Meet Our Staff

Ebony Herring
Cyndi Mooney
Karla Pittman
Marcus Stokes
Jessica Allen

Chris Battles
John Shupard
Lisa Spikes
Helga Torbert
Bonnie Walton
Florida Center for Health Information and Policy Analysis - **Main Number**: (850) 412-3730

<table>
<thead>
<tr>
<th>Office of Data Collection and Quality Assurance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nancy Tamariz- Administrator</strong></td>
</tr>
<tr>
<td>Frank Folmar</td>
</tr>
<tr>
<td>Judy Mathews</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Data Collection</th>
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</thead>
<tbody>
<tr>
<td><strong>Cindy Kucheman</strong></td>
</tr>
<tr>
<td>Program Administrator</td>
</tr>
<tr>
<td>Jessica Allen</td>
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<tr>
<td>Christopher Battles</td>
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<tbody>
<tr>
<td><strong>Cyndi Mooney</strong></td>
</tr>
<tr>
<td>Ebony Herring</td>
</tr>
</tbody>
</table>
Current General Reporting Resources

Download AHCA's current Patient Data Guide
The AHCA Patient Data Guide is THE resource and reference for facilities who submit discharge data. This guide provides step-by-step instructions on what to submit, how to submit and where to submit. Each and every data element is discussed in detail along with the specific edits that are applied to that element. To review the Data Guide, click on its cover to the left.

- Data Guide
- Reporting Schedule [30KB]
- Submit a Question: Frequently Asked Questions
- Helpful Links

Data Submission Resources
- Test Site URL (XML format checker)
- Facility Contact Orientation [811KB]

Internet Data Submission Registration Forms
- Facility User Account Agreement Form [137KB]
- Contact Information Update Form [28KB]
Data Collection Website Overview

Inpatient/Comprehensive Rehab Reporting Resources

- Data Specifications: (PD10-2, 2010)
  - Inpatient XML Schema PD10-2 13kb xml]
  - Inpatient XML Sample File PD10-2 [13kb xml]
  - ICD10 Inpatient XML Schema PD 10-3. [14kb xsd]
  - 59E-7.020 Rule Text [327kb pdf]
- Audit Dictionary (2010) (Updated 8/23/12)
  - IP/CR Audit Error Dictionary [92.4kb pdf]

Ambulatory/ED Reporting Resources

- Data Specifications: (AS10-1, 2010)
  - Ambulatory/ED XML Schema AS 10-1 [10kb xml]
  - Ambulatory/ED XML Sample File AS 10-1 [10kb xml]
  - ICD10 Ambulatory/Ed XML Schema AS 10-2 Effective 10/1/12/14 [17kb xsd]
- Chapter 59B-9 (2010) - Ambulatory/Emergency Department Rule
  - Chapter 59B-9.030 Rule Text [295kb pdf]
  - AS/ED Audit Error Dictionary [84kb pdf]
Why Do We Collect This Data?

- AHCA is statutorily required to collect patient data in accordance with Section 408.061, Florida Statutes, and Chapters 59E-7 and 59B-9, F.A.C.

- The Office of Data Collection & Quality Assurance (DCQA) currently collects patient discharge data from all licensed acute care hospitals (includes psychiatric and comprehensive rehab units), comprehensive rehabilitation hospitals, ambulatory surgical centers, emergency departments and off-site emergency departments, cardiac catheterization laboratories, and lithotripsy centers.
Who Uses This Data?

- Researchers around the nation use AHCA's patient database to evaluate healthcare utilization patterns, community health status and quality of care issues.

- This data serves as the cornerstone of the state's health care transparency efforts whereby a patient can more effectively shop for high quality, low cost care. The data is also the primary source of information for the evaluation of health care utilization and the assessment of community health for the improvement of public health planning initiatives.
I’m A New Contact...How Do I Get Started?

- **Obtain a User ID and password for internet data submission**
  - Complete a Facility User Account Form and Contact form
  - Fax to AHCA at 850-488-1261
    - ATTENTION: Cindy Kucheman
  - Your User ID and Initial Password will be emailed to the address listed on the contact form

- **Sign up for the AHCA Data Collection E-mail list serve on the Data Collection home page to receive updates**
Where Do I Get The Forms?

