

CHIP Improper Payment Findings

FY 2011 - FY 2013 Payment Error Rate Measurement (PERM) Cycles CMS

FY 2011 - FY 2013

Updated: November 2014

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Background

The data contained in this package is a compilation of CHIP improper payments identified in Fiscal Years (FYs) 2011, 2012, and 2013 through the Payment Error Rate Measurement (PERM) program. PERM is the Medicaid and Children's Health Insurance Program (CHIP) improper payment measurement required by the Improper Payments Information Act of 2002 (IPIA), amended by the Improper Payments Elimination and Recovery Act of 2010 (IPERA) and later the Improper Payments Elimination and Recovery Improvement Act of 2012 (IPERIA). CMS annually estimates the amount of CHIP improper payments and submits those estimates to Congress.

Through the PERM program, CMS samples state Fee-For-Service (FFS) and managed care CHIP payments, collects documentation from providers, conducts a data processing review on sampled FFS and managed care payments, and performs a medical record review on sampled FFS claims. If an error is identified during medical or data processing review, states are given the opportunity to request a difference resolution. In addition, states perform eligibility reviews and submit the results of their eligibility reviews to CMS.

The PERM program uses a 17-state three-year rotation for measuring improper payments in CHIP, so that CMS measures each state once every three years. The data presented in this package consists of findings from the three most recently completed PERM cycles, FY 2011, FY 2012, and FY 2013, and, therefore, contains findings from all 50 states and the District of Columbia. This package also includes the most recent data available to CMS.

CMS recovers the federal share of CHIP payments from states on a claim-by-claim basis from the overpayments found in error. CMS also works closely with states to review their error rates, determine root causes of errors and develop corrective actions to address the major causes of errors.

Please note that this package portrays non-weighted counts of errors and dollar amounts. Because the percentages of total number of errors and total dollars in error shown in the following tables are not weighted, higher percentages may be a result of a larger sample size for that claim type and vice versa for smaller percentages. These percentages are not error rates; they are simply the proportion of each type of error measured. All findings are later weighted and compiled to calculate the error rates.

Table 1: CHIP Errors by Component

		Overpa	ayments	Underpa	ayments	Total l	Total Errors		
Component	Number of Claims Sampled	Number of Payment Errors	Dollar Amount of Errors	Number of Payment Errors	Dollar Amount of Errors	Number of Payment Errors	Dollar Amount of Errors		
FFS Data Processing	23,371	892	\$911,333	98	\$14,860	990	\$926,193		
FFS Medical Review	23,371	697	\$369,457	8	\$32,406	705	\$401,863		
Managed Care	10,166	16	\$4,127	105	\$50	121	\$4,176		
Eligibility	25,358	1,753	\$238,406	88	\$2,215	1,841	\$240,621		
Total	58,895	3,358	\$1,523,323	299	\$49,531	3,657	\$1,572,854		

Table 2: Fee – For – Service (FFS) Medical Review Errors by Error Type

		Paymen	t Errors	Dollars in	ı Error
Error Code	Error Type Description	Number	% of Total Number of Errors	Dollars In Error	% of Total Dollars in Error
MR1	No Documentation	163	23.1%	\$98,229	24.4%
MR2	Insufficient Documentation	232	32.9%	\$71,899	17.9%
MR3	Procedure Coding Error	30	4.3%	\$11,150	2.8%
MR4	Diagnosis Coding Error	14	2.0%	\$45,878	11.4%
MR5	Unbundling	1	0.1%	\$5	0.0%
MR6	Number of Unit(s) Error	60	8.5%	\$77,670	19.3%
MR7	Medically Unnecessary	4	0.6%	\$12,742	3.2%
MR8	Policy Violation	164	23.3%	\$77,722	19.3%
MR9	Admin/Other	37	5.2%	\$6,570	1.6%
	Total	705	100%	\$401,863	100%

