Healthcare Outcomes and Analysis (HOA) Analytical Data Repository Documentation

VERSION 3.3

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1.0 OVERVIEW

The HOA Repository contains Clinical View of claims, encounters and membership used for reporting and analysis for Health Services and other organizational customers. MHC, Qnxt and Encounters are standardized to a common Utilization view and membership sources are integrated into a membership fact table (Memmo). The structure and content of the source data is left intact while additional columns and value-added elements are added to the tables.

The advantages of using the HOA Repository are that it:

- represents a monthly view of the data for traceability of reports that have been published
- pre-joins many of the source data tables into a more convenient view
- coalesces inpatient cases (please see CASE table) so that inpatient cases are represented by one line
- standardizes claims and encounters onto one utilization view
- provides additional value-added columns such as DRG, Service Category and FROM_ER

Data Sets

Claim (MHC or QNXT) - Records of services received from fee-for-service (FFS) claims and payments are issued retrospectively after the services are provided.

Encounter - Records of services delivered to members enrolled in managed care plans that receive a capitated, per-member-per-month payment. These records allow the health plan to track the services received by members enrolled in managed care. Health plan is not responsible for processing a claim or paying the provider for the rendered service.

Membership – MEMMO table created to capture monthly member enrollment includes information on assigned PCP, LOB, dual eligibility and aid code. MBR_ENROLL_SEG table is created to capture the date segment of a member's enrollment and provider assignment.

Pharmacy – Extract of pharmacy information from Oracle encounter data.

Data Layout

CASE File – Multiple Headers grouped together under one CASE_ID. Claims are grouped for the same member, provider, overlapping dates of service and CLM_SVCGRP. CASE files are for Inpatient and SNF claims only.

HDR File – Header Level Claim Information. Header is the basic level of Claim information provided by the source database. It contains basic information such as member details, plan eligibility, provider, service date and place of service for the Claim.

Detail File – Detailed information such as revenue codes, procedure code (CPT/HCPCS codes), and service quantity. Detail files contain one line for per billed procedure per claim, and there can be multiple lines per claim.

One CASE can contain multiple header claims and one HEADER claim can have multiple detail lines.

To join CASE to HEADER use CASE_ID.
To join HEADER to DETAIL use CL_ID.

LA Care Products by System

All new claims are now in QNXT. Only run-out claims are being adjudicated in MHC. Product_codes 10 (Medi-Cal), 40 (IHSS/PASC-SEIU), 80 (Cal-Medi Connect), 90 (LA Care Covered/Health Benefits Exchange) are found in QNXT. Some older Product_Codes, e.g. 20 (Health Family Plan), 60 (Healthy Kids) and 70 (Dual Eligible Special Needs Plan) may still be found in MHC.

Data Location

HOA Analytical Data Repository is available at the following two locations and contains identical tables.

Location 1			Location 2		
\\svm3cifs\sasgrid_data\sas data\Shared\Production			**Oracle HOA@HOAP schema**		
Subfolders	**Content Areas**	**Table Names**		**Content Areas**	**Table Names**
…\CLAIM	MHC Claim	clm_case_inpsnf clm_hdr_inpsnf clm_hdr_other clm_detail_inpsnf clm_detail_other		MHC Claim	clm_case_inpsnf clm_hdr_inpsnf clm_hdr_other clm_detail_inpsnf clm_detail_other
…\QNXT	QNXT Claim	qnxt_case_inpsnf qnxt_hdr_inpsnf qnxt_hdr_other qnxt_detail_inpsnf qnxt_detail_other		QNXT Claim	qnxt_case_inpsnf qnxt_hdr_inpsnf qnxt_hdr_other qnxt_detail_inpsnf qnxt_detail_other
...\ENCOUNTER	Encounter	enc_case_inpsnf enc_hdr_inpsnf enc_hdr_other enc_detail_inpsnf enc_detail_other		Encounter	enc_case_inpsnf enc_hdr_inpsnf enc_hdr_other enc_detail_inpsnf enc_detail_other
…\Membership	Membership	memmo mbr_enroll_seg		Membership	memmo mbr_enroll_seg
…\RX	Pharmacy	rx_from_2014		Pharmacy	rx_from_2014

Data Refresh Schedule

The data extract, transform and load (ETL) process is scheduled to be completed by the 3rd business day of each month. The schedule and completion date is also published on the SAS User Master Calendar:

http://sp2010.lacare.org/Depts/hoa/reports/SitePages/Home.aspx

Appropriate emails will be sent to data users to communicate updates.

2.0 MHC CLAIM DATA DICTIONARY

Table: CLM_CASE_INPSNF

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADJ_BILL_AMT_CASE	Num	8	Adjusted bill amount for the case	Yes		See CASE PPT I (slide 11)
ADM_DT	Date	8	Admission date	Yes		See CASE PPT I (slide 10)
ADM_MONTH	Char	6	Admission year and month, yyyymm	Yes		See CASE PPT I (slide 15)
APRDRG	Char	3	All patient refined diagnosis related group from 3M grouper	Yes		See CASE PPT II (slide 2, 3, 9-11)
APRDRG_WT	Num	8	APRDRG weight, defined by APRDRG and severity of illness from 3M grouper	Yes		See CASE PPT II (slide 4-6, 9-11)
BP_CODE	Char	10	Business partners code		Encounter.Mhc_master_claim.Bp_code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CASE_DX1--CASE_DX20	Char	8	ICD diagnosis codes. Distinct dx kept for each case from discharge claim to admission claim. Discharge dx takes priority over admission dx	Yes		See CASE PPT II (slide 15)
CASE_ID	Char	45	HOA case identification: Key to link case and header files	Yes		See CASE PPT I (slide 9)
CASE_PR1--CASE_PR10	Char	7	ICD procedure code		Encounter.Mhc_master_claim_surg_code.Surg_code	
CIN_NO	Char	12	Client index number		Encounter.Members.Cin_No	For products 10, 20, 40, 70, 80, CIN NO stores state assigned ID, for product 60 and 90 CIN NO stores LAC internal assigned ID
COB_AMT_CASE	Num	8	Case coordination of benefits amount	Yes		See CASE PPT II (slide 13)
DIS_DT	Date	8	Discharge date	Yes		See CASE PPT I (slide 10)
DIS_STATUS	Char	2	Discharge status		Encounter.Mhc_caster_claim.Dis_status	
FROM_ER	Char	1	Admitted from ER (Y/N)	Yes		
ICD_FLAG	Char	1	ICD code flag ('0'=ICD10, '9'=ICD9)	Yes		See CASE PPT II (slide 12)
MAX_AWP_CASE	Num	8	Maximum contract allowable amount	Yes		See CASE PPT II (slide 13)

CLM_CASE_INPSNF continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
MDC	Char	2	Major diagnostic categories from 3M grouper	Yes		See CASE PPT I (slide 7, 8)
MEMBER_NO	Char	15	Member ID assigned by LA Care system		Encounter.Members.Mhc_member_no	LAC internal assigned ID, by MHC or QNXT system
PAID_AMT_CASE	Num	8	Amount paid for each case	Yes		See CASE PPT II (slide 13)
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See CASE PPT I (slide 15)
PRODUCT_CODE	Char	2	Line of business	Yes		See CASE PPT I (slide 14)
PROVIDER	Char	12	Rendering provider ID		Encounter.Mhc_master_claim.Provider	
RISK_MORTALITY	Char	1	Risk mortality (ROM) from 3M APRDRG grouper. The likelihood of dying	Yes		See CASE PPT II (slide 4-6, 9-11)
SEVERITY	Char	1	Severity of illness (SOI) from 3M APRDRG grouper	Yes		See CASE PPT II (slide 4-6, 9-11)
SICK_BABY	Char	1	Sick baby indicator (Y/N)	Yes		See CASE PPT I (slide 9)
SRVDAYS_CASE	Num	8	Service days	Yes		See CASE PPT I (slide 13)
SRV_CAT	Char	6	Service category	Yes		See CASE PPT I (slide 9, 16-18) See HDR PPT II (slide 8, 10, 11)

Table: CLM_HDR_INPSNF and CLM_HDR_OTHER

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADMIT_DT_CLM*	Num	8	Admission date on claim		Encounter.Mhc_master_claim.Admit_date	
ADM_MONTH*	Char	6	Admission year and month, yyyymm	Yes		See HDR PPT I (slide 7)
ATT_PHYS	Char	12	Attending physician		Encounter.Mhc_master_claim.Att_phys	
AUTH_NO	Char	12	Authorization number		Encounter.Mhc_master_claim.Auth_no	
BILL_AMT	Num	8	Billed amount	Yes		See HDR PPT II (slide 13)
BP_CODE	Char	10	Business partners code		Encounter.Mhc_master_claim.Bp_code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CAPACITY_CD	Char	10	Capacity code indicates In/Out Network or PCP/Specialty Provider		Encounter.Mhc_master_claim.Capacity_cd	
CASE_ID*	Char	45	HOA case identification: Key to link case and header files	Yes		See HDR PPT I (slide 7, 8) See CASE PPT I (slide 9)
CIN_NO	Char	12	Client index number		Encounter.Mhc_master_claim.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
CL_ID	Char	15	Claim identification number: used to join hdr and detail tables together		Encounter.Mhc_master_claim.Cl_id	
CLAIM_FORM	Char	2	Type of claim form		Encounter.Mhc_master_claim.Claim_form	
CLM_SPECIALTY	Char	4	Rendering provider specialty code	Yes		See HDR PPT II (slide 9, 10, 11)
CLM_SVCGRP	Char	8	Service group assigned to the claim based on detail leveled service group and dominance mapping	Yes		See HDR PPT II (slide 8, 10, 11)
CLM_TYPE	Char	10	MHC claim type		Encounter.Mhc_master_claim.Clm_type	
COB_AMT	Num	8	Coordination of benefit amount	Yes		See HDR PPT II (slide 13)
COB_FLAG	Char	1	Coordination of benefit flag (Y/N)	Yes		See HDR PPT II (slide 13)
DIAG1--DIAG20	Char	7	ICD diagnosis code		Encounter.Mhc_master_claim_diagnosis.Diagnosis	
DISCH_DT_CLM*	Num	8	Discharge date		Encounter.Mhc_master_claim_diagnosis.Disch_dt	

