

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

M2 Standard Reports for Data Quality  
February 3, 2009

**REPORT 1: Inpatient Reporting Compliance**

1. Report Name: **tma.rm.dq.dcip.rept.comp**
2. **Report Description:** Contains MTF level data with information about inpatient data record reporting. Compares the number of dispositions as reported in the SIDR with those reported in the WWR. Also compares the number of dispositions as reported in MEPRS with those reported in the WWR.
3. **Data Source(s):** M2 Health Care Services / Direct Care / Inpatient Admissions Detail; System Production Data/WWR/; System Production Data/MEPRS
4. **Data Elements in Final Report:**
  - Fiscal Year and Fiscal Month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS Military Service
  - Direct Care Dispositions from SIDR
  - Direct Care Dispositions from WWR
  - Direct Care Dispositions from MEPRS
  - Percent Complete
5. **Filters:**
  - Fiscal Year greater than or equal to '2005'
  - Treatment DMIS ID DHP Code='Y'
  - Workload Category=DSP (WWR query only)
  - Dispositions greater than 0 (MEPRS query only)
6. **Notes/Comments:**
  - This report is a linked report. Three queries were run (SIDR, MEPRS, and WWR) and linked by FY, FM, Treatment DMIS ID, Treatment DMIS ID Name, and Treatment DMIS ID Military Service. Percent complete for SIDR/WWR was calculated by dividing the number of SIDR Dispositions by the number of WWR Dispositions. Percent complete for MEPRS/WWR was calculated by dividing the number of MEPRS Dispositions by the number of WWR Dispositions.
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

# PASBA DATA QUALITY GUIDE

## APPENDIX B – M2 Standard Reports for Data Quality

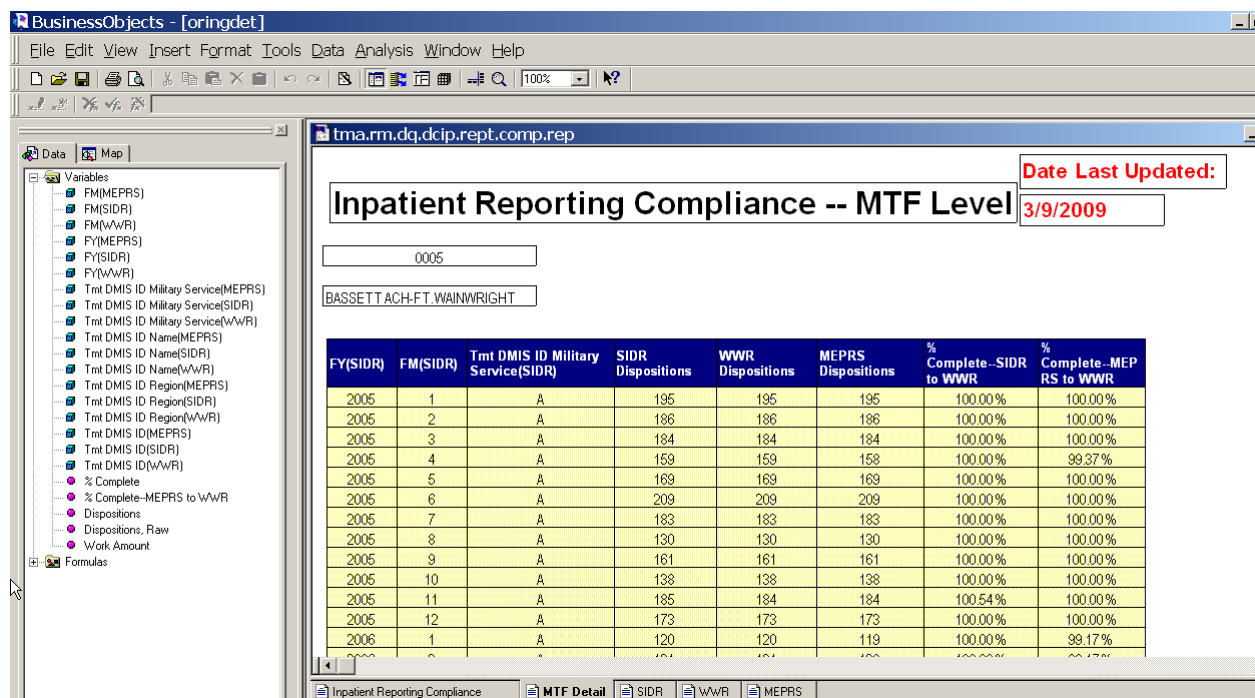


Figure 1: Inpatient Reporting Compliance:

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 2: Ambulatory Reporting Compliance, WWR Benchmark**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.rep.comp.wwr**
2. **Report Description:** Contains two reports at MTF level data with information about ambulatory care reporting compliance. Compares ambulatory encounters reported in the SADR with those reported in the WWR. Also compares ambulatory encounters reported in MEPRS with those reported in the WWR.
3. **Data Source(s):** M2 Health Care Services / Direct Care / Professional Encounters/FYxx Professional Encounters; System Production Data/WWR/; System Production Data/MEPRS
4. **Data Elements in Final Report for Count Visits:**
  - Fiscal Year and Fiscal Month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS Military Service
  - MEPRS Code (3)
  - SADR Encounters (Where Countable Visit Flag=1—Used Filter in Slice and Dice)
  - WWR Visits
  - Percent Complete
5. **Data Elements in Final Report for All Visits:**
  - Fiscal Year and Fiscal Month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS Military Service
  - MEPRS Code (3)
  - SADR Encounters
  - WWR Visits
  - Percent Complete
6. **Filters:**
  - MEPRS Code (3) starts with “B” or is equal to “FBN”
  - Treatment DMIS DHP Code=’Y’
  - Compliance Status=R (Only want “Raw” encounters, SADR Query only)
  - Workload Category=OPV or IPV (WWR query only)
  - FY equal to fiscal year of SADR query (2005-2008) (WWR Query and MEPRS Query)
7. **Notes/Comments:**
  - These reports are linked reports. Three queries were run (SADR, MEPRS, and WWR) and linked by FY, FM, Treatment DMISID (and attributes) and MEPRS Code (3). Percent complete for SADR/WWR was calculated by dividing the number of SADR Encounters by the number of WWR Outpatient Visits. Also, percent complete for MEPRS/WWR was calculated by dividing the number of MEPRS Visits by the number of WWR Outpatient Visits.
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

