

West Virginia Health Care Authority
Hospital Inpatient Data System
Listing of Warnings and Errors for WV HCA Online Editor
Updated February 2011

* New edits effective with 1/1/2011 discharges.

Batch-Level Warnings

Code	Level	Comment	Condition
BADCNT	Batch	Invalid # of reported records	# of reported records is not confirmed by actual count
E1	Batch	>10% missing or invalid ZIP code	More than 10% of the records
E2	Batch	Missing secondary payors (all records)	100% missing secondary payor
E3	Batch	>40% missing secondary diagnosis	More than 40% of the records
E5	Batch	Admission type identical all records	All records
E6	Batch	Admission source identical all records	All records
E7	Batch	Patient status identical all records	All records
E8	Batch	No rev code 174 for any NICU discharge	Hospitals with NICUs
E10	Duplicate	Duplicate record (same PROV, PATNO, EDATE, BTYPE) in Batch	Duplicate PROV, PATNO, EDATE, BTYPE in Batch
E9	Duplicate	Complete duplicate record (all elements identical) in Batch	All elements identical in Batch
E101	Duplicate	Duplicate record (same PROV, PATNO, EDATE, BTYPE) in Master	Duplicate PROV, PATNO, EDATE, BTYPE in Master
E161*	Batch	Questionable number of admissions from ER	For 510xxx, 511xxx, and 51Sxxx discharges only. % of records with a P7 Condition Code is <30% or >70%

Record-Level Warnings

Code	Level	Comment	Condition
E60	Questionable	Missing ZIP code	Not provided
E61	Questionable	Invalid ZIP code	Not valid ZIP code
E62	Questionable	Missing marital status	Not provided
E63	Questionable	Invalid marital status	Not S,M,X,D,W,U,P
E64	Questionable	Missing Ethnicity	Not provided
E65	Questionable	Invalid Ethnicity	Values other than 1-9
E67	Questionable	Questionable total charges: TCHG < \$100 or > \$50,000 per day	TCHG < \$100 if BTYPE<>115 or TCHG > \$50,000 (per day)
E70	Questionable	Invalid external cause of injury code	Not a valid ECODE

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E71	Questionable	Missing NPI_OP	Not provided
E72	Questionable	Missing NPI_OTH1	Not provided
E73	Questionable	Missing NPI_OTH2	Not provided
E87	Questionable	Missing all procedure codes when revenue code 036x exists	036x are present on the UB and no procedure codes are present
E88	Questionable	Missing ECODE when injury diagnosis (E800x-E999x) reported	ECODE not provided when 800-999 codes are present at least in one diagnosis code
E89	Questionable	Auto Accident reported in ECODE with no Accident State	Accident State not provided when ECODE = E810-E825
E90	Questionable	Missing NPI_OP when revenue code 036x exists	Operating NPI (NPI_OP) not provided when 036x is present at least in one revenue code
E164*	Questionable	P7 Code Missing	For 510xxx discharges only. Revenue code 045x found in revenue field and no P7 Condition Code reported
E165*	Questionable	Questionable Medicare payer	Patient's age is 65 or older and primary payer code on discharge is not Medicare

Record-Level Errors

Code	Level	Comment	Condition
BADID	Rejected	Invalid detailed Medicare provider ID (PROV)	Detailed Medicare provider ID (PROV) is not consistent with the WV hospital (HOSPID) the data was uploaded for
E0	Rejected	Discharge prior to current period (valid EDATE and before 01/01/20xx)	Valid EDATE and before 01/01/20xx
E11	Rejected	Missing patient control number	Not provided
E12	Rejected	Missing bill type	Not provided
E13	Rejected	Invalid bill type	Not 11X, 12X, 21X, 18X
E14	Rejected	Missing statement covers period	Not provided year, month or day of SDATE or EDATE
E15	Rejected	Invalid statement covers period	EDATE < SDATE or SDATE <= 1992 or SDATE > BATDATE
E16	Rejected	Missing patient birth date	Not provided year, month or day
E17	Rejected	Invalid patient birth date	Date not valid or later than admission date or earlier than 120 years prior to admission date
E18	Rejected	Missing patient sex	Not provided
E19	Rejected	Invalid patient sex	Values other than M, F or U
E20	Rejected	Missing admission date	Not provided year, month or day
E21	Rejected	Invalid admission date	Invalid or ADMIT later than BATDATE
E22	Rejected	Missing type of admission	Not provided
E23	Rejected	Invalid type of admission	Values other than: Emergency(1), Urgent(2), Elective(3), Newborn(4), Trauma_Center(5),

