



Important Texas THCIC Quarterly Reporting Information

If your facility is required to report quarterly claims data to THCIC, then our DataVault service can be a huge time-saver for you, as we can import the data from your practice management software so you won't have to manually enter it!

DataVault™

Eliminates redundant input, saves filing time and frustration.

Call 850-264-9065

- I **DataVault™** is an online, flexible, and secure medical data storage and filing system.
- I **DataVault™** is able to accept direct data input, or you can import patient encounter data from your current practice management database (custom imports available).
- I **DataVault™** automatically reviews each claim record for compliance with THCIC reporting requirements prior to submission.
- I **DataVault™** allows secure access and data input anytime and from anywhere that you have access to the Internet.
- I **DataVault™** is the best solution for meeting all requirements of the Texas Administrative Code, Title 25, Section 421.67(e) and (f), outpatient reporting.

Further advantages of the **DataVault™**:

- No Installation Hassle: No desktop installation or configuration needed. All you need is Internet access.
- Multiple Users: With up to five user accounts, staff members can enter information simultaneously, if needed.
- THCIC Compliant: **DataVault™** is always up to date with current and future THCIC filing requirements.
- Import Capabilities: The system supports a standard tab-delimited import. Custom programmed import bridges are also available to meet your needs.
- Prompt Technical Support: Friendly, knowledgeable technical support is available by email or phone.
- HIPAA compliant: SSL Certificate based 128-bit Encryption utilized.

The **DataVault™** instantly reviews each claim record for THCIC compliance and marks the record as passing or failing. Failing fields are marked with a red background, allowing you to easily locate and correct data before submission to THCIC, avoiding the frustration of data rejections and potential late filing penalties.

DataVault™ is available for an up-front cost of \$2495. The Annual Renewal Fee is \$750.

To enroll in the **DataVault™** service, or to obtain more information,
Contact Creative Data Technologies

850-264-9065 or smckennasr@gmail.com

Get more detailed product info online at <http://www.creativedatatech.com>

(see reverse)

Claim Form List Window									
Select	Record #	Chart ID	Claim ID	Service Date	Patient Name	SSN	DV Status	Action	Date Input
<input type="checkbox"/>	1196	ZULCAM000	22230	02/13/2013		4585	FAIL	Original Submission	04/17/2013
<input type="checkbox"/>	1195	ZULCAM000	22229	02/13/2013		4585	FAIL	Original Submission	04/17/2013
<input type="checkbox"/>	1194	ZOIGRA000	22163	02/11/2013		7170	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1193	YOVALA000	22647	03/06/2013		9042	FAIL	Original Submission	04/17/2013
<input type="checkbox"/>	1192	YOLPED000	23051	03/27/2013		4351	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1191	YOLPED000	23050	03/26/2013		4351	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1190	YOLMCF000	21378	01/02/2013		2470	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1189	YOLLEA000	21950	02/01/2013		5504	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1188	YOLLEA000	21942	01/31/2013		5504	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1187	YOLJAC000	22169	02/11/2013		9331	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1186	YOLJAC000	22058	02/05/2013		9331	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1185	YOLGON001	22076	02/06/2013		0142	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1184	YOLGAR007	22759	03/08/2013		7059	FAIL	Original Submission	04/17/2013
<input type="checkbox"/>	1183	YOLGAR006	23150	03/29/2013		9000	PASS	Original Submission	04/17/2013
<input type="checkbox"/>	1182	YOLIDA000	22136	02/08/2013		1055	PASS	Original Submission	04/17/2013

- Manage all of your claim records in one database; from anywhere you have Internet access.
- Run edit checks against selected records (or all at once).
- Powerful search and sort capabilities allow you to quickly locate records.

- Geared toward high-speed keyboard entry, edit checks are performed as you enter data (only portion of screen shown).
- Background color changes to red for fields that fail edit checks, allowing for instant review and correction of data.
- Enter your doctors' names & license numbers in advance, then simply select them from dropdown lists to save time.
- Either enter claim records directly or import patient encounter data from another system. Then, use the DataValult™ to validate and correct your data and report the data to THCIC.

PAYER / INSURANCE INFORMATION:													
Primary Payer Name		United Healthcare					(60 characters max)						
Primary Payer Type		[Redacted]											
Secondary Payer Name		Sis (Special Insurance Services, Inc.)					(60 characters max)						
Secondary Payer Type		[Redacted]											
CLAIM INFORMATION:													
Claim ID #		22647		Total Charges		4200.00							
Facility Type		Ambulatory Surgical Center					24						
Related Cause 1		[Redacted]		Related Cause 2		[Redacted]		(leave both blank if not an					
Diagnosis Codes (no periods)		2111 (primary)		53081		78720		[Redacted]		[Redacted]			
UB-04 Condition Codes		[Redacted]		[Redacted]		[Redacted]		[Redacted]		(Optional) click here for UB-04 codes			
Rendering Provider		[Redacted]		License:		[Redacted]		NPI:		[Redacted]			
SERVICE LINE ITEMS: NOTE: Enter all dates as YYYYMMDD													
Seq	Date	CPT/HCPCS	Mod1	Mod2	Mod3	Mod4	Qty	Units	Amt	Charge	Diag Ptr	Meas	Provid
001	20130306	43239					1		4200.00		1	UN	
002	20130306	43274					1		2100		1	UN	

- You can import data from a tab-delimited data file.
- Alternatively, if the website import does not meet your needs, we can create a custom Data Portal Desktop Program for you that can directly connect to your database to extract your records and upload them to our DataVault system.
- Full data backup included, giving you the ability to backup your own data as well.

Search for Existing Claim Forms

Calendar Quarter

IE Last Name First

Injured Employee SSN (no dashes) MRN (Chart ID) Claim

Provider License # (Texas License #)

Date of Service  to  (within calendar Quarter Select)

To enroll in the **DataVault™** service, or to obtain more information,
Contact Creative Data Technologies at 850-264-9065 or smckennasr@gmail.com