# PASBA DATA QUALITY GUIDE

## APPENDIX B – M2 Standard Reports for Data Quality

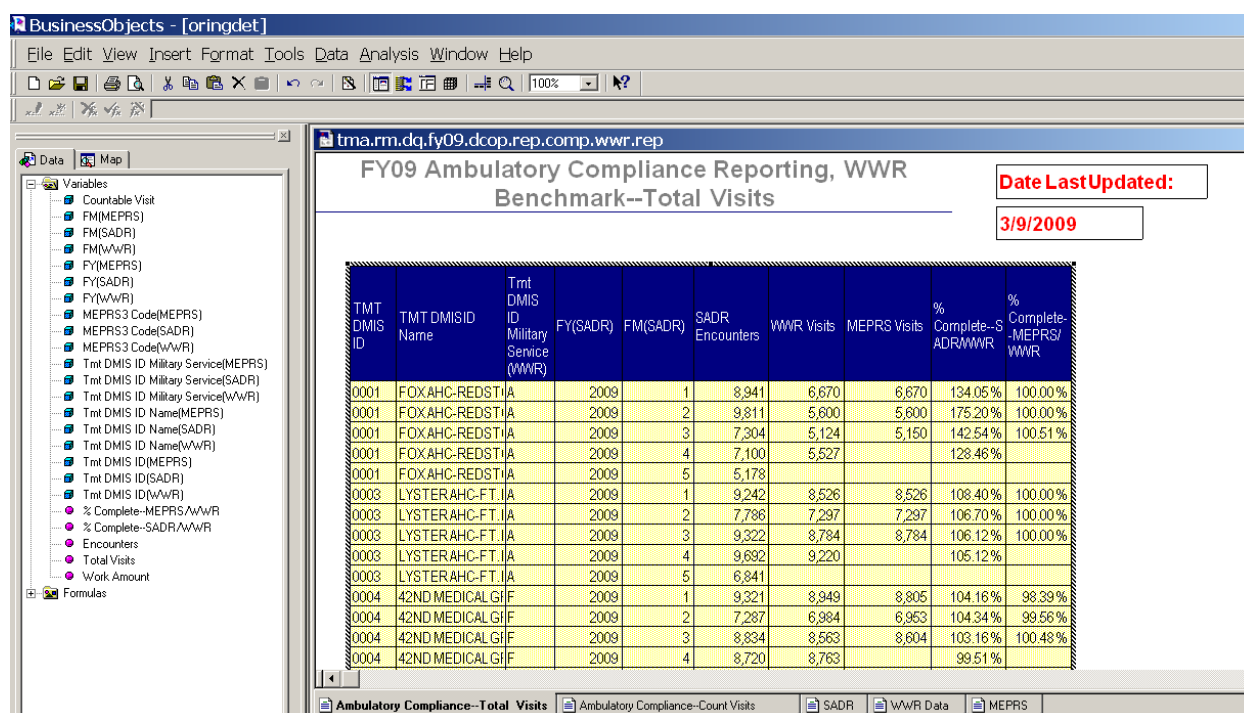


Figure 2: Ambulatory Reporting Compliance, WWR Benchmark

Note: FY09 used

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 3: Ambulatory Reporting Compliance, Appointment Benchmark**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.rep.comp.appt**
2. **Report Description:** Contains MTF level data with information about ambulatory care reporting compliance using the Compliance Status field contained in the SADR
3. **Data Source:** M2 / Health Care Services /Direct Care/Professional Encounters/FY05 Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Military Service
  - Treatment DMIS ID Name
  - MEPRS Code (3)
  - SADR Encounters (Raw SADRs)
  - SADR Encounters (Inferred SADRs)
  - Total Kept Appointments (Raw + Inferred SADRs)
  - Percent Complete
5. **Filters:**
  - Treatment DMIS ID DHP Code="Y"
  - MEPRS 3 Code=FBI, FBN, or ELA or MEPRS 1 Code=A or B
6. **Notes/Comments:**
  - Should you desire reporting at a "higher level" than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 4: Lost Earnings Report**

1. Report Name: **tma.rm.dq.direct.care.lostearnings**
2. **Report Description:** Contains MTF level data on total lost earnings. Combines Outpatient and Inpatient earnings data.
3. **Data Source:** M2 / Health Care Services /Direct Care/Inpatient Admissions/Inpatient Admissions Detail and M2/Health Care Services/Direct Care/Professional Encounters/ Professional Encounters Summary
4. **Data Elements in Final Report**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS Name
  - Treatment DMIS ID Military Service
  - PPS Earnings (SIDR)
  - PPS Earnings (SADR)
  - Total PPS Earnings
  - Lost Inpatient Earnings
  - Lost Ambulatory Earnings
  - Total Lost Earnings
  - Percent of Earnings Lost
5. **Filters:**
  - Treatment DMIS ID DHP Code='Y'
  - MEPRS Code (3) starts with "B" or is equal to "FBN" (SADR Query Only)
  - FY greater than or equal to 2005
6. **Notes/Comments:**
  - This is a linked report. One query was run from the Direct Care Professional Encounters Summary table and one query was run from the Direct Care Inpatient Admissions detail table. These two queries were then linked by FY, FM, and Treatment DMISID (and attributes). Lost Earnings for each type (Inpatient and Ambulatory) was calculated by subtracting PPS Earnings (Inpatient or Ambulatory) from Potential Earnings (Inpatient or Ambulatory). Total Earning is the sum of the Ambulatory PPS Earnings and Inpatient PPS Earnings. Total Lost Earnings is the sum of Lost Ambulatory Earnings and Lost Inpatient Earnings. Percent Lost Earnings is calculated by dividing Total Lost Earnings by (Total Earnings plus Total Lost Earnings).
  - Should you desire reporting at a "higher level" than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 5: Ambulatory Reporting Compliance, Action Report**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.rep.comp.actionrep** **(PROMPTED REPORT)**
2. **Report Description:** Contains Provider level data with information about ambulatory care reporting compliance.
3. **Data Source:** M2 / Health Care Services / Direct Care / Professional Encounters / FYXX Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Compliance Status
  - Provider ID
  - Service Date
  - MEPRS 3 Code
  - Record ID
  - PPS Potential Earnings
5. **Filters:**
  - MEPRS 1 Code equal to “A” or “B” or MEPRS 3 Code is equal to “FBN”, “FBI”, or “ELA”
  - Treatment DMIS ID=Prompted Filter
  - Compliance Status=”I”
6. **Notes/Comments**
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 6: Ungroupable DRGs**

