CMS
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Risk Adjustment for EDS & RAPS User Group

June 15, 2017

2:00 p.m. – 3:00 p.m. ET

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 follow up questions regarding content of this User Group, submit inquiries to CMS at RiskAdjustment@cms.hhs.gov or EncounterData@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.
- User Group Evaluation

Feedback on the Agenda

- We want to thank everyone who has been submitting specific topics for future User Group Calls. We are reviewing these topics as we plan for future agendas.
- We remind you that you have an opportunity to suggest specific topics as part of the evaluation at end of each User Group call.
- We recognize that we have a broad audience with a wide range of interests and levels of expertise.
- In order to meet these varied interests, we are splitting the agendas for these calls between Program Updates, which will include a variety of topics of varying levels of detail, and Trainings, with Trainings scheduled last.

Agenda

- Introduction
- CMS Updates
  - Frequently Occurring Encounter Data Systems (EDS) Edits
  - MAO-004 Report: DME Encounters Clarification
  - New Risk Adjustment Overpayment Reporting Module (RAOR) Overview
- Q&A Session
- Training Topic – EDS Reports
  - Encounter Data Front End System (EDFES) Acknowledgement Reports
  - Encounter Data Processing System (EDPS) Processing Status Reports
- Q&A Session

CMS Updates

Frequently Occurring EDPS Edits

Frequently Occurring EDPS Edits

- CMS has been reviewing the most frequently occurring edit codes
  - At the Header Level
  - At the Line Level
  - By type of record (DME, Home Health, SNF, Outpatient, Inpatient, Professional)
- Findings presented in User Group Calls and in one-to-one technical assistance
- Findings also used to inform CMS about whether changes are required to edit logic

Edits 98300, 98315, & 98320 Overview

- Edit 98300: "Exact Inpatient Duplicate Encounter"
  - Header level edit
  - Institutional Inpatient EDRs
  - Applicable to Type of Bills 11X, 18X, 21X and 41X
  - Bypassed for Chart Review Records
- Edit 98315: "Linked Chart Review Duplicate"
  - Header level edit
  - ***Chart Review Replacement Records Only***
  - Applicable to Professional, DME, and Institutional
- Edit 98320: "Chart Review Duplicate"
  - Header level edit
  - ***Original Chart Review Records Only (Linked and Unlinked)***
  - Applicable to Professional, DME, and Institutional

Data Elements Compared for Duplicates

Edit 98300 – "Exact Inpatient Duplicate Encounter"

Institutional Inpatient
Health Insurance Claim Number (HICN)
Date of Service (DOS) Header
Billing Provider NPI
Type of Bill

Edit 98315 - "Linked Chart Review Duplicate"

Professional & DME Encounters
Health Insurance Claim Number (HICN)
Date of Service (DOS) - Header
Diagnosis Codes
Referenced ICN

Institutional Encounters
Health Insurance Claim Number (HICN)
Date of Service (DOS) - Header
Diagnosis Codes
Referenced ICN
Type of Bill

Data Elements Compared for Duplicates

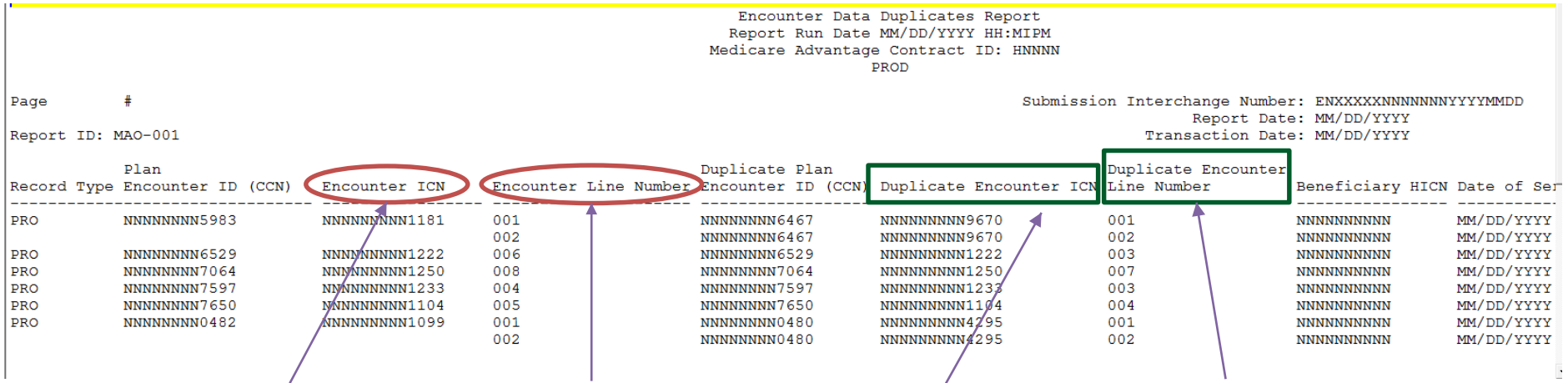
(continued)

