



Data Now Program (DNP) Medical Data Call Compliance

Topics

- Medical Compliance Program
- Incentive Program Components
 - Completeness
 - Quality
- Assessment Calculation
- Review and Appeals

Key Takeaways

- Details of the **Medical Incentive Program (MIP)** compliance criteria
- Monitor your reporting performance using the **Medical Data Collection (MDC)** tool

Medical Compliance Programs Overview

Compliance Programs

| Medical Incentive Program | Carrier Data Quality Report Program Medical Data Addendum |
|---|---|
| <ul style="list-style-type: none">■ Quarterly■ Effective for New Medical Data Reporters after 4 Quarters | <ul style="list-style-type: none">■ Annually■ Included separately in Preliminary and Final |

Medical Incentive Program

Separate criteria for Completeness and Quality.

Applicability

- All groups and coverage providers are required to report the Medical Data Call in all NCCI States
- Independent bureau states are not subject to the **Medical Incentive Program**
- 36 states where the incentive program is active

| | | | | | |
|-------------|----------------------|-----------|---------------|----------------|---------------|
| Alabama | District of Columbia | Iowa | Mississippi | New Mexico | Tennessee |
| Alaska | Florida | Kansas | Missouri | Oklahoma | Texas |
| Arizona | Georgia | Kentucky | Montana | Oregon | Utah |
| Arkansas | Hawaii | Louisiana | Nebraska | Rhode Island | Vermont |
| Colorado | Idaho | Maine | Nevada | South Carolina | Virginia |
| Connecticut | Illinois | Maryland | New Hampshire | South Dakota | West Virginia |




Data Now Program (DNP) Medical Data Call Compliance

All Companies for an Affiliate

- Contracts are signed at an affiliate level.
- Groups of an affiliate have all data rolled up for units, **Data Quality Incentive Program (DQIP)**, **Carrier Report Card**, and Medical Compliance. Each group reports in the **MDC** tool.
- Each individual company (coverage provider) under a group must report in the **MDC** tool.

Evaluation Timing

- Evaluate each reporting group quarterly
 - Date received as of due date



| Transaction Quarter | Due Date |
|---------------------|--------------|
| Q1 | June 30 |
| Q2 | September 30 |
| Q3 | December 31 |
| Q4 | March 31 |

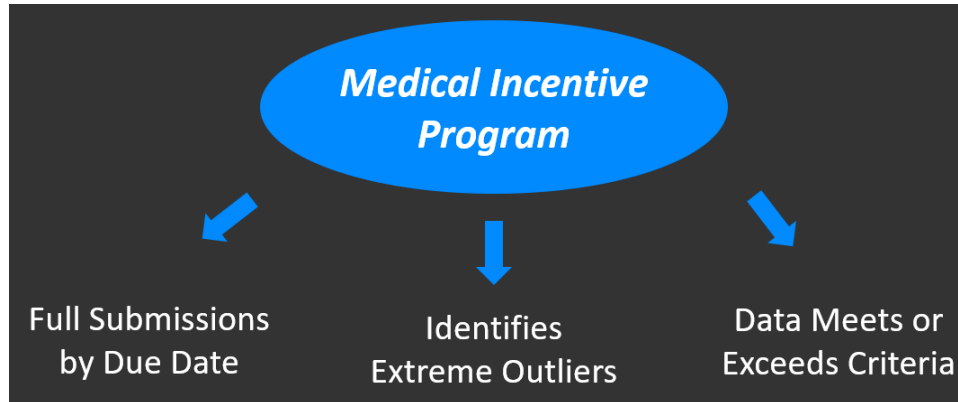
- Assessments (if any) are billed in the second month following the due date



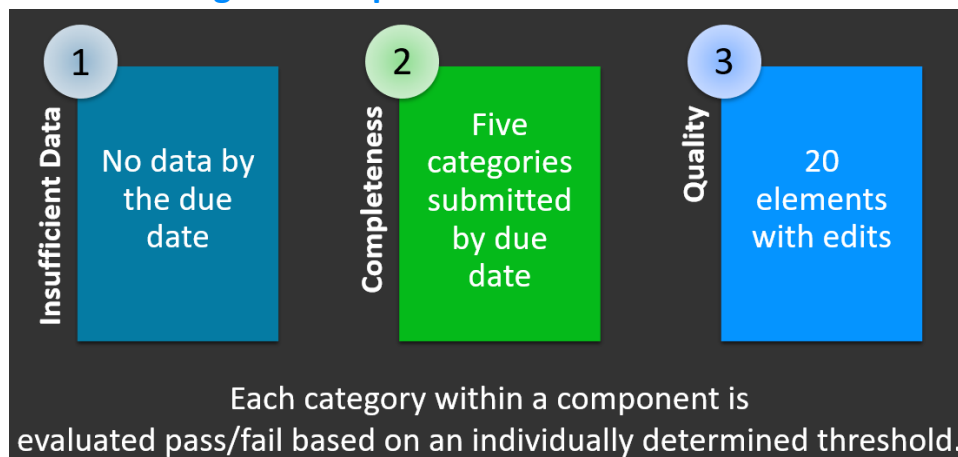
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Incentive Program Components

Compliance Objectives



Incentive Program Components





Data Now Program (DNP) Medical Data Call Compliance

Medical Data Collection Tool

Results are displayed in the **MDC** tool as each file processes.

