Texas Health and Human Services | Texas Department of State Health Services

Outpatient Certification
(Formerly WebCertification)

Revised April 2025

Certification

AGENDA

☑ Start Certification Encounter on Demand (EOD)

☑ Data Reporting Schedule

☑ Logging into Certification

☑ Viewing Older Quarters Data

☑ Encounter on Demand

☑ Certification Reports

☑ Certification File Download

☑ Certifying Data

TEXAS Health and Human Services | Texas Department of State Health Services

Start Certification - System Feature

After the *Cutoff for initial submission the Data Administrator (aka Provider Primary Contact) and Certifier will now receive an email a few days after the "Cutoff for Initial Submission". This email will be sent approximately sixty days after the end of each quarter. The email will have four reports attached to it:

- ✗ Summary Report – use this report to validate if the data for the period is correct, such as record counts, min/max/average charges, admission type and source, payer type, patient age, gender, race, and ethnicity

- ✗ Claim Count for First Physician Report - Use this to determine if the physicians (attending, operating, other) who utilize your facility are represented correctly. This report will give a claim count by physician name, sorted by name. It will also include the physician ID but will not include patient information.

- ✗ Claim Count for Second Physician Report - Use this to determine if the second physicians (attending, operating, other) who utilize your facility are represented correctly. This report will give a claim count by physician name, sorted by name. It will also include the physician ID, but will not include patient information

- ✗ Error Type List Report - use this to determine if you have made all possible   corrections to your data, if needed.

This email will only be sent to facilities that have a 100% accuracy rate on the date of initial submission. This email will suggest that if the Certifier determines that the data is complete and accurate after reviewing the reports, then they should consider choosing the Encounter or Event on Demand (EOD) option on their certification tab for that quarter. If you do not choose to start the EOD option, the certification process will start after the cutoff for corrections as it does now.

Cutoff for initial submission is the date when the submission data is due in the system.

Generate Quarter Cert. Data (EOD) ➡

Certification Due Dates

Data Reporting Schedule

Texas Health Care Information Collection
Center for Health Statistics

Activity	Q4 2024	Q1 2025	Q2 2025	Q3 2025	Q4 2025	Q1 2026	Q2 2026
Cutoff for initial submission	3-3-25	6-2-25	9-2-25	12-1-25	3-2-26	6-1-26	9-1-26
Cutoff for corrections	5-1-25	8-1-2025	11-3-25	2-2-26	5-1-26	8-3-26	11-2-26
Facilities retrieve certification files	6-2-25	9-2-2025	12-1-25	3-2-26	6-1-26	9-1-26	12-1-26
Certification/ comments due	7-15-25	10-15-25	1-15-26	4-15-26	7-15-26	10-15-26	1-15-27

The reporting schedule is a rule driven schedule, under Chapter 421, Title 25, Part 1 of the Texas Administrative Code, Subchapter D, RULE §421.66. The due dates are either the 1st or the 15th of the month, if these dates are on a weekend or state observed holiday, the data is due the next business day.

Data Due Dates

Data Reporting Schedule

Texas Health Care Information Collection Center for Health Statistics

Activity	Q4 2024	Q1 2025	Q2 2025
Cutoff for initial submission	3-3-25	6-2-25	9-2-25
Cutoff for corrections	5-1-25	8-1-2025	11-3-25
Facilities retrieve certification files	6-2-25	9-2-2025	12-1-25
Certification/ comments due	7-15-25	10-15-25	1-15-26

Cutoff for initial submission, date when the data is due in the system

Cutoff for corrections, is when the corrections are due by for that quarter

Facilities receive certification files, by this date System13 sends the certification files

Certification/comments due, when the data must be certified and comments (if any) needed to be inputted into the system. If data is less than 100% accurate, comments must be submitted at certification.

The reporting schedule is a rule driven schedule, under **Chapter 421**, Title 25, Part 1 of the Texas Administrative Code, subchapter D, RULE §421.66. The due dates are either the 1st or the 15th of the month, if these dates are on a weekend or state observed holiday, the data is due the next business day.

THCIC System

Log In the System as a Provider

Put in THCIC ID username and password. Click 'sign in'.

Security Notice

A facility must accept the security notice and access to the database will be provided. If a facility declines this notice, access will not be granted to the database.

Multi-Factor Authentication (MFA)

Confirm Your Identity

A code has been sent to the email associated with your account.

Enter your 6-digit code:

[6-digit code]

VERIFY   **RESEND CODE**

Code received via email.

From:	System13 Trainer Notifier
To:	Your Email Address
Subject:	THCIC HCDCS Account Sign In: Confirm Your Identity
Date:	Wednesday, April 16, 2025 12:54:16 PM

WARNING: This email is from outside the HHS system. Do not click on links or attachments unless you expect them from the sender and know the content is safe.

Please Confirm Your Identity

Dear THCIC Contact: (Your Name)

To complete the login process for your th******** account, enter this one-time code to confirm your identity:
504057

Please use caution and do not forward or share this information with any unknown third party. To help protect your privacy, this code will expire within 5 minutes.

Neither THCIC nor System13 will call you and ask you for this code, nor will we ask you for a password. Please report any suspicious activity.

Thank you.
-- THCIC/System13 Support

Organization Information:

- **Facility Name:** THCIC Facility
- **Facility Identifier:** *******

Multi-Factor Authentication (MFA)

Confirm Your Identity
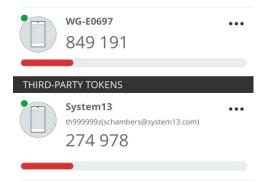
Scan the QR Code with your preferred Authenticator Application to activate your MFA token. If your token is already activated, input the code below.

Enter your 6-digit code:

6-digit code

VERIFY

Code by scanning the QR Code.

4:57 | LTE 57

Edit **W**atchGuard

WATCHGUARD AUTHPOINT

Check for pending push notifications

WG-E0697
849 191

THIRD-PARTY TOKENS

System13
th999999z(schambers@system13.com)
274 978

New Provider Dashboard

- The new user dashboard for facility users that provides insights into the claim counts broken down by quarter and month as well as providing the accuracy percentage.

- A graph of historical clam counts and a section with helpful tips.

- The dashboard also provides key deadlines broken down by quarter as well as prominently displaying the next deadline for submission, correction and certification,.

- Two views (List and Grid View).

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Activity Dashboard

Certification/ Start Certification – Grid View

When looking at the home page in grid view the middle row identifies various certification due dates.

Certification/ Start Certification – List View

When looking at the home page in list view the first row identifies various certification due dates, as well as the accuracy of this data and when it's due.

Go to Certification

The user can go to Certification by the provider tab **Certification** or by the activity dashboard icon **START CERTIFICATION**

Inpatient/ Outpatient Certification

If a facility submits data for inpatient/outpatient services, this is the page that will be shown.

Outpatient Certification

THCIC Support Center

Certification

OUTPATIENT

2025

1st Quarter
3 Events

`START CERTIFICATION`

2024

4th Quarter
No Data

If a facility <u>ONLY</u> submits outpatient event data this is what the screen will look like.

3rd Quarter
Eligible Claims

Past cut-off date for generation of Cert. Data.

2nd Quarter
No Data

Older Quarters
Select Quarter ▼

Select an older quarters data…

Home **Claims** **Claim Correction** **Reports** **Data Mgmt** **Certification** **Batches** **Help**

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THCIC   User Management   My Account   Logout

THCIC Support Center

Certification

OUTPATIENT

2025

1st Quarter
3 Events
START CERTIFICATION

2024

4th Quarter
No Data

3rd Quarter
Eligible Claims
Past cut-off date for generation of Cert. Data.

2nd Quarter
No Data

Older Quarters

Select Quarter

2024 1st Quarter
2023 4th Quarter
2023 3rd Quarter
2023 2nd Quarter

Click [Select Quarter] to view older quarters data. (This feature will be utilized later.)

If there is older data available, a listing that shows which quarters are available will be seen. Then, a facility will be able to start event view of this data.

Select an older quarters data to view…

After the older quarters data has been selected to view click View Encounters ➡ . To view the older data.

Encounter on Demand (EOD)

<u>Encounter on Demand</u> is the ability for facilities to generate quarterly certification data after the quarter has ended.

Facilities will be able to generate their quarterly certification data and the corresponding certification data reports from the time a quarter ends (example: 1q11 ends March 31, 2011.) A facility can generate the certification files for this time through the end of the corrections period for that quarter.

<u>PLEASE BE ADVISED</u> when a facility has chosen to begin this process, the facility must ensure the data has been submitted, is complete and accurate. If changes need to be made to this data <u>after</u> the file has been generated, these changes will incur a charge from System13 to regenerate the data.   Also, **<u>ANYONE</u>** with access to a UserID as a certifier can initiate the EOD and not just the system administrator for the facility.

