APPENDIX I
DATA QUALITY ASSESSMENT REPORTS

SUBMISSION EDIT REPORT

PLAN ID: PLAN NAME:

		ENCOUNTER TYPE		
		EDIT COUNTS		
EDIT NUMBER	EDIT REASON	PHYS/OTH	INPATIENT	PHAR/DME
0010	ENCOUNTER TYPE INVALID	0	0	0
0020	RECIPIENT ID MISSING OR INVALID	2,108	1	9
0030	RECIPIENT ID NOT ON FILE	68	15	5
0031	RECIP ENROLLED WITH ANOTHER PLAN DURING SERVICE PD	5,530	452	10
0035	RECIP INELIGIBLE DURING SERV PERIOD (30 DAY RECYC)	4,119	80	1,577
0037	RECIPIENT INELIGIBLE DURING SERVICE PERIOD	1	0	0
0038	RECIPIENT ENROLLMENT NOT YET REFLECTED ON SYSTEM	20,654	537	1,054
0039	RECIPIENT ENROLLMENT NOT REFLECTED ON SYSTEM	0	0	3
0040	DATE OF SERVICE MISSING	0	0	0
0050	DATE OF SERVICE INVALID	1	0	0
0060	ADMIT DATE MISSING	0	0	0
0070	ADMIT DATE INVALID	0	0	0
0080	BENEFICIARY ID MISSING	0	0	0
0090	PROVIDER SPECIALTY MISSING	0	0	0
0100	PROVIDER SPECIALTY NOT ON FILE	0	0	0
0110	PRIMARY DIAGNOSIS CODE MISSING	0	0	0
0120	PRIMARY DIAGNOSIS CODE NOT ON FILE	0	0	0
0130	DIAGNOSIS CODE AND PROCEDURE CODE MISSING	385	0	0
0140	CONTROL NUMBER MISSING	0	0	0
0150	PROVIDER LICENSE NUMBER MISSING	3,623	0	0
0160	PRINCIPAL PROCEDURE CODE MISSING	0	3,296	0
0170	PRINCIPAL PROCEDURE CODE NOT ON FILE	0	6,262	0
0180	SERVICE END DATE INVALID	0	0	0
0190	SERVICE END DATE PRIOR TO SERVICE FROM DATE	0	0	0
0200	CTHP INDICATOR MISSING	0	0	0
0210	CTHP INDICATOR INVALID	0	0	0
0220	FAMILY PLANNING INDICATOR MISSING	0	0	0
0230	FAMILY PLANNING INDICATOR INVALID	0	0	0
0240	CATEGORY OF SERVICE MISSING	0	0	0
0250	CATEGORY OF SERVICE INVALID	0	0	0
0260	INPATIENT MMIS PROVIDER ID MISSING	0	895	0
0270	INPATIENT MMIS PROVIDER ID IS NOT ON FILE	0	7	0
0280	INPATIENT MMIS PROVIDER ID IS NOT A HOSPITAL	0	321	0
0290	MSIS PLAN ID MISSING	0	0	0
0300	MMIS PLAN ID NOT ON FILE	0	0	0
0310	MMIS PLAN ID IS NOT AN HMO PROVIDER	0	0	0
0320	DIAGNOSIS CODE 2 NOT ON FILE	26	0	0
0330	DIAGNOSIS CODE 3 NOT ON FILE	10	0	0
0340	DIAGNOSIS CODE 4 NOT ON FILE	0	0	0
0350	DISCHARGE STATUS MISSING	0	19	0
0360	DISCHARGE STATUS INVALID	0	27	0
0370	DRG CODE MISSING	0	0	0
0380	DRG CODE INVALID	0	21	0
0390	DRG CODE AND DIAGNOSIS CODE MISSING	0	0	0
0400	DUPLICATE ENCOUNTER RECORD	711	2,086	366
0410	PROCEDURE CODE 1 MISSING	48,594	0	0
0420	PROCEDURE CODE 1 NOT ON FILE	27,513	0	0
0430	PROCEDURE CODE 2 NOT ON FILE	1,064	0	0
0440	PROCEDURE CODE 3 NOT ON FILE	426	0	0
0450	PROCEDURE CODE 4 NOT ON FILE	175	0	0
0460	PROCEDURE CODE 5 NOT ON FILE	89	0	0
0470	PROCEDURE CODE 6 NOT ON FILE	0	0	0
0480	PROCEDURE UNITS 1 MISSING/INVALID	0	0	0
0490	PROCEDURE UNITS 2 MISSING/INVALID	0	0	0
0500	PROCEDURE UNITS 3 MISSING/INVALID	0	0	0
0510	PROCEDURE UNITS 4 MISSING/INVALID	0	0	0
0520	PROCEDURE UNITS 5 MISSING/INVALID	0	0	0
0530	PROCEDURE UNITS 6 MISSING/INVALID	0	0	0
0540	DUPLICATE PROCEDURES REPORTED FOR BLOCK ENCOUNTER	0	0	0
0550	DATE PRESCRIBED MISSING	0	0	0
0560	DATE PRESCRIBED INVALID	0	0	0
0570	SERVICE DATE PRIOR TO DATE PRESCRIBED	0	0	0
0580	NDC CODE MISSING	0	0	0
0590	NDC CODE NOT ON FILE	0	0	622
0600	NDC UNITS MISSING	0	0	0
0610	NDC UNITS INVALID	0	0	0
0620	DAYS SUPPLY MISSING	0	0	0
0630	DAYS SUPPLY INVALID	0	0	876
0640	MMIS PROVIDER ID MISSING	0	0	17,085
0650	MMIS PROVIDER ID NOT ON FILE	0	0	0
0660	INVALID PROCEDURE FOR BLOCK ENCOUNTER	0	0	0
0670	COS NOT ALLOWED TO SUBMIT BLOCK ENCOUNTER	0	0	0
0680	PRESCRIBER LICENSE NUMBER MISSING	0	0	8
0690	DISCHARGE DATE MISSING	0	0	0
0700	DISCHARGE DATE INVALID	0	0	0
0710	DISCHARGE DATE PRIOR TO ADMIT DATE	0	0	0
0720	DIAGNOSIS CODE 1 MISSING	2,114	0	0
0730	DIAGNOSIS CODE 1 NOT ON FILE	20	0	0
0740	UNITS NOT THE SAME FOR BLOCK ENCOUNTER PROC CODES	0	0	0
0750	BLOCK ENCOUNTER FROM/END DATES NOT IN SAME MONTH	0	0	0
0760	PRENATAL PROCEDURE CODE NOT ALLOWED	13	0	0
0770	INVALID ADJUSTMENT/VOID CODE	0	0	0
0780	PREVIOUS ERN NOT PRESENT FOR ADJ/VOID CODE	0	0	0
0790	ADJ/VOID CODE NOT PRESENT FOR PREVIOUS ERN	0	0	0
0800	NO MATCH FOUND ON HISTORY FOR ADJUSTMENT	0	0	0
0810	NO MATCH FOUND ON HISTORY FOR VOID	0	0	0
0820	PROVIDER LICENSE OR MMIS PROVIDER ID REQUIRED	0	0	0
0830	ENCOUNTER TYPE AND CATEG OF SERV NOT COMPATIBLE	77	0	0

