TEXAS Department of State Health Services
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Texas Health Care Information Collection - THCIC
Health Facilities Numbered Letter, Volume 18 Number 1
March 31, 2015

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## Claim Errors (Hospital/ASC)

Claims reported to Texas Health Care Information Collection (THCIC) are required to be 100% accurate. THCIC has recently discovered an increase in claim errors that are not being corrected by the provider. This becomes a compliance issue for the provider when claim errors are not corrected by the scheduled timeline.

When a hospital or ambulatory surgery center (provider) reports its data to System13, Inc. (the THCIC data warehouse), it provides **detailed** information back to the provider regarding **errors** within each claim. All claim **errors** should and must be corrected by the provider by the scheduled timeline.

The system also permits providers to generate and print information regarding data errors after corrections have been made through a report called "Frequency of Error Report" (FER). The FER provides information on the claim accuracy rate.

Chapter 108, Health and Safety Code, requires THCIC to establish procedures for "accurate and consistent" data and specifically states §108.009(k) data will also include patient **Race** and **Ethnicity**. THCIC may begin enforcement of claim accuracy in the very near future. Section 108.007 authorizes the DSHS to inspect documents and records of the facilities data sources that are used to compile the data and to compel the facilities to submit accurate data.

System13, Inc. audits each claim when it is received to ensure that all required information has been reported in all required data fields. Required data fields are listed in the rules 25 TAC §§421.9 and 421.67 and the Inpatient Technical Specifications Manual and the Outpatient Technical Specifications Manual posted on the THCIC website (www.dshs.state.tx.us/thcic). Failure to report the required information in a data field results in the claim being marked as an ERROR.

Common errors are:

1. a required REVENUE code or a required HCPCS code from the list of the THCIC required codes
2. missing PROCEDURE code
3. missing patient RACE
4. missing patient ETHNICITY

5. missing or incorrect code for PRESENT ON ADMISSION (POA)
6. missing PRINCIPAL DIAGNOSIS
7. missing REVENUE Code when Service Line Charges exists

A list of all claim audits are found in the 5010 Inpatient and Outpatient Appendices document posted at http://www.dshs.state.tx.us/thcic/hospitals/5010InpatientandOutpatientAppendicesVer3.pdf beginning on page 26.

## Rural Provider Reporting, Loss of Exemption (Hospital/ASC)

Rural hospitals and rural ambulatory surgery centers (ASCs) that were approved for exemption by THCIC for the 2014 data reporting periods are required to begin reporting the THCIC data starting with the 1st Quarter of 2015 (1q2015) services, which began on January 1, 2015.

**Hospitals** are required to report all Inpatient Discharge data, select Outpatient data, and all Emergency Department data. Selected outpatient data require the reporting of invasive surgical and radiological/imaging procedures only (*see required revenue codes or procedure codes associated with required service and procedure codes*).

**ASCs** will be required to report invasive surgical and radiological/imaging *required revenue codes (if using the 837 Institutional format)* or *procedure codes associated with required service and procedure codes (if using 837 Professional format)* for the Outpatient data.

The THCIC recommends attending our training sessions to learn more about the data reporting requirements and processes. Information on training is located at: http://www.dshs.state.tx.us/thcic/Training.shtm.

The 1q2015 data, January 1 – March 31 2015 services, must be reported to THCIC no later than June 1, 2015 for state compliance. **Early reporting is encouraged**.

## Emergency Department Data Collection (Hospital)

All hospitals are required to report Emergency Department (ED) events beginning with January 1, 2015 services.

All ED data with service dates between January 1, 2015 and March 31, 2015 are required to be reported to System13 no later than June 1, 2015. **This includes all billable, charity, and self-pay ED services.**

The ED data shall follow the same reporting guidelines and specifications as the Outpatient data reports with the exception of two additional data variables: 1) Point of Origin (Source of Admission), and 2) Patient Status. ED data may be reported with the hospital's surgical/radiological Outpatient data.

