



## **Minnesota Health Care Program Medicaid Managed Care**

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### **Encounter Data Validation Study (2025–2026) HealthPartners**

Final

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

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## 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), HealthPartners. 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 HealthPartners 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, HealthPartners should ensure that identified data extraction issues are resolved prior to data submission.

## Background

MN DHS collects encounter data from HealthPartners. 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 the periods of service 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 HealthPartners by Claim Type

The HealthPartners EDV study call was conducted on January 20, 2026. HealthPartners’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, HealthPartners, 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 HealthPartners’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 HealthPartners, MN DHS, and IPRO. The non-matches were attributed to the following reasons:

- The encounters were voided and not submitted to MN DHS.
- The encounter lines that would cause the encounter to be rejected were not submitted to MN DHS.
- The encounters were submitted to MN DHS but were not included on the file from 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	6,499,635	6,250,830	96.17

IPRO compared each data element in HealthPartners’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 HealthPartners. During the teleconference, HealthPartners 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	6,202,544	99.23	-
MCO_ICN	6,250,830	100.00	-
MCO_TRACKING_ICN	6,247,080	99.94	-
DTE_FIRST_SVC	5,732,376	91.71	This was identified as an EDV study extraction issue. HealthPartners confirmed that values that were submitted on the 837P to MN DHS matched its claims system.
DTE_LAST_SVC	5,723,528	91.56	This was identified as an EDV study extraction issue. HealthPartners confirmed that values that were submitted on the 837P to MN DHS matched its claims system.
POS_CD	6,250,521	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD1	5,663,798	90.61	This was identified as an EDV study extraction issue. HealthPartners confirmed that the values submitted on the 837P to MN DHS matched its claims system.
DIAGCD2	5,080,681	81.28	See finding for DIAGCD1.
DIAGCD3	5,379,565	86.06	See finding for DIAGCD1.
DIAGCD4	5,644,153	90.29	See finding for DIAGCD1.
DIAGCD5	5,916,538	94.65	See finding for DIAGCD1.
DIAGCD6	6,232,580	99.71	See finding for DIAGCD1.
DIAGCD7	6,236,507	99.77	See finding for DIAGCD1.
DIAGCD8	6,239,686	99.82	See finding for DIAGCD1.
DIAGCD9	6,242,339	99.86	See finding for DIAGCD1.
DIAGCD10	6,244,422	99.90	See finding for DIAGCD1.
DIAGCD11	6,246,017	99.92	See finding for DIAGCD1.
DIAGCD12	6,210,388	99.35	See finding for DIAGCD1.
AMT_OTH_INS_PD_HDR	5,951,704	95.21	-
PAIDDATE_DTL	5,619,624	89.90	This was identified as an EDV study extraction issue. In the encounter examples that HealthPartners reviewed, the data element values for paid \$0.00 claims were not populated on the EDV study file. The adjudication date that was submitted on 837P to MN DHS matched its claims system.  IPRO to discuss discrepancy with MN DHS.
AMT_MCO_PAID_DTL	6,103,815	97.65	-
AMT_OTH_INS_PD_DTL	6,161,413	98.57	-
CLM_STATUS_DTL	5,667,409	90.67	This was identified as an EDV study extraction issue. In the encounter examples that HealthPartners reviewed for \$0.00 paid line, the claims were incorrectly updated to denied in the EDV study file but were submitted correctly in the 837P to MN DHS. The values that were submitted on the 837P matched its claims system.
PROC_CD	6,202,385	99.22	-
QTY_UNITS_BILLED	6,229,273	99.66	-
PROF_PROC_MOD_CD1	6,011,500	96.17	-
PROF_PROC_MOD_CD2	6,126,674	98.01	-
PROF_PROC_MOD_CD3	6,238,831	99.81	-
PROF_PROC_MOD_CD4	6,250,387	99.99	-
NDC_CODE	6,246,002	99.92	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
BILLING_PROV_NPI	6,237,066	99.78	-
RENDERING_PROV_NPI	6,191,709	99.05	-

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 HealthPartners’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 HealthPartners, 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 encounter lines that would cause the encounter to be rejected or if member benefits were not administered by HealthPartners were not submitted to MN DHS.
- The encounters were submitted to MN DHS but were not included on the file from MN DHS.