Review results after final submission for a quarter has processed.

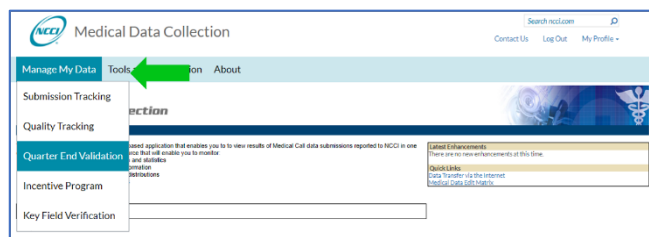
Don't wait until the end of the Due Quarter.

⚠ Early review allows time to respond to any issues.

- Compliance results available in the **Medical Data Collection (MDC)** tool:
 - Quarter End Validation
 - Incentive Program

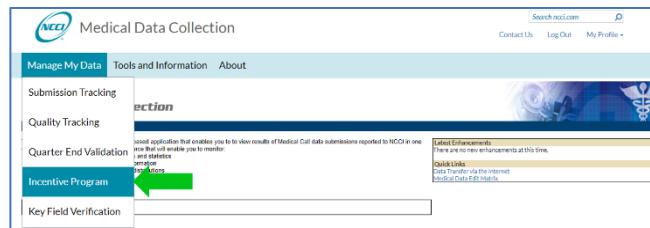
Quarter End Validation

- Displays Compliance Category Results
 - All medical states
 - NCCI compliance states
 - Independent bureau states (individually by State)
- Fine Amounts Are Not Displayed
- Will Show Independent Bureau States: IN, MI, MN, NC



Incentive Program

- Displays Compliance Category Results
 - NCCI Compliance States Only
- Fine Amounts are Displayed





Data Now Program (DNP) Medical Data Call Compliance

Incentive Results Screen

■ Search Results by Reporting Quarter

■ View the Highest Level of Results

- Which components are failing?
- How much is the fine amount?

Incentive Program Assessment Categories

1. Insufficient Data
2. Completeness
3. Quality

Insufficient Data Assessment

Incentive Results [View Incentive Fine Parameters](#)

Countrywide Market Share: 0.11%
TOTAL FINE: \$3,750
TOTAL BILLED FINE: \$3,750

| Insufficient Data Received | Fine Amount |
|----------------------------|-------------|
| Base Fine Amount | \$3,750 |
| Fine Multiplier | x 1.00 |
| Total Fine | \$3,750 |

✓ Insufficient Data Assessment
✗ Completeness Assessment
✗ Quality Assessment

Submission Tracking

- Search Results by Reporting Quarter
- View the Status of Your Submissions
 - Was the file submitted?
 - Was the file processed or rejected?
 - Were any records returned?

NCCI Medical Data Collection

[Manage My Data](#) [Tools and Information](#) [About](#)

Submission Tracking

Carrier Group Code: Qtr/Year: 2023 (Current Qtr/Year - 3 Qtr/2024)

Received Dates: Thru: Submission Status: Submission Type:



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Completeness Components

NCCI's minimum threshold is derived from NAIC Calendar Year (CY) Paid Losses

Policy Year
Paid Losses

Losses for policies
written in a given
year.

Accident Year
Paid Losses

Losses for accidents
occurring in a given
year.

Calendar Year
Paid Losses

Transaction
occurring in a given
year.

Completeness Components

- State
- Coverage Provider
- Medical Data Provider
- Medical Service
- Service Date Distribution

State

Verify that transactions are received for each expected state.

Paid Loss

At least \$1,000,000
NAIC Paid Loss in
the state.

Medical Paid
Amount

Approximately one
transaction per
\$500 in medical
paid.

Assumption

Medical/ Indemnity
split assumptions:
55%

Minimum transaction threshold is based on a group's NAIC CY Paid Losses in that state.



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Coverage Provider

Verify that transactions are received for each expected coverage provider.

Paid Loss

At least \$1,000,000
NAIC Paid Loss in all
states.

Medical Paid Amount

Approximately one
transaction per \$500
in medical paid.

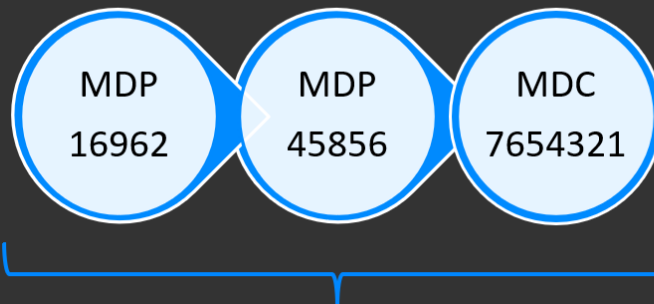
Assumption

Medical/ Indemnity
split assumptions:
55%

Minimum transaction threshold is based on coverage provider's NAIC CY Paid Losses in all NCCI compliance states.

