



Minnesota Health Care Program Medicaid Managed Care

Encounter Data Validation Study (2025–2026) UCare

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 UCare by Claim Type	7
Professional Claim Type	7
Institutional Inpatient Claim Type	8
Institutional Outpatient Claim Type.....	11
Dental Claim Type.....	14
Pharmacy Claim Type	16
Conclusions and Recommendations.....	18
Findings for Electronic Encounter Data	18
Recommendations for Future EDV Studies.....	19

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.....	8
Table 4: Match Rate with the Outpatient DHS File.....	9
Table 5: Institutional Inpatient Data Element Discrepancies and Findings.....	9
Table 6: Match Rate for the Institutional Outpatient Claim Type	11
Table 7: Institutional Outpatient Data Element Discrepancies and Findings	11
Table 8: Match Rate for the Dental Claim Type	14
Table 9: Dental Data Element Discrepancies and Findings	14
Table 10: Match Rate for the Pharmacy Claim Type	16
Table 11: Pharmacy Data Element Discrepancies and Findings	16

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

Background

MN DHS collects encounter data from UCare. 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 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 UCare by Claim Type

The UCare EDV study call was conducted on January 14, 2026. UCare’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, UCare, Delta Dental, Fulcrum, Navitus, 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 UCare’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 UCare, MN DHS, and IPRO. **Table 1** identifies the match rates for the professional 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 not submitted as encounters to MN DHS to mitigate electronic data interchange (EDI) rejections.
- The encounters were submitted to MN DHS but were not included in the file from MN DHS.

Table 1: Match Rate for the Professional Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Professional	24,390,378	24,027,258	98.51

IPRO compared each data element in UCare’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 UCare. During the teleconference, UCare and IPRO reviewed the discrepancies. Findings are summarized in **Table 2**. Match rate percentages and non-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	24,027,258	100.00	-
MCO_ICN	24,027,258	100.00	-
MCO_TRACKING_ICN	24,026,791	100.00	-
DTE_FIRST_SVC	24,002,933	99.90	-
DTE_LAST_SVC	23,998,077	99.88	-
POS_CD	24,027,258	100.00	-
DIAGCD1	24,027,258	100.00	-
DIAGCD2	24,027,258	100.00	-
DIAGCD3	24,027,258	100.00	-
DIAGCD4	24,027,258	100.00	-
DIAGCD5	24,027,258	100.00	-
DIAGCD6	24,027,258	100.00	-
DIAGCD7	24,027,258	100.00	-
DIAGCD8	24,027,258	100.00	-
DIAGCD9	24,027,258	100.00	-
DIAGCD10	24,027,258	100.00	-
DIAGCD11	24,027,258	100.00	-
DIAGCD12	24,027,258	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
AMT_OTH_INS_PD_HDR	23,248,821	96.76	-
PAIDDATE_DTL	24,027,258	100.00	-
AMT_MCO_PAID_DTL	24,025,250	99.99	-
AMT_OTH_INS_PD_DTL	23,963,610	99.74	-
CLM_STATUS_DTL	24,027,258	100.00	-
PROC_CD	24,027,258	100.00	-
QTY_UNITS_BILLED	24,027,258	100.00	-
PROF_PROC_MOD_CD1	24,026,303	100.00	-
PROF_PROC_MOD_CD2	24,026,588	100.00	-
PROF_PROC_MOD_CD3	24,027,258	100.00	-
PROF_PROC_MOD_CD4	24,027,258	100.00	-
NDC_CODE	24,024,758	99.99	-
BILLING_PROV_NPI	19,215,296	79.97	This was identified as an EDV extraction issue. UCare confirmed that the values in the claims system matched the values submitted on the 837P to MN DHS.
RENDERING_PROV_NPI	17,904,624	74.52	This was identified as an EDV extraction issue. UCare confirmed that the values in the claims system matched the values submitted on the 837P to MN DHS.

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 UCare’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 UCare, 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 submitted as encounters to MN DHS but were not included on the MN DHS file.
- The encounters were not submitted to MN DHS due to UCare internal validation rules.