Download from data collection website at:

Internet Data Submission Registration Forms

- Facility User Account Agreement Form [137KB]
- Contact Information Update Form [28KB]
How Do I Submit My Data File?

Go to the Data Submission logon at:
https://apps.ahca.myflorida.com/patientdata/
Data Logon

- Select Pro Code/Facility type
- Enter User Code
- Enter Password
- Select Login

Data Submission Logon

A valid user code and password must be entered to Logon. Please enter your user code and password and select pro code and press the Login button. To change your password, enter your current user code and password and then click the Change Password button. If a user code has not been issued by AHCA, please complete form found at (Form Link) or contact your assigned analyst.

Select Pro Code / Facility type:
- --Select--

Enter User Code:
- 14-Ambulatory Surgical Center
- 23-Hospital

Enter Password:
- 64-Cardiac Catheterization
- 66-Lithotripsy

LOGIN  CHANGE PASSWORD
At the Logon Screen, the user must select the appropriate Pro Code/Facility type:

- 14-Ambulatory Surgical Center
- 23-Hospital
- 64-Cardiac Catheterization
- 66-Lithotripsy

User Code is derived as follows:

- 8-digit AHCA Number + assigned user number (1-4)
- Note: Up to 4 users may be assigned a User Code per facility.

If your AHCA number is less than 8 digits, this number must be padded with zeros.

Example: For AHCA # 115 and user number 1, the User Code is 0000001151.
Initial Login

- Enter the default password.
- Upon initial logon, the system will automatically make the user change from the default to a private password simply by clicking the "LOGIN" button.

Data Submission Logon

A valid user code and password must be entered to Logon.
Please enter your user code and password and select pro code and press the Login button.
To change your password, enter your current user code and password and then click the Change Password button. If a user code has not been issued by AHCA, please complete form found at FormLink or contact your assigned analyst.

Select Pro Code / Facility type: 23-Hospital

Enter User Code: 000009991

Enter Password: ********

[LOGIN] [CHANGE PASSWORD]
Create New Password

- Enter and verify a new password (at least 6 characters long)
- Click “SUBMIT” button.
Disclaimer

- User must accept terms of this disclaimer and click “CONTINUE”
- If disclaimer is NOT accepted, the user session will terminate and user is redirected to Logon page.

Files that have been uploaded will be checked for completeness and accuracy. Completeness is the determination that all file fields have been completed and accuracy determines that the datatype is consistent with the required input’s data type.

If a file contains an error it will be processed so an error report may be given, however the file will not be accepted into the system.

Any file that has been verified for completeness and accuracy will be accepted into the system for internal processing. Internal processing will be data verification and may also detect errors that need to be fixed by the submitting authority. Any errors resulting from internal processing will create its own notification procedures. For any questions contact the analyst assigned to your facility.

@ Accept  @ Reject  CONTINUE >>
Select a Report Type:
- AS - Ambulatory/ED
- PD - Hospital

Select the proper Data Type:
- Ambulatory – AS10-1
- Hospital – PD10-1

Select the Report Quarter

Select the Report Year

Select the Submission Type:
- I - Initial
- R - Replacement

Please verify the Facility Name & Number.
Please Select Report Type, Data Type, Quarter, Year, and Submission Type.
Click the Browse Button to select the File.
Click the Upload File button to submit the File.
(*) Indicates required field.

Facility Name: [YOUR FACILITY NAME]
Facility Number: [YOUR AHCA NUMBER]
*Report Type: [Select]
*Report Quarter: [AS - Ambulatory/ED Data]
*Report Year: [2013]
*Submission Type: [I - INITIAL, R - REPLACEMENT] (for replacing previously certified quarters - requires written permission from AHCA)

*Select File: [Browse...]

Upload File
Verify ALL information entered on this screen for accuracy.

Locate the data file by clicking the “Browse” button.

Find and select file. (Location will vary depending on where the file is saved in your system.)

After file is selected, click on “Upload File” button.
This page confirms that the XML format passes and the file was successfully submitted to the Agency for further processing. **The format checker does not validate the accuracy of auditor edits.**

Upon receipt, the data file is processed by an assigned analyst and data elements are audited against multiple systems edits.

