



Minnesota Health Care Program Medicaid Managed Care

Encounter Data Validation Study (2025–2026) Blue Plus

Final

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**Prepared on behalf of:
The Minnesota Department of Human Services**

Table of Contents

Executive Summary	3
Background	3
Introduction	4
Methodology	5
Interviews with MCOs.....	6
Findings for Blue Plus by Claim Type	7
Professional Claim Type	7
Institutional Inpatient Claim Type	9
Institutional Outpatient Claim Type.....	12
Dental Claim Type.....	17
Pharmacy Claim Type	19
Conclusions and Recommendations.....	21
Findings for Electronic Encounter Data	21
Recommendations for Future EDV Studies.....	22

List of Tables

Table 1: Match Rate for the Professional Claim Type	7
Table 2: Professional Data Element Discrepancies and Findings.....	7
Table 3: Match Rate for the Institutional Inpatient Claim Type.....	9
Table 4: Match Rate with the Outpatient DHS File.....	9
Table 5: Institutional Inpatient Data Element Discrepancies and Findings.....	10
Table 6: Match Rate for the Institutional Outpatient Claim Type	12
Table 7: Institutional Outpatient Data Element Discrepancies and Findings	13
Table 8: Match Rate for the Dental Claim Type	17
Table 9: Dental Data Element Discrepancies and Findings	17
Table 10: Match Rate for the Pharmacy Claim Type	19
Table 11: Pharmacy Data Element Discrepancies and Findings	19

Executive Summary

The Minnesota (MN) Department of Human Services (DHS) has partnered with IPRO, an external quality review organization (EQRO), to conduct an encounter data validation (EDV) study for its Medicaid expansion program in alignment with the Centers for Medicare & Medicaid Services (CMS) external quality review (EQR) [Protocol 5. Validation of Encounter Data Reported by the Medicaid and CHIP \[Children's Health Insurance Program\] Managed Care Plan: An Optional EQR-Related Activity, February 2023.](#)

CMS encourages states to implement the voluntary EDV protocol due to the foundational need for complete and accurate encounter data to support state quality improvement efforts. Complete and accurate encounter data can lead agencies to drive healthcare improvements that can positively affect the overall population and favorably impact quality of life for those who have high-risk health issues. Frequent EDV activities conducted by state agencies or EQROs can help identify incomplete data, perform missing data quality checks, and assess the frequency and impact of late encounter data submissions. Additionally, as federal programs transition toward payment reform for demonstrated quality of care, EDV will become increasingly important given the key role that data quality plays in supporting the accuracy and integrity of these programs.

The objective of this study was to verify the completeness, timeliness, and accuracy of encounter data submitted to MN DHS by the Medicaid managed care organization (MCO), Blue Plus. The encounter data submitted to MN DHS were reconciled with the corresponding source encounter data from the original adjudicated claims. All data element differences were reported and investigated.

No significant issues were found regarding Blue Plus data. The review of electronic encounter data did show that the findings for some data elements need to be reviewed by MN DHS and/or IPRO. For future EDV studies, Blue Plus should ensure that identified data extraction issues are resolved prior to data submission.

Background

MN DHS collects encounter data from Blue Plus. Encounter submissions include all paid (original, corrected, adjusted/voided, and paid at \$0.00) encounter data and some partial paid or denied encounter data, as defined by MN DHS. All data reported and collected are housed within the state Managed Care Information System and maintained by fiscal intermediary, IBM®.

Introduction

Encounter data reporting improvements are an ongoing project across federal and state healthcare agencies. Reliable and accurate encounter data can lead agencies to drive healthcare improvements that can positively affect the overall population and those who have high-risk health issues. Yearly EDV activities conducted by state agencies or EQROs can help identify incomplete data, perform missing data quality checks, and assess the frequency and impact of late encounter data submissions.

MN DHS collects encounter data from MCOs. The encounter submissions consist of all paid encounters, including:

- original,
- corrected,
- adjusted/voided,
- paid at zero dollar (alternative payment arrangements), and
- partial payments denied at the line level and paid at the header level.

All claims/encounters submitted to DHS are stored and maintained in MN DHS's Managed Care Information System and maintained by fiscal intermediary, IBM.

During calendar year (CY) 2025–2026, IPRO conducted an EDV study that compared the MCOs' claims data versus the encounter data of MN DHS's Managed Care Information System. To ensure complete and accurate data are received and available for reporting, IPRO compared the two sources of claims data.

The objective of this study was to verify the accuracy of encounter data submitted to DHS by the MCOs. The encounter data submitted to DHS were reconciled to the corresponding source claims data from the originally MCO adjudicated claims. All data element discrepancies were reported and investigated.

