

Common Problems with UDS Reporting

1. **Table 4 and 9D:** Align reporting of member months with managed care revenues.
2. **Table 4 Insurance reporting in NY:**
 - SCHIP or Child Health Plus is Other Public and reported on 10b– Table 9D: lines 7, 8a and 8b. Note: do not report Child Health Plus as private HMOs!
 - Healthy NY line 10a - Table 9D: lines 7, 8a or 8b
 - NY Public Goods Pool – uninsured line 7 (report on Table 9E line 6a – though charges go on Table 9D line 13 column A)
 - PCAP = Medicaid
 - ADAP – patient is uninsured on Table 4 Line 7; Report as other public revenues on Table 9D line 7, 8a or 8b.
 - Report individuals who purchased insurance through the marketplace as Private Line 11.
3. **Table 5A:** Calculations of tenure - not just for the current year! Report back to hire date or date when individual assumed position (i.e., CMO).
4. **Tables 6B and 7:** Identification of clinical universes – ensure systems align to criteria and that the medical care provided is being captured across all tables
5. **Tables 3B and 7:** Alignment of Table 3B and 7 data source for race and ethnicity – reconciling these sources will minimize discrepancies in data across tables
6. **Table 7:** Missing birth outcomes for women who delivered during reporting year – develop tracking system to track birth outcomes
7. **Table 9D:** Failure to reassign charges – develop methods to reassign to appropriate payor
8. **Table 9D:** Be sure to include retros (reconciliation and incentive payments reported in c1-c4) in column b **and subtract** them from allowances in col d (except for capitated managed care which is calculated as col a – col b = col d)
9. **Table 9D:** Report 340b revenues on Table 9D. You need to get total charges and collections BY PAYOR to report.
10. **Table 8A:** Health centers who are part of a larger public or private system (e.g., hospital-owned, health districts, university, or county health departments) – allocate costs, especially administrative costs
11. **General:** System conversions (part-year or new) – download prior data and develop methods to unduplicate patient counts and activity
12. **Comments:** Please take the time to provide thoughtful responses to EHB flags indicating that you understand why the data is outlier.