Texas Health Care Information Collection - THCIC
Health Facilities Numbered Letter, Volume 24 Number 1

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Please share with all staff working with the THCIC data collection and reporting processes

Maintaining Login Passwords

Many assigned Provider Primary Contacts **are not** maintaining their assigned **Provider Login passwords**.

Login passwords are **REQUIRED** to be reset every 60 days.

Please ensure your login password has been reset **today**.

If the Primary Contact does not maintain their login passwords every 60 days, the facility administrator/CEO may assign the Primay Contact duties to a new Primary Contact.

CEO/Administrators: To update Provider Contact information for your facility, complete, sign, and return the THCIC Facility Contact form available at: https://www.dshs.texas.gov/thcic/hospitals/FacilityInformationRequest.pdf

You may also see who the currently assigned Primary Contact is at your facility at: https://www.dshs.texas.gov/thcic/hospitals/FacilityList.xls

Primary Contacts are designated as the **THCIC Liaison** and the main source of communication between THCIC, System13, Inc. and the facility.

Primary Contacts are expected to know and understand the THCIC submission, correction, and certification/review processes; and how to

generate and review critical reports including the **Summary Report and Frequency of Error Report (FER)**.

Primary Contacts should **be sharing** THCIC and System13, Inc. **newsletters and reports** with internal staff and their software or information system vendor or vendors, as necessary.

Primary Contacts are required to keep their Provider login username confidential and activated at all times. Passwords are **REQUIRED** to be changed every 60 days. **This is a security measure that is not negotiable.**

Primary Contacts are required to keep their facility email account active and their contact information up to date at all times, to receive notifications and information from THCIC staff or System13, Inc.

If the Primary Contact is not logging into our system at least every 60 days, they probably should not be the assigned Primary Contact.

Primary Contacts are **PROHIBITED** from sharing their Provider Login and password. This is a breach of our system security policy and is probably a breach of each facilities system security policy.

Primary Contacts that cannot meet the expectations listed above should be replaced immediately with a different Primary Contact, in order to avoid penalties or delays in data processing, correction or certification.

Patient SSN Errors

When there is a Patient SSN error, it is usually caused by the facility failing to provide the 9-digit Patient SSN (usually left blank) or sometimes because only 8 digits were submitted. All SSNs must have 9 digits (no dashes) and the **data field may never be left blank**.

When the patient refuses to provide their SSN or the patient doesn't have one or forgot it, the facility is REQUIRED to list the SSN as all "9s" (999999999) when reporting the THCIC data.

THCIC has provided documentation on how to report Patient SSN when there is no information provided by the patient in the 837 Appendices document available at:
https://www.dshs.texas.gov/thcic/hospitals/5010_InpatientandOutpatientAppendices.pdf

Freestanding Emergency Medical Centers (FEMCs) Reporting Requirements

All FEMCs are **REQUIRED** to begin reporting the THCIC data starting with 4q2020 visits, which have "service dates" from October 1, 2020, through December 31, 2020.

The 4q2020 may be reported EARLIER than the due date, which is March 1, 2021.

If the FEMC data will be electronically submitted via batch file:

- The Submitter must be approved by System13 to upload Outpatient PRODUCTION data.

If the FEMC will manually enter the 4q2020 data:

- The facility should have already begun entering the 4q2020 data so that **all** 4q2020 data are entered no later than March 1, 2021.

If the FEMC did not provide any patient services for the 4q2020 reporting period:

- It is required to email or fax a notification to THCIC no later than March 1, 2021, by completing the "No Data to Report" form available at: https://www.dshs.texas.gov/thcic/hospitals/NoDataToReport.pdf.

All data reported to THCIC are to be reported by the **LOCATION** the service was provided. This is why every separately located hospital, ASC, and FEMC have been issued their own unique THCIC ID.

Some FEMCs have not provided THCIC with their **required** contact information. The contact information is necessary for activating the login account for the facility.

Please check the facility listing at: https://www.dshs.texas.gov/thcic/hospitals/FacilityList.xls to verify that your FEMC has provided the required contact information to THCIC; and if the information for Primary, Alternate, and Certifier Contacts is MISSING, please complete and return the **THCIC Facility Information form** to THCIC.

The THCIC Facility information form may be downloaded at: https://www.dshs.texas.gov/thcic/hospitals/FacilityInformationRequest.pdf
FEMC questions may be emailed to: thcichelp@dshs.texas.gov

FER and Summary Reports

Many facilities may not realize the importance of reviewing their Frequency of Error Report (FER) and Summary Report while the data are still contained in the Corrections Tab.

