



Minnesota Health Care Program Medicaid Managed Care

Encounter Data Validation Study (2025–2026) Hennepin Health

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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), Hennepin Health. 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 Hennepin Health 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.

Background

MN DHS collects encounter data from Hennepin Health. 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 Hennepin Health by Claim Type

The Hennepin Health EDV study call was conducted on January 12, 2026. Hennepin Health’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, Hennepin Health, Cirdan Health Systems and Consulting, Cognizant Technology Solutions Corporation, Delta Dental Minnesota, Navitus Health Solutions, 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 Hennepin Health’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 Hennepin Health, MN DHS, and IPRO. The non-matches were attributed to encounters that were voided encounter versions of the claim and not included in 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	890,886	868,361	97.47

IPRO compared each data element in Hennepin Health’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 Hennepin. During the teleconference, Hennepin 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	868,361	100.00	-
MCO_ICN	868,361	100.00	-
MCO_TRACKING_ICN	868,361	100.00	-
DTE_FIRST_SVC	868,361	100.00	-
DTE_LAST_SVC	868,361	100.00	-
POS_CD	868,361	100.00	-
DIAGCD1	868,361	100.00	-
DIAGCD2	868,359	100.00	-
DIAGCD3	868,357	100.00	-
DIAGCD4	868,359	100.00	-
DIAGCD5	868,361	100.00	-
DIAGCD6	868,361	100.00	-
DIAGCD7	868,360	100.00	-
DIAGCD8	868,361	100.00	-
DIAGCD9	868,361	100.00	-
DIAGCD10	868,360	100.00	-
DIAGCD11	868,361	100.00	-
DIAGCD12	868,361	100.00	-
AMT_OTH_INS_PD_HDR	835,017	96.16	-
PAIDDATE_DTL	868,361	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
AMT_MCO_PAID_DTL	868,361	100.00	-
AMT_OTH_INS_PD_DTL	867,669	99.92	-
CLM_STATUS_DTL	868,354	100.00	-
PROC_CD	868,361	100.00	-
QTY_UNITS_BILLED	868,106	99.97	-
PROF_PROC_MOD_CD1	867,993	99.96	-
PROF_PROC_MOD_CD2	868,137	99.97	-
PROF_PROC_MOD_CD3	868,285	99.99	-
PROF_PROC_MOD_CD4	868,358	100.00	-
NDC_CODE	868,361	100.00	-
BILLING_PROV_NPI	868,356	100.00	-
RENDERING_PROV_NPI	868,276	99.99	-

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

Institutional Inpatient Claim Type

IPRO compared each data element in Hennepin Health’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 Hennepin Health, 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 were voided and not included in the file from MN DHS.
- The voided encounters were submitted to MN DHS following the EDV study, that had a through date of March 31, 2025.
- The encounters included service-through dates that extended beyond the review period and were not 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	68,353	56,172	82.18

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 (%)
68,353	12,181	74.99	74.99	72.46