* CLM_HDR_INPSNF Specific Variable
** CLM_HDR_OTHER Specific Variable

CLM_HDR_INPSNF and CLM_HDR_OTHER continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
DISPOSITION	Char	3	Discharge status		Encounter.Mhc_master_claim.Disposition	
DOS_1	Num	8	Date of service		Encounter.Mhc_master_claim.Dos_1	
ER_TO_IP**	Char	1	ER ends to INP	Yes		
FORM_TYPE	Char	2	Form type		Encounter.Mhc_master_claim.Form_type	
FROM_ER*	Char	1	Admitted from ER	Yes		
GROUP_ID	Char	12	Provider group identification		Encounter.Mhc_master_claim.Group_id	
ICD_FLAG	Char	1	ICD code flag ('0'=ICD10, '9'=ICD9)	Yes		See HDR PPT II (slide 12)
LAST_UPD	Num	8	Last updated datetime		Encounter.Mhc_master_claim.Last_upd	
MAX_AWP	Num	8	The maximum contract allowable amount	Yes		See HDR PPT II (slide 13)
MAX_RB_DT*	Num	8	For HEDIS data team use. Maximum room and board date based on HEDIS definition	Yes		See HDR PPT I (slide 9) See HDR PPT II (slide 5, 6)
MEMBER_NO	Char	15	Member ID assigned by LA Care system		Encounter.Members.MHC_member_no	LAC internal assigned ID, by MHC or QNXT system
MIN_RB_DT*	Num	8	For HEDIS data team use. Minimum room and board date based on HEDIS definition	Yes		See HDR PPT I (slide 9) See HDR PPT II (slide 5, 6)
ORDER_PROV	Char	12	Order provider		Encounter.Mhc_master_claim.Order_prov	
PAID_DT	Num	8	Claim paid date		Encounter.Mhc_master_claim.Pay_dt	
PAY_SUB	Char	12	Subpart NPIs		Encounter.Mhc_master_claim.Pay_sub	
PCP	Char	12	Primary care physician		Encounter.Mhc_master_claim.Pcp	
PD_AMT	Num	8	Paid claim amount	Yes		See HDR PPT II (slide 13)
POS_1	Char	3	Place of service		Encounter. Mhc_master_claim.Pos_1	
PROC1--PROC10	Char	6	ICD procedure code		Encounter.Mhc_master_claim_surg_code.Surg_code	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See HDR PPT II (slide 12)

* CLM_HDR_INPSNF Specific Variable
** CLM_HDR_OTHER Specific Variable

CLM_HDR_INPSNF and CLM_HDR_OTHER continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
PRODUCT_CODE	Char	2	Line of business	Yes		See HDR PPT I (slide 11)
PROVIDER	Char	12	Billing provider		Encounter.Mhc_master_claim.Provider	
RECEIPT_DT	Num	8	Claim receipt date		Encounter.Mhc_master_claim.Receipt_date	
REGION	Char	6	Region		Encounter.Mhc_master_claim.Region	
RENDERING_NAME	Char	50	Rendering provider name		Encounter.Mhc_master_claim.Rendering_name	
REND_PROV	Char	12	Rendering provider		Encounter.Mhc_master_claim.Rendering	
RISK_NON	Char	1	Risk/Non-risk		Encounter.Mhc_master_claim.Risk_non	
SPECIALTY_CD	Char	3	Rendering provider specialty code		Encounter.Specialty_codes.Specialty_code	LAC proprietary specialty codes, e.g., 99=Unknown
SRVDAYS*	Num	8	Service days	Yes		See HDR PPT I (slide 10)
SRV_CAT*	Char	6	Service category	Yes		See HDR PPT II (slide 8, 10, 11)
STATUS	Char	2	Claim status		Encounter.Mhc_master_claim.Status	
TYPE_BILL	Char	4	Billing type		Encounter.Mhc_master_claim.Type_bill	
VENDOR	Char	12	Vendor ID		Encounter.Mhc_master_claim.Vendor	
VOUCHER	Char	12	Voucher		Encounter.Mhc_master_claim.Voucher	

* CLM_HDR_INPSNF Specific Variable
** CLM_HDR_OTHER Specific Variable

Table: CLM_DETAIL_INPSNF and CLM_DETAIL_OTHER

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
CIN_NO	Char	12	Client index number		Encounter.Mhc_Master_claim_cetail.Bill_amt	For products 10, 20, 40, 70, 80, CIN NO stores state assigned ID, for product 60 and 90 CIN NO stores LAC internal assigned ID
CL_ID	Char	15	Claim identification number: used to join hdr and detail tables together		Encounter.Mhc_master_claim.Cl_id	
COB_AMT	Num	8	Coordination of benefits amount		Encounter.Mhc_master_claim_detail.Cob_amt	
CODE_DESC	Char	50	Procedure or revenue code descriptions		Encounter.Mhc_master_claim _detail.Code_desc	
CPT_IDS	Char	15	CPT group ID		Encounter.Mhc_master_claim _detail.Cpt_ids	
DOS	Num	8	Date of service		Encounter.Mhc_master_claim detail.Dos	
LINE_NO	Num	8	Line number of claim details		Encounter.Mhc_master_claim_detail.Z_assoc_row	
LINE_PRIORITY	Char	3	Line priority	Yes		See Detail PPT (slide 7)
LINE_SVCGRP	Char	8	Line of service group	Yes		See Detail PPT (slide 7)
MAX_AWP	Num	8	The maximum contract allowable amount		Encounter.Mhc_master_claim_detail.Max_awp	
MODIFIER_CD	Char	20	Modifier code to CPT codes		Encounter.Mhc_master_claim_detail.Modifier_cd	
PAR_NONPAR	Char	1	Participating (par) or Non-participating (non-par)		Encounter.Mhc_master_claim_detail.Par_nonpar	
PROC_CD	Char	5	CPT/HCPCS procedure codes		Encounter.Mhc_master_claim_detail.Line_code	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See Detail PPT (slide 5)
QTY_N	Num	8	Quantity associated with service codes	Yes		See Detail PPT (slide 9)
REV_CD	Char	4	Revenue code		Encounter.Mhc_master_claim_detail.Line_code	
SPECIALTY_CD	Char	4	Rendering provider specialty code		Encounter.Mhc_master_claim_detail.Specialty_cd	
SRV_CAT	Char	6	Service category	Yes		See Detail PPT (slide 6, 7, 8)
THRU_DT	Num	8	End date of service		Encounter.Mhc_master_claim_detail.Thru_dt	

* CLM_DETAIL_INPSNF Specific Variable
** CLM_DETAIL_OTHER Specific Variable

3.0 QNXT CLAIM DATA DICTIONARY

Table: QNXT_CASE_INPSNF

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADJ_BILL_AMT_CASE	Num	8	Adjusted bill amount for the case	Yes		See CASE PPT I (slide 11)
ADM_DT	Date	8	Admission date	Yes		See CASE PPT I (slide 9, 10, 11)
ADM_MONTH	Char	6	Admission year and month, yyyymm	Yes		See CASE PPT I (slide 15)
APRDRG	Char	3	All patient refined diagnosis related group from 3M grouper	Yes		See CASE PPT II (slide 2, 3, 9-11)
APRDRG_WT	Num	8	APRDRG weight, defined by APRDRG and severity of illness from 3M grouper	Yes		See CASE PPT II (slide 4-6, 9-11)
BP_CODE	Char	10	Business partners code		Encounter.Members.Bp_Code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CASE_DX1--CASE_DX20	Char	8	ICD diagnosis codes. Distinct dx kept for each case from discharge claim to admission claim. Discharge dx takes priority over admission dx	Yes		See CASE PPT II (slide 15)
CASE_ID	Char	45	HOA case identification: Key to link case and header files	Yes		See CASE PPT I (slide 9)
CASE_PR1--CASE_PR10	Char	7	ICD procedure code		Plandata.Claimproc.Pcode	
CIN_NO	Char	12	Client index number		Lacview.Member.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
COB_AMT_CASE	Num	8	Case coordination of benefits amount	Yes		See CASE PPT II (slide 13)
DIS_DT	Date	8	Discharge date	Yes		See CASE PPT I (slide 10)
DIS_STATUS	Char	2	Discharge status		Lacview.Claim.Status	
FROM_ER	Char	1	Admitted from ER (Y/N)	Yes		
ICD_FLAG	Char	1	ICD code flag ('0'=ICD10, '9'=ICD9)	Yes		See CASE PPT II (slide 12)
MAX_AWP_CASE	Num	8	Maximum contract allowable amount	Yes		See CASE PPT II (slide 13)

QNXT_CASE_INPSNF continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
MDC	Char	2	Major diagnostic categories from 3M grouper	Yes		See CASE PPT I (slide 7, 8)
MEMBER_NO	Char	15	Member ID assigned by LA Care system		Encounter.Members.Mhc_member_no	LAC internal assigned ID, by MHC or QNXT system
PAID_AMT_CASE	Num	8	Amount paid for each case	Yes		See CASE PPT II (slide 13)
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See CASE PPT I (slide 15)
PRODUCT_CODE	Char	2	Line of business	Yes		See CASE PPT I (slide 14)
PROVIDER	Char	12	Rendering provider ID		Lacview.Claim.Provid	
RISK_MORTALITY	Char	1	Risk mortality (ROM) from 3M APRDRG grouper. The likelihood of dying	Yes		See CASE PPT II (slide 4-6, 9-11)
SEVERITY	Char	1	Severity of illness (SOI) from 3M APRDRG grouper	Yes		See CASE PPT II (slide 4-6, 9-11)
SICK_BABY	Char	1	Sick baby indicator (Y/N)	Yes		See CASE PPT I (slide 9)
SRVDAYS_CASE	Num	8	Service days	Yes		See CASE PPT I (slide 13)
SRV_CAT	Char	6	Service category	Yes		See CASE PPT I (slide 9, 16-18) See HDR PPT II (slide 8, 10, 11)

Tables: QNXT_HDR_INPSNF and QNXT_HDR_OTHER

Variables	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADJUD_DT	Num	8	Adjudication date		Lacview.Claim.Adjuddate	
ADMIT_DT_CLM	Num	8	Admission date on claim		Lacview.Claim.Admitdt	
ADM_HR	Num	8	Admission hour		Lacview.Claim.Admithour	
ADM_MONTH*	Char	6	Admission year and month, yyyymm	Yes		See HDR PPT I (slide 7)
ADM_SRCE	Char	1	Admission source		Lacview.Claim.Admitsource	
ADM_TYPE	Char	1	Admission type		Lacview.Claim.Admittype	
AFFILIATIONID	Char	15	Affiliation ID		Lacview.Affiliation.Affiliationid	
AFFIL_TYPE	Char	15	Affiliation type		Lacview.Affiliation.Affiltype	
ATT_PHYS	Char	12	Attending physician		Lacview.Claim.Attendphyid	
ATT_PHYS_NAME	Char	60	Attending physician name		Lacview.Claim.Attendphyname	
BILL_AMT	Num	8	Billed amount	Yes		See HDR PPT II (slide 13)
BILL_PROV	Char	15	Billing provider		Lacview.Provider.Provid	
BP_CODE	Char	10	Business partners code		Encounter.Members.Bp_Code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CASE_ID*	Char	45	HOA case identification: Key to link case and header files	Yes		See HDR PPT I (slide 7, 8) See CASE PPT I (slide 9)
CIN_NO	Char	12	Client index number	Yes		For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
CL_ID	Char	15	Claim identification number: used to join hdr and detail tables together		Lacview.Claim.Claimid	
CLAIMBYPCP	Num	8			Lacview.Claim.Claimbypcp	
CLEAN_DT	Num	8	Cleaned date		Lacview.Claim.Cleandate	
CLM_SPECIALTY	Char	4	Rendering provider specialty code	Yes		See HDR PPT II (slide 9-11)

