

# Risk Adjustment for EDS & RAPS User Group



**Thursday**  
**February 16, 2017**  
**2:00 p.m. – 3:00 p.m. ET**



# Introduction

# Session Guidelines

- This is a one hour User Group for MAOs submitting data to the Encounter Data System (EDS) and the Risk Adjustment Processing System (RAPS)
- There will be opportunities to submit questions via the webinar Q&A feature
- For questions regarding content of this User Group, submit inquiries to CMS at: [EncounterData@cms.hhs.gov](mailto:EncounterData@cms.hhs.gov) or [RiskAdjustment@cms.hhs.gov](mailto:RiskAdjustment@cms.hhs.gov)
- User Group slides and Q&A documents are posted on the CSSC Operations website under Medicare Encounter Data>User Group and Risk Adjustment Processing System>User Group
- Please refer to <http://tarsc.info> for the most up-to-date details regarding training opportunities, session dates, and registration information

# Agenda

- Introduction
- CMS Updates
- RAPS Overview
  - Reports & Submission Guidelines
- EDS Overview
  - Reports & Submission Guidelines
- Data Submission Timelines
- Q&A Session



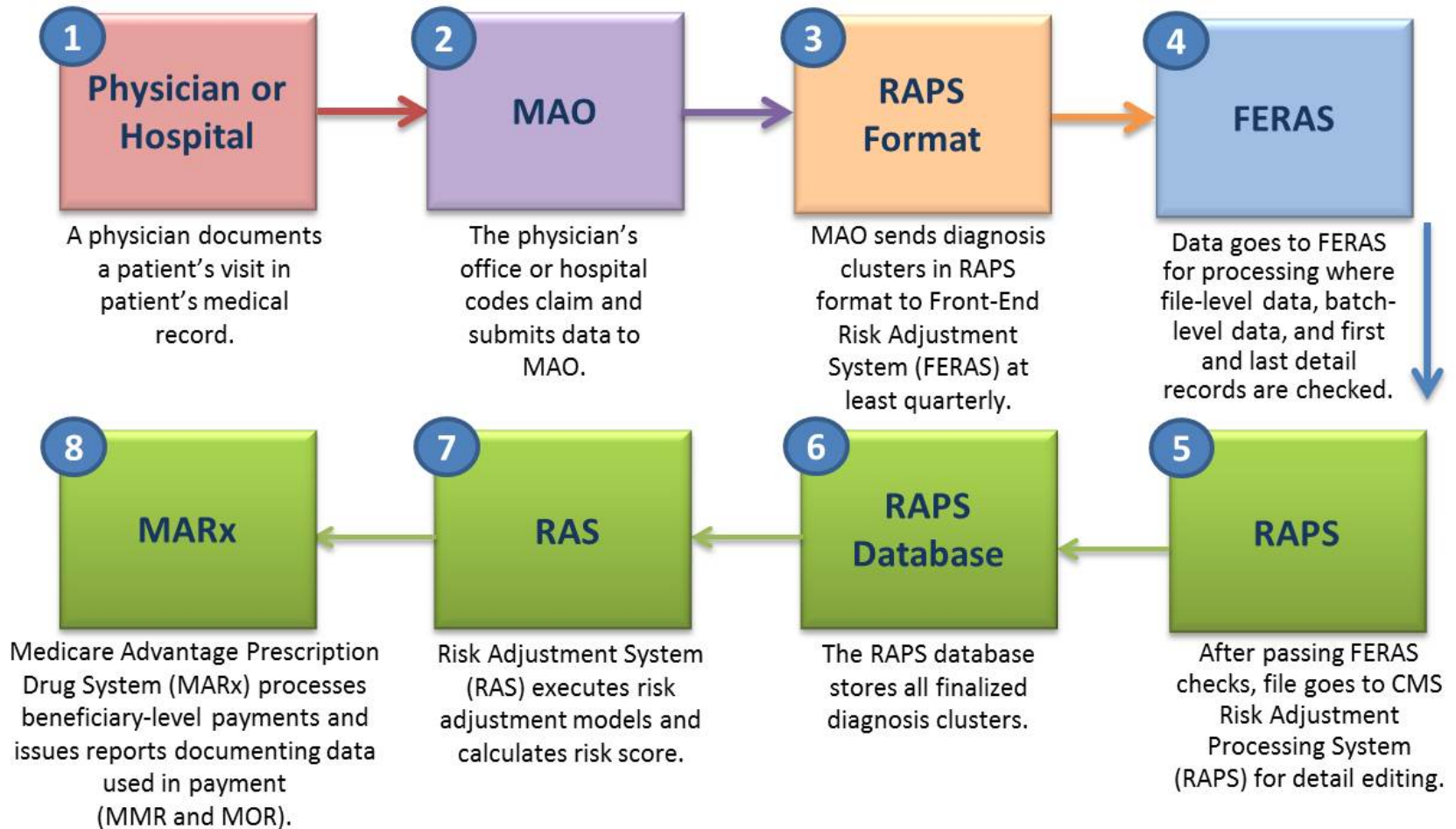
# RAPS Overview

# Risk Adjustment

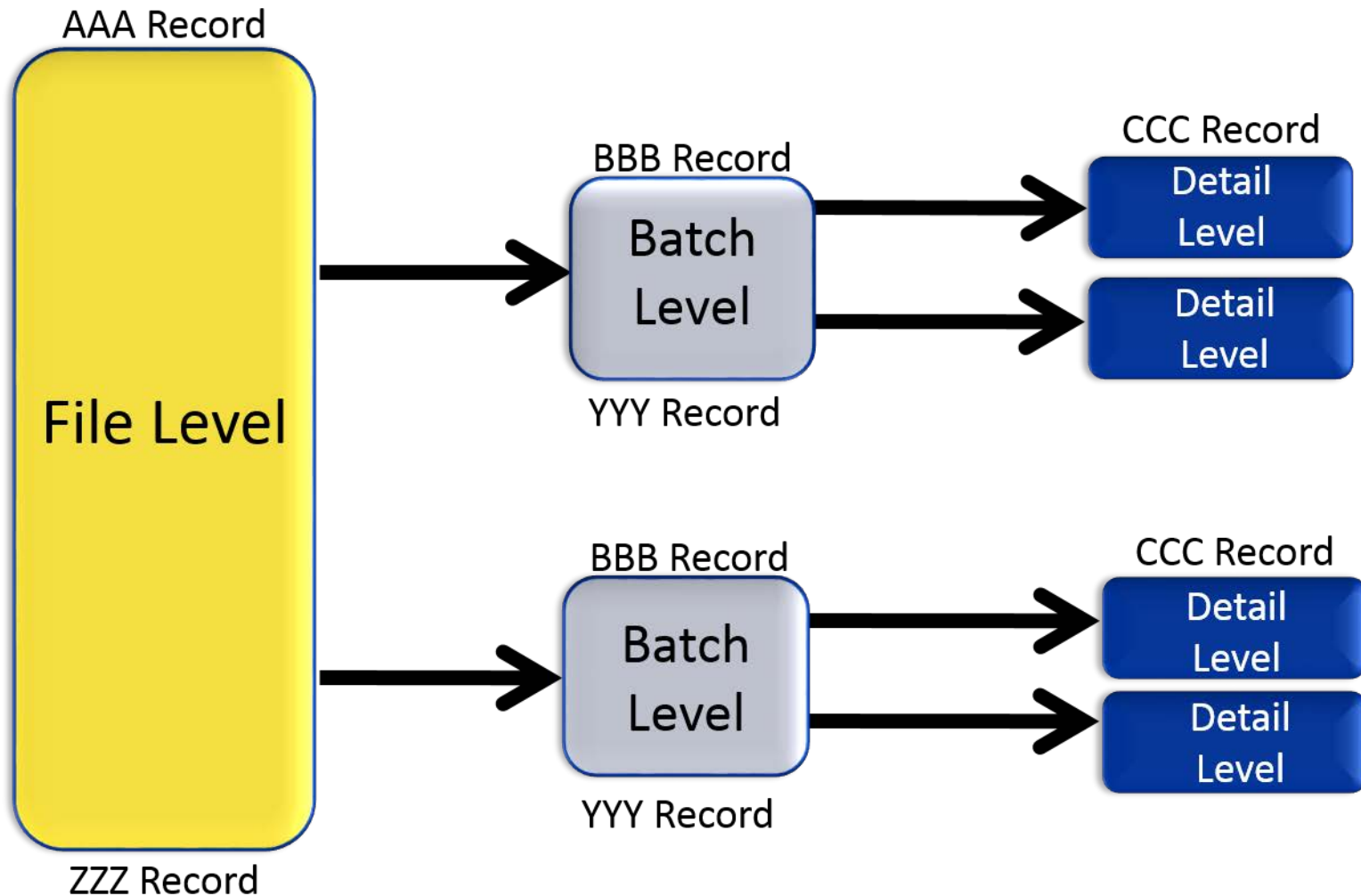
## Risk Adjustment:

- Used to adjust plan bids and to adjust all MA and Part D payments
- Medicare risk adjustment is prospective, meaning diagnoses from the previous year, along with demographic information, are used to predict the relative cost of each beneficiary in the payment year

# RAPS Process Flow Overview



# RAPS File Logic





# RAPS Format

## File Layout Record Types:

- AAA – File Header
- BBB – Batch Header
- CCC – Detail
- YYY – Batch Trailer
- ZZZ – File Trailer

AAA RECORD

FIELD NO.	FIELD NAME	POSITION	PICTURE	VALUE
1	RECORD-ID	1 – 3	X(3)	'AAA'
2	SUBMITTER-ID	4 – 9	X(6)	'Shnnnn'
3	FILE-ID	10 – 19	X(10)	
4	TRANSACTION-DATE	20 – 27	9(8)	'CCYYMMDD'
5	PROD-TEST-IND	28 – 31	X(4)	'PROD' Or 'TEST' Or 'CERT'
6	FILE-DIAG-TYPE	32 – 36	X(5)	'ICD9' Or 'ICD10'
7	FILLER	37 – 512	X(476)	SPACES

BBB RECORD

FIELD NO.	FIELD NAME	POSITION	PICTURE	VALUE
1	RECORD-ID	1 – 3	X(3)	'BBB'
2	SEQ-NO	4 – 10	9(7)	'Must begin with '0000001'
3	PLAN-NO	11 – 15	X(5)	'Hnnnn'
4	FILLER	16 – 512	X(497)	SPACES

CCC RECORD

FIELD NO.	FIELD NAME	POSITION	PICTURE	VALUE
1	RECORD-ID	1 – 3	X(3)	'CCC'
2	SEQ-NO	4 – 10	9(7)	'Must begin with '0000001'
3	SEQ-ERROR-CODE	11 – 13	X(3)	SPACES
4	PATIENT-CONTROL-NO	14 – 53	X(40)	Optional
5	HIC-NO	54 – 78	X(25)	
6	HIC-ERROR-CODE	79 – 81	X(3)	SPACES
7	PATIENT-DOB	82 – 89	X(8)	'CCYYMMDD'
8	DOB-ERROR-CODE	90 – 92	X(3)	SPACES
9 – 15	DIAGNOSIS-CLUSTER (10 OCCURRENCES)	93 – 412		
9.0	PROVIDER-TYPE		X(2)	HOSPITAL IP PRINCIPAL = 01 HOSPITAL IP OTHER = 02 HOSPITAL OP = 10 PHYSICIAN = 20
9.1	FROM-DATE		9(8)	'CCYYMMDD'
9.2	THRU-DATE		9(8)	'CCYYMMDD'
9.3	DELETE-IND		X(1)	SPACE or 'D'
9.4	DIAGNOSIS-CODE		X(7)	ICD-9 or ICD-10
9.5	DIAG-CLSTR-ERROR-1		X(3)	SPACES
9.6	DIAG-CLSTR-ERROR-2		X(3)	SPACES
16	CORRECTED-HIC-NO	413 – 437	X(25)	SPACES
17	FILLER	438 - 512	X(75)	SPACES

YYY RECORD

FIELD NO.	FIELD NAME	POSITION	PICTURE	VALUE
1	RECORD-ID	1 – 3	X(3)	'YYY'
2	SEQ-NO	4 – 10	9(7)	'Must begin with '0000001'
3	PLAN-NO	11 – 15	X(5)	'Hnnnn'
4	CCC-RECORD-TOTAL	16 – 22	9(7)	
5	FILLER	23 – 512	X(490)	SPACES

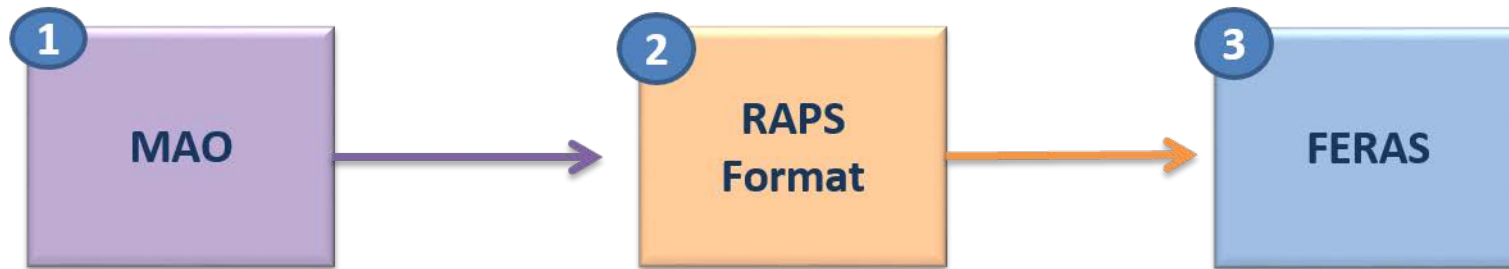
ZZZ RECORD

FIELD NO.	FIELD NAME	POSITION	PICTURE	VALUE
1	RECORD-ID	1 – 3	X(3)	'ZZZ'
2	SUBMITTER-ID	4 – 9	X(6)	'SHnnnn'
3	FILE-ID	10 – 19	X(10)	
4	BBB-RECORD-TOTAL	20 – 26	9(7)	
5	FILLER	27 – 512	X(486)	SPACES

# Required Minimum Data Elements for RAPS Submission

- Health Insurance Claim Number (HICN)
- Acceptable Provider Type
- “From” Date of Service (DOS)
- “Through” Date of Service
- Diagnosis Code (ICD-10)
  - ICD-10- starting with DOS of 10/1/15

# RAPS Submission Flow



1 The physician's office or hospital codes claim and submits data to MAO.

2 MAO sends diagnosis clusters in RAPS format to Front-End Risk Adjustment System (FERAS) at least quarterly.

3 Data goes to FERAS for processing where file-level data, batch-level data, and first and last detail records are checked.



# RAPS Reports

# RAPS Reports

Type	Report
<b>FERAS</b>	FERAS Response
<b>RAPS Transaction</b>	RAPS Return File
	RAPS Transaction Error Report
	RAPS Transaction Summary Report
	RAPS Duplicate Diagnosis Cluster Report
<b>RAPS Management</b>	RAPS Monthly Plan Activity Report
	RAPS Cumulative Plan Activity Report
	RAPS Monthly Error Frequency Report
	RAPS Quarterly Error Frequency Report

# FERAS Response Report

REPORT: FERAS-RESP  
RUN DATE: 20040304

**FRONT END RISK ADJUSTMENT SYSTEM**  
**FERAS RESPONSE REPORT**

SUBMITTER ID: SH9999  
FILE-ID: 0000000001

**REJECTED** PROD

<b>RECORD TYPE</b>	<b>SEQ NO</b>	<b>ERROR CODE</b>	<b><u>ERROR CODE DESCRIPTION</u></b>
AAA		113	FILE NAME <u>DUPLICATES</u> ANOTHER FILE ACCEPTED WITHIN LAST 12 MONTHS
BBB	0000002	203	MISSING/ <u>INVALID PLAN NUMBER</u> ON BBB RECORD
CCC	0000001	310	MISSING/ <u>INVALID HIC NUMBER</u> ON CCC RECORD
YYY	0000004	263	PLAN NUMBER <u>DOES NOT MATCH</u> PLAN NUMBER IN BBB RECORD

# RAPS Transaction Processing Reports

Report	Description
RAPS Return File	<ul style="list-style-type: none"><li>• Contains the entire submitted transaction</li><li>• Identifies 300, 400, and 500-level errors</li><li>• Provided in a flat file layout</li><li>• Received by the end of the next processing day following submission</li></ul>
RAPS Transaction Error Report	<ul style="list-style-type: none"><li>• Communicates errors found in CCC records during processing</li><li>• Displays only 300, 400, and 500-level error codes</li><li>• Provided in a report layout</li><li>• Received by the end of the next processing day following submission</li></ul>
RAPS Transaction Summary Report	<ul style="list-style-type: none"><li>• Summarizes the disposition of diagnosis clusters</li><li>• Provided in a report layout</li><li>• Received by the end of the next processing day following submission</li></ul>
RAPS Duplicate Diagnosis Cluster Report	<ul style="list-style-type: none"><li>• Identifies diagnosis clusters with 502-error message</li><li>• Clusters accepted into the system, but not stored in the RAPS database</li><li>• Provided in a report layout</li><li>• Received by the end of the next processing day following submission</li></ul>

# RAPS Return File

AAASH7777000000000120030411PROD  
BBB0000001H9999  
CCC0000001 7321430  
YYY0000001H99990000003  
ZZZSH777700000000010000001

