WCIS Acknowledgments (824) - Medical Data

Table 1d: Distribution of Errors by Data Element 2006 - 2010

DATA NUM-BER	DATA DESCRIPTION	ERROR CODE	ERROR DESCRIPTION	2006 ERROR COUNT	2007 ERROR COUNT	2008 ERROR COUNT	2009 ERROR COUNT	2010 ERROR COUNT
5	Jurisdiction Claim Number	30	Must be A-Z, 0-9, or spaces		1,142	493	335	324
6	Insurer Fein	1	Missing Mandatory Field			1,923	10,145	1,885
6	Insurer Fein	28	Must be numeric (0-9)		130	256	647	812
6	Insurer Fein	40	All digits cannot be the same		4,191	9,583	21	6
7	Insurer Name	1	Missing Mandatory Field		5,225	3,988	14,205	1,904
15	Claim Administrator Claim Number	1	Missing Mandatory Field		14,760	4,487	754	1,140
15	Claim Administrator Claim Number	30	Must be A-Z, 0-9, or spaces		3,196	1,034	4,123	5,508
15	Claim Administrator Claim Number	39	No match on database	4,867	1,811,870	4,339,864	4,683,554	2,442,692
15	Claim Administrator Claim Number	64	Invalid Data Relationship				33	57
31	Date Of Injury	1	Missing Mandatory Field			33,449		11
31	Date Of Injury	29	Must be valid date (CCYYMMDD)			1		4
31	Date Of Injury	41	Must be <= Current date		9	31	7	97
42	Employee Social Security Number	1	Missing Mandatory Field				7	2
42	Employee Social Security Number	28	Must be numeric (0-9)		32	223	82	318
42	Employee Social Security Number	58	Code/ID invalid		17	11	88	69
43	Employee Last Name	1	Missing Mandatory Field		9	3	12	7
44	Employee First Name	1	Missing Mandatory Field		2	62	48	11
99	Reciever Id	1	Missing Mandatory Field			1		
152	Employee Visa Number	30	Must be A-Z, 0-9, or spaces		4			
187	Claim Administrator Fein	28	Must be numeric (0-9)		1,725	1,635	655	841
187	Claim Administrator Fein	40	All digits cannot be the same			2,541	3,031	
208	Managed Care Organization Identification Number	30	Must be A-Z, 0-9, or spaces			165		
266	Transaction Tracking Number	1	Missing Mandatory Field			2		
500	Unique Bill Id Number	1	Missing Mandatory Field		6		4	10
500	Unique Bill Id Number	57*	Duplicate Batches/Bills	1,991	120,849	1,388,000	679,285	14,873,693
501	Total Charge Per Bill	1	Missing Mandatory Field		1	41	298	413
501	Total Charge Per Bill	28	Must be numeric (0-9)		1	4	38	50
503	Billing Format Code	58	Code/ID invalid		164	21	7	
504	Facility Code	58	Code/ID invalid		29	15	158	130
507	Provider Agreement Code	58	Code/ID invalid		1	5	44	63
508	Bill Submission Reason Code	58	Code/ID invalid		10	90	6	
508	Bill Submission Reason Code	63	Invalid Event Segeunce/Relationship	1	32,771	33,880	142,183	91,424
509	Service Bill Date(S) Range	29	Must be valid date (CCYYMMDD)		3	4	49	177
509	Service Bill Date(S) Range	34	Must be >= Date of injury	13	1,359	2,763	3,029	11,070
509	Service Bill Date(S) Range	41	Must be <= Current date		303	215	97	126
510	Date Of Bill	29	Must be valid date (CCYYMMDD)		2	4	43	58
510	Date Of Bill	34	Must be >= Date of injury	8	882	5,467	1,660	20,010
510	Date Of Bill	41	Must be <= Current date		41	425	69	48
511	Date Insurer Received Bill	1	Missing Mandatory Field		37	32,668	146	33,899
511	Date Insurer Received Bill	29	Must be valid date (CCYYMMDD)		1	3	178	57
511	Date Insurer Received Bill	34	Must be >= Date of injury	1	186	5,069	1,463	19,791
511	Date Insurer Received Bill	41	Must be <= Current date		25	364	35	6
512	Date Insurer Paid Bill	1	Missing Mandatory Field		54	33,573	231	800
512	Date Insurer Paid Bill	29	Must be valid date (CCYYMMDD)		2	3	27	48
512	Date Insurer Paid Bill	34	Must be >= Date of injury		18	1,474	251	696
512	Date Insurer Paid Bill	73	Must be >= Date payor received bill		656	2,909	1,974	4,028
513	Admission Date	29	Must be valid date (CCYYMMDD)				67	104
513	Admission Date	34	Must be >= Date of injury	2	192	2,606	546	789
513	Admission Date	41	Must be <= Current date		2	4	7	7
514	Discharge Date	34	Must be >= Date of injury		50	2,344	216	395
514	Discharge Date	41	Must be <= Current date		2	17	6	12
515	Contract Type Code	1	Missing Mandatory Field				1	1
514	Discharge Date	29	Must be valid date (CCYYMMDD)				1	
515	Contract Type Code	28	Must be numeric (0-9)				1	
516	Total Amount Paid Per Bill	28	Must be numeric (0-9)			3	34	34
518	DRG Code	28	Must be numeric (0-9)				54	6
518	DRG Code	58	Code/ID invalid		342	2,827	7,889	1,929
521	Principal Diagnosis Code	58	Code/ID invalid		912	2,674	713	550
522	Icd-9 Cm Diagnosis Code	58	Code/ID invalid	12	17,694	19,264	28,062	32,406
523	Billing Provider Unique Bill Identification Number	1	Missing Mandatory Field		9	54	909	257
523	Billing Provider Unique Bill Identification Number	30	Must be A-Z, 0-9, or spaces	383	6,673	763	329	298
524	Procedure Date	29	Must be valid date (CCYYMMDD)				6	4
524	Procedure Date	34	Must be >= Date of injury			18		
524	Procedure Date	41	Must be <= Current date			2		
524	Procedure Date	74	Must be >= From Service Date			70		
524	Procedure Date	75	Must be <= 'Thru Service date			371		
525	ICD9 Cm Principal Procedure Code	30	Must be A-Z, 0-9, or spaces					1
525	ICD9 Cm Principal Procedure Code	58	Code/ID invalid		4,270	13,234	21,084	21,041
526	Release Of Information Code	58	Code/ID invalid					3
527	Prescription Bill Date	29	Must be valid date (CCYYMMDD)				4	6
527	Prescription Bill Date	34	Must be >= Date of injury		8	6	51	27
532	Batch Control Number	1	Missing Mandatory Field			66	33	
532	Batch Control Number	28	Must be numeric (0-9)		33			
532	Batch Control Number	57*	Duplicate Batches/Bills		93,137	43,704	337,884	429,512
535	Admitting Diagnosis Code	58	Code/ID invalid		50	33	741	428
537	Billing Provider Primary Specialty Code	58	Code/ID invalid		58,743		343	315