**Table 3: Match Rate for the Institutional Inpatient Claim Type**

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Inpatient	231,654	223,635	96.54

**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 (%)
231,654	8,019	8.23	9.94	0.00

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	222,005	99.27	-
MCO_ICN	223,635	100.00	-
MCO_TRACKING_ICN	223,327	99.86	-
ADMIT_TYPE_CD	223,635	100.00	-
FAC_ADM_DT	223,635	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
START_DT	223,635	100.00	-
END_DT	223,635	100.00	-
DIS_STAT	223,635	100.00	-
TYPEBILL	223,635	100.00	-
TYPEBILL_FREQ	202,921	90.74	HealthPartners confirmed that the values submitted on the encounter to MN DHS were per MN DHS guidelines and did not match the values in its claims system. The values submitted on the 837I matched the values on the MN DHS file. The values that HealthPartners submitted on the EDV study data file matched its claims system.  IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	223,635	100.00	-
DIAGCD2	223,635	100.00	-
DIAGCD3	223,635	100.00	-
DIAGCD4	223,635	100.00	-
DIAGCD5	223,635	100.00	-
DIAGCD6	223,625	100.00	-
DIAGCD7	223,625	100.00	-
DIAGCD8	223,625	100.00	-
DIAGCD9	223,625	100.00	-
DIAGCD10	223,635	100.00	-
DIAGCD11	223,635	100.00	-
DIAGCD12	223,635	100.00	-
DIAGCD13	223,635	100.00	-
DIAGCD14	223,635	100.00	-
DIAGCD15	223,635	100.00	-
DIAGCD16	223,635	100.00	-
DIAGCD17	223,635	100.00	-
DIAGCD18	223,635	100.00	-
DIAGCD19	223,635	100.00	-
DIAGCD20	223,635	100.00	-
DIAGCD21	223,635	100.00	-
DIAGCD22	223,635	100.00	-
DIAGCD23	223,635	100.00	-
DIAGCD24	223,635	100.00	-
DIAGCD25	223,635	100.00	-
DX_ADMIT	223,635	100.00	-
PATIENT_RSON_VIS_1	223,635	100.00	-
PATIENT_RSON_VIS_2	223,635	100.00	-
PATIENT_RSON_VIS_3	223,635	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
ECODE_1	181,278	81.06	HealthPartners confirmed that the values it provided on the EDV study data file matched the values submitted on the 837I and its claims system.  IPRO to discuss this discrepancy with MN DHS.
ECODE_2	211,520	94.58	See finding for ECODE_1.
ECODE_3	220,557	98.62	See finding for ECODE_1.
ECODE_4	223,044	99.74	See finding for ECODE_1.
ECODE_5	223,434	99.91	See finding for ECODE_1.
ECODE_6	223,604	99.99	See finding for ECODE_1.
ECODE_7	223,635	100.00	See finding for ECODE_1.
ECODE_8	223,635	100.00	See finding for ECODE_1.
ECODE_9	223,635	100.00	See finding for ECODE_1.
ECODE_10	223,635	100.00	See finding for ECODE_1.
ECODE_11	223,635	100.00	See finding for ECODE_1.
ECODE_12	223,635	100.00	See finding for ECODE_1.
SURG1	223,635	100.00	-
SURG2	223,635	100.00	-
SURG3	223,635	100.00	-
SURGDTE1	223,635	100.00	-
SURGDTE2	223,635	100.00	-
SURGDTE3	223,635	100.00	-
PAIDDATE_HDR	189,494	84.73	In the encounter examples HealthPartners reviewed, the data element values for claims that were denied or paid \$0.00 were not retained in the claims system and not provided on the EDV study file. However, the claims adjudication date was provided on the 837I to MN DHS. The values that were submitted on the 837I matched values that were provided on MN DHS file.  IPRO to discuss discrepancy with MN DHS.
AMT_MCO_PAID_HDR	223,635	100.00	-
AMT_OTH_INS_PD_HDR	222,248	99.38	-
AMT_OTH_INS_PD_DTL	221,206	98.91	-
CLM_STATUS_HDR	223,399	99.89	-
UNITS_BILLED	223,577	99.97	-
REVENUE_CODE	223,555	99.96	-
BILLING_PROV_NPI	223,605	99.99	-
ATTENDING_PROV_NPI	213,806	95.60	-

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 HealthPartners'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 on DHS ICN and DHS line number were reviewed by HealthPartners, MN DHS, and IPRO. The non-matches were attributed to the following reasons:

- The encounters were voided and not submitted to MN DHS.
- The encounters were denied and not submitted to MN DHS.
- The encounters were submitted to MN DHS but were not included on the file from MN DHS.