**Patient Control  
Number**

123456789A

19350305354012014031420140318 4359

**DOB**

**Provider  
Type**

**Diagnosis  
Code**

**From & Through**

**Error Code**

**DOS**



# RAPS Transaction Error Report

REPORT: RAPS002 \*\*ICD9\*\*  
 RUN DATE: 20040523

**RISK ADJUSTMENT PROCESSING SYSTEM  
 TRANSACTION ERROR REPORT**

PAGE: 22  
 TRANS DATE: 20040521

SUBMITTER ID: SH9999 FILE ID: 0000000001 PLAN ID: H9999 BATCH NUMBER: 0000001

SEQ NO	SEQ ERR	PATIENT CONTROL NUMBER	HIC NUMBER	HIC ERR	DOB	DOB ERR	PRVD TYPE	FROM DATE	THRU DATE	DEL IND	DGNS CODE	DGNS ERR1	DGNS ERR2	MAEA CD	MAEA ERR	CORRECTED HIC
0000003			999999999A	353	19301206		01	20040101	20040105		4823			A		
		00000000000000000000	1234567890	1234567890												
0000005			888888888A		19260217		01	20040212	20040225		486	408		A		
		00000000000000000000	123456756756756756													
							02	20040212	20040225		2508	408				
							02	20040312	20040325		496					
0000007			666666666D		19301206		20	20040101	20040105	D	25004	491				
							20	20040411	20040422		25004	408	409			

**END OF FILE**

# RAPS Transaction Summary Report

## RISK ADJUSTMENT PROCESSING SYSTEM TRANSACTION SUMMARY REPORT

REPORT: RAPS001 \*\*ICD9\*\*

RUN DATE: 20040503

TRANS DATE:20040430

SUBMITTER ID SH7777

PLAN ID: H9999

FILE ID: 0000000001

PROVIDER TYPE	Principal Inpatient	Other Inpatient	Outpatient	Physician	Unidentified	Total
TOTAL SUBMITTED	870	3480	629	348	2	5329
TOTAL REJECTED	26	104	18	13	2	163
TOTAL ACCEPTED	842	3367	606	333	0	5148
TOTAL STORED	840	3335	581	320	0	5076
TOTAL MODEL STORED	295	1167	203	112	0	1777
TOTAL DELETE ACPTD	2	2	0	2	0	6
TOTAL DELETE RJCTD	0	7	5	0	0	12

# RAPS Duplicate Diagnosis Cluster Report

REPORT: RAPS003 \*\*ICD9\*\*  
RUN DATE: 20030523

## RISK ADJUSTMENT PROCESSING SYSTEM DUPLICATE DIAGNOSIS CLUSTER REPORT

PAGE: 22  
TRANS DATE: 20030521

SUBMITTER ID: SH9999 FILE ID: 0000000001 PLAN ID: H9999 BATCH NUMBER: 0000001

SEQ NUMBER	PATIENT CONTROL NUMBER	HIC NUMBER	DOB	PVDR TYPE	FROM DATE	THRU DATE	DEL IND	DGNS CODE	DGNS ERR	CORRECTED HIC
0000003		999999999A	19301206	01	20040101	20040105		4823	502	



# RAPS Management Reports

REPORT	DESCRIPTION
<b>RAPS Monthly Plan Activity Report</b>	<ul style="list-style-type: none"> <li>• Provides monthly summary of the status of submissions by Submitter ID and Plan Number</li> <li>• Provided in a report layout</li> <li>• Available for download the second business day of the month</li> <li>• Generated only when plan has activity in current month</li> </ul>
<b>RAPS Cumulative Plan Activity Report</b>	<ul style="list-style-type: none"> <li>• Provides cumulative summary of the status of submissions by Submitter ID and Plan Number</li> <li>• Provided in a report layout</li> <li>• Available for download the second business day of the month</li> <li>• Generated only when plan has activity for the month of the report</li> </ul>
<b>RAPS Monthly Error Frequency Report</b>	<ul style="list-style-type: none"> <li>• Provides a monthly summary of all errors associated with files submitted in test and production</li> <li>• Provided in a report layout</li> <li>• Available for download the second business day of the month</li> </ul>
<b>RAPS Quarterly Error Frequency Report</b>	<ul style="list-style-type: none"> <li>• Provides a quarterly summary of all errors on all file submissions within the 3-month quarter</li> <li>• Provided in a report layout</li> <li>• Available for download the second business day of the month following each quarter</li> </ul>

# RAPS Monthly Plan Activity Report

## RAPS Monthly Plan Activity Report

REPORT: RAPM0019 \*\*ICD9\*\*  
 RUN DATE: 20040402

CMS RAPS ADMINISTRATION  
 RAPS MONTHLY PLAN ACTIVITY REPORT

PAGE: 1  
 SERVICE YEAR: 2004

PLAN NO: H7777  
 SUBMITTER ID: SH7777

FOR THE MONTH OF MARCH, 2004

PROVIDER TYPE/TOTALS	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	TOTAL
<b>PRINCIPAL INPATIENT</b>							
TOTAL SUBMITTED	1297	1301	293	0	0	0	2891
TOTAL REJECTED	26	26	0	0	0	0	52
TOTAL ACCEPTED	1261	1275	288	0	0	0	2824
TOTAL STORED	1235	1269	283	0	0	0	2787
TOTAL MODEL STORED	432	444	99	0	0	0	975
TOTAL DELE ACPTD	10	0	5	0	0	0	15
TOTAL DELE RJCTD	0	0	0	0	0	0	0
<b>OTHER INPATIENT</b>							
TOTAL SUBMITTED	8431	13489	411	0	0	0	22331
TOTAL REJECTED	169	270	3	0	0	0	442
TOTAL ACCEPTED	8262	13219	405	0	0	0	21886
TOTAL STORED	8261	13216	404	0	0	0	21881
TOTAL MODEL STORED	2891	4625	141	0	0	0	7657
TOTAL DELE ACPTD	0	0	1	0	0	0	1
TOTAL DELE RJCTD	0	0	2	0	0	0	2
<b>OUTPATIENT</b>							
TOTAL SUBMITTED	23415	17342	84	0	0	0	40841
TOTAL REJECTED	351	260	3	0	0	0	614
TOTAL ACCEPTED	23064	17081	81	0	0	0	40226
TOTAL STORED	20989	15199	77	0	0	0	36265
TOTAL MODEL STORED	7346	5320	27	0	0	0	12693
TOTAL DELE ACPTD	0	0	0	0	0	0	0
TOTAL DELE RJCTD	0	1	0	0	0	0	1

# RAPS Cumulative Plan Activity Report

1REPORT: RAPM0020 **ICD10**		CMS RAPS ADMINISTRATION							
PAGE: 1		RAPS CUMULATIVE PLAN ACTIVITY REPORT							
RUN DATE: 20100818									
SERVICE YEAR: 2009									
PLAN NO:	H0000	FOR PERIOD ENDING JULY 31, 2010							TOTAL
PROVIDER TYPE/TOTALS		JANUARY	FEBUARY	MARCH	APRIL	MAY	JUNE		
<b>PRINCIPAL INPATIENT</b>									
TOTAL SUBMITTED		2	8	18	196	0	0	224	
TOTAL REJECTED		2	8	18	196	0	0	224	
TOTAL ACCEPTED		0	0	0	0	0	0	0	
TOTAL STORED		0	0	0	0	0	0	0	
TOTAL MODEL STORED		0	0	0	0	0	0	0	
TOTAL DELE ACPTD		0	0	0	0	0	0	0	
TOTAL DELE RJCTD		0	0	0	0	0	0	0	
<b>OTHER INPATIENT</b>									
TOTAL SUBMITTED		18	66	98	1284	0	0	1466	
TOTAL REJECTED		18	66	98	1284	0	0	1466	
TOTAL ACCEPTED		0	0	0	0	0	0	0	
TOTAL STORED		0	0	0	0	0	0	0	
TOTAL MODEL STORED		0	0	0	0	0	0	0	
TOTAL DELE ACPTD		0	0	0	0	0	0	0	
TOTAL DELE RJCTD		0	0	0	0	0	0	0	
<b>OUTPATIENT</b>									
TOTAL SUBMITTED		40	44	246	876	0	0	1206	
TOTAL REJECTED		40	44	246	876	0	0	1206	
TOTAL ACCEPTED		0	0	0	0	0	0	0	
TOTAL STORED		0	0	0	0	0	0	0	
TOTAL MODEL STORED		0	0	0	0	0	0	0	
TOTAL DELE ACPTD		0	0	0	0	0	0	0	
TOTAL DELE RJCTD		0	0	0	0	0	0	0	
<b>PHYSICIAN</b>									
TOTAL SUBMITTED		70	110	284	714	2	0	1180	
TOTAL REJECTED		70	110	284	714	2	0	1180	
TOTAL ACCEPTED		0	0	0	0	0	0	0	
TOTAL STORED		0	0	0	0	0	0	0	
TOTAL MODEL STORED		0	0	0	0	0	0	0	
TOTAL DELE ACPTD		0	0	0	0	0	0	0	
TOTAL DELE RJCTD		0	0	0	0	0	0	0	