Table 3: Fee – For – Service (FFS) Medical Review Errors by Service Type

		Paymer	nt Errors	Dollars in	n Error
Service Type	Number of Claims Sampled	Number	% of Total Number of Errors	Dollars In Error	% of Total Dollars in Error
Prescribed Drugs	3,716	194	0	\$113,244	28.2%
Psychiatric, Mental Health, and Behavioral Health Services	2,593	116	16.5%	\$86,236	21.5%
Physicians and Other Licensed Practitioner Services	2,233	96	13.6%	\$22,856	5.7%
Outpatient Hospital Services and Clinics	2,292	58	8.2%	\$23,180	5.8%
Dental and Other Oral Surgery Services	3,023	58	8.2%	\$15,904	4.0%
Inpatient and Outpatient Hospital	2,922	48	6.8%	\$123,138	30.6%
Habilitation and Waiver Programs, School Services	999	42	6.0%	\$3,278	0.8%
Personal Support Services	579	32	4.5%	\$7,273	1.8%
Laboratory, X-ray and Imaging Services	686	16	2.3%	\$327	0.1%
Therapies, Hearing and Rehabilitation Services	266	15	2.1%	\$2,253	0.6%
Home Health Services	305	11	1.6%	\$1,211	0.3%
Durable Medical Equipment (DME) and supplies, Prosthetic/Orthopedic devices and Environmental Modifications	192	8	1.1%	\$2,148	0.5%
Transportation and Accommodations	160	7	1.0%	\$603	0.2%
Vision: Ophthalmology, Optometry and Optical Services	316	4	0.6%	\$213	0.1%
Total	23,371	705	100%	\$401,863	100%

Table 4: Fee – For – Service (FFS) Medical Review Errors by Service Type and Error Type

Error	Error Type	Prescribed Drugs					Mental Health Services				
Code		Number of Errors		Dollars in Error		Number of Errors		Dollars in Error			
MR1	No Documentation	28	14.4%	\$1,942	1.7%	31	26.7%	\$22,637	26.2%		
MR2	Insufficient Documentation	40	20.6%	\$3,812	3.4%	44	37.9%	\$43,725	50.7%		
MR3	Procedure Coding Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%		
MR4	Diagnosis Coding Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%		
MR5	Unbundling	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%		
MR6	Number of Unit(s) Error	4	2.1%	\$44,016	38.9%	26	22.4%	\$15,869	18.4%		
MR7	Medically Unnecessary	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%		
MR8	Policy Violation	109	56.2%	\$62,224	54.9%	9	7.8%	\$3,252	3.8%		
MR9	Admin/Other	13	6.7%	\$1,249	1.1%	6	5.2%	\$753	0.9%		
	Total	194	100%	\$113,244	100%	116	100%	\$86,236	100%		

Error	Error Type		Physic	cian Services		Outpatient Hospital Services and Clinics				
Code		N	umber of Errors	Dollars in Error		Number of Errors		Dollars in Error		
MR1	No Documentation	25	26.0%	\$14,302	62.6%	14	24.1%	\$1,826	7.9%	
MR2	Insufficient Documentation	41	42.7%	\$5,186	22.7%	23	39.7%	\$4,768	20.6%	
MR3	Procedure Coding Error	18	18.8%	\$2,102	9.2%	9	15.5%	\$8,910	38.4%	
MR4	Diagnosis Coding Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR5	Unbundling	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR6	Number of Unit(s) Error	6	6.3%	\$821	3.6%	5	8.6%	\$6,944	30.0%	
MR7	Medically Unnecessary	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR8	Policy Violation	5	5.2%	\$383	1.7%	3	5.2%	\$386	1.7%	
MR9	Admin/Other	1	1.0%	\$62	0.3%	4	6.9%	\$345	1.5%	
	Total	96	100%	\$22,856	100%	58	100%	\$23,180	100%	

Table 4: Fee – For – Service (FFS) Medical Review Errors by Service Type and Error Type (Continued)

