

Department of State Health Services
Center for Health Statistics
Texas Health Care Information Collection

Outpatient Reports

Revised August 31, 2015



THCIC System

System13, Inc. / THCIC Web - Windows Internet Explorer

https://thcic.system13.com/user_session/new

File Edit View Favorites Tools Help

System13, Inc. / THCIC Web

THCIC Support Center

system13
Making technology your best friend.

Home

[Problems Logging In?](#)

Username

Password **Sign In**

For security reasons your session will be terminated after 40 minutes of inactivity

Not Registered?
Request an account

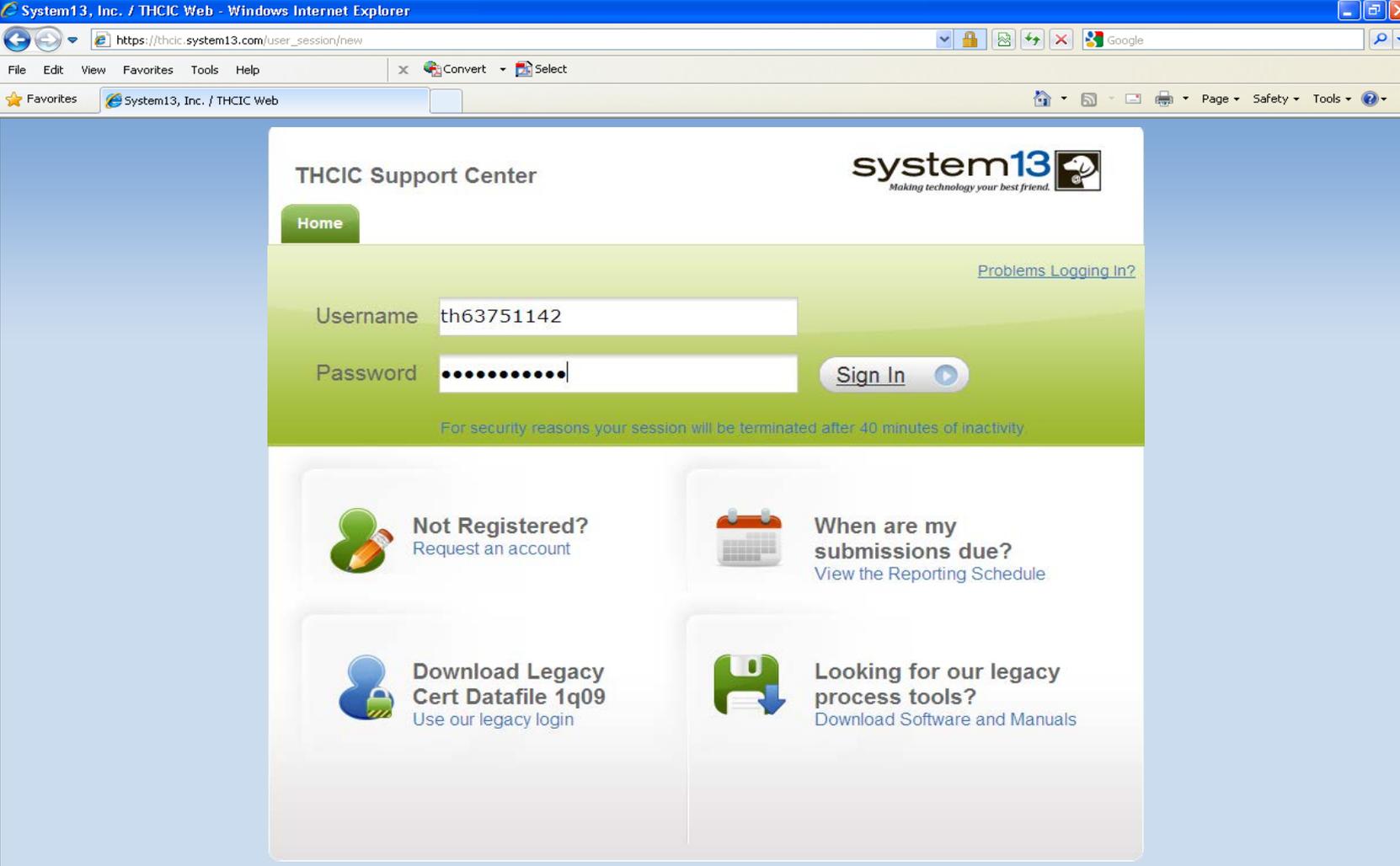
When are my submissions due?
View the Reporting Schedule

Download Legacy Cert Datafile 1q09
Use our legacy login

Looking for our legacy process tools?
Download Software and Manuals



Log In the System as a Provider



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[View the Reporting Schedule](#)

 **Download Legacy Cert Datafile 1q09**
[Use our legacy login](#)

 **Looking for our legacy process tools?**
[Download Software and Manuals](#)

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



Security Notice

System13, Inc. / THCIC Web - Windows Internet Explorer

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System13, Inc. / THCIC Web

THCIC Support Center

system13
Formerly Commonwealth Clinical Systems
and Computer Services

Home Help

Problems Logging In?