Encounter on Demand (EOD)

Encounter on Demand (EOD)

| Home | Claims | Claim Correction | Reports | Data Mgmt | Certification | Batches | Help |

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THCIC   User Management   My Account | Logout

Certification

OUTPATIENT

2025

1st Quarter
3 Events
Generate Quarter Cert. Data ➡

Click 'Generate Quarter Cert. Data', Generate Quarter Cert. Data ➡ **to generate quarterly certification data and the corresponding certification data reports.**

2024

4th Quarter
Generate Quarter Cert. Data ➡

3rd Quarter
Eligible Claims
START CERTIFICATION

2nd Quarter
No Data

Older Quarters
Select Quarter ▼

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Encounter on Demand (EOD)

Encounter on Demand (EOD)

Encounter on Demand (EOD)

EOD Request Not Allowed

EOD is not allowed if your data isn't 100% accurate as the message indicates. But if you are 100% accurate, you can start this process.

Encounter on Demand (EOD)

Generate Quarter Cert. Data ➡

THCIC Support Center

Certification

Quarter Analysis

Month	Total	xx0	xx1	xx2	xx3	xx4	xx5	xx6	xx7	xx8	???
Oct	0	0	0	0	0	0	0	0	0	0	0
Nov	0	0	0	0	0	0	0	0	0	0	0
Dec	0	0	0	0	0	0	0	0	0	0	0
Jan	78	19	11	10	7	16	10	0	5	0	0
Feb	81	12	15	14	9	14	11	0	6	0	0
Mar	75	11	12	11	7	13	10	0	11	0	0

Quarter Comparison

Qtr	Total
1q15	234
4q14	430
3q14	321

Messages

* Some claims still have errors. Please use Claim Correction to correct these claims. You may also review these errors with the Frequency of Errors Report and the Hardcopy Report, both of which are available on the Reports Tab.

* You may wish to use the Claim Merge function to reduce your claims and obtain a better claim summary.

* You should use the Summary Report on the Reports tab to obtain a snapshot of your data. This report shows data distribution by month, charges, admission type, newborns, discharge status, payer (claim filing indicator), patient geographic origin, gender, age, race, ethnicity, length of stay and diagnosis and procedure counts per claim.

Based on the above analysis, please verify that there are NO unaddressed data issues prior to continuing with the cert file generation.

Do you wish to continue? [Yes] [No]   [Print Data Analysis Report]

Encounter on Demand (EOD)

Certification Data Set

The Certification data and reports for your facility will be generated within the next 72 hours once you click 'OK'. This will remove the quarter's data from the Claims and Claims Correction screens (WebClaim, WebCorrect) and prepare the data (This quarter's Certification Data Set) for your review.

Do you wish to continue?

OK   Cancel

A facility will have to verify twice, that the facility is requesting to generate this file.

Generation of Cert. Data Set

Your quarterly data will be available under the Certification Tab within 72 hours. Delays may be experienced during the months of Feb, May, Aug and Nov. An email will be sent to the provider of contact indicating that the data is available.

OK

This is the facility's final message, an email will be sent to the Provider Primary Contact/Data Administrator when the data is available for certification, within 3 business days. The screen will show generation in progress. Once available it will show start certification.

Encounter on Demand (EOD)

| Home | Claims | Claim Correction | Reports | Data Mgmt | Certification | Batches | Help | system13 *Making technology your best friend.* |

THCIC | User Management   My Account | Logout

THCIC Support Center

Certification

OUTPATIENT

2025

1st Quarter
3 Events

Generate Quarter Cert. Data ➡

2024

4th Quarter
Eligible Claims
START CERTIFICATION

3rd Quarter
Eligible Claims
START CERTIFICATION

2nd Q
No Da

Once you get confirmation that the previous quarter is ready for certification, you can now start the certification for the next quarter.

Older Quarters
Select Quarter ▼

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Start Certification

List of all Events Generated

Home | Claims | Claim Correction | Reports | Data Mgmt | Certification | Batches | Help

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Certification

◄ Back to Certification by Quarter   🔍 Enter Control #, Medical Record #, Patient or Certification #   SEARCH   Reports and Certification ►

Patient Control # ⇕	Medical Record # ⇕	Event ID ⇕	Processed Date ⇕	Patient Name ⇕	Claims ⇕	Type ⇕
123	123	120200000011	06/16/2020	DOE, JACKSON	1	OUT-I
147	147	120200000012	06/16/2020	DOE, JENNIFER	1	OUT-I
852	852	120200000013	06/16/2020	DOE, BERRY	1	OUT-I

3 Events for 2020 1st Quarter Outpatient

Encounter View

☑ The events are ordered by event ID specified by System13. The facility can click a column header and it will modify the list accordingly for that column.

Patient Control # ⇕	Medical Record # ⇕	Event ID ⇕	Processed Date ⇕	Patient Name ⇕	Claims ⇕	Type ⇕	⇕

☑ The search feature to search your claim listing is also available.

🔍 Enter Control #, Medical Record #, Patient or Certification # [SEARCH]

Search Claim Listings

Once the user opens the claim correction tab, a listing of all claims that need correction will be displayed.

The user can modify the claims by:
- **Control #**
- **Medical record #**
- **Patient or**
- **Certification #**

Once this data has been typed in to modify the list, pressing 'clear' will take the user back to the certification listing.

To close out this search click the X on this field.

Choose Event Claim to View

Event View – Patient Tab

Warnings…
will indicate if
event warnings.

To return to the event listing at any time click
◀ Back to 2020 1st Quarter Outpatient Event List . Click the tab to move through the different tabs. The tab shown will be highlighted.

Event View – Patient Tab

Any PINK areas indicate there is an error on your data. If a facility would like to make changes to their data the facility will have to contact System13. There will be a cost involved to make changes to their data at certification. The Claim Correct feature is not available for events that are being certified.

Event View – Diagnosis

The Diagnosis/ Procedure tab allows a facility to see the principal diagnosis, other diagnosis codes, reason for visit and e-codes. Outpatient events do not have any procedure codes on the Diagnosis & Procedure tab.

Event View – Situational Codes

The situational codes tab is not available for outpatient professional patient events.

Event View – Charges

The Charges tab to see the revenue code and charge information to be reported on the patient's event.

Event View – MedPar

The MedPar tab and view the patient's charges rolled into the 30 MedPAR revenue categories.

Event View – Warnings Tab

The Warnings tab to view any Event build issues. Warnings…will indicate if event warnings. If there are warning on your data you must contact System13 to correct.

Event View – Facility

Present on Admission (POA) is not a feature for outpatient facilities, only inpatient facilities. A space for POA is shown, but no data is available since outpatient facility doesn't provide this information.

The Facility tab allows a facility to see the facility information that will be reported and the facility specialty information to be reported for the specified patient.

Back to Event Listing

✓ Click ◀ Back to 2020 1st Quarter Outpatient Event List   to go back to Event listing.

✓ A facility will be able to view another patient's event file or go to reports and certification.

✓ A facility will also be able to go to certification by quarter.

Reports and Certification

Click Reports and Certification ▶ to go to the reports and certification for the specified quarter.

Reports, Processing Reports, Certification File Download and Certification

Provider Review of Data

- Facilities must provide their operating/ rendering physicians an opportunity to review, request correction of, and comment on records of patients for whom they are shown as rendering or operating.

- This is probably the most difficult part of certification!

- The process that facility follows is dependent upon the organizational and logistical structure of the facility.

- Factors that affect the process or amount of time involved include:
  - Number of operating/ rendering physicians
  - Location of practitioners
  - Interest of practitioners

- Each facility is responsible for developing the process and methods for collecting comments and corrections from operating/ rendering physicians, and for ensuring that their concerns are acted upon.

- Use of the outpatient reports is not required.
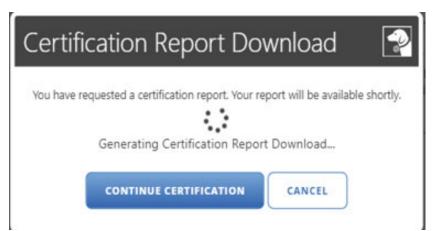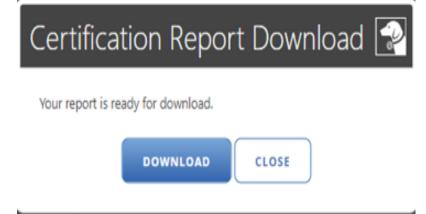
Reports Available

Reports

2020 1st Quarter Outpatient
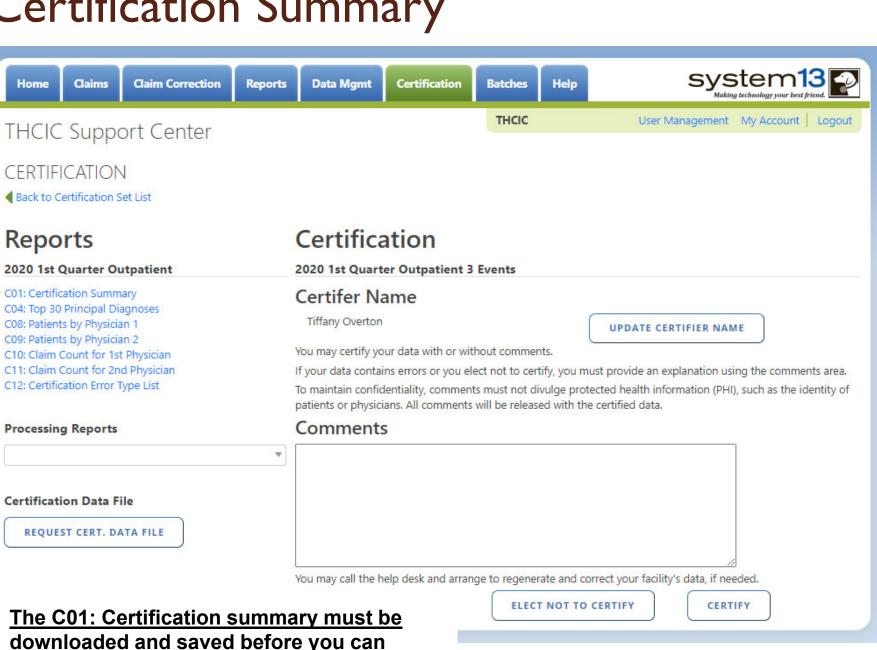
C01: Certification Summary
C04: Top 30 Principal Diagnoses
C08: Patients by Physician 1
C09: Patients by Physician 2
C10: Claim Count for 1st Physician
C11: Claim Count for 2nd Physician
C12: Certification Error Type List

Certification Report Download

You have requested a certification report. Your report will be available shortly.