Error	Error Type		Dent	tal Services		Inpatient and Outpatient Hospital				
Code		N	umber of Errors	Dollars in Error		Number of Errors		Dollars in Error		
MR1	No Documentation	20	34.5%	\$4,028	25.3%	7	14.6%	\$48,389	39.3%	
MR2	Insufficient Documentation	17	29.3%	\$6,111	38.4%	12	25.0%	\$5,301	4.3%	
MR3	Procedure Coding Error	2	3.4%	\$93	0.6%	0	0.0%	\$0	0.0%	
MR4	Diagnosis Coding Error	0	0.0%	\$0	0.0%	13	27.1%	\$45,872	37.3%	
MR5	Unbundling	0	0.0%	\$0	0.0%	1	2.1%	\$5	0.0%	
MR6	Number of Unit(s) Error	3	5.2%	\$233	1.5%	7	14.6%	\$8,147	6.6%	
MR7	Medically Unnecessary	0	0.0%	\$0	0.0%	4	8.3%	\$12,742	10.3%	
MR8	Policy Violation	13	22.4%	\$5,293	33.3%	2	4.2%	\$2,339	1.9%	
MR9	Admin/Other	3	5.2%	\$146	0.9%	2	4.2%	\$343	0.3%	
	Total	58	100%	\$15,904	100%	48	100%	\$123,138	100%	

Error	Error Type	l	Habilitation a	nd Waiver Pı	ograms	Personal Support Services				
Code		Number of Errors		Dollars in Error		Number of Errors		Dollars in Error		
MR1	No Documentation	6	14.3%	\$1,039	31.7%	13	40.6%	\$2,010	27.6%	
MR2	Insufficient Documentation	18	42.9%	\$702	21.4%	12	37.5%	\$1,093	15.0%	
MR3	Procedure Coding Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR4	Diagnosis Coding Error	1	2.4%	\$6	0.2%	0	0.0%	\$0	0.0%	
MR5	Unbundling	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR6	Number of Unit(s) Error	4	9.5%	\$193	5.9%	1	3.1%	\$14	0.2%	
MR7	Medically Unnecessary	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR8	Policy Violation	10	23.8%	\$998	30.5%	3	9.4%	\$837	11.5%	
MR9	Admin/Other	3	7.1%	\$339	10.3%	3	9.4%	\$3,318	45.6%	
	Total	42	100%	\$3,278	100%	32	100%	\$7,273	100%	

Table 4: Fee – For – Service (FFS) Medical Review Errors by Service Type and Error Type (Continued)

Error	Error Type		Lab Xr	ay Imagin	g	Therapies Hearing and Rehabilitation Services				
Code		N	lumber of Errors	Dollar	s in Error	N	umber of Errors	Dollars i	n Error	
MR1	No Documentation	3	18.8%	\$42	12.8%	6	40.0%	\$966	42.9%	
MR2	Insufficient Documentation	12	75.0%	\$241	73.6%	5	33.3%	\$454	20.1%	
MR3	Procedure Coding Error	1	6.3%	\$44	13.5%	0	0.0%	\$0	0.0%	
MR4	Diagnosis Coding Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR5	Unbundling	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR6	Number of Unit(s) Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR7	Medically Unnecessary	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
MR8	Policy Violation	0	0.0%	\$0	0.0%	4	26.7%	\$834	37.0%	
MR9	Admin/Other	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
	Total	16	100%	\$327	100%	15	100%	\$2,253	100%	

Error	Еггог Туре	Home Health Services						
Code		N	umber of Errors	Dollars in Error				
MR1	No Documentation	1	9.1%	\$25	2.1%			
MR2	Insufficient Documentation	5	45.5%	\$387	31.9%			
MR3	Procedure Coding Error	0	0.0%	\$0	0.0%			
MR4	Diagnosis Coding Error	0	0.0%	\$0	0.0%			
MR5	Unbundling	0	0.0%	\$0	0.0%			
MR6	Number of Unit(s) Error	2	18.2%	\$148	12.2%			
MR7	Medically Unnecessary	0	0.0%	\$0	0.0%			
MR8	Policy Violation	3	27.3%	\$652	53.8%			
MR9	Admin/Other	0	0.0%	\$0	0.0%			
	Total	11	100%	\$1,211	100%			