SUBMISSION SUMMARY REPORT

MONTHLY ENCOUNTER SUBMISSION TOTALS	ENCOUNTER TYPE			
	TOTAL	PHYS/OTH	INPATIENT	PHAR/DME
RECORDS SUBMITTED	181,598	131,239	8,558	41,801
- RECYCLE RESUBMIT	17,603	15,183	108	2,312
- ORIGINAL RECORDS	181,598	131,239	8,558	41,801
- ADJUSTED RECORDS	0	0	0	0
- VOIDED RECORDS	0	0	0	0
RECORDS ACCEPTED	61,552	20,126	4,127	37,299
RECORDS REJECTED	92, 025	86,340	3,814	1,871
- DUPLICATE RECORDS	3,163	711	2, 086	366
- NON DUPLICATE RECORDS	88,862	85,629	1,728	1,505
RECORDS RECYCLED	28,021	24,773	617	2,631
- RECORDS RECYCLED EDIT 0035	5,776	4,119	80	1,577
- RECORDS RECYCLED EDIT 0038	22,245	20,654	537	1,054
LAST SUBMISSION DATE BY ENCOUNTER TYPE:		2/18/1998	2/18/1998	2/18/1998

TRACKING INFORMATION (QUARTERLY BY DATE OF SERVICE)				
JAN 1998 TO MAR 1998				
ENCOUNTER HISTORY RECORDS PRIOR TO UPDATE	0	0	0	0
ENCOUNTER HISTORY RECORDS AFTER UPDATE	37,920	542	89	37,289
OCT 1997 TO DEC 1997				
ENCOUNTER HISTORY RECORDS PRIOR TO UPDATE	142,295	38,243	609	103,443
ENCOUNTER HISTORY RECORDS AFTER UPDATE	159,892	55,490	949	103,453
JUL 1997 TO SEP 1997				
ENCOUNTER HISTORY RECORDS PRIOR TO UPDATE	189,239	85,949	1,125	102,255
ENCOUNTER HISTORY RECORDS AFTER UPDATE	190,950	87,397	1,298	102,255
APR 1997 TO JUN 1997				
ENCOUNTER HISTORY RECORDS PRIOR TO UPDATE	218,646	101,361	1,401	115,884
ENCOUNTER HISTORY RECORDS AFTER UPDATE	219,046	101,617	1,545	115,884