# RAPS Monthly Error Frequency Report

REPORT: RAPS004M

PALMETO GBA

]PAGE: 1

RUN TIME: 13.31.06

RISK ADJUSTMENT PROCESSING  
ERROR FREQUENCY SUMMARY

RUN DATE:20050219

SUBMITTER ID: SH9999

FOR THE MONTH OF APRIL, 2005

PLAN NO: H9999

TOTAL CCC RECORDS: 4,647 TOTAL DIAGNOSIS: 17,660 TOTAL ACCEPTED: 15,403 TOTAL REJECTED:2,257

ERROR CODE	<==PROVIDER TYPE XX==>	<==PROVIDER TYPE 01==>	<==PROVIDER TYPE 02==>	<==PROVIDER TYPE 10==>	<==PROVIDER TYPE 20==>
	<=UNKNOWN PROV TYPE=>	<PRINCIPAL INPATIENT>	<=OTHER INPATIENT=>	<====OUTPATIENT=====>	<=====PHYSICIAN =====>
353	75	0	0	0	0
354	0	7	38	108	618
403	0	1	0	0	0
408	0	14	79	132	859
409	0	0	0	116	782
410	0	12	67	110	980
460	0	0	0	5	12
500	6	0	0	0	0
501	0	18	148	578	2,297
502	0	5	63	97	1,741

# Analysis of RAPS Management Reports

## RAPS MONTHLY PLAN ACTIVITY REPORT





# Correcting Rejected Data

- Rejected data are reflected in cumulative totals for the appropriate month and number of total rejections
- When a cluster is counted as stored, it remains part of the stored count on the Cumulative Plan Activity Report, even if it is deleted
- Deleted clusters are included in total stored and total deleted
- Reports can help identify internal processes affecting data collection and submission, as well as external issues affecting data collection

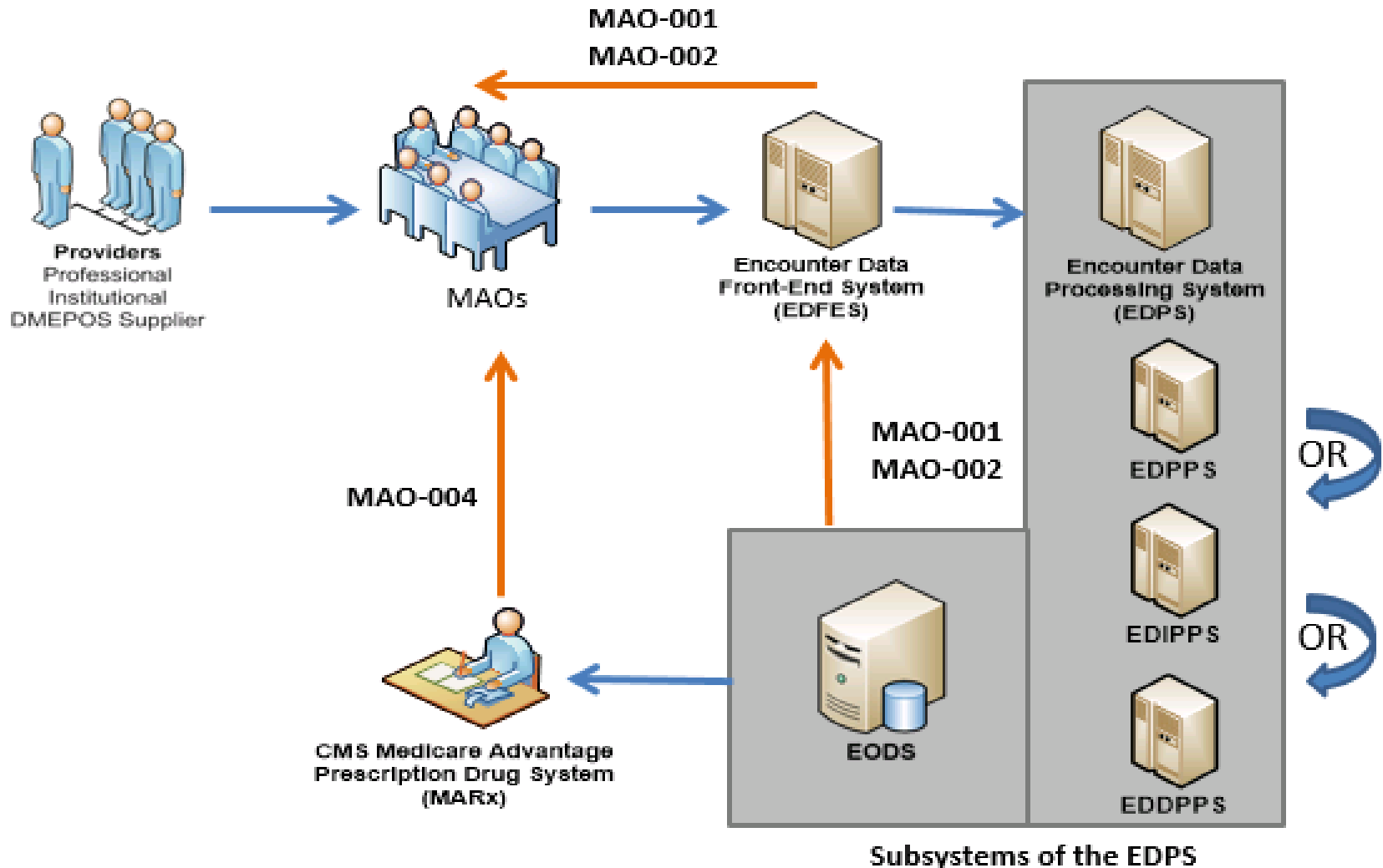
# Plan Reminders

- Plans are responsible for downloading and maintaining reports.
- Plans should correct errors and resubmit as soon as possible.



