

Important Content Update Message

We are currently updating the OP Help Center content for the release of OP 20. OP 20 (official version 20.0.x) is the certified, 2015 Edition, version of the Office Practicum software. This is displayed in your software (**Help tab > About**) and in the Help Center tab labeled Version 20.0. We appreciate your patience as we continue to update all of our content.

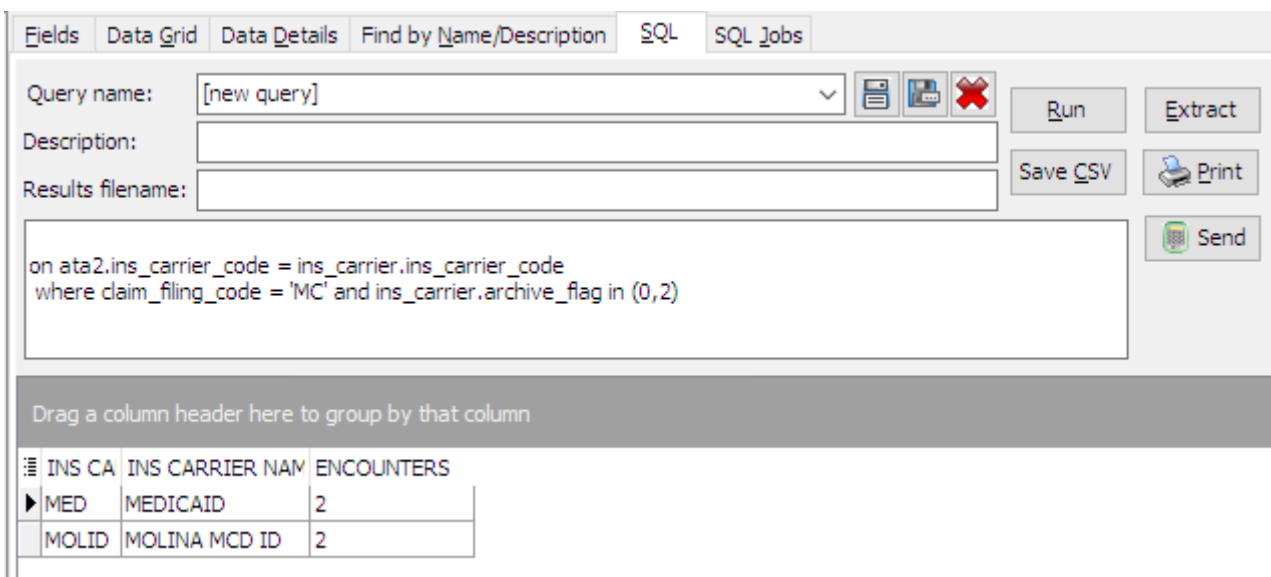
SQL: Medicaid Volume - Confirm Medicaid Payers for MU Attestation

Last Modified on 12/03/2019 12:32 pm EST

About

This report identifies unique Medicaid encounters (patient and date of service) for Medicaid, for 90 days beginning on a reference date you specify. It is meant to be used to make sure you have properly labeled all the different Medicaid insurance plans in your practice as “Medicaid” before you attempt to compute a percent Medicaid for Meaningful Use.

A sample image of this SQL report run in the Database Viewer is shown below:



The screenshot shows a Database Viewer interface with the following elements:

- Navigation tabs: Fields, Data Grid, Data Details, Find by Name/Description, SQL (selected), SQL Jobs.
- Query name: [new query]
- Description: (empty field)
- Results filename: (empty field)
- Buttons: Run, Extract, Save CSV, Print, Send.
- SQL Query:

```
on ata2.ins_carrier_code = ins_carrier.ins_carrier_code
where claim_filing_code = 'MC' and ins_carrier.archive_flag in (0,2)
```
- Instructions: Drag a column header here to group by that column
- Results Table:

INS CA	INS CARRIER NAM	ENCOUNTERS
MED	MEDICAID	2
MOLID	MOLINA MCD ID	2

Caveats

- The insurance plan must be listed as a Medicaid in the OP insurance tables. Path **Utilities > Manage Practice > Insurance Payers > Edit > Claims/Routing > Claim type: Medicaid**.
- Because this report is not intended to be used directly for Meaningful Use submission, all

locations and all providers in the practice are grouped together.

- Only encounters where a claim was submitted to the Medicaid plan are counted - even if the claim was denied.
- Primary, secondary, and tertiary Medicaid plans are counted.

Code

To highlight and copy the code below to your clipboard, simply click the **Copy** button.

Copy

```
select ins_carrier.ins_carrier_code, ins_carrier_name, encounters from ins_c
arrier
left outer join
(
select count(uniqid) as encounters, ins_carrier_code from
(
select distinct uniqid, ins_carrier_code from (

select patno, datel, (patno || ' ' || datel) as uniqid, cptcode, ins_carri
er_code from archive_transactions at1
where at1.cptcode not in ('1','2','3','4') and pos not in (21,23) and
at1.datel between :attestation_start and ( :attestation_start + 89) and at
1.archive_flag = 1
union
select patno, datel, (patno || ' ' || datel) as uniqid, cptcode, ins_carri
er_code_other as ins_carrier_code from archive_transactions at2
where at2.cptcode not in ('1','2','3','4') and pos not in (21,23) and
at2.datel between :attestation_start and ( :attestation_start + 89) and a
t2.archive_flag = 1
) atal
)
)
group by ins_carrier_code ) ata2

on ata2.ins_carrier_code = ins_carrier.ins_carrier_code
where claim_filing_code = 'MC' and ins_carrier.archive_flag in (0,2)
```