- User may log out from this screen by clicking “Log Out”
If a file contains XML formatting errors, you will receive an Unsuccessful error page. Changes MUST be made to your data file format and resubmitted.

The user will have the option to print this list of errors and then must log out of the system. All of the errors outlined on the list must be corrected before the file will be successfully uploaded.

It may be helpful to validate your schema before resubmitting.
Checking File Status

User can check on the status of their quarterly data from the “File Upload” screen by simply clicking on the “View File Status” link.
File Status Query

To view your quarter file status, select the proper Report Type, Quarter, and Year, and click the “SUBMIT” button.
This screen displays all of the submission history for the quarter indicated.

To change quarter history displayed, choose new quarter/year and click the “SUBMIT” button again.

<table>
<thead>
<tr>
<th>STATUS</th>
<th>ACTION</th>
<th>ACTION_GROUP</th>
<th>ENTRY DATE</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loaded To Table</td>
<td>Clean Load Completed</td>
<td>Clean Load</td>
<td>05/02/13</td>
<td>database upload raw to clean succeeded.</td>
</tr>
<tr>
<td>Certified</td>
<td>Clean Load Requested</td>
<td>Clean Load</td>
<td>05/02/13</td>
<td>user request data load</td>
</tr>
<tr>
<td>Certified</td>
<td>Received - Certification</td>
<td>Clean Load</td>
<td>05/02/13</td>
<td></td>
</tr>
<tr>
<td>Clean</td>
<td>E-Mailed - Clean</td>
<td>Clean - Cert Due</td>
<td>04/24/13</td>
<td></td>
</tr>
<tr>
<td>In Process</td>
<td>Received - Upload</td>
<td>Received - Data Submission</td>
<td>04/22/13</td>
<td>good online submission user:000000241 file name:as10113.xml</td>
</tr>
<tr>
<td>Resubmission</td>
<td>E-Mailed - Reject</td>
<td>Reject</td>
<td>04/19/13</td>
<td></td>
</tr>
<tr>
<td>In Process</td>
<td>Received - Upload</td>
<td>Received - Data Submission</td>
<td>04/16/13</td>
<td>good online submission user:000000241 file name:as10113.xml</td>
</tr>
<tr>
<td>Resubmission</td>
<td>E-Mailed - Reject</td>
<td>Reject</td>
<td>04/05/13</td>
<td></td>
</tr>
<tr>
<td>In Process</td>
<td>Received - Upload</td>
<td>Received - Data Submission</td>
<td>04/02/13</td>
<td>good online submission user:000000241 file name:as10113.xml</td>
</tr>
<tr>
<td>Attempted File Upload</td>
<td>Attempted File Upload - Failed</td>
<td>Reject</td>
<td>04/02/13</td>
<td>bad online submission user:000000241 file name:as10113.xml errors:5</td>
</tr>
<tr>
<td>Initial Due</td>
<td>Initial Due - Begin</td>
<td>Initial Due</td>
<td>03/25/13</td>
<td>initialized for 1st quarter of 2013</td>
</tr>
</tbody>
</table>
For More Information

Please visit the web site of the Office of Data Collection and Quality Assurance at:

Reporting resources on the web site include:

- The current AHCA Patient Data Guide
- Explanations of recent element changes
- The XML schemas (file formats)
- Sample XML files
- Links to both the Test and Submission web sites
- The complete text of the rules
- Frequently Asked Questions
When Do I Submit My Data?

DATA SUBMISSION CALENDAR

Rules 59E-7.023 and 59B-9.033, F.A.C., require that patient data be reported to AHCA quarterly and should be received by the Agency by the “Initial Due Date” reporting deadline. Data reports may be submitted prior to the Initial Due Date to allow maximum time for error correction. The rules also stipulate that the data must be certified no later than the “Certification Due Date” deadline.

AHCA reporting periods correspond to calendar year quarters. Include all patient visits and all inpatients discharged within the reporting quarter.

Facilities that fail to submit their signed quarterly certification form by the “Certification Due Date” for the data quarter will receive a “Notice of Violation” notifying them of their subsequent fines to which they are subject under the provisions of s. 408.08(13), F.S.