Security Notice

This is not a public use Web Site.

- This information system is operated under the direction of the Texas Health Care Information Council in accordance with the Texas Health and Safety Code, chapter 108, and Title 25 of the Texas Administrative Code, Chapter 421.
- Access requires the explicit consent of the Texas Department of State Health Services.
- All activities on this web site, including attempted access, are monitored and recorded.
- Anyone accessing this web site expressly consents to such monitoring and recording. This information will be provided to law enforcement agencies to pursue criminal prosecution if monitoring reveals evidence of criminal activity.
- This web site uses a computer security system that is designed to prevent unauthorized access. Unauthorized use of the system or data is a violation of Texas and United States laws.
- Authorized users of this system are reminded of their individual and organizational requirements to safeguard all confidential data.

I am an authorized user and I understand and accept the requirements stated in this notice.

[Accept](#)

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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.



Provider Home Page

THCIC Support Center

 MB - THCIC 000004 [User Management](#) [My Account](#) | [Logout](#)

Login successful!



Reports



WebCorrect
Claim Correction



WebCert
Certification



WebClaim
New Claim



New Claims in Progress



Batches



Reports

Home Claims **Claim Correction** **Reports** Data Mgmt Certification Batches Help **system13** 

THCIC Support Center

Login successful!

 MB - THCIC 000004 [User Management](#) [My Account](#) | [Logout](#)



Reports



WebCorrect
Claim Correction



WebCert
Certification



WebClaim
New Claim



New Claims in Progress



Batches

The user can go to Reports by the provider tab **Reports** or by the provider dashboard icon 



Reports



- ✓ Reports Available
 - ✓ Frequency of Error Report
 - ✓ Hardcopy Report
 - ✓ Summary Report
 - ✓ Data Analysis Report
 - ✓ Claim Count for First Physician
 - ✓ Claim Count for Second Physician
 - ✓ Error Type List

✓ All reports are written to a .pdf document and displayed in Adobe Acrobat Reader to be viewed and/or downloaded.

✓ To return to the report view the user should click the browse  Back button. (Only while in the report tab can you use the back button, to get out of a pdf file.)

✓ The only data that will be available in reports is data that is currently in the system. Data will not be available, after the cutoff for corrections deadline.



Reports Menu

The screenshot shows the 'Reports' menu in the system13 interface. The navigation bar includes 'Home', 'Claims', 'Claim Correction', 'Reports' (highlighted), 'Data Mgmt', 'Certification', 'Batches', and 'Help'. The user is logged in as 'THCIC Trainer 000005' with links for 'User Management', 'My Account', and 'Logout'. The main content area is titled 'THCIC Support Center' and 'Reports'. A 'Select Report:' dropdown menu is open, showing options: 'Frequency of Errors', 'Hardcopy Report', 'Summary Report', 'Data Analysis Report', 'Claim Count for First Physician', 'Claim Count for Second Physician', and 'Error Type List'. A 'Generate' button is located below the dropdown.

The only data a facility can run reports on is data that is currently in the system, this excludes certification data. Data for previous quarters will remain in the system until the last day for cutoff for corrections. Other options will become available once the type of report is selected.



Type of Reports

Home Claims Claim Correction **Reports** Data Mgmt Certification Batches Help system13

THCIC Support Center THCIC Trainer 000005 [User Management](#) [My Account](#) | [Logout](#)

Reports

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report
- Data Analysis Report
- Claim Count for First Physician
- Claim Count for Second Physician
- Error Type List

Frequency of Errors - Allows the user to verify the number of claims System13 received and verify that the dates are the same as the user submitted for the quarter. Frequency of Error Report provides the user information on the number of claims processed, number of claims in error, number of fields in error, error summary and accuracy rate.

Hardcopy Report - shows every error and warning on each claim.

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.

Data Analysis Report - shows counts per month, types of bills, and other data items, and makes suggestions for continuing, such as removing duplicates, correcting invalid data, etc.

Claim Count for First Physician - 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 - 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 second physician name, sorted by name. It will also include the physician ID, but will not include patient information.

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



Reports Functionality

- ✕ The **Generate** button will remain disabled until the user selects the report type, filter by and type of patients.

The screenshot shows the 'system13' web application interface. The navigation bar includes 'Home', 'Claims', 'Claim Correction', 'Reports', 'Data Mgmt', 'Certification', 'Batches', and 'Help'. The user is logged in as 'THCIC Test Hospital/Facility 000002'. The 'Reports' section is active, showing a 'Select Report:' dropdown menu with options: 'Frequency of Errors', 'Hardcopy Report', 'Summary Report', 'Data Analysis Report', 'Claim Count for First Physician', 'Claim Count for Second Physician', and 'Error Type List'. Below this, the 'Filter By:' section has a dropdown menu with options: 'Quarter (by discharge date from and thru)', 'Timeframe (by processing date)', and 'Batch Number'. The 'Patients:' section has radio buttons for 'Inpatient', 'Outpatient - Institutional', and 'Outpatient - Professional'. The 'Generate' button is disabled. A message at the bottom left corner states: 'No claims match selection criteria.'