**Table 6: Match Rate for the Institutional Outpatient Claim Type**

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Outpatient	2,186,649	2,102,121	96.13

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	2,088,833	99.37	-
MCO_ICN	2,102,121	100.00	-
MCO_TRACKING_ICN	2,100,936	99.94	-
ADMIT_TYPE_CD	2,102,121	100.00	-
FAC_ADM_DT	29,510	1.40	This was identified as an EDV extraction issue. The date of encounter was provided on the study file and was not submitted on the 837I to MN DHS.
START_DT	2,102,121	100.00	-
END_DT	2,102,121	100.00	-
DTL_SVC_DT	2,099,048	99.85	-
DIS_STAT	2,102,106	100.00	-
TYPEBILL	2,102,121	100.00	-
TYPEBILL_FREQ	1,661,331	79.03	HealthPartners confirmed that the values submitted on the encounter to MN DHS were per MN 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.  IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	2,102,119	100.00	-
DIAGCD2	2,102,119	100.00	-
DIAGCD3	2,102,119	100.00	-
DIAGCD4	2,102,121	100.00	-
DIAGCD5	2,102,121	100.00	-
DIAGCD6	2,102,121	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD7	2,102,121	100.00	-
DIAGCD8	2,102,121	100.00	-
DIAGCD9	2,102,121	100.00	-
DIAGCD10	2,102,121	100.00	-
DIAGCD11	2,102,121	100.00	-
DIAGCD12	2,102,121	100.00	-
DIAGCD13	2,102,121	100.00	-
DIAGCD14	2,102,121	100.00	-
DIAGCD15	2,102,121	100.00	-
DIAGCD16	2,102,121	100.00	-
DIAGCD17	2,102,121	100.00	-
DIAGCD18	2,102,121	100.00	-
DIAGCD19	2,102,121	100.00	-
DIAGCD20	2,102,121	100.00	-
DIAGCD21	2,102,121	100.00	-
DIAGCD22	2,102,121	100.00	-
DIAGCD23	2,102,121	100.00	-
DIAGCD24	2,102,121	100.00	-
DIAGCD25	2,102,121	100.00	-
DX_ADMIT	2,102,121	100.00	-
PATIENT_RSON_VIS_1	316,021	15.03	HealthPartners confirmed that these codes were not submitted on 837I. Per DHS guidelines, this is not a required data element for submission to MN DHS. The values provided on the EDV study file matched its claims system.  IPRO to discuss discrepancy with MN DHS.
PATIENT_RSON_VIS_2	1,803,394	85.79	See finding for PATIENT_RSON_VIS_1.
PATIENT_RSON_VIS_3	1,945,642	92.56	See finding for PATIENT_RSON_VIS_1.
ECODE_1	1,982,964	94.33	HealthPartners confirmed that the values it provided on the EDV study data file matched the values submitted on the 837I and its claims system.  IPRO to discuss this discrepancy with MN DHS.
ECODE_2	2,070,073	98.48	See finding for ECODE_1.
ECODE_3	2,092,301	99.53	See finding for ECODE_1.
ECODE_4	2,100,871	99.94	See finding for ECODE_1.
ECODE_5	2,101,940	99.99	See finding for ECODE_1.
ECODE_6	2,102,049	100.00	See finding for ECODE_1.
ECODE_7	2,102,069	100.00	See finding for ECODE_1.
ECODE_8	2,102,095	100.00	See finding for ECODE_1.
ECODE_9	2,102,103	100.00	See finding for ECODE_1.
ECODE_10	2,102,103	100.00	See finding for ECODE_1.