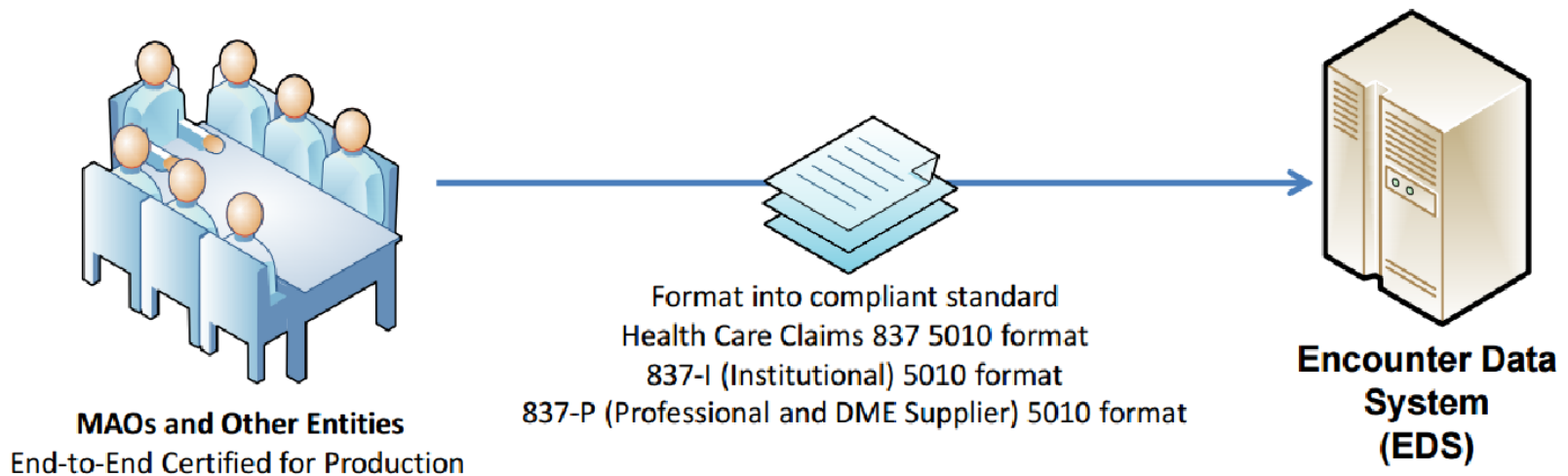
# EDS Overview

# EDS Overview - Process Flow



# 837 5010 Format Requirements

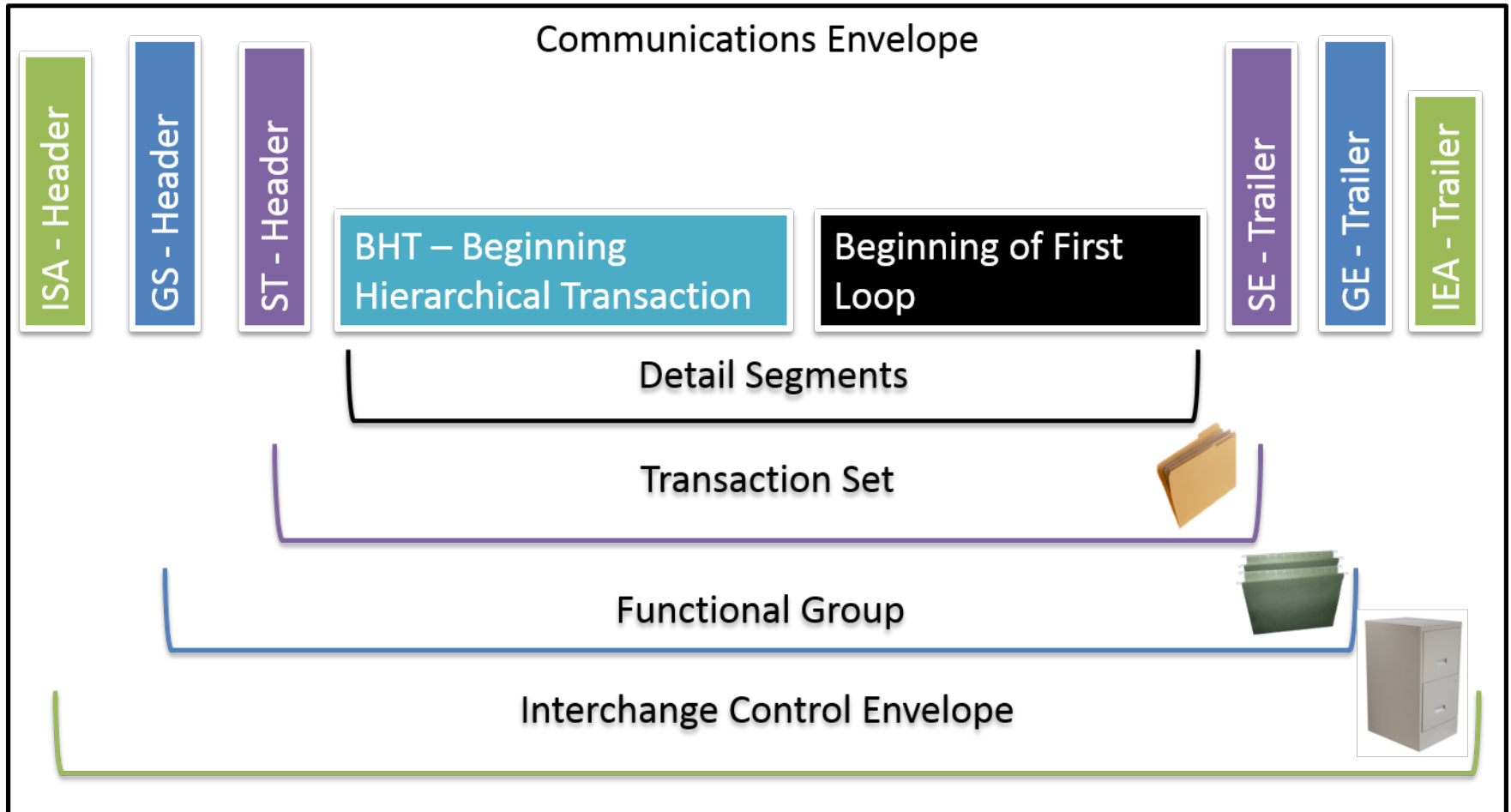
- Encounter Data:
  - must be submitted in the ANSI X12 837 5010 format
  - must contain minimum data elements
  - must also adhere to the TR3 transmission structure



# Submission Format

- The 5010 837 submission format is comprised of:
  - Interchange Control Group (ISA/IEA)
  - Functional Group (GS/GE)
  - Transaction Set (ST/SE)
  - Detail Segment (BHT)
    - Loop, segments, and data elements
- The Interchange Acknowledgement, Functional Acknowledgement, and Proprietary Error Reports address errors contained within the ANSI X12 5010 837 submission

# EDS Transmission Envelope Structure



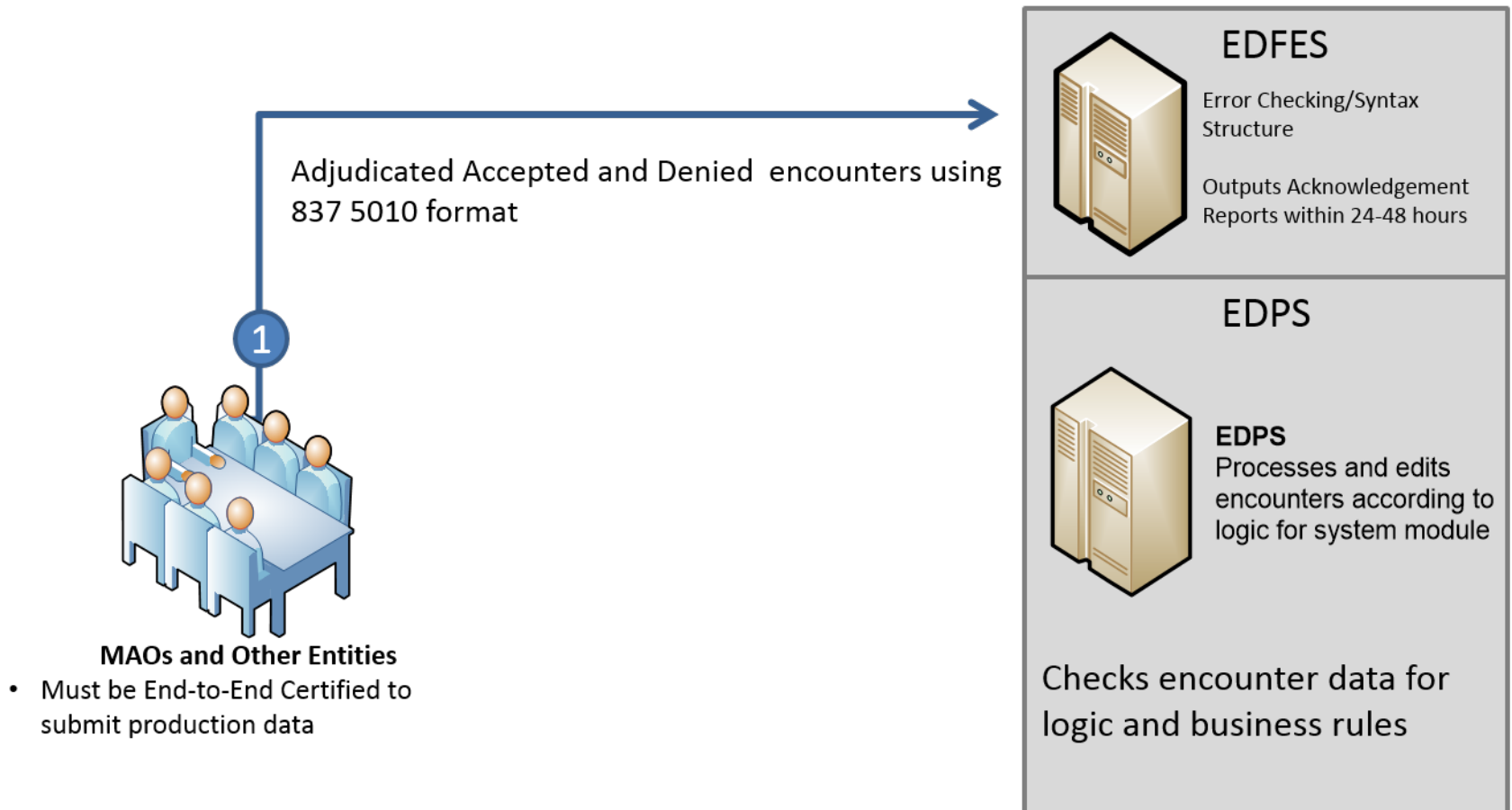
# EDS Submission Frequency

- MAOs are required to submit encounter data on a frequency based on the contract's enrollment size