- ✕ If no data matches your request, a message will be indicated on the top left corner.



THCIC Support Center

No claims match selection criteria.

Filter Report By Date

- ✕ To create a report, filter by quarter, time frame or batch.

Filter By:

Quarter (by discharge date from and thru)
Timeframe (by processing date)
Batch Number

From: 
Thru: 

Filter By:

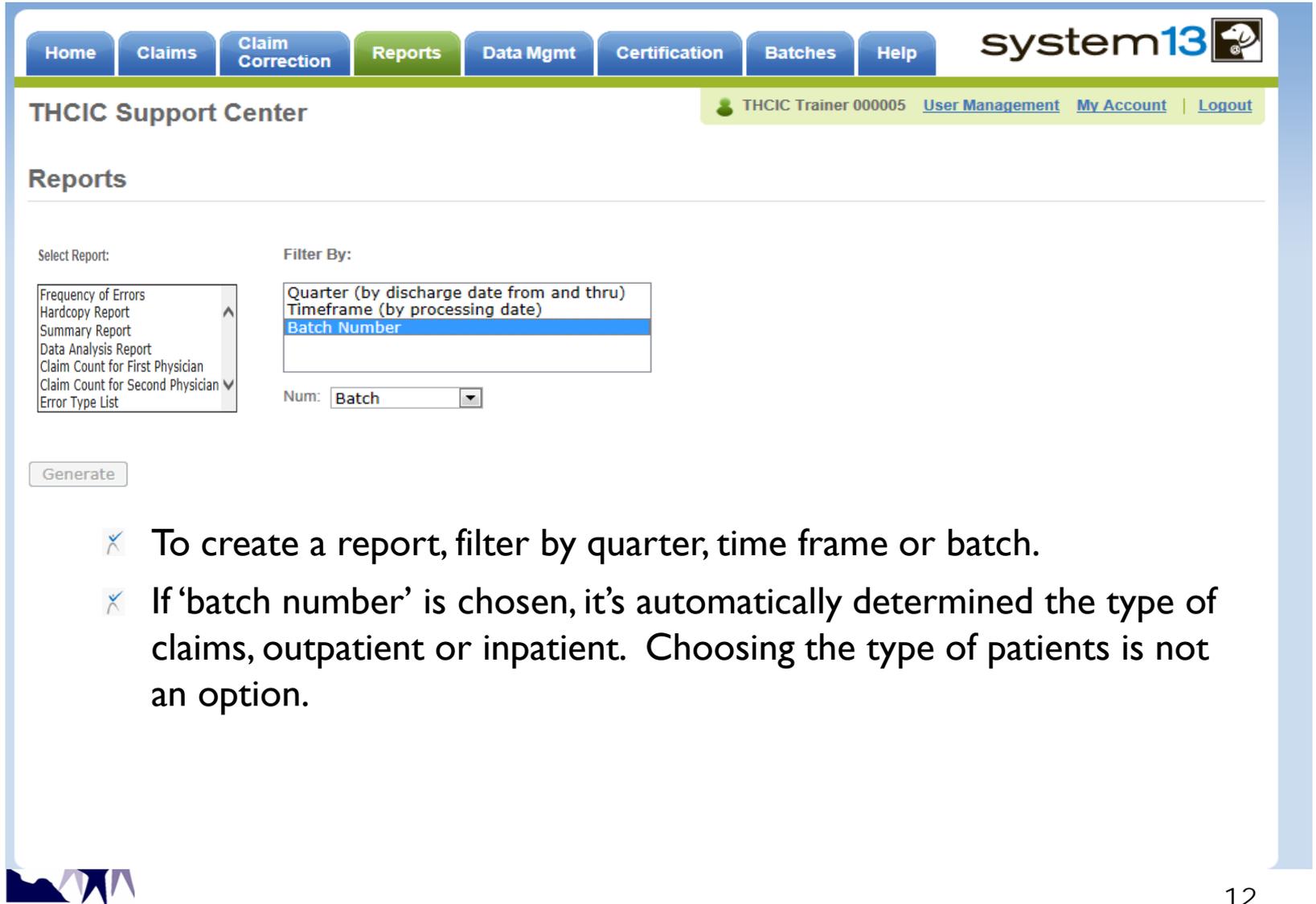
Quarter (by discharge date from and thru)
Timeframe (by processing date)
Batch Number

Date: 