Medical Data Provider

- Verify that transactions are received for each expected medical data provider (MDP).



Minimum of **one** transaction per quarter.

Medical Service

- Verify that sufficient pharmacy data has been included in the quarterly data.

of Transactions
(Place of Service = Pharmacy
+
Taxonomy = Pharmacist)

$$\frac{\text{# of Transactions}}{\text{# of Transactions Reported for the Quarter}}$$

=

At least 4% of
transactions

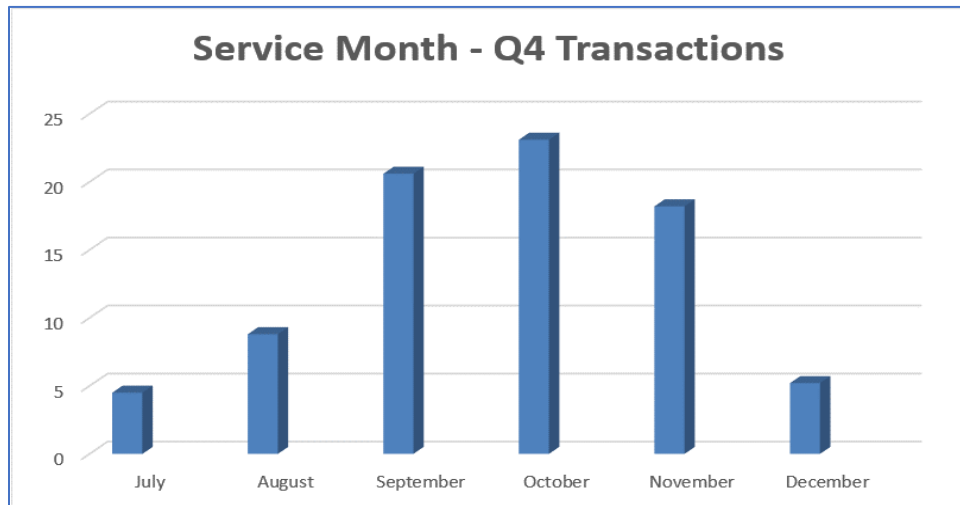




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Service Date Distribution

The six most recent service months must have three consecutive months each containing at least 12% of the transactions submitted for the quarter.



Knowledge Check

Which of the following is not a category for Completeness:

- A. Coverage Provider
- B. State
- C. Transaction Date Distribution

Incentive Results—Completeness

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Medical Data Call fine amounts for the quarter will be finalized on 12/31/2024 12:00:00 AM. Until finalized, fine amounts are considered preliminary and may change with each data submission.

Incentive Program

Incentive Results | Completeness Results | Quality Results

To view Incentive Program Results, select a Carrier Group Code and Quarter/Year, and then click 'Search'.

Carrier Group Code: 45856 - NCCI TRAINING COMPANY | Qtr/Year: 3 Qtr / 2024 | (Current Qtr/Year - 4 Qtr/2024)

Data as of 10/23/2024 | Due Date 12/31/2024 | 45856 - NCCI TRAINING COMPANY | Quarter/Year 3 Qtr/2024

Incentive Results

Countrywide Market Share: 0.99%
TOTAL FINE: \$1,550
TOTAL BILLED FINE: \$1,550

| Completeness | Fine Amount | Quality | Out of Range | Fine Amount |
|---------------------------------|-------------|------------------------|--------------|-------------|
| Categories Not Complete On Time | 2 | Critical Data Elements | 0 | \$0 |
| | | Priority Data Elements | 1 | \$250 |
| | | Low Data Elements | 1 | \$50 |
| Base Fine Amount | \$1,250 | Base Fine Amount | | \$300 |
| Fine Multiplier | x 1.00 | Fine Multiplier | | x1.00 |
| Total Completeness Fine | \$1,250 | Total Quality Fine | | \$300 |



Data Now Program (DNP) Medical Data Call Compliance

Completeness Results

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Medical Data Call fine amounts for the quarter will be finalized on 12/31/2024 12:00:00 AM. Until finalized, fine amounts are considered preliminary and may change with each data submission.

Incentive Program

Incentive Results Completeness Results

To view Incentive Program Completeness Results, select a Carrier Group Code and Quarter/Year, and then click 'Search'.