Table 3: Match Rate for the Institutional Inpatient Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Inpatient	790,525	689,252	87.19

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 (%)
790,525	101,273	87.73	88.07	87.47

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 and non-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	689,252	100.00	-
MCO_ICN	689,252	100.00	-
MCO_TRACKING_ICN	689,252	100.00	-
ADMIT_TYPE_CD	684,993	99.38	-
FAC_ADM_DT	689,249	100.00	-
START_DT	499,620	72.49	This was identified as an EDV extraction issue. UCare confirmed the values submitted on the 837I matches the values in its claims system.
END_DT	20,092	2.92	This was identified as an EDV extraction issue. UCare confirmed the values submitted on the 837I matches the values in its claims system.
DIS_STAT	687,539	99.75	-
TYPEBILL	689,252	100.00	-
TYPEBILL_FREQ	634,102	92.00	UCare confirmed that the values submitted on the encounter to MN DHS were per DHS guidelines and did not match the values in its claims system. The values submitted on the 837I file matched the values on the MN DHS file. The values that UCare submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	689,252	100.00	-
DIAGCD2	689,252	100.00	-
DIAGCD3	689,252	100.00	-
DIAGCD4	689,252	100.00	-
DIAGCD5	689,252	100.00	-
DIAGCD6	689,252	100.00	-
DIAGCD7	689,252	100.00	-
DIAGCD8	689,252	100.00	-
DIAGCD9	689,252	100.00	-
DIAGCD10	689,252	100.00	-
DIAGCD11	689,252	100.00	-
DIAGCD12	689,252	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIAGCD13	689,252	100.00	-
DIAGCD14	287,941	41.78	UCare confirmed that until March 2025 the data element values were not submitted on the 837I to MN DHS. As of April 22, 2025, this issue has been corrected, and UCare has submitted the values on the 837I to MN DHS.
DIAGCD15	314,105	45.57	See finding for DIAGCD14.
DIAGCD16	338,023	49.04	See finding for DIAGCD14.
DIAGCD17	361,948	52.51	See finding for DIAGCD14.
DIAGCD18	386,501	56.08	See finding for DIAGCD14.
DIAGCD19	410,033	59.49	See finding for DIAGCD14.
DIAGCD20	431,151	62.55	See finding for DIAGCD14.
DIAGCD21	453,706	65.83	See finding for DIAGCD14.
DIAGCD22	474,171	68.80	See finding for DIAGCD14.
DIAGCD23	493,130	71.55	See finding for DIAGCD14.
DIAGCD24	510,752	74.10	See finding for DIAGCD14.
DIAGCD25	587,244	85.20	See finding for DIAGCD14.
DX_ADMIT	689,252	100.00	-
PATIENT_RSON_VIS_1	689,252	100.00	-
PATIENT_RSON_VIS_2	689,252	100.00	-
PATIENT_RSON_VIS_3	689,252	100.00	-
ECODE_1	667,511	96.85	-
ECODE_2	666,713	96.73	-
ECODE_3	681,514	98.88	-
ECODE_4	687,571	99.76	-
ECODE_5	688,938	99.95	-
ECODE_6	689,252	100.00	-
ECODE_7	689,252	100.00	-
ECODE_8	689,252	100.00	-
ECODE_9	689,252	100.00	-
ECODE_10	689,252	100.00	-
ECODE_11	689,252	100.00	-
ECODE_12	689,252	100.00	-
SURG1	679,080	98.52	-
SURG2	682,767	99.06	-
SURG3	684,901	99.37	-
SURGDTE1	679,620	98.60	-
SURGDTE2	682,767	99.06	-
SURGDTE3	684,901	99.37	-
PAIDDATE_HDR	689,252	100.00	-
AMT_MCO_PAID_HDR	689,252	100.00	-
AMT_OTH_INS_PD_HDR	686,663	99.62	-
AMT_OTH_INS_PD_DTL	689,141	99.98	-
CLM_STATUS_HDR	689,252	100.00	-
UNITS_BILLED	689,252	100.00	-
REVENUE_CODE	689,252	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
BILLING_PROV_NPI	689,252	100.00	-
ATTENDING_PROV_NPI	649,352	94.21	UCare confirmed the values provided on the study file matched the values submitted on the 837I and its claims system. IPRO to discuss this discrepancy with MN DHS.

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 UCare’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 UCare, MN DHS, and IPRO. The non-matches were attributed to the following reasons:

- The encounters were submitted as encounters to MN DHS but were not included on the MN DHS file.
- The encounters were not submitted to MN DHS due to UCare internal validation rules.