Table 5: Fee – For – Service (FFS) Data Processing Review Errors by Error Type

		Number	Of Errors	Dollars	In Error
Error Code	Error Type	Number of Payment Errors	of Number of Errors		% of Total Dollars in Error
DP1	Duplicate Item	14	1.4%	\$10,322	1.1%
DP2	Non-covered Service	554	56.0%	\$650,364	70.2%
DP3	FFS Claim for Managed Care Service	19	1.9%	\$66,061	7.1%
DP4	Third-party Liability	34	3.4%	\$2,164	0.2%
DP5	Pricing Error	237	23.9%	\$91,263	9.9%
DP6	Logic Edit	24	2.4%	\$4,876	0.5%
DP7	Data Entry Error	37	3.7%	\$32,039	3.5%
DP8	Rate Cell Error	0	0.0%	\$0	0.0%
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%
DP10	Admin/Other	71	7.2%	\$69,106	7.5%
	Total	990	100%	\$926,193	100%

Table 6: Fee – For – Service (FFS) Data Processing Review Errors by Service Type

		Paymen	t Errors	Dollars i	n Error
Service Type	Number of Claims Sampled	Number	% of Total Number of Errors	Dollars In Error	% of Total Dollars in Error
Prescribed Drugs	3,716	201	20.3%	\$9,756	1.1%
Inpatient and Outpatient Hospital	2,922	145	14.6%	\$357,916	38.6%
Psychiatric, Mental Health, and Behavioral Health Services	2,593	105	10.6%	\$434,634	46.9%
Crossover Claims	261	82	8.3%	\$5,653	0.6%
Dental and Other Oral Surgery Services	3,023	73	7.4%	\$10,555	1.1%
Physicians and Other Licensed Practitioner Services	2,233	72	7.3%	\$15,528	1.7%
Outpatient Hospital Services and Clinics	2,292	58	5.9%	\$13,831	1.5%
Home Health Services	305	51	5.2%	\$7,278	0.8%
Laboratory, X-ray and Imaging Services	686	51	5.2%	\$913	0.1%
Therapies, Hearing and Rehabilitation Services	266	44	4.4%	\$2,965	0.3%
Habilitation and Waiver Programs, School Services	999	30	3.0%	\$6,084	0.7%
Durable Medical Equipment (DME) and supplies, Prosthetic/Orthopedic devices and Environmental Modifications	192	24	2.4%	\$1,937	0.2%
Personal Support Services	579	13	1.3%	\$2,843	0.3%
Denied Claims	1,732	11	1.1%	\$750	0.1%
Vision: Ophthalmology, Optometry and Optical Services	316	11	1.1%	\$728	0.1%
Capitated Care/Fixed Payments	1,044	9	0.9%	\$46,522	5.0%
ICF for the Mentally Retarded and Group Homes	26	5	0.5%	\$7,585	0.8%
Transportation and Accommodations	160	4	0.4%	\$568	0.1%
Hospice Services	2	1	0.1%	\$149	0.0%
Total	23,371	990	100.0%	\$926,193	100.0%

Table 7: Fee – For – Service (FFS) Data Processing Review Errors by Service
Type and Error Type

Error	Error Type	Prescribed Drugs					Inpatient and Outpatient Hospital			
Code		Number of Errors		Dollars in Error		Number of Errors		Dollars in Error		
DP1	Duplicate Item	1	0.5%	\$268	2.7%	1	0.7%	\$934	0.3%	
DP2	Non-covered Service	122	60.7%	\$7,125	73.0%	58	40.0%	\$205,121	57.3%	
DP3	FFS Claim for Managed Care Service	1	0.5%	\$407	4.2%	4	2.8%	\$63,365	17.7%	
DP4	Third-party Liability	1	0.5%	\$8	0.1%	1	0.7%	\$0	0.0%	
DP5	Pricing Error	73	36.3%	\$1,272	13.0%	52	35.9%	\$24,041	6.7%	
DP6	Logic Edit	2	1.0%	\$530	5.4%	1	0.7%	\$2,814	0.8%	
DP7	Data Entry Error	0	0.0%	\$0	0.0%	26	17.9%	\$31,788	8.9%	
DP8	Rate Cell Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
DP10	Admin/Other	1	0.5%	\$144	1.5%	2	1.4%	\$29,853	8.3%	
	Total	201	100%	\$9,756	100%	145	100%	\$357,916	100%	