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	56,172	100.00	-
MCO_ICN	56,172	100.00	-
MCO_TRACKING_ICN	56,172	100.00	-
ADMIT_TYPE_CD	56,172	100.00	-
FAC_ADM_DT	56,172	100.00	-
START_DT	56,172	100.00	-
END_DT	56,172	100.00	-
DIS_STAT	56,172	100.00	-
TYPEBILL	56,172	100.00	-
TYPEBILL_FREQ	53,090	94.51	Hennepin Health 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 Hennepin Health submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	56,172	100.00	-
DIAGCD2	56,172	100.00	-
DIAGCD3	56,172	100.00	-
DIAGCD4	56,172	100.00	-
DIAGCD5	56,172	100.00	-
DIAGCD6	56,172	100.00	-
DIAGCD7	56,172	100.00	-
DIAGCD8	56,172	100.00	-
DIAGCD9	56,172	100.00	-
DIAGCD10	56,172	100.00	-
DIAGCD11	56,172	100.00	-
DIAGCD12	56,172	100.00	-
DIAGCD13	56,172	100.00	-
DIAGCD14	56,172	100.00	-
DIAGCD15	56,172	100.00	-
DIAGCD16	56,150	99.96	-
DIAGCD17	56,172	100.00	-
DIAGCD18	56,172	100.00	-
DIAGCD19	56,172	100.00	-
DIAGCD20	56,172	100.00	-
DIAGCD21	56,172	100.00	-
DIAGCD22	56,172	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD23	56,172	100.00	-
DIAGCD24	56,172	100.00	-
DIAGCD25	56,172	100.00	-
DX_ADMIT	56,172	100.00	-
PATIENT_RSON_VIS_1	56,172	100.00	-
PATIENT_RSON_VIS_2	56,172	100.00	-
PATIENT_RSON_VIS_3	56,172	100.00	-
ECODE_1	53,826	95.82	-
ECODE_2	53,777	95.74	-
ECODE_3	55,159	98.20	-
ECODE_4	55,940	99.59	-
ECODE_5	56,151	99.96	-
ECODE_6	56,172	100.00	-
ECODE_7	56,172	100.00	-
ECODE_8	56,172	100.00	-
ECODE_9	56,172	100.00	-
ECODE_10	56,172	100.00	-
ECODE_11	56,172	100.00	-
ECODE_12	56,172	100.00	-
SURG1	54,885	97.71	-
SURG2	56,022	99.73	-
SURG3	56,172	100.00	-
SURGDTE1	55,195	98.26	-
SURGDTE2	56,022	99.73	-
SURGDTE3	56,172	100.00	-
PAIDDATE_HDR	56,172	100.00	-
AMT_MCO_PAID_HDR	56,172	100.00	-
AMT_OTH_INS_PD_HDR	55,902	99.52	-
AMT_OTH_INS_PD_DTL	56,172	100.00	-
CLM_STATUS_HDR	56,172	100.00	-
UNITS_BILLED	55,715	99.19	-
REVENUE_CODE	56,172	100.00	-
BILLING_PROV_NPI	56,172	100.00	-
ATTENDING_PROV_NPI	53,588	95.40	-

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 Hennepin Health’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 Hennepin Health, MN DHS, and IPRO. The non-matches were attributed to voided encounter version of the claim.

Table 6: Match Rate for the Institutional Outpatient Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Outpatient	562,960	543,773	96.59