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
ECODE_11	2,102,121	100.00	See finding for ECODE_1.
ECODE_12	2,102,121	100.00	See finding for ECODE_1.
SURG1	2,102,121	100.00	-
SURG2	2,102,121	100.00	-
SURG3	2,102,121	100.00	-
SURGDTE1	2,102,121	100.00	-
SURGDTE2	2,102,121	100.00	-
SURGDTE3	2,102,121	100.00	-
PAIDDATE_HDR	1,914,751	91.09	In the encounter examples HealthPartners reviewed, the values for the claims that were denied were not retained in the claims system and not provided on the EDV study file. However, claims adjudication date was submitted on the 837I to MN DHS.  IPRO to discuss discrepancy with MN DHS.
AMT_MCO_PAID_HDR	6	0.00	This was identified as an EDV extraction issue. The values that were submitted on file 837I to MN DHS matched its claims system.
AMT_OTH_INS_PD_HDR	1,914,175	91.06	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	1,914,751	91.09	This was identified as an EDV study extraction issue. In the encounter examples that HealthPartners reviewed, for \$0.00 paid claims, the adjudication date in its claims system was submitted on 837I to MN DHS.  IPRO to discuss discrepancy with MN DHS.
AMT_MCO_PAID_DTL	82	0.00	This was identified as an EDV extraction issue. HealthPartners 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	2,082,214	99.05	-
CLM_STATUS_HDR	2,100,913	99.94	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
CLM_STATUS_DTL	1,229,452	58.49	This was identified as an EDV study extraction issue. In the encounter examples that HealthPartners reviewed for \$0.00 paid line, the claims were incorrectly updated to denied in the EDV study file but were submitted correctly in the 837I to MN DHS. The values that were submitted on the 837I matched its claims system.
PROC_CD	2,098,140	99.81	-
UNITS_BILLED	2,093,842	99.61	-
MODIFIER1	2,013,649	95.79	-
MODIFIER2	2,044,727	97.27	-
MODIFIER3	2,095,042	99.66	-
MODIFIER4	2,101,485	99.97	-
REVENUE_CODE	2,099,400	99.87	-
NDC_CODE	2,100,435	99.92	-
BILLING_PROV_NPI	2,101,855	99.99	-
ATTENDING_PROV_NPI	1,824,663	86.80	In the encounter examples that HealthPartners reviewed, the values that were submitted on the EDV study file were facility NPI. Additional sourcing logic was applied to populate 837I that matched the values its claims system.  IPRO to discuss this discrepancy with MN DHS.
REFERRING_PROV_NPI	2,094,353	99.63	-

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

- The encounters were voided and not submitted to MN DHS.
- The encounter lines that would cause the encounter to be rejected were not submitted to MN DHS.
- The encounters were submitted to MN DHS but were not included on the file from 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	633,585	614,520	96.99

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	610,916	99.41	-
MCO_ICN	614,520	100.00	-
MCO_TRACKING_ICN	614,489	99.99	-
DTE_FIRST_SVC_HDR	593,474	96.58	-
DTE_LAST_SVC_HDR	593,466	96.57	-
DTE_FIRST_SVC_DTL	614,503	100.00	-
DTE_LAST_SVC_DTL	614,503	100.00	-
UNITS_BILLED	614,300	99.96	-
POS_CD	2,836	0.46	In the encounter examples HealthPartners reviewed, the discrepancy was from the following scenarios: <ul style="list-style-type: none"> <li>Scenario 1: The data element values defaulted to "11" (Office Visit) when the provider submitted "103" on the claim.</li> <li>Scenario 2: This was identified as an EDV extraction issue where the adjudicated or benefit Place of Service was pulled instead of the encounter-submitted Place of Service.</li> <li>Scenario 3: HealthPartners confirmed that there was an 837D file build defect that caused incorrect data element values to be submitted to MN DHS.</li> </ul>
PAIDDATE_HDR	572,912	93.23	In the encounter examples HealthPartners reviewed, the data element values for claims that were denied or paid \$0.00 were not populated in the claims system and not provided on the EDV study file. However, the claims adjudication date was submitted on the 837D to MN DHS. The values in the 837D matched values on MN DHS file.  IPRO to discuss discrepancy with MN DHS.
AMT_MCO_PAID_HDR	614,490	100.00	-
AMT_OTH_INS_PD_HDR	605,516	98.53	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
PAIDDATE_DTL	572,912	93.23	In the encounter examples HealthPartners reviewed, the data element values for claims that were denied or paid \$0.00 were not populated in the claims system and not provided on the EDV study file. However, the claims adjudication date was submitted on the 837D to MN DHS. The values in the 837D matched values on MN DHS file.  IPRO to discuss discrepancy with MN DHS.
AMT_MCO_PAID_DTL	603,947	98.28	-
AMT_OTH_INS_PD_DTL	599,143	97.50	-
CLM_STATUS_HDR	613,288	99.80	-
CLM_STATUS_DTL	576,346	93.79	This was identified as an EDV study extraction issue. HealthPartners confirmed that if Medicaid paid \$0.00, then the data element values were updated to denied in the EDV study file and did not match MN DHS file. However, the values on file 837D that were submitted to MN DHS matched its claims system.
DIAGCD1	508,208	82.70	HealthPartners confirmed that no diagnosis codes were submitted to MN DHS since it was not required. HealthPartners further confirmed that the data element will be available and will be submitted to MN DHS in the future. The values submitted on the EDV study file matched its claims system.
DIAGCD2	595,550	96.91	See finding for DIAGCD1.
DIAGCD3	609,318	99.15	See finding for DIAGCD1.
DIAGCD4	613,055	99.76	See finding for DIAGCD1.
CDT	603,410	98.19	-
TOOTHNUMBER	604,659	98.40	-
MODIFIER1	603,973	98.28	-
MODIFIER2	614,520	100.00	-
MODIFIER3	614,520	100.00	-
MODIFIER4	614,520	100.00	-
BILLING_PROV_NPI	608,212	98.97	-
RENDERING_PROV_NPI	614,259	99.96	-