Edit 98320 - “Chart Review Duplicate”

Professional & DME Encounters
Health Insurance Claim Number (HICN)
Date of Service (DOS) - Header
Diagnosis Codes

Institutional Encounters
Health Insurance Claim Number (HICN)
Date of Service (DOS) - Header
Diagnosis Codes
Type of Bill

MAO-001 Report – Key Data Elements



Encounter Data Duplicates Report
Report Run Date MM/DD/YYYY HH:MIPM
Medicare Advantage Contract ID: HNNNN
PROD

Page # Submission Interchange Number: ENXXXXXNNNNNNNYYYYMMDD
Report Date: MM/DD/YYYY
Report ID: MAO-001 Transaction Date: MM/DD/YYYY

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 Ser
PRO	NNNNNNNN5983	NNNNNNNNN1181	001	NNNNNNNN6467	NNNNNNNNN9670	001	NNNNNNNNNN	MM/DD/YYYY
			002	NNNNNNNN6467	NNNNNNNNN9670	002	NNNNNNNNNN	MM/DD/YYYY
PRO	NNNNNNNN6529	NNNNNNNNN1222	006	NNNNNNNN6529	NNNNNNNNN1222	003	NNNNNNNNNN	MM/DD/YYYY
PRO	NNNNNNNN7064	NNNNNNNNN1250	008	NNNNNNNN7064	NNNNNNNNN1250	007	NNNNNNNNNN	MM/DD/YYYY
PRO	NNNNNNNN7597	NNNNNNNNN1233	004	NNNNNNNN7597	NNNNNNNNN1233	003	NNNNNNNNNN	MM/DD/YYYY
PRO	NNNNNNNN7650	NNNNNNNNN1104	005	NNNNNNNN7650	NNNNNNNNN1104	004	NNNNNNNNNN	MM/DD/YYYY
PRO	NNNNNNNN0482	NNNNNNNNN1099	001	NNNNNNNN0480	NNNNNNNNN4295	001	NNNNNNNNNN	MM/DD/YYYY
			002	NNNNNNNN0480	NNNNNNNNN4295	002	NNNNNNNNNN	MM/DD/YYYY

ICN of the encounter that duplicates a previously accepted encounter

Encounter service line rejected by the edit

ICN of the encounter previously submitted and accepted

Encounter service line previously accepted with same exact data elements

- The MAO-001 report is a fixed length report available in flat file and formatted layouts. It provides information for encounters and service lines that receive a status of “reject” as a result of duplicate edits 98300, 98315, 98320, & 98325
- Details on the MAO-001 report include the encounter ICN and service line that is rejected, along with record type, the previously submitted and accepted encounter ICN and service line, Plan ID, Date of Service, Error Code, and Beneficiary ID

MAO-001 Report
Edit 98300 - “Exact Inpatient Duplicate Encounter”

Encounter Data Duplicates Report
Report Run Date 06/06/2017 06:31AM
Medicare Advantage Contract ID: XXXXX
PROD

Page 1 Submission Interchange Number: XXXXXXXXXXXXXXXX20170605
Report Date: 06/06/2017
Report ID: MAO-001 Transaction Date: 06/05/2017