While the data are contained in the Corrections Tab, errors may be corrected for **FREE** within a specific timeframe for each reporting quarter.

Each time data errors are manually corrected in the Corrections Tab, the facility **must** generate a new **FER** to ensure no data errors were overlooked. This process continues until the FER indicates an accuracy rate of 100%.

The FER and Summary Report may be generated multiple times while the data are in the Corrections Tab and provides verification to the facility if there are any remaining errors based on known standard values and codes.

Once the data are moved from the Corrections Tab into the Certification Tab, corrections can no longer be made unless the facility requests the data be moved back into the Corrections Tab. There is a **FEE** associated with this function and the facility will be invoiced by System13 to move the data back into the Corrections Tab.

Reviewing the **Summary Report** can assist with verifying if the data had any software mapping issues (valid codes submitted, but not correct for the patient), or if there were any potential manual data entry errors.

For example, "02" and "20" are valid codes for Patient Status; however, accidental coding of "20" would indicate the patient expired.

Since a Patient Status code of "20" is valid, our system would not mark it as an error on the **FER**. The facility must look at their **Summary Report** to check for this type of error involving accidental coding or potential mapping issues.

Another accidental coding issue is entering an incorrect Charge amount due to a missing decimal point. There is a big difference in a Charge amount of $1000.00 vs $100000 due to a missing decimal. The **Summary Report** provides a quick summary check of the Charge amounts submitted by the facility.

Patient Ethnicity, Race, and Sex/Gender codes are also listed in the **Summary Report**, which should be verified by the facility. In many cases

these may be true, but in some cases, these are due to a mapping or miscoding issue.

There have been issues where a facility has submitted 100% of Patient Race values as "Asian, Native Hawaiian, Pacific Islander", which was a mapping issue in the software the facility was using.

Another example is when ALL patients are showing up as NEWBORNS because the "Date of Service" for a 60-year-old patient was entered for the "Patient's DOB", indicating the patient was born on the same day the service was provided.

There are Report Presentations available on the THCIC website to assist with generating reports at:

https://www.dshs.texas.gov/thcic/hospitals/Inpatient-Reports.pdf
https://www.dshs.texas.gov/thcic/hospitals/Outpatient-Reports.pdf

Videos for Troubleshooting

System13 has created several You Tube videos covering several topics on THCIC data reporting and data errors.

VIDEO: Allowed File Upload formats.
https://youtube.com/embed/FthlTJncrag?rel=0

VIDEO: Troubleshooting 837 Submission Files.
https://youtube.com/embed/YB-mNSscyX4?rel=0

VIDEO: Patient Control Number Errors.
https://youtube.com/embed/aaBewxO8pnE?rel=0

VIDEO: Explaining the THCIC Required Codes List.
https://youtube.com/embed/UW9oUWMlvCs?rel=0

VIDEO: Institutional -vs- Professional format.
https://youtube.com/embed/SsXV8tofyew?rel=0

VIDEO: SSN, Race, And Ethnicity issues.
https://youtube.com/embed/bXRJily6_bg?rel=0

VIDEO: Correcting Physician Errors.
https://youtube.com/embed/E5bjiutkRMQ?rel=0

VIDEO: Diagnosis (manifest) codes, E-Code, and POA Errors.
https://youtube.com/embed/cLI2UueEwZA?rel=0

Did You Know?

- **Provider Primary Contacts** must keep their **Logins** active at all times. Failure to log in at least every 60 days to reset your password may cause a temporary deactivation of your account for security purposes.

- A new **FER** (Frequency of Error Report) should **always** be generated after data corrections have been made to ensure no errors were overlooked.

- A **Summary Report** should **always** be generated and reviewed each time data are submitted, and again after data corrections and before the certification phase begins.

- Your quarterly **certification "comments"** are **PUBLICLY** released <u>as written</u>. Use caution. You should **never** provide physician or patient identifying information in a certification comment.

- All Data Manager and Data Certifier login passwords **MUST** be reset every 60 days in our system and must **never** be shared.

- **Emailing** of Personal Identifying Information (PII) or Sensitive Personal Information (SPI), even if the email is encrypted, **may not** be adequately protected by all systems the data may pass through.

  Always contact the recipient first to inquire if emailing this type of information is acceptable.