- ✕ The  icon will open up a calendar to chose dates from.
 - ✕ << will move the calendar back a year
 - ✕ < will move the calendar back a month
 - ✕ > will move the calendar up a month
 - ✕ >> will move the calendar up a year



Filter Report By Batch

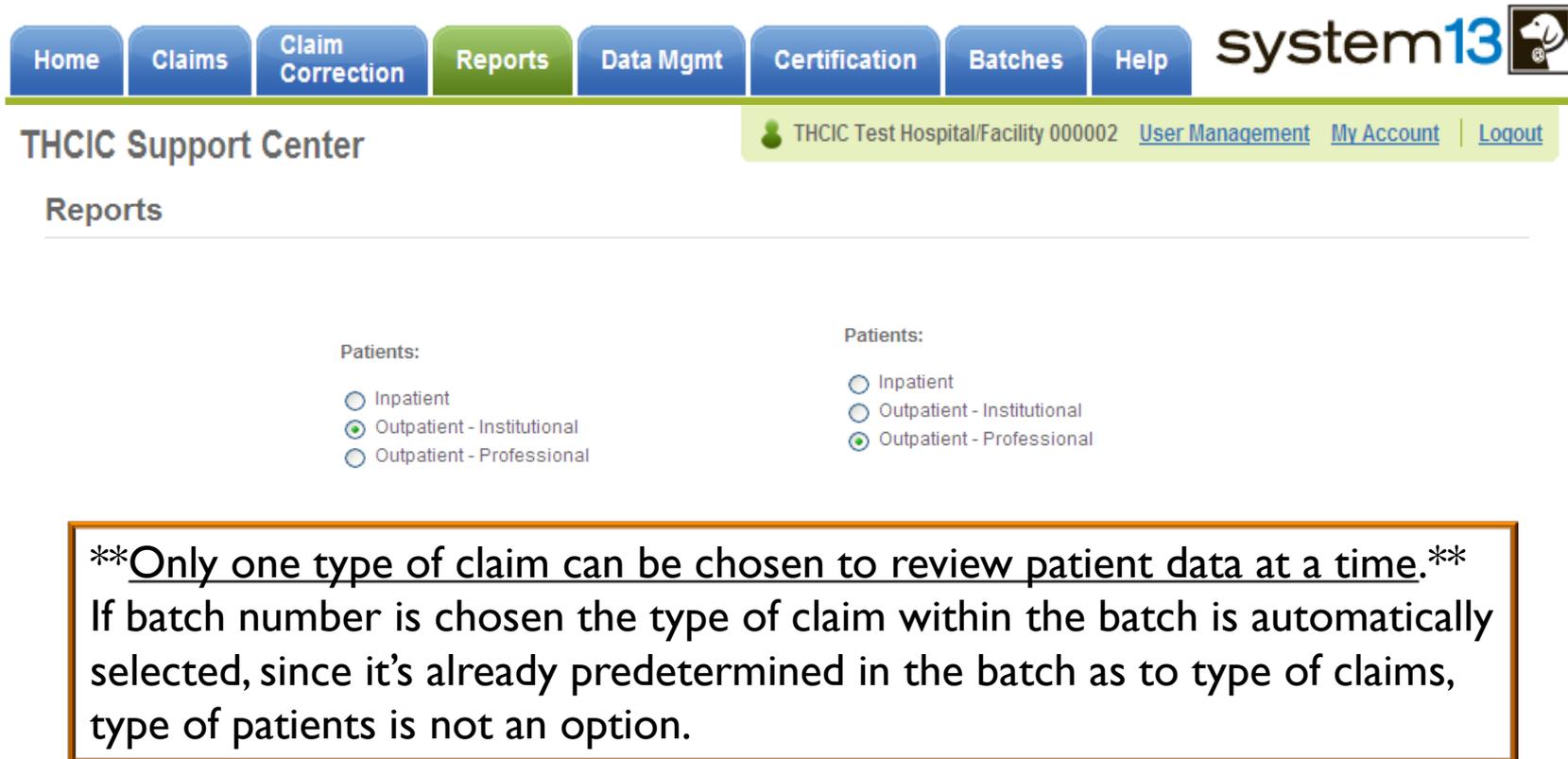


The screenshot shows the 'system13' web application interface. The top navigation bar includes links for Home, Claims, Claim Correction, Reports, Data Mgmt, Certification, Batches, and Help. The user is logged in as 'THCIC Trainer 000005' and has access to User Management, My Account, and Logout. The main content area is titled 'THCIC Support Center' and 'Reports'. Under 'Reports', there is a 'Select Report:' dropdown menu with options: Frequency of Errors, Hardcopy Report, Summary Report, Data Analysis Report, Claim Count for First Physician, Claim Count for Second Physician, and Error Type List. To the right, the 'Filter By:' dropdown menu is open, showing options: Quarter (by discharge date from and thru), Timeframe (by processing date), and Batch Number (which is selected). Below the 'Filter By:' menu is a 'Num:' field with a dropdown menu set to 'Batch'. A 'Generate' button is located below the 'Select Report:' menu.