Generating Certification Report Download...

CONTINUE CERTIFICATION   CANCEL

Certification Report Download

Your report is ready for download.

DOWNLOAD   CLOSE

The Reports will be a downloadable PDF files.

Reports C01
Certification Summary

The C01: Certification summary must be downloaded and saved before you can certify your data.

Reports C01 Certification Summary

Reports C01
Certification Summary

Click download to download this PDF file.

Reports C01
Certification Summary (Page 1)
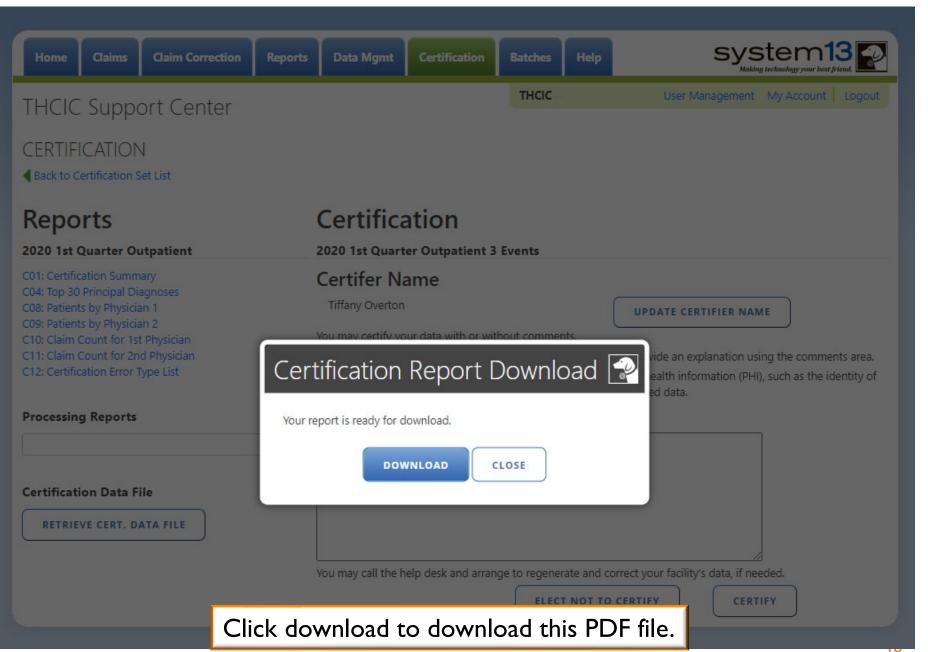
THCIC Report C01: Certification Summary (Outpatient - Institutional) Q4 2014
Report Date: 07-Jul-2015
THCIC ID: 000006 THCIC Trainee 1

Event Summary

Period	Count
Late for 3Q - July 2014	0
Late for 3Q - August 2014	0
Late for 3Q - September 2014	0
October 2014	145
November 2014	132
December 2014	153
Total	430

Provides a count of the events built for the quarter.

Charges Summary

Type	Amount
Total Charges	$1,149,356.24
Average Charge	$2,672.92
Minimum Charge	$1,048.22
Maximum Charge	$5,182.00
Standard Deviation	$687.66

Lists charges summary for the events.

Lists charges summary for the events.

Charges Breakout

Category	Count
> $250,000	0
$1,000 - $250,000	430
< $1,000	0

Provides counts and percentages by payment source, both primary and secondary.

Claim Filing Indicator Code

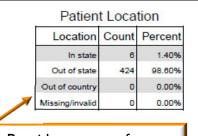| Code	Primary	Percent	Second	Percent
Selfpay - 09	0	0.00%	0	0.00%
Central Certification - 10	0	0.00%	0	0.00%
Other NonFederal Programs - 11	20	4.65%	0	0.00%
Preferred Provider Organization (PPO) - 12	20	4.65%	0	0.00%
Point of Service (POS) - 13	12	2.79%	0	0.00%
Exclusive Provider Organization (EPO) - 14	18	4.19%	0	0.00%
Indemnity Insurance - 15	16	3.72%	0	0.00%
Health Maintenance Organization (HMO) Medicare Ris - 16	19	4.42%	0	0.00%
Dental Maintenance Organization - 17	15	3.49%	0	0.00%
Automobile Medical - AM	26	6.05%	0	0.00%
Blue Cross/Blue Shield - BL	20	4.65%	0	0.00%
CHAMPUS - CH	18	4.19%	0	0.00%
Commercial Insurance Co. - CI	19	4.42%	0	0.00%
Disability - DS	19	4.42%	0	0.00%
Federal Employees Program - FI	14	3.26%	0	0.00%
Health Maintenance Organization - HM	16	3.72%	0	0.00%
Liability - LI	0	0.00%	0	0.00%
Liability Medical - LM	17	3.95%	0	0.00%
Medicare Part A - MA	23	5.35%	0	0.00%
Medicare Part B - MB	15	3.49%	0	0.00%
Medicaid - MC	27	6.28%	0	0.00%
Other Federal Program - OF	19	4.42%	0	0.00%
Title V - TV	19	4.42%	0	0.00%
Veteran Administration Plan - VA	21	4.88%	0	0.00%
Workers Compensation Health Claim - WC	23	5.35%	0	0.00%
Mutually Defined - ZZ	0	0.00%	0	0.00%
Mutually Defined, Or SelfPay, Or Unknown, Or Charity - ZZ	14	3.26%	0	0.00%
Missing/Invalid	0	0.00%	430	100.00%

Reports C01
Certification Summary (Page 2)
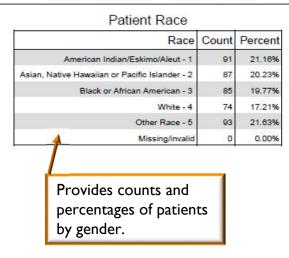
THCIC Report C01: Certification Summary (Outpatient - Institutional) Q4 2014
Report Date: 07-Jul-2015
THCIC ID: 000006 THCIC Trainee 1

Patient Location
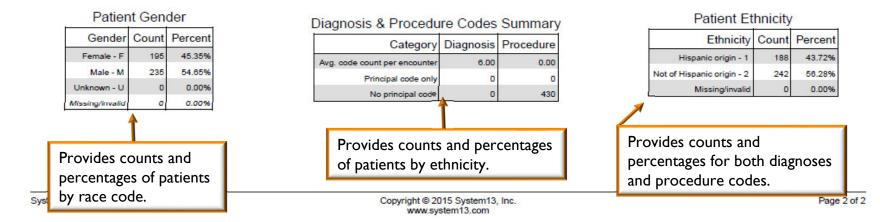
Location	Count	Percent
In state	6	1.40%
Out of state	424	98.60%
Out of country	0	0.00%
Missing/invalid	0	0.00%

Provides counts of patients that reside in Texas, outside of the state, or outside of the country.

Patient Race

Race	Count	Percent
American Indian/Eskimo/Aleut - 1	91	21.16%
Asian, Native Hawaiian or Pacific Islander - 2	87	20.23%
Black or African American - 3	85	19.77%
White - 4	74	17.21%
Other Race - 5	93	21.63%
Missing/invalid	0	0.00%

Provides counts and percentages of patients by gender.

Patient Age Breakdown

Age	Count	Percent
Less than 1 year	430	100.00%
1 - 17	0	0.00%
18 - 44	0	0.00%
45 - 64	0	0.00%
65 - 74	0	0.00%
> 74	0	0.00%
Missing/invalid	0	0.00%

Provides counts and percentages of patients by age.

Patient Gender

Gender	Count	Percent
Female - F	195	45.35%
Male - M	235	54.65%
Unknown - U	0	0.00%
Missing/invalid	0	0.00%

Provides counts and percentages of patients by race code.

Diagnosis & Procedure Codes Summary

Category	Diagnosis	Procedure
Avg. code count per encounter	6.00	0.00
Principal code only	0	0
No principal code	0	430

Provides counts and percentages of patients by ethnicity.

Patient Ethnicity

Ethnicity	Count	Percent
Hispanic origin - 1	188	43.72%
Not of Hispanic origin - 2	242	56.28%
Missing/invalid	0	0.00%

Provides counts and percentages for both diagnoses and procedure codes.