Methodology

IPRO requested MCO claims data residing in the claims system for periods of service from January 1, 2024, to December 31, 2024 for the eligible encounter types and data elements in **Tables 2, 5, 7, 9, and 11**. The 2025–2026 study was conducted for the following participating Medicaid MCOs:

- Blue Plus
- HealthPartners
- Hennepin Health
- Itasca Medical Care
- Medica
- PrimeWest Health
- South County Health Alliance
- UCare

IPRO requested the MCOs provide all originally adjudicated claims for the review period as noted in the objective, with service dates from January 1, 2024, to December 31, 2024, and submitted to the state between January 1, 2024, and March 31, 2025. For inpatient stays, the statement from-date was requested to be utilized. The MCOs were asked to select claims adjudicated by their organizations/vendors. The claims/encounters provided to IPRO included:

- original,
- corrected,
- adjusted/voided,
- paid at zero dollar (alternative payment arrangements), and
- partial payments denied at the line level and paid at the header level.

IPRO provided MCOs detailed documentation specifying the data elements used to compare to the claims/encounters IPRO received from DHS. The MCOs submitted applicable claims by claim type to IPRO. The EDV study was conducted utilizing the following methodology:

1. MCOs submitted specified data elements obtained from their adjudicated source claims that correspond to the selected audit period. To verify the source claims data, IPRO requested that the MCOs include the internal control number (ICN) if available; the ICN is obtained when the encounter is adjudicated in the state Medicaid Management Information System (MMIS).
2. IPRO imported the MCO files and generated separate data tables per encounter type per MCO. Analyses were conducted using SAS®.
3. IPRO identified the MCO encounters that matched with the MN DHS source data by DHS ICN and DHS line number for institutional, professional, and dental claim types. For pharmacy claim type, IPRO identified the MCO encounters that matched with the MN DHS source data by Medicaid member ID, dispense date, National Drug Code (NDC), prescribing provider National Provider Identifier (NPI), amount paid, and DHS ICN.
4. For the MCO encounters that did not match with MN DHS source data, IPRO selected a random sample of 1,000 no match records for each encounter type for each MCO.
5. To identify discrepancies, IPRO compared the values of each data element from the MCO source data to values of the corresponding data element from MN DHS source data.
6. The percentage of records with discrepant values were calculated for each data element, and those with less than a 95.00% match rate were identified.
7. IPRO reviewed discrepancies and categorized the data element discrepancies for each encounter type, where applicable.
8. Among data elements with less than a 95.00% match rate, IPRO selected a random sample of 1,000 discrepant records for each encounter type and discrepancy category for each MCO. IPRO provided counts of all discrepant records by discrepancy category to MN DHS. The sample size was determined based on the number of discrepancies.

Interviews with MCOs

I PRO conducted teleconferences with the MCOs to discuss the following:

- review of claim discrepancies identified by I PRO;
- review of discrepant claims on the MCO's claim adjudication system and the 837-encounter submission string for institutional, professional, and dental claims;
- review of discrepant claims on the National Council for Prescription Drug Program (NCPDP) for pharmacy claims;
- MCO demonstration of discrepant values from several claims included in the discrepant sample files were reviewed and displayed on the MCO's claims adjudication system; and
- following the review of the discrepant claims, MCOs displayed how each ICN's data elements appeared on the 837-submission string (institutional, professional, and dental claims) or the NCPDP (pharmacy claims) encounter extracts submitted to DHS.

Following the interviews with the MCOs, I PRO identified data inconsistencies that will be discussed with MN DHS, to identify any inconsistencies between the values and/or information provided by the MCOs and confirmed the information DHS received for each data element by encounter type.

Findings for Blue Plus by Claim Type

The Blue Plus EDV study call was conducted on January 22, 2026. Blue Plus’s system was reviewed for discrepancies of data elements present in the encounter types between the submitted EDV data file and the data submitted to DHS. The attendees of the EDV study call included DHS, Blue Plus, Delta Dental, Prime Therapeutics, and IPRO. Data elements with less than a 95.00% match rate were reviewed. IPRO reviewed discrepancies and categorized them for each encounter type. Findings are summarized in **Tables 2, 5, 7, 9, and 11**.

Professional Claim Type

IPRO compared claims received in Blue Plus’s EDV study data file to the encounter data received from MN DHS by DHS ICN and DHS line number. Encounters that did not match on DHS ICN and DHS line number were reviewed by Blue Plus, MN DHS, and IPRO. The non-matches were attributed to the following reasons:

- The encounters were for disenrolled members that were not submitted to MN DHS.
- The encounters were voided and not included in the file from MN DHS..
- The encounters were extracted due to reporting logic error while generating claims data for the study that did not correspond to the encounter line numbers provided to MN DHS.

Table 1 identifies the match rates for the professional claim type.

Table 1: Match Rate for the Professional Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Professional	9,370,424	9,115,594	97.28

IPRO compared each data element in Blue Plus’s EDV study data file to the encounter data received from MN DHS. Data elements with less than a 95.00% match rate were reviewed by Blue Plus. During the teleconference, Blue Plus and IPRO reviewed the discrepancies. Findings are summarized in **Table 2**. Match rate percentages are rounded to the nearest hundredth.