- ✘ To create a report, filter by quarter, time frame or batch.
- ✘ If 'batch number' is chosen, it's automatically determined the type of claims, outpatient or inpatient. Choosing the type of patients is not an option.

Filter Report By Type of Claims

The user is going to have to determine what claims the user wants to view.



The screenshot shows the 'system13' interface. The navigation bar includes 'Home', 'Claims', 'Claim Correction', 'Reports' (highlighted), 'Data Mgmt', 'Certification', 'Batches', and 'Help'. The user is logged in as 'THCIC Test Hospital/Facility 000002' with links for 'User Management', 'My Account', and 'Logout'. The 'Reports' section is active, showing two 'Patients:' filter sections. The left section has radio buttons for 'Inpatient', 'Outpatient - Institutional' (selected), and 'Outpatient - Professional'. The right section has radio buttons for 'Inpatient', 'Outpatient - Institutional', and 'Outpatient - Professional' (selected).

Patients:

- Inpatient
- Outpatient - Institutional
- Outpatient - Professional

Patients:

- Inpatient
- Outpatient - Institutional
- Outpatient - Professional

****Only one type of claim can be chosen to review patient data at a time.****
If batch number is chosen the type of claim within the batch is automatically selected, since it's already predetermined in the batch as to type of claims, type of patients is not an option.



Frequency of Error Report

The screenshot shows the 'Reports' section of the system13 web application. The navigation bar includes 'Home', 'Claims', 'Claim Correction', 'Reports' (highlighted), 'Data Mgmt', 'Certification', 'Batches', and 'Help'. The user is logged in as 'THCIC Trainer 000005' and has access to 'User Management', 'My Account', and 'Logout'.

THCIC Support Center

Reports

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report
- Data Analysis Report
- Claim Count for First Physician

Filter By:

- Quarter (by discharge date from and thru)
- Timeframe (by processing date)
- Batch Number

From: 06/01/2014

Thru: [Calendar]

Patients:

- Inpatient
- Outpatient - Institutional
- Outpatient - Professional

Generate

AUGUST 2015

mon	tue	wed	thu	fri	sat	sun
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

After the user select the report, filter the date range and choose the type of patients. The user must, click **Generate** .All the reports open in PDF format. The user can select **Back** from the web browser options to go back to the reports menu.



Frequency of Error Report Page 1

Field	Value
Claims Period	01/01/2010 thru 12/31/2012
Service Period	10/01/2010 thru 12/30/2010
Claims Received	121
Claims Rejected	0
Claims Processed	121
Claims In Error w/o Race + Ethnicity Errors	20
Claims In Error	20
Fields In Error	46
Accuracy Rate w/o Race + Ethnicity Errors	83.47%
Accuracy Rate	83.47%

Claiming By Month	2011	2012	2013
Jan	0	0	0
Feb	0	0	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	121	0	0

Claims By Bill Type	Count
xx0	0
xx1	121
xx2	0
xx3	0
xx4	0
xx5	0
xx6	0
xx7	0
xx8	0
xx?	0

Frequency of Errors Report (Outpatient-Institutional)
Report Date: Date Report Ran
THCIC ID: 000005
THCIC Trainer

Batch Information

Field	Value
Claims Period	01/01/2010 thru 12/31/2012
Service Period	10/01/2010 thru 12/30/2010
Claims Received	121
Claims Rejected	0
Claims Processed	121
Claims In Error w/o Race + Ethnicity Errors	20
Claims In Error	20
Fields In Error	46
Accuracy Rate w/o Race + Ethnicity Errors	83.47%
Accuracy Rate	83.47%

Claims By Month

	2010	2011	2012
Jan	0	0	0
Feb	0	0	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	121	0	0

Claims By Bill Type

Bill Type	Count
xx0	0
xx1	121
xx2	0
xx3	0
xx4	0
xx5	0
xx6	0
xx7	0
xx8	0
xx?	0



Frequency of Error Report

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%

(Continued on next page)

Errors By Field (continued)				
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%

Client Accuracy Rate 93.8%

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

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%

This report will extend to pages 2 & 3. This report lists all errors by field.