* QNXT_HDR_INPSNF Specific Variable
** QNXT_HDR_OTHER Specific Variable

QNXT_HDR_INPSNF and QNXT_HDR_OTHER continued

Variables	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
CLM_SVCGRP	Char	8	Service group assigned to the claim based on detail leveled service group and dominance mapping	Yes		See HDR PPT II (slide 8, 10, 11)
COB_AMT	Num	8	Coordination of benefit amount	Yes		See HDR PPT II (slide 13)
COB_FLAG	Char	1	Coordination of benefit flag	Yes		See HDR PPT II (slide 13)
CREATE_DT	Num	8	Created date		Lacview.Claim.Createdate	
DEDU_AMT	Num	8	Deducted amount		Lacview.Claim_mw.Totaldeduct	
DIAG1--DIAG20	Char	7	ICD diagnosis code		Plandata.Claimdiag.Codeid	
DISPOSITION	Char	3	Discharge status		Lacview.Claim.Discharge_status	
DIS_HR	Num	8	Discharge hour		Lacview.Claim.Dischargehour	
DOS_1	Num	8	Date of service		Lacview.Claim.Startdate	
ELIG_AMT	Num	8	Eligible amount		Lacview.Claim.Eligibleamt	
EMERGENCY	Num	8	Emergency flag (0/1)		Lacview.Claim.Emergency	
END_DT	Num	8	End date of service		Lacview.Claim.Enddate	
ER_TO_IP**	Char	1	ER ends to INP	Yes		
FORM_TYPE	Char	2	Form type		Lacview.Claim.Formtype	
FROM_ER*	Char	1	Admitted from ER	Yes		
ICD_FLAG	Char	1	ICD code flag ('0'=ICD10, '9'=ICD9)	Yes		See HDR PPT II (slide 12)
LOB	Num	8	Line of business		Lacview.Claim_info_basic_detail_Programid	
LOG_DT	Num	8	Log date		Lacview.Claim.Logdate	
LTC	Char	1	Long term care flag (0/1)		Lacview.Claim.Isltc	

* QNXT_HDR_INPSNF Specific Variable
** QNXT_HDR_OTHER Specific Variable

QNXT_HDR_INPSNF and QNXT_HDR_OTHER continued

Variables	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
MAX_AWP	Num	8	The maximum contract allowable amount	Yes		See HDR PPT II (slide 13)
MAX_RB_DT*	Num	8	For HEDIS data team use. Maximum room and board date based on HEDIS definition	Yes		See HDR PPT I (slide 9) See HDR PPT II (slide 5, 6)
MEMBER_NO	Char	15	Member ID assigned by LA Care system		Encounters.Members.MHC_member_no	LAC internal assigned ID, by MHC or QNXT system
MEM_AMT	Num	8	Member amount		Lacview.Claim.Totalmemamt	
MEM_PD_AMT	Num	8	Member paid amount		Lacview.Claim.Mempaidamt	
MIN_RB_DT*	Num	8	For HEDIS data team use. Minimum room and board date based on HEDIS definition	Yes		See HDR PPT I (slide 9) See HDR PPT II (slide 5, 6)
NPI	Char	12	Billing provider NPI		Lacview.Provider.Npi	
ONSET_DT	Num	8	Date of onset		Lacview.Claim.Dateonset	
OOA	Char	1	Out of area		Lacview.Claim.Ooa	
PAID_DT	Num	8	Claim paid date		Lacview.Claim.Paiddate	
PATIENT_ID	Char	15	Patient identification in hospital		Lacview.Claim.Memrecnmb	
PCP_FLAG	Char	12	Primary care physician (Yes/No)		Lacview.Affiliation.Pcp	Yes, if billing provider is PCP
PD_AMT	Num	8	Paid claim amount	Yes		See HDR PPT II (slide 13)
PLAN_SUBMIT	Num	8	Plan submission		Lacview.Claim.Plansubmit	
POS_1	Char	3	Place of service		Lacview.Claimdetail.location	
PROC1—PROC10	Char	6	ICD procedure code		Plandata.Claimproc.Pcode	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See HDR PPT II (slide 12)
PRODUCT_CODE	Char	2	Line of business	Yes		See HDR PPT I (slide 11)
PROGRAM_ID	Char	15	Program identification		Lacview.Clm_info_basic_detail.Programid	
PROVIDER	Char	12	Billing provider ID		Lacview.Provider.Provider	
PROV_TYPE	Num	8	Provider type		Lacview.Provider.Prov_type	

* QNXT_HDR_INPSNF Specific Variable
** QNXT_HDR_OTHER Specific Variable

QNXT_HDR_INPSNF and QNXT_HDR_OTHER continued

Variables	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
REIMB_AMT	Char	6	Reimbursed amount		Lacview.Claim.Reimbersmedicareamt	
REJECT	Char	1	Rejected claim (Y/N)		Lacview.Claim.Reject	
REND_PROV	Char	12	Rendering provider ID		Lacview.Clm_info_basic_detail.Renderinprovid	
SPEC1--SPEC4	Char	3	Rendering provider specialty code		Lacview.Provspecialty.Spec1--Spec4	
SRVDAYS*	Num	8	Service days	Yes		See HDR PPT I (slide 10)
SRV_CAT	Char	6	Service category	Yes		See HDR PPT II (slide 8, 10, 11)
SRV_PROV	Char	15	Service provider		Lacview.Claim.Provid	
START_DT	Num	8	Start date of service		Lacview.Claim.Startdate	
STATUS	Char	10	Claim status		Lacview.Claim.Status	
STOPLOSS	Char	1	Stop loss insurance policy (Y/N)		Lacview.Claim.Isstoploss	
TYPE_BILL	Char	4	Billing type		Lacview.claim.Facilitycode Lacview.claim.Billclasscodev Lacview.claim.Frequencycode	'facilitycode' || 'billclasscodev' || 'frequencycode'
VOID_REASONID	Char	15	Void reason ID		Lacview.Claim.Voidreasonid	

* QNXT_HDR_INPSNF Specific Variable
** QNXT_HDR_OTHER Specific Variable

Tables: QNXT_DETAIL_INPSNF and QNXT_DETAIL_OTHER

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
BILL_AMT	Num	8	Claim billed amount on detail line		Lacview.Claimdetails.Claimamt	
CIN_NO	Char	12	Client index number		Lacview.Member.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
CL_ID	Char	15	Claim identification number: used to join hdr and detail tables together		Lacview.Claimdetails.Claimid	
COB_AMT	Num	8	Coordination of benefits amount		Lacview.Claimdetails.Cob_amt	
DOS	Num	8	Date of service		Lacview.Claimdetails.Dosfrom	
LINE_NO	Num	8	Line number of claim details		Lacview.Claimdetails.Claimline	
LINE_PRIORITY	Char	3	Line priority	Yes		See Detail PPT (slide 7)
LINE_SVCGRP	Char	8	Line of service group	Yes		See Detail PPT (slide 7)
MODIFIER_CD1-- MODIFIER_CD5	Char	2	Modifier code to CPT Codes		Lacview.Claimdetails_.Modcode1-- modcode5	
PD_AMT	Num	8	Claim paid amount		Lacview.Claimdetails.Amountpaid	
PROC_CD	Char	6	CPT/HCPCS procedure codes		Lacview.Claimdetails.Billservcode	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See Detail PPT (slide 5)
QTY_N	Num	8	Quantity associated with service code		Lacview.Claimdetails.Serviceunit	
REV_CD	Char	6	Revenue code		Lacview.Claimdetails.Revcode	
SRV_CAT	Char	6	Service category	Yes		See Detail PPT (slide 6, 7, 8)
THRU_DT	Num	8	End date of service		Lacview.Claimdetails.Dosto	

* QNXT_DETAIL_INPSNF Specific Variable
** QNXT_DETAIL_OTHER Specific Variable

4.0 ENCOUNTER DATA DICTIONARY

Table: ENC_CASE_INPSNF

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADJ_BILL_AMT_CASE	Num	8	Adjusted bill amount for the case	Yes		See CASE PPT I (slide 11)
ADM_DT	Date	8	Admission date	Yes		See CASE PPT I (slide 10)
ADM_MONTH	Char	6	Admission year and month, yyyymm	Yes		See CASE PPT I (slide 15)
APRDRG	Char	3	All patient refined diagnosis related group from 3M grouper	Yes		See CASE PPT II (slide 2, 3, 9-11)
APRDRG_WT	Num	8	APRDRG weight, defined by APRDRG and severity of illness from 3M	Yes		See CASE PPT II (slide 4-6, 9-11)
BP_CODE	Char	10	Business partners code		Encounter.Encounter_input_files.Bp_code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CASE_DX1--CASE_DX20	Char	8	ICD diagnosis codes. Distinct dx kept for each case from discharge claim to admission claim. Discharge dx takes priority over admission dx	Yes		See CASE PPT II (slide 15)
CASE_ID	Char	45	HOA Case Identification: Key to link case and header files	Yes		See CASE PPT I (slide 9)
CASE_PR1--CASE_PR10	Char	7	ICD procedure code		Encounter.Enc_icd9_procedures.Icd9_surg_raw	
CIN_NO	Char	20	Client index number		Encounter.Members.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
DIS_DT	Date	8	Discharge date	Yes		See CASE PPT I (slide 10)
DIS_STATUS	Char	2	Discharge status		Encounter.Encounters.Discharge_status	
DOB	Date	8	Member's date of birth		Encounter.Members.Dob	
FROM_ER	Char	1	Admitted from ER (Y/N)	Yes		
ICD_FLAG	Char	1	ICD code flag ('0'=ICD10; '9'=ICD9)	Yes		See CASE PPT II (slide 12)
MDC	Char	2	Major diagnostic categories from 3M grouper	Yes		See CASE PPT II (slide 7, 8)
MEMBER_NO	Char	20	Member ID assigned by MHC system		Encounter.Members.Mhc_member_no	LAC internal assigned ID, by MHC or QNXT system

ENC_CASE_INPSNF continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See CASE PPT I (slide 15)
PRODUCT_CODE	Char	5	Line of business		Encounter.Encounters.Product_code	
PROVIDER	Char	20	Bill_Prov, Bill_Prov_NPI, or Fac_NPI provider		Order of precedence **1** Encounter.Encounters.Bill_prov **2** Encounter.Encounters.Bill_prov_npi **3** Encounter.Encounters.Fac_npi	
RISK_MORTALITY	Char	1	Risk mortality (ROM) from 3M APRDRG grouper. The likelihood of dying	Yes		See CASE PPT II (slide 4-6, 9-11)
SEVERITY	Char	1	Severity of illness (SOI) from 3M APRDRG grouper	Yes		See CASE PPT II (slide 4-6, 9-11)
SEX	Char	5	Member's gender (F/M)		Encounter.Members.Gender	
SICK_BABY	Char	1	Sick baby indicator (Y/N)	Yes		See CASE PPT I (slide 9)
SRVDAYS_CASE	Num	8	Service days	Yes		See CASE PPT I (slide 13)
SRV_CAT	Char	6	Service category	Yes		See CASE PPT I (slide 9, 16-18) See HDR PPT II (slide 8, 10, 11)