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DATA NUM-BER	DATA DESCRIPTION	ERROR CODE	ERROR DESCRIPTION	2006 ERROR COUNT	2007 ERROR COUNT	2008 ERROR COUNT	2009 ERROR COUNT	2010 ERROR COUNT
542	Billing Provider Postal Code	58	Code/ID invalid	4	2,133	20,079	285	200
543	Bill Adjustment Group Code	58	Code/ID invalid	3	44			28
544	Bill Adjustment Reason Code	58	Code/ID invalid	1	10,005	8,546	4,271	2,069
546	Bill Adjustment Units	28	Must be numeric (0-9)					1
547	Line Number	1	Missing Mandatory Field		12,996	346	911	66
550	Principal Procedure Date	1	Missing Mandatory Field	1	71	2,270		35
550	Principal Procedure Date	29	Must be valid date (CCYYMMDD)				2	
550	Principal Procedure Date	34	Must be >= Date of injury	2	91	1,318	75	86
550	Principal Procedure Date	41	Must be <= Current date		10	14	17	7
550	Principal Procedure Date	74	Must be >= From Service Date	2	567	913	66	159
550	Principal Procedure Date	75	Must be <= 'Thru Service date	4	442	3,775	563	522
552	Total Charge Per Line -Other	1	Missing Mandatory Field		112		1	10
552	Total Charge Per Line -Other	28	Must be numeric (0-9)				7	6
553	Days/Unit Code	1	Missing Mandatory Field		234	78	55	125
553	Days/Unit Code	58	Code/ID invalid				3	2
554	Day(S)/Unit(S) Billed	1	Missing Mandatory Field		234	78	55	125
555	Place Of Service Bill Code	58	Code/ID invalid		386	10	1,252	1,205
557	Diagnosis Pointer	58	Code/ID invalid		435	2,911	40	1
559	Revenue Billed Code	28	Must be numeric (0-9)			16	349	227
559	Revenue Billed Code	58	Code/ID invalid	1	2,779	9,497	4,108	3,399
561	Prescription Line Number	30	Must be A-Z, 0-9, or spaces			299	193	51
562	Dispense As Written Code	58	Code/ID invalid				4	17
565	Total Charge Per Line - Rental	1	Missing Mandatory Field		4,328		4	169
565	Total Charge Per Line - Rental	28	Must be numeric (0-9)				1	
566	Total Charge Per Line - Purchase	1	Missing Mandatory Field		4,381		4	169
566	Total Charge Per Line - Purchase	28	Must be numeric (0-9)				2	
567	Dme Billing Frequency Code	1	Missing Mandatory Field		2,142	7,709	14,028	16,720
567	Dme Billing Frequency Code	58	Code/ID invalid					4
570	Drugs/Supplies Quantity Dispensed	1	Missing Mandatory Field	54	11,180	46,969	152,209	56,043
571	Drugs/Supplies Number Of Days	1	Missing Mandatory Field	54	16,721	615	2,207	781
571	Drugs/Supplies Number Of Days	28	Must be numeric (0-9)		22,850			
572	Drugs/Supplies Billed Amount	1	Missing Mandatory Field	96	11,678	46,993	153,519	56,064
572	Drugs/Supplies Billed Amount	28	Must be numeric (0-9)					1
576	Revenue Paid Code	58	Code/ID invalid		161	605	623	1,749
586	Rendering Line Provider Fein	28	Must be numeric (0-9)				171	844
586	Rendering Line Provider Fein	40	All digits cannot be the same				4,045	10,786
592	Rendering Line Provider National ID	30	Must be A-Z, 0-9, or spaces				1	
593	Rendering Line Provider Postal Code	58	Code/ID invalid				1	3
595	Rendering Line Provider Primary Specialty Code	58	Code/ID invalid				7,064	79,573