1. Report Name: **tma.rm.dq.dcip.ungroupable.drg**
2. **Report Description:** Contains list of Direct Care Inpatient records where the DRG on the record is ungroupable.
3. **Data Source:** M2 / Health Care Services / Direct Care /Inpatient Admissions / Inpatient Admissions Detail
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS Military Service
  - Record ID
  - Bed Days
  - Full Cost
5. **Filters:**
  - FY greater than or equal to 2005
  - Treatment DMIS ID DHP Code='Y'
  - DRG=469 or 470
6. **Notes/Comments:**
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.



**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 7: Ungroupable APGs**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.ungroupable.apg (PROMPTED REPORT)**
2. **Report Description:** Contains list of Direct Care Professional Encounter records where one of the APGs on the record is ungroupable.
3. **Data Source:** M2 / Health Care Services / Direct Care / Professional Encounters/FYX Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS ID Military Service
  - Record ID
  - MEPRS 3 Code
  - Full Cost
  - Encounters
5. **Filters:**
  - Any APG equal to 992, 996, 997, 998, 999
  - Appointment Status different from 6
  - Treatment DMIS ID equal to <Prompted filter>
6. **Notes/Comments:**
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 8: Unspecified Provider Specialty**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.unspecified.provspec**
2. **Report Description:** Contains MTF level information on records where the provider specialty is not coded properly.
3. **Data Source:** M2 / Health Care Services / Direct Care / Professional Encounters/FYXX  
Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS ID Military Service
  - MEPRS Code (3)
  - Provider Specialty Code
  - Encounters with unspecified provider specialty
  - Encounters with valid provider specialty
  - Total Encounters
  - Percent of Encounters with unspecified provider specialty
5. **Filters:**
  - Treatment DMIS ID DHP Code="Y"
  - MEPRS 1 Code=A or B or MEPRS 3 Code=FBI, FBN, or ELA
6. **Notes/Comments:**
  - A local variable, Provider Specialty Flag, was derived from the Provider Specialty field. If the provider specialty is greater than "909" then the Provider Specialty Flag is set to "Unspecified". Otherwise, the flag is set to "Specified". This flag was used in the formula to calculate the % of Encounters with an Unspecified Provider Specialty.
  - Should you desire reporting at a "higher level" than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 9: Invalid Provider ID**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.invalid.provid** **(PROMPTED REPORT)**
2. **Report Description:** Contains Provider Level data for review. Report should be examined for Provider IDs that look like pseudo-IDs.
3. **Data Source:** M2 / Health Care Services / Direct Care / Professional Encounters/FYXX Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Military Service
  - Treatment DMIS ID Name
  - Provider ID
  - PPS Work RVUs
  - Encounters
5. **Filters:**
  - Treatment DMIS ID DHP Code='Y'
  - Treatment DMIS ID=Prompted Filter
6. **Notes/Comments:**
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 10: Direct Care Pharmacy Costs**