Tables: ENC_HDR_INPSNF and ENC_HDR_OTHER

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADJUDICATION_STATUS	Char	1	Adjudication status		Encounter.Encounters.Adjudication_status	
ADMIT_DT_CLM*	Num	8	Admission date on claim		Encounter.Encounters.Calc_admit_date	
ADM_MONTH*	Char	6	Admission year and month, yyyymm	Yes		See HDR PPT I (slide 7)
BILLING_PROVIDER_RECID	Num	8	Billing provider record identification		Encounter.Encounters.Billing_provider_recid	Links to recid in Encounter.Provider_xref to get provider info
BILL_AMT	Num	8	Billed amount		Encounter.Encounters.Tot_billed_amt	
BILL_PROV	Char	12	Billing provider		Encounter.Encounters.Bill_prov	
BILL_PROV_FNAME	Char	35	Billing provider first name		Encounter.Encounters.Bill_Prov_fname	
BILL_PROV_LNAME	Char	60	Billing provider last name		Encounter.Encounters.Bill_Prov_lname	
BILL_PROV_NPI	Char	30	Billing provider NPI		Encounter.Encounters.Bill_Prov_npi	
BP_CODE	Char	10	Business partner code	Yes	Encounter.Encounter_input_files.Header_bp_code	This is back-mapped to a Header_BP_Code and Product_Code.
CASE_ID*	Char	45	HOA case identification: Key to link case and header files	Yes		See HDR PPT I (slide 7, 8) See CASE PPT I (slide 9)
CIN_NO	Char	12	Client index number		Encounter.Members.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
CLM_SPECIALTY	Char	15	Rendering provider specialty code	Yes		See HDR PPT II (slide 9)
CLM_SVCGRP	Char	8	Service group assigned to the claim based on detail leveled service group and dominance mapping	Yes		See HDR PPT II (slide 8, 10, 11)
DIAG1--DIAG20	Char	7	ICD diagnosis code		Encounter.Enc_icd9_diagnoses.Dx_code_raw	
CL_ID	Char	15	Claim identification number: used to join hdr and detail tables together.		Encounter.Encounters.Recid	put (recid,z15.0)
DISCH_DT_CLM*	Num	8	Discharge date		Encounter.Encounters.Calc_dsch_date	

* ENC_HDR_INPSNF Specific Variable
** ENC_HDR_OTHER Specific Variable

ENC_HDR_INPSNF and ENC_HDR_OTHER continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
DISPOSITION	Char	2	Discharge status		Encounter.Encounters.Discharge_status	
DOS_1	Date	8	Date of service		Encounter.Encounters.Calc_beg_dos	
ER_TO_IP**	Char	1	ER ends to INP	Yes		
FAC_NPI	Char	12	Facilities practitioners NPI		Encounter.Encounters.Facility_npi	
FILE_FORMAT_CODE	Char	15	Encounter input file format code		Encounter.Encounter_input_fles.File_format_code	
FORMAT_CODE	Char	1	File format code		Encounter.Encounters.Format_code	
FROM_ER*	Char	1	Admitted from ER	Yes		
HEADER_BP_CODE	Char	10	Business partner code		Encounter.Encounter_input_files.Header_bp_code	Raw HEADER_BP_CODE
ICD_FLAG	Char	1	HOA case identification: Key to link case and header files	Yes		See HDR PPT II (slide 12)
MAX_RB_DT*	Num	8	For HEDIS data team use, Maximum room and board date based on HEDIS definition	Yes		See HDR PPT II (slide 5, 6)
MEMBER_NO	Char	15	Member ID assigned by LA Care system		Encounter.Members.Mhc_Member_no	LAC internal assigned ID, by MHC or QNXT system
MIN_RB_DT*	Num	8	For HEDIS data team use. Minimum room and board date based on HEDIS definition	Yes		See HDR PPT II (slide 5, 6)
OTHER_PROV	Char	30	Other provider (Rx provider)		Encounter.Encounters.Other_prov	
OTHER_PROVIDER_RECID	Num	8	Other provider record identification		Encounter.Encounters.Other_Provider_recid	links to recid in encounter.provider_xref to get provider info
PCP_ID	Char	20	Primary care provider identification (**NOT** MHC PCP)		Encounter.Encounters.Pcp_id	
PCP_LICENSE	Char	25	Primary care provider license number		Encounter.Encounters.Pcp_license	
POS_1	Char	3	Place of service		Encounter.Ub92_claims.Type_of_bill	First 2 char of type of bill
PPG_CODE	Char	10	Participating physician group code		Encounter.Encounters.Ppg_code	
PROC1—PROC10	Char	6	ICD procedure code		Encounter.Enc_icd9_procedures.icd9_Surg_raw	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See HDR PPT II (slide 12)
PRODUCT_CODE	Char	5	Line of business		Encounter.Encounters.Product_code	

* ENC_HDR_INPSNF Specific Variable
** ENC_HDR_OTHER Specific Variable

ENC_HDR_INPSNF and ENC_HDR_OTHER continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
PROVIDER**	Char	20	Provider ID. Can be Bill_Prov, Bill_Prov_Npi, or Fac_Npi from Encounters		Order of precedence **1** Encounter.Encounters.Bill_prov **2** Encounter.Encounters.Bill_prov_npi **3** Encounter.Encounters.Fac_npi	
RECEIPT_DT	Num	8	Receipt date		Encounter.Encounters.Eif_date_received	
RECORD_STATUS	Char	1	Record status		Encounter.Encounters.Record_status	
RENDERING_PROVIDER_RECID	Num	8	Rendering provider record identification		Encounter.Encounters.Rendering_provider_recid	Links to recid in Encounter.Provider_xref to get provider info
REND_PROV	Char	12	Rendering provider		Encounter.Encounters.rendering_provider	
REND_PROV_FNAME	Char	35	Rendering provider first name		Encounter.Encounters.rend_Prov_fname	
REND_PROV_LICENSE	Char	30	Rendering provider license number		Encounter.Encounters.rend_Prov_license	
REND_PROV_LNAME	Char	60	Rendering provider last name		Encounter.Encounters.rend_Prov_lname	
REND_PROV_NPI	Char	30	Rendering provider national provider index		Encounter.Encounters.rend_Prov_npi	
REND_PROV_TYPE	Char	2	Rendering provider type		Encounter.Encounters.rend_Prov_type	
SPECIALTY_CD	Char	3	Rendering provider specialty code		Encounter.Specialty_codes.Specialty_code	LAC proprietary specialty codes, e.g., 99=Unknown
SPEC_CODE_RENDERING_RECID	Num	8	Specialty code of rendering provider identification		Encounter.Specialty_codes.Recid	Links to Encounter.Specialty_Codes.Recid
SRVDAYS*	Num	8	Service days	Yes		See HDR PPT I (slide 10)
SRV_CAT	Char	6	Service category	Yes		See HDR PPT II (slide 8, 10, 11)
THRU_DT	Date	8	End date of service		Encounter.Encounters.Calc_end_dos	
TYPE_BILL	Char	4	Billing type		Encounter.Ub92_claims.Type_of_bill	

* ENC_HDR_INPSNF Specific Variable
** ENC_HDR_OTHER Specific Variable

Tables: ENC_DETAIL_INPSNF and ENC_DETAIL_OTHER

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
CIN_NO	Char	20	Client index number		Encounter.Members.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
CL_ID	Char	15	Claim identification number: used to join hdr and detail tables together		Encounter.Encounters.Recid	
CRN_RAW	Char	38	CRN raw by submitter		Encounter.Encounter_Lines.Crn_raw	
DOS	Date	8	Calculate beginning date of service on detail line		Encounter.Encounter_Lines.Beg_dos	
LINE_NO	Num	8	Line control number		Encounter.Encounter_lines.Line_control_no	
LINE_PRIORITY	Char	3	Priority in each line service group for ranking records	Yes		See Detail PPT (slide 7)
LINE_SVCGRP	Char	8	Service group on each line derived from procedure and revenue codes	Yes		See Detail PPT (slide 7)
MODIFIER_CD	Char	2	Modifier code to CPT code		Encounter.Modifier_details.Modifier_raw	
PROC_CD	Char	5	CPT/HCPCS procedure codes		Encounter.Encounter_lines.Proc_code	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		See Detail PPT (slide 7)
QTY_N	Num	8	Quantity associated with service code		Encounter.Encounter_lines.Quantity	
REV_CD	Char	4	Revenue code		Encounter.Encounter_lines.Revenue_code	
SRV_CAT	Char	6	Service category	Yes		See Detail PPT (slide 6, 7, 8)
STATUS_DET	Char	1	Record status on detail line		Encounter.Encounter_lines.Record_status	
THRU_DT	Date	8	End date of service		Encounter.Encounter_lines.End_dos	

* ENC_DETAIL_INPSNF Specific Variable
** ENC_DETAIL_OTHER Specific Variable

5.0 MEMBERSHIP DATA DICTIONARY

Table: MEMMO

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
AID_CODE*	Char	2	Code used to check Medi-Cal recipient's eligibility to service		1 Mhdw.Fame_Raws_Dly.Aid_code 2 Mhdw.Fame_Raws.Aid_code	
BP	Char	10	Business partner code		Encounter.Members.Bp_code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CAPITATED_AID_CODE*	Char	2	Capitated Medi-Cal recipient's eligibility to service		1 Mhdw.Fame_Raws_Dly.Capitated_aid_code_cur 2 Mhdw.Fame_Raws.Capitated_aid_code_cur	
CIN_NO	Char	16	Client index number		Encounter.Members.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
DUAL	Char	3	Dual eligibility flag	Yes		See Memmo PPT (slide #)
ENROLL_STATUS_CODE *	Char	2	Healthcare plan enrollment status code from the state		1 Mhdw.Fame_Raws_Dly.Enroll_status_code_cur 2 Mhdw.Fame_Raws.Enroll_status_code_cur	
MEDICARE_A*	Char	1	Medicare plan A eligibility (Y/N)		1 Mhdw.Fame_Raws_Dly.Medicare_status_code_a_cur 2 Mhdw.Fame_Raws.Medicare_status_code_a_cur	Set to 'Y' if Medicare_status_code_a_cur not in null, 0 or 9 otherwise 'N'
MEDICARE_B*	Char	1	Medicare plan B eligibility (Y/N)		1 Mhdw.Fame_Raws_Dly.Medicare_status_code_b_cur 2 Mhdw.Fame_Raws.Medicare_status_code_b_cur	Set to 'Y' if Medicare_status_code_b_cur not in null, 0 or 9 otherwise 'N'
MEM	Num	8	Member number counter;1 for each record	Yes		See Memmo PPT (slide #)
MHC_MEMBER_NO	Char	16	Member ID assigned by LA Care system		Encounter.Members.Mhc_member_no	LAC internal assigned ID, by MHC (MEM####### or QNXT (U#########)system
PCP	Char	32	Primary care physician		Encounter.Members.Pcp	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		
PRODUCT_CODE	Char	2	Line of business		Encounter.Members.Product_code	
SITE_NO	Char	16	Site number		Encounter.Site_trans_history.Member_site_no	
SPD	Char	1	Senior Persons with Disability	Yes	Encounter.Members.Group_code Mhdw.Fame_Raws_Dly.Aid_code Mhdw.Fame_Raws.Aid_code	SPD flag is based on 2 things: 1. For Medical(product_code 10) it is based from segment , if SPD then 'Y' otherwise 'N'.

						2. For non-Medical(including CMC), it is based from a specific list of aid codes(please see below) that has been existing here at LA Care. %let SPD_AidCode='1E','1H','1X','1Y','10','14','16','17','2E','2H','20','24','26',' 27','36','6A','6C','6E', '6G','6H','6J','6N','6P','6R','6V','6W','6X','6Y','60','64','66','67' '68';
YEARMTH	Char	8	Year month of enrollment segment	Yes		Breakdown by month from encounter.members.enroll_date, encounter.disenroll_history.enroll_date and encounter.disenroll_history.disenroll_date

* All variables sourced from FAME_RAWS/FAME_RAWS_DLY will be refreshed for current month + past 12 month at each month's ETL process.

