

Medical Data Collection Tool

User's Guide		

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Medical Data Collection Overview

Medical Data Collection:

- □ Is a Web-based application
- □ Enables you to monitor your data reporting performance
- □ Is a read-only tool; therefore, you cannot make updates to your data via this tool
- Can benefit anyone involved with data reporting (data reporters, management, etc.)

Benefits

- Medical Data Collection is a valuable source of information because it provides you with a view of your data reporting performance
- It enables you to manage your data reporting more efficiently by targeting areas that need improvement

Key Features

- You can track your submissions with file level information such as received and process dates, as well as a status of the submission—completed or rejected
- □ You can view data reporting statistics on:
 - Quality Tracking
 - Quarter End Validation distribution graphs
 - Quarter End Completeness and Quality results
 - Incentive Program results
 - Key Field Verification
- Two access levels:
 - Medical Data Submitter Access—Allows users who are not part of the Carrier Group Code to view processing results of files submitted by their company.
 - Carrier Group Results—Allows users who are part of the Carrier Group Code to view processing results of all submissions submitted on the group's behalf.
 Carrier Group access provides aggregate Quarter End Validation, Incentive Program and Key Field Verification Group level results.

Note: Quarter End Validation, Incentive Program and Key Field Verification Group results are not viewable under Medical Data Submitter Access.

Logging In

- To receive access to *Medical Data Collection*, contact NCCI's Customer Service Center at 800-NCCI-123 (800-622-4123)
- Go to **ncci.com**
- Enter your **User ID** and **Password** in the Login box
- Click Log In

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Click MEDICAL DATA CALL



Select Medical Data Collection from the Products section

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Main Page Features

The *Medical Data Collection* main page has important information for using the tool.



The Four Quadrants

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- The About Medical Data Collection section (1) describes the various focus areas of Medical Data Collection
- □ The Latest Enhancements section (2) displays the latest updates made to *Medical Data Collection*

Medical Data Collection Tool User's Guide

Manuals Library

- □ The **System Alerts and Information** section (3) provides up-to-the-minute information on current system or data issues in *Medical Data Collection*
- □ The Quick Links section (4) allows users to easily access additional data-related information

Useful Features

- At the top-left of the screen is the NCCI logo. Click this logo to return to ncci.com.
- To return to the *Medical Data Collection* main page from any window within the tool, click the Medical Data Collection link in that window.

- **D** To perform a search within **ncci.com**, type a keyword into the **Search ncci.com** box at the top-right of the screen and click the Magnifying Glass icon
- □ In the footer at the bottom of the screen, there are several links:
 - NCCI Home Page
 - Contact Us
 - Data Transfer via the Internet
 - Data Manager Dashboard
 - Manuals Library
 - Medical Data Collection Tool User's Guide
 - Disclaimer

Main Menu Features

The Manage My Data tab allows you to select from one of five options: Submission Tracking, Quality Tracking, Quarter End Validation,* Incentive Program,* or Key Field Verification*

Medical	Data Collection	Search ncci.com O Contact Us Log Out My Profile -
Manage My Data Too	ls and Information About	
Submission Tracking	ection	
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Quarter End Validation	ased application that enables you to to view results of Medical Call data submissions reported to NCCI in one rce that will enable you to monitor: and statistics bornation	Latest Enhancements 7/16/24 Enhancement: A new Medical data field, Provider Postal (Zip +4) Code, has now been implemented within the <i>Medical Data Collection</i> tool.
Incentive Program	Jistribulions	The new field vill be displayed as a Priority element within the following screens: Quality Tracking Quarter End Validation (within the Quality Results tab)
Key Field Verification		Incentive Program (within the Quality Results tab) There are 3 edits associated with this element (0534-01, 0534-02, 0534-03) which are viewable, (if applicable) by expanding the Provider Postal (Zip +4) Code element record.
		Refer to Part 5.A.24 of the <i>Medical Data Call Reporting Guidebook</i> for further details regarding the Provider Postal (Zip +4) Code field.
		Quick Links Data Transfer via the Internet Medical Data Edit Matrix

- * Based on the user's level of access.
 - □ The **Tools and Information** tab provides additional links to tools and information to assist you with data reporting

Med	ical Data Collection		Contact U	Search ncci.com Js Log Out	₽ My Profile ►
Manage My Data	Tools and Information				
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	Submission Tracking System (STS)		Refer to Part 5.A.24 of the <i>Medica</i> further details regarding the Provid	d Data Call Report der Postal (Zip +4)	ting Guidebook for Code field.
l		1	Quick Links Data Transfer via the Internet Medical Data Edit Matrix		

Submission Tracking

Submission Tracking enables users to view the status of medical data submissions. Upon completion of file submission, the submitter can navigate to the *Medical Data Collection* tool and, under Manage My Data, choose the Submission Tracking option.

Follow the steps below to view your submissions.

1. Hover over the Manage My Data tab and click Submission Tracking.

Medical	Data Collect	ion			
Manage My Data Tool	s and Information	About			
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Incentive Program	;				
Key Field Verification					

- 2. Select from the following search criteria:
 - □ Carrier Group Code
 - □ Qtr/Year or Received Date(s)
 - D Submission Status: All, Completed, In Progress, Rejected
 - □ Submission Type: All, Transaction, Key Field Change

Note: Submission Status and Submission Type default to All.

3. Click Search.

Medical Data Collect	Contact U	Search ncci.com	♀ My Profile ◄			
Manage My Data Tools and Information	About					
Submission Tracking						
Carrier Group Code 45856 - NCCI TRAINING COMPANY Received Date(s) (mm/dd/ccyy) Thru	~	Qtr/Year Select V/	(Current Qtr/Year - 3 Qtr/2024) Submission Type All	٩	Search	Clear Search

Note: If the search criteria you select produce no results, a prompt will appear stating, "No results found."

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- 4. Based on the search criteria you entered, submissions are displayed with the following information:
 - □ #—The sequential order of files
 - □ Med Data Provider ID—The ID for who submitted the data file
 - Reporting Qtr/Yr—The quarter/year for which the file was reported
 - Submission Status—If the status is underlined, records from the file have been returned:
 - Completed—File has completed processing and was not rejected
 - In Progress—File is still processing
 - Rejected—File has been rejected during the File Acceptance Editing phase
 - Transmission Type—Either Production or Certification based on the file naming convention
 - □ **File Type**—The type of file (e.g., Original, Replacement, Key Field Change)
 - Receive Date/Time—The date and time the file was received
 - Process Date/Time—The date and time the File Acceptance Editing was completed
 - Unique File Identifier—The unique filename given by the submitter on the submission control record
 - File Name—The name that the file was given by the submitter
 - **User ID**—The ID of the user who submitted the file
 - NCCI Tracking Number—Assigned by NCCI to track the submission

		Data	as of 07/21	1/2020				99990	- NCCI INC	Received Date: Submission Status	s From 7/15/20 All	20
	#	Med Data Prvdr ID	Rpt Qtr/Yr	Sbmn Status	Trans Type	File Type	Receive Date/Time	Process Date/Time	Unique File Identifier	File Name	User ID	NCCI Trkng Nbr
►	1	99990	1Q - 2020	In Progress	Production	Key Field Change	07/21/2020 13:45:15		99990LF_KFCTST1Q2020	medkey.lisatest99990.txt	1127065	3974239
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F	7	99990	1Q - 2020	Completed	Production	Original	07/21/2020 13:08:02	07/21/2020 13:19:53	99990LF_INFRATST1Q2020	medical.lfinfratest1q2020.txt	1127065	3974224

- **Printer Icon**—Link at the top-right of the results table opens a pop-up version of the results for printing
- 5. To display the total number of records Submitted, Processed, and Rejected for any file, as well as the Key Field Verification results for the file, expand the line number by clicking the expand arrow next to that file.