599	Rendering Line Provider State License Number	30	Must be A-Z, 0-9, or spaces				1	
600	Place Of Service Line Code	58	Code/ID invalid				1	2
604	Prescription Line Date	34	Must be >= Date of injury			10		
605	Service Line Date(S) Range	1	Missing Mandatory Field		132	287	1,359	433
605	Service Line Date(S) Range	29	Must be valid date (CCYYMMDD)		1		169	5,180
605	Service Line Date(S) Range	34	Must be >= Date of injury	50	4,400	13,835	13,015	27,006
605	Service Line Date(S) Range	41	Must be <= Current date		288	386	247	856
615	Reporting Period	1	Missing Mandatory Field				4	1
626	Hcpcs Principle Procedure Billed Code	58	Code/ID invalid	7	1,167	25	784	9,740
629	Billing Provider Fein	28	Must be numeric (0-9)		689	8	9	21
629	Billing Provider Fein	40	All digits cannot be the same		31	281	18	21
630	Billing Provider State License Number	30	Must be A-Z, 0-9, or spaces					1
638	Rendering Bill Provider Last/Group Name	1	Missing Mandatory Field		7,682	927	22,472	9,932
642	Rendering Bill Provider Fein	1	Missing Mandatory Field		42,784	247	84	2,549
642	Rendering Bill Provider Fein	28	Must be numeric (0-9)		2,151	8,519	5,633	2,383
642	Rendering Bill Provider Fein	40	All digits cannot be the same		96	315	199	205
643	Rendering Bill Provider State License Number	1	Missing Mandatory Field		8,986	6,009	80	223
643	Rendering Bill Provider State License Number	30	Must be A-Z, 0-9, or spaces	89	430	801	958	736
649	Rendering Bill Provider Specialty License Number	30	Must be A-Z, 0-9, or spaces				1	
651	Rendering Bill Provider Primary Specialty Code	1	Missing Mandatory Field	163	38,220	7,383	223	4,273
651	Rendering Bill Provider Primary Specialty Code	58	Code/ID invalid	4	57,138	19,562	91,838	130,512
656	Rendering Bill Provider Postal Code	1	Missing Mandatory Field	163	63,563	7,387	365	4,358
656	Rendering Bill Provider Postal Code	58	Code/ID invalid	85	5,428	36,627	11,522	16,839
678	Facility Name	1	Missing Mandatory Field		4,667	2,012	128	9,238
679	Facility Fein	1	Missing Mandatory Field		4,667	2,012	128	96
679	Facility Fein	28	Must be numeric (0-9)		362	1,221	48	155
679	Facility Fein	40	All digits cannot be the same		45	7	9	126
680	Facility State License Number	30	Must be A-Z, 0-9, or spaces				13	17
680	Facility State License Number	40	All digits cannot be the same					1
681	Facility Medicare Number	30	Must be A-Z, 0-9, or spaces					1
681	Facility Medicare Number	40	All digits cannot be the same				5	4
688	Facility Postal Code	58	Code/ID invalid	3	2,653	10,884	9,460	14,647
704	Managed Care Organization Fein	28	Must be numeric (0-9)				2	5
712	Managed Care Organization Postal Code	58	Code/ID invalid				3	8
714	Hcpcs Line Procedure Billed Code	58	Code/ID invalid	2	64,011	199,969	89,962	185,044
715	Jurisdiction Procedure Billed Code	58	Code/ID invalid	241	82,465	100,274	17,422	5,645
717	Hcpcs Modifier Billed Code	58	Code/ID invalid	18	57,684	40,689	20,069	13,449