Table: MBR_ENROLL_SEG

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
BP_CODE	Char	4	Business partner code		Encounter.Members.Bp_code	On or after 1/1/2012 for reporting/analysis, "COMM" discontinued and should be consolidated to "MCLA"
CIN_NO	Char	20	Client index number		Encounter.Members.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
DISENROLL_DT	Date	8	Dis-enrolled date		Encounter.Disenroll_history.Disenroll_dt	
DISENROLL_REASON	Char	20	Reason for disenrollment		Encounter.Disenroll_history.Disenroll_reason	
ENROLL_DT	Date	8	Enrolled date		Encounter.Disenroll_history.Enroll_dt	
GROUP_CODE	Char	20	Group code		Encounter.Members.Group_code	
IND_ERR	Char	30	Error Indicator	Yes		See Memmo PPT (slide #)
MHC_LINE_NO	Num	8	MHC line number		Encounter.Site_trans_history.Mhc_line_no	This attribute tracks the line number for the member's history records.
MHC_LINE_SITE	Num	8	MHC line site		Encounter.Site_trans_history.Mhc_line_site	
MHC_MEMBER_NO	Char	20	Member ID assigned by LA Care system		Encounter.Members.Mhc_member_no	LAC internal assigned ID, by MHC or QNXT system
PCP	Char	32	Primary care physician		Encounter.Members.Pcp	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		
PRODUCT_CODE	Char	2	Line of business		Encounter.Members.Product_code	
SEGMENT	Char	#	Member Segmentationi		Encounter.Members.Group_code Mhdw.Fame_Raws_Dly.Capitated_aid_code_cur Mhdw.Fame_Raws. Capitated_aid_code_cur	For July 2016 onwards this is defined by Employer Group Code (GROUP_CODE). For before July 2016, I is based on CAPITATED_AID_CODE
SITE_BEG_DT	Date	8	Site begin date		Encounter.Site_trans_history.Begin_date	
SITE_END_DT	Date	8	Site end date		Encounter.Site_trans_history.End_date	
SITE_NO	Char	20	Site number		Encounter.Site_trans_history.Site_no	The site code that a member is assigned to. It is the combination of the PCP license and the suffix code of the Plan Partners.

Table: RX_FROM_2014

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
ADJUDICATION_STATUS	Char	1	Adjudication status		Encounter.Encounters.Adjudication_status	
BP_CODE	Char	10	Business partners code	YES	Encounter.Encounter_input_files.Header_bp_code	IF (HEADER_BP_CODE ='COMM' AND PRODUCT_CODE='10') THEN BP_CODE ='MCLA'; /*'COMMUNITY' OLD RX VENDOR IN2011*/ ELSE IF (HEADER_BP_CODE ='MEDI' AND PRODUCT_CODE='10') THEN BP_CODE ='MCLA'; /*'MEDIMPACT' OLD RX VENDOR IN2014*/ ELSE IF (HEADER_BP_CODE ='NAVI' AND PRODUCT_CODE='10') THEN BP_CODE ='MCLA'; /*'NAVI' NEW RX VENDOR IN2015*/ ELSE IF (HEADER_BP_CODE ='TRAN' AND PRODUCT_CODE='10') THEN BP_CODE ='MCLA'; /*'TRAN' NEW HEADER BP CODE IN2017*/ ELSE IF (HEADER_BP_CODE ='MHC' AND PRODUCT_CODE='10') THEN BP_CODE ='MCLA'; /*'MHC' NEW HEADER BP CODE IN2017*/ ELSE IF (PRODUCT_CODE='20') THEN BP_CODE ='HFP'; ELSE IF (PRODUCT_CODE='40') THEN BP_CODE ='IHSS'; ELSE IF (PRODUCT_CODE='60') THEN BP_CODE ='HKID';

						ELSE IF (
						
						        PRODUCT_CODE='70') THEN BP_CODE ='SNP';
						ELSE IF (
						
						        PRODUCT_CODE='80') THEN BP_CODE ='CMC';
						ELSE IF (
						
						        PRODUCT_CODE='90') THEN BP_CODE ='HBEX';
						ELSE BP_CODE = HEADER_BP_CODE;

CIN_NO	Char	20	Client index number		Encounter.Members.Cin_no	For products 10, 20, 40, 70, 80, CIN_NO stores state assigned ID, for product 60 and 90 CIN_NO stores LAC internal assigned ID
CRN_RAW	Char	38	CRN raw by submitter		Encounter.Encounter_lines.Crn_raw	
DAYS_SUPPLY	Num	8	Days' supply		Encounter.Encounter_lines.Days_supply	
DISPENSING_FEE	Num	8	Dispensing fee		Encounter.Encounter_lines.Dispensing_fee	
DRUG_MED_SUPPLY_FLAG	Char	1	Drug/medical supply flag		Encounter.Encounter_lines.Drug_med_supply_flag	
DRUG_CLASSIFICATION_NDDF	Char	1	Drug classification		Encounter.Ndc_codes.Drug_classification_nddf	
DRUG_TYPE	Num	8	Drug type		Encounter.Encounter_lines.Drug_type	
ENC_RECID	Num	8	Encounter record ID		Encounter.Encounter_lines.Enc_recid	
FORMULARY_STATUS	Char	1	Formulary status		Encounter.Encounter_lines.Formulary_status	
GCN_PRODUCT_CODE	Char	18	Generic product code		Encounter.Encounter_lines.Gnc_product_code	
GENERIC_DRUG_FLAG	Char	1	Generic drug flag		Encounter.Ndc_codes.Generic_drug_flag	
HEADER_BP_CODE	Char	10	Business partner code		Encounter.Encounter_input_files.Header_bp_code	Raw HEADER_BP_CODE
INGREDIENT_COST	Num	8	Prescription ingredient cost		Encounter.Encounter_lines.Ingredient_cost	
LABEL_NAME	Char	50	Drug name		Encounter.Ndc_codes.Label_name	

RX_FROM_2014 continued

Variable	Type	Len	Descriptions	HOA Derived	Schema.Table.Field	Notes
LINE_BILLED_AMT	Num	8	Line billed amount		Encounter.Encounter_lines.Line_billied_amt	
LINE_NO	Num	8	Line number		Encounter.Encounter_lines.Line_control_no	
LINE_REIMB_AMT	Num	8	Line reimbursement amount		Encounter.Encounter_lines.Line_reimb_amt	
MHC_MEMBER_NO	Char	20	Member ID assigned by LA Care system		Encounter.Members.Mhc_member_no	LAC internal assigned ID, by MHC or QNXT system
NDC	Char	48	National drug code		Encounter.Encounter_lines.Ndc	
OTHER_PROV	Char	30	Other provider		Encounter.Encounters.Other_prov	
OTHER_PROVIDER_RECID	Num	8	Other provider record id (link to recid in encounter.provider_xref to get provider info)		Encounter.Encounters.Other_provider_recid	Link to recid in encounter.provider_xref to get provider info
OTHER_PROV_NPI	Char	30	Other provider national provider index		Encounter.Encounters.Other_prov_npi	
PACKAGE_SIZE	Num	8	Package size		Encounter.Ndc_codes.Package_size	
PRESCRIPTION_NO	Char	12	Prescription number		Encounter.Encounter_lines.Perscription_no	
PROCESS_DATE	Date	8	HOA ETL process date	Yes		
PRODUCT_CODE	Char	5	Line of business		Encounter.Encounters.Product_code	
QUANTITY	Num	8	Prescription quantity		Encounter.Encounter_lines.Quantity	
RECORD_STATUS	Char	1	Record status		Encounter.Encounters.Record_status	
REFILL_FLAG	Char	1	Refill flag		Encounter.Encounter_lines.Refill_flag	
RX_SERV_DT	Num	8	Prescription service date		Encounter.Encounter_lines.Calc_beg_dos	
STRENGTH_SIZE	Char	30	Strength size		Encounter.Ndc_codes.Strength_size	
TOT_BILLED_AMT	Num	8	Total billed amount		Encounter.Encounters.Total_billed_amt	
YEARMTH	Char	6	HOA year month character date, yyyymm	Yes		Dos/rx_serv_dt See Rx PPT (slide #)

7.0 DATA SOURCES

Table Sources

Encounters

Schema.Table	Oracle Schema	Table Name
ENCOUNTER.encounters	ENCOUNTER	encounters
ENCOUNTER.encounter_lines	ENCOUNTER	encounter_lines
ENCOUNTER.encounter_input_files	ENCOUNTER	encounter_input_files
ENCOUNTER.ub92_claims	ENCOUNTER	ub92_claims
ENCOUNTER.claim_type_codes	ENCOUNTER	claim_type_codes
ENCOUNTER.speciality_codes	ENCOUNTER	speciality_codes
ENCOUNTER.members	ENCOUNTER	members
ENCOUNTER.modifier_details	ENCOUNTER	modifier_details
ENCOUNTER.enc_icd9_diagnoses	ENCOUNTER	enc_icd9_diagnoses
ENCOUNTER.enc_icd9_procedures	ENCOUNTER	enc_icd9_procedures

Claims MHC

Schema.Table	Oracle Schema	Table Name
Encounter.mhc_master_claim	Encounter	mhc_master_claim
Encounter.mhc_master_claim_detail	Encounter	mhc_master_claim_detail
Encounter.members	Encounter	members
Encounter.mhc_master_claim_diagnosis	Encounter	mhc_master_claim_diagnosis
Encounter.mhc_master_claim_surg_code	Encounter	mhc_master_claim_surg_code

Claims QNXT

Schema.Table	Oracle Schema	Table Name
PLANDATA.provspecialty	PLANDATA	provspecialty
PLANDATA.license	PLANDATA	license
LACVIEW.member_mw	LACVIEW	member_mw
LACVIEW.claim_mw	LACVIEW	claim_mw
LACVIEW.claim_info_basic_detail_vw	LACVIEW	claim_info_basic_detail_vw
LACVIEW.claimdetail_mw	LACVIEW	claimdetail_mw
PLANDATA.claimdiag	PLANDATA	claimdiag
PLANDATA.claimproc	PLANDATA	claimproc
PLANDATA.claim	PLANDATA	claim
PLANDATA.claimdetail	PLANDATA	claimdetail

Pharmacy

Schema.Table	Oracle Schema	Table Name
ENCOUNTER.encounters	ENCOUNTER	encounters
ENCOUNTER.encounter_lines	ENCOUNTER	encounter_lines
ENCOUNTER.encounter_input_files	ENCOUNTER	encounter_input_files
ENCOUNTER.members	ENCOUNTER	members
ENCOUNTER.NDC_CODES	ENCOUNTER	ndc_codes

Membership

Schema.Table	Oracle Schema	Table Name
Encounter.members	Encounter	MEMBERS
Encounter.site_trans_history	Encounter	SITE_TRANS_HISTORY
Encounter.disenroll_history	Encounter	DISENROLL_HISTORY
MHDW.fame_raws	MHDW	FAME_RAWS

Extract Criteria

Data are extracted from source systems according to the following criteria:

Encounters:
       where record_status not void (V)
       AND
       encpr@ENCOUNTER_INPUT_FILES.BP_FILE_NAME not like '%PCLM%'
       AND
       file_format_code NE 'PCLM'
       AND
       NDC is Null

MHC:
       encpr@mhc_master_claim – where status not VOID(V) or Delete(D) and Reversed records (cl_id that starts with the letter 'R')

QNXT:
       plandata@claim – where status not void or reversed.