Syst
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Page 2 of 2

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Reports C04
Top 30 Principal Diagnoses

Reports C04
Top 30 Principal Diagnoses

Diag Code	Description	Percent	Avg. LOS in days	Total Discharges Avg. Charge	Under 1 Discharges Avg. Charge	1-17 Discharges Avg. Charge	18-44 Discharges Avg. Charge	45-64 Discharges Avg. Charge	65-74 Discharges Avg. Charge	Over 74 Discharges Avg. Charge
04619	OTHER CREUTZFELDT-JAKOB	0.70%	10.0	3 $2,705.78	1 $3,121.94					
94877	70-79% BDY BRN/70-79% 3D	0.47%	6.5	2 $3,127.20	1 $3,047.50					
33921	ACUT POST-TRAUMA HEADACH	0.47%	3.0	2 $1,766.40	1 $2,038.28					
66581	OB TRAUMA NEC-DELIVERED	0.47%	8.5	2 $2,623.85						
9409	BURN EYE & ADNEXA NOS	0.47%	4.0	2 $2,193.31						
9781	POIS-TYPH/PARATYPH VACC	0.23%	20.0	1 $4,208.88						
36854	ACHROMATOPSIA	0.23%	10.0	1 $2,723.53						
23872	LOW GRD MYELODYSPLST SYN	0.23%	7.0	1 $3,261.14						
9985	POSTOPERATIVE INFECTION	0.23%	16.0	1 $2,610.76						
37481	HEMORRHAGE OF EYELID	0.23%	8.0	1 $3,101.55						
25514	OTH SECOND ALDOSTERONISM	0.23%	17.0	1 $2,656.08						
V1324	PERSNL HIST VULVR DYSPLA	0.23%	17.0	1 $1,699.15						
38651	HYPRACT LABYRINTH UNILAT	0.23%	9.0	1 $3,076.80						
28801	CONGENITAL NEUTROPENIA	0.23%	14.0	1 $2,088.94						
V159	HX-HEALTH HAZARD NOS	0.23%	5.0	1 $2,895.50						
80513	FX C3 VERTEBRA-OPEN	0.23%	10.0	1 $1,712.03						
29626	DEPR PSYCHOS-FULL REMISS	0.23%	7.0	1 $2,693.25						
V494	DISFIGUREMENTS OF LIMBS	0.23%	22.0	1 $2,605.61						
01110	TB LUNG NODULAR-UNSPEC	0.23%	23.0	1 $2,723.36						
82010	FX FEMUR INTRCAP NOS-OPN									

System: Trainer

This report is presented in descending order by total charges for each of the top 30 principal diagnosis.

3

Reports C08
Patients by Operating/Rendering 1 Physician

Patients by Operating/Rendering 1 Physician

THCIC Report C08: Patients by Physician 1 (Outpatient - Institutional) Q4 2014
Report Date: 07-Jul-2015
THCIC ID: 000006 THCIC Trainee 1

Operating/Rendering1 Physician: ,   5065

DIFFERENT, SVCDATES

PCN: L241ANDC241	From: 2009-10-30	Sex: F	Operating/Rendering1: , 5065	Ancil Chg: $0.00
MRN: 12345678A	Thru: 2009-10-30	Age: 54	Other/Rendering2: Unassigned	
Race: 4 White	Eth: 2 Not of Hispanic origin	LOS: 1		

Princ. DX: 71516 LOC PRIM OSTEOART-L/LEG   Other DX1: 71966 JOINT SYMPTOM NEC-L/LEG   Other DX2: 71906 JOINT EFFUSION-L/LEG

GOOD, ALLEN

PCN: C241ANDC247	From: 2009-10-30	Sex: F	Operating/Rendering1: , 5065	Ancil Chg: $0.00
MRN: 12345678A	Thru: 2009-10-30	Age: 54	Other/Rendering2: Unassigned	
Race: 4 White	Eth: 2 Not of Hispanic origin	LOS: 1		

Princ. DX: 71516 LOC PRIM OSTEOART-L/LEG   Other DX1: 71906 JOINT EFFUSION-L/LEG   Other DX2: 71946 JOINT PAIN-L/LEG   Other DX3: 7197 DIFFICULTY IN WALKING

GOOD, HARRY

PCN: C241	From: 2009-10-30	Sex: F	Operating/Rendering1: , 5065	Ancil Chg: $0.00
MRN: 12345678A	Thru: 2009-10-30	Age: 54	Other/Rendering2: Unassigned	
Race: 4 White	Eth: 2 Not of Hispanic origin	LOS: 1		

Princ. DX: 71516 LOC PRIM OSTEOART-L/LEG   Other DX1: 71906 JOINT EFFUSION-L/LEG   Other DX2: 71946 JOINT PAIN-L/LEG   Other DX3: 7197 DIFFICULTY IN WALKING

This report is presented by patients by operating/ rendering physician.

Reports C09
Patients by Operating/Rendering 2 Physician

THCIC Report C09: Patients by Physician 2 (Outpatient - Institutional) Q4 2014
Report Date: 07-Jul-2015
THCIC ID: 000006 THCIC Trainee 1

Other/Rendering2 Physician: , 5065

ADJUST, ROSS

PCN: C240C247	From: 2009-10-30	Sex: F	Operating/Rendering1: BURNET, BROOKS 5065	Ancil Chg: $0.00
MRN: 12345678A	Thru: 2009-10-30	Age: 54	Other/Rendering2: , 5065	
Race: 4 White	Eth: 2 Not of Hispanic origin	LOS: 1		

Princ. DX: 71516 LOC PRIM OSTEOART-L/LEG   Other DX1: 7197 DIFFICULTY IN WALKING   Other DX2: 71946 JOINT PAIN-L/LEG

GOOD, ROSS

PCN: C240	From: 2009-10-30	Sex: F	Operating/Rendering1: BURNET, BROOKS 5065	Ancil Chg: $0.00
MRN: 12345678A	Thru: 2009-10-30	Age: 54	Other/Rendering2: , 5065	
Race: 4 White	Eth: 2 Not of Hispanic origin	LOS: 1		

Princ. DX: 71516 LOC PRIM OSTEOART-L/LEG   Other DX1: 71906 JOINT EFFUSION-L/LEG   Other DX2: 71946 JOINT PAIN-L/LEG   Other DX3: 7197 DIFFICULTY IN WALKING

LATE, ROBERT

PCN: L240	From: 2009-10-30	Sex: F	Operating/Rendering1: BURNET, BROOKS 5065	Ancil Chg: $0.00
MRN: 12345678A	Thru: 2009-10-30	Age: 54	Other/Rendering2: , 5065	
Race: 4 White	Eth: 2 Not of Hispanic origin	LOS: 1		

Princ. DX: 71516 LOC PRIM OSTEOART-L/LEG   Other DX1: 71906 JOINT EFFUSION-L/LEG   Other DX2: 71946 JOINT PAIN-L/LEG   Other DX3: 7197 DIFFICULTY IN WALKING

This report is presented by patients by operating/ rendering 2 physician.

Reports C10
Claim Count for 1st Physician

Reports C10
Claim Count for 1st Physician

THCIC Report C10: Claim Count for 1st Physician (Outpatient - Institutional) Q1 2020
Report Date: 24-Jun-2020
THCIC ID:

Claim Count for First Physician

Name	License Number	Count
Fake, Doctor 1	1111111111	98
Fake, Doctor 2	1111111112	121
Fake, Doctor 3	1111111113	1
Fake, Doctor 4	1111111114	97
Fake, Doctor 5	1111111115	120
Fake, Doctor 6	1111111116	113
Fake, Doctor 7	1111111117	122
Total Claim Count		672

Reports C11
Claim Count for 2nd Physician

Reports C11
Claim Count for 2nd Physician

THCIC Report C11: Claim Count for 2nd Physician (Outpatient - Institutional) Q1 2020
Report Date: 24-Jun-2020
THCIC ID:

Claim Count for Second Physician

Name	License Number	Count
Fake, Doctor 8	0111111108	98
Fake, Doctor 9	0111111109	121
Fake, Doctor 10	0111111110	1
Fake, Doctor 11	0111111111	97
Fake, Doctor 12	0111111112	120
Fake, Doctor 13	0111111113	113
Fake, Doctor 14	0111111114	122
Total Claim Count		672

Reports C12
Certification Error Type List

Reports C12
Certification Error Type List

THCIC Report C12: Certification Error Type List (Outpatient - Institutional) Q1 2020
Report Date: 24-Jun-2020
THCIC ID:

There are no errors for the specified events.

Processing Reports

Processing Reports

The nine (if you have professional and institutional claims) or seven (if institutional only). The processing result reports describe the results of the event build process.