Table 2: Professional Data Element Discrepancies and Findings

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
MEDICAID_MEMBER_ID	9,115,594	100.00	-
MCO_ICN	9,115,594	100.00	-
MCO_TRACKING_ICN	7,907,144	86.74	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values that were submitted on the 837P matched its claims system.
DTE_FIRST_SVC	8,131,333	89.20	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837P and its claims system.
DTE_LAST_SVC	8,131,156	89.20	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS study file matched the values that were submitted on the 837P and its claims system.
POS_CD	9,096,673	99.79	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD1	9,115,594	100.00	-
DIAGCD2	9,115,566	100.00	-
DIAGCD3	9,115,122	99.99	-
DIAGCD4	9,115,361	100.00	-
DIAGCD5	9,115,368	100.00	-
DIAGCD6	9,115,520	100.00	-
DIAGCD7	9,115,546	100.00	-
DIAGCD8	9,115,589	100.00	-
DIAGCD9	9,115,578	100.00	-
DIAGCD10	9,115,583	100.00	-
DIAGCD11	9,115,579	100.00	-
DIAGCD12	9,115,588	100.00	-
AMT_OTH_INS_PD_HDR	8,828,869	96.85	-
PAIDDATE_DTL	348,611	3.82	In the encounter examples that Blue Plus reviewed, the values that were provided on the EDV study file matched its claims system but not the values that were submitted on the 837P. Blue Plus confirmed that the correction to submit the provider paid date on the encounters to MN DHS was implemented on November 19, 2025.
AMT_MCO_PAID_DTL	6,343,755	69.59	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values that were provided on the MN DHS file matched the values that were submitted on the 837P and its claims system.
AMT_OTH_INS_PD_DTL	8,983,660	98.55	-
CLM_STATUS_DTL	8,501,612	93.26	This was identified as an EDV study extraction issue. In the encounter examples that Blue Plus reviewed, \$0.00 paid lines were incorrectly classified as denied but were submitted correctly in the 837P to MN DHS. The values that were submitted on the 837P matched its claims system.
PROC_CD	6,141,771	67.38	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values that were provided on the MN DHS file matched the values that were submitted on the 837P and its claims system.
QTY_UNITS_BILLED	8,414,983	92.31	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values that were provided on the MN DHS file matched the values that were submitted on the 837P and its claims system.

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
PROF_PROC_MOD_CD1	8,198,130	89.94	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values that were provided on the MN DHS file matched the values that were submitted on the 837P and its claims system.
PROF_PROC_MOD_CD2	8,918,628	97.84	See finding for PROF_PROC_MOD_CD1.
PROF_PROC_MOD_CD3	9,084,535	99.66	See finding for PROF_PROC_MOD_CD1.
PROF_PROC_MOD_CD4	9,113,032	99.97	See finding for PROF_PROC_MOD_CD1.
NDC_CODE	8,759,964	96.10	-
BILLING_PROV_NPI	9,110,555	99.94	-
RENDERING_PROV_NPI	9,083,950	99.65	-

EDV: encounter data validation; MN: Minnesota; DHS: Department of Human Services; ICN: internal control number; MCO: managed care organization; NDC: National Drug Code; NPI: National Provider Identifier.

Institutional Inpatient Claim Type

IPRO compared each data element in Blue Plus’s EDV study data file to the encounter data received from MN DHS by DHS ICN and DHS line number. **Table 3** identifies the match rates for the institutional inpatient claim type. Encounters that did not match on DHS ICN and DHS line number were reviewed by Blue Plus, MN DHS, and IPRO. The non-matches were attributed to the following reasons:

- The encounters with a type of bill of Skilled Nursing Facility (“021”) or Residential Facility (“086”) were included in the EDV study data file as institutional inpatient claims and were received from MN DHS as institutional outpatient claims. **Table 4** identifies the match rates with the institutional outpatient file received from MN DHS for the encounters that did not match on DHS ICN and DHS line number.
- The encounters that were voided were submitted to MN DHS with the original ICN.
- Replacement claims with frequency code “7” were not submitted to MN DHS per DHS guidelines.

Table 3: Match Rate for the Institutional Inpatient Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Inpatient	450,238	368,368	81.82

Table 4: Match Rate with the Outpatient DHS File

Total Encounter Lines (n)	Not Matched Encounter Lines (n)	Match Rate by DHS ICN and DHS Line Number (%)	Match Rate by Encounter Lines by DHS ICN (%)	Match Rate Encounter Lines by DHS ICN and TOB 21 and 86 (%)
450,238	81,870	60.22	81.25	80.77

DHS: Department of Human Services; ICN: internal control number; TOB: type of bill.

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 5**. Match rate percentages are rounded to the nearest hundredth.