Carrier Group Code: 45856 - NCCI TRAINING COMPANY Qtr/Year: 3 Qtr / 2024 (Current Qtr/Year - 4 Qtr/2024)

Search Clear Search

Data as of 10/23/2024 Due Date 12/31/2024 45856 - NCCI TRAINING COMPANY Quarter/Year 3 Qtr/2024

Completeness Results

| Completeness Category | Completion Date | Complete on Time |
|---------------------------|-----------------|------------------|
| State | 09/30/2024 | Yes |
| Coverage Provider | | No |
| Medical Data Provider | 08/30/2024 | Yes |
| Medical Service | 08/30/2024 | Yes |
| Service Date Distribution | | No |

Service Date Distribution

Identifying the gap in service dates can reveal potentially missing transactions for May, August, or September.

| Completeness Results | | |
|---------------------------|-----------------|---|
| Completeness Category | Completion Date | Complete on Time |
| State | 09/30/2024 | Yes |
| Coverage Provider | | No |
| Medical Data Provider | 08/30/2024 | Yes |
| Medical Service | 08/30/2024 | Yes |
| Service Date Distribution | | No |
| Service Month | Actual Percent | In order to qualify for Complete On Time, a minimum of three consecutive service months must be greater than or equal to 12.0% threshold. |
| Apr-24 | 3.1% | |
| May-24 | 10.1% | |
| Jun-24 | 31.6% | |
| Jul-24 | 34.1% | |
| Aug-24 | 9.3% | |
| Sep-24 | 0.8% | |

Trending Within a Category

Comparing the count of Actual Transactions to the Threshold for each State or Coverage Provider can reveal a potentially missing file for a Coverage Provider.



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| Completeness Results | | | | |
|---------------------------|-----------|---------------------|-----------------|------------------|
| Completeness Category | | | Completion Date | Complete on Time |
| State | | | 09/30/2024 | Yes |
| State | Threshold | Actual Transactions | Completion Date | Complete on Time |
| FL | 1,485 | 8,000 | 09/30/2024 | Yes |
| GA | 368 | 2,000 | 08/30/2024 | Yes |
| Coverage Provider | | | | No |
| Coverage Provider | Threshold | Actual Transactions | Completion Date | Complete on Time |
| 16962 | 1,485 | 0 | 07/01/2024 | No |
| 45856 | 1,633 | 10,000 | 09/30/2024 | Yes |
| Medical Data Provider | | | 08/30/2024 | Yes |
| Medical Service | | | 08/30/2024 | Yes |
| Service Date Distribution | | | | No |

Research File Submissions

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Submission Tracking

Provider ID 45856

Qtr/Year 3 Qtr / 2024 (Current Qtr/Year - 4 Qtr/2024)

Received Date(s) (mm/dd/ccyy) Thru

Submission Status All

Submission Type All

Search Clear Search

Data as of 10/23/2024

45856 - NCCI TRAINING COMPANY

Quarter/Year 3 Qtr/2024

Submission Status All

| # | Med Data Prvdr ID | Rpt Qtr/Yr | Submn Status | Trans Type | File Type | Receive Date/Time | Process Date/Time | Unique File Identifier | File Name | User ID | NCCI Trkng Nbr |
|---|-------------------|------------|--------------|------------|-----------|---------------------|---------------------|------------------------|-----------------------------|---------|----------------|
| 1 | 45856 | 3Q - 2024 | Completed | Production | Original | 10/15/2024 22:34:52 | 10/15/2024 23:33:45 | 45856_3q2024_c45856 | medical.3q2024_jul45856.txt | 1219247 | 3389068 |
| 2 | 45856 | 3Q - 2024 | Rejected | Production | Original | 10/15/2024 22:14:53 | 10/15/2024 23:10:06 | 45856_3q2024_c16962 | medical.3q2024_jul45856.txt | 1219247 | 3389067 |

| Transaction | Submitted | Processed | Rejected |
|-------------|-----------|-----------|----------|
| Total | 1000 | 0 | 1000 |

| Count | Reject Details |
|-------|--|
| 1 | Submission rejected for - Record total does not match actual record count. |

| | | | | | | | | | | | |
|---|-------|-----------|-----------|------------|----------|---------------------|---------------------|---------------|--------------------------|---------|---------|
| 6 | 45856 | 3Q - 2024 | Completed | Production | Original | 09/15/2024 22:11:18 | 09/15/2024 23:04:55 | 45856_08_2024 | medical.45856aug.txt | 1219247 | 3388959 |
| 7 | 45856 | 3Q - 2024 | Completed | Production | Original | 09/15/2024 22:03:06 | 09/15/2024 22:28:52 | 45856_07_2024 | medical.45856jul2024.txt | 1219247 | 3388958 |