Processing Reports
Duplicate Events

Processing Reports
Duplicate Events

```
            Texas Health Care Information Collection
            Duplicate Events Summary Report - Outpatient
                      Date: Date Report Ran


   □
                    THCIC:  000005   System13


                         THCIC# 000002    System13 QA 2

E                                                              STMT    STMT
R   ENCOUNTER        LAST NAME           BIRTH    PATIENT      MEDICAL     ADMIT  FROM    THRU
R     ID               &        SSAN     DATE   CONTROL NUMBER RECORD NUMBER DATE  DATE    DATE
| ||         | |   FIRST INITIAL  | |    | |      | |           | |          | YYYYMMDD YYYYMMDD YYYYMMDD
-----------------------------------------------------------------------------------------------------

        NO DUPLICATE or CROSS-OVER ENCOUNTERS DETECTED.
```

The "Duplicate Report" will list duplicate event errors that have occurred. If a facility has duplicate event errors, these errors should be corrected. The facility will have to contact System13 to make these changes.

Processing Reports
Event Errors

Processing Reports
Event Errors

```
                    Texas Health Care Information Collection
                            Encounter Edit Report
                                  System13

THCIC:  000005                                          Date: Date Report Ran

                              Encounter Edit Report
                                 System13 QA 2
  THCIC:000002                                             Date: 06/11/10


      MedRec#          PatCtrl#          SSN#       Admission       ErrCode
      --------------------------------------------------------------------------------
      12345678A        L131              444024323  20090730        813
                       L131              444024323  20090730        813
```

The "Event Edit Report" lists errors that prevented events from being built. Events were <u>NOT</u> created for these events, and errors on this report should be corrected.

Processing Reports
Event Warnings

Processing Reports
Event Warnings

```
Texas Health Care Information Collection

Encounter Warning Summary Report
For (Quarter Year) Data
System13
Provider 000005


The following encounters were flagged with warnings during the process of building the encounter.
Encounter #  Med Rec No.      Pat Cntrl No.      Patient Name                                    Admit Date  Warning Code(s)
------------------



No Encounter warnings flagged for this provider
```
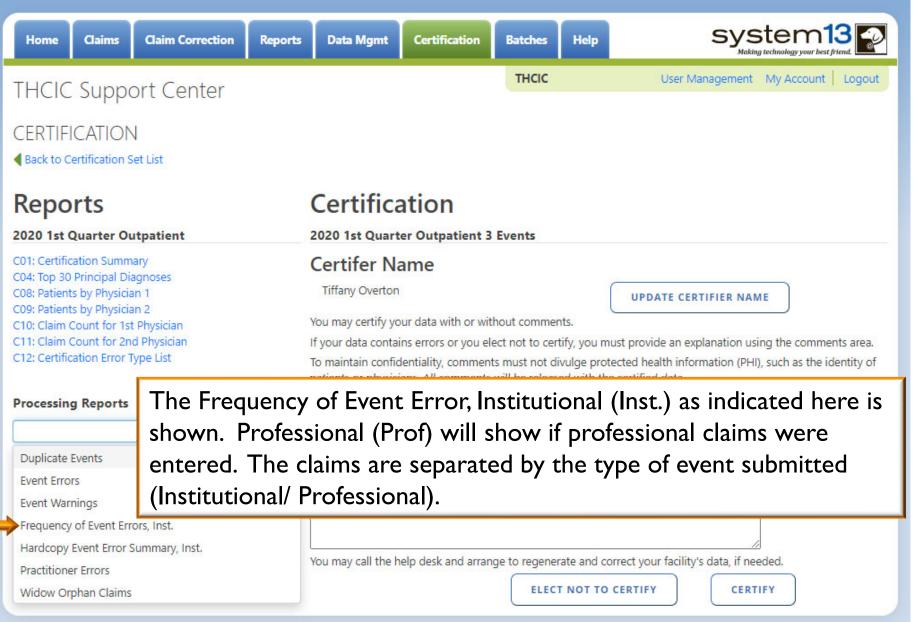
Events listed on the "Event Warnings" report may be in error and if it is in error it should be corrected.

Processing Reports - Frequency of Event Errors, Institutional /Professional

The Frequency of Event Error, Institutional (Inst.) as indicated here is shown. Professional (Prof) will show if professional claims were entered. The claims are separated by the type of event submitted (Institutional/ Professional).

Processing Reports - Frequency of Event Errors, Institutional /Professional

Frequency of Errors Report ((Outpatient-Institutional)
Date: Date Report Ran

THCIC: 000005   System13

A frequency of event error report that will provide the facility information regarding the number of events received, month received and the bill type.

Batch Information

Field	Value
Claims Period	01/01/2014 thru 12/31/2016
Service Period	01/02/2015 thru 01/05/2015
Claims Received	2,452
Claims Rejected	0
Claims Processed	2,452
Emergency Department Claims	359
Claims In Error w/o Race + Ethnicity Errors	1
Claims In Error	1
Fields In Error	4
Accuracy Rate w/o Race + Ethnicity Errors	97.40%
Accuracy Rate	97.40%

Claims By Month

	2014	2015	2016
Jan	0	2,002	0
Feb	0	450	0
Mar	0	0	0
Apr	0	0	0
May	0	0	0
Jun	0	0	0
Jul	0	0	0
Aug	0	0	0
Sep	0	0	0
Oct	0	0	0
Nov	0	0	0
Dec	0	0	0

Claims By Bill Type

Bill Type	Count
xx0	0
xx1	2,452
xx2	0
xx3	0
xx4	0
xx5	0
xx6	0
xx7	0
xx8	0
xx?	0

Processing Reports - Frequency of Event Errors, Institutional /Professional

```
Frequency of Errors Report ((Outpatient-Institutional)
            Date: Date Report Ran

   THCIC: 000005                      System13
```

Errors By Field

Field	Valid	Blank/Zero	Failed / Invalid	Passed
Patient control number	121	0	0	100.0%
Patient sex	121	0	0	100.0%
Patient birth date	121	0	0	100.0%
Statement from date	121	0	0	100.0%
Statement thru date	121	0	0	100.0%
Medical record number	121	0	0	100.0%
Total claim charges	121	0	0	100.0%
Facility type	121	0	0	100.0%
Claim frequency type	121	0	0	100.0%
Patient Last Name	121	0	0	100.0%
Patient First Name	121	0	0	100.0%
SSN	121	0	0	100.0%
Patient race	121	0	0	100.0%
Patient ethnicity	121	0	0	100.0%
Address line 1	121	0	0	100.0%
Patient city	121	0	0	100.0%
State of residence	121	0	0	100.0%
Zip code	121	0	0	100.0%
Patient country	42	79	0	100.0%

Claim Accuracy Rate: 83.47%

The facility error listing will be two pages (Pages 2 & 3). It is a complete listing of all the errors by field.

Processing Reports - Frequency of Event Errors, Institutional /Professional

```
Frequency of Errors Report ((Outpatient-Institutional)
                 Date: Date Report Ran

    THCIC:  000005                    System13
```

The 837 format utilizes 'Qualifier' codes to identify or characterize various health information data elements. Invalid or missing Qualifier codes may cause data to be omitted from a claim or result in improper placement of the data.
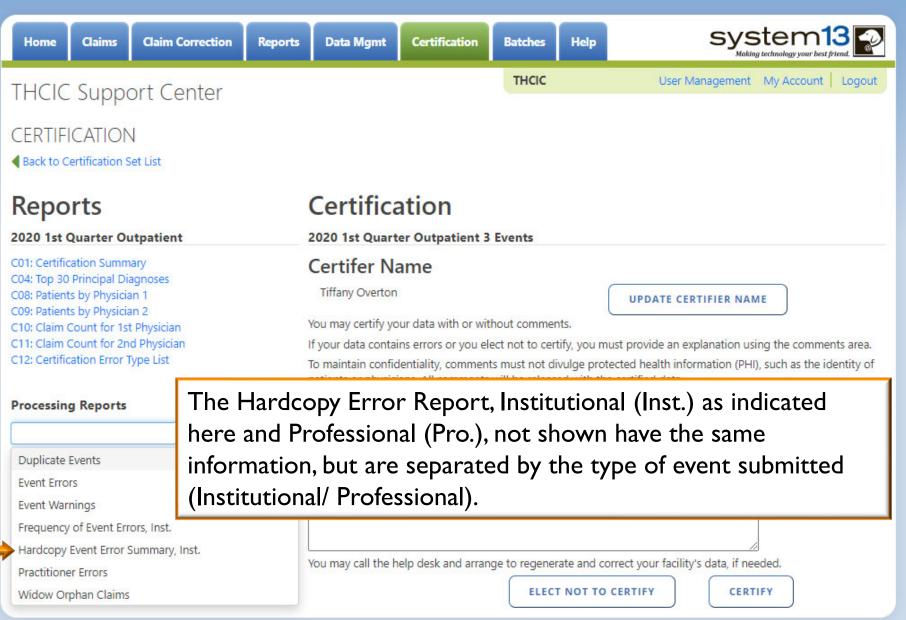
Error Summary

Count	Error Code	Error Message
6	W-696	Invalid Operating Practitioner Name Match
17	E-697	Missing Claim Filing Indicator Code for Subscriber
29	E-735	Invalid Procedure Date

Page 4 (or it may be more pages depending on how many errors their claim events have) will be a complete listing of the error count(s), error code(s) and error message(s).