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 HealthPartners' 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 HealthPartners, 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 and not included in the file from MN DHS.
- The encounters were denied and not submitted to MN DHS.
- The encounters were successfully submitted to MN DHS but were not included on MN DHS file.

**Table 10: Match Rate for the Pharmacy Claim Type**

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Pharmacy	3,963,395	2,737,263	69.06

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	2,737,263	100.00	-
MCO_ICN	0	0.00	This was identified as an EDV extraction issue. The values that were submitted on the NCPDP file matched the values on the MN DHS file and claims system.
MCO_TRACKING_ICN	2,727,452	99.64	-
DTE_FIRST_SVC	2,737,263	100.00	-
PAIDDATE_HDR	4	0.00	This was identified as an EDV extraction issue. The values that were submitted on the NCPDP file matched the values on the MN DHS file and claims system.
AMT_MCO_PAID_HDR	2,737,263	100.00	-
COST_INGRD_AMT	88,980	3.25	HealthPartners confirmed that the values submitted on the EDV study file matched the values populated on the NCPDP file.  IPRO to discuss this discrepancy with MN DHS.
CLM_STATUS_HDR	2,737,263	100.00	-
PRESC_PROV_NPI	2,737,263	100.00	-
PRESC_DATE	2,736,791	99.98	-
NUM_PRESC_ID	2,737,193	100.00	-
DISPENSE_DATE	2,737,263	100.00	-
NDC_CODE	2,737,263	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
QTY_DISPENSE_DTL	2,673,885	97.68	-
NUM_DAY_SUPPLY	2,737,263	100.00	-

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 HealthPartners 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 HealthPartners, and discussions with HealthPartners and MN DHS.

## Findings for Electronic Encounter Data

### Professional Encounter Data Type Only

- DTE\_FIRST\_SVC and DTE\_LAST\_SVC: This was identified as an EDV study extraction issue. HealthPartners confirmed that values that were submitted on the 837P to MN DHS matched its claims system.
- DIAGCD1 to DIAGCD12: This was identified as an EDV study extraction issue. HealthPartners confirmed that the values that were submitted on the 837P to MN DHS matched its claims system.

### Institutional Outpatient Encounter Data Type Only

- PATIENT\_RSON\_VIS\_1 to PATIENT\_RSON\_VIS\_3: HealthPartners confirmed that these codes were not submitted on 837I. Per DHS guidelines, this is not a required data element for submission to MN DHS. The values provided on the EDV study file matched its claims system.
- AMT\_MCO\_PAID\_HDR and AMT\_MCO\_PAID\_DTL: This was identified as an EDV study extraction issue. The values that were submitted on 837I to MN DHS matched its claims system.
- FAC\_ADM\_DT: This was identified as an EDV extraction issue. The date of encounter was provided on the study file and was not submitted on the 837I to MN DHS.
- ATTENDING\_PROV\_NPI: In the encounter examples that HealthPartners reviewed, the values that were submitted on the EDV study file were facility NPI. Additional sourcing logic was applied to populate 837I that matched the values submitted to MN DHS and its claims system. 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.
- AMT\_OTH\_INS\_PD\_HDR: HealthPartners indicated that the data element is summarized from AMT\_OTH\_INS\_PD\_DTL. IPRO to discuss removing this data element from future EDV studies with MN DHS.