Medical Data Collection Tool User's Guide

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	Ed	it Seq Nt	or				Reject	Details					Occurre of Ed	nces it	Record Subject to	ls Edit	% of Occurrence	;		
		0028-01	Carrie	r code is mis	sing or not a v	alid carri	er code.							1		2,966	0	0%		
		0033-01	Claim	number iden	ntifier is invalio	l, missing	, or all zeros							1		2,966	0	0%		
	D)ata Type	9		Verifica	tion Pa	rameters			Key F Revie	ields wed	Ke F	y Fields Found	Pe	rcentage Found	K	ey Fields Not Found			
	Polic	ÿ	Carrie	r Code, Polic	y Number						2,6	16	C		0.0%	(2,616			
	Polic	γ	Carrie	r Code, Polic	y Number, Po	licy Effec	tive Date				2,6	16	C		0.0%	(2,616			
	Unit		Carrie	r Code, Polic	y Number, Po	licy Effec	tive Date				2,6	16	C		0.0%	(2,616			
	Unit		Carrie	r Code, Polic	y Number, Po	licy Effec	tive Date, C	laim Number			2,6	16	C		0.0%	(2,616			

- □ Key Field Verification results displayed in the Submission Tracking screen provide medical data reporters a view of individual file level results for the Medical Data Call key fields
- The Medical Claim Keys are verified against the keys reported in the Policy and Unit Statistical Data
- Users with Carrier Group Level access will be able to download the Key Field Verification results at the file level, from the Submission Tracking Screen by selecting the blue download icon

Note: For the Key Field Verification, comparison between the Medical Data Call and the Policy Data key fields occurs on a rolling 48-month basis starting with the current month, based on the Policy Effective Date of the claim submitted on the Medical Data Call.

The Key Field Verification comparison between the Medical Data Call and the Unit Statistical Data key fields occurs on a rolling 28-month basis starting with the current month minus 20 months, based on the Policy Effective Date of the claim submitted on the Medical Data Call.

The parameters evaluated are noted on the header of the Key Fields Not Found Download.

For information on how to make Key Field Changes to previously reported Medical Data Call records, please refer to the *Medical Data Call Reporting Guidebook*.

- 6. You now have the following options:
 - To return to the application main page, click the Medical Data Collection link at the top left of the window
 - □ To access another component from the main page, hover over **Manage My Data** and select another tab
 - **D** To exit the application, click the **NCCI** logo to return to **ncci.com**

Quality Tracking

The purpose of Quality Tracking is to validate the data elements and capture quality statistics for the submission file level and aggregate results. After a file completes Quality Tracking Editing, the submitter can navigate to the *Medical Data Collection* tool and, under Manage My Data, choose the **Quality Tracking** option. All fields must be populated before selecting the **Search** button on the Quality Tracking Filter screen.

Follow the steps below to view the Quality Tracking results.

1. Hover over the Manage My Data tab and click Quality Tracking.

Medical	Data Collection
Manage My Data Tool	s and Information About
Submission Tracking	action
Quality Tracking	
Quarter End Validation	based application that enables you to to view re rice that will enable you to monitor: and statistics promation
Incentive Program	distributions
Key Field Verification	

- 2. To select the type of results you want to view, choose one of two tabs—File Level Results or Aggregate Results.
- 3. Select from the following search criteria:
 - Carrier Group Code
 - Qtr/Year
 - □ Transmission Type

Note: Transmission Type defaults to Production.

4. Click Search.

Medical Data Collection		Contact Us	Search ncci.com Log Out	© My Profile ◄
Manage My Data Tools and Information About				
Quality Tracking File Level Results Aggregate Results				
Carrier Group Code 45856 - NCCI TRAINING COMPANY	Qtr/Year Select V	(Current Qt	r/Year - 3 Qtr/202 Clear Sea	24) rch
	Production Certification	1		
© 2024 National Council on	11 Compensation Insurance, Inc. All Rights	Reserved.		

File Level Results Tab

Selecting the **File Level Results** tab displays each file submission for the Medical Data Provider. The results are grouped to display the results for each file submission at the file level.

Data as of 08/22/2024		Data as of 08/22/2024	45856 - NCCI TRAINING COMPANY	Quarter/Year 2 Qtr/2024	
			File Level Results	Iransmission Type Production	
		Med Data Provider ID	Med Data Provider Name		
	•	45856	NCCI TRAINING COMPANY		

Medical Data Provider ID/Medical Data Provider Name

- If the Medical Data Provider is not part of the reporting group, results will show only forfiles submitted by the Medical Data Provider
- □ If the Medical Data Provider is part of the Carrier Group Code, the results will be grouped at an account level for all files submitted on behalf of the group

	Med Data Provider ID	Med Data Provider Name
►	45856	NCCI TRAINING COMPANY

- Expanding the **Med Data Provider ID** displays:
 - Submission File ID-Reported on the submission control record
 - Received Date—Date NCCI received the file
 - Nbr of Records—Number of records that passed into Quality Tracking
 - File Type—Reported on the control record
 - File Name—Name of the file, as submitted
 - View Validation Results link-Opens a pop-up window to display Validation edit results

	Data as 01 00/22/2024		43030 - NCCI IK			Quarter/rear 2 QU/2024
			Fil	e Level Results		Transmission Type Production
	Med Data Provider ID	Med Data Provider Name				
-	45856	NCCI TRAINING COMPANY				
	Submission File Id	Received Date	Nbr of Records	File Type	File Name	
1	BILXOX20240821X092200000	0 08/21/2024	2,964	Original	medical.mdc_userguide_screenshots.txt	View Validation Re

• Expanding the **Submission File ID** displays Quality Tracking Element Results:

- Critical Element(s)
- Priority Element(s)
- Low Element(s)