The ED data collected will consist of procedures covered by specific Revenue Codes, which include:



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(1) 0450 General Emergency Room;

(2) 0451 Emergency Room Emergency Medical Screening and Medical Treatment EMTALA;

(3) 0452 Emergency Room Services beyond EMTALA;

(4) 0456 Urgent Emergency Room-- Care;

(5) 0459 Other Emergency Room

The Technical Specification documentation for reporting Emergency Department data are included in the THCIC Outpatient 5010 Technical Specifications – Version 10 manual at http://www.dshs.state.tx.us/thcic/OutpatientFacilities/Tech_Req_Spec_5010_Ver_10-1-_Outpatient_THCIC837-Dec-1-2014.pdf

## Reviews of the 2013 Quality Indicator Report and 2012 Potentially Preventable Complications Report (Hospital)

Annually, THCIC releases a quality report on Texas hospitals. By statute, THCIC is required to provide a review and comment period for hospitals covered in the report prior to making it available to the public. The hospital review and comment period will begin on April 1, 2015 for the 2013 Quality Report (QI) and 2012 Potentially Preventable Complications Report (PPC).

On March 25, 2015 THCIC emailed the assigned Provider Primary Contact of each hospital the information on accessing a secured site for reviewing the 2013 QI and 2012 PPC reports.

Only those hospitals that are in the 2013 QI or 2012 PPC report were emailed the notification.

The review and comment period for the QI and PPC reports ends on June 1, 2015.

**The QI report includes**:
1) *Indicators of Inpatient Care in Texas Hospitals, 2013 (IQI)*
2) *Quality of Children's Care in Texas Hospitals, 2013 (PDI)*
3) *Indicators of Patient Safety in Texas Hospitals, 2013 (PSI)*

**The PPC report includes**:
1) *Potentially Preventable Complications, 2012 (PPC)*

- This is the first annual release of the Potentially Preventable Complications Report (PPC) by THCIC and is for data year 2012.

THCIC expects to release the QI and PPC reports to the public in June 2015.

The following reports are anticipated to be sent out for review in the near future:
- 2013 PPC Report
- 2012 and 2013 Potentially Preventable Readmission Reports (PPR)

## Provider Contact Information (Hospital/ASC)

All hospitals and ASCs are required to provide THCIC with a liaison at their facility and must keep the liaison information up-to-date at all times.

The main THCIC liaison is referred to as the THCIC Primary Contact or THCIC Data Administrator and services as the Point of Contact (POC) between THCIC (and System13) and the facility.

When an assigned THCIC Primary Contact no longer works for the facility, the facility is responsible for reassigning a POC and notifying THCIC of the change. By keeping the Primary Contact information up-to-date, this ensures THCIC communications and System13 notifications are received by the facility in a timely manner.

In addition to the THCIC Primary Contact, the Alternate Contact and Certifier of Record information must also be kept up-to-date.

A list of current facility contacts may be viewed at:
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If the THCIC provider contact information needs to be updated, please complete, sign, and return the THCIC contact form posted at:
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## Legislative Corner (Hospital/ASC)

The 84th Texas Legislative Session is shaping up to be one of significant change. Bill filing deadline was Friday March 13 at 6:00pm.

THCIC is currently tracking several bills that would potentially have an impact on the program, most of which are currently being heard in committee. DSHS staff is working diligently with members of the house and senate to help make informed decisions on all of the bills affecting the various programs.

Monday, June 1, 2015, is the last day of the 84th Regular session, Sine Die.

Sunday, June 21, 2015 is the last day the Governor can sign or veto bills passed during the regular session.

Legislative Bills are available at http://www.capitol.state.tx.us/

## Upcoming Due Dates (Hospital/ASC)

**May 1, 2015**
4q2014 data correction period ends

**June 1, 2015**
3q2014 data certification due
4q2014 begin certification data review
1q2015 reporting of data due

**August 3, 2015**
1q2015 data correction period ends

**September 1, 2015**
4q2014 data certification due
1q2015 begin certification data review
2q2015 reporting of data due

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

## Training Webinars (Hospital/ASC)

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

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

To attend the Webinar training(s), please send inquiries to: thcichelp@dshs.state.tx.us.