<table>
<thead>
<tr>
<th>Quarter</th>
<th>Time Period</th>
<th>Inpatient Data Due Date</th>
<th>Ambulatory / Emergency Data Due Date</th>
<th>Final Certification Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>January 1 – March 31</td>
<td>June 1</td>
<td>June 10</td>
<td>August 31</td>
</tr>
<tr>
<td>2nd</td>
<td>April 1 – June 30</td>
<td>September 1</td>
<td>September 10</td>
<td>November 30</td>
</tr>
<tr>
<td>3rd</td>
<td>July 1 – September 30</td>
<td>December 1</td>
<td>December 10</td>
<td>February 28 (Following Year)</td>
</tr>
<tr>
<td>4th</td>
<td>October 1 – December 31</td>
<td>March 1 (Following Year)</td>
<td>March 10 (Following Year)</td>
<td>May 31 (Following Year)</td>
</tr>
</tbody>
</table>
Internet Submission Time Frame

Quarterly data files may be submitted to the Agency 24 hours a day, 7 days a week, using the Internet Data Submission System (IDSS). The IDSS is a secure online system that utilizes Secure Sockets Layer (SSL) 128-bit encryption to protect information sent between the user browser and AHCA server.
What Happens After I Submit A Data File?

Overview of the Data Submission Process

- Submit data file
- AHCA runs file
- AHCA Emails error report to contact
- Contact corrects errors
- Contact submits corrected file
- AHCA runs file
  - Repeat as needed until all errors are corrected
- AHCA receives file without errors
- AHCA sends summary reports and certification to contact
- Contact has CEO/director sign certification
- Contact returns signed certification form to AHCA
Auditing Process

AHCA utilizes a software product called the Auditor to process your facilities data. The Auditor receives data in a specified XML format, performs a number of administrative and clinical edits on the data and generates several error reports and summaries based on this information.

All reports are emailed to the facility contact in PDF format. Each facility has the option to select the reports they wish to review.

The following are report types the facility will expect to receive:

- Facility Error Report
- Verification Report
- Threshold Report
- Norm Report
- Summary Report
Facility Error Report

An error report is generated to notify the facility contact of deficiencies in the data file that must be corrected.

The Error Report contains the patient control identification number, failed audit number and a brief audit description.
Verification reports list audits and Thresholds that can be verified. The Verification Reports include two types: Edit verification and Threshold verification.

The Analyst has the ability to “exclude” select audits. An audit may be excluded, for example, if the data failed the audit or exceeded a threshold, but a satisfactory written explanation is provided for the failure.

The facility is provided a brief summary of the audit or threshold failure to compare to their records for verification. **If the record failure is correct, the facility must check the box, provide a written explanation, and sign the verification indicating that the records were reviewed and deemed correct.**

If the facility discovers that the record is incorrect, the facility should make the correction in the data file and resubmit the corrected data file. The facility should also update their data system to reflect the corrections if necessary.
Threshold Verification Report

The Agency has set certain limits for values that may be expected to occur in the records submitted by the facility in the normal course of business. The Threshold Verification Report isolates particular pieces of data where the facility may be expected to have some number of records that are out of the ordinary.

For example, a facility may have a high number of deliveries and a low number of newborns. One may expect that the number of newborns would equal or exceed the number of deliveries. If the number of newborn’s reported are low, this may be an error, so a reasonable ratio of expected newborns are established.

Facilities may also have some number of invalid fields due of key entry errors, errors by patients or employees, or miss mapped element fields. The Threshold Verification report measures the current file against these established thresholds and generates a report outlining the compliance to the permitted thresholds. The report specifies the number of records permitted, the number of occurrences, and denotes topics that are over the permitted threshold with the flag “Exceeds Threshold.”