Frequency of Error Report

Frequency of Errors Report (Outpatient - Institutional)
Report Date: 20-Jan-2011
THCIC ID: 000005 THCIC Trainer

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 Code	Error Message
E-696	Missing Procedure Description
E-697	Invalid Code not consistent with the Principal Diagnosis
E-698	Missing Patient Sex
E-699	Missing Patient ZIP
E-700	Missing Patient Birth Date
E-701	Missing Patient Gender
E-702	Missing Patient Race
E-703	Missing Patient Tag Code
E-704	Missing Patient Frequency Date Code
E-705	Missing Patient Issue Priority Number
E-706	Invalid Operating Practitioner Identifier
E-707	Invalid Operating Practitioner Name Match
E-708	Missing Claim Filing Indicator Code for Subscriber
E-709	Invalid Statement Date
E-710	Invalid Checkmate Date
E-711	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-712	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-713	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-714	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-715	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-716	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-717	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-718	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-719	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-720	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-721	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-722	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-723	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-724	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-725	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-726	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-727	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-728	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-729	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-730	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-731	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-732	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-733	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-734	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-735	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-736	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-737	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-738	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-739	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-740	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-741	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-742	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-743	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-744	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-745	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-746	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-747	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-748	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-749	Procedure Code is more than 30 days before the Statement Date or after the Statement Date
E-750	Procedure Code is more than 30 days before the Statement Date or after the Statement Date

Frequency of Errors Report (Outpatient-Institutional)
Report Date: Date Report Ran
THCIC ID: 0000005 THCIC Trainer

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 (*May extend to page 5 depends on number of errors on the report.)



Hardcopy Report

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



THCIC Support Center

THCIC Trainer 000005 [User Management](#) [My Account](#) | [Logout](#)

Reports

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report
- Data Analysis Report
- Claim Count for First Physician

Filter By:

- Quarter (by discharge date from and thru)
- Timeframe (by processing date)
- Batch Number

Date: 06/07/2014

Patients:

- Inpatient
- Outpatient - Institutional
- Outpatient - Professional

Generate



Hardcopy Report Error List

Hardcopy Claims Error Summary Report (Claim Report Ran)
 Report Date: Date Report Ran
 THCIC ID: 0000005 THCIC Trainer

Error List

Med. Rec. #	PCN	Discharge	Rec. #	Field	Value of field	Err #	EW
THM88891334786	THBG166232501	20081003		Practitioner Id	1538136486	696	Warning
THM2392706369	THWB12625907	20081005		Birth Date	380330	659	Error
THM199836292751	THEC1014741	20081006		Practitioner Id		707	Error
			0	Procedure	684	622	Error
				Source Code		697	Error
				State		626	Error
				Sean		665	Error
				Race		634	Error
THM59933819	THY1124383628	20081008		Diagnosis Code		608	Error
THM8277816132015	THHB1961466	20081008		Type Of Admission		645	Error
THM364631883476	THGC1711757	20081009		Sex	R	661	Error
THM7587346610	THUC1418886004	20081011		Unit Measurement Code		685	Error
THM505048847	THZB13313454	20081013		Practitioner Id	1265437198	696	Warning
			0	Procedure		601	Error
				Name		701	Error
				Sex		633	Error
				Race		634	Error
				Ethnicity		635	Error
THM659813005	THCF16917399	20081013		Practitioner Id	1538136486	696	Warning
THM1941744933	THJB1535043	20081015		Patient Status		647	Error
THM3035857081031	THA4	20081016	0	Diagnosis Code	00	615	Error
				Name		701	Error
				Revenue Code		670	Error
				Charges Line Item	96000	679	Error
				Birth Date		630	Error
THM8638718718997	THU1660501290	20081017		Patient Status	10	666	Error
THM25638081662	THP1297987492	20081017		Practitioner Id		707	Error
	THZ182864815	20081018		Medical Record Number		638	Error
				Name		701	Error
THM779772382	THDD1445608	20081021		Practitioner Id	1821160938	696	Warning

The user may get multiple pages of the error list. It will depend on the number of errors. This listing will show all errors for the timeframe specified.



Hardcopy Report Summary

Hardcopy Claims Error Summary Report (Claim Report Ran)

Report Date: Date Report Ran

THCIC ID: 0000005

THCIC Trainer

Summary

Field	Value
Total Errors	76
Total Warnings	7
Claims Processed	291



Summary Report

THCIC Support Center

THCIC Trainer 000005 [User Management](#) [My Account](#) | [Logout](#)

Reports

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report**
- Data Analysis Report
- Claim Count for First Physician

Generate

Filter By:

- Quarter (by discharge date from and thru)
- Timeframe (by processing date)
- Batch Number**

- Num: **Batch**
- Batch
 - 201101180010
 - 201101180011
 - 201101180012
 - 201101180013
 - 201101180014
 - 201101180015
 - 201101180017
 - 201101180016
 - 201101180018
 - 201302080003
 - 201302080002
 - 201302080001
 - 201302080005
 - 201302080006
 - 201302080004

Select a batch number

When the user filters by batch number, a list of batches submitted in the system for the current timeframe will be available. The user can choose a batch number from the listing. Selecting the type of patients is not an option, since it is already predetermined when the batch is selected.