For help or general questions on Submission, Correction, and Certification please contact:
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## How to Reach Us

**System13 (in Virginia)**
Web site – https://thcic.system13.com

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Email: thcichelp@system13.com

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Tiffany Overton, Provider Training
Dee Roes, Provider Compliance

## Past Newsletters

**http://www.dshs.state.tx.us/thcic/Inpatient-and-Outpatient-Numbered-Letters/**

## Links to Forms and Documents

Provider Contact Update Form -
**http://www.dshs.state.tx.us/thcic/hospitals/FacilityInformationRequest.pdf**

No Quarterly Data to Report Form -
**http://www.dshs.state.tx.us/thcic/hospitals/NoDataToReport(2).pdf**

Current Provider Contact List –
**http://www.dshs.state.tx.us/thcic/hospitals/FacilitiesList.xls**

Appendices Document –
**http://www.dshs.state.tx.us/thcic/hospitals/5010InpatientandOutpatientAppendicesVer3.pdf**

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

Data Reporting Schedule –
**http://www.dshs.state.tx.us/THCIC/datareportingschedule.shtm**

Inpatient Reporting Requirements -
**http://www.dshs.state.tx.us/thcic/hospitals/HospitalReportingRequirements.shtm**

Includes:
WebClaim, WebCorrect, and WebCert Presentations
Inpatient Technical Specifications Manual for Electronic Data Reporting

Outpatient and Emergency Department Reporting Requirements -
**http://www.dshs.state.tx.us/thcic/OutpatientFacilities/OutpatientReportingRequirements.shtm**

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THCIC was created by **Chapter 108** of the Health and Safety Code by the 74th Texas Legislature in 1995.

http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.108.htm

### Rules

Rules that apply to the Texas Health Care Information Collection are found in Chapter 421 of Title 25, Part 1 of the Texas Administrative Code.

http://info.sos.state.tx.us/pls/pub/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=421

### Quality of Care Reports

**Indicators of Inpatient Care in Texas Hospitals, 2012**
http://www.dshs.state.tx.us/thcic/publications/hospitals/IQIReport/Indicators-of-Inpatient-Care-in-Texas-Hospitals-2012.shtm

**Quality of Children's Care in Texas Hospitals, 2012**
http://www.dshs.state.tx.us/thcic/publications/hospitals/PDIReport/Quality-of-Chilren-s-Care-in-Texas-Hospitals-2012.shtm

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Texas Health Care Information Collection - THCIC
Health Facilities Numbered Letter, Volume 18 Number 2
July 20, 2015

## In This Issue

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## What is an Outpatient Department? (Hospital/ASC)

Recently there has been a misunderstanding by hospitals when they acquire or merge with an ambulatory surgery center (ASC) that is outside of the "brick and mortar" walls of the hospital, with the hospital believing it can report the ASC data together with the hospital's outpatient data.

NOT TRUE.

The hospitals are calling the acquired/merged ASC "an Outpatient Department of the hospital".

Although a hospital may submit the ASC data to THCIC on behalf of the ASC, the data must remain separate from the hospital outpatient data.

THCIC collects data from licensed ASCs and Hospitals only.

A freestanding ASC, regardless of ownership, must hold an ASC state license. It may not be licensed under a hospital as it is not located within the hospital's walls.

Services provided by other types of health facilities (clinics, freestanding Emergency Medical Care, mobile radiology) located outside of the "brick and mortar" walls of an ASC or hospital may not be reported to THCIC.

Services provided by a clinic owned or operated by a hospital, but located outside of the hospital walls, may not be reported to THCIC. The hospital may only report data on the services that occurred within the hospital walls.

THCIC collects data based on state license type and the physical location of the facility where services are provided.

An outpatient surgery department located **within** the physical hospital location is usually covered under the hospital license. The hospital would report this data to THCIC as hospital data.

An outpatient surgery department located **outside** the physical hospital location is separately licensed as an Ambulatory Surgery Center and must report its data separately from the hospital data.

## ICD-10 Implementation (Hospital/ASC)

- The current schedule for implementing ICD-10 is October 1, 2015.
- ICD-10 codes will only be valid for discharge and service dates on or after October 1, 2015.
- The System13 Production and "Production Test" systems will allow ICD-10 codes beginning on the implementation date, October 1, 2015.
- ICD-9 codes will not be valid for discharge and service dates after September 30, 2015.