<table>
<thead>
<tr>
<th>Topic</th>
<th>Cases Submitted</th>
<th>Allowance Pct</th>
<th>Cases Reported</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Thresholds current as of 02/11/2011</td>
<td>152</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>1 Ethnicity-E7 (Unknown)</td>
<td>152</td>
<td>15.0%</td>
<td>22</td>
</tr>
<tr>
<td>2 Unknown Zip Code Allowance</td>
<td>152</td>
<td>7.0%</td>
<td>10</td>
</tr>
<tr>
<td>3 Unknown SSN Allowance, Age&lt;2 Years</td>
<td>152</td>
<td>15.0%</td>
<td>22</td>
</tr>
<tr>
<td>4 Unknown Infant Linkage Allowance, Age&lt;2 years</td>
<td>0</td>
<td>15.0%</td>
<td>0</td>
</tr>
<tr>
<td>5 Unknown Inpatient Admission Time</td>
<td>152</td>
<td>10.0%</td>
<td>15</td>
</tr>
<tr>
<td>6 Unknown Discharge Time</td>
<td>152</td>
<td>10.0%</td>
<td>15</td>
</tr>
<tr>
<td>7 More Deliveries than Newborns</td>
<td>0</td>
<td>52.0%</td>
<td>0</td>
</tr>
<tr>
<td>8 Principal Payer=M (Other)</td>
<td>152</td>
<td>5.0%</td>
<td>7</td>
</tr>
<tr>
<td>9 Race=7 (Unknown)</td>
<td>152</td>
<td>15.0%</td>
<td>22</td>
</tr>
<tr>
<td>10 Patient Country of Residence is Unknown (99)</td>
<td>152</td>
<td>15.0%</td>
<td>22</td>
</tr>
<tr>
<td>11 Same Attending and Performing Physicians</td>
<td>0</td>
<td>75.0%</td>
<td>0</td>
</tr>
<tr>
<td>12 ED of Injury without E-Code</td>
<td>0</td>
<td>15.0%</td>
<td>0</td>
</tr>
<tr>
<td>13 Patient Race=4 (Native Hawaiian or Pacific Islander)</td>
<td>152</td>
<td>1.0%</td>
<td>1</td>
</tr>
<tr>
<td>14 ED Hour of Arrival=Inpatient Admit Time</td>
<td>0</td>
<td>50.0%</td>
<td>0</td>
</tr>
<tr>
<td>15 Comprehensive Rehab Patients in an Inpatient Facility</td>
<td>0</td>
<td>50.0%</td>
<td>0</td>
</tr>
<tr>
<td>16 Percent acute care VS CR beds greater than 99%</td>
<td>152</td>
<td>99.0%</td>
<td>150</td>
</tr>
<tr>
<td>17 ED charges present and ED Hour of Arrival Unknown (99)</td>
<td>0</td>
<td>10.0%</td>
<td>0</td>
</tr>
<tr>
<td>18 Inconsistent Emergency Department Reporting</td>
<td>0</td>
<td>10.0%</td>
<td>0</td>
</tr>
</tbody>
</table>
The summary reports provide an overview of the data submitted by the facility. They reflect patterns in the aggregated data which can make errors obvious that may not be apparent at the record level. For example, even though the record would successfully pass the audits if they were all admitted on a Sunday, it is highly unlikely that all patients were admitted or seen on a single day. It would become immediately apparent that there was a system error upon review of the aggregate summaries.

The Data Summary Report lists each acceptable value, or range of values, for each key field in the file, as well as the number of occurrences, percent of total, total charges, average charge and average age.

This report is an excellent summary of activity within the organization. This should be a “reality check” for the facility since patterns, or changes in patterns within each field are highly visible.
# DISCHARGE DATA SUMMARY REPORT

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Discharges</th>
<th>PCT</th>
<th>Charges</th>
<th>PCT</th>
<th>Avg Charge</th>
<th>Avg Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory Surgery</td>
<td>3,275</td>
<td>13.10%</td>
<td>$81,323,032</td>
<td>38.27%</td>
<td>$24,631</td>
<td>54.3</td>
</tr>
<tr>
<td>On-Site E.D.</td>
<td>21,708</td>
<td>86.89%</td>
<td>$131,159,694</td>
<td>61.72%</td>
<td>$6,041</td>
<td>37.6</td>
</tr>
<tr>
<td>Off-Site H.D.</td>
<td>0</td>
<td>0.00%</td>
<td>$0</td>
<td>0.00%</td>
<td>$0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>24,983</td>
<td>100.00%</td>
<td>$212,482,726</td>
<td>100.00%</td>
<td>$8,505</td>
<td>39.8</td>
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</table>