		Submission File Id	Received Date	Nbr of Records	File Type	File Name			
	BIL	XOX20240821X0922000000	08/21/2024	2,964	Original	medical.mdc_userguide_screenshots.txt	View Validation Results		
	►	1 of 5 Critical Element(s) outside of range							
	►	3 of 10 Priority Element(s) outside of range							
	►	0 of 5 Low Element(s) outside	of range						

□ Expanding Critical, Priority, or Low Element(s) further produces:

- Element-Lists elements that are in each edit category
- Threshold %—The minimum percentage that must be met for the data element to be considered in range
- % Passing Edits—Displays the percentage passing for the Quality Tracking Editing for each element

4 1 of	1 of 5 Critical Element(s) outside of range									
•	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description				
	ACCIDENT DATE	95.0%	100.0%							
	AMOUNT CHARGED BY PROVIDER	95.0%	100.0%							
•	JURISDICTION STATE CODE	95.0%	88.3%							
	PAID AMOUNT	95.0%	100.0%							
	SERVICE DATE(S)	95.0%	100.0%							

- Expanding **Element** displays additional information:
 - Records that Failed Edits-Displays the number of files that failed the edit
 - Edit Seq Nbr-Displays the edit matrix sequence number
 - Edit Description—Displays the Edit Message from the edit matrix

4	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description
	ACCIDENT DATE	95.0%	100.0%			
	AMOUNT CHARGED BY PROVIDER	95.0%	100.0%			
	JURISDICTION STATE CODE	95.0%	88.3%			
				348	0108-04	Jurisdiction state code is not an applicable jurisdiction.
	PAID AMOUNT	95.0%	100.0%			
	SERVICE DATE(S)	95.0%	100.0%			

Printer Icon—Link at the top-right of the results table opens a pop-up version of the results for printing

Data as of 09/18/2019	45856 - NCCI TRAINING COMPANY	Quarter/Year 2 Qtr/2019	
	File Level Results	Transmission Type Production	_

Validation Results

Clicking the View Validation Results link displays additional validation results not considered part of element-level Quality Tracking

		Submission File Id	Received Date	Nbr of Records	File Type	File Name		
4	BIL	XOX20240821X0922000000	08/21/2024	2,964	Original	medical.mdc_userguide_screenshots.txt	View Validation Results	
	►	1 of 5 Critical Element(s) outsi	ide of range					
	⊬	3 of 10 Priority Element(s) outside of range						
	►	O of 5 Low Element(s) outside of range						

□ The pop-up window displays Validation Results:

	Validation Results for Group 45856 - NCCI TRAINING COMPANY Submission File ID BILXOX20240821X0922000000									
Dat	a as of 08/22/2024 Quarter/Year 2 Qtr/2	024	Transmission Typ	e Production						
Edit Seq Nbr	Edit Description	Occurrences of Edit	Records Subject to Edit	% of Occurrences						
0505-02	Paid amount equals amount charged by provider.	0	2,964	0.0%						
0153-02	Policy effective date is after accident date.	0	2,964	0.0%						
0519-07	Original record already exists.	0	2,964	0.0%						
0505-03	Paid amount is greater than amount charged by provider.	0	2,964	0.0%						
0506-03	Paid procedure code is missing and secondary procedure code is valid.	0	2,964	0.0%						
0507-04	First paid procedure code modifier is missing and second paid procedure code modifier is valid.	0	2,964	0.0%						
0509-03	Primary ICD diagnostic code is missing and secondary ICD diagnostic code is valid.	0	2,964	0.0%						
0514-02	Secondary ICD diagnostic code is equal to the primary ICD diagnostic code.	0	2,964	0.0%						
0515-02	Secondary procedure code is equal to the paid procedure code.	0	2,964	0.0%						

- Edit Seq Nbr—Displays the edit matrix sequence number
- Edit Description-Displays the Edit Message from the edit matrix
- Occurrences of Edit-Number of records with the specified edit condition
- Records Subject to Edit—Number of records the specified edit checked (e.g., paid amount equals amount charged by provider is tested only on records where these two fields are validly reported numbers)
- % of Occurrences—Indicates how often the edit condition existed when it could have existed
- Printer Icon—Link at the top-right of the results table opens a pop-up version of the results for printing

Aggregate Results Tab

The **Aggregate Results** are calculated each time a new file is received for the same reporting quarter for the Carrier Group Code and are provided at the Medical Data Provider and Carrier Group Code levels.

Results by Medical Data Provider

- Displays aggregate statistics from all files submitted by each Medical Data Provider
- □ If the Medical Data Provider is not part of a reporting group, the results will be grouped at an account level showing only those file results submitted
- If the Medical Data Provider is part of a Carrier Group Code, the results will be provided for all files

	Med Data Provider ID	Med Data Provider Name	
•	45856	NCCI TRAINING COMPANY	View Validation Results

Expanding the Med Data Provider ID displays:

- Critical Element(s)
- Priority Element(s)
- Low Element(s)

	Med Data Provider ID	Med Data Provider Name
	45856	NCCI TRAINING COMPANY
►	1 of 5 Critical Element(s) outsi	de of range
Þ	3 of 10 Priority Element(s) out	side of range
►	0 of 5 Low Element(s) outside o	of range

□ Expanding Critical, Priority, or Low Element(s) further produces:

- Element-Lists elements that are in each edit category
- Threshold %—The minimum percentage that must be met for the data element to be considered in range
- % Passing Edits—Displays the percentage passing for the Quality Tracking Editing for each element

3 of	10 Priority Element(s) outside of range	0 Priority Element(s) outside of range								
+	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description				
	NETWORK SERVICE CODE	95.0%	100.0%							
•	PROVIDER IDENTIFICATION NUMBER	95.0%	1.6%							
+	PROVIDER POSTAL (ZIP +4) CODE	95.0%	0.0%							
	PROVIDER POSTAL ZIP CODE	95.0%	91.9%							
	QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	95.0%	100.0%							
	PAID PROCEDURE CODE	90.0%	100.0%							
	PLACE OF SERVICE CODE	80.0%	100.0%							
	PROVIDER TAXONOMY CODE	80.0%	100.0%							
	PRIMARY ICD DIAGNOSTIC CODE	70.0%	100.0%							
	FIRST PAID PROCEDURE CODE MODIFIER	5.0%	100.0%							

• Expanding **Element** displays additional information:

- Records that Failed Edits-Displays the number of files that failed the edit
- Edit Seq Nbr—Displays the edit matrix sequence number
- Edit Description—Displays the Edit Message from the edit matrix