Error	Error Type	Mental Health Services					Crossover Claims			
Code		Number of Errors		Dollars in Error		Number of Errors		Dollars in Error		
DP1	Duplicate Item	1	1.0%	\$5,881	1.4%	2	2.4%	\$310	5.5%	
DP2	Non-covered Service	78	74.3%	\$398,296	91.6%	22	26.8%	\$855	15.1%	
DP3	FFS Claim for Managed Care Service	2	1.9%	\$324	0.1%	2	2.4%	\$19	0.3%	
DP4	Third-party Liability	3	2.9%	\$262	0.1%	14	17.1%	\$391	6.9%	
DP5	Pricing Error	14	13.3%	\$12,803	2.9%	27	32.9%	\$3,733	66.0%	
DP6	Logic Edit	1	1.0%	\$107	0.0%	11	13.4%	\$276	4.9%	
DP7	Data Entry Error	1	1.0%	\$96	0.0%	4	4.9%	\$67	1.2%	
DP8	Rate Cell Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%	
DP10	Admin/Other	5	4.8%	\$16,867	3.9%	0	0.0%	\$0	0.0%	
	Total	105	100%	\$434,634	100%	82	100%	\$5,653	100%	

Table 7: Fee – For – Service (FFS) Data Processing Review Errors by Service
Type and Error Type (Continued)

Error	Error Type	Dental Services				Physician Services			
Code	Code		umber of Errors	Dollars in Error		Number of Errors		Dollars in Error	
DP1	Duplicate Item	1	1.4%	\$37	0.4%	2	2.8%	\$2,183	14.1%
DP2	Non-covered Service	49	67.1%	\$3,898	36.9%	46	63.9%	\$5,701	36.7%
DP3	FFS Claim for Managed Care Service	3	4.1%	\$961	9.1%	0	0.0%	\$0	0.0%
DP4	Third-party Liability	4	5.5%	\$212	2.0%	0	0.0%	\$0	0.0%
DP5	Pricing Error	6	8.2%	\$454	4.3%	8	11.1%	\$96	0.6%
DP6	Logic Edit	5	6.8%	\$810	7.7%	2	2.8%	\$107	0.7%
DP7	Data Entry Error	0	0.0%	\$0	0.0%	3	4.2%	\$51	0.3%
DP8	Rate Cell Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP10	Admin/Other	5	6.8%	\$4,183	39.6%	11	15.3%	\$7,389	47.6%
	Total	73	100%	\$10,555	100%	72	100%	\$15,528	100%

Error	Error Type	Outpatient Hospital Services and Clinics				Home Health Services			
Code		N	umber of Errors	Dollars in	Error	N	umber of Errors	Dollars i	n Error
DP1	Duplicate Item	1	1.7%	\$159	1.2%	0	0.0%	\$0	0.0%
DP2	Non-covered Service	20	34.5%	\$4,605	33.3%	31	60.8%	\$4,716	64.8%
DP3	FFS Claim for Managed Care Service	5	8.6%	\$796	5.8%	0	0.0%	\$0	0.0%
DP4	Third-party Liability	1	1.7%	\$151	1.1%	0	0.0%	\$0	0.0%
DP5	Pricing Error	20	34.5%	\$6,523	47.2%	18	35.3%	\$0	0.0%
DP6	Logic Edit	2	3.4%	\$232	1.7%	0	0.0%	\$0	0.0%
DP7	Data Entry Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP8	Rate Cell Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP10	Admin/Other	9	15.5%	\$1,364	9.9%	2	3.9%	\$2,561	35.2%
	Total	58	100%	\$13,831	100%	51	100%	\$7,278	100%

Table 7: Fee – For – Service (FFS) Data Processing Review Errors by Service
Type and Error Type (Continued)

Error	Error Type	Lab Xray Imaging				Therapies Hearing and Rehabilitation Services			
Code		Number of Errors		Dollars in Error		Number of Errors		Dollars in Error	
DP1	Duplicate Item	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP2	Non-covered Service	35	68.6%	\$519	56.8%	38	86.4%	\$2,834	95.6%
DP3	FFS Claim for Managed Care Service	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP4	Third-party Liability	2	3.9%	\$66	7.2%	0	0.0%	\$0	0.0%
DP5	Pricing Error	8	15.7%	\$104	11.4%	3	6.8%	\$7	0.2%
DP6	Logic Edit	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP7	Data Entry Error	2	3.9%	\$25	2.8%	1	2.3%	\$12	0.4%
DP8	Rate Cell Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%	0	0.0%	\$0	0.0%
DP10	Admin/Other	4	7.8%	\$199	21.8%	2	4.5%	\$112	3.8%
	Total	51	100%	\$913	100%	44	100%	\$2,965	100%