<table>
<thead>
<tr>
<th>ZIP Code Type</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>00000-Unknown</td>
<td>56</td>
<td>0.22%</td>
<td>$257,205</td>
<td>0.12%</td>
<td>$4,592</td>
<td>41.0</td>
</tr>
<tr>
<td>00007-Homeless</td>
<td>13</td>
<td>0.05%</td>
<td>$178,113</td>
<td>0.08%</td>
<td>$13,701</td>
<td>48.6</td>
</tr>
<tr>
<td>00009-Foreign</td>
<td>98</td>
<td>0.39%</td>
<td>$1,695,790</td>
<td>0.79%</td>
<td>$17,303</td>
<td>48.5</td>
</tr>
<tr>
<td>P.O. Box</td>
<td>136</td>
<td>0.54%</td>
<td>$1,595,819</td>
<td>0.75%</td>
<td>$11,733</td>
<td>46.0</td>
</tr>
<tr>
<td>Non P.O. Box</td>
<td>24,656</td>
<td>98.69%</td>
<td>$208,473,984</td>
<td>98.11%</td>
<td>$8,455</td>
<td>39.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>24,959</td>
<td>99.90%</td>
<td>$212,200,911</td>
<td>98.86%</td>
<td>$8,501</td>
<td>39.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Patient Age</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1</td>
<td>659</td>
<td>2.63%</td>
<td>$1,265,637</td>
<td>0.59%</td>
<td>$1,920</td>
<td>0.0</td>
</tr>
<tr>
<td>1-17</td>
<td>5,448</td>
<td>21.80%</td>
<td>$17,975,583</td>
<td>8.45%</td>
<td>$3,299</td>
<td>6.5</td>
</tr>
<tr>
<td>18-24</td>
<td>2,093</td>
<td>8.37%</td>
<td>$12,305,281</td>
<td>5.79%</td>
<td>$5,879</td>
<td>21.1</td>
</tr>
<tr>
<td>25-29</td>
<td>1,557</td>
<td>6.23%</td>
<td>$9,827,538</td>
<td>4.62%</td>
<td>$6,312</td>
<td>26.9</td>
</tr>
<tr>
<td>30-34</td>
<td>1,376</td>
<td>5.50%</td>
<td>$10,616,471</td>
<td>4.99%</td>
<td>$7,715</td>
<td>31.9</td>
</tr>
<tr>
<td>35-39</td>
<td>1,291</td>
<td>5.16%</td>
<td>$10,713,376</td>
<td>5.04%</td>
<td>$8,298</td>
<td>37.0</td>
</tr>
<tr>
<td>40-44</td>
<td>1,468</td>
<td>5.87%</td>
<td>$14,752,140</td>
<td>6.94%</td>
<td>$10,049</td>
<td>42.0</td>
</tr>
<tr>
<td>45-49</td>
<td>1,535</td>
<td>6.14%</td>
<td>$17,091,410</td>
<td>8.04%</td>
<td>$11,134</td>
<td>47.0</td>
</tr>
<tr>
<td>50-54</td>
<td>1,538</td>
<td>6.15%</td>
<td>$17,093,625</td>
<td>8.04%</td>
<td>$11,114</td>
<td>51.9</td>
</tr>
<tr>
<td>55-59</td>
<td>1,359</td>
<td>5.43%</td>
<td>$15,325,431</td>
<td>7.21%</td>
<td>$11,204</td>
<td>56.0</td>
</tr>
<tr>
<td>60-64</td>
<td>1,239</td>
<td>4.93%</td>
<td>$14,354,248</td>
<td>6.75%</td>
<td>$11,585</td>
<td>61.9</td>
</tr>
<tr>
<td>65-69</td>
<td>1,346</td>
<td>5.38%</td>
<td>$18,268,403</td>
<td>8.59%</td>
<td>$13,572</td>
<td>66.9</td>
</tr>
<tr>
<td>70-74</td>
<td>1,210</td>
<td>4.84%</td>
<td>$16,977,097</td>
<td>7.80%</td>
<td>$13,700</td>
<td>71.9</td>
</tr>
<tr>
<td>75-79</td>
<td>1,008</td>
<td>4.03%</td>
<td>$13,910,654</td>
<td>6.54%</td>
<td>$13,800</td>
<td>76.8</td>
</tr>
<tr>
<td>80-84</td>
<td>876</td>
<td>3.50%</td>
<td>$11,268,417</td>
<td>5.30%</td>
<td>$12,863</td>
<td>81.8</td>
</tr>
<tr>
<td>85-99</td>
<td>575</td>
<td>3.90%</td>
<td>$11,075,362</td>
<td>5.21%</td>
<td>$11,359</td>
<td>88.6</td>
</tr>
<tr>
<td>100-115</td>
<td>5</td>
<td>0.02%</td>
<td>$51,653</td>
<td>0.02%</td>
<td>$10,330</td>
<td>100.8</td>
</tr>
</tbody>
</table>