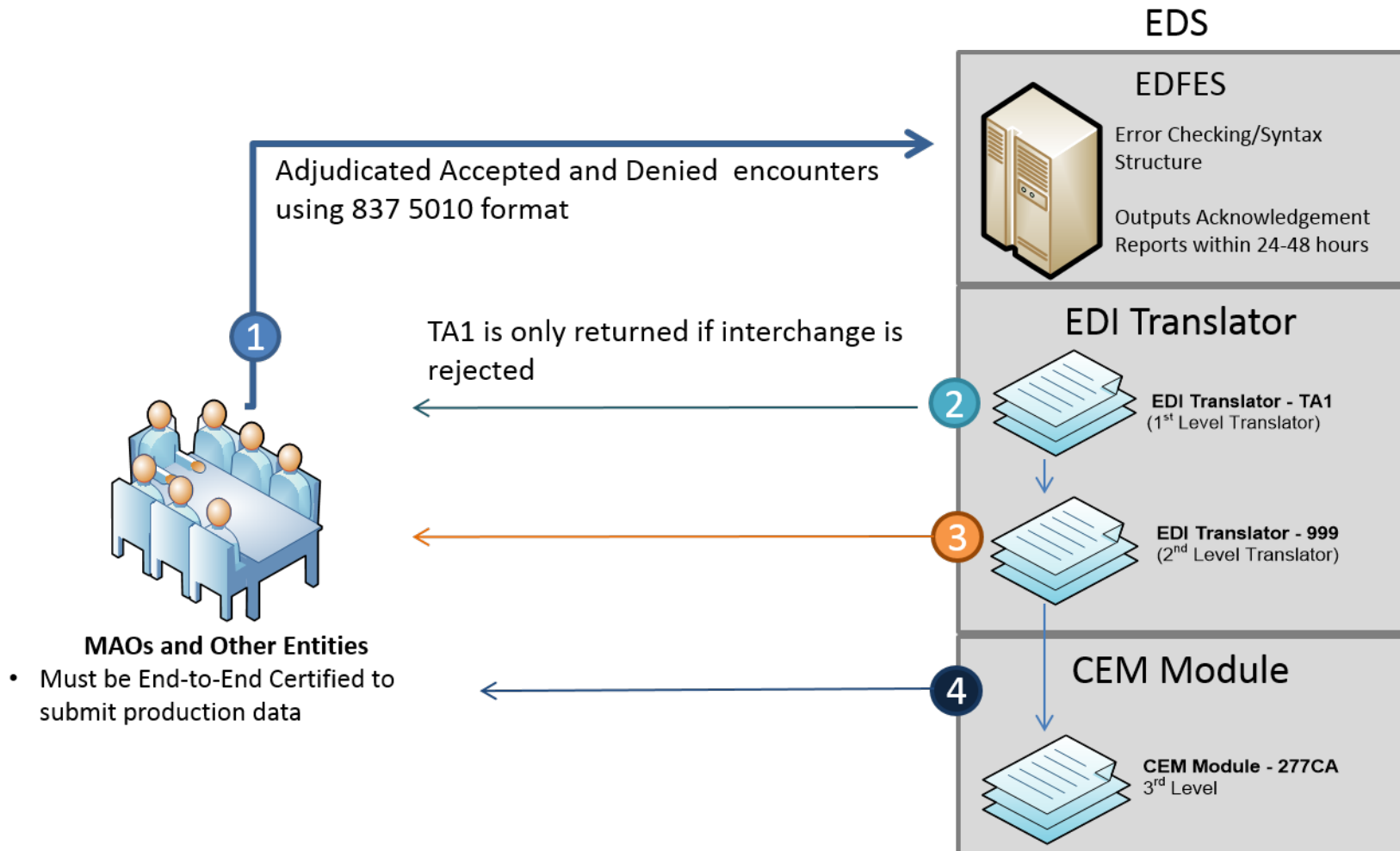
Number of Medicare Enrollees	Minimum Submission Frequency
Greater than 100,000	Weekly
50,000 – 100,000	Bi-weekly
Less than 50,000	Monthly



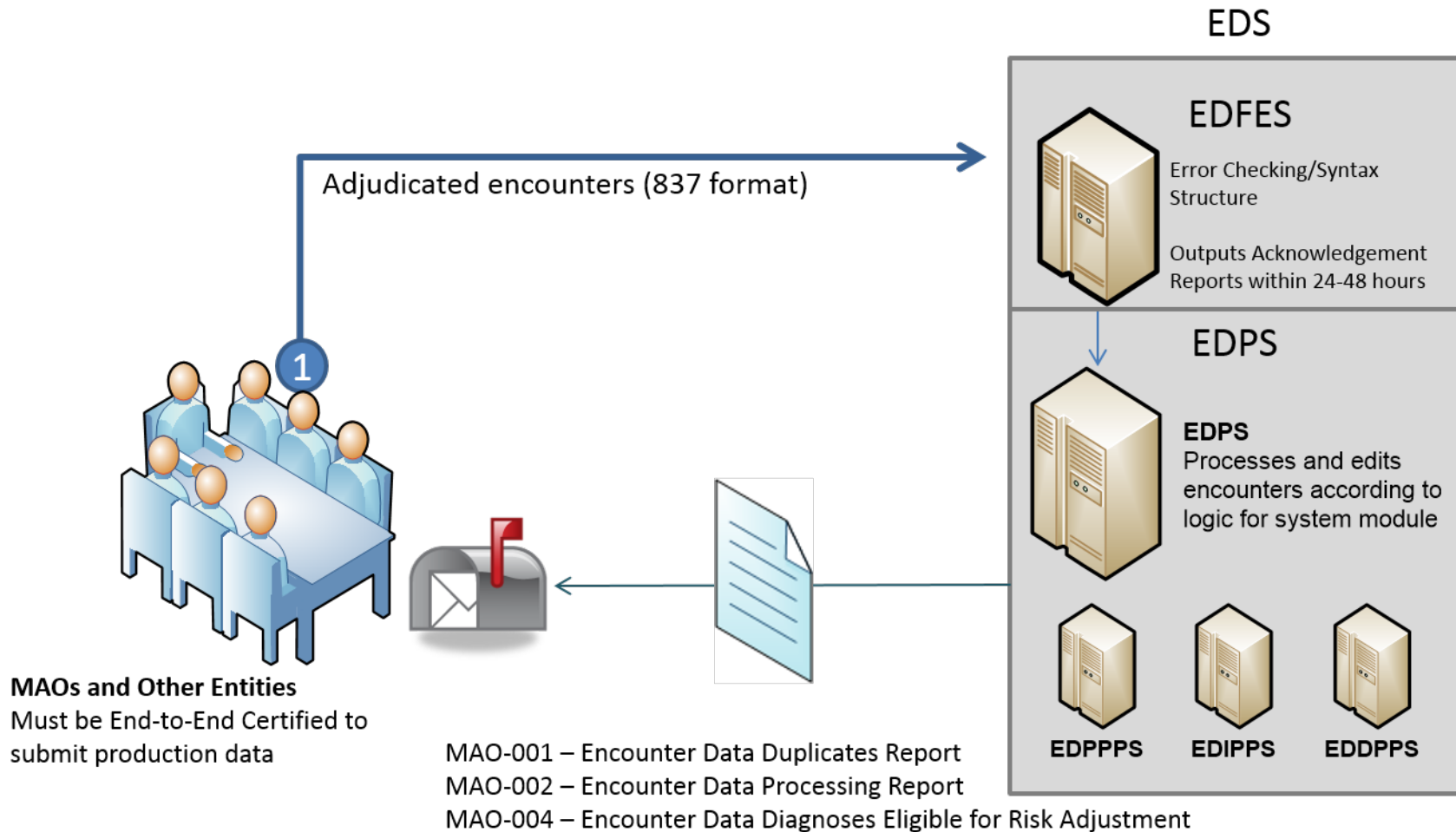
# EDS Submission Overview



# EDFES Submission Overview



# EDPS Submission Overview





# EDS Reports

# EDS Management Reports

## EDFES Acknowledgement Reports

EDFES Report Type	Description
TA1	Provides notification of syntax and formatting errors
999	Provides notification implementation compliance status
277CA	Provides a claim level acknowledgement of all encounters received

## EDPS Processing Status Reports

EDPS Report Type	Description
<b>MAO-001 Encounter Data Duplicates</b>	Lists all encounters that received duplicate errors (98300, 98325, 98320, and 98315) *MAOs and other entities will not receive the MAO-001 report if there are no duplicate errors received on submitted encounters
<b>MAO-002 Encounter Data Processing Status</b>	Lists the accepted and rejected status of all encounters for claim and line levels along with error codes
<b>MAO-004 Encounter Data Diagnoses Eligible for Risk Adjustment</b>	Phase III MAO-004 reports will list all diagnoses from accepted professional, inpatient, and outpatient encounter records, and indicate which diagnoses are considered for risk adjustment



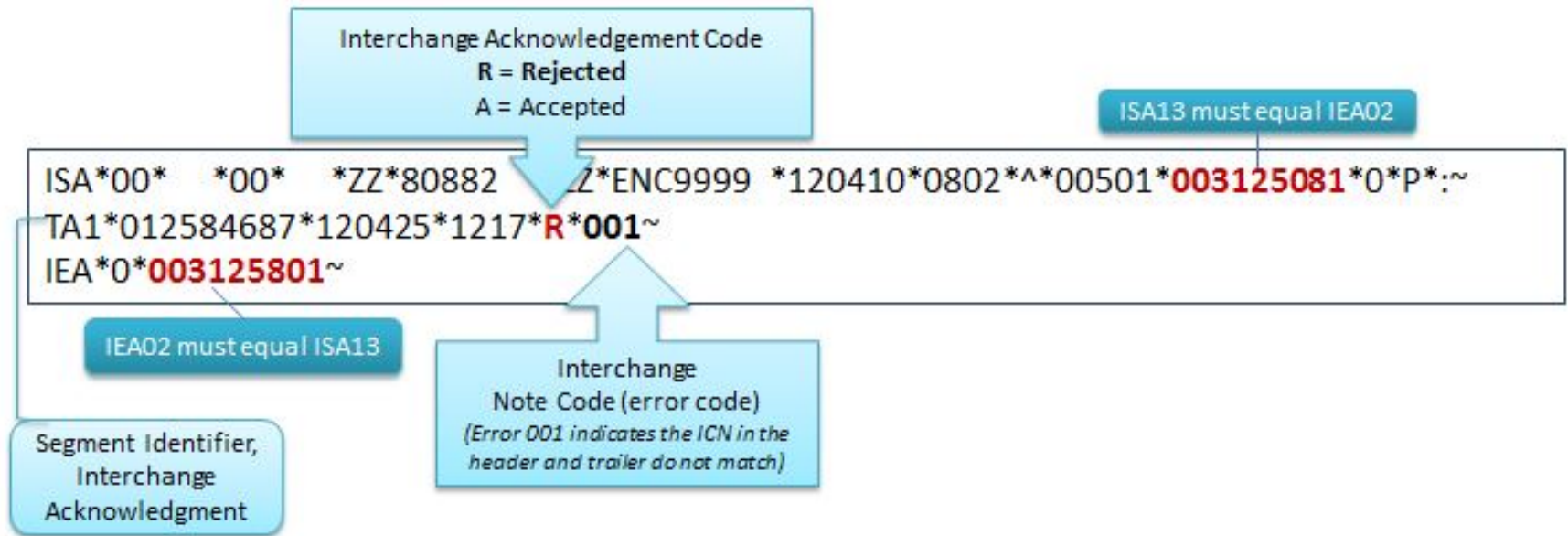
# EDFES Acknowledgement Reports

# TA1 Acknowledgement Report

- Upon receipt of the inbound 837, the EDI Translator performs syntax editing
- Issues detected in the ISA/IEA interchange will cause the 837 file to reject
  - MAOs must correct and resubmit the entire file
- A TA1 Acknowledgement report is generated if the transaction is rejected