Table 6: Match Rate for the Institutional Outpatient Claim Type

Encounter Data Type	Total Encounter Lines (n)	Matched Encounter Lines (n)	Match Rate (%)
Outpatient	6,854,162	6,683,853	97.52

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 7**. Match rate percentages and non-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	6,683,853	100.00	-
MCO_ICN	6,683,853	100.00	-
MCO_TRACKING_ICN	6,683,837	100.00	-
ADMIT_TYPE_CD	6,636,173	99.29	-
FAC_ADM_DT	6,247,970	93.48	UCare confirmed that the data element values are not submitted on 837I to MN DHS. The values provided by UCare on the EDV study file matched the values in its claims system. IPRO to discuss this discrepancy with MN DHS.
START_DT	6,631,036	99.21	-
END_DT	6,571,736	98.32	-
DTL_SVC_DT	6,683,838	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DIS_STAT	6,666,628	99.74	-
TYPEBILL	6,683,853	100.00	-
TYPEBILL_FREQ	5,271,309	78.87	UCare confirmed that the values submitted on the encounter to MN DHS were per DHS guidelines and did not match the values in its claims system. The values submitted on the 837I file matched the values on the MN DHS file. The values that UCare submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
DIAGCD1	6,683,853	100.00	-
DIAGCD2	6,683,853	100.00	-
DIAGCD3	6,683,853	100.00	-
DIAGCD4	6,683,853	100.00	-
DIAGCD5	6,683,853	100.00	-
DIAGCD6	6,683,853	100.00	-
DIAGCD7	6,683,853	100.00	-
DIAGCD8	6,683,853	100.00	-
DIAGCD9	6,683,853	100.00	-
DIAGCD10	6,683,853	100.00	-
DIAGCD11	6,683,853	100.00	-
DIAGCD12	6,683,853	100.00	-
DIAGCD13	6,683,853	100.00	-
DIAGCD14	6,266,721	93.76	UCare confirmed that until March 2025 the data element values were not submitted on the 837I. As of April 22, 2025, this issue has been corrected, and UCare has submitted the values on the 837I to MN DHS.
DIAGCD15	6,326,172	94.65	See finding for DIAGCD14.
DIAGCD16	6,374,361	95.37	See finding for DIAGCD14.
DIAGCD17	6,419,195	96.04	See finding for DIAGCD14.
DIAGCD18	6,456,194	96.59	See finding for DIAGCD14.
DIAGCD19	6,486,900	97.05	See finding for DIAGCD14.
DIAGCD20	6,513,441	97.45	See finding for DIAGCD14.
DIAGCD21	6,537,815	97.82	See finding for DIAGCD14.
DIAGCD22	6,559,682	98.14	See finding for DIAGCD14.
DIAGCD23	6,578,761	98.43	See finding for DIAGCD14.
DIAGCD24	6,594,823	98.67	See finding for DIAGCD14.
DIAGCD25	6,638,457	99.32	See finding for DIAGCD14.
DX_ADMIT	6,683,853	100.00	-
PATIENT_RSON_VIS_1	6,683,853	100.00	-
PATIENT_RSON_VIS_2	6,683,853	100.00	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
PATIENT_RSON_VIS_3	6,683,853	100.00	-
ECODE_1	6,342,090	94.89	UCare 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	6,574,414	98.36	See finding for ECODE_1.
ECODE_3	6,644,911	99.42	See finding for ECODE_1.
ECODE_4	6,674,044	99.85	See finding for ECODE_1.
ECODE_5	6,683,206	99.99	See finding for ECODE_1.
ECODE_6	6,683,827	100.00	See finding for ECODE_1.
ECODE_7	6,683,842	100.00	See finding for ECODE_1.
ECODE_8	6,683,847	100.00	See finding for ECODE_1.
ECODE_9	6,683,847	100.00	See finding for ECODE_1.
ECODE_10	6,683,853	100.00	See finding for ECODE_1.
ECODE_11	6,683,853	100.00	See finding for ECODE_1.
ECODE_12	6,683,853	100.00	See finding for ECODE_1.
SURG1	6,683,853	100.00	-
SURG2	6,683,853	100.00	-
SURG3	6,683,853	100.00	-
SURGDTE1	6,683,853	100.00	-
SURGDTE2	6,683,853	100.00	-
SURGDTE3	6,683,853	100.00	-
PAIDDATE_HDR	6,683,853	100.00	-
AMT_MCO_PAID_HDR	6,683,849	100.00	-
AMT_OTH_INS_PD_HDR	5,969,384	89.31	UCare 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.
PAIDDATE_DTL	6,683,853	100.00	-
AMT_MCO_PAID_DTL	6,683,851	100.00	-
AMT_OTH_INS_PD_DTL	6,672,578	99.83	-
CLM_STATUS_HDR	6,683,853	100.00	-
CLM_STATUS_DTL	6,683,594	100.00	-
PROC_CD	6,664,384	99.71	-
UNITS_BILLED	6,683,853	100.00	-
MODIFIER1	6,683,839	100.00	-
MODIFIER2	6,683,853	100.00	-
MODIFIER3	6,683,853	100.00	-
MODIFIER4	6,683,853	100.00	-
REVENUE_CODE	6,683,853	100.00	-
NDC_CODE	6,677,340	99.90	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
BILLING_PROV_NPI	6,683,688	100.00	-
ATTENDING_PROV_NPI	6,301,738	94.28	UCare 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.
REFERRING_PROV_NPI	6,683,853	100.00	-

