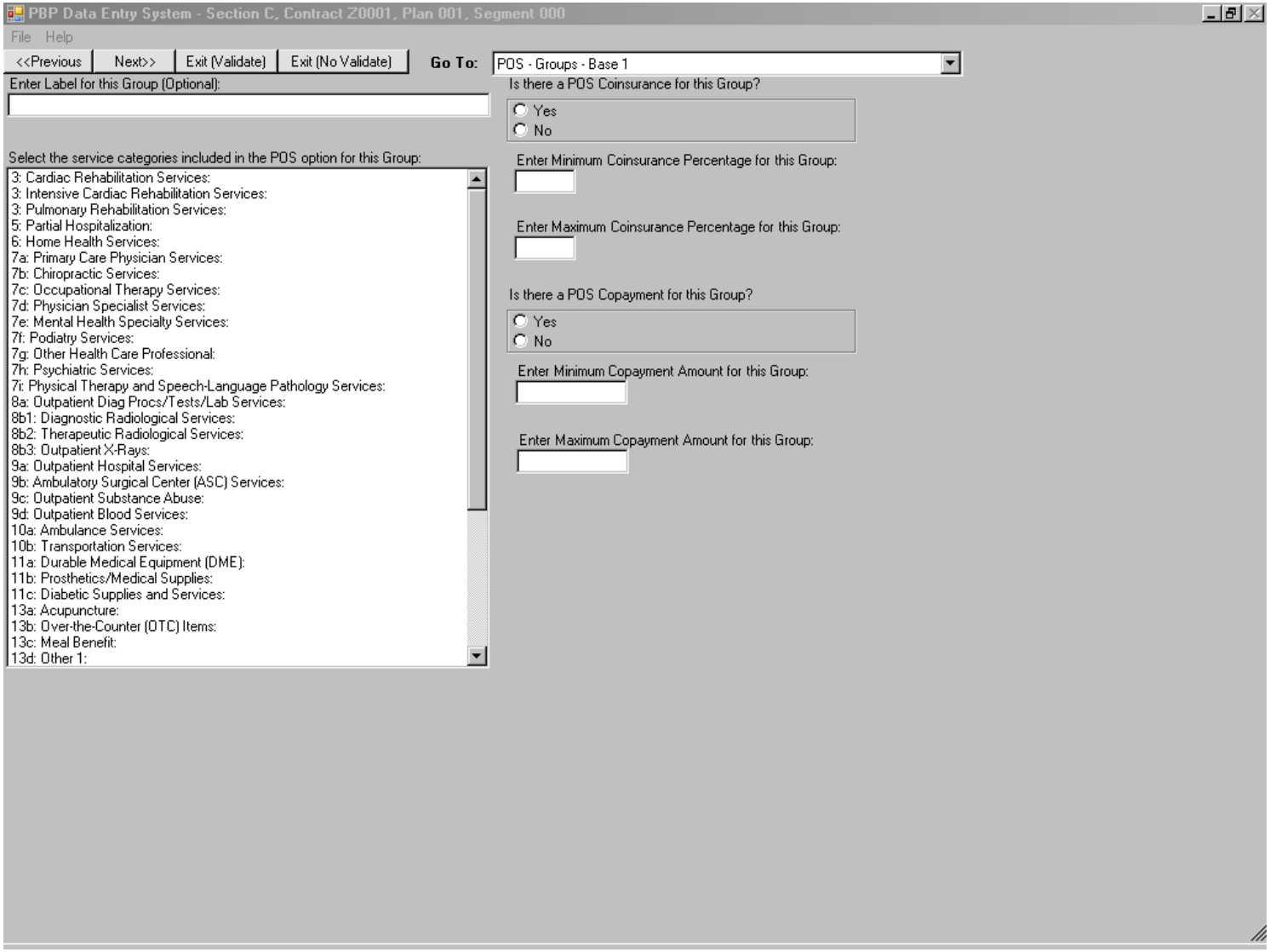
Section C- POS-SNF – Base 2 Screen



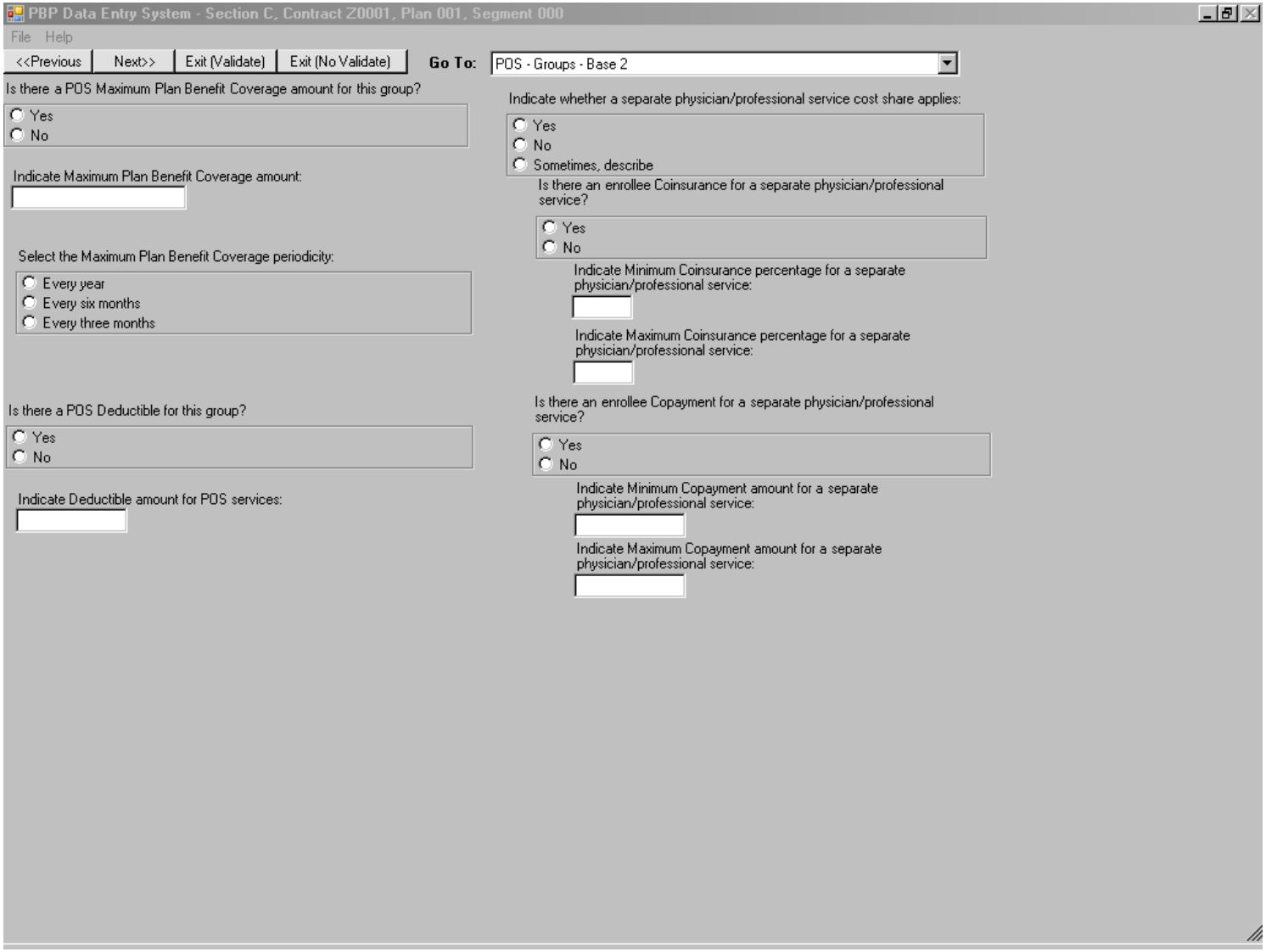
Section C- POS– Number of Groups Screen



Section C- POS-Groups – Base 1 Screen



Section C- POS-Groups – Base 2 Screen



Section C- V/T-General – US Screen