# TA1 Acknowledgement Report (continued)

- TA1 Acknowledgement Report with inconsistent Interchange Control Numbers (ICNs):



For EDS processing, a TA1 is generated only when there is a rejection



# 999 Acknowledgement Report

- The 999 Acknowledgement Report is generated following Common Edits and Enhancements Module (CEM) edits to verify the syntactical accuracy of data
  - Identifies the processing status of functional groups (GS/GE) and transactions sets (ST/SE)
    - 999A = all transaction sets were accepted
    - 999P = partially accepted (at least one transaction set was rejected)
    - 999R = syntax errors were noted and submitter needs to correct/resubmit

# 999A Report Example

- If an “A” is displayed in the IK5 and AK9 segments, the claim file is accepted and will continue processing.

```
1  ISA*00*      *00*      *ZZ*80882      *ZZ*ENC9999      *120410*0802*^*00501*003125081*0*T*:~
2  GS*FA*80882*ENC9999*20120410*08021518*3112795*X*005010X231A1~
3  ST*999*112795001*005010X231A1~
4  AK1*HC*135*005010X222A1~
5  AK2*837*000000135*005010X222A1~
6  IK5*A~
7  AK9*A*1*1*1~
8  SE*6*112795001~
9  GE*1*3112795~
10 IEA*1*003125081~
```

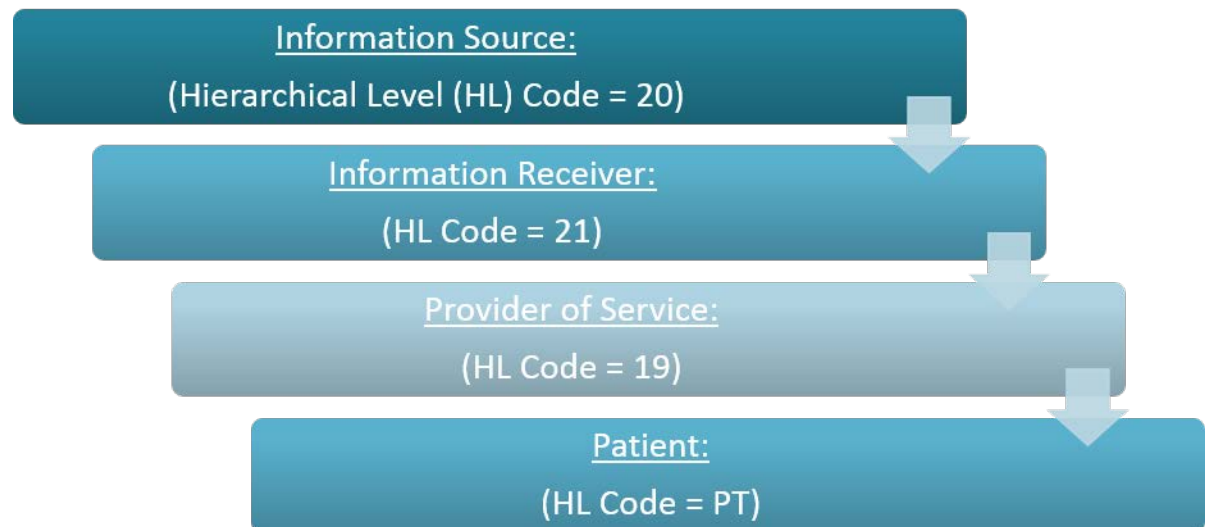
- If an “R” is displayed in the IK5 and AK9 segments, an IK3 and an IK4 segment will be displayed.

```
17  AK2*837*000020860*005010X222A1~
18  IK3*SVD*31*2430*8~
19  CTX*CLM01:P2752560~
20  IK4*1**2*H9999~
21  CTX*SITUATIONAL TRIGGER***2330~
22  IK5*R*I5~
23  AK9*R*2*1*0~
24  SE*16*26654001~
25  GE*1*3026654~
26  IEA*1*003038950~
```

# 277CA Acknowledgement Report

- Returned to submitter for accepted encounter files or rejected encounter segments
  - Rejection responses based on edit failures detected by CEM
- Assigns an ICN for each ***accepted*** encounter

**Note:** Rejected encounters must be corrected and resubmitted in order to receive an ICN



# 277CA Acknowledgement Report (continued)

ISA\*00\* \*00\* \*ZZ\*10302 \*ZZ\*GA12345678 \*140914\*1105\*^\*0 0501\*000000001\*0\*T\*:~  
 GS\*HN\*10302\*GA12345678\*20140914\*110505\*1\*X\* 005010X214~  
 ST\*277\*000000001\*005010X214~  
 BHT\*0085\*08\*11257\*20 140914\*1355\*TH~

HL\*1\*\*20\*1~  
 NM1\*PR\*2\*PALMETTO GBA SOUTH CAROLINA\*\*\*\*\*46\*80882~  
 TRN\*1\*11111333111113335555555001~  
 DTP\*050\*D8\*20140914~  
 DTP\*009\*D8\*20140914~

HL\*2\*1\*21\*1~  
 NM1\*41\*2\*INTERNAL MED ASSOC\*\*\*\*\*46\*GA12345678~  
 TRN\*2\*0001~  
 STC\*A1:19:PR\*20140914\*WQ\*7766.00~

QTY\*90\*1~  
 QTY\*AA\*1~  
 AMT\*Y J\*5803.00~  
 AMT\*Y/\*1963.00~

HL=20  
(Information Source)

HL=21  
(Information Receiver)

“WQ = Accept: Indicates the file was accepted at the receiver/submitter level

Claim status category code (A1 = “The claim/encounter has been received”): Claim status code (19 = “Entity acknowledges receipt of claim/encounter”): Entity identifier code (PR= “Payer”)

Number of claims accepted and rejected

# 277CA Acknowledgement Report – ICN

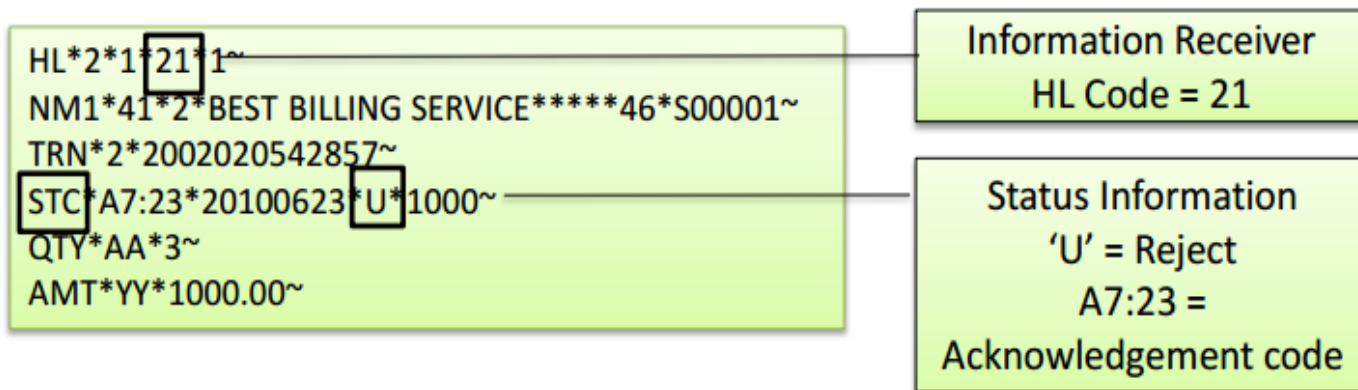
HL=PT  
(Patient –  
Claim Level)

HL\*4\*3\***PT**~  
NM1\*QC\*1\*SUMMER\*BREEZE\*\*\*\*MI\*ABC123456789~  
TRN\*2\*AR100839~  
STC\*A1:1:QC\*20140914\***WQ**\*7433~  
REF\*1K\***1911290153580**~  
DTP\*472\*D8\*20140816~