Þ	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description
	NETWORK SERVICE CODE	95.0%	100.0%			
4	PROVIDER IDENTIFICATION NUMBER	95.0%	1.6%			
				5	0510-01	Provider identification number is missing.
				2,911	0510-02	Provider identification number is not valid per the table
۱.	PROVIDER POSTAL (ZIP +4) CODE	95.0%	0.0%			
۶.	PROVIDER POSTAL ZIP CODE	95.0%	91.9%			
	QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	95.0%	100.0%			
	PAID PROCEDURE CODE	90.0%	100.0%			
	PLACE OF SERVICE CODE	80.0%	100.0%			
	PROVIDER TAXONOMY CODE	80.0%	100.0%			
	PRIMARY ICD DIAGNOSTIC CODE	70.0%	100.0%			
	FIRST PAID PROCEDURE CODE MODIFIER	5.0%	100.0%			

Results by Medical Data Provider Validation Results

Clicking the View Validation Results link displays additional validation results not considered part of element-level Quality Tracking Results by Medical Data Provider

Med Data Provider ID	Med Data Provider Name	
45856	NCCI TRAINING COMPANY	View Validation Res

□ The pop-up window displays Validation Results:

	Validation Results for Group 45856 - NCCI TRAINING COMPANY Medical Data Provider 45856 NCCI TRAINING COMPANY						
Dat	a as of 08/22/2024 Quarter/Year 2 Qtr/2	024	Transmission Typ	e Production			
Edit Seq Nbr	Edit Description	Occurrences of Edit	Records Subject to Edit	% of Occurrences			
0505-02	Paid amount equals amount charged by provider.	0	2,964	0.0%			
0153-02	Policy effective date is after accident date.	0	2,964	0.0%			
0519-07	Original record already exists.	0	2,964	0.0%			
0505-03	Paid amount is greater than amount charged by provider.	0	2,964	0.0%			
0506-03	Paid procedure code is missing and secondary procedure code is valid.	0	2,964	0.0%			
0507-04	First paid procedure code modifier is missing and second paid procedure code modifier is valid.	0	2,964	0.0%			
0509-03	Primary ICD diagnostic code is missing and secondary ICD diagnostic code is valid.	0	2,964	0.0%			
0514-02	Secondary ICD diagnostic code is equal to the primary ICD diagnostic code.	0	2,964	0.0%			
0515-02	Secondary procedure code is equal to the paid procedure code.	0	2,964	0.0%			

- Edit Seq Nbr—Displays the edit matrix sequence number
- Edit Description-Displays the Edit Message from the edit matrix
- Occurrences of Edit-Number of records with the specified edit condition
- Records Subject to Edit—Number of records the specified edit checked (e.g., paid amount equals amount charged by provider is tested only on records where these two fields are validly reported numbers)
- % of Occurrences—Indicates how often the edit condition existed when it could have existed
- Printer Icon—Link at the top-right of the results table opens a pop-up version of the results for printing
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Results by Carrier Group Code (Group Results access only)

- Displays aggregate statistics from all files submitted for the Carrier Group Code
- Expanding the Carrier Group Code displays:
 - Critical Element(s)
 - Priority Element(s)
 - Low Element(s)

Results by Carrier Group					
		Carrier Group Code	Carrier Group Name		
4		45856	NCCI TRAINING COMPANY	View Validation Results	
	1 of 5 Critical Element(s) outside of range				
	Þ	3 of 10 Priority Element(s) out	tside of range		
	►	0 of 5 Low Element(s) outside	of range		

D Expanding **Critical**, **Priority**, or **Low Element(s)** further produces:

- Element-Lists elements that are in each edit category
- Threshold %—The minimum percentage that must be met for the data element to be considered in range
- % Passing Edits—Displays the percentage passing for the Quality Tracking Editing for each element

⊿ 30	of 10 Priority Element(s) outside of range) Priority Element(s) outside of range								
•	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description				
	NETWORK SERVICE CODE	95.0%	100.0%							
Þ	PROVIDER IDENTIFICATION NUMBER	95.0%	1.6%							
Þ	PROVIDER POSTAL (ZIP +4) CODE	95.0%	0.0%							
Þ	PROVIDER POSTAL ZIP CODE	95.0%	91.9%							
	QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	95.0%	100.0%							
	PAID PROCEDURE CODE	90.0%	100.0%							
	PLACE OF SERVICE CODE	80.0%	100.0%							
	PROVIDER TAXONOMY CODE	80.0%	100.0%							
	PRIMARY ICD DIAGNOSTIC CODE	70.0%	100.0%							
	FIRST PAID PROCEDURE CODE MODIFIER	5.0%	100.0%							

□ Expanding Element displays additional information:

- Records that Failed Edits-Displays the number of files that failed the edit
- Edit Seq Nbr-Displays the edit matrix sequence number
- Edit Description-Displays the Edit Message from the edit matrix

Þ	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description
	NETWORK SERVICE CODE	95.0%	100.0%			
4	PROVIDER IDENTIFICATION NUMBER	95.0%	1.6%			
				5	0510-01	Provider identification number is missing.
				2,911	0510-02	Provider identification number is not valid per the table
•	PROVIDER POSTAL (ZIP +4) CODE	95.0%	0.0%			
•	PROVIDER POSTAL ZIP CODE	95.0%	91.9%			
	QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	95.0%	100.0%			
	PAID PROCEDURE CODE	90.0%	100.0%			
	PLACE OF SERVICE CODE	80.0%	100.0%			
	PROVIDER TAXONOMY CODE	80.0%	100.0%			
	PRIMARY ICD DIAGNOSTIC CODE	70.0%	100.0%			
	FIRST PAID PROCEDURE CODE MODIFIER	5.0%	100.0%			

Results by Carrier Group Code Validation Results

Clicking the View Validation Results link displays additional validation results not considered part of element-level Quality Tracking

Results by Carrier Group								
	Carrier Group Code	Carrier Group Name						
	45856	NCCI TRAINING COMPANY	View Validation Results					
►	1 of 5 Critical Element(s) outsi							
►	> 3 of 10 Priority Element(s) outside of range							
►	0 of 5 Low Element(s) outside	of range						

□ The pop-up window displays Validation Results:

Validation Results for Group 45856 - NCCI TRAINING COMPANY					
Dat	a as of 08/22/2024	Quarter/Year 2 Qtr/2	024	Transmission Typ	e Production
Edit Seq Nbr	Edit De	scription	Occurrences of Edit	Records Subject to Edit	% of Occurrences
0505-02	Paid amount equals amou	nt charged by provider.	0	2,964	0.0%
0153-02	Policy effective date is after	er accident date.	0	2,964	0.0%
0519-07	Original record already ex	ists.	0	2,964	0.0%
0505-03	Paid amount is greater tha provider.	n amount charged by	0	2,964	0.0%
0506-03	Paid procedure code is mis procedure code is valid.	sing and secondary	0	2,964	0.0%
0507-04	First paid procedure code second paid procedure cod	modifier is missing and le modifier is valid.	0	2,964	0.0%
0509-03	Primary ICD diagnostic co ICD diagnostic code is vali	de is missing and secondary d.	0	2,964	0.0%
0514-02	Secondary ICD diagnostic ICD diagnostic code.	code is equal to the primary	0	2,964	0.0%
0515-02	Secondary procedure code procedure code.	e is equal to the paid	0	2,964	0.0%