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	Error Code
INS	11111111111111113	1111111111115	000	22222222222222201	2222222222202	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111115	1111111111113	000	22222222222222211	2222222222203	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111118	1111111111111	000	22222222222222213	2222222222204	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111110	1111111111113	000	22222222222222231	2222222222209	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111111	1111111111117	000	22222222222222221	2222222222208	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111110	1111111111115	000	22222222222222217	2222222222214	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111112	1111111111116	000	22222222222222212	2222222222215	000	XXXXXXXXXX	MM/DD/YYYY	98300
INS	11111111111111117	1111111111111	000	333333333333330	2222222222220	000	XXXXXXXXXX	MM/DD/YYYY	98300

ICN of the encounter that duplicates a previously accepted encounter

Encounter service line rejected by the edit

ICN of the Encounter previously submitted and accepted

Encounter service line previously accepted with same exact data elements

- Line Number ‘000’ indicates the edit is posted at the Header Level

MAO-001 Report
Edit 98315 - “Linked Chart Review Duplicate”

Encounter Data Duplicates Report
Report Run Date 06/06/2017 06:31AM
Medicare Advantage Contract ID: XXXXX
PROD

Page 1

Submission Interchange Number: XXXXXXXXXXXXXXX20170603
Report Date: 06/06/2017
Transaction Date: 06/05/2017

Report ID: MAO-001

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	Error Code
PRO	1111111	11111111192	000	1111111	00000000040	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111189	000	1111111	00000000019	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111190	000	1111111	00000000029	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111188	000	1111111	00000000014	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111191	000	1111111	00000000015	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111106	000	1111111	00000000016	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111107	000	1111111	00000000037	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111108	000	1111111	00000000094	000	XXXXXXXXXX	MM/DD/YYYY	98315
PRO	1111111	11111111109	000	1111111	00000000005	000	XXXXXXXXXX	MM/DD/YYYY	98315

ICN of the encounter that duplicates a previously accepted encounter

Encounter service line rejected by the edit

ICN of the Encounter previously submitted and accepted

Encounter service line previously accepted with same exact data elements

- Line Number ‘000’ indicates the edit is posted at the Header Level
- Most recent encounter is a duplicate of the encounter referenced

MAO-001 Report – Edit 98320

Encounter Data Duplicates Report
Report Run Date 06/06/2017 06:31AM
Medicare Advantage Contract ID: XXXXX
PROD

Page 1

Submission Interchange Number: XXXXXXXXXXXXXXX20170605
Report Date: 06/06/2017
Transaction Date: 06/05/2017

Report ID: MAO-001

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	Error Code
PRO	WG11111111111111101	11111111111117	000	WG2222222222222221	22222222222221	000	XXXXXXXXXX	MM/DD/YYYY	98320
PRO	WG11111111111111102	11111111111111	000	WG2222222222222222	22222222222222	000	XXXXXXXXXX	MM/DD/YYYY	98320

Total Number of Duplicate Encounter Lines Rejected: 0
Total Number of Encounter Lines Submitted: 6018
Total Number of Encounter Records Submitted: 6018

ICN of the encounter that duplicates a previously accepted encounter

Encounter service line rejected by the edit

ICN of the Encounter previously submitted and accepted

Encounter service line previously accepted with same exact data elements

- Line Number '000' indicates the edit is posted at the Header Level

Details of Analysis Performed

- Sample Size
  - Encounter data files for all modules (INST, PROF, DME)
  - All encounter data records files with records posting edits 98300, 98315, and 98320 – submitted the between 04/16/2017 and 04/22/2017
- Methodology for each of the Edits 98300, 98315, and 98320
  - For each file, determined the percentage of encounter data records that were rejected with each of these three edits.
  - For each service type, performed an in-depth analysis of an encounter file with the highest percentage of encounter data records rejected with one of these three edits.
  - For each encounter data record posting one of these three edits, we reviewed the details of the previously accepted encounter data record
  - For a subset of encounter data records, we reviewed all the data elements submitted on the current encounter data record and the previously submitted encounter data record to assess differences

Findings from Analysis Performed
Edit 98300 – "Exact Inpatient Duplicate Encounter"