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report**
- Data Analysis Report
- Claim Count for First Physician

Generate

Filter By:

- Quarter (by discharge date from and thru)
- Timeframe (by processing date)
- Batch Number**

Num: **201101180015**



Summary Report - Outpatient Page I

THCIC Summary Report (Outpatient - Institutional) 05/01/2010 thru 05/16/2012
 Report Date: 23-Jun-2014
 THCIC ID: 000005 THCIC Trainer

Claim Timeline

	2013	2014	2015
Jan	0	0	0
Feb	0	0	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

Charges Summary

Type	Amount
Total Charges	\$371,975.57
Average Charge	\$3,074.18
Minimum Charge	\$204.46
Maximum Charge	\$22,402.41
Standard Deviation	\$3,923.16

Lists total charges summary for the encounters.

Provides a count of the encounters by claim timeline.

Charges Breakout

Category	Count
> \$250,000	0
\$1,000 - \$250,000	66
< \$1,000	55

Breaks down the charges by category.

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

Claim Filing Indicator Code

Code	Primary	Percent	Second	Percent
Central Certification - 10	0	0.00%	0	0.00%
Other NonFederal Programs - 11	0	0.00%	0	0.00%
Preferred Provider Organization (PPO) - 12	7	5.79%	5	4.13%
Point of Service (POS) - 13	2	1.65%	0	0.00%
Exclusive Provider Organization (EPO) - 14	1	0.83%	0	0.00%
Indemnity Insurance - 15	0	0.00%	0	0.00%
Health Maintenance Organization (HMO) Medicare Ris - 16	0	0.00%	0	0.00%
Dental Maintenance Organization - 17	0	0.00%	0	0.00%
Selfpay - 9	0	0.00%	0	0.00%
Automobile Medical - AM	0	0.00%	0	0.00%
Blue Cross/Blue Shield - BL	8	6.61%	8	6.61%
CHAMPUS - CH	0	0.00%	4	3.31%
Commercial Insurance Co. - CI	7	5.79%	11	9.09%
Disability - DS	0	0.00%	0	0.00%
Federal Employees Program - FI	0	0.00%	0	0.00%
Health Maintenance Organization - HM	0	0.00%	0	0.00%
Liability - LI	0	0.00%	0	0.00%
Liability Medical - LM	0	0.00%	0	0.00%
Medicare Part A - MA	64	52.89%	0	0.00%
Medicare Part B - MB	0	0.00%	0	0.00%
Medicaid - MC	19	15.70%	33	27.27%
Other Federal Program - OF	0	0.00%	0	0.00%
Title V - TV	0	0.00%	0	0.00%
Veteran Administration Plan - VA	0	0.00%	0	0.00%
Workers Compensation Health Claim - WC	0	0.00%	0	0.00%
Mutually Defined - ZZ	0	0.00%	0	0.00%
Mutually Defined, Or SelfPay, Or Unknown, Or Charity - ZZ	0	0.00%	0	0.00%
Missing/Invalid	13	10.74%	60	49.59%



Summary Report - Outpatient Page 2

THCIC Summary Report (Outpatient - Institutional) 05/01/2010 thru 05/16/2012
 Report Date: 23-Jun-2014
 THCIC ID: 000005 THCIC Trainer

Patient Location

Location	Count	Percent
In state	117	96.69%
Out of state	0	0.00%
Out of country	0	0.00%
Missing/invalid	4	3.31%

Provides counts of patients by location.

Patient Race

Race	Count	Percent
American Indian/Eskimo/Aleut - 1	1	0.83%
Asian, Native Hawaiian or Pacific Islander - 2	1	0.83%
Black or African American - 3	1	0.83%
White - 4	114	94.21%
Other Race - 5	2	1.65%
Missing/invalid	2	1.65%

Provides counts and percentages of patients by gender.

Patient Age Breakdown

Age	Count	Percent
Less than 1 year	0	0.00%
1 - 17	11	9.09%
18 - 44	17	14.05%
45 - 64	31	25.62%
65 - 74	19	15.70%
> 74	41	33.88%
Missing/invalid	2	1.65%

Provides counts and percentages of patients by age.

Patient Gender

Gender	Count	Percent
Female - F	93	76.86%
Male - M	26	21.49%
Unknown - U	0	0.00%
Missing/invalid	2	1.65%

Provides counts and percentages of patients by race code.

Diagnosis & Procedure Codes Summary

Category	Diagnosis	Procedure
Avg. code count per encounter	2.24	0.00
Principal code only	73	0
No principal code	0	0

Provides counts and percentages of patients by ethnicity.

Patient Ethnicity

Ethnicity	Count	Percent
Hispanic origin - 1	86	71.07%
Not of Hispanic origin - 2	34	28.10%
Missing/invalid	1	0.83%

Provides counts and percentages for both diagnoses and procedure codes.