### Dental Encounter Data Type Only

- POS\_CD: In the encounter examples HealthPartners reviewed, the discrepancy was from the following scenarios:
  - Scenario 1: The data element values defaulted to "11" (Office Visit) when the provider submitted "103" on the claim.
  - Scenario 2: This was identified as an EDV extraction issue where the adjudicated or benefit Place of Service was pulled instead of the encounter-submitted Place of Service.
  - Scenario 3: HealthPartners confirmed that there was an 837D file build defect that caused incorrect data element values to be submitted to MN DHS.
- PAIDDATE\_HDR: In the encounter examples HealthPartners reviewed, the data element values for claims that were denied or paid \$0.00 were not populated in the claims system and not provided on the EDV study file. However, the claims adjudication date was submitted on the 837D to MN DHS. The values in the 837D matched values on MN DHS file. IPRO to discuss this discrepancy with MN DHS.

- DIAGCD1 to DIAGCD4: HealthPartners confirmed that no diagnosis codes were submitted to MN DHS since it was not required. HealthPartners further confirmed that the data element will be available and will be submitted to MN DHS in the future. The values submitted on the EDV study file matched its claims system.

#### Pharmacy Encounter Data Type Only

- COST\_INGRD\_AMT: In the encounter example that HealthPartners reviewed, the values it submitted for the EDV study matched the values on the NCPDP file and its claims system. IPRO will discuss this discrepancy with MN DHS.
- PAIDDATE\_HDR: In the encounter example that HealthPartners reviewed, the values in the claims system aligned with the fill date that was populated on the NCPDP file. The values that were submitted on the NCPDP file matched the values on the MN DHS file and claims system.
- MCO\_ICN: This was identified as an EDV extraction issue. The value that was submitted to MN DHS matched the value on the NCPDP file and its claims system.

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

- CLM\_STATUS\_DTL: This was identified as an EDV study extraction issue. In the encounter example HealthPartners reviewed, the claims paid at the header level and paid \$0.00 at the line level were incorrectly classified as denied but were submitted correctly in the 837 file to MN DHS. The values that were submitted on the 837 file matched its claims system. HealthPartners confirmed that the issue will be resolved.
- PAIDDATE\_DTL: This was identified as an EDV study extraction issue. In the encounter examples HealthPartners reviewed, the data element values for claims that were denied or paid \$0.00 were not populated in the claims system and not provided on the EDV study file. However, the claims adjudication date was submitted on the 837 to MN DHS. The values in the 837 matched values in its claims system. IPRO to discuss this discrepancy with MN DHS.

#### Institutional Inpatient and Institutional Outpatient Encounter Data Types Only

- 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). HealthPartners 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 matched the values on the MN DHS file. The values that HealthPartners submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
- PAIDDATE\_HDR: In the encounter examples that HealthPartners reviewed, the values that were submitted on the EDV study file matched the values in its claims system. The data element values for denied or paid \$0.00 claims were not retained in the claims system and not submitted on 837I to MN DHS. The values that were submitted on 837I contained the claim adjudication date that aligned with the MN DHS file and its claims system. IPRO to discuss this discrepancy with MN DHS.
- ECODE\_1 to ECODE\_12: In the encounter example that HealthPartners reviewed, the values submitted for the EDV study aligned with 837I and its claims system. IPRO will discuss this discrepancy with MN DHS.

#### Recommendations for Future EDV Studies

- AMT\_OTH\_INS\_PD\_HDR: HealthPartners indicated that the data element is summarized from AMT\_OTH\_INS\_PD\_DTL. IPRO to discuss removing this data element from future EDV studies with MN DHS.
- HealthPartners should correct any discrepancies related to the EDV reporting logic utilized to develop the EDV study file.