Table 5: Institutional Inpatient Data Element Discrepancies and Findings

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
MEDICAID_MEMBER_ID	368,368	100.00	-
MCO_ICN	368,368	100.00	-
MCO_TRACKING_ICN	324,552	88.11	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values that were provided on the MN DHS file matched the values that were submitted on the 837I and its claims system.
ADMIT_TYPE_CD	368,368	100.00	-
FAC_ADM_DT	368,368	100.00	-
START_DT	368,365	100.00	-
END_DT	366,251	99.43	-
DIS_STAT	368,368	100.00	-
TYPEBILL	368,368	100.00	-
TYPEBILL_FREQ	344,842	93.61	Blue Plus confirmed that the values that were submitted on the encounter to MN DHS were per DHS guidelines and did not match the values in its claims system. The values that were submitted on the 837I file matched the values on the MN DHS file. The values that Blue Plus submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	368,368	100.00	-
DIAGCD2	368,368	100.00	-
DIAGCD3	368,368	100.00	-
DIAGCD4	368,368	100.00	-
DIAGCD5	368,368	100.00	-
DIAGCD6	368,368	100.00	-
DIAGCD7	368,368	100.00	-
DIAGCD8	368,368	100.00	-
DIAGCD9	368,368	100.00	-
DIAGCD10	368,368	100.00	-
DIAGCD11	368,368	100.00	-
DIAGCD12	368,368	100.00	-
DIAGCD13	368,368	100.00	-
DIAGCD14	368,353	100.00	-
DIAGCD15	368,353	100.00	-
DIAGCD16	368,353	100.00	-
DIAGCD17	368,353	100.00	-
DIAGCD18	368,353	100.00	-
DIAGCD19	368,368	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD20	368,368	100.00	-
DIAGCD21	368,368	100.00	-
DIAGCD22	368,368	100.00	-
DIAGCD23	368,368	100.00	-
DIAGCD24	368,368	100.00	-
DIAGCD25	328,775	89.25	This was identified as an EDV study extraction issue. In the encounter examples Blue Plus reviewed, the values it submitted for the EDV study matched the values in its claims system. Blue Plus confirmed that an update was implemented in May 2025 to include the data element on the 837I file.
DX_ADMIT	365,473	99.21	-
PATIENT_RSON_VIS_1	368,368	100.00	-
PATIENT_RSON_VIS_2	368,368	100.00	-
PATIENT_RSON_VIS_3	368,368	100.00	-
ECODE_1	354,855	96.33	-
ECODE_2	353,495	95.96	-
ECODE_3	364,468	98.94	-
ECODE_4	367,777	99.84	-
ECODE_5	368,252	99.97	-
ECODE_6	368,331	99.99	-
ECODE_7	368,368	100.00	-
ECODE_8	368,368	100.00	-
ECODE_9	368,368	100.00	-
ECODE_10	368,368	100.00	-
ECODE_11	368,368	100.00	-
ECODE_12	368,368	100.00	-
SURG1	368,368	100.00	-
SURG2	368,368	100.00	-
SURG3	368,368	100.00	-
SURGDTE1	368,368	100.00	-
SURGDTE2	368,368	100.00	-
SURGDTE3	368,368	100.00	-
PAIDDATE_HDR	5,448	1.48	In the encounter examples that Blue Plus reviewed, the values that were submitted on the EDV study file matched the values in its claims system. Blue Plus confirmed that the correction to submit the provider paid date on the encounters to MN DHS was implemented on November 19, 2025.
AMT_MCO_PAID_HDR	368,339	99.99	-
AMT_OTH_INS_PD_HDR	362,141	98.31	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
AMT_OTH_INS_PD_DTL	357,670	97.10	-
CLM_STATUS_HDR	350,934	95.27	-
UNITS_BILLED	95,886	26.03	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
REVENUE_CODE	38,940	10.57	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
BILLING_PROV_NPI	367,872	99.87	-
ATTENDING_PROV_NPI	350,551	95.16	-

EDV: encounter data validation; MN: Minnesota; DHS: Department of Human Services; ICN: internal control number; MCO: managed care organization; NPI: National Provider Identifier.

Institutional Outpatient Claim Type

IPRO compared each data element in Blue Plus’s EDV study data file to the encounter data received from MN DHS. **Table 6** identifies the match rates for the institutional outpatient claim type.

Encounters that did not match DHS ICN and DHS line number were reviewed by Blue Plus, MN DHS, and IPRO. The non-matches were attributed to the following reasons:

- The encounters that were voided were not submitted to MN DHS.
- The encounters were for disenrolled members, which were not submitted to MN DHS. Lines with same date of service, revenue, procedure code, and modifiers are combined for encounter data submission as per MN DHS guidelines; therefore, line numbers submitted on encounters to MN DHS would not match the EDV study data file.

Table 6: Match Rate for the Institutional Outpatient Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Outpatient	4,894,699	4,796,990	98.00

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 7**. Match rate percentages are rounded to the nearest hundredth.