## Claim Errors (Hospital/ASC)

Claims reported to Texas Health Care Information Collection (THCIC) are required to be **100% accurate**. THCIC has recently discovered an increase in claim errors that are not being corrected by the provider. This becomes a compliance issue for the provider when claim errors are not corrected by the scheduled timeline.

When a hospital or ambulatory surgery center (provider) reports its data to System13, Inc. (the THCIC data warehouse), System13 provides **detailed** information to the assigned provider primary contact regarding **errors** within each claim. All claim **errors** should and must be corrected by the provider by the scheduled timeline.

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Common errors are:

1. missing required REVENUE code or a required HCPCS code from the list of the THCIC required codes
2. missing PROCEDURE code
3. missing/invalid patient RACE
4. missing/invalid patient ETHNICITY
5. missing/invalid code for PRESENT ON ADMISSION (POA)
6. missing PRINCIPAL DIAGNOSIS
7. missing REVENUE Code when Service Line Charges exists

A list of all claim audits may be found in the 5010 Inpatient and Outpatient Appendices document posted at http://www.dshs.state.tx.us/thcic/hospitals/5010InpatientandOutpatientAppendicesVer3.pdf.

## Rural Provider Reporting, Loss of Exemption (Hospital/ASC)

Rural hospitals and rural ambulatory surgery centers (ASCs) that were approved for exemption by THCIC for the 2014 data reporting periods are required to begin reporting the THCIC data starting with the 1st Quarter of 2015 (1q2015) services, which began on January 1, 2015.

**Hospitals** are required to report all Inpatient Discharge data, select Outpatient data, and all Emergency Department data. Select outpatient data require the reporting of invasive surgical and radiological/imaging procedures only (*see required revenue codes or procedure codes associated with required service and procedure codes*).

**ASCs** will be required to report invasive surgical and radiological/imaging *required revenue codes (if using the 837 Institutional format)* or *procedure codes associated with required service and procedure codes (if using 837 Professional format)* for the Outpatient data.

The THCIC recommends attending our training sessions to learn more about the data reporting requirements and processes. Information on training is located at: http://www.dshs.state.tx.us/thcic/Training.shtm.

The 1q2015 data, January 1 – March 31 2015 services, were due to be reported by June 1, 2015.

## Emergency Department Data Collection (Hospital)

All hospitals are required to report Emergency Department (ED) events beginning with January 1, 2015 services.

All ED data with service dates between January 1, 2015 and March 31, 2015 were required to be reported to System13 no later than June 1, 2015. **This includes all billable, charity, and self-pay ED services.**

The ED data shall follow the same reporting guidelines and specifications as the Outpatient data reports with the exception of two additional data variables: 1) Point of Origin (Source of Admission), and 2) Patient Status.

Attending Physician is also required to be reported on ED claims.

ED data may be reported with the hospital's surgical/radiological Outpatient data.

The ED data collected will consist of procedures covered by specific Revenue Codes, which include:

(1) 0450 General Emergency Room;

(2) 0451 Emergency Room Emergency Medical Screening and Medical Treatment EMTALA;

(3) 0452 Emergency Room Services beyond EMTALA;

(4) 0456 Urgent Emergency Room-- Care;

(5) 0459 Other Emergency Room

The Technical Specification documentation for reporting Emergency Department data are included in the THCIC Outpatient 5010 Technical Specifications – Version 10 manual at http://www.dshs.state.tx.us/thcic/OutpatientFacilities/Tech_Req_Spec_5010_Ver_10-1-_Outpatient_THCIC837-Dec-1-2014.pdf

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## Upcoming Due Dates (Hospital/ASC)

**August 3, 2015**
1q2015 data correction period ends

**September 1, 2015**
4q2014 data certification due
1q2015 begin certification data review
2q2015 reporting of data due

**November 2, 2015**
2q2015 data correction period ends

**December 1, 2015**
1q2015 data certification due
2q2015 begin certification data review
3q2015 reporting of data due

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http://www.dshs.state.tx.us/thcic/hospitals/NoDataToReport(2).pdf

Current Provider Contact List –
http://www.dshs.state.tx.us/thcic/hospitals/FacilitiesList.xls

Appendices Document –
http://www.dshs.state.tx.us/thcic/hospitals/5010InpatientandOutpatientAppendicesVer3.pdf