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Table 1d: Distribution of Errors by Data Element 2006 - 2010

DATA NUM-BER	DATA DESCRIPTION	ERROR CODE	ERROR DESCRIPTION	2006 ERROR COUNT	2007 ERROR COUNT	2008 ERROR COUNT	2009 ERROR COUNT	2010 ERROR COUNT
718	Jurisdiction Modifier Billed Code	58	Code/ID invalid	195	22,838	4,954	30,250	29,791
721	Ndc Billed Code	58	Code/ID invalid	552	29,552	77,985	245,079	167,662
726	HCPCS Line Procedure Paid Code	58	Code/ID invalid		19,943	46,066	70,398	124,646
727	Hcpcs Modifier Paid Code	58	Code/ID invalid	18	681	3,408	4,160	4,834
728	Ndc Paid Code	58	Code/ID invalid	451	6,037	8,235	8,355	20,392
729	Jurisdiction Procedure Paid Code	58	Code/ID invalid	241	23,757	10,882	10,438	2,315
730	Jurisdiction Modifier Paid Code	58	Code/ID invalid	195	13,857	18,774	5,577	245
731	Service Adjustment Group Code	58	Code/ID invalid					2
732	Service Adjustment Reason Code	58	Code/ID invalid		15,240	14,941	21,734	6,024
733	Service Adjustment Amount	28	Must be numeric (0-9)		1	1	22	32
736	ICD9 Procedure Code	58	Code/ID invalid		81	636	2,323	3,130
737	HCPCS Bill Procedure Code	30	Must be A-Z, 0-9, or spaces					2
737	HCPCSBill Procedure Code	58	Code/ID invalid		149	6	713	12,250

The counts represent the number of errors reported back to the trading partner in the 824 acknowledgment from the WCIS.

*Note: Error 57 includes both batch and bill counts.

*In 2010, error counts increased because WCIS began sending error acknowledgments for each bill in a duplicate batch (instead of sending one error acknowledgment for the duplicate batch) and also due to WCIS system errors.