Table 7: Institutional Outpatient Data Element Discrepancies and Findings

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
MEDICAID_MEMBER_ID	4,796,990	100.00	-
MCO_ICN	4,796,990	100.00	-
MCO_TRACKING_ICN	4,392,330	91.56	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
ADMIT_TYPE_CD	4,796,971	100.00	-
FAC_ADM_DT	4,638,865	96.70	-
START_DT	4,771,704	99.47	-
END_DT	4,736,998	98.75	-
DTL_SVC_DT	3,932,698	81.98	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
DIS_STAT	4,796,965	100.00	-
TYPEBILL	4,796,990	100.00	-
TYPEBILL_FREQ	4,295,287	89.54	Blue Plus confirmed that the values that were submitted on the encounter to MN DHS were per DHS guidelines and did not match the values in its claims system. The values that were submitted on the 837I file matched the values on the MN DHS file. The values that Blue Plus submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	4,796,990	100.00	-
DIAGCD2	4,796,939	100.00	-
DIAGCD3	4,796,856	100.00	-
DIAGCD4	4,796,866	100.00	-
DIAGCD5	4,796,925	100.00	-
DIAGCD6	4,796,950	100.00	-
DIAGCD7	4,796,950	100.00	-
DIAGCD8	4,796,950	100.00	-
DIAGCD9	4,796,990	100.00	-
DIAGCD10	4,796,990	100.00	-
DIAGCD11	4,796,990	100.00	-
DIAGCD12	4,796,990	100.00	-
DIAGCD13	4,796,990	100.00	-
DIAGCD14	4,796,990	100.00	-
DIAGCD15	4,796,990	100.00	-
DIAGCD16	4,796,990	100.00	-
DIAGCD17	4,796,990	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD18	4,796,990	100.00	-
DIAGCD19	4,796,990	100.00	-
DIAGCD20	4,796,990	100.00	-
DIAGCD21	4,796,990	100.00	-
DIAGCD22	4,796,990	100.00	-
DIAGCD23	4,796,990	100.00	-
DIAGCD24	4,796,990	100.00	-
DIAGCD25	4,772,849	99.50	-
DX_ADMIT	4,796,892	100.00	-
PATIENT_RSON_VIS_1	4,015,109	83.70	In the encounter examples that Blue Plus reviewed, the sequence in which patient reason-for-visit codes were submitted to MN DHS were incorrect. The values that were provided in the EDV study file matched its claims system. As of January 22, 2026, Blue Plus confirmed that this defect will be resolved in the future.
PATIENT_RSON_VIS_2	4,015,388	83.71	See finding for PATIENT_RSON_VIS_1.
PATIENT_RSON_VIS_3	4,281,801	89.26	See finding for PATIENT_RSON_VIS_1.
ECODE_1	4,544,718	94.74	Blue Plus confirmed that the values it provided on the EDV study data file matched the values that were submitted on the 837I and its claims system. IPRO to discuss this discrepancy with MN DHS.
ECODE_2	4,710,053	98.19	See finding for ECODE_1.
ECODE_3	4,762,377	99.28	See finding for ECODE_1.
ECODE_4	4,786,548	99.78	See finding for ECODE_1.
ECODE_5	4,796,362	99.99	See finding for ECODE_1.
ECODE_6	4,796,863	100.00	See finding for ECODE_1.
ECODE_7	4,796,885	100.00	See finding for ECODE_1.
ECODE_8	4,796,886	100.00	See finding for ECODE_1.
ECODE_9	4,796,990	100.00	See finding for ECODE_1.
ECODE_10	4,796,990	100.00	See finding for ECODE_1.
ECODE_11	4,796,990	100.00	See finding for ECODE_1.
ECODE_12	4,796,990	100.00	See finding for ECODE_1.
SURG1	4,796,990	100.00	-
SURG2	4,796,990	100.00	-
SURG3	4,796,990	100.00	-
SURGDTE1	4,796,990	100.00	-
SURGDTE2	4,796,990	100.00	-
SURGDTE3	4,796,990	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
PAIDDATE_HDR	189,664	3.95	In the encounter examples that Blue Plus reviewed, the values that were submitted on the EDV study file matched the values in its claims system. The values that were submitted on the 837I contained the claim adjudication date instead of the provider paid date. Blue Plus confirmed that the correction to submit the provider paid date on the encounters to MN DHS was implemented on November 19, 2025.
AMT_MCO_PAID_HDR	4,796,990	100.00	-
AMT_OTH_INS_PD_HDR	4,547,807	94.81	Data element is summarized from AMT_OTH_INS_PD_DTL. IPRO to discuss removing the data element from future EDV studies with MN DHS.
PAIDDATE_DTL	189,664	3.95	In the encounter examples that Blue Plus reviewed, the values that were submitted on the EDV study file matched the values in its claims system. The values that were submitted on the 837I contained the claim adjudication date instead of the provider paid date. Blue Plus confirmed that the correction to submit the provider paid date on the encounters to MN DHS was implemented on November 19, 2025.
AMT_MCO_PAID_DTL	2,081,877	43.40	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
AMT_OTH_INS_PD_DTL	4,646,060	96.85	-
CLM_STATUS_HDR	4,345,802	90.59	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
CLM_STATUS_DTL	4,547,186	94.79	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
PROC_CD	1,723,586	35.93	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
UNITS_BILLED	3,682,629	76.77	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
MODIFIER1	3,316,473	69.14	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
MODIFIER2	4,265,952	88.93	See finding for MODIFIER1.
MODIFIER3	4,679,414	97.55	See finding for MODIFIER1.
MODIFIER4	4,781,275	99.67	See finding for MODIFIER1.
REVENUE_CODE	2,589,410	53.98	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
NDC_CODE	3,812,111	79.47	This was identified as an EDV study extraction issue. Blue Plus confirmed that the values on the MN DHS file matched the values that were submitted on the 837I and its claims system.
BILLING_PROV_NPI	4,796,802	100.00	-
ATTENDING_PROV_NPI	4,521,455	94.26	In the encounter examples that Blue Plus reviewed, the values that were submitted for the EDV study matched the values that were submitted to MN DHS and its claims system. IPRO to discuss this discrepancy with MN DHS.
REFERRING_PROV_NPI	4,540,755	94.66	Blue Plus confirmed that there was a reporting error that prevented Blue Plus from submitting the data element on encounters to MN DHS. As of January 22, 2026, Blue Plus was addressing the defect.