- Edit Seq Nbr—Displays the edit matrix sequence number
- Edit Description—Displays the Edit Message from the edit matrix
- Occurrences of Edit—Number of records with the specified edit condition
- Records Subject to Edit—Number of records the specified edit checked (e.g., paid amount equals amount charged by provider is tested only on records where these two fields are validly reported numbers)
- % of Occurrences—Indicates how often the edit condition existed when it could have existed
- Printer Icon—Link at the top-right of the results table opens a pop-up version of the results for printing
- To return to the application main page, click the Medical Data Collection link at the top left of the window
- To access another component from the main page, hover over Manage My Data and select another tab
- □ To exit the application, click the **NCCI** logo to return to **ncci.com**

Quarter End Validation

As soon as a reporting quarter closes, the Quarter End Validation Distributions and Elements with Expected Values Not Reported will be displayed. If a search is conducted prior to the quarter end, an online message will be displayed stating, "Quarter End Validation results are not yet available." Quarter End Validation results are not viewable under Medical Data Submitter Access.



Follow the steps below to view the Quarter End Validation results.

1. Hover over the Manage My Data tab and click Quarter End Validation.



- 2. To select the type of results you want to view, choose one of three tabs—Distributions, Completeness Results, or Quality Results.
- 3. Select from the following search criteria:
 - Carrier Group Code
 - Qtr/Year
 - □ State Filter (on Completeness Results and Quality Results tabs)
- 4. Click Search.

Quarter End Validation						
Distributions Completeness Results Quality Results						
Carrier Group Code 45856 - NCCI TRAINING COMPANY	Qtr/Year Select V	(Current Qtr/Year - 3 Qtr/2024)				
		🔍 Search 🛛 Clear Search				
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Distributions Tab

Selecting the **Distributions** tab displays the list of available Distribution Results charts and the Elements with Expected Values Not Reported.

Distribution Results

- **D** The Distribution Results table displays the following column for available chart selections:
 - Element—Lists elements for which distribution results are calculated
 - Distribution Information—Description of chart
 - Distribution Results—Graph icon

Data as of 08/22/2024	45856 - NCCI TRAINING COMPANY	Quarter/Year 2 Qtr/2024 🚑 🔁 PDF
	Distribution Results	
Element	Distribution Information	Distribution Results
PROCEDURE GROUP	Chart Of Procedure Group Description	<u>ili</u>
FIRST PAID PROCEDURE CODE MODIFIER	Chart Of First Paid Procedure Code Modifier	<u>nh</u>
PROVIDER TAXONOMY GROUP	Chart Of Provider Taxonomy Group	alia.
NETWORK SERVICE CODE	Chart Of Network Service Code	<u>ili</u>
QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	Chart Of Quantity/Number of Units per Procedure Code	<u>ala</u>
PLACE OF SERVICE CODE	Chart Of Place of Service Code	<u>ik</u>
CLAIMANT GENDER CODE	Chart Of Claimant Gender Code	<u>ali</u> a
AMOUNT CHARGED BY PROVIDER	Chart Of Amount Charged by Provider	<u>ili</u>
PAID AMOUNT	Chart Of Paid Amount	<u>alia</u>
AGE AT INJURY	Chart Of Age at Injury	ili.
ACCIDENT DATE	Chart Of Accident Date	alia.
SERVICE DATE	Chart Of Service Date	<u>alu</u>

- Clicking the Graph icon opens a new browser window, displaying the distribution chart of the requested data element
 - The top 10 valid values for a given data field display (excluding missing and invalid values)
 - Percentages are calculated based on the total valid population of the selected element, not total record count



Elements With Expected Values Not Reported

- The Elements with Expected Values Not Reported table displays a list of the elements that did not have at least one record reporting a value expected by NCCI
 - Element-Lists elements where the expected values were not reported
 - Edit Seq Nbr—Displays the edit matrix sequence number
 - Edit Description—Displays the Edit Message from the edit matrix
 - Anticipated Values Not Reported—Displays the expected value(s) not reported

Elements with Expected Values Not Reported					
Element	Edit Seq Nbr	Edit Description	Anticipated Values Not Reported		
FIRST PAID PROCEDURE CODE MODIFIER	0507-03	Value(s) expected for first paid procedure code modifier were not supplied.	51 TC		
PLACE OF SERVICE CODE	0508-03	Value(s) expected for place of service code were not supplied.	Inpatient Hospital		
QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	0513-02	Value(s) expected for quantity/number of units per procedure code for drug/medication-related records were not supplied.	30 60 90 120		

Completeness Results Tab

The **Completeness Results** tab provides additional detail about the categories that comprise a group's Completeness Results.

Completeness Results

- Summarizes a group's Completeness Results by category, with the following columns displayed:
 - Completeness Category—Lists the five Completeness Categories (State, Coverage Provider, Medical Data Provider, Medical Service, and Service Date Distribution)
 - Completion Date—The date when the category met the minimum thresholds
 - Complete on Time—Yes/No flag that indicates whether the category met the minimum thresholds

•	Completeness Category	Completion Date	Complete on Time
•	State	08/21/2024	Yes
•	Coverage Provider	08/21/2024	Yes
•	Medical Data Provider	08/21/2024	Yes
•	Medical Service		No
•	Service Date Distribution		No

Completeness Results

- Expanding the categories displays the following:
 - State-The specific state that is being evaluated
 - Threshold—The minimum count or percentage of transactions that must be met for the specific state, coverage provider, medical data provider, medical service, or service date distribution to be considered complete
 - Actual Transactions—The actual number or percentage of transactions submitted to NCCI for the reporting quarter
 - Completion Date—The date when the specific state, coverage provider, medical data provider, medical service, or service date distribution met the minimum threshold
 - Complete on Time—Yes/No flag that indicates whether the specific state, coverage provider, medical data provider, medical service, or service date distribution met the minimum threshold

C	ompleteness Category	Completion Date	Complete on Time		
State			08/21/2024	Yes	
State	Threshold	Actual Transactions	Completion Date	Complete on Time	
FL	0	2,616	08/21/2024	Yes	
Coverage Provider			08/21/2024	Yes	
Medical Data Provider			08/21/2024	Yes	
Medical Service			No		
Service Date Distribution			No		
	Coverage Provider Medical Data Provider Medical Service Service Date Distribution	Completeness Category State Threshold State 0 FL 0 Coverage Provider 0 Medical Data Provider 0 Medical Service 0 Service Date Distribution 0	Completeness Category State Actual State Actual State Threshold Actual FL O 2,616 Coverage Provider Vertical Service Vertical Service Medical Data Provider Vertical Service Vertical Service Service Date Distribution Vertical Service Vertical Service	Completeness CategoryCompletion DateState08/21/2024StateActual TransactionsCompletion DateFL02,61608/21/2024Coverage Provider08/21/202408/21/2024Coverage Provider08/21/202408/21/2024Medical Data Provider08/21/202408/21/2024Medical Service08/21/202408/21/2024Service Date Distribution	

Completeness Results

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Quality Results Tab

The **Quality Results** tab provides additional detail about the data elements that comprise a group's Quality Results.