Error	Error Type		Habilitation and Waiver Programs						
Code			umber of Errors	Dollars in Error					
DP1	Duplicate Item	1	3.3%	\$270	4.4%				
DP2	Non-covered Service	4	13.3%	\$4,165	68.5%				
DP3	FFS Claim for Managed Care Service	1	3.3%	\$120	2.0%				
DP4	Third-party Liability	0	0.0%	\$0	0.0%				
DP5	Pricing Error	0	0.0%	\$0	0.0%				
DP6	Logic Edit	0	0.0%	\$0	0.0%				
DP7	Data Entry Error	0	0.0%	\$0	0.0%				
DP8	Rate Cell Error	0	0.0%	\$0	0.0%				
DP9	Managed Care Payment Error	0	0.0%	\$0	0.0%				
DP10	Admin/Other	24	80.0%	\$1,529	25.1%				
	Total	30	100%	\$6,084	100%				

Table 8: Managed Care Data Processing Review Errors by Error Type

Error		Managed Care						
Code	Error Type		mber of Errors	Dollars in Error				
DP1	Duplicate Item	0	0.0%	\$0	0.0%			
DP2	Non-covered Service	12	9.9%	\$3,859	92.4%			
DP3	FFS Claim for Managed Care Service	0	0.0%	\$0	0.0%			
DP4	Third-party Liability	0	0.0%	\$0	0.0%			
DP5	Pricing Error	1	0.8%	\$114	2.7%			
DP6	Logic Edit	0	0.0%	\$0	0.0%			
DP7	Data Entry Error	0	0.0%	\$0	0.0%			
DP8	Rate Cell Error	3	2.5%	\$154	3.7%			
DP9	Managed Care Payment Error	105	86.8%	\$50	1.2%			
DP10	Admin/Other	0	0.0%	\$0	0.0%			
	Total	121	100%	\$4,176	100%			

Table 9: Eligibility Payment Errors by Error Type

		Total	Over	payments	Underp	oayments	Percentage of Total Errors	
Error Code	Error Type	Number of Errors	Number of Errors	Dollars in Error	Number of Errors	Dollars in Error	% of Total Number of Errors	% of Total Dollars in Error
NE	Not Eligible	1,409	1,409	\$213,650	0	\$0	76.5%	88.8%
L/U	Liability Understated	176	176	\$5,027	0	\$0	9.6%	2.1%
U	Undetermined	149	149	\$18,248	0	\$0	8.1%	7.6%
L/O	Liability Overstated	88	0	\$0	88	\$2,215	4.8%	0.9%
EI	Eligible with Ineligible Services	12	12	\$1,061	0	\$0	0.7%	0.4%
MCE2	Managed Care Error, Eligible for Managed Care but Improperly Enrolled	6	6	\$252	0	\$0	0.3%	0.1%
MCE1	Managed Care Error, Ineligible for Managed Care	1	1	\$168	0	\$0	0.1%	0.1%
	Total	1,841	1,753	\$238,406	88	\$2,215	100%	100%

Table 10: Eligibility Negative Case Errors by Error Type

Stratum	Number of Cases	Percentage of All Cases	Percentage of Cases in Error
Correct	9,906	96.4%	
Improper Termination	257	2.5%	68.5%
Improper Denial	118	1.1%	31.5%
Total Negative Cases	10,281	100%	100%

Table 11: Deficiencies and Technical Errors

Stratum	Number of Deficiencies	Number Sampled	Percentage of Cases Deficient
Medical Review Deficiency	84	19,833	0.4%
Data Processing Deficiency	176	33,537	0.5%
Eligibility Technical Error - Active	340	25,358	1.3%
Eligibility Technical Error - Negative	34	10,281	0.3%