Pharmacy:

       where record_status not void (V)
       AND
       encpr@ENCOUNTER_INPUT_FILES.BP_FILE_NAME not like '%PCLM%'
       AND
       file_format_code NE 'PCLM'
       AND
       NDC is not Null

8.0 JOINING DATA

Joining Claims and Encounters to MEMMO

MEMMO should be joined to HOA claims/encounters by *cin_no* and/or *product_code*.

Example:

```
proc sql;
create table qnxt_joined_to_memmo as
select DISTINCT a.case_id
from qnxt.qnxt_case_inpsnf a
inner join mem.memmo b
    on a.cin_no=b.cin_no
    and a.product_code=b.product_code;
```

Please note: MEMMO has a small number of duplicates (about half percent per month) of dups by cin_no and product_code. To avoid this, the `DISTINCT` keyword was included above. Other methods for avoiding duplicates could be used instead, such as sorting MEMMO nodupkey before joining.

Joining Case, Header and Detail within Claims and Encounters

One CASE can contain multiple header claims and one HEADER claim can have multiple detail lines.

Examples:

To join CASE to HEADER use CASE_ID:

```
proc sql;
create table qnxt_case_joined_to_header as
select a.case_id, b.cl_id
from qnxt.qnxt_case_inpsnf a
left join qnxt.qnxt_hdr_inpsnf b
on a.case_id=b.case_id;
```

To join HEADER to DETAIL use CL_ID

```
proc sql;
create table qnxt_header_joined_to_detail as
select a.cl_id, b.line_no
from qnxt.qnxt_hdr_inpsnf a
left join qnxt.qnxt_detail_inpsnf b
on a.cl_id=b.cl_id;
```

Unique Keys in Each Dataset

Table	Unique Key
CLM_CASE_INPSNF	CASE ID
CLM_DETAIL_INPSNF	CL_ID, LINE _NO
CLM_DETAIL_OTHER	CL_ID, LINE _NO
CLM_HDR_INPSNF	CL_ID
CLM_HDR_OTHER	CL_ID
QNXT_CASE_INPSNF	CASE ID
QNXT _DETAIL_INPSNF	CL_ID, LINE _NO
QNXT _DETAIL_OTHER	CL_ID, LINE _NO
QNXT _HDR_INPSNF	CL_ID
QNXT _HDR_OTHER	CL_ID
ENC_CASE_INPSNF	CASE ID
ENC_DETAIL_INPSNF	CL_ID, LINE _NO
ENC_DETAIL_OTHER	CL_ID, LINE _NO
ENC_HDR_INPSNF	CL_ID
ENC_HDR_OTHER	CL_ID
MEMMO[1]	CIN_NO, YEARMTH

---

[1] Please note there are a small number of duplicates within each YEARMTH of CIN_NO's. About half a percent of the CIN_NO's in each YEARMTH are duplicates. When joining, please dedup or use another technique for avoiding duplicates. Please see the section 'Joining Claims and Encounters to MEMMO' for more information.

9.0 QUALITY CONTROL

The HOA Repository is checked in detail each month before releasing. Following are a list of the checks performed each refresh:

MEMMO

1) Check restatement in new refresh vs. previous by membership month, product_code, segment and dual status.
2) Check for any fluctuations in the distributions of any of MEMMO's columns in the new refresh vs. previous.
3) Check that variables that should never be missing, such as CIN_NO, are never missing
4) Check percent missing of all columns are stable from refresh to refresh
5) Check trend in membership over past several years, for all membership grouped together as well as by Line of Business, Segment and Business Partner.
6) Check for any fluctuations in the distributions by yearmth of any of MEMMO's columns in the new refresh vs. previous (similar to item 2 but more detailed)

Claims, Encounters and Rx

1) Check for any fluctuations in the distributions of all columns in the new refresh vs. previous.
2) Check there are no duplicates by unique Keys appropriate to each dataset (please see "Unique Keys in Each Dataset" table in this document)
3) Check percent missing of all columns are stable from refresh to refresh
4) Check data read in during extract at beginning of process matches countwise to data finally deposited in Repository
5) Check counts of all diagnoses and procedures by icd/cpt code never decreases in new refresh vs. previous, i.e. we should never be losing codes we previously had.
6) Check for any fluctuations in the distributions of all columns by yearmth in the new refresh vs. previous (similar to item 1 but more detailed)
7) Check record counts by yearmth in the new refresh vs . previous to confirm data is increasing in a consistent pattern.
8) Check counts by common combinations of variables in the new fresh vs. the previous and investigate large fluctuation, e.g. check counts by product_code and bp in the new fresh vs. previous for consistency

10.0 ATTRIBUTE LISTS AND FORMATS

MHC Claims Attribute List/Formats

BP_CODE* (clm_case_inpsnf / clm_hdr_inpsnf / clm_hdr_other)

BCSC = Anthem Blue Cross
CFST = Care 1st
COMM = Community Health Plan (Terminated at the end of 2011)*
HFP = Healthy Family
HKID = Healthy Kid
IHSS = In-Home Support Services (PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union)
KAIS = Kaiser
LAHF = LA Care Healthy Families
MAXI = Maxicare Health Plan
MCLA = L.A. Care Medi-Cal Direct
SNP = Special Needs Plan
TOWR = Tower Health Plan
UNTD = United Health Plan

*Consolidate "COMM" into "MCLA" on and after 1/1/2012

CLM_SVCGRP (clm_hdr_inpsnf / clm_hdr_other)

ABOR_PHY = Abortion
ALLGTST = Allergy Testing
AMBUL = Ambulance
BLOOD = Blood and Plasma
CHEMO = Chemotherapy
CONSULT = Consults
DENTAL = Dental
DIAGNOS = Diagnostic
DME = Durable Medical Equipment
ER_FAC = ER Facility
ER_PHY = ER Physician
F_SP_CHG = Facility Special Charge
HEARING = Hearing
HEMO_DIA = Hemodialysis
HLTH_EDU = Health Education
HM_HLTH = Home Health Services
HOSPICE = Hospice
IMMU = Immunization
INJECT = Injectable
INP = Inpatient
IPREH_CD = I/P Rehab Facility-Alcohol/DRG
IP_DETOX = Inpatient Detoxification
IP_MAT = Inpatient Maternity
IP_PSY_F = Inpatient Psych Facility
IP_PSY_P = Inpatient Psych Physician
IP_REHAB = I/P Rehab Facility-Alcohol/DRG
LABOR = Labor and Delivery
LAB_PATH = Lab Pathology
MAT_PHY = Maternity Physician Delivery
OFF_VST = Office Visit
OP_MH = Outpatient Mental Health
OP_VST = Hospital Visit
ORTHO = Orthotics
OSTOMY = Ostomy/Colostomy
PHY_THER = Phy, Spc, Occ, Cardiac Therapy
PRESCRIP = Prescription Items
PROSTH = Prosthetics
RADIO = Radiology
RAD_THER = Radiation Therapy
SNF = Skilled Nursing Facility
SURG_FAC = Surgery Facility
SURG_PHY = Surgery Physician
S_SRVTRT = Special Services and Treatment
TRT_OBS = Treatment/Observation Room

DIS_STATUS (clm_case_inpsnf)

00 = Still Under Care
01 = Home
02 = Other Hospital
03 = Skilled Nursing Facility
04 = ICF
06 = Home Health
07 = AMA
14 = Hospice
20 = Exp Hospital
30 = Still In
40 = Exp Home
41 = Exp Hospital
42 = Exp, Unk Place
50 = Hospice
51 = Hospice
61 = Swing Bed
62 = Rehab-Inpatient
63 = Mdcare Ltc Hospital
64 = Mdcare Ltc Facility
65 = Psy Hospital

LINE_SVCGRP (clm_detail_inpsnf / clm_detail_other)

ABOR_PHY = Abortion
ALLGTST = Allergy Testing
AMBUL = Ambulance
BLOOD = Blood and Plasma
CHEMO = Chemotherapy
CONSULT = Consults
DENTAL = Dental
DIAGNOS = Diagnostic
DME = Durable Medical Equipment
ER_FAC = ER Facility
ER_PHY = ER Physician
F_SP_CHG = Facility Special Charge
HEARING = Hearing
HEMO_DIA = Hemodialysis
HLTH_EDU = Health Education
HM_HLTH = Home Health Services
HOSPICE = Hospice
IMMU = Immunization
INJECT = Injectable
INP = Inpatient
IPREH_CD = I/P Rehab Facility-Alcohol/DRG
IP_DETOX = Inpatient Detoxification
IP_MAT = Inpatient Maternity
IP_PSY_F = Inpatient Psych Facility
IP_PSY_P = Inpatient Psych Physician
IP_REHAB = I/P Rehab Facility-Alcohol/DRG
LABOR = Labor and Delivery
LAB_PATH = Lab Pathology
MAT_PHY = Maternity Physician Delivery
OFF_VST = Office Visit
OP_MH = Outpatient Mental Health
OP_VST = Hospital Visit
ORTHO = Orthotics
OSTOMY = Ostomy/Colostomy
PHY_THER = Phy, Spc, Occ, Cardiac Therapy
PRESCRIP = Prescription Items
PROSTH = Prosthetics
RADIO = Radiology
RAD_THER = Radiation Therapy
SNF = Skilled Nursing Facility
SURG_FAC = Surgery Facility
SURG_PHY = Surgery Physician
S_SRVTRT = Special Services and Treatment
TRT_OBS = Treatment/Observation Room

POS_1 (clm_hdr_inpsnf / clm_hdr_other)

11 = 11-Office
12 = 12-Hm hlth
21 = 21-Hosp/IP
22 = 22-Hosp/OP
23 = 23-Hosp/ER
31 = 31-SNF
24 = 24-SurgCtr
34 = 34-Hospice
54 = 54-Interm care fac
65 = 65-ESRD fac
99 = 99-UNK

PRODUCT_CODE (clm_case_inpsnf / clm_hdr_inpsnf / clm_hdr_other)

10 = Medi-Cal
20 = Healthy Family Plan
40 = PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union /IHSS, In-Home Support Services
60 = Healthy Kids
70 = Dual Eligible Special Needs Plan
80 = Cal-Medi Connect
90 = LA Care Covered/Health Benefits Exchange
 -1 = Other

RISK_MORTALITY (clm_case_inpsnf)

0
1 = Minor
2 = Moderate
3 = Major
4 = Extreme

SEVERITY (clm_case_inpsnf)

0
1 = Minor
2 = Moderate
3 = Major
4 = Extreme

STATUS (clm_hdr_inpsnf / clm_hdr_other)

A = Accept
E = Approved
P = Potential Duplicate
S = Suspended
X = Denied

SRV_CAT (clm_case_inpsnf)