Quality Results

- Summarizes a group's Quality Results by category, with the following columns displayed:
 - Element Category—Critical, Priority, or Low
 - Element(s) Out of Range—Number of data elements per category that do not meet the minimum threshold

		Quality Results	View Validation Results
+	Element Category	Element(s) Out of Range	
•	Critical	0 of 5	
►	Priority	3 of 10	
•	Low	0 of 5	

- **□** Expanding the categories (**Critical**, **Priority**, or **Low**) further produces:
 - Element-Lists elements that are in each edit category
 - Threshold %—The minimum percentage that must be met for the data element to be considered in range
 - % Passing Edits—Displays the percentage passing for the Quality Tracking Editing for each element

Þ	E	lement Category	Element(s) Out	of Range				
Þ	Critical 0 of 5							
4	Prior	ity	3 of 10					
	•	Eleme	ent	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description
		NETWORK SERVICE CO	ODE	95.0%	100.0%			
	•	PROVIDER IDENTIFICA	ATION NUMBER	95.0%	1.3%			
	•	PROVIDER POSTAL (ZI	P +4) CODE	95.0%	0.0%			
	►	PROVIDER POSTAL ZIP	CODE	95.0%	90.9%			
		QUANTITY/NUMBER C PROCEDURE CODE	OF UNITS PER	95.0%	100.0%			
		PAID PROCEDURE COI	DE	90.0%	100.0%			
		PLACE OF SERVICE CO	DE	80.0%	100.0%			
		PROVIDER TAXONOM	YCODE	80.0%	100.0%			
		PRIMARY ICD DIAGNO	STIC CODE	70.0%	100.0%			
		FIRST PAID PROCEDUR MODIFIER	RE CODE	5.0%	100.0%			
۶.	Low		0 of 5					

- Expanding **Element** displays additional information:
 - Records that Failed Edits-Displays the number of files that failed the edit
 - Edit Seq Nbr—Displays the edit matrix sequence number
 - Edit Description—Displays the Edit Message from the edit matrix

	Prior	rity 3 of 10					
	•	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description
		NETWORK SERVICE CODE	95.0%	100.0%			
_		PROVIDER IDENTIFICATION NUMBER	95.0%	1.3%			
			Click on Edit Seq N	or link to request report	2,583	0510-02	Provider identification number is not valid per the table
	►	PROVIDER POSTAL (ZIP +4) CODE	95.0%	0.0%			
	►	PROVIDER POSTAL ZIP CODE	95.0%	90.9%			
		QUANTITY/NUMBER OF UNITS PER PROCEDURE CODE	95.0%	100.0%			

Request Report

Clicking the **Edit Seq Nbr** link opens the Request Reported Failing Values Information screen. Users may request a frequency report and/or extract file. The report and/or file will be delivered to the requestor's **Data Transfer via the Internet** mailbox.

Request Reported Failing Values Information							
\bigcirc Request Report - Frequency listing of reported failing values for edit							
O Request Extract - Extract file details of reported failing values for edit							
Request Both							
Submit Cancel							

Quality Results Validation Results

Clicking the View Validation Results link displays additional validation results not considered part of element-level Quality Tracking

		Quality Results	View Validation Result
+	Element Category	Element(s) Out of Range	
•	Critical	0 of 5	
•	Priority	3 of 10	
•	Low	0 of 5	

- □ The pop-up window displays Validation Results:
 - Edit Seq Nbr—Displays the edit matrix sequence number
 - Edit Description—Displays the Edit Message from the edit matrix
 - Occurrences of Edit—Number of records with the specified edit condition
 - Records Subject to Edit—Number of records the specified edit checked (e.g., paid amount equals amount charged by provider is tested only on records where these two fields are validly reported numbers)
 - % of Occurrences-Indicates how often the edit condition existed when it could have existed

Validation Results for Group 45856 - NCCI TRAINING COMPANY State Filter All Medical States

	Data as of 08/23/2024 Quarter/Year 2 Qtr/2024			Due Date 09/3	0/2024
Edit Seq Nbr	Edit Description	Occurrenc Edit	es of	Records Subject to Edit	% of Occurrences
0505-02	Paid amount equals amount charged by provider.		0	2,794	0.0%
0153-02	Policy effective date is after accident date.		0	2,794	0.0%
0519-07	Original record already exists.		0	2,794	0.0%
0505-03	Paid amount is greater than amount charged by provider.		0	2,794	0.0%
0506-03	Paid procedure code is missing and secondary procedure code is valid.		0	2,794	0.0%
0507-04	First paid procedure code modifier is missing and second paid procedure code m valid.	odifier is	0	2,794	0.0%
0509-03	Primary ICD diagnostic code is missing and secondary ICD diagnostic code is val	d.	0	2,794	0.0%
0514-02	Secondary ICD diagnostic code is equal to the primary ICD diagnostic code.		0	2,794	0.0%
0515-02	Secondary procedure code is equal to the paid procedure code.		0	2,794	0.0%
0521-02	Second paid procedure code modifier is equal to the first paid procedure code m	odifier.	0	2,794	0.0%
0522-08	A valid service date or valid service from date and service to date have not been	provided.	0	2,794	0.0%

If there are no validation edits, the following screen displays:

Validation Results for Group 45856 - NCCI TRAINING COMPANY State Filter All Medical States								
Data as of	08/22/2024	Quarter/Year 2 Qtr/202	24 D	Due Date 09/30/2024				
Edit Seq Nbr	Edit Description	Occurrences of Edit	Records Subject to Edit	% of Occurrences				
No records to display.								

- **Printer Icon**—Link at the top-right of the results table opens a pop-up version of the results for printing
- To return to the application main page, click the Medical Data Collection link at the top left of the window
- □ To access another component from the main page, hover over Manage My Data and select another tab
- □ To exit the application, click the **NCCI** logo to return to **ncci.com**

Incentive Program

The *Medical Incentive Program (MIP)* provides incentives to submit the Medical Data Call in a timely and accurate manner. The program will apply monetary assessments when Call submissions do not meet the defined criteria by the due date.

A data provider group's *MIP* results will be finalized when the reporting quarter closes. The preliminary results will be updated every time a Medical Data Call file is submitted for the group until the quarter's due date passes.

Note: Only users with Group Level Results access may view the MIP screens.

Follow the steps below to view the *Medical Incentive Program* results.