EDV: encounter data validation; MN: Minnesota; DHS: Department of Human Services; ICN: internal control number; MCO: managed care organization; NDC: National Drug Code; NPI: National Provider Identifier.

Dental Claim Type

IPRO compared each data element in Blue Plus’s EDV study data file to the encounter data received from MN DHS. Encounters that did not match DHS ICN and DHS line number were reviewed by Blue Plus, MN DHS, and IPRO. The non-matches were attributed for the following reasons:

- The encounters that were voided were not submitted to MN DHS.
- The encounters were submitted to MN DHS; however, the encounter line was subsequently voided and was not included in the file from MN DHS.
- The encounter line was rejected by MN DHS.

Table 8 identifies the match rates for the dental claim type.

Table 8: Match Rate for the Dental Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Dental	1,094,717	1,089,531	99.53

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 9**. Match rate percentages are rounded to the nearest hundredth.

Table 9: Dental Data Element Discrepancies and Findings

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
MEDICAID_MEMBER_ID	1,089,531	100.00	-
MCO_ICN	1,089,531	100.00	-
MCO_TRACKING_ICN	817,069	74.99	In the encounter examples Blue Plus reviewed, the value submitted for the EDV study matched the value in its claims system. Blue Plus determined that the discrepancy was from the following scenarios: <ul style="list-style-type: none"> • Scenario 1: Data element values were missing on the MN DHS file because the claim was adjusted and only the adjusted version of the claim was submitted to MN DHS. • Scenario 2: Data element values were missing on the EDV study file because the claim was not adjusted in the Blue Plus’s claims system but was adjusted during the encounter submission.
DTE_FIRST_SVC_HDR	1,079,573	99.09	-
DTE_LAST_SVC_HDR	1,079,508	99.08	-
DTE_FIRST_SVC_DTL	1,089,413	99.99	-
DTE_LAST_SVC_DTL	1,089,413	99.99	-
UNITS_BILLED	1,089,531	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
POS_CD	1,030,624	94.59	In the encounter examples Blue Plus reviewed, the data element values defaulted to "11" (Office Visit) when the provider did not submit a place of service code. The values that were submitted in the EDV study data file matched Blue Plus's claims system, and the values that were submitted on the 837D matched the values on the MN DHS file.
PAIDDATE_HDR	1,089,088	99.96	-
AMT_MCO_PAID_HDR	50,511	4.64	This was identified as an EDV study extraction issue. The values provided on the MN DHS file matched the values in Blue Plus's claims system and the 837D.
AMT_OTH_INS_PD_HDR	1,088,813	99.93	-
PAIDDATE_DTL	1,089,088	99.96	-
AMT_MCO_PAID_DTL	1,089,477	100.00	-
AMT_OTH_INS_PD_DTL	1,089,531	100.00	-
CLM_STATUS_HDR	1,089,531	100.00	-
CLM_STATUS_DTL	1,089,522	100.00	-
DIAGCD1	1,089,531	100.00	-
DIAGCD2	1,089,531	100.00	-
DIAGCD3	1,089,531	100.00	-
DIAGCD4	1,089,531	100.00	-
CDT	1,089,490	100.00	-
TOOTHNUMBER	1,086,474	99.72	-
MODIFIER1	930,965	85.45	In one of the encounter examples that Blue Plus reviewed, the values populated on the EDV study file were tooth surface codes. This was identified as an EDV extraction issue. In another example that Blue Plus reviewed, the values of "51" (Multiple Procedures) were submitted on the 837D.
MODIFIER2	1,003,483	92.10	See finding for MODIFIER1.
MODIFIER3	1,060,753	97.36	See finding for MODIFIER1.
MODIFIER4	1,081,188	99.23	See finding for MODIFIER1.
BILLING_PROV_NPI	1,088,773	99.93	-
RENDERING_PROV_NPI	1,089,531	100.00	-

EDV: encounter data validation; MN: Minnesota; DHS: Department of Human Services; ICN: internal control number; MCO: managed care organization; NPI: National Provider Identifier.

