Holiday Hours

WHAIC will be closed:

November 22 and 23
December 24 and 25
December 31 and January 1

We wish you a happy, healthy and safe holiday season!

What's new in WIpop!

New! Q3 2018 - Data Integrity Report

A new WIpop report is nearing completion and will be available by 12/1/2018 for all registered WIpop users (including your facility end-users of the data) in real-time. This is a one-page report that provides the number of records / encounters submitted in each data type for the quarter by month with the totals compared to the previous quarter.

This report provides data with and without edits from all successful batch files. It is intended to serve as a preliminary validation report. In fact, we've adjusted the Summary Profile Report and the Affirmation Statement to look alike and report monthly data in addition to the current and previous quarter totals.

We encourage you to run this report as often as you find necessary to make sure all the data is in. Review each patient type and verify the monthly data represents the correct number of patient encounters. Verifying the data may require numerous internal analytical tools, internal census, abstract or audit reports and/or communication with your vendor. Any change in patient volume over or under 20% should be investigated.

Do you know the value of your data?

What value does your data provide? Do you know who (internally or externally) uses the data you provide?

The data you submit each quarter is a valuable resource to your hospital/ASC internal data users and customers of WHAIC. You play a pivotal role in this process and in data validation.

Data validation is intended to provide certain well-defined guarantees of accuracy and consistency. In other words, your job doesn't stop with a successful batch file, fixing edits or waiting for the affirmation to post and return. The quality of the data is dependent upon the amount of time you or your team spends validating it.

Did you know WHAIC processes over 3 million records per quarter and evaluates data for over 240 hospitals and ASCs across the state?

The facility assigned primary contact(s) is the main go-to person directly responsible for quarterly discharge data. This primary contact for your facility should be **making sure the quarterly files are downloaded and saved to your internal directory, verify data is accurate, validated and represents the correct number of patient encounters.**

The primary contact is also WHAICs go-to person for issues found when we're closing the quarter. We rely on the primary contact to respond to inquiries, provide the assurances necessary to confirm the data is of high quality and appropriate, provide comments about significant shifts, and confirms fixes are in place, when necessary.

WHAIC strongly encourages you to **save a copy of your quarterly/validation reports.** They are an excellent reference to do comparisons of subsequent data submissions. It is your responsibility to validate and verify the accuracy and completeness of your facility data, WHAIC cannot do that for you. If you notice any data discrepancies, we may be able to assist in troubleshooting potential problems.

Important Reminders!

WHAIC provides multiple opportunities to review the data throughout the quarter with real-time WIpop reports, or through the portal with quarter-end validation reports. As previously mentioned, the summary profile report was recently updated and will mirror the Data Integrity Report and Data Affirmation Statement with monthly totals for each patient type as well as current and previous quarter totals. This is one of the best reports available to use while evaluating your data because it contains all the information needed to begin your structured validation process. There's a limited number of pages with easy to read data in colorful graphs and charts.

- We encourage you to utilize the reports we make available to verify your data during the submission period and at the end of the quarter during the validation period.
- The validation period is your opportunity to submit or correct the number of records submitted for the quarter.
- **Effective with Q318:** The Affirmation Statement will have a two-prong process to confirm the data was validated. 1) It will require submitter to check a box that the data was reviewed, and 2) require comments if there is a 20% variance in the data.
- **Effective with Q318:** Batch files will be rejected if greater than 25% of race and ethnicity are reported as unknown or declined. It is expected that some records will have declined or unavailable and that's okay.
- **Effective with Q318:** The Data Integrity Report is one of many real-time analytic reporting tools available to facilities.
- Please *download and save either an electronic or paper copy* of your summary profile report **and** affirmation statement for future reference.

Thank you for your efforts in producing high quality data for your facility, external users, and those that perform utilization review, research, and market share analysis.