- The **"Accept as is"** function in the data correction functionality **does not** correct an error. It only clears the notification of all the errors in the claim itself. The errors still count against the total accuracy rate unless it is corrected through the Correction Tab, or by submitting a corrected claim batch file through the system.

THCIC Training

THCIC provides Webinar trainings, **at no cost**, on the data reporting processes that are required of all Texas hospitals, ASCs, and FEMCs.

Postings for Webinar dates may be viewed at:
http://www.dshs.texas.gov/thcic/Training.shtm

Signing up for training is limitless and refresher training is encouraged.

THCIC highly recommends and encourages all facility staff involved with the THCIC state data reporting to sign up for training.

To attend the Webinar training(s), please send inquiries to:
thcichelp@dshs.texas.gov.

For help or general questions on Submission, Correction, and Certification please contact THCIC at: thcichelp@dshs.texas.gov

Upcoming Due Dates

Activity	Q3 2020	Q4 2020
Cutoff for submission	~~12-1-2020~~	3-1-2021
Cutoff for corrections (Free)	~~2-1-2021~~	5-3-2021
Facilities retrieve certification files	3-1-2021	6-1-2021
Cutoff for corrections at time of certification (Associated Fees)	4-1-2021	7-1-2021
Certification/comments due	4-15-2021	7-15-2021

A schedule of **all** due dates may be found at:
http://www.dshs.texas.gov/THCIC/datareportingschedule.shtm

How to Reach Us

System13, Inc. (in Virginia)
Web site: https://thcic.system13.com

System13 Helpdesk
Monday-Friday, 8:00a – 5:00p (Central Time)
Phone: (888) 308-4953 or (434) 977-0000
Email: thcichelp@system13.com

THCIC (in Austin)
Web site: www.dshs.texas.gov/thcic

Main phone: (512) 776-7261 (limited due to COVID)
Email: thcichelp@dshs.texas.gov

THCIC Staff

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Past Newsletters

http://www.dshs.texas.gov/thcic/Inpatient-and-Outpatient-Numbered-Letters/

Links to Forms and Documents

Patient Notification of Data Collection Form –
http://www.dshs.texas.gov/thcic/Patient-Notification-of-Data-Collection.pdf

Provider Contact Update Form -
https://www.dshs.texas.gov/thcic/hospitals/FacilityInformationRequest.pdf

No Quarterly Data to Report Form -
http://www.dshs.texas.gov/thcic/hospitals/NoDataToReport(2).pdf

Current Provider Contact List –
http://www.dshs.texas.gov/thcic/hospitals/FacilitiesList.xls

Appendices Document –
https://www.dshs.texas.gov/thcic/hospitals/5010_InpatientandOutpatientAppendices.pdf

Contains:

Country Codes
Default Values
Race and Ethnicity documents
Revenue Code Groupings used for Encounter File and PUDF
Audit IDs and Audit Messages
Payer Source Coding Guide
Key Data Elements for matching INPATIENT claims
Key Data Elements for matching OUTPATIENT claims

Data Reporting Schedule –
https://www.dshs.texas.gov/THCIC/datareportingschedule.shtm

Inpatient Reporting Requirements -
https://www.dshs.texas.gov/thcic/hospitals/TechReqSpec5010_Inpatient_THCIC837.pdf

Outpatient and Emergency Department Reporting Requirements -
https://www.dshs.texas.gov/thcic/OutpatientFacilities/TechReqSpec5010_Outpatient_THCIC837.pdf

HCPCS Codes -
https://www.dshs.texas.gov/thcic/OutpatientFacilities/HCPCS-Code-worksheet-for-2019.xls

History of the Texas Health Care Information Collection Program

On September 1, 2003 the legacy state agencies; Texas Health Care Information Council (THCIC), the Texas Department of Health (TDH), the Texas Commission on Alcohol and Drug Abuse (TCADA), and the Mental Health branch of the Texas Department of Mental Health and Mental Retardation were merged to form the Texas Department of State Health Services (DSHS) in response to the passage of HB 2292 (78th Texas Legislature). All functions of THCIC continue in the Center for Health Statistics within DSHS.

THCIC was created by **Chapter 108** of the Health and Safety Code by the 74th Texas Legislature in 1995.
http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.108.htm

Rules
Rules that apply to the Texas Health Care Information Collection are found in Chapter 421 of Title 25, Part 1 of the Texas Administrative Code.
http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=421

Visit Us Online
www.dshs.texas.gov/thcic