Pharmacy Claim Type

IPRO compared each data element in Blue Plus’s EDV study data file to the encounter data received from MN DHS. Encounters that did not match on Medicaid member ID, dispense date, NDC, prescribing provider NPI, amount paid, and DHS ICN were reviewed by Blue Plus, MN DHS, and IPRO. **Table 10** identifies the match rates for the pharmacy claim type. The non-matches were attributed to the following reasons:

- The encounters were voided (“In-Cycle” reversals) and not submitted to MN DHS.
- The encounters were initially active in the claim system and subsequently voided (“Out-of-Cycle” reversals). The non-match could be due to timing. The encounters were successfully submitted to MN DHS.
- Claims processed during a period in which the members were disenrolled were not submitted to MN DHS.

Table 10: Match Rate for the Pharmacy Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Pharmacy	5,393,603	3,768,447	69.87

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 11**. Match rate percentages are rounded to the nearest hundredth.

Table 11: Pharmacy Data Element Discrepancies and Findings

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
MEDICAID_MEMBER_ID	3,768,447	100.00	-
MCO_ICN	3,768,447	100.00	-
MCO_TRACKING_ICN	3,741,805	99.29	-
DTE_FIRST_SVC	3,609,860	95.79	-
PAIDDATE_HDR	289	0.01	In the encounter examples that Blue Plus reviewed, the values that were submitted for the EDV study matched the values in its claims system but did not match the NCPDP. Blue Plus confirmed that the values did not match due to additional logic that is applied to populate the data element while creating the NCPDP file for MN DHS. In the encounter example that Blue Plus reviewed, the values in the claims system aligned with the reimbursement check date that was provided on the EDV study file.
AMT_MCO_PAID_HDR	3,768,447	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
COST_INGRD_AMT	8,890	0.24	<p>This was identified as an EDV study extraction issue. Blue Plus confirmed that the approved ingredient cost values were included on the EDV study file, but the submitted ingredient cost values were populated on the NCPDP file.</p> <p>IPRO to discuss this discrepancy with MN DHS.</p>
CLM_STATUS_HDR	3,757,505	99.71	-
PRESC_PROV_NPI	3,768,447	100.00	-
PRESC_DATE	3,768,443	100.00	-
NUM_PRESC_ID	3,768,447	100.00	-
DISPENSE_DATE	3,768,447	100.00	-
NDC_CODE	3,768,447	100.00	-
QTY_DISPENSE_DTL	3,767,236	99.97	-
NUM_DAY_SUPPLY	3,767,125	99.96	-

EDV: encounter data validation; MN: Minnesota; DHS: Department of Human Services; ICN: internal control number; MCO: managed care organization; NCPDP: National Council for Prescription Drug Program; NDC: National Drug Code; NPI: National Provider Identifier.

Conclusions and Recommendations

IPRO finds there to be no material electronic encounter data issues. The completeness, timeliness, and accuracy of electronic encounter data collected and submitted are sufficient for the MCO to help inform quality improvement initiatives.

IPRO's findings are based upon the review of the Blue Plus EDV study file that matches the MN DHS file, review of the values for the sampled electronic encounters, identification and research of the discrepant values, review of the discrepancy reasons received from Blue Plus, and discussions with Blue Plus and MN DHS.

Findings for Electronic Encounter Data

Professional Encounter Data Type Only

- CLM_STATUS_DTL: This was identified as an EDV study extraction issue. In the encounter examples that Blue Plus reviewed, \$0.00 paid lines were incorrectly classified as denied but were submitted correctly in the 837P to MN DHS. The values that were submitted on the 837P matched its claims system.
- DTE_FIRST_SVC, DTE_LAST_SVC, AMT_MCO_PAID_DTL, PROC_CD, QTY_UNITS_BILLED, and PROF_PROC_MOD_CD1 to PROF_PROC_MOD_CD4: In the encounter examples that Blue Plus reviewed, the values on 837P that were provided to MN DHS matched Blue Plus's claims system. These were identified as an EDV extraction issue due to reporting logic errors.

Institutional Inpatient Encounter Data Type Only

- DIAGCD25: Blue Plus confirmed that DIAGCD25 was not extracted by the application and was not submitted to MN DHS. This issue was corrected by Blue Plus in May 2025.
- UNITS_BILLED and REVENUE_CODE: In the encounter examples that Blue Plus reviewed, the values on 837I that were provided to MN DHS matched Blue Plus's claims system. These were identified as an EDV extraction issue due to reporting logic error.