- Submission Status
- Rejected File
- Research Cause

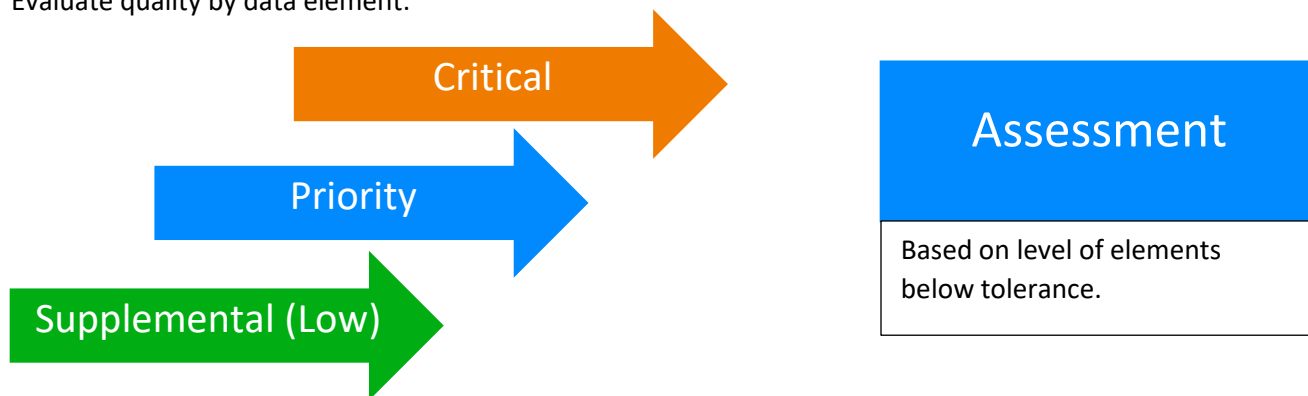


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Quality Components

Quality

Evaluate quality by data element:



Critical Elements

Elements necessary for a transaction to have value:

| Element | Tolerance % |
|----------------------------|-------------|
| Accident Date | 95 |
| Amount Charged by Provider | 95 |
| Jurisdiction State Code | 95 |
| Paid Amount | 95 |
| Service Dates | 95 |

Priority Elements

Elements needed for legislative analysis:

| Element | Tolerance % |
|---|-------------|
| Network Service Code | 95 |
| *Provider Identification Number (NPI) | TBD |
| Provider Postal *(ZIP+4) Code | TBD |
| Provider Postal Zip Code | 95 |
| Quantity/Number of Units per Procedure Code | 95 |
| Paid Procedure Code | 90 |
| Place of Service Code | 80 |
| Provider Taxonomy Code | 80 |
| Primary IDC Diagnostic Code | 70 |
| (First) Paid Procedure Code Modifier | 5 |



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Supplemental (Low) Elements

Elements used in specialized studies:

| Element | Tolerance % |
|---------------------------------------|-------------|
| (Second) Paid Procedure Code Modifier | 95 |
| Birth Year | 80 |
| Claimant Gender Code | 80 |
| Secondary ICD Diagnostic Code | 10 |
| Secondary Procedure Code | 0 |

Quality Component Example

- From the Manage My Data, select the Incentive Program
- Quality Results on the right
- Priority Data category shows one of the priority data elements does not meet the criteria

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Medical Data Call fine amounts for the quarter will be finalized on 12/31/2024 12:00:00 AM. Until finalized, fine amounts are considered preliminary and may change with each data submission.

Incentive Program

Incentive Results Completeness Results Quality Results

To view Incentive Program Results, select a Carrier Group Code and Quarter/Year, and then click Search.

Carrier Group Code: 45856 - NCCI TRAINING COMPANY Qtr/Year: 3 Qtr / 2024 (Current Qtr/Year - 4 Qtr/2024)

Search Clear Search

Data as of 10/23/2024 Due Date 12/31/2024 45856 - NCCI TRAINING COMPANY Quarter/Year 3 Qtr/2024

Incentive Results View Incentive Fine Parameters

Countrywide Market Share 0.99%
TOTAL FINE \$750
TOTAL BILLED FINE \$750

| Completeness | Fine Amount | Quality | Out of Range | Fine Amount |
|---------------------------------|-------------|------------------------|--------------|-------------|
| Categories Not Complete On Time | 1 | Critical Data Elements | 0 | \$0 |
| | | Priority Data Elements | 1 | \$125 |
| | | Low Data Elements | 0 | \$0 |
| Base Fine Amount | \$625 | Base Fine Amount | | \$125 |
| Fine Multiplier | x 1.00 | Fine Multiplier | x 1.00 | |
| Total Completeness Fine | \$625 | Total Quality Fine | | \$125 |



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Quality Results Example

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Medical Data Call fine amounts for the quarter will be finalized on 12/31/2024 12:00:00 AM. Until finalized, fine amounts are considered preliminary and may change with each data submission.

Incentive Program

Incentive Results **Completeness Results** **Quality Results**

To view Incentive Program Results, select a Carrier Group Code and Quarter/Year, and then click "Search".

Carrier Group Code: 45856 - NCCI TRAINING COMPANY Qtr/Year: 3 Qtr / 2024 (Current Qtr/Year - 4 Qtr/2024)

Data as of 10/23/2024 45856 - NCCI TRAINING COMPANY Quarter/Year 3 Qtr/2024
Due Date 12/31/2024

Incentive Results [View Incentive Fine Parameters](#)

Countrywide Market Share: 0.99%
TOTAL FINE: \$750
TOTAL BILLED FINE: \$750

| Completeness | Fine Amount | Quality | Out of Range | Fine Amount |
|---------------------------------|-------------|------------------------|--------------|-------------|
| Categories Not Complete On Time | 1 | Critical Data Elements | 0 | \$0 |
| | | Priority Data Elements | 1 | \$125 |
| | | Low Data Elements | 0 | \$0 |
| Base Fine Amount | \$625 | Base Fine Amount | | \$125 |
| Fine Multiplier | x 1.00 | Fine Multiplier | | x1.00 |
| Total Completeness Fine | \$625 | Total Quality Fine | | \$125 |