1. Hover over the Manage My Data tab and click Incentive Program.



- 2. To select the type of results you want to view, choose one of three tabs—Incentive Results, Completeness Results, or Quality Results.
- 3. Select from the following search criteria:
 - □ Carrier Group Code
 - □ Qtr/Year
- 4. Click Search.

Incentive Results	Completeness Results	Quality Results			
view Incentive Progra	n Results, select Carrier G	roup Code 45856 - NCCI TRAINING CO	Qtr/Year 2 Qtr V/2019	(Current Qtr/Year	- 3 Qtr/2019)
Carrier Group Code and nd then click 'Search'.	Quarter/Year,			🔍 Search	Clear Search

Incentive Results Tab

The **Incentive Results** tab summarizes a group's Completeness Results, Quality Results, and assessment for the quarter.

Incentive Results (Data Submitted)

- If a group has submitted data for the reporting quarter, the Incentive Results table displays the following:
 - Fine Information
 - Countrywide Market Share—Shows the average market share of the group among the states eligible for NCCI's *Medical Incentive Program*
 - Total Fine—Shows the amount of the assessment that would be billed to the group if all assessments were in effect
 - Total Billed Fine—Shows the amount of the assessment that will be billed to the group
 - Completeness—Shows the Completeness categories not complete by the due date and the resulting assessments
 - Quality—Shows the number of data elements out of range (below the minimum threshold) and the resulting assessments

	View Incentive Fine Parameter			
Countrywide Market Sl TOTAL F TOTAL BILLED F	hare 0.00% FINE \$625 FINE \$625			
Completeness	Fine Amount	Quality	Out of Range	Fine Amount
Categories Not Complete On Time	1	Critical Data Elements	0	\$0
		Priority Data Elements	0	\$0
		Low Data Elements	0	\$0
Base Fine Amount	\$625	Base Fine Amount		\$0
Fine Multiplier	× 1.00	Fine Multiplier		× 1.00
Total Completeness Fine	\$625	Total Quality Fine		\$0

Incentive Results (Data Not Submitted)

- If a group has not submitted any data for the reporting quarter, the Incentive Results table displays the following:
 - Fine information
 - Countrywide Market Share—Shows the average market share of the group among the states eligible for NCCI's *Medical Incentive Program*
 - Total Fine—Shows the amount of the assessment that would be billed to the group if all assessments were in effect
 - Total Billed Fine—Shows the amount of the assessment that will be billed to the group
 - Insufficient Data Received—Shows Insufficient Data assessments

	Incentive Results		View Incentive Fine Parameters
Co	untrywide Market Share 0.41%		
	TOTAL FINE \$7,500		
	TOTAL BILLED FINE \$7,500		
	Insufficient Data Received	Fine Amount	
	Base Fine Amount	\$7.500	
		<i>4,1000</i>	
	Fine Multiplier	x 1.00	
	Total Fine	\$7,500	

View Incentive Fine Parameters

Clicking the **View Incentive Fine Parameters** link opens a separate window showing the assessments that apply for falling below given criteria based on market share.

Medical Data Collection - Compliance Incentive Fine Parameters

Data as of 09/19/2019

nsu	iffi	cie	nt I	Da	ta	

Assessment Level	Market Share Ranges	Insufficient Data Assessment
1	0.00% - 0.25%	\$4,750
2	0.26% - 1.50%	\$8,500
3	1.51% - 100.00%	\$15,000

Assessment			Total Co Based on Cate	mpleteness Ass gories Not Corr	essment plete On Time	
Level	Market Share Ranges	1	2	3	4	5
1	0.00% - 0.25%	\$625	\$1,250	\$2,500	\$2,500	\$2,500
2	0.26% - 1.50%	\$1,250	\$2,500	\$5,000	\$5,000	\$5,000
3	1.51% - 100.00%	\$2,500	\$5,000	\$10,000	\$10,000	\$10,000

		Quality		
Assessment		Quali	ty Assessment per Data El Based on Element Categor	ement Y
Level	Market Share Ranges	Low	Priority	Critical
1	0.00% - 0.25%	\$25	\$125	\$250
2	0.26% - 1.50%	\$50	\$250	\$500
3	1.51% - 100.00%	\$100	\$500	\$1,000

Fine Multiplier

Consecutive Quarters with an Assessment	Fine Multiplier
1-2	1.00
3-4	1.25
5	1.50
6	2.00
7	2.50
8 - 999	3.00

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Completeness Results Tab

The **Completeness Results** tab provides additional detail about the categories that comprise a group's Completeness Results.

Completeness Results

- Summarizes a group's Completeness Results by category, with the following columns displayed:
 - Completeness Category—Lists the five Completeness Categories (State, Coverage Provider, Medical Data Provider, Medical Service, and Service Date Distribution)
 - Completion Date—The date when the category met the minimum thresholds
 - Complete on Time—Yes/No flag that indicates whether the category met the minimum thresholds

	Complet	eness Results	
•	Completeness Category	Completion Date	Complete on Time
•	State	09/18/2019	Yes
×	Coverage Provider	09/18/2019	Yes
×	Medical Data Provider	09/18/2019	Yes
►	Medical Service		No
×	Service Date Distribution		No

Expanding the categories displays the following:

- State-The specific state that is being evaluated
- Threshold—The minimum count or percentage of transactions that must be met for the specific state, coverage provider, medical data provider, medical service, or service date distribution to be considered complete
- Actual Transactions—The actual number or percentage of transactions submitted to NCCI for the reporting quarter
- Completion Date—The date when the specific state, coverage provider, medical data provider, medical service, or service date distribution met the minimum threshold
- Complete on Time—Yes/No flag that indicates whether the specific state, coverage provider, medical data provider, medical service, or service date distribution met the minimum threshold

•	Com	pleteness Catego	ory	Completion Date	Complete on Time
4	State			09/18/2019	Yes
	State	Threshold	Actual Transactions	Completion Date	Complete on Time
	FL	0	7,329	09/18/2019	Yes

Completeness Results

Quality Results Tab

The **Quality Results** tab provides additional detail about the data elements that comprise a group's Quality Results.