Processing Reports - Hardcopy Error Report, Institutional /Professional

| Home | Claims | Claim Correction | Reports | Data Mgmt | Certification | Batches | Help |

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CERTIFICATION

◀ Back to Certification Set List

Reports

2020 1st Quarter Outpatient

C01: Certification Summary
C04: Top 30 Principal Diagnoses
C08: Patients by Physician 1
C09: Patients by Physician 2
C10: Claim Count for 1st Physician
C11: Claim Count for 2nd Physician
C12: Certification Error Type List

Processing Reports

Duplicate Events
Event Errors
Event Warnings
Frequency of Event Errors, Inst.
Hardcopy Event Error Summary, Inst.
Practitioner Errors
Widow Orphan Claims

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Tiffany Overton   UPDATE CERTIFIER NAME

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of

The Hardcopy Error Report, Institutional (Inst.) as indicated here and Professional (Pro.), not shown have the same information, but are separated by the type of event submitted (Institutional/ Professional).

You may call the help desk and arrange to regenerate and correct your facility's data, if needed.

ELECT NOT TO CERTIFY   CERTIFY

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Processing Reports - Hardcopy Error Report, Institutional /Professional

```
Hardcopy Claims Error Summary Report (Outpatient-Professional)
                    Date: Date Report Ran

        THCIC: 000005                    System13
```

Error List

Med. Rec. #	PCN	Service	Rec. #	Field	Value of field	Err #	EW
M735942562	193227481	20100203		Claim Filing Indicator code		697	Error
M035692904986	1125429652	20100204		Operating practitioner ID	1245284801	696	Warning
M2392108941	1413739086	20100204		Claim Filing Indicator code		697	Error
M917724874	1598668	20100204		Procedure Date		735	Error
				Procedure Date		735	Error
M87029512928	12684278	20100209		Claim Filing Indicator code		697	Error
M96352916	1424987174	20100209		Operating practitioner ID	1245284801	696	Warning
M88997142	1434919505	20100210		Operating practitioner ID	1245284801	696	Warning
M60249996200	1684664570	20100211		Claim Filing Indicator code		697	Error
				Operating practitioner ID	1245284801	696	Warning
M1017122073	10937714	20100211		Claim Filing Indicator code		697	Error
M3506582068	1851381	20100211		Claim Filing Indicator code		697	Error
M14707575	11426741	20100216		Claim Filing Indicator code		697	Error
M1913489390	10614083	20100217		Claim Filing Indicator code		697	Error
M0368784240	1043789	20100218		Operating practitioner ID	1659496180	696	Warning
M368672022574	1774987857	20100218		Procedure Date		735	Error
				Procedure Date		735	Error
				Procedure Date		735	Error

Hardcopy error summary report shows every error and warning on each event. Report is run separately for institutional and professional events.

Processing Reports
Practitioner Errors

Processing Reports Practitioner Errors

```
              Texas Health Care Information Collection
              Unidentified Physician ID Summary Report
                             System13
                     Date: Date Report Ran

          THCIC: 000005                  System13


---------------------------------------------------------------------------
There are NO Unidentified Attending or Operating Practitioners for this Provider.
```

"Practitioner Error" report lists unidentified attending or operating practitioners.

Processing Reports
Widow Orphan Claims

Processing Reports
Widow Orphan Claims

```
                    Texas Health Care Information Collection
                    Incomplete Events and Deleted Claims Report
                                    System13

   THCIC:  000005                                        Date: Date Report Ran

   The claims listed below were not included in an encounter because one or more claims necessary to complete the encounter
   was not present or the claims were marked for deletion by submission of an void claim (xx8). The reason for claims not
   being included in the encounter are that there is no discharge claim.

   A message code is listed beside each claim indicating the reason that the encounter was not completed. Actions to be taken
   regarding these messages: If the patient was not discharged during the quarter, then nothing needs to be done.
   If the patient was discharged during the quarter, please ensure that the missing information is supplied.
   Contact the THCIC Help Desk if assistance is required in making the correction.

   Void/cancel claims (xx8) will be listed after the claim that has been deleted. There will be no error code associated with
   these claims. These claims are listed for informational purposes only.
```

MedRec#	PatCtrl#	SSN#	Admission	StmtFrom	StmtThru	BillType	ErrCode	InfCode
12345678B	C131ANDC138	444024321	20091030	20091030	20091030	138		
	C131ANDC138	444024321	20091030	20091030	20091030	131		
	C131ANDC138	444024321	20091030	20091030	20091030	131		
	C131ANDC138	444024321	20091030	20091030	20091030	138		
	C241ANDC248	444024321		20091030	20091030	248		
	C241ANDC248	444024321		20091030	20091030	241		
	C241ANDC248	444024321		20091030	20091030	241		
	C241ANDC248	444024321		20091030	20091030	248		
12345678A	L130L138L130	444024323	20090730	20090730	20090730	138		
	L130L138L130	444024323	20090730	20090730	20090730	130		
	L131ANDL137	444024328	20090730	20090730	20090730	137		814
12345678F	L138	444024333	20090730	20090730	20090730	138		814
12345678A	L240L248L241	444024323		20091030	20091030	248		
	L240L248L241	444024323		20091030	20091030	240		
12345678E	L241ANDL248	444024333		20090730	20090730	248		
	L241ANDL248	444024333		20090730	20090730	241		
	L241ANDL248	444024333		20090730	20090730	241		
	L241ANDL248	444024333		20090730	20090730	248		
12345678F	L248	444024333		20090730	20090730	248		814
12345678A	UPLOADEDL137COR	444024330	20090730	20090730	20090730	137		814
	UPLOADEDL247COR	444024330		20090730	20090730	247		814

Events on the "Incomplete Event and Deleted Claims Report" are either a voided event (xx8) or incomplete event - admission event (xx2) with no discharge event.

Certification File Download

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CERTIFICATION

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2020 1st Quarter Outpatient

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C10: Claim Count for 1st Physician
C11: Claim Count for 2nd Physician
C12: Certification Error Type List

Processing Reports

[▼]

Certification Data File

[REQUEST CERT. DATA FILE]

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Tiffany Overton

[UPDATE CERTIFIER NAME]

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of patients or physicians. All comments will be released with the certified data.

Comments

Certification file download This capability will allow a facility to request the creation of a downloadable file containing the quarterly certification data for a given quarter. This file will be available as long as the quarter's certification data is accessible for viewing via the system's certification page.

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Certification File Download

Certification File Download is the capability for facilities to request the creation of a downloadable file containing the quarterly certification data for a given quarter as long as the quarter's certification data is accessible for viewing via the system's certification page.

The file will be in a fixed length format and the data layout will be downloaded with the file. This will allow a facility to analyze the data with software analysis tools of the facilities choice.

BE AWARE that once this file has been requested, it should be available within 24 hours. An e-mail will be sent to the provider primary contact/data administrator on file when this data is available for download. Please be advised, **ANYONE** with access as a facility administrator or a certifier specification can initiate the certification file download and not just the provider primary contact/data administrator for the facility.

The file will be available for downloading for 30 days. The download file will be removed from the system after 30 days from the date of the download file creation.

There will be a fee if a facility requests this file again after the 30 day review period. If a facility would like another creation of this file, there will be a fee accessed through System13. It is important that the file is downloaded within 30 days of requesting its creation to avoid any fees.

Certification File Download

Certification file download - Click [REQUEST CERT. DATA FILE] to get a download of the quarters encounter files. The file will be in a fixed length format. The data layout will be downloaded with the file. This download will allow the facility to analyze the data with software analysis tools of the facilities choice.

Certification File Request

Certification File Request

Certification File Request

Certification File Request

Certification File Request

Certification file download - This will show RETRIEVE CERT. DATA FILE when the file is ready to be downloaded. A facility has 30 days from when the file is ready for download to download the file without any charges being occurred.

Certification File Request

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C10: Claim Count for 1st Physician
C11: Claim Count for 2nd Physician
C12: Certification Error Type List

Processing Reports

[▼]

Certification Data File

[RETRIEVE CERT. DATA FILE]

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Tiffany Overton

[UPDATE CERTIFIER NAME]

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of patients or physicians. All comments will be released with the certified data.

Comments

Certification file download - Click [RETRIEVE CERT. DATA FILE] when the when file is ready to be downloaded. A facility has 30 days from when the file is ready for download to download the file without any charges being occurred. When you click retrieve cert. data file, the file will request to save to your file as a zip file.

Certification File Request

Certification File Download
Zip File Download

The download zip file will consist of the following:

Your file containing the Certification Data (in a fixed length format – for saving/processing with your tools) is available for downloading. You must download the file to your computer within 30 days. After 30 days the file will be removed and there will be a fee charged for the regeneration of the file.

Please Note: The record structure of the files has changed beginning with 4q15 data. The record structure is located in the CSV file. Please notify anyone using this data of this change.

Certification File Download

The download zip file will consist of the following:

Your file containing the Certification Data (in a fixed length format – for saving/processing with your tools) is available for downloading. You must download the file to your computer within 30 days. After 30 days the file will be removed and there will be a fee charged for the regeneration of the file.

Please Note: The record structure of the files has changed beginning with 4q15 data. The record structure is located in the CSV file. Please notify anyone using this data of this change.

This will allow the facility to analyze the data with software analysis tools of the facilities choice.

Please be advised that once a facility requests this file, the file will be created and available for downloading for 30 days. The download file will be removed from the system after 30 days from the date of the download file creation.