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Easy File Correction

You may easily correct errors contained in the data by editing in notepad.

- Right Click on the data file
  - Open with
  - Notepad
- Edit
  - Find or ctrl F
- Enter the patient control/record number, this function will take you to and highlight the specified record
  - Enter corrected information, make sure to input data between the opening and closing tags
    - Example: `<PRINC_PAYER_CODE>K</PRINC_PAYER_CODE>`
- Save updated file
- Resubmit updated file to AHCA
AHCA Test Site

AHCA Provides a XML TEST WEB SITE where facilities can validate that they have correctly mastered the XML file format. The Test site requires a separate new account password setup. This new account setup is different from the User ID and password account.

- Please contact Cindy Kucheman to receive a password setup.
  Call or email Cindy at 850-412-3760 or email Cindy.Kucheman@ahca.myflorida.com

- The test site can be accessed at:
  https://b.apps.ahca.myflorida.com/ahcauploadinpatient/

The test site only verifies the XML format. The file must be submitted to the AHCA production site for Auditor processing.
What Is a Schema?

A schema is a set of directions that instruct how the XML data file must be formatted. All data submitted via the Internet must be electronically transmitted using the relevant XML schema. File formats must follow the sequencing order and meet data element specifications.

The Schema is divided into several basic sections:

- **declaration** identifies schema type
- **header** facility information
- **body of records** quarterly data records
- **trailer** count of records submitted

AHCA has a schema designation for each data type. Sample schema files are also available on the data collection website.


**Inpatient/Comprehensive Rehab Reporting Resources**
- Data Specifications: (PD10-2)
- [Inpatient XML Schema PD 10-2](http://ahca.myflorida.com/xmlschemas/inppoa22.xsd)
- [Inpatient XML Sample File PD 10-2](http://ahca.myflorida.com/xmlschemas/inppoa22.xsd)

**Ambulatory/ED Reporting Resources**
- Data Specifications: (AS10-1)
- [Ambulatory/ED XML Schema AS 10-1](http://ahca.myflorida.com/xmlschemas/asc22.xsd)
- [Ambulatory/ED XML Sample File AS 10-1](http://ahca.myflorida.com/xmlschemas/asc22.xsd)
Data Assistance

Help is here!! CALL THE DATA BUSTERS!!

Contact Nancy Tamariz or Cindy Kucheman if you receive an ‘Upload Unsuccessful’ error report and need help correcting the error. We are more than happy to provide assistance with data upload errors, XML problems or other questions regarding data submission or data requirements.

Nancy Tamariz at 850-412-3741 or nancy.tamariz@ahca.myflorida.com
Cindy Kucheman at 850-412-3760 or cindy.kucheman@ahca.myflorida.com
OTHER HELPFUL LINKS


- Reference the Social Security Administration website for verification of assigned Social Security number prefixes: www.ssa.gov/employer/stateweb.htm

- For a comprehensive listing of E-Code general guidelines, you may visit: www.eicd.com/Guidelines/ECodes.htm

- To verify physician license numbers, visit the DOH Florida Medical License Search: http://ww2.doh.state.fl.us/irm00praes/praslist.asp

- To verify U.S. Postal Zip Codes, visit the USPS Zip Code lookup search at: http://zip4.usps.com/zip4/citytown.jsp

- To verify Country Codes, visit the ISO 3166 website at: http://www.iso.org/iso/country_codes.htm
QUESTIONS?