01Ip_A = Ip Acute
02Ip_D = Ip Detox
03Ip_R = Ip Rehab
04Snf = Snf
05Icf = Interm Care
08Hosp = Hospice
09Er_F = Er_Fac
10Sg_F = Surg_Fac
11Blod = Blood Serv
12Hh = Home Hlth
13R_Th = Radiology Therapy
14Ambu = Ambulance
15Airt = Air Ambulance
16Chir = Chiropractice
17Visi = Vision
18Dent = Dental
19Dme = Dme
21Haid = Hearing Aid
22Rx = Prescription Items
23Phys = Phys Serv
24Sg_P = Surg_Phy
26Radi = Radiology
27Labp = Lab Pathology
28Op_R = Op_Rehab
29Er_P = Er_Phy
30Dial = Dialysis
31Diag = Diagnostic Testing
32Inje = Injectable
33Chem = Chemotherapy
34Obs= Obs Room

SRV_GRP (clm_hdr_inpsnf / clm_hdr_other)

Abor_Phy = Abortion
Acupunc = Acupuncture
Allgtrt = Allergy Treatment
Allgtst = Allergy Testing
Ambul = Ambulance
Ar_Insem = Artificial Insemination
Blood = Blood & Plasma
Chemo = Chemotherapy
Chiro = Chiropractic
Consult= Consults
Dental = Dental
Diagnos = Diagnostic
Dme = Dme
Er_Fac = Er Facility
Er_Phy = Er Physician
Eye_Glas = Eye Glasses
F_Sp_Chg = Facility Special Charge
Ft_Care = Foot Care
Hear_Aid = Hearing Aid
Hearing = Hearing
Hemo_Dia = Hemodialysis
Hh_Phys = Home Care Physicians
Hlth_Edu = Health Education
Hm_Hlth = Home Health Services
Hospice = Hospice
Immu = Immunization
Infert = Infertility
Inject = Injectable
Inp = Inpatient Hospital
Ip_Detox = Inpatient Detoxification
Ip_Mat = Inpatient Maternity
Ip_Psy_F = Inpatient Psych Facility
Ip_Psy_P = Inpatient Psych Physician
Ip_Rehab = I/P Rehab Facility-Med/Phsical
Ipreh_Cd = I/P Rehab Facility-Alcohol/Drg
Iud = Iud
Lab_Path = Lab
Labor = Labor And Delivery
Mat_Phy = Maternity Physician Delivery
Norplant = Norplant
Off_Vst = Office Visit
Op_Mh = Outpatient Mental Health
Op_Vst = Hospital Visit
Ortho = Orthotics
Ostomy = Ostomy/Colostomy
Phy_Ther = Phy, Spc, Occ, Cardiac Therapy
Prescrip = Prescription Items
Prosth = Prosthetics
Rad_Ther = Radiation Therapy
Radio = Radiology
Rmv_Iud = Insert/Rmv Iud/Bc Implant
S_Srvtrt= Special Services & Treatments
Snf = Inpatient Snf
Surg_Fac = Surgery Facility
Surg_Phy = Surgery Physicians (Cpt Code)
Trt_Obs = Treatment/Observation Room
Tub_Phy = Tubal
Vase_Phy = Vasectomy
Vision = Vision
Well_Bab = Well Baby Care
Well_Vst = Periodic Exams >Age 4
099 = #N/A

TYPE_BILL (clm_hdr_inpsnf / clm_hdr_other)

11 = 11(IP-Part A)
12 = 12(IP-Part B)
13 = 13(OP)
14 = 14(OP diagnostic-no treatment plan)
21 = 21(SNF-Part A)
22 = 21(SNF-Part B)
32 = 32(Home health not under treatment plan)
33 = 33(Coordinated home care med treatment inc)
34 = 34(home care not under med treatment)
41 = 41(Religious, non-medical, health care institution)
65 = 65(Interm care - level I)
66 = 66(Interm care - level II)
72 = 72(Hospital based or ind renal dialysis)
81 = 81(Hospice)
83 = 83(Special facility, ambulatory surgery)
86 = 86(Special facility-residence facility)
99 = 99(UNK)

QNXT Claims Attribute List/Formats

BP_CODE* (qnxt_case_inpsnf / qnxt _hdr_inpsnf / qnxt _hdr_other)

CMC = Cal Medi-Connect
HBEX = LA Care Covered/Health Benefits Exchange
HKID = Healthy Kid
PASC = PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union /IHSS, In-Home Support Services

CLM_SVCGRP (qnxt _hdr_inpsnf / qnxt _hdr_other)

ABOR_PHY = Abortion
ALLGTST = Allergy Testing ALLERGY
AMBUL = Ambulance
BLOOD = Blood and Plasma
CHEMO = Chemotherapy
CONSULT = Consults
DENTAL = Dental
DIAGNOS = Diagnostic
DME = Durable Medical Equipment
ER_FAC = ER Facility
ER_PHY = ER Physician
F_SP_CHG = Facility Special Charge
HEARING = Hearing
HEMO_DIA = Hemodialysis
HLTH_EDU = Health Education
HM_HLTH = Home Health Services
HOSPICE = Hospice
IMMU = Immunization
INJECT = Injectable
INP = Inpatient
IPREH_CD = I/P Rehab Facility-Alcohol/DRG
IP_DETOX = Inpatient Detoxification
IP_MAT = Inpatient Maternity
IP_PSY_F = Inpatient Psych Facility
IP_PSY_P = Inpatient Psych Physician
IP_REHAB = I/P Rehab Facility-Alcohol/DRG
LABOR = Labor and Delivery
LAB_PATH = Lab Pathology
MAT_PHY = Maternity Physician Delivery
OFF_VST = OFFICE VISIT
OP_MH = Outpatient Mental Health
OP_VST = Hospital Visit
ORTHO = Orthotics
OSTOMY = Ostomy/Colostomy
PHY_THER = Phy, Spc, Occ, Cardiac Therapy
PRESCRIP = Prescription Items
PROSTH = Prosthetics
RADIO = Radiology
RAD_THER = Radiation Therapy
SNF = Skilled Nursing Facility
SURG_FAC = Surgery Facility
SURG_PHY = Surgery Physician
S_SRVTRT = Special Services and Treatment
TRT_OBS = Treatment/Observation Room

DIS_STATUS / DISPOSITION (qnxt_case_inpsnf)

00 = Still Under Care
01 = Home
02 = Other Hospital
03 = Skilled Nursing Facility
04 = ICF
06 = Home Health
07 = AMA
14 = Hospice
20 = Exp Hospital
30 = Still In
40 = Exp Home
41 = Exp Hospital
42 = Exp, Unk Place
50 = Hospice
51 = Hospice
61 = Swing Bed
62 = Rehab-Inpatient
63 = Mdcare Ltc Hospital
64 = Mdcare Ltc Facility
65 = Psy Hospital
[TOC]

LINE_SVCGRP (qnxt _detail_inpsnf / qnxt _detail_other)

ABOR_PHY = Abortion
ALLGTST = Allergy Testing ALLERGY
AMBUL = Ambulance
BLOOD = Blood and Plasma
CHEMO = Chemotherapy
CONSULT = Consults
DENTAL = Dental
DIAGNOS = Diagnostic
DME = Durable Medical Equipment
ER_FAC = ER Facility
ER_PHY = ER Physician
F_SP_CHG = Facility Special Charge
HEARING = Hearing
HEMO_DIA = Hemodialysis
HLTH_EDU = Health Education
HM_HLTH = Home Health Services
HOSPICE = Hospice
IMMU = Immunization
INJECT = Injectable
INP = Inpatient
IPREH_CD = I/P Rehab Facility-Alcohol/DRG
IP_DETOX = Inpatient Detoxification
IP_MAT = Inpatient Maternity
IP_PSY_F = Inpatient Psych Facility
IP_PSY_P = Inpatient Psych Physician
IP_REHAB = I/P Rehab Facility-Alcohol/DRG
LABOR = Labor and Delivery
LAB_PATH = Lab Pathology
MAT_PHY = Maternity Physician Delivery
OFF_VST = OFFICE VISIT
OP_MH = Outpatient Mental Health
OP_VST = Hospital Visit
ORTHO = Orthotics
OSTOMY = Ostomy/Colostomy
PHY_THER = Phy, Spc, Occ, Cardiac Therapy
PRESCRIP = Prescription Items
PROSTH = Prosthetics
RADIO = Radiology
RAD_THER = Radiation Therapy
SNF = Skilled Nursing Facility
SURG_FAC = Surgery Facility
SURG_PHY = Surgery Physician
S_SRVTRT = Special Services and Treatment
TRT_OBS = Treatment/Observation Room
[TOC]

POS_1 (qnxt _hdr_inpsnf / qnxt _hdr_other)

11 = 11-Office
12 = 12-Hm hlth
21 = 21-Hosp/IP
22 = 22-Hosp/OP
23 = 23-Hosp/ER
31 = 31-SNF
24 = 24-SurgCtr
34 = 34-Hospice
54 = 54-Interm care fac
65 = 65-ESRD fac
99 = 99-UNK

PRODUCT_CODE (qnxt_case_inpsnf / qnxt _hdr_inpsnf / qnxt _hdr_other)

10 = Medi-Cal
20 = Healthy Family Plan
40 = PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union /IHSS, In-Home Support Services
60 = Healthy Kids
70 = Dual Eligible Special Needs Plan
80 = Cal-Medi Connect
90 = LA Care Covered/Health Benefits Exchange
 -1 = Other

ProgramID (qnxt_case_inpsnf / qnxt _hdr_inpsnf / qnxt _hdr_other)

PGM0000000019 = Healthy Kids 60
PGM0000000022 = PASC-SEIU PLAN (PASC) 40
PGM0000000023 = CMC Medicare 80
PGM0000000024 = CMC Medi-Cal 80
XGM0000000016 = L.A. Care Covered 90

RISK_MORTALITY (qnxt_case_inpsnf)

0
1 = Minor
2 = Moderate
3 = Major
4 = Extreme

SEVERITY (qnxt_case_inpsnf)

0
1 = Minor
2 = Moderate
3 = Major
4 = Extreme

SRV_CAT (qnxt _detail_inpsnf / qnxt _detail_other)

01Ip_A = Ip Acute
02Ip_D = Ip Detox
03Ip_R = Ip Rehab
04Snf = Snf
05Icf = Interm Care
08Hosp = Hospice
09Er_F = Er_Facilcity
10Sg_F = Surgical Facility
11Blod = Blood Service
12Hh = Home Health
13R_Th = Radiology Therapy
14Ambu = Ambulance
15Airt = Air Ambulance
16Chir = Chiropractic
17Visi = Vision
18Dent = Dental
19Dme = Dme
21Haid = Hearing Aid
22Rx = Prescription Items
23Phys = Phys Serv
24Sg_P = Surg_Phy
26Radi = Radiology
27Labp = Lab Pathology
28Op_R = Op_Rehab
29Er_P = Er_Phy
30Dial = Dialysis
31Diag = Diagnostic Testing
32Inje = Injectable
33Chem = Chemotherapy
34Obs= Obs Room

STATUS (qnxt_hdr_inpsnf / qnxt_hdr_other)

ADJUCATED
DENIED
DENY
FORWARDED
OPEN
PAID
PAY
PEND

TYPE_BILL (qnxt _hdr_inpsnf / qnxt _hdr_other)

