



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: MU State Group 1 Drill Down

Last Modified on 01/15/2020 11:55 am EST

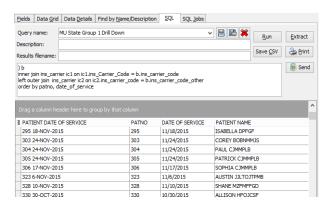
About

This SQL Code provides detailed attestation results at the patient level for states that were grouped into Group 1 in the **MU: State Group SQL Table** The report provides patient-level detail for audit purposes.



Note: Export, save, and print all results for audit purposes at the time you run them for actual volume validation.

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



Caveats

- Individual drill down requires the providers ID number to retrieve only that provider's data. If
 you prefer to select from a dropdown and filter to the provider, you will want to use the Group
 level detail report.
- Depending on your billing, you may need to make some adjustments to the SQL code to
 exclude certain CPT codes from Encounter visits and/or to exclude some insurance payers
 as Medicaid.
- Provider decision to submit results as an individual.
- State is listed in group 1 (seeMU: State Group SQL Tableand MU: State Assumptions).





Code

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







```
select distinct patient date of service, patno, date of service, patient nam
e, dob, staffname, b.ins carrier code, icl.ins fullname, b.ins carrier code
other, ic2.ins fullname, medicaid id, determination
from (
select patient date of service, patno, patient name, dob, date of service, s
taffid, staffname, ins carrier_code, ins_carrier_code_other, c1,c2, determin
ation , case when determination = 'not Medicaid' then '-' when c1 = 'MC' the
n insured id when c2 = 'MC' then insured id other else '*-' end as Medicaid
from
(
select distinct uniqid as patient date of service, patno, dob, date1 as date
of service, patient name, staff1.staffid, staff1.staffname, a.ins carrier
code, a.ins carrier code other, il.claim filing code as cl, i2.claim filing
code as c2, case when (i1.claim filing code = 'MC' or i2.claim filing code =
'MC') then 'Medicaid' else 'not Medicaid' end as determination, insured id,
insured id other from
select patno, (fname | | ' ' | | lname) as patient name, birthdat as dob, re
nd addr id, datel, (patno || ' ' || datel) as uniqid, cptcode, atl.ins carri
er code, atl.ins carrier code other, atl.insured id, atl.insured id other fr
om archive transactions at1
inner join register on register.patno = atl.patno
where at1.cptcode not in ('1','2','3','4') and pos not in (21,23) and at1.c
ptcode not in ('113', '999999', 'P1001') and
atl.ins carrier code not in ('XCLUDE') and patno >99 and
atl.datel between :attestation start and (:attestation start + 89) and atl
.archive flag = 1
left outer join ins carrier il on il.ins carrier code = a.ins carrier code
left outer join ins carrier i2 on i2.ins carrier code = a.ins carrier code o
left outer join staff1 on staff1.staffid = a.rend addr id
order by determination
)
) b
inner join ins carrier icl on icl.ins Carrier Code = b.ins carrier code
left outer join ins carrier ic2 on ic2.ins carrier code = b.ins carrier cod
e other
order by patno, date of service
```