“WQ = Accept: Indicates the  
file was accepted at the **claim**  
level

The REF Segment  
provides the ICN for  
**accepted** submissions

# 277CA Acknowledgement Report Overview



STC03 data element conveys whether the HL structures were accepted or rejected

- “U” = HL rejected
  - STC01 data element will list the Acknowledgement Code, Claim Status Category Code and the Claim Status Code
- “WQ” = HL accepted



# EDPS Processing Reports

# Report Layout

- MAO reports are delivered to submitters in a fixed length format and distributed by two methods:
  - Flat file
  - Formatted
- Flat file reports are categorized by:
  - Header record
  - Detail record
  - Trailer record



# MAO-002 and MAO-001 Reports

- The MAO-002 Encounter Data Processing Status Report reports the status of all encounter service lines (accepted and rejected) in an encounter file along with error codes.
- The MAO-001 Encounter Data Duplicates Report provides information exclusively for rejected encounters and service lines that receive:
  - Error Code 98315 – Linked Chart Review Duplicate
  - Error Code 98320 – Chart Review Duplicate
  - Error Code 98325 – Service Line(s) Duplicated
  - Error Code 98300 - Exact Inpatient Duplicate Encounter

# MAO-002 Encounter Data Processing Status Report

Encounter Data Processing Status Report  
 Report Run Date 03/07/2013 12:58PM  
 Medicare Advantage Contract ID: H9999

Page 1

Submission Interchange Number: ENC000000000000120130305

Report ID: MAO-002

Report Date: 03/04/2013

Transaction Date: 03/05/2013

Record Type	Plan Encounter ID (CCN)	Encounter ICN	Encounter Line Number	Encounter Status	Error	Error Description
837P	XXXXXXXXXX000001	10101010	000	Rejected	-	-
			001	Rejected	98325	Service Line(s) Duplicated
			002	Rejected	98325	Service Line(s) Duplicated
837P	XXXXXXXXXX000002	20202020	000	Accepted	-	-
			001	Accepted	-	-
			002	Accepted	-	-

Encounter rejected

Encounter accepted

Encounter Status

TOTALS:

Total Processing Errors:	2		
Total Number of Encounter Lines Accepted :	2	Total Number of Encounter Records Accepted :	1
Total Number of Encounter Lines Rejected :	2	Total Number of Encounter Records Rejected :	1
Total Number of Encounter Lines Submitted:	4	Total Number of Encounter Records Submitted:	2

# MAO-001 Encounter Data Duplicates Report

Encounter Data Duplicates Report  
 Report Run Date: 07/09/2012 12:51 PM  
 Medicare Advantage Contract ID: H9999  
 PROD

Compare dates

Page 1

Submission Interchange Number: ENH290600000001320120705

Report ID: MAO-001

Report Date: 07/09/2012  
 Transaction Date: 07/08/2012

Record Type	Plan Encounter ID (CCN)	Encounter ICN	Encounter Line Number	Duplicate Plan Encounter ID (CCN)	Duplicate Encounter ICN	Duplicate Encounter Line Number	Beneficiary HICN	Date of Service
PRO	231181789	2509061539016	001	222186298	2509061539028	001	567185299	06/15/2012
PRO	231181790	2509061539013	002	222186398	2509061539047	002	567186299	06/15/2012

Identify original encounter ID

Identify duplicate encounter ID

Check HICN

TOTALS :

TotalNumber of Duplicate Encounter Lines Rejected: 2  
 TotalNumber of Encounter Lines Submitted: 2

TotalNumber of Encounter Records Submitted: 2



# Submission Timelines

# Risk Adjustment

## Payment Run Submission Deadlines

- For information on 2017 and 2018 payment run submission deadlines, refer to the most recent Health Plan Management System (HPMS) memos:
  - 4/27/2016 – *CORRECTION: Deadline for Submitting Risk Adjustment Data for Use in Risk Score Calculation Runs for Payment Years 2016, 2017, and 2018*
  - 12/29/2016 – *Updated Deadline for Submitting Risk Adjustment Data for Use in Final 2016 Risk Score Run and Data Use in Mid-Year 2017 Risk Score Run*

# Questions & Answers





# Closing Remarks

# Commonly Used Acronyms

Acronym	Definition
ANSI	American National Standards Institute
CEM	Common Edits and Enhancements Module
CFR	Code of Federal Regulations
CPT	Current Procedural Terminology
DOS	Date(s) of Service
EDDPPS	Encounter Data DME Processing and Pricing Sub-System
EDFES	Encounter Data Front-End System
EDIPPS	Encounter Data Institutional Processing and Pricing Sub-System
EDPPPS	Encounter Data Professional Processing and Pricing Sub-System
EDPS	Encounter Data Processing System
EDR	Encounter Data Record



# Commonly Used Acronyms (continued)

Acronym	Definition
EDS	Encounter Data System
EODS	Encounter Operational Data Store
FERAS	Front-End Risk Adjustment System
FFS	Fee-for-Service
FTP	File Transfer Protocol
HCC	Hierarchical Condition Category
HCPCS	Healthcare Common Procedure Coding System
HH	Home Health
HIPPS	Health Insurance Prospective Payment System
ICN	Internal Control Number

# Commonly Used Acronyms (continued)

Acronym	Definition
MAOs	Medicare Advantage Organizations
MARx	Medicare Advantage Prescription Drug System
MMR	Monthly Membership Report
MOR	Monthly Output Report
NPI	National Provider Identifier
PY	Payment Year
RAPS	Risk Adjustment Processing System
SNF	Skilled Nursing Facility
TR3	Technical Report Type 3 Implementation Guide

# Resources

Resource	Resource Link
Centers for Medicare & Medicaid Services (CMS)	<a href="http://www.cms.gov">http://www.cms.gov</a>
Customer Support and Service Center (CSSC) Operations	<a href="http://www.csscooperations.com">http://www.csscooperations.com</a> <a href="mailto:csscooperations@palmettogba.com">csscooperations@palmettogba.com</a>
Encounter Data Mailbox	<a href="mailto:encounterdata@cms.hhs.gov">encounterdata@cms.hhs.gov</a>
Risk Adjustment Mailbox	<a href="mailto:riskadjustment@cms.hhs.gov">riskadjustment@cms.hhs.gov</a>
Technical Assistance Registration Service Center (TARSC)	<a href="http://www.tarsc.info/">http://www.tarsc.info/</a>
Washington Publishing Company	<a href="http://www.wpc-edi.com/content/view/817/1">http://www.wpc-edi.com/content/view/817/1</a>
Medicare Advantage and Prescription Drug Plans Communications User Guide	<a href="http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/mapdhelpdesk/Plan_Communications_User_Guide.html">http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/mapdhelpdesk/Plan_Communications_User_Guide.html</a>

# Resources (continued)

Resource	Link
CMS 5010 Edit Spreadsheet	<a href="https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/">https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/</a>
RAPS Error Code Listing and RAPS-FERAS Error Code Lookup	<a href="http://www.csscooperations.com/internet/cssc3.nsf/doc sCat/CSSC~CSSC%20Operations~Risk%20Adjustment%20Processing%20System~Edits?open&amp;expand=1&amp;navme nu=Risk^Adjustment^Processing^System  ">http://www.csscooperations.com/internet/cssc3.nsf/doc sCat/CSSC~CSSC%20Operations~Risk%20Adjustment%20Processing%20System~Edits?open&amp;expand=1&amp;navme nu=Risk^Adjustment^Processing^System  </a>
Plan Communications User Guide	<a href="http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/mapdhelpdesk/Plan_Communications_User_Guide.html">http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/mapdhelpdesk/Plan_Communications_User_Guide.html</a>
EDFES Edit Code Lookup	<a href="https://apps.csscooperations.com/errorcode/EDFS_ErrorCodeLookup">https://apps.csscooperations.com/errorcode/EDFS_ErrorCodeLookup</a>
EDPS Error Code Look-up Tool	<a href="http://www.csscooperations.com/internet/cssc3.nsf/Doc sCat/CSSC~CSSC%20Operations~Medicare%20Encounte r%20Data~Edits~97JL942432?open&amp;navmenu=Medicar e^Encounter^Data    ">http://www.csscooperations.com/internet/cssc3.nsf/Doc sCat/CSSC~CSSC%20Operations~Medicare%20Encounte r%20Data~Edits~97JL942432?open&amp;navmenu=Medicar e^Encounter^Data    </a>

# Contact Us

- Additional questions may also be submitted following the webinar to:

[EncounterData@cms.hhs.gov](mailto:EncounterData@cms.hhs.gov)

or

[RiskAdjustment@cms.hhs.gov](mailto:RiskAdjustment@cms.hhs.gov)

- Questions submitted to other CMS mailboxes will be forwarded to the risk adjustment or encounter data mailboxes as appropriate

# Evaluation

A formal request for evaluation feedback will be sent at the conclusion of this session.

Please take a moment to note any feedback you wish to give concerning this session.

## Your Feedback is Important.



## Thank You!

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