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			Not_Available(9)
E24	Rejected	Missing source of admission	Not provided
E25	Rejected	Invalid source of admission	Values other than 1-9,A,B,C,D or other than 1-4, 9 for TYPEAD = 4
E26	Rejected	Missing patient status	Not provided
E27	Rejected	Invalid patient status	Values other than acceptable discharge status categories (01-09, 20, 30, 40, 41, 42,43, 50,51,61,62,63,64,65,66)
E28	Rejected	Missing revenue code	Not provided when unit or charge provided
E29	Rejected	Missing total charge	Not provided
E30	Rejected	Invalid total charge	If present (search records type 50 & 60), TCHG < 0 or TCHG calculated total charge (+/- 5%). If not present, TCHG = calculated total charge
E31	Rejected	Missing revenue charge	All charges are missing or a charge not provided when revenue code or unit provided
E32	Rejected	Invalid revenue charge	Values < 0 or > total charges
E33	Rejected	Missing primary payor	Not provided
E34	Rejected	Invalid primary payor	Not on HCA list, Reserved or Unassigned
E35	Rejected	Missing Medicare provider ID	Not provided
E36	Rejected	Invalid Medicare provider ID	Values < 6 digits or the first two are not equal to 51
E37	Rejected	Missing principal diagnosis	Not provided
E38	Rejected	Invalid principal diagnosis	Not a valid code
E39	Rejected	Invalid principal procedure	Not a valid code
E40	Rejected	Multiple total charge	Multiple 001 revenue codes
E41	Rejected	Discharge date later than today	EDATE>Today
E42	Rejected	SDATE precedes ADMIT	SDATE<ADMIT
E43	Rejected	Medicare provider number does not match the bill type	a) 3rd digit of PROV = 0,1,2,3,4,S,T BTYPE=1xx, except 18x; b) 3rd digit of PROV =U or Z BTYPE=18x; c) 3rd digit of PROV =5 BTYPE=2xx
E44	Rejected	Invalid revenue code (other than 1, 10X-99X)	Values other than 001, 10X-99X
E45	Rejected	Missing units of service	Not provided when revenue code or charge provided
E46	Rejected	Invalid units of service	Values < 0
E48	Rejected	Invalid second or third payor	Not on HCA list
E49	Rejected	Invalid secondary diagnosis	Not a valid ICD-9-CM code
E51	Rejected	Invalid secondary procedure	Not a valid ICD-9-CM code
E52	Rejected	Missing physician IDs (PID1 and PID2)	PID1 and PID2 not provided
E53	Rejected	Missing admitting diagnosis	Not provided
E54	Rejected	Missing NPI	Not provided

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E55	Rejected	Missing NPI_ATT	Not provided
E56	Rejected	Missing medical record number	Not provided
E57	Rejected	Missing NPI_ATT	NPI_ATT not provided when PID1 is not reported.
E150	Rejected	Missing Race	Not provided
E151	Rejected	Invalid Race	Values other than 1-9
E154	Rejected	Missing POA	Not provided when Dx is provided
E155	Rejected	Invalid POA	Values other than 'Y', 'N', 'U', 'W', 1 or blank
E156	Rejected	Corresponding diagnosis code missing	Not provided when POA is provided
E157	Rejected	Invalid admitting diagnosis	Not a valid code
E158	Rejected	Excess Ancillary Charge Field Count	Maximum number of Ancillary Charges exceeded (99 max). Discharge record must be deleted from batch
E159	Rejected	Invalid EPOA value	Not a valid UB code
E160	Rejected	Excess Room Charge Field Count	Maximum number of Room Charges exceeded (99 max). Discharge record must be deleted from batch
E162*	Rejected	Invalid Condition Code	Invalid P7 Condition Code (837 only)
E163*	Rejected	No Revenue Code of 45x found	For 510xxx discharges only. If there is a P7 Condition Code reported and no Revenue Code of 45x in any revenue field
E166 *	Rejected	POA=1 for non-exempt Facility and DX code	For non-exempt hospitals only. Diagnosis code is non-exempt and POA = 1