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 UCare'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 UCare, MN DHS, and IPRO. The non-matches were attributed to voided encounter versions of the claim that were not included in the MN DHS file. **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	1,646,590	1,639,723	99.58

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 9**. Match rate percentages and non-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	1,639,723	100.00	-
MCO_ICN	1,639,723	100.00	-
MCO_TRACKING_ICN	1,126,793	68.72	In the encounter examples UCare reviewed, the value submitted for the EDV study matched the value in its claims system. The discrepancy was due to: <ul style="list-style-type: none"> The claim was adjusted, and only the adjusted version of the claim was submitted to MN DHS. The claim was not adjusted in its claims system but adjusted during the encounter submission.
DTE_FIRST_SVC_HDR	1,624,107	99.05	-
DTE_LAST_SVC_HDR	1,623,969	99.04	-
DTE_FIRST_SVC_DTL	1,639,563	99.99	-

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
DTE_LAST_SVC_DTL	1,639,563	99.99	-
UNITS_BILLED	1,639,723	100.00	-
POS_CD	1,549,557	94.50	In the encounter examples UCare reviewed, the values on the data element defaulted to "11" (Office) when the provider did not submit place of service code. The values submitted in the EDV study data file matched its claims system, and the values submitted on the 837D string matched the values on the MN DHS file.
PAIDDATE_HDR	1,639,272	99.97	-
AMT_MCO_PAID_HDR	56,866	3.47	This was identified as an EDV extraction issue. The values submitted on the 837D and UCare's claims system matched the values on the MN DHS file.
AMT_OTH_INS_PD_HDR	1,639,114	99.96	-
PAIDDATE_DTL	1,639,272	99.97	-
AMT_MCO_PAID_DTL	1,639,604	99.99	-
AMT_OTH_INS_PD_DTL	1,639,723	100.00	-
CLM_STATUS_HDR	1,639,722	100.00	-
CLM_STATUS_DTL	1,639,717	100.00	-
DIAGCD1	1,639,723	100.00	-
DIAGCD2	1,639,723	100.00	-
DIAGCD3	1,639,723	100.00	-
DIAGCD4	1,639,723	100.00	-
CDT	1,639,660	100.00	-
TOOTHNUMBER	1,633,971	99.65	-
MODIFIER1	1,421,364	86.68	In one of the encounter examples that UCare 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 UCare reviewed, the values of "51" (Multiple Procedures) were submitted to MN DHS per DHS guidelines to ensure that the encounter is accepted.
MODIFIER2	1,532,394	93.45	See finding for MODIFIER1.
MODIFIER3	1,603,083	97.77	See finding for MODIFIER1.
MODIFIER4	1,628,554	99.32	See finding for MODIFIER1.
BILLING_PROV_NPI	1,638,396	99.92	-
RENDERING_PROV_NPI	1,639,723	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 UCare’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 UCare, MN DHS, and IPRO. The non-matches were attributed to voided encounter version of the claim. **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 submitted on the NCPDP file to MN DHS.
- The encounters were successfully submitted to MN DHS but were not included on the MN DHS file.
- The encounters were rejected by 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	16,942,399	7,693,501	45.41