Primary ICD Diagnostic Code Element Example

Data as of 10/23/2024 45856 - NCCI TRAINING COMPANY Quarter/Year 3 Qtr/2024
Due Date 12/31/2024

Quality Results

| Element Category | Element(s) Out of Range | Fine Per Element | Fine Amount | | | |
|---|-------------------------|------------------|---------------------------|--------------|------------------|-------------|
| Critical | 0 of 5 | \$250 | \$0 | | | |
| Priority | 1 of 9 | \$125 | \$125 | | | |
| Element | Threshold % | % Passing Edits | Records that Failed Edits | Edit Seq Nbr | Edit Description | Fine Amount |
| NETWORK SERVICE CODE | 95.0% | 100.0% | | | | \$0 |
| PROVIDER IDENTIFICATION NUMBER | 95.0% | 100.0% | | | | \$0 |
| PROVIDER POSTAL ZIP CODE | 95.0% | 100.0% | | | | \$0 |
| QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE | 95.0% | 100.0% | | | | \$0 |
| PAID PROCEDURE CODE | 90.0% | 100.0% | | | | \$0 |
| PLACE OF SERVICE CODE | 80.0% | 100.0% | | | | \$0 |
| PROVIDER TAXONOMY CODE | 80.0% | 100.0% | | | | \$0 |
| PRIMARY ICD DIAGNOSTIC CODE | 70.0% | 65.1% | | | | \$125 |
| FIRST PAID PROCEDURE CODE MODIFIER | 5.0% | 100.0% | | | | \$0 |
| Low | 0 of 5 | \$25 | \$0 | | | |
| | | | Total Fine Amount: \$125 | | | |

PRIMARY ICD DIAGNOSTIC CODE 70.0% 65.1%

[Click on Edit Seq Nbr link to request report](#) 3,490 [0509-02](#) Primary ICD diagnostic code is not a valid ICD code.

Click on Edit Sequence Number link to request a report.

Quality Results—Review Edit Extracts

- Request reports of failing reported values.
 - Quarter End Validation
 - Incentive Program



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Request Reported Failing Values Information
☐ Request Report - Frequency listing of reported failing values for edit
☐ Request Extract - Extract file details of reported failing values for edit
☐ Request Both

Submit Cancel



Requested edit reports will be sent to your **Data Transfer via the Internet (DTVI)** mailbox.

Request for Failing Values

Delimited files provide information to help diagnose data quality issues.

| Edit Frequency Report | Edit Detail Extract |
|---|---|
| Count of bill lines reporting invalid values. | Key details of bill lines reporting invalid values. |
| Identifies which reported values failed the edit. | Allows investigation within source system. |

Knowledge Check

A minimum threshold per state is established if Calendar Year Paid Losses are at least:

- A. \$1
- B. \$2,500
- C. \$1,000,000

Which of the following is not an independent bureau state required to report medical data to NCCI?

- A. IN
- B. PA
- C. NC

Assessment Calculation

Assessment Levels

Assessment amounts are based on countrywide market share tiers:

| Incentive Results | | View Incentive Fine Parameters | | |
|---------------------------------|-------------|--------------------------------|--------------|-------------|
| Countrywide Market Share 0.20% | | | | |
| TOTAL FINE \$0 | | | | |
| TOTAL BILLED FINE \$0 | | | | |
| Completeness | Fine Amount | Quality | Out of Range | Fine Amount |
| Categories Not Complete On Time | 0 | Critical Data Elements | 0 | \$0 |
| | | Priority Data Elements | 0 | \$0 |
| | | Low Data Elements | 0 | \$0 |
| Base Fine Amount | \$0 | Base Fine Amount | | \$0 |
| Fine Multiplier | x 1.00 | Fine Multiplier | | x 1.00 |
| Total Completeness Fine | \$0 | Total Quality Fine | | \$0 |

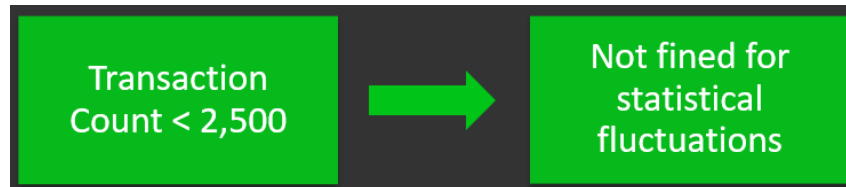
| Assessment Level | Market Share Range |
|------------------|--------------------|
| 1 | 0.00%–0.25% |
| 2 | > 0.25%–1.50% |
| 3 | > 1.50% |



Data Now Program (DNP) Medical Data Call Compliance

Volume Eligibility

- Statistical inferences are less reliable for low transaction volumes



- Applies to:
 - Medical Services and Service Date Distribution Completeness categories
 - All Quality data elements

