Kick Off Call (Data Intake Phase)

During our Data Intake phase, one of our engineers will work with your technical point of contact or file creator to ensure a smooth validation process of your test files. This process usually starts with one of our Data Intake engineers reaching out to your contact with an introductory email directly after the Kickoff call has occurred. This email includes the current Medisolv File Specifications along with helpful links and information pertaining to your implementation.

Our process of validation usually takes about 2 weeks with continued conversation between the client and our engineers. This timeframe could be shorter or longer than proposed dependent on the corrections needed within the files and the frequency of each set of test files submitted for validations. Once validations are completed, our team will sign off on the files and have our Networking team move your organization into production.

Frequently Asked Questions

- **What are the file formats accepted for processing?**
  - The files must be pipe delimited files with .CSV extension.
  - The files must conform to the Medisolv File Naming Conventions listed in the Medisolv File Specifications.
  - The records should not be wrapped in or contain quotes.
  - Please suppress any additional messaging from your SQL database or export process, as this will cause issues when loading.

- **Do we need to create all the files listed in the File Specifications?**
  - No, the focus for validations should be the <u>Base Demographic files for both Inpatient and Outpatient cases</u>. These files populate the application. The remaining files listed are known as Optional Core Measure files. Those files may be utilized by your organization to submit answers through file processing to pre-populate answers on the worksheets. Utilizing these files help reduce the abstraction burden. They may be introduced into file processing at anytime and are not necessary for the initial validations.

- **What do the different fields mean in the Optional or Required Column?**
  - Fields that are marked as "Required" will cause a case to be rejected during processing if that field is not present with an allowable value from the specifications. "Recommended" fields are considered beneficial to have to qualify that case for a specific measure. "Optional" fields are strictly at the discretion of the organization and file creator to include. Please keep in mind, the more information provided, the more efficient the abstraction process becomes within the worksheets.

- **How much data do we need to provide for validations?**
    - We suggest providing between one and three months of data. The data should be "recent" (within the past 1-1.5 years) and should represent your production data as closely as possible.

- **How do we perform the validation process?**
    - Once Data Intake reaches out with their initial email, please work to create the first set of test files. These files would then be placed in your organizations sFTP file location assigned by our Network team.
        - Note: when submitting files for validation, or you need to send a file but not to your production environment, please ensure that "TEST_" is prefixed to the filename.
    - We will then run those test files through our validation scripts and report back by email any corrections that are needed. You will receive a .CSV file that contains some informational messaging, as well as messaging that will help you troubleshoot any issues.
        - Note that due to HIPAA constraints, we are not able to provide you with patient-level information to pinpoint records with specific issues.
        - Instead, we make references to either the physical line number in the file (note that the file header is considered line 1), or the column that the value is in as well as the value itself.
        - Messages such as "No record has <field name> valued", then no record in the file load has a value in that field. This often means that the records will either reject or be accepted into staging but not fall into a population as those fields are used to determine what population the case qualifies for.
        - Note that not all messaging is critical, but all messages should be considered.
        - If any of the messaging is unclear, or you have additional questions, please reach out to **DataIntake@Medisolv.com**.
    - Once those corrections are complete from your team, new files would need to be submitted for further validation and analysis. This process would continue until files have been signed off and your organization is moved into production.

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- **I have submitted files and received the validation results; why are there Diagnosis Codes marked as invalid?**
    - o There are a few reasons why the code(s) might be marked as invalid:
        - The code is truly not an ICD10 Diagnosis code.
        - The code is an ICD10 Diagnosis code, but the dot is present in the code. Dots should be removed from ICD10 Diagnosis codes.
        - The code is an ICD10 Diagnosis code, the dot has been removed, but the code is/was not valid for the Discharge Date or Encounter Date of the case it is associated with.

- **Do we need to provide Mass Health Files?**
    - o Mass Health files are relevant to those organizations located in Massachusetts. If your organization is not located in Massachusetts, the Mass Health files can be ignored. If they are relevant to your organization, Mass Health files are still not a requirement during the initial Data Validation phase, but we do have a process to check them if desired.

- **Do we need to include the field "Raw Payer 1" in our Base Demographic Files?**
    - o This field is only required for Mass Health Participants.

- **When does processing occur once we're in production?**
    - o We process files every evening starting at 11:59pm ET. We suggest files be sent to us before 11:30pm ET to ensure timely transition from our sFTP server to bulk load into the database.

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