Data Analysis Report

Reports

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report
- Data Analysis Report**
- Claim Count for First Physician

Quarter:

- Please select one
- Please select one
- 1q13
- 4q12
- 3q12
- 2q12

Patients:

- Inpatient
- Outpatient - Institutional
- Outpatient - Professional

Generate

Reports

Select Report:

- Frequency of Errors
- Hardcopy Report
- Summary Report
- Data Analysis Report**
- Claim Count for First Physician

Quarter:

- 4q12

Patients:

- Inpatient
- Outpatient - Institutional
- Outpatient - Professional

Generate



Data Analysis Report

4Q2012 Data Analysis Report (Outpatient)

Report Date: 18-Apr-2013

THCIC ID: 000004 MB - THCIC Acceptance Outpatient Pro

Quarter Analysis

Month	Total	xx0	xx1	xx2	xx3	xx4	xx5	xx6	xx7	xx8	???
Jul	0	0	0	0	0	0	0	0	0	0	0
Aug	0	0	0	0	0	0	0	0	0	0	0
Sep	0	0	0	0	0	0	0	0	0	0	0
Oct	1	0	1	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

Quarter Comparison

Qtr	Total
4q12	1
3q12	0
2q12	0

Messages

*	ONE OR MORE OF YOUR MONTHS IS MISSING DATA
*	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 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.



Claim Count for First Physician

Home Claims Claim Correction Reports Data Mgmt Certification Batches Help system13 

THCIC Support Center MB - THCIC Acceptance Outpatient Pro 000004 [My Account](#) | [Logout](#)

Reports

Select Report: Filter By:

Frequency of Errors	^ v	Quarter (by discharge date from and thru)
Hardcopy Report		Timeframe (by processing date)
Summary Report		Batch Number
Data Analysis Report		
Claim Count for First Physician		

Num:



Claim Count for First Physician

THCIC Claim Count for 1st Phys Report (Outpatient - Institutional) /03/2015 thru 09/28/2015

Report Date: 27-Aug-2015

THCIC ID: 000004 MB - THCIC Acceptance Outpatient Pro

Claim Count for First Physician

Name	License Number	Count
Fake, Doctor 1	1111111111	18
Fake, Doctor 2	1111111112	19
Fake, Doctor 3	1111111113	24
Fake, Doctor 4	1111111114	24
Fake, Doctor 5	1111111115	33
Fake, Doctor 6	1111111116	32
Total Claim Count		150



Claim Count for Second Physician

Home Claims Claim Correction Reports Data Mgmt Certification Batches Help system13 

THCIC Support Center MB - THCIC Acceptance Outpatient Pro 000004 [My Account](#) | [Logout](#)

Reports

Select Report: Filter By:

Hardcopy Report	Quarter (by discharge date from and thru)
Summary Report	Timeframe (by processing date)
Data Analysis Report	Batch Number
Claim Count for First Physician	
Claim Count for Second Physician	

Num:



Claim Count for Second Physician

THCIC Claim Count for 2nd Phys Report (Outpatient - Institutional) 07/02/2015 thru 09/28/2015

Report Date: 27-Aug-2015

THCIC ID: 000004 MB - THCIC Acceptance Outpatient Pro

Claim Count for First Physician

Name	License Number	Count
Fake, Doctor 1	1111111111	18
Fake, Doctor 2	1111111112	19
Fake, Doctor 3	1111111113	24
Fake, Doctor 4	1111111114	24
Fake, Doctor 5	1111111115	33
Fake, Doctor 6	1111111116	32
Total Claim Count		150



Error Type Code

Home Claims Claim Correction **Reports** Data Mgmt Certification Batches Help **system13** 

THCIC Support Center MB - THCIC Acceptance Outpatient Pro 000004 [My Account](#) | [Logout](#)

Reports

Select Report: Filter By: Patients:

- Summary Report
- Data Analysis Report
- Claim Count for First Physician
- Claim Count for Second Physician
- Error Type List**

- Quarter (by discharge date from and thru)
- Timeframe (by processing date)
- Batch Number

From: 

Thru: 

Inpatient

Outpatient - Institutional

Outpatient - Professional



Error Type Code

THCIC Error Type List Report (Outpatient - Institutional)

Report Date: 27-Aug-2015

THCIC ID: 000004 MB - THCIC Acceptance Outpatient Pro

Error Summary

Count	Error Code	Error Message
8	E-610	Duplicate E-Codes
2	E-637	Invalid Patient SSN



Outpatient Reports

Questions/ Comments



Questions, comments or need clarification please e-mail

 thcichelp@dshs.texas.gov

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



Fax: 512- 776-7740



E-mail: THCIChelp@dshs.texas.gov



Web site: <http://www.dshs.texas.gov/THCIC>



THCIC Contact

- ✓ Contact Tiffany Overton at  512-776-2352 or  Tiffany.Overton@dshs.texas.gov if a facility has questions concerning the submission, correction, or certification of data.
- ✓ Contact Dee Roes at  512-776-3374 or  Dee.Roes@dshs.texas.gov if 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.



system13
Formerly Commonwealth Clinical Systems
and Computer Services



Contact



Address:

System 13, 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>