Institutional Outpatient Encounter Data Type Only

- ECODE_1 to ECODE_12: In the encounter example that Blue Plus reviewed, the values that were submitted for the EDV study aligned with both the 837 file and Blue Plus's claims system. IPRO will discuss this discrepancy with MN DHS.
- PATIENT_RSON_VIS_1 to PATIENT_RSON_VIS_3: In the encounter examples that Blue Plus reviewed, the values that were provided to MN DHS were accurate; however, the sequence of the values provided differed from what was on the claims system. Blue Plus confirmed that it will implement a solution to address this defect in the future.
- DTL_SVC_DT, AMT_MCO_PAID_DTL, PROC_CD, UNITS_BILLED, MODIFIER1 to MODIFIER4, REVENUE_CODE, NDC_CODE, CLM_STATUS_HDR, and CLM_STATUS_DTL: In the encounter examples that Blue Plus reviewed, the values on 837I that were provided to MN DHS matched Blue Plus's claims system. These were identified as an EDV extraction issue due to reporting logic errors.
- AMT_OTH_INS_PD_HDR: Data element is summarized from AMT_OTH_INS_PD_DTL. IPRO to discuss removing the data element from future EDV studies with MN DHS.
- ATTENDING_PROV_NPI: In the encounter example that Blue Plus reviewed, the values that were submitted to MN DHS aligned with the 837I and its claims system; however, the corresponding MN DHS values were blank. MN DHS indicated that the values populated on the MN DHS file only included NPIs that were registered or enrolled with MN DHS. As a result, if an NPI was only included in the MCO network but was not registered at MN DHS, then the values were blank in the MN DHS file, even when the values were submitted in 837 files. IPRO to discuss this discrepancy with MN DHS.

- REFERRING_PROV_NPI: Blue Plus confirmed that there was a reporting error that prevented Blue Plus from submitting the data element on encounters to MN DHS. As of January 22, 2026, Blue Plus was addressing the defect.

Dental Encounter Data Type Only

- POS_CD: In the encounter example that Blue Plus reviewed, the value in the claim system aligned with what was provided to MN DHS. If place of service is not submitted by the provider, then Blue Plus defaults it to “11” (Office Visit).
- AMT_MCO_PAID_HDR, MODIFIER1 and MODIFIER2: In the encounter examples that Blue Plus reviewed, the values on 837D that were sent to MN DHS matched Blue Plus’s claims system. These were identified as an EDV extraction issue due to reporting logic errors.

Pharmacy Encounter Data Type Only

- COST_INGRD_AMT: In the encounter example that Blue Plus reviewed, the values it submitted for the EDV study matched the values on NCPDP file and its claims system. IPRO will discuss this discrepancy with MN DHS.
- PAIDDATE_HDR: In the encounter example that Blue Plus reviewed, the values in the claims system aligned with the reimbursement check date that was provided on the EDV study file.

Professional, Institutional Inpatient, Institutional Outpatient, and Dental Encounter Data Types Only

- MCO_TRACKING_ICN: Blue Plus confirmed the values that were submitted on the 837 file matched its claims system. For professional, institutional inpatient, and institutional outpatient, the discrepancies were identified as an EDV study extraction issue. For dental encounters, the discrepancies were due to claim adjustments.

Institutional Inpatient and Outpatient Encounter Data Types Only

- PAIDDATE_HDR: In the encounter examples that Blue Plus reviewed, the values that were submitted on the EDV study file matched the values in its claims system. The values that were submitted on the 837I contained the claim adjudication date instead of the provider paid date. Blue Plus confirmed that the correction to submit the provider paid date on the encounters to MN DHS was implemented in November 2025.
- TYPEBILL_FREQ: As per DHS guidelines, the expected values for the Type of Bill frequency are “1” (Admit through Discharge), “2” (Interim-First Claim), “3” (Interim-Continuing Claim), “4” (Interim-Last Claim), “5” (Late Charges), and “8” (Void). Blue Plus confirmed that the values that were submitted on the encounter to MN DHS were per DHS guidelines and did not match the values in its claims system. The values that were submitted on the 837I file matched the values on the MN DHS file. The values that Blue Plus submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.

Professional and Institutional Outpatient Encounter Data Types Only

- PAIDDATE_DTL: In the encounter example that Blue Plus reviewed, the values that were provided on the EDV study file aligned with its claims system. The values that were submitted on the 837P/837I contained the claim adjudication date instead of the provider paid date. Blue Plus confirmed that the correction to submit the provider paid date on the encounters to MN DHS was implemented in November 2025.

Recommendations for Future EDV Studies

- AMT_OTH_INS_PD_HDR: Data element is summarized from AMT_OTH_INS_PD_DTL. IPRO to discuss removing this data element from future EDV studies with MN DHS.
- Blue Plus should correct any discrepancies related to the EDV reporting logic utilized to develop the EDV study file.