11 = 11(IP-Part A)
12 = 12(IP-Part B)
13 = 13(OP)
14 = 14(OP diagnostic-no trt plan)
21 = 21(SNF-Part A)
22 = 21(SNF-Part B)
32 = 32(hm hlth not under trt plan)
33 = 33(coordinated hm care med trt inc)
34 = 34(home care not under med trt)
41 = 41(Relig, non-medical, hlth care inst)
65 = 65(interm care - level I)
66 = 66(interm care - level II)
72 = 72(hosp based or ind renal dialysis)
81 = 81(hospice)
83 = 83(spe fac, ambulatory surg)
86 = 86(spe fac-residence fac)
99 = 99(UNK)

Encounter Attribute List/Formats

BP_CODE* (enc_case_inpsnf / enc_hdr_inpsnf)

-1
ACCT
AIPA
AMHS
AP
APPL
AVFH
BCON = Beacon
BCSC = Anthem Blue Cross
CFC
CFST = Care 1st
CMC = Cal Medi-Connect
COMM = Community Health Plan (Terminated at the end of 2011)
CVPG
DHFP
ECMG
EHSG
GCMG
HBEX = LA Care Covered/Health Benefits Exchange
HCLA
HFP = Healthy Family
HKID = Healthy Kid
HPMM
IHSS = In-Home Support Services
KAIS = Kaiser
LAHF = LA Care Health Families
MCLA = LA Care Medi-Cal Direct
OMNI = Omni
PH
PIPA
SNP = Special Needs Plan
TZGQ
UCMG

* Consolidate "COMM" into "MCLA" on and after 1/1/2012
[TOC]

CLM_SVCGRP (enc_hdr_inpsnf / enc _hdr_other)

ABOR_PHY = Abortion
ALLGTST = Allergy Testing ALLERGY
AMBUL = Ambulance
BLOOD = Blood and Plasma
CHEMO = Chemotherapy
CONSULT = Consults
DENTAL = Dental
DIAGNOS = Diagnostic
DME = Durable Medical Equipment
ER_FAC = ER Facility
ER_PHY = ER Physician
F_SP_CHG = Facility Special Charge
HEARING = Hearing
HEMO_DIA = Hemodialysis
HLTH_EDU = Health Education
HM_HLTH = Home Health Services
HOSPICE = Hospice
IMMU = Immunization
INJECT = Injectable
INP = Inpatient
IPREH_CD = I/P Rehab Facility-Alcohol/DRG
IP_DETOX = Inpatient Detoxification
IP_MAT = Inpatient Maternity
IP_PSY_F = Inpatient Psych Facility
IP_PSY_P = Inpatient Psych Physician
IP_REHAB = I/P Rehab Facility-Alcohol/DRG
LABOR = Labor and Delivery
LAB_PATH = Lab Pathology
MAT_PHY = Maternity Physician Delivery
OFF_VST = OFFICE VISIT
OP_MH = Outpatient Mental Health
OP_VST = Hospital Visit
ORTHO = Orthotics
OSTOMY = Ostomy/Colostomy
PHY_THER = Phy, Spc, Occ, Cardiac Therapy
PRESCRIP = Prescription Items
PROSTH = Prosthetics
RADIO = Radiology
RAD_THER = Radiation Therapy
SNF = Skilled Nursing Facility
SURG_FAC = Surgery Facility
SURG_PHY = Surgery Physician
S_SRVTRT = Special Services and Treatment
TRT_OBS = Treatment/Observation Room

DIS_STATUS / DISPOSITION (enc_case_inpsnf)

00 = Still Under Care
01 = Home
02 = Other Hospital
03 = Skilled Nursing Facility
04 = ICF
06 = Home Health
07 = AMA
14 = Hospice
20 = Exp Hospital
30 = Still In
40 = Exp Home
41 = Exp Hospital
42 = Exp, Unk Place
50 = Hospice
51 = Hospice
61 = Swing Bed
62 = Rehab-Inpatient
63 = Mdcare Ltc Hospital
64 = Mdcare Ltc Facility
65 = Psy Hospital

LINE_SVCGRP (enc _hdr_inpsnf / enc _hdr_other)

ABOR_PHY = Abortion
ALLGTST = Allergy Testing ALLERGY
AMBUL = Ambulance
BLOOD = Blood and Plasma
CHEMO = Chemotherapy
CONSULT = Consults
DENTAL = Dental
DIAGNOS = Diagnostic
DME = Durable Medical Equipment
ER_FAC = ER Facility
ER_PHY = ER Physician
F_SP_CHG = Facility Special Charge
HEARING = Hearing
HEMO_DIA = Hemodialysis
HLTH_EDU = Health Education
HM_HLTH = Home Health Services
HOSPICE = Hospice
IMMU = Immunization
INJECT = Injectable
INP = Inpatient
IPREH_CD = I/P Rehab Facility-Alcohol/DRG
IP_DETOX = Inpatient Detoxification
IP_MAT = Inpatient Maternity
IP_PSY_F = Inpatient Psych Facility
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POS_1 (enc_hdr_inpsnf/enc_hdr_other)

11 = 11-Office
12 = 12-Hm hlth
21 = 21-Hosp/IP
22 = 22-Hosp/OP
23 = 23-Hosp/ER
31 = 31-SNF
24 = 24-SurgCtr
34 = 34-Hospice
54 = 54-Interm care fac
65 = 65-ESRD fac
99 = 99-UNK

PRODUCT_CODE (enc_case_inpsnf / enc _hdr_inpsnf / enc _hdr_other)

10 = Medi-Cal
20 = Healthy Family Plan
40 = PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union /IHSS, In-Home Support Services
60 = Healthy Kids
70 = Dual Eligible Special Needs Plan
80 = Cal-Medi Connect
90 = LA Care Covered/Health Benefits Exchange
[TOC]

RECORD_STATUS / STATUS_DET (enc_detail_inpsnf / enc_detail_other)

A = Accept
D = Duplicate
L = Loaded Encounter Image Data
P = Potential Duplicate
R = Reject
S = Suspended
V = Void
[TOC]

RISK_MORTALITY (enc_case_inpanf)

0
1 = Minor
2 = Moderate
3 = Major
4 = Extreme
[TOC]

SEVERITY (enc_case_inpanf)

0
1 = Minor
2 = Moderate
3 = Major
4 = Extreme
[TOC]

SRV_CAT (enc_case_inpanf / enc_hdr_inpsnf / enc_hdr_other)

01Ip_A = Ip Acute
02Ip_D = Ip Detox
03Ip_R = Ip Rehab
04Snf = Snf
05Icf = Interm Care
08Hosp = Hospice
09Er_F = Er_Fac
10Sg_F = Surg_Fac
11Blod = Blood Serv
12Hh = Home Hlth
13R_Th = Radiology Therapy
14Ambu = Ambulance
15Airt = Air Ambulance
16Chir = Chiropractice
17Visi = Vision
18Dent = Dental
19Dme = Dme
21Haid = Hearing Aid
22Rx = Prescription Items
23Phys = Phys Serv
24Sg_P = Surg_Phy
26Radi = Radiology
27Labp = Lab Pathology
28Op_R = Op_Rehab
29Er_P = Er_Phy
30Dial = Dialysis
31Diag = Diagnostic Testing
32Inje = Injectable
33Chem = Chemotherapy
34Obs= Obs Room
[TOC]

Membership Attribute List/Formats

BP* (memmo / mem_enroll_seg)

BCSC = Anthem Blue Cross
CFST = Care 1st
COMM = Community Health Plan (Terminated at the end of 2011)
KAIS = Kaiser
MCLA = L.A. Care Medi-Cal Direct

* Consolidate "COMM" into "MCLA" after 1/1/2012
[TOC]

DUAL (memmo)

Y–F = Full Dual, product code 80 + 70 in ENCOUNTER.MEMBERS
Y–P = Partial, (HIC number is not null in MHDW.FAME_RAWS/ FAME_RAWS_DLY)
Y–O = Opt-out, (CCI Opt Out indicator in MHDW.FAME_RAWS/ FAME_RAWS_DLY is YES when enroll status is active)
N   = Not Dual Eligible (not in 'Y-F', 'Y-P', 'Y-O')

[TOC]

ENROLL_STATUS_CODE (memmo)

00 = Voluntary disenrollment – no capitation paid (may also result from the retroactive disenrollment of a recipient in hold status - no capitation recovery)
01 = Active enrollment – capitation paid
05 = Enrollment held due to recipient's Medi-Cal eligibility status – no capitation paid
09 = Mandatory disenrollment – no capitation paid (May also result from the retroactive disenrollment of a recipient in hold status – no capitation recovery)
10 = Voluntary disenrollment after capitation paid – recovery required. (The result of a retroactive disenrollment from an active HCP status
19 = Mandatory disenrollment after capitation paid – recovery required. (The result of a recroactive disenrollment from an active HCP status)
51 = Enrollment activated from hold status – supplemental capitation to be paid at the end of the current month
55 = Enrollment held – Potential HCP enrollee with Uncertified SOC – no capitation paid
59 = Enrollment held due to change of recipient's status other than hold on Medi-Cal eligibility (e.g. zip code, county code, aid code or ohc code not covered by plan)
P4 = Enrollment application accepted – no capitation paid
[TOC]

PRODUCT_CODE (memmo / mem_enroll_seg)

10 = Medi-Cal
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[TOC]

Pharmacy Attribute List/Formats

BP_CODE (RX_FROM_2014)

BCSC = Anthem Blue Cross
CFST = Care 1st
CMC = Cal Medi-Connect
HBEX = LA Care Covered/Health Benefits Exchange
HFP = Healthy Family
HKID = Healthy Kid
IHSS = In-Home Support Services (PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union)
KAIS = Kaiser
MCLA = L.A. Care Medi-Cal Direct
SNP = Special Needs Plan
[TOC]

DRUG_CLASSIFICATION_NDDF (RX_FROM_2014)

O = OTC single source
P = OTC multiple source
R = Rx single source. Requires prescription
S = Rx multiple source. Requires prescription
[TOC]

FORMULARY_STATUS (RX_FROM_2014)
Y = Yes
N = No
Z = Unknown
[TOC]

GENERIC_DRUG_FLAG (RX_FROM_2014)

B = Branded Generic Name
G = Generically Named
T = Trademarked Name
[TOC]

PRODUCT_CODE (RX_FROM_2014)

10 = Medi-Cal
20= Healthy Family Plan
40 = PASC-SEIU: Personal Assistance Services Counsel-Services Employees International Union /IHSS, In-Home Support Services
60 = Healthy Kids
70= Dual Eligible Special Needs Plan
80 = Cal-Medi Connect
90 = LA Care Covered/Health Benefits Exchange
[TOC]

STRENGTH SIZE (RX_FROM_2014)

% = Percent
AHFU = Antihemophilic factor unit
GM = Gram
GM/ML = Gram/milliliter
UNIT = International Unit
UNIT/ML = International Unit/milliliter
MCG = Microgram
MCG/ML = Microgram/milliliter
MEQ = Milliequivalent
MEQ/L = Milliequivalent/liter
MEQ/ML= Milliequivalent/ milliliter
MG = Milligram
MG/HR = Milligram/hour
MINIM = Minim
MMOLE = Millimole
MMOLE/ML = Millimole/ milliliter
MU = Million units
SQ CM = Square centimeter
UNIT = Unit
Unit/GM = Unit/gram
UNIT/ML = Unit/milliliter
[TOC]