- PLAN VS. COUNTY AND STATE BY PHYSICIAN SPECIALTY CATEGORY

HMOS AND PHSPS
REPORTING QUARTER 04/01/1997 – 06/30/1997

* PLAN: WELLCARE – NYC *

PREVIOUS 9 MONTHS 07/01/1996 – 03/31/1997

	WELLCARE				NYC				STATE			
	QUARTER		PREVIOUS 9 MONTHS		QUARTER		PREVIOUS 9 MONTHS		QUARTER		PREVIOUS 9 MONTHS	
SPECIALTY CATEGORY	ENC	RATE	ENC	RATE	ENC	RATE	ENC	RATE	ENC	RATE	ENC	RATE
PRIMARY CARE	910	51.8	3,245	61.4	120,045	104.8	570,716	177.9	254,359	137.7	1,013,899	192.6
PEDIATRICS	612	34.8	2,110	39.9	53,725	46.9	225,517	70.3	115,735	62.7	431,141	81.9
OB/GYN	20	1.1	93	1.8	4,273	3.7	26,591	8.3	18,099	9.8	74,579	14.2
GP/FP/IM	278	15.8	1,042	19.7	55,419	48.4	274,715	85.6	113,732	61.6	463,991	88.1
ALL OTHER	0	0.0	0	0.0	6,628	5.8	43,893	13.7	6,793	3.7	44,188	8.4
MEDICINE	20	1.1	55	1.0	13,472	11.8	56,174	17.5	24,913	13.5	97,744	18.6
CARDIO/PULMON	0	0.0	6	0.1	909	0.8	4,453	1.4	1,871	1.0	8,217	1.6
REROD/UROGEN	0	0.0	2	0.0	697	0.6	3,727	1.2	1,058	0.6	5,049	1.0
OTHER INT MED	2	0.1	5	0.1	1,174	1.0	8,174	2.5	2,776	1.5	14,157	2.7
DERMATOLOGY	1	0.1	9	0.2	1,799	1.6	8,307	2.6	2,788	1.5	11,365	2.2
THERA/REHAB/PHYS	0	0.0	0	0.0	2,311	2.0	7,083	2.2	2,898	1.6	9,662	1.8
NEUROLOGY	6	0.3	2	0.0	907	0.8	3,731	1.2	1,768	1.0	6,926	1.3
EMERGENCY	1	0.1	7	0.1	4,704	4.1	14,603	4.6	9,158	5.0	31,144	5.9
ALLERGY/IMMUN	10	0.6	24	0.5	971	0.8	6,096	1.9	2,596	1.4	11,224	2.1
NEO/PERINATAL	0	0.0	0	0.0	196	0.2	1,858	0.6	477	0.3	3,533	0.7
ALL PEDIATRIC SPEC	0	0.0	1	0.0	701	0.6	3,720	1.2	1,657	0.9	6,833	1.3
RADIOLOGY	35	2.0	115	2.2	3,597	3.1	19,255	6.0	11,067	6.0	45,094	8.6
PATHOLOGY	0	0.0	1	0.0	1,334	1.2	6,524	2.0	1,811	1.0	8,910	1.7
ANESTHESIOLOGY	4	0.2	17	0.3	1,509	1.3	5,820	1.8	2,636	1.4	10,611	2.0
SURGERY	11	0.6	112	2.1	5,331	4.7	26,550	8.3	13,388	7.3	54,546	10.4
GENERAL	0	0.0	13	0.2	1,408	1.2	5,552	1.7	2,499	1.4	9,628	1.8
ORTHOPEDIC	0	0.0	12	0.2	1,743	1.5	7,001	2.2	3,745	2.0	12,955	2.5
ENT	1	0.1	19	0.4	`706	0.6	5,017	1.6	2,371	1.3	10,725	2.0
OPHTHALMOLOGY	9	0.5	60	1.1	564	0.5	4,113	1.3	1,665	0.9	7,218	1.4
AMBULATORY	0	0.0	0	0.0	76	0.1	586	0.2	1,525	0.8	6,837	1.3
ALL OTHER	1	0.1	8	0.2	834	0.7	4,281	1.3	1,583	0.9	7,183	1.4
HIV/AIDS	0	0.0	0	0.0	66	0.1	639	0.2	70	0.0	859	0.2
BEHAVIORAL HEALTH	0	0.0	0	0.0	2,675	2.3	14,823	4.6	6,424	3.5	29,342	5.6
PSYCHIATRY	0	0.0	0	0.0	1,052	0.9	6,472	2.0	2,662	1.4	14,233	2.7
ALL OTHER MH	0	0.0	0	0.0	1,140	1.0	4,465	1.4	2,229	1.2	7,627	1.4
ALC/SUB ABUSE	0	0.0	0	0.0	437	0.4	3,702	1.2	1,487	0.8	7,298	1.4
MRDD	0	0.0	0	0.0	46	0.0	184	0.1	46	0.0	184	0.0
OTHER/UNCLASSIFIED	67	3.8	500	9.5	10,414	9.1	54,632	17.0	29,007	15.7	119,945	22.8
TOTAL	1,047	59.6	4,046	76.5	159,340	139.1	760,711	237.1	345,809	187.3	1,391,316	264.2