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	543,773	100.00	-
MCO_ICN	543,773	100.00	-
MCO_TRACKING_ICN	543,773	100.00	-
ADMIT_TYPE_CD	543,773	100.00	-
FAC_ADM_DT	543,773	100.00	-
START_DT	543,773	100.00	-
END_DT	543,773	100.00	-
DTL_SVC_DT	543,773	100.00	-
DIS_STAT	543,773	100.00	-
TYPEBILL	543,751	100.00	-
TYPEBILL_FREQ	511,949	94.15	Hennepin Health 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 Hennepin Health submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	543,773	100.00	-
DIAGCD2	543,764	100.00	-
DIAGCD3	543,768	100.00	-
DIAGCD4	543,771	100.00	-
DIAGCD5	543,773	100.00	-
DIAGCD6	543,773	100.00	-
DIAGCD7	543,773	100.00	-
DIAGCD8	543,773	100.00	-
DIAGCD9	543,773	100.00	-
DIAGCD10	543,773	100.00	-
DIAGCD11	543,773	100.00	-
DIAGCD12	543,773	100.00	-
DIAGCD13	543,773	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD14	543,773	100.00	-
DIAGCD15	543,773	100.00	-
DIAGCD16	543,773	100.00	-
DIAGCD17	543,773	100.00	-
DIAGCD18	543,773	100.00	-
DIAGCD19	543,773	100.00	-
DIAGCD20	543,773	100.00	-
DIAGCD21	543,773	100.00	-
DIAGCD22	543,773	100.00	-
DIAGCD23	543,773	100.00	-
DIAGCD24	543,773	100.00	-
DIAGCD25	543,773	100.00	-
DX_ADMIT	543,773	100.00	-
PATIENT_RSON_VIS_1	543,773	100.00	-
PATIENT_RSON_VIS_2	543,773	100.00	-
PATIENT_RSON_VIS_3	543,773	100.00	-
ECODE_1	511,370	94.04	Hennepin Health confirmed the values it provided on the EDV study matched the values in the 837I file and its claims system. IPRO to discuss this discrepancy with MN DHS.
ECODE_2	536,243	98.62	See finding for ECODE_1.
ECODE_3	541,651	99.61	See finding for ECODE_1.
ECODE_4	543,526	99.95	See finding for ECODE_1.
ECODE_5	543,760	100.00	See finding for ECODE_1.
ECODE_6	543,773	100.00	See finding for ECODE_1.
ECODE_7	543,773	100.00	See finding for ECODE_1.
ECODE_8	543,773	100.00	See finding for ECODE_1.
ECODE_9	543,773	100.00	See finding for ECODE_1.
ECODE_10	543,773	100.00	See finding for ECODE_1.
ECODE_11	543,773	100.00	See finding for ECODE_1.
ECODE_12	543,773	100.00	See finding for ECODE_1.
SURG1	543,773	100.00	-
SURG2	543,773	100.00	-
SURG3	543,773	100.00	-
SURGDTE1	543,773	100.00	-
SURGDTE2	543,773	100.00	-
SURGDTE3	543,773	100.00	-
PAIDDATE_HDR	543,773	100.00	-
AMT_MCO_PAID_HDR	543,773	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
AMT_OTH_INS_PD_HDR	506,002	93.05	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	543,773	100.00	-
AMT_MCO_PAID_DTL	543,773	100.00	-
AMT_OTH_INS_PD_DTL	543,773	100.00	-
CLM_STATUS_HDR	543,773	100.00	-
CLM_STATUS_DTL	543,773	100.00	-
PROC_CD	543,773	100.00	-
UNITS_BILLED	543,418	99.93	-
MODIFIER1	537,466	98.84	-
MODIFIER2	541,602	99.60	-
MODIFIER3	543,504	99.95	-
MODIFIER4	543,669	99.98	-
REVENUE_CODE	543,773	100.00	-
NDC_CODE	532,451	97.92	-
BILLING_PROV_NPI	543,773	100.00	-
ATTENDING_PROV_NPI	519,271	95.49	-
REFERRING_PROV_NPI	541,179	99.52	-

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 Hennepin Health’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 Hennepin Health, MN DHS, and IPRO. The non-matches were attributed for the following reasons:

- The encounters were voided and not included in the file from 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.

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	73,930	73,599	99.55

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	73,599	100.00	-
MCO_ICN	73,599	100.00	-
MCO_TRACKING_ICN	49,418	67.14	In the encounter examples Hennepin Health reviewed, the value submitted for the EDV study matched the value in its claims system. Hennepin Health 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 Hennepin Health’s claims system but was adjusted during the encounter submission.
DTE_FIRST_SVC_HDR	72,505	98.51	-
DTE_LAST_SVC_HDR	72,513	98.52	-
DTE_FIRST_SVC_DTL	73,597	100.00	-
DTE_LAST_SVC_DTL	73,597	100.00	-
UNITS_BILLED	73,599	100.00	-
POS_CD	69,531	94.47	In the encounter examples Hennepin Health 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 Hennepin Health’s claims system, and the values that were submitted on the 837D matched the values on the MN DHS file.
PAIDDATE_HDR	73,558	99.94	-
AMT_MCO_PAID_HDR	3,352	4.55	This was identified as an EDV study extraction issue. The values provided on the MN DHS file matched the values in Hennepin Health’s claims system and the 837D.
AMT_OTH_INS_PD_HDR	73,567	99.96	-
PAIDDATE_DTL	73,558	99.94	-
AMT_MCO_PAID_DTL	73,597	100.00	-
AMT_OTH_INS_PD_DTL	73,599	100.00	-
CLM_STATUS_HDR	73,599	100.00	-
CLM_STATUS_DTL	73,599	100.00	-
DIAGCD1	73,599	100.00	-
DIAGCD2	73,599	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD3	73,599	100.00	-
DIAGCD4	73,599	100.00	-
CDT	73,597	100.00	-
TOOTHNUMBER	73,136	99.37	-
MODIFIER1	64,079	87.07	In one of the encounter examples that Hennepin Health 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 Hennepin Health reviewed, the values of "51" (Multiple Procedures) were submitted on the 837D.
MODIFIER2	69,165	93.98	See finding for MODIFIER1.
MODIFIER3	71,977	97.80	See finding for MODIFIER1.
MODIFIER4	73,114	99.34	See finding for MODIFIER1.
BILLING_PROV_NPI	73,568	99.96	-
RENDERING_PROV_NPI	73,599	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 Hennepin Health'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 Hennepin Health, 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 successfully submitted to MN DHS but were not included in the file from 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	502,527	468,531	93.23