Assessment Amounts—Insufficient Data

Based on the reporting group's market share.

| Assessment Level | Market Share Range | Insufficient Data Assessment |
|------------------|--------------------|------------------------------|
| 1 | 0.00%–0.25% | \$ 3,750 |
| 2 | > 0.25%–1.50% | \$ 7,500 |
| 3 | > 1.50% | \$15,000 |

Insufficient Data = No Files

Assessment Amounts—Completeness

Based on the reporting group's market share and the number of completeness categories that did not pass.

| Assessment Level | Market Share Range | Total Completeness Assessment Based on Categories Not Complete on Time | | |
|------------------|--------------------|--|---------|----------|
| | | 1 | 2 | 3–5 |
| 1 | 0.00%–0.25% | \$ 625 | \$1,250 | \$ 2,500 |
| 2 | > 0.25%–1.50% | \$1,250 | \$2,500 | \$ 5,000 |
| 3 | > 1.50% | \$ 2,500 | \$5,000 | \$10,000 |

Assessment Amounts—Quality

Based on the reporting group's market share and the tolerance level (Low, Priority, or Critical) of the data element.

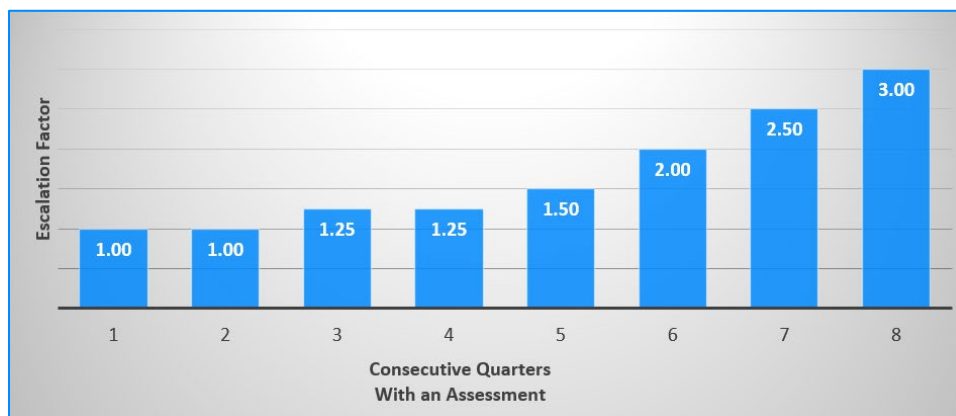


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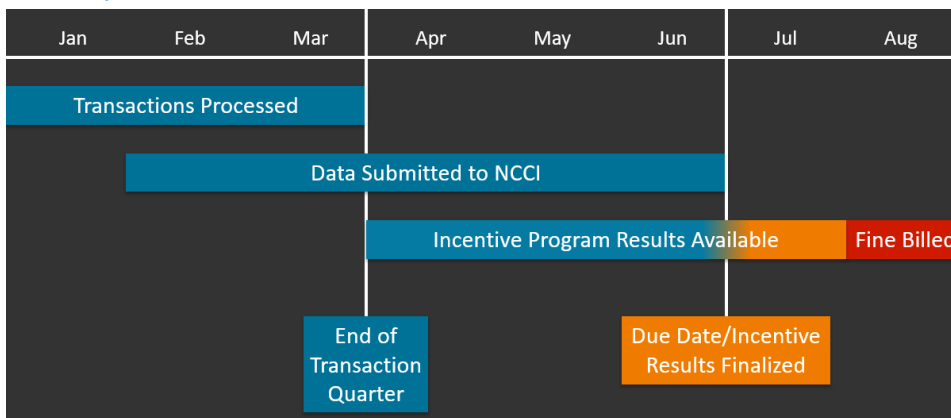
| Assessment Level | Market Share Range | Quality Assessment per Data Element Based on Tolerance Level | | |
|------------------|--------------------|--|----------|----------|
| | | Low | Priority | Critical |
| 1 | 0.00%–0.25% | \$ 25 | \$125 | \$ 250 |
| 2 | > 0.25%–1.50% | \$ 50 | \$250 | \$ 500 |
| 3 | > 1.50% | \$100 | \$500 | \$1,000 |

Assessment Amounts—Fine Multiplier

Assessment amount increases for groups having multiple consecutive quarters with an assessment.