- PLAN VS. COUNTY AND STATE BY PHYSICIAN SPECIALTY CATEGORY

HMOS AND PHSPS
REPORTING QUARTER 04/01/1997 – 06/30/1997

* PLAN: WELLCARE – TOTAL *

PREVIOUS 9 MONTHS 07/01/1996 – 03/31/1997

	WELLCARE				NYC				STATE			
	QUARTER		PREVIOUS 9 MONTHS		QUARTER		PREVIOUS 9 MONTHS		QUARTER		PREVIOUS 9 MONTHS	
SPECIALTY CATEGORY	ENC	RATE	ENC	RATE	ENC	RATE	ENC	RATE	ENC	RATE	ENC	RATE
PRIMARY CARE	7,219	125.9	26,345	162.9					254,359	137.7	1,013,899	192.6
PEDIATRICS	3,921	68.4	14,018	86.7					115,735	62.7	431,141	81.9
OB/GYN	231	4.0	1,707	10.6					18,099	9.8	74,579	14.2
GP/FP/IM	3,057	53.3	10,606	65.6					113,732	61.6	463,991	88.1
ALL OTHER	10	0.2	14	0.1					6,793	3.7	44,188	8.4
MEDICINE	121	2.1	880	5.4					24,913	13.5	97,744	18.6
CARDIO/PULMON	16	0.3	48	0.3					1,871	1.0	8,217	1.6
REROD/UROGEN	0	0.0	11	0.1					1,058	0.6	5,049	1.0
OTHER INT MED	21	0.4	245	1.5					2,776	1.5	14,157	2.7
DERMATOLOGY	7	0.1	41	0.3					2,788	1.5	11,365	2.2
THERA/REHAB/PHYS	4	0.1	41	0.3					2,898	1.6	9,662	1.8
NEUROLOGY	46	0.8	227	1.4					1,768	1.0	6,926	1.3
EMERGENCY	12	0.2	137	0.8					9,158	5.0	31,144	5.9
ALLERGY/IMMUN	15	0.3	130	0.8					2,596	1.4	11,224	2.1
NEO/PERINATAL	0	0.0	0	0.0					477	0.3	3,533	0.7
ALL PEDIATRIC SPEC	18	0.3	81	0.5					1,657	0.9	6,833	1.3
RADIOLOGY	394	6.9	1,136	7.0					11,067	6.0	45,094	8.6
PATHOLOGY	29	0.5	162	1.0					1,811	1.0	8,910	1.7
ANESTHESIOLOGY	22	0.4	200	1.2					2,636	1.4	10,611	2.0
SURGERY	189	3.3	1,187	7.3					13,388	7.3	54,546	10.4
GENERAL	18	0.3	186	1.1					2,499	1.4	9,628	1.8
ORTHOPEDIC	60	1.0	295	1.8					3,745	2.0	12,955	2.5
ENT	35	0.6	239	1.5					2,371	1.3	10,725	2.0
OPHTHALMOLOGY	52	0.9	282	1.7					1,665	0.9	7,218	1.4
AMBULATORY	3	0.1	3	0.0					1,525	0.8	6,837	1.3
ALL OTHER	21	0.4	182	1.1					1,583	0.9	7,183	1.4
HIV/AIDS	0	0.0	0	0.0					70	0.0	859	0.2
BEHAVIORAL HEALTH	0	0.0	445	2.8					6,424	3.5	29,342	5.6
PSYCHIATRY	0	0.0	19	0.1					2,662	1.4	14,233	2.7
ALL OTHER MH	0	0.0	426	2.6					2,229	1.2	7,627	1.4
ALC/SUB ABUSE	0	0.0	0	0.0					1,487	0.8	7,298	1.4
MRDD	0	0.0	0	0.0					46	0.0	184	0.0
OTHER/UNCLASSIFIED	1,103	19.2	3,472	21.5					29,007	15.7	119,945	22.8
TOTAL	9,095	158.6	33,908	209.6					345,809	187.3	1,391,316	264.2