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	468,531	100.00	-
MCO_ICN	468,531	100.00	-
MCO_TRACKING_ICN	468,531	100.00	-
DTE_FIRST_SVC	468,531	100.00	-
PAIDDATE_HDR	468,531	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
AMT_MCO_PAID_HDR	468,531	100.00	-
COST_INGRD_AMT	79	0.02	Hennepin Health confirmed the values it provided on the EDV study matched the values in the NCPDP file and its claims system. IPRO to discuss this discrepancy with MN DHS.
CLM_STATUS_HDR	468,531	100.00	-
PRESC_PROV_NPI	468,531	100.00	-
PRESC_DATE	468,531	100.00	-
NUM_PRESC_ID	468,531	100.00	-
DISPENSE_DATE	468,531	100.00	-
NDC_CODE	468,531	100.00	-
QTY_DISPENSE_DTL	468,180	99.93	-
NUM_DAY_SUPPLY	468,531	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 Hennepin Health 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 Hennepin Health, and discussions with Hennepin Health and MN DHS.

Findings for Electronic Encounter Data

Institutional Outpatient Encounter Data Type Only

- ECODE_1 to ECODE_12: Hennepin Health confirmed the values it provided on the EDV study matched the values in the 837I file and its claims system. IPRO to discuss this discrepancy with MN DHS.
- AMT_OTH_INS_PD_HDR: Hennepin Health confirmed that the data element is summarized from AMT_OTH_INS_PD_DTL. IPRO to discuss removing the data element from future EDV studies with MN DHS.

Dental Encounter Data Type Only

- MCO_TRACKING_ICN: In the encounter examples Hennepin Health reviewed, the value submitted for the EDV study matched the value in its claims system. Hennepin Health determined that the discrepancy was from the following scenarios:
 - 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 Hennepin Health's claims system but was adjusted during the encounter submission.
- POS_CD: In the encounter examples Hennepin Health 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 Hennepin Health's claims system, and the values that were submitted on the 837D matched the values on the MN DHS file.
- AMT_MCO_PAID_HDR: This was identified as an EDV study extraction issue. The values provided on the MN DHS file matched the values in Hennepin Health's claims system and the 837D.
- MODIFIER1 to MODIFIER4: In one of the encounter examples that Hennepin Health 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 Hennepin Health reviewed, the values of "51" (Multiple Procedures) were submitted on the 837D.

Pharmacy Encounter Data Type Only

- COST INGRD_AMT: Hennepin Health confirmed the values it provided on the EDV study matched the values in the NCPDP file and its claims system. IPRO to discuss this discrepancy with MN DHS.

Institutional Inpatient and Institutional Outpatient Encounter Data Type 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). Hennepin Health 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 Hennepin Health submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.

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.
- Hennepin Health should correct any discrepancies related to the EDV reporting logic utilized to develop the EDV study file.