Data elements with less than a 95.00% match rate were reviewed. Findings are summarized in **Table 11**. Match rate percentages and non-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	7,693,501	100.00	-
MCO_ICN	7,693,501	100.00	-
MCO_TRACKING_ICN	4,711	0.06	UCare confirmed that the encounter examples were not adjusted nor voided and would not have the values for the data element populated in the EDV study file. IPRO to discuss this discrepancy with MN DHS.
DTE_FIRST_SVC	7,693,501	100.00	-
PAIDDATE_HDR	3,681,368	47.85	UCare confirmed that the discrepancy was due to the timing between claim and encounter submission. In the encounter example that UCare reviewed, the value provided on the EDV study file matched its claims system. The values submitted on the NCPDP matched the values on the MN DHS file.
AMT_MCO_PAID_HDR	7,693,501	100.00	-
COST_INGRD_AMT	2,331,849	30.31	UCare confirmed that the values provided on the study file matched the values in the NCPDP to MN DHS and its claims system. IPRO to discuss this discrepancy with MN DHS.

Data Element Name	Match (n)	Match Rate (%)	Notable Findings
CLM_STATUS_HDR	7,693,340	100.00	-
PRESC_PROV_NPI	7,693,501	100.00	-
PRESC_DATE	7,693,488	100.00	-
NUM_PRESC_ID	7,693,487	100.00	-
DISPENSE_DATE	7,693,501	100.00	-
NDC_CODE	7,693,501	100.00	-
QTY_DISPENSE_DTL	7,683,633	99.87	-
NUM_DAY_SUPPLY	7,693,487	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 UCare EDV study file 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 UCare, and discussions with UCare and MN DHS.

Findings for Electronic Encounter Data

Professional Encounter Data Type Only

- BILLING_PROV_NPI: This was identified as an EDV extraction issue. UCare confirmed that the values in the claims system matched the values submitted on the 837P to MN DHS.
- RENDERING_PROV_NPI: This was identified as an EDV extraction issue. UCare confirmed that the values in the claims system matched the values submitted on the 837P to MN DHS.

Institutional Inpatient Encounter Data Type Only

- START_DT: This was identified as an EDV extraction issue. UCare confirmed the values submitted on the 837I matches the values in its claims system.
- END_DT: This was identified as an EDV extraction issue. UCare confirmed the values submitted on the 837I matches the values in its claims system.

Institutional Outpatient Encounter Data Type Only

- FAC_ADM_DT: UCare confirmed that the data element values are not submitted on 837I to MN DHS. The values provided by UCare on the EDV study file matched the values in its claims system. IPRO to discuss this discrepancy with MN DHS.
- ECODE_1 to ECODE_12: UCare 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: UCare 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.

Dental Encounter Data Type Only

- MCO_TRACKING_ICN: UCare confirmed that the data element values are not submitted on 837I to MN DHS. The values provided by UCare on the EDV study file matched the values in its claims system. IPRO to discuss this discrepancy with MN DHS.
- POS_CD: UCare 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_MCO_PAID_HDR: UCare 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.
- MODIFIER1 to MODIFIER4: In one of the encounter examples that UCare 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 UCare reviewed, the values of "51" (Multiple Procedures) were submitted to MN DHS per DHS guidelines to ensure that the encounter is accepted.

Pharmacy Encounter Data Type Only

- MCO_TRACKING_ICN: UCare confirmed that the encounter examples were not adjusted nor voided and would not have the values for the data element populated in the EDV study file. IPRO to discuss this discrepancy with MN DHS.
- PAIDDATE_HDR: UCare confirmed that the discrepancy was due to the timing between claim and encounter submission. In the encounter example that UCare reviewed, the value provided on the EDV study file matched its claims system. The values submitted on the NCPDP matched the values on the MN DHS file.

Institutional Inpatient and Institutional Outpatient Encounter Data Types Only

- DIAGCD14 to DIAGCD25: UCare confirmed that until March 2025 the data element values were not submitted on the 837I to MN DHS. As of April 22, 2025, this issue has been corrected, and UCare has submitted the values on the 837I to MN DHS.
- 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). UCare confirmed that the values submitted on the encounter to MN DHS were per DHS guidelines and did not match the values in its claims system. The values submitted on the 837I file matched the values on the MN DHS file. The values that UCare submitted on the EDV study data file matched its claims system. IPRO to discuss this discrepancy with MN DHS.
- ATTENDING_PROV_NPI: UCare confirmed the values provided on the study file matched the values submitted on the 837I and 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.
- UCare should correct any discrepancies related to the EDV reporting logic utilized to develop the EDV study file.