

## Statewide Planning and Research Cooperative System (SPARCS) Data Submission Release Notes

The following is a list of currently resolved or currently known SPARCS data submission edit changes or issues. The SPARCS submission program is working with its vendor Optum to correct these issues as quickly as possible and will keep users updated as changes occur. We welcome your feedback. If you believe other issues exist, please contact the Optum/SPARCS helpdesk at (844) 225-3719; Monday-Friday, 8AM-7PM EST.

#	Status	Date Resolved	Effected Field(s)/Loop(s)	Current Edit	What was happening	What will now happen (New Edit)
1	Resolved	04/18/2019	Loop 2300/NTE02	When principal diagnosis code is a myocardial infarction condition, patient heart rate, as well as systolic and diastolic blood pressure values, must be reported in loop 2300 NTE claim note segment	The edit description was unclear	The edit description will be: "When principal diagnosis code is a myocardial infarction condition patient heart rate as well as systolic and diastolic blood pressure values must be reported in Loop 2300 NTE claim note segment."
2	Resolved	04/18/2019	Loop 1000B	Receiver Name Loop 1000B is required	Files are accepted and processed when the required Receiver Name Loop is missing	If the Receiver Name Loop is missing, then the files will be accepted, but all records will be rejected with an error message indicating the required Receiver Name Loop is missing.
3	Resolved	04/18/2019	Loop 2010BA / DMG05 and Loop 2010CA / DMG05	The race or ethnicity code is required if the patient information is present	Along with patient race and ethnicity, subscriber race and ethnicity were being required when the subscriber was not the patient	When subscriber is not the patient, only patient race and ethnicity are required. If either or both are not reported, the record will be rejected.
4	Resolved	05/02/2019	2400/SV202-2	The service line level procedure code is not a valid CPT or HCPCs code for this date of service	Allowing invalid HCPCs/CPT codes when the discharge date minus statement from date is less than 2 days	Invalid HCPCs codes will be rejected
5	Resolved	05/30/2019	2300/HI*ABK	The principal diagnosis code submitted is not appropriate for inpatient records	Edit to be reactivated upon DOH request with exclusion of dx code Z0371	There is a list of diagnosis codes that cannot be in the principal diagnosis field. If a diagnosis code on the list is in the principal diagnosis field, the claim will be rejected.

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6	Resolved	09/05/2019	2300/HI	Procedure Date (HIXX-4) cannot be older than the Statement FROM Date OR more recent than the Statement THRU Date (DTP, DTP01=434)	Inpatient records pull hierarchically from 1) Condition Code Amount or 2) Statement THRU Date for the Discharge Date. For cases using the Condition Code Amount, this could allow a Procedure Date to be after the Discharge Date.	For inpatient records, Procedure Dates after the pulled Discharge Date will be rejected.
7	Resolved	09/05/2019	2300/HI	Line level charges cannot be negative	Negative line level charges were being accepted	Negative line level charges will be rejected
8	Resolved	09/05/2019	2300/NTE	Heart Rate, Systolic Blood Pressure, and Diastolic Blood Pressure should only be 3-digits	4-digit values were being accepted	Patient heart rate and systolic and diastolic blood pressure values reported in loop 2300 NTE claim note segment must be less than or equal to 999. If any of them are not, the record will be rejected.
9	Resolved	09/19/2019	2300/HI	For newborn patients with inpatient place of service, a nonzero whole number birthweight must be reported	Invalid birthweights were being reported	Birthweight must be between 1 and 12,000 grams. If not, the record will be rejected.
10	Known Issue	TBD	2300/HI	The age range criteria for Pediatric is 0 to 17 years and 0 days (the 17 <sup>th</sup> birthday day).	Caused a vacant period of 17 years and 1 day to 17 years and 364 days, resulting in records with age appropriate diagnosis codes to be rejected.	Criteria will be expanded to cover Age less than 18 years. If the age is not less than 18 years old, the record will be rejected.

#	Status	Date Resolved	Effected Field(s)/Loop(s)	Current Edit	What was happening	What will now happen (New Edit)
11	Known Issue	TBD	2300/HI	Select ICD 10 Diagnosis codes are classified as Injury codes requiring cause of injury.	For certain codes, some facilities may not have access to the cause of the injury, thus ultimately not allowing the record to be reported.	ICD10 diagnosis codes classified as Injury and ending with 'S' or 'D' will not require a cause of injury. If the cause of injury field is blank where at least one ICD 10 diagnosis code is classified as 'injury- requires cause of injury' and does NOT end with either 'S' or 'D', then the record is rejected.
12	Known Issue	TBD	2300/HI	ICD 10 Diagnosis code Z51.89 is inappropriately listed as <u>Unacceptable as Principal Diagnosis</u> .	Causes any record with the diagnosis code listed as Principal to reject the record.	Primary diagnosis code of Z5189 requires a secondary diagnosis code to be present. If one is not present, the record will be rejected.

**Version History:**

Date	Author	Version	Change Reference
April 18, 2019	DOH SPARCS APD	1.0	Initial publication; 3 new issues
May 30, 2019	DOH SPARCS APD	1.1	2 new issues
September 5, 2019	DOH SPARCS APD	1.2	3 new issues
September 19, 2019	DOH SPARCS APD	1.3	1 new issue
November 5, 2019	DOH SPARCS APD	2.0	3 new issues; 8 revisions