1. Report Name: **tma.rm.dq.fyXX.pdtsrx.directcare.rxcost** (where XX=Fiscal Year) **(PROMPTED REPORT)**
2. **Report Description:** Contains NDC level information on drugs. Will allow users to identify potentially miscoded pharmacy data.
3. **Data Source:** M2 / Health Care Service /Pharmacy/FY05 PDTS
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS ID Military Service
  - NDC
  - Product Name
  - Ingredient Cost
  - Days Supply, Sum
  - Quantity
  - Unit Cost
  - Average Cost per Day
5. **Filters:**
  - Treatment DMIS ID=Prompted Filter
  - Source System=D
6. **Notes/Comments:**
  - Unit Cost is calculated by dividing the Ingredient Cost by the Quantity
  - Average Cost Per Day is calculated by dividing the Ingredient Cost by the Days Supply
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 11: Percent AHLTA**

1. Report Name: **tma.rm.dq.fy<fy>.dcop.percent.ahlta**
2. **Report Description:** Identifies what percentage of records, at MTF/MEPRS Code level, are created in AHLTA. Two reports are available. One displays records by APV flag and one displays records by ER flag.
3. **Data Source:** M2 / Health Care Services / Direct Care / Professional Encounters/FYXX Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS ID Military Service
  - MEPRS Code (3)
  - ER Flag (ER Report)
  - APV Flag (APV Report)
  - AHLTA Encounters
  - Non-AHLTA Encounters
  - Total Encounters
  - Percent of SADR that are via AHLTA
5. **Filters:**
  - Treatment DMIS ID DHP Code='Y'
  - Compliance Status=R
  - MEPRS 1 Code=A or B or MEPRS 3 Code=FBI, FBN, or ELA
6. **Notes/Comments:**
  - A local variable, AHLTA Flag, was derived from the Source System. If the Source System='2' then AHLTA flag was set to "AHLTA". Otherwise, AHLTA Flag was set to "Non-AHLTA". This flag was used in the formula to calculate % AHLTA.
  - ER Visits were identified where MEPRS 3 Code='BIA'.
  - Should you desire reporting at a "higher level" than what is displayed, in the query panel open up each query panel and drag over additional data element. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**PASBA DATA QUALITY GUIDE**  
**APPENDIX B – M2 Standard Reports for Data Quality**

**REPORT 12: Patient Category and DEERS Ben Cat Comparison**

1. Report Name: **tma.rm.dq.fy05.dcop.patcat.deers** **(NOT CURRENTLY AVAILABLE)**
2. **Report Description:** Identifies whether the DEERS Beneficiary Category is what it should be, based on the Patient Category Code
3. **Data Source:** M2 / Health Care Services / Direct Care / Professional Encounters/FY05 Professional Encounters
4. **Data Elements in Report:**
  - Fiscal year and fiscal month
  - Treatment DMIS ID
  - Treatment DMIS ID Name
  - Treatment DMIS ID Military Service
  - Patient Category Code
  - DEERS Beneficiary Category
  - Encounters
  - Person ID
  - PATCAT\_BENCAT Match
5. **Filters:**
  - Treatment DMIS ID DHP Code='Y'
  - Treatment DMIS ID=Prompted Filter
6. **Notes/Comments:**
  - PATCAT\_BENCAT Match is derived from the Patient Category and Beneficiary Category variables. The last 2 characters of the Patient Category field are directly related to the assignment of beneficiary category. Please see the attached table for the Beneficiary Category/Pat Cat Mapping used to determine if the Patient Category and Beneficiary Category contained in the SADR match as expected.
  - Should you desire reporting at a “higher level” than what is displayed, in the query panel open up each query panel and drag over additional data element. Please note that adding additional elements not found in both files will affect the report display if brought in to the report. Upon making any changes, you can save the report to your local hard drive, but that will not replace the report in corporate documents.

**Patient Category/Beneficiary Category Mapping**

<b>Beneficiary Category</b>	<b>Patient Category (last 2 digits, with exceptions for NATO)</b>
ACT	11,13,14
DA	41
DCO	29
DR	43,48
DS	45,47
GRD	12,15,21
IDG	22,23, 7
IGR	36
NAT	R72,R73,R74,R75
OTH	24,25,26,27,28,49,51,52,53,54,55,56,57,58,59,61,62,63,64,65,66,67,68,69,71,K72,K73,K74,K75,76,77,78,79,81,82,83,84,91,92,99
RET	31,32,33
UNK	00