Quality Results

- Summarizes a group's Quality Results by category, with the following columns displayed:
 - Element Category—Critical, Priority, or Low
 - Element(s) Out of Range—Number of data elements per category that do not meet the minimum threshold
 - Fine Per Element—The assessment per data element that does not meet the minimum threshold
 - Fine Amount—The assessment that would apply due to elements out of range (below threshold) for that category

	Quality Results								
٠	Element Category	Element(s) Out of Range	Fine Per Element	Fine Amount					
►	Critical	0 of 5	\$250		\$0				
•	Priority	0 of 10	\$125		\$0				
►	Low	0 of 5	\$25		\$0				
				Total Fine Amount	\$0				

- **□** Expanding the categories (**Critical**, **Priority**, or **Low**) further produces:
 - Element-Lists elements that are in each edit category
 - Threshold %—The minimum percentage that must be met for the data element to be considered in range
 - % Passing Edits—Displays the percentage passing for the Quality Tracking Editing for each
 - element
 - Fine Amount—The assessment that applies when the data element is out of range (below threshold)

Low			0 of 5		\$25		\$0
Ŧ	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description	Fine Amount
	SECOND PAID PROCEDURE CODE MODIFIER	95.0%	100.0%				\$0
	BIRTH YEAR	80.0%	100.0%				\$0
	CLAIMANT GENDER CODE	80.0%	100.0%				\$0
¥.	SECONDARY ICD DIAGNOSTIC CODE	10.0%	38.2%				\$0
×	SECONDARY PROCEDURE CODE	0.0%	14.8%				\$0

• Expanding **Element** displays additional information:

- Records that Failed Edits-Displays the number of files that failed the edit
- Edit Seq Nbr-Displays the edit matrix sequence number
- Edit Description—Displays the Edit Message from the edit matrix
- Fine Amount—The assessment that applies when the data element is out of range (below threshold)

Low		0 of 5		\$25			
	Element	Threshold %	% Passing Edits	Records that Failed Edits	Edit Seq Nbr	Edit Description	Fine Amount
	SECOND PAID PROCEDURE CODE MODIFIER	95.0%	100.0%				\$0
	BIRTH YEAR	80.0%	100.0%				\$0
	CLAIMANT GENDER CODE	80.0%	100.0%				\$0
	SECONDARY ICD DIAGNOSTIC CODE	10.0%	38.2%				\$0
	Click on Edi	it Seq Nbr link to	request report	1	0514-01	Secondary ICD diagnostic code is not a valid ICD code.	
				3,949	0514-03	Secondary ICD diagnostic code is missing.	
	SECONDARY PROCEDURE CODE	0.0%	14.8%				\$0

Request Report

Clicking the **Edit Seq Nbr** link opens the Request Reported Failing Values Information screen. Users may request a frequency report and/or extract file. The report and/or file will be delivered to the requester's **Data Transfer via the Internet** mailbox.

Request Reported Failing Values Information						
\bigcirc Request Report - Frequency listing of reported failing values for edit						
\bigcirc Request Extract - Extract file details of reported failing values for edit						
Request Both						
Submit Cancel						

Key Field Verification

The Medical Key Field Verification (KFV) provides aggregate results at the Carrier Group Level.

The Medical Data Call Claim Keys are verified against the keys reported in the Policy and Unit Statistical Data.

Note: Only Users with Carrier Group Level access may view the KFV Carrier Group results screen and will be able to download Medical Data Call claim key fields which are not found in the Policy and Unit Statistical by selecting the blue download icon.

Follow the steps below to view the Key Field Verification results.

1. Hover over the Manage My Data tab and click Key Field Verification.

Medical	Data Collect	ion	
Manage My Data Tools	and Information	About	
Submission Tracking	ection		
Quality Tracking			
Quarter End Validation	ased application that enables y irce that will enable you to mon and statistics prmation	s you to to viev onitor:	
Incentive Program			
Key Field Verification			

2. The Key Field Verification screen displays the Carrier Group Code.

NCCI TRAINING COMPANY									
Data is refreshed with e Data Type	ach file submission Verification Parameters	Key Fields Reviewed	Key Fields Found	Percentage Found	Last Refresh 08/21/2024				
Policy	Carrier Code, Policy Number	2,616	0	0.0%	2616				
Policy	Carrier Code, Policy Number, Policy Effective Date	2,616	0	0.0%	2616				
Unit	Carrier Code, Policy Number, Policy Effective Date	2,616	0	0.0%	2616				
Unit	Carrier Code, Policy Number, Policy Effective Date, Claim Number	2,616	0	0.0%	2616				

The Key Field Verification screen allows users to review aggregated results for Medical Data Call key fields that are not found in the Policy and Unit Statistical Data.

Key Field Verification uses the following Medical Data Call fields for verification against the Policy and Unit Statistical Data as follows:

Carrier Code

Key Field Verification

- Policy Number Identifier
- Policy Effective Date
- Claim Number Identifier

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Policy Data Verification Parameters:

- Carrier Code and Policy Number Identifier
- Carrier Code, Policy Number Identifier, and Policy Effective Date

Unit Statistical Data Verification Parameters:

- Carrier Code, Policy Number Identifier, and Policy Effective Date
- Carrier Code, Policy Number Identifier, Policy Effective Date, and Claim Number Identifier

The Key Field Verification process between the Medical Data Call and the Policy Data key fields occurs on a rolling 48-month basis starting with the current month, based on the Policy Effective Date of the claim submitted on the Medical Data Call. The Key Field Verification process between the Medical Data Call and the Unit Statistical Data key fields occurs on a rolling 28-month basis starting with the current month minus 20 months, based on the Policy Effective Date of the claim submitted on the Medical Data Call.

The parameters evaluated are noted on the header of the Key Fields Not Found Download, which can be accessed by clicking on the download icon to the right of the row in question.

Data is refreshed with e	ta is refreshed with each file submission Last Refresh 08/21/2024						
Data Type	Verification Parameters	Key Fields Reviewed	Key Fields Found	Percentage Found	Key Fields Not Found		
Policy	Carrier Code, Policy Number	2,616	0	0.0%	2616		
Policy	Carrier Code, Policy Number, Policy Effective Date	2,616	0	0.0%	2616		
Unit	Carrier Code, Policy Number, Policy Effective Date	2,616	0	0.0%	2616		
Unit	Carrier Code, Policy Number, Policy Effective Date, Claim Number	2,616	0	0.0%	2616		

Once the CSV file is ready, click the link to open the spreadsheet containing the key fields needed to research your source system.

45856 - NCCI TR/	AINING COMPAN	Y		
Refresh Date: 08	/21/2024			
Key Field Verifica	ation Download	08/22/2024 4:37 PM		
Policy Verification	on Parameters: (Carrier Code - Policy N	lumber	
Policy Effective	Date Range: 08/0	1/2020 - 08/31/2024		
The number of r	ecords may be le	ess than the amount d	isplayed on the s	creen.
Carrier Code	Policy Number	Policy Effective Date	Claim Number	Data Provider
45856	NPINBR051002	11/1/2022	MDCUSRGDB115	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB116	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB117	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB118	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB119	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB120	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB121	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB122	45856
45856	NPINBR051002	11/1/2022	MDCUSRGDB123	45856
45856	NPINBR051002	11/1/2022	MDCUSRGDB124	45856
45856	NPINBR051002	11/1/2022	MDCUSRGDB125	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB126	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB127	4585
45856	NPINBR051002	11/1/2022	MDCUSRGDB128	4585

For information on how to make Key Field Changes to previously reported Medical Data Call records, please refer to the *Medical Data Call Reporting Guidebook*.

NCCI TRAINING COMPANY