- The EDRs that were rejected as duplicates included several service lines compared to just one line found on the previously submitted and accepted EDR
- The EDRs that were rejected were also missing data elements that were submitted on the previously-accepted EDR (e.g., Contract Information (2300 CN1), Other Diagnosis Codes (2300 HI), Attending Provider (2310A NM1))
- The EDRs that were rejected included additional data elements that were not submitted with the previously-accepted EDR (e.g., Remittance Date (2330B DTP))

Findings from Analysis Performed
Edits 98315 - "Linked Chart Review Duplicate"

- All of the data elements on the EDR that was rejected as a duplicate and the previously accepted EDR were identical except for Service Line non-covered charges (2400 SV207) and Line Check or Remittance Date (2430 DTP).

Findings from Analysis Performed
Edits 98320 - "Chart Review Duplicate"

- In most cases for professional EDRs, the EDR that was rejected as a duplicate is an unlinked chart review record and the previously-accepted EDR is a linked chart review record with a parent ICN.
- For institutional EDRs, the rejected and the previously-accepted EDRs were both unlinked chart review records.
- Other than the linking ICN, all of the data elements on the rejected EDR and the previously-accepted EDR were identical except for Patient Control Number (2300 CLM01), Other Payer – Claim Check or Remittance Date (2330B DTP), and Claim Identifier for transmission intermediaries (2300 REF02 with D9 Qualifier).

Error Prevention Strategies for Edit 98300

If a submitter needs to correct any of the data elements that are <u>not part of the duplicate check</u>

- Void the previously accepted EDR and resubmit a new EDR with the corrections

OR

- Submit a replacement (Claim Frequency Code = 7) EDR against the previously-accepted EDR

Error Prevention Strategies for Edit 98315

- Utilize a replacement chart review record to replace diagnoses codes only on previously accepted chart review records
- If a submitter needs to correct a data element *other than diagnoses codes* on a previously-accepted chart review record
  - Void the previously accepted chart review record and resubmit a new chart review record with the corrections

Error Prevention Strategies for Edit 98320

- Utilize a chart review record only to add and delete diagnosis codes but not to change other data elements
- If a submitter needs to correct a data element *other than diagnoses codes* on a previously-accepted chart review record
  - Void the previously accepted chart review record and resubmit a new chart review record with the corrections

MAO-004 Report: Durable Medical Equipment (DME) Encounters Clarification

MAO-004 Report: DME Encounters Clarification

- CMS rules exclude diagnoses from DME encounters from risk adjustment. This policy is not changing as we apply filtering logic to encounter data.
  - Because we do not take diagnoses from DME encounters, CMS has been excluding all encounter data records (EDRs) with a DME payer code from our filtering efforts.
- However, we recently discovered that some submitters have been submitting non-DME HCPCS codes on EDRs with DME payer codes and, in some cases, these codes are risk adjustment eligible.
  - Because these encounters contain non-DME HCPCS codes, we believe that these EDRs are likely professional encounters (and the DME payer code was used in error).

MAO-004 Report: DME Encounters Clarification (continued)

- For future risk score runs: CMS will adjust our approach to capture these diagnoses from encounters with risk adjustment eligible HCPCS codes, including those that were submitted with a DME payer code.
  - We are not changing our policy and are not starting to take diagnoses from DME encounters. Diagnoses from EDRs with only DME procedure codes are not risk adjustment eligible.

Risk Adjustment Overpayment Reporting (RAOR) Module

RAOR - Overview

- On April 25, 2017, CMS released an HPMS email notifying Medicare Advantage Organizations (MAOs) of a new reporting module for Part C and Part D risk adjustment related overpayments.
- The Risk Adjustment Overpayment Reporting Module (RAOR) is in HPMS and replaces the Remedy system's functionality.
- MAOs should no longer contact the MAPD Help Desk to report new overpayments OR to edit existing tickets.

RAOR – Overview *(continued)*

- MAOs do not need to enter previously reported overpayments from the Remedy system into the RAOR module.
- However, to edit an existing overpayment report from the Remedy system, MAOs should create a new report in the RAOR module, since the existing Remedy tickets were NOT migrated to the new module.

RAOR – Module

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Encounter Data Report Card
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Risk Adjustment Overpayment Reporting
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