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

Data Reporting Schedule –
http://www.dshs.state.tx.us/THCIC/datareportingschedule.shtm

Inpatient Reporting Requirements -
http://www.dshs.state.tx.us/thcic/hospitals/HospitalReportingRequirements.shtm

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http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.108.htm

Rules

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http://info.sos.state.tx.us/pls/pub/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=421

Quality of Care Reports

**Indicators of Inpatient Care in Texas Hospitals, 2012**
http://www.dshs.state.tx.us/thcic/publications/hospitals/IQIReport/Indicators-of-Inpatient-Care-in-Texas-Hospitals-2012.shtm

**Quality of Children's Care in Texas Hospitals, 2012**
http://www.dshs.state.tx.us/thcic/publications/hospitals/PDIReport/Quality-of-Chilren-s-Care-in-Texas-Hospitals-2012.shtm

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Texas Health Care Information Collection - THCIC
Health Facilities Numbered Letter, Volume 18 Number 3
August 26, 2015

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## Patient Notification of Data Collection
(Hospital/ASC)

House Bill 764 (HB 764), of the 84th Texas Legislative Regular Session, requires all health care providers to give notice to patients whose health data is being collected by the THCIC program. HB 764 charged THCIC to create the notice and make available for provider use.

HB 764 goes into effect on September 1, 2015.

The patient notification form is available on the THCIC website at http://www.dshs.state.tx.us/thcic/Patient-Notification-of-Data-Collection.pdf

## New System Enhancements (Hospital/ASC)

The following system enhancements will go into place on August 31, 2015.

1. **Certification**: There are three new reports: Claim Count for First Physician, Claim Count for Second Physician, and Error Type List. These reports will be available on the Reports tab and on the Certification tab as C10, C11, and C12.

2. **Certification**: The Email Notification that a certification data set is available for certification will now have the C01 Certification Summary Report and the C12 Error Type List Report attached to the email.

3. **Data Reporting**: The Data Administrator (aka Provider Primary Contact) and Certifier will now receive an email at the time of "Cutoff for Initial Submission". This occurs sixty days after the end of each quarter. The email will have four reports attached to it:
   1) Summary Report
   2) Claim Count for First Physician Report
   3) Claim Count for Second Physician Report
   4) Error Type List Report

   The 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.

4. **System Security**: When a user's account has been disabled due to three failed login attempts, the user currently receives the message "Consecutive failed login limit exceeded, account has been disabled". The System has been modified to display a new message, "Contact the help desk or <data administrator's actual name>", if the user is not the provider's Data Administrator.

5. **System Security**: The system has been modified to check every half hour if an account has been disabled for more than one hour due to failed logins. The system will then enable those accounts that have been disabled for more than one hour.
   The system has also been modified to send an email to the Data Administrator when an account of a user who is not the Data Administrator becomes disabled.

6. **Physician NPI Master Table**: We have added fields to our physician master table for "additional last and first names". These will be populated when a provider notifies us of an issue such as the physician has their name stored one way in the NPI registry and another way in their Texas Physician Registry. There may be other scenarios where both names may be utilized. The audits will now use the original and the additional name fields when determining if the name for the physician ID is a match.

## Provider Contact Information (Hospital/ASC)

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## Upcoming Due Dates (Hospital/ASC)

**September 1, 2015**
4q2014 data certification due
1q2015 begin certification data review
2q2015 reporting of data due

**November 2, 2015**
2q2015 data correction period ends

**December 1, 2015**
1q2015 data certification due
2q2015 begin certification data review
3q2015 reporting of data due

A schedule of **all** due dates may be found at
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Bruce Burns, Interim Director
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Hongyun Dong, M.S., Data Analyst
George Icossipentarhos, Information Systems
Tunu Loponi, Ph.D., Data Analyst
Susan Lou, M.S., Lead Data Analyst
Wang-Shu Lu, Ph.D., Data Analyst
Tiffany Overton, Provider Training
Dee Roes, Provider Compliance

## Past Newsletters

**http://www.dshs.state.tx.us/thcic/Inpatient-and-Outpatient-Numbered-Letters/**

## Links to Forms and Documents

***New*** Patient Notification of Data Collection Form –
http://www.dshs.state.tx.us/thcic/Patient-Notification-of-Data-Collection.pdf