There will be a fee for each additional time the file is created; therefore, download the file and save the file within 30 days of requesting its creation to avoid any fees.

Certification

Certification

The name of the certifier of record will appear as provided to THCIC. If there is no certifier name, this must be updated before a facility can certify. If this certifier is no longer with the facility, the facility must update this information with THCIC by completing a Facility Information Request. Click update certifier name to be redirected to the THCIC form.

Update Certifier Name

Home | Claims | Claim Correction | Reports | Data Mgmt | Certification | Batches | Help

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CERTIFICATION

◀ Back to Certification Set List

Reports

2020 1st Quarter Outpatient

C01: Certification Summary
C04: Top 30 Principal Diagnoses

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Update Certifier Name

If the "Certifier Name" is not accurate, please complete the information on the THCIC Health Facility Information Request Form.

Scan and email the completed form to thcichelp@dshs.texas.gov.

Changes to the Certifier Name must go through several points of review for approval. If approved, contact information will generally be updated within two business days.

IF THE PERSON IDENTIFIED IN THE "CERTIFIER NAME" FIELD IS NOT ACCURATE AND YOU CERTIFY YOUR DATA WITHOUT UPDATING THE NAME, THIS INFORMATION WILL BE MISREPRESENTED!

OK

You may call the help desk and arrange to regenerate and correct your facility's data, if needed.

ELECT NOT TO CERTIFY | CERTIFY

This window will open to update your certifier information. Click THCIC Health Facility Information Request Form to be directed to a form to fill out and return.

Changes at the time of Certification

- If a facility would like to make changes to their data at the time of certification, the facility will have to contact System13 at 1-888-308-4953.

- There may be a fee involved to make changes at the time of certification. These fees will be between the facility and System13.

Certification Options

✗ **Certified without comments**. Certifies that the data is accurate "as is" and comments are not required to be attached with the release of the data.

✗ **Certified with comments**. Certifies the data is accurate "as is" with comments attached with the release of the data.

> **DO NOT SEND COMMENTS ON PAPER, FAX OR E-MAIL. THCIC CANNOT RETYPE FACILITY COMMENTS. PLEASE TYPE FACILITY COMMENTS IN THE COMMENT ON THE CERTIFICATION PAGE.**

✗ **Elects not to certify***. Unable to complete the certification process due to circumstances outside of the facility's control or facility refuses to certify the data.

> ***Note: Electing not to certify does not prevent the data from being placed in the Public Use Data File (PUDF).**

New Certification Feature

**PLEASE NOTE: Before a facility can certify or elect not to certify, you are required to download the report C01: Certification Summary.

Certification - Elect Not to Certify

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Tiffany Overton

[UPDATE CERTIFIER NAME]

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of patients or physicians. All comments will be released with the certified data.

Comments

You may call the help desk and arrange to regenerate and correct your facility's data, if needed.

[ELECT NOT TO CERTIFY]   [CERTIFY]

A facility can elect not to certify if a facility is unable to complete the certification process due to circumstances outside of the facility's control or facility refuses to certify the data. **Please be advised electing not to certify does not prevent the data from being placed in the Public Use Data File (PUDF).** Please do not include PHI/PPI information.

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Certification - Elect Not to Certify
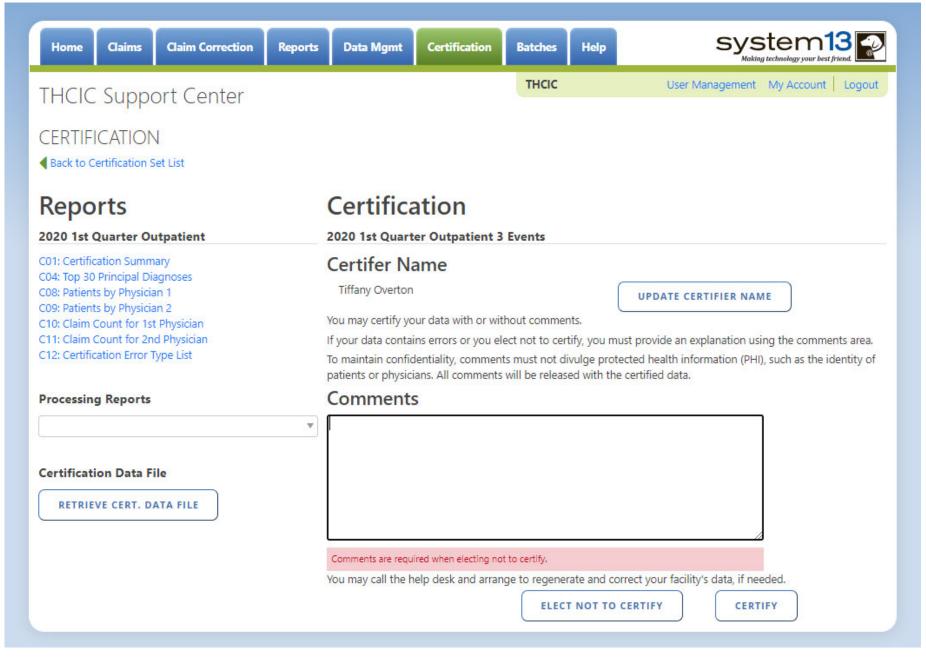
Please note: If you elect not to certify, you must provide a statement as to why you are electing not to certify this data. You may call the help desk and arrange to regenerate and correct your facility's data, if needed. Please do not include PHI/PPI information.

Certification - Elect Not to Certify

Certification - Elect Not to Certify
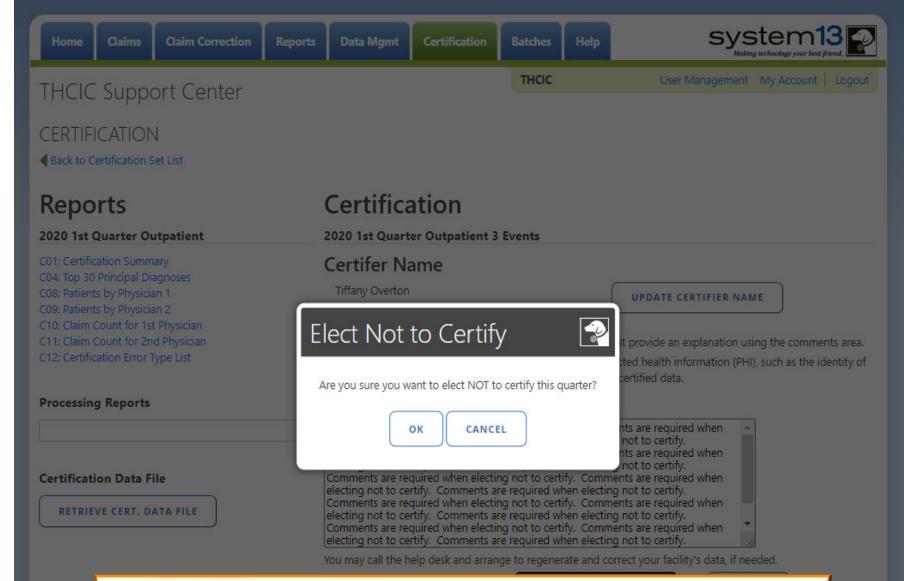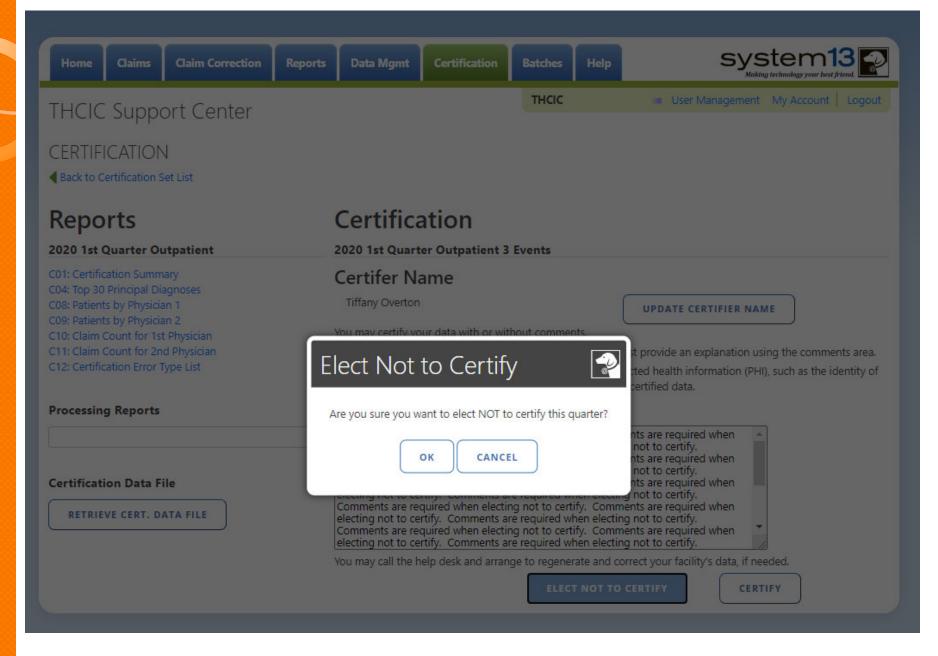
When a facility elects not to certify, a statement must be entered into the comment section stating the reason for not certifying the data. ****Elect not to certify is not a valid statement.**To maintain confidentiality, comments must not disclose the identity of patients or physicians.** Please do not include PHI/PPI information. After the comments are entered, click elect not to certify again.