First Quarter Transactions Timeline



Quarterly Schedule Example

Group 45856—NCCI Training Company

- Small-sized regional carrier
- Provides coverages in Florida and Georgia
- Two coverage providers in the group 45856/16962
- Each carrier is its own Medical Data Provider (MDP)



Data Now Program (DNP) Medical Data Call Compliance

- Carrier/MDP 45856 reports monthly
- Carrier/MDP 16962 reports quarterly

Quarterly Schedule Example

| | Jan | Feb | Mar | Apr | May | Jun | July |
|----------------------------------|---|-----|-----|-------------------|-----|-----|---------------------------|
| Transactions Process | Transaction Dates in 1st Qtr | | | | | | 1st Quarter Data Past Due |
| MDP 45856 Submits Data | | | | Monthly | | | |
| MDP 16962 Submits Data | | | | Quarterly | | | |
| Review Incentive Program Results | | | | Earlier is better | | | |
| | Submitting early allows more time to review and respond to issues before quarter end. | | | | | | |

Carrier Data Quality Report—Medical Addendum

Carrier Data Quality Report Program (Carrier Report Card) Objectives

- Evaluates groups' overall annual reporting performance
- Pass or Fail Grade is based on Completeness/Quality
- Not sent to regulators

Carrier Data Quality Report—Medical Data Addendum – Example

2022 Final Medical Data Addendum
Company Specific Data Availability Results - Data Due in 2022

Carrier Group Code: 33912

Carrier Group Name: NCCI TRAINING PROPERTY AND CASUALTY CO

Evaluation Date: 01/01/2023

Creation Date: 02/27/2023

| | | Completeness | | | Quality | | | | |
|-------------------|------------|--------------------------------|----------------------------|-------|-------------------|-------------------|--------------|------------------|-------|
| Reporting Quarter | Due Date | % Categories Completed on Time | Quarters Completed on Time | Grade | Critical Elements | Priority Elements | Low Elements | Quarters Passing | Grade |
| 4Q 2021 | 3/31/2022 | 100% | Y | | 0 | 0 | 0 | Y | |
| 1Q 2022 | 6/30/2022 | 100% | Y | | 0 | 0 | 0 | Y | |
| 2Q 2022 | 9/30/2022 | 100% | Y | | 0 | 0 | 0 | Y | |
| 3Q 2022 | 12/31/2022 | 100% | Y | | 0 | 0 | 0 | Y | |
| | | | | 4 | PASS | | | 4 | PASS |

Completeness Grading

Completeness Grade is based on the number of **Quarters Completed on Time**.

A quarter is complete when 100% of categories are completed by Due Date.

PASS >= 3 quarter(s) completed on time

FAIL < 3 quarter(s) completed on time

Quality Grading

Quality Grade is based on the number of **Quarters Passing**.

A quarter passes if:

- 0 Fined Critical Elements
- <=2 Fined Priority Elements
- <=2 Fined Low Elements

PASS >= 3 quarter(s) passing

FAIL < 3 quarter(s) passing



Data Now Program (DNP) Medical Data Call Compliance

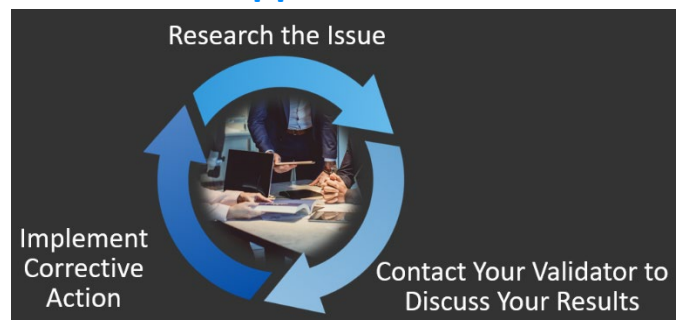
Knowledge Check

Why does the 2022 Carrier Report Card start with Q4 2021 transactions?

Would Completeness pass if only Q4 2021 failed?

Is the overall grade for 2022 pass or fail and why?

Review and Appeals



If you don't know your assigned validator:



800-NCCI-123



customer_service@ncci.com



Data Now Program (DNP) Medical Data Call Compliance

Research the Issue

Completeness

Check Submission Tracking



Determine cause of issue:

- Did a submission reject?
- Did your Medical Data Provider(s) submit the data for the quarter?
- Did something change (e.g. new Bill Review Vendor)?

Implement Corrective Action



Determine plan for issue resolution:

- Correction of issue in future submissions
- Possible correction of historical data
- Testing system changes (required)!

Quality

Check Quality Results



Determine cause of issue:

- Did you or your Medical Data Provider(s) make a system change?
- Did you report NPI for the Provider ID?
- Are there new tables (e.g., ICD or CMS)?
- Did something change (e.g., new Bill Review Vendor)?

Implement Corrective Action



Determine plan for issue resolution:

- Correction of issue in future submissions
- Possible correction of historical data
- Testing system changes (required)!

Contact NCCI

Contact your validator when the issue is with your system or processes.

Cause of the Issue



- Outside Medical Data Provider/Bill Review Vendor/Pharmacy Benefits Manager
- System Changes—requires submission of test files post change

What will be corrected



- Historical data
- Future submissions only



Additional information may be required.



Data Now Program (DNP) Medical Data Call Compliance

Contact your validator when the issue is **not** with your system or processes.

Completeness



- Quarterly total medical paid
- Business exclusion(s)
- Details of any large losses or losses being handled as a lump sum
- Details of any losses outside the Medical Data Call reporting period

Quality



- Reference showing that edited values are valid industry-standard codes
- Documentation of in-house codes for review



Additional information may be required.

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