Provider Contact Update Form -
http://www.dshs.state.tx.us/thcic/hospitals/FacilityInformationRequest.pdf

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

Current Provider Contact List –
http://www.dshs.state.tx.us/thcic/hospitals/FacilitiesList.xls

Appendices Document –
http://www.dshs.state.tx.us/thcic/hospitals/5010InpatientandOutpatientAppendicesVer3.pdf

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

Data Reporting Schedule –
http://www.dshs.state.tx.us/THCIC/datareportingschedule.shtm

Inpatient Reporting Requirements -
http://www.dshs.state.tx.us/thcic/hospitals/HospitalReportingRequirements.shtm

Outpatient and Emergency Department Reporting Requirements -
http://www.dshs.state.tx.us/thcic/OutpatientFacilities/OutpatientReportingRequirements.shtm



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## History of the Texas Health Care Information Collection Program

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

THCIC was created by **Chapter 108** of the Health and Safety Code by the 74th Texas Legislature in 1995.

http://www.statutes.legis.state.tx.us/Docs/HS/htm/HS.108.htm

## Rules

Rules that apply to the Texas Health Care Information Collection are found in Chapter 421 of Title 25, Part 1 of the Texas Administrative Code.

http://info.sos.state.tx.us/pls/pub/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=421

## Quality of Care Reports

**Indicators of Inpatient Care in Texas Hospitals, 2012**
http://www.dshs.state.tx.us/thcic/publications/hospitals/IQIReport/Indicators-of-Inpatient-Care-in-Texas-Hospitals-2012.shtm

**Quality of Children's Care in Texas Hospitals, 2012**
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Texas Health Care Information Collection - THCIC
Health Facilities Numbered Letter, Volume 18 Number 4
November 20, 2015

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ICD-10 Transition
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Upcoming Due Dates
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Links to Forms and Documents
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## Certification of Quarterly Data (Hospital/ASC)

THCIC Processes; hospital and ASC requirements:

Process 1: Submit quarterly data
Process 2: Correct erred quarterly data
***Process 3: Certify quarterly data**

Each quarterly dataset must be certified **no later than** the scheduled certification due date.

Each quarterly certification due date may be found on the THCIC Schedule posted at:
http://www.dshs.state.tx.us/THCIC/datareportingschedule.shtm

Facilities that miss a quarterly certification due date will be shown as "Failed to Certify" in the THCIC public release of data documentation for that quarter.

There is no "grace period" for facilities that miss a certification due date. System13 will disable the ability to certify the data in the **WebCert** component the day following a quarterly certification due date.

Texas Administrative Code rules on the **certification** of the THCIC data may be reviewed at Inpatient RULE §421.7 and Outpatient RULE §421.66.

## ICD-10 Transition

The system upgrade and modifications for ICD-10 were implemented on October 2. The transition went very smoothly, with a minimum of system downtime. With the implementation, the table loading time increased dramatically due to the large number of ICD-10 codes.

On November 17, System13 implemented a solution for table loading that has reduced the time for loading to less than one-third of the time BEFORE the ICD-10 implementation. You may compare your computer to this standard: Using Internet Explorer, for a computer with a CPU at 3.40 GHz, 16.0 GB of RAM, and a 64-bit Operating System, the load time is just 7 seconds.

## Annual Inpatient Report – 2013

The annual inpatient report for 2013 is available on the THCIC website:
http://www.dshs.state.tx.us/thcic/publications/hospitals/Statisticalreports.shtm

This report provides an overview of hospitalizations in Texas during 2013 based on Public Used Data File (PUDF) inpatient data. The information contained in this report is intended for anyone interested in a better understanding of services provided by hospitals and the characteristics of patients who received them.

The report consists of four sections:

- Overview of statistics for inpatient hospital stays
- Most frequent conditions occurring during hospital stays
- Most frequent procedures performed in hospital stays
- Charge for inpatient hospital stays

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3q2015 reporting of data due

**February 1, 2016**
3q2015 data correction period ends

**March 1, 2016**
2q2015 data certification due
3q2015 begin certification data review
4q2015 reporting of data due

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Race and Ethnicity documents
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Audit IDs and Audit Messages
Payer Source Coding Guide
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