Certification - Elect Not to Certify

Certification - Elect Not to Certify

Confirmation - Elect Not to Certify

This is the confirmation page that the data has been elected not to certify. A confirmation email will also go to the certifier of record.

Confirmation - Elect Not to Certify Email Confirmation

Wed 6/17/2020 9:45 AM

D   DSHS - Center for Health Statistics <noreply@system13.com>
     THCIC Outpatient 1Q2020 Data Certification for 000029 [G1]

To   Overton,Tiffany (DSHS)
     We removed extra line breaks from this message.

WARNING: This email is from outside the HHS system. Do not click on links or attachments unless you expect them from the sender and know the content is safe.

Texas Health Care Information Collection THCIC

1Q2020 Certification of Data

Your facility, THCIC Id 000029, has completed the certification of their Outpatient 1Q2020 data and has elected "not to certify".

Thank you.

The certifier of record will get this email when the data has been elected not to certify.

TEXAS Health and Human Services | Texas Department of State Health Services

Certification – Certify

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Tiffany Overton

[UPDATE CERTIFIER NAME]

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

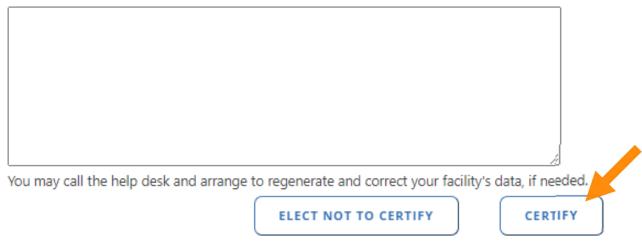To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of patients or physicians. All comments will be released with the certified data.

Comments

You may call the help desk and arrange to regenerate and correct your facility's data, if needed.

[ELECT NOT TO CERTIFY]   [CERTIFY]

Click certify. This **certifies that the data is accurate "as is."**

TEXAS Health and Human Services | Texas Department of State Health Services

Certification - Certify

Certification - Certify

Confirmation - Certify Email Confirmation

Wed 6/17/2020 9:46 AM

D

DSHS - Center for Health Statistics <noreply@system13.com>

THCIC Outpatient 1Q2020 Data Certification for 000029 [G1]

To   Overton,Tiffany (DSHS)

We removed extra line breaks from this message.

WARNING: This email is from outside the HHS system. Do not click on links or attachments unless you expect them from the sender and know the content is safe.

Texas Health Care Information Collection THCIC

1Q2020 Certification of Data

Your facility, THCIC Id 000029, has completed the certification of their Outpatient 1Q2020 data.

Thank you.

The certifier of record will get this email when the data has been certified.

TEXAS
Health and Human Services

Texas Department of State
Health Services

Certification – Certify With Comments

Certification

2020 1st Quarter Outpatient 3 Events
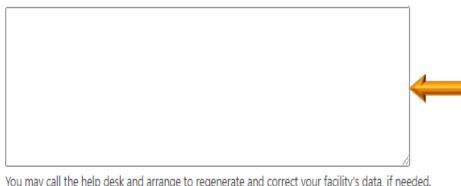
Certifer Name

Tiffany Overton

[UPDATE CERTIFIER NAME]

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of patients or physicians. All comments will be released with the certified data.

Comments

You may call the help desk and arrange to regenerate and correct your facility's data, if needed.

[ELECT NOT TO CERTIFY]   [CERTIFY]

Please put comments in the comments field, if you are certifying your data is **accurate "as is."** and releasing comments with your data. Once you have entered your comments, click certify.

Certification – Certify With Comments

Certification

2020 1st Quarter Outpatient 3 Events

Certifer Name

Tiffany Overton

UPDATE CERTIFIER NAME

You may certify your data with or without comments.

If your data contains errors or you elect not to certify, you must provide an explanation using the comments area.

To maintain confidentiality, comments must not divulge protected health information (PHI), such as the identity of patients or physicians. All comments will be released with the certified data.

Comments

You may call the help desk and arrange to regenerate and correct your facility's data, if needed.

ELECT NOT TO CERTIFY   CERTIFY

Type in comments to be released with the facility's data, in this section. The comments can be typed in a word document (or other document), cut and pasted in the comment section.
PLEASE NOTE:
To maintain confidentiality, comments must not disclose the identity of patients or physicians. Please do not include PHI/PPI information.
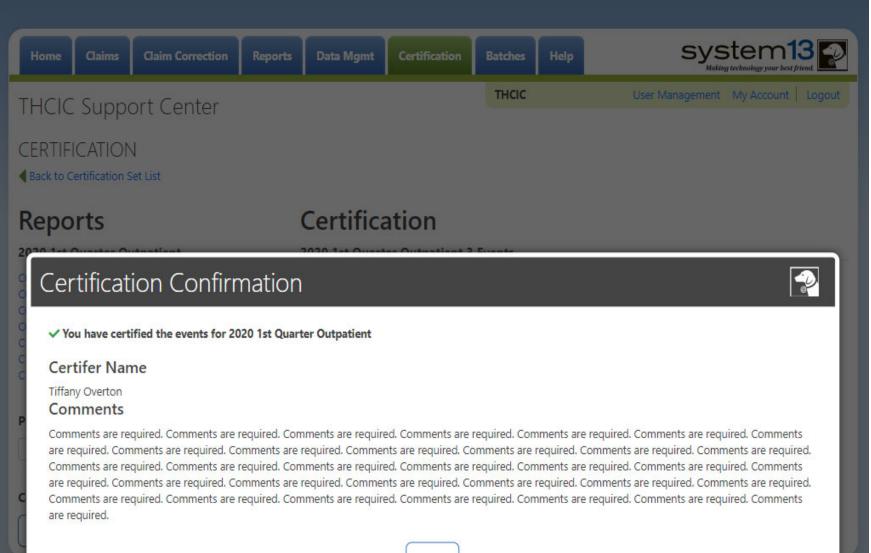
Certification – Certify With Comments

When a facility elects to certify with comments, please add your comments in the field before you click to certify this data. Comments cannot contain PHI/PII information.

Certification – Certify With Comments

Confirmation - Certify With Comments Email Confirmation

Wed 6/17/2020 9:46 AM

D   DSHS - Center for Health Statistics <noreply@system13.com>
    THCIC Outpatient 1Q2020 Data Certification for 000029 [G1]

To ✓ Overton, Tiffany (DSHS)

ℹ We removed extra line breaks from this message.

WARNING: This email is from outside the HHS system. Do not click on links or attachments unless you expect them from the sender and know the content is safe.

Texas Health Care Information Collection THCIC

1Q2020 Certification of Data

Your facility, THCIC Id 000029, has completed the certification of their Outpatient 1Q2020 data.

Thank you.

The certifier of record will get this email when the data has been certified with comments.

Certification Completed/ Status

When a facility is 'Past cut-off date for generation of Cert. Data' this message means that the facility cannot use 'Encounter on Demand', which will allow a facility to start certification before it is facilitated by System13.

When a facility clicks Certification and data has been certified, elected not to certify or failed to certify the facility will see the messages on the certification page by the quarter in question.

If a facility wants to change the status, correct or regenerate their certification files, the facility will have to contact System13.

Certification Completed/
Activity Dashboard – Grid View

Certification Completed/
Activity Dashboard – List View

Certification Tips

Suggestions on how to provide physician certification review.

- Involve physicians sooner in the data review process.
- Provide reports to physicians when data is submitted to THCIC or sooner.
- Recruit physician advocates.
- Develop reports that better fit the facility organization's personality.

Suggestions on researching mapping problems.

- If a facility is using a vendor, contact the vendor to see if problem has already been reported.
- If a facility is not using a vendor, the facility must check with their Information Systems department and have them check their programs.
- Look at submission reports for skews.

Certification

Questions/ Comments

Questions, comments or need clarification please e-mail
thcichelp@dshs.state.tx.us
The e-mail should include the facility's THCIC ID.

THCIC Contact

Address:

Texas Health Care Information Collection

Dept of State Health Services – Center for Health Statistics

1100 W 49th St, Ste M-660

Austin, TX 78756

Phone: 512- 776-7261

E-mail: **THCIChelp@dshs.texas.gov**

Web site: **https://www.dshs.texas.gov/texas-health-care-information-collection**

THCIC Contact

- Contact Tiffany Overton email at Tiffany.Overton@dshs.texas.gov if a facility has questions concerning the submission, correction, or certification of data.

- Contact Adrianna Jackson email at Adrianna.Jackson2@dshs.texas.gov if outpatient submitter test/production files reject due to a submission address or EIN/NPI number.

- For general questions or to request information about THCIC please e-mail to thcichelp@dshs.texas.gov

Contact

📬 Address:
System13, Inc
1648 State Farm Blvd.
Charlottesville, VA 22911

☎ Phone: 1-888-308-4953

📠 Fax: 434-979-1047

📧 E-mail: **THCIChelp@system13.com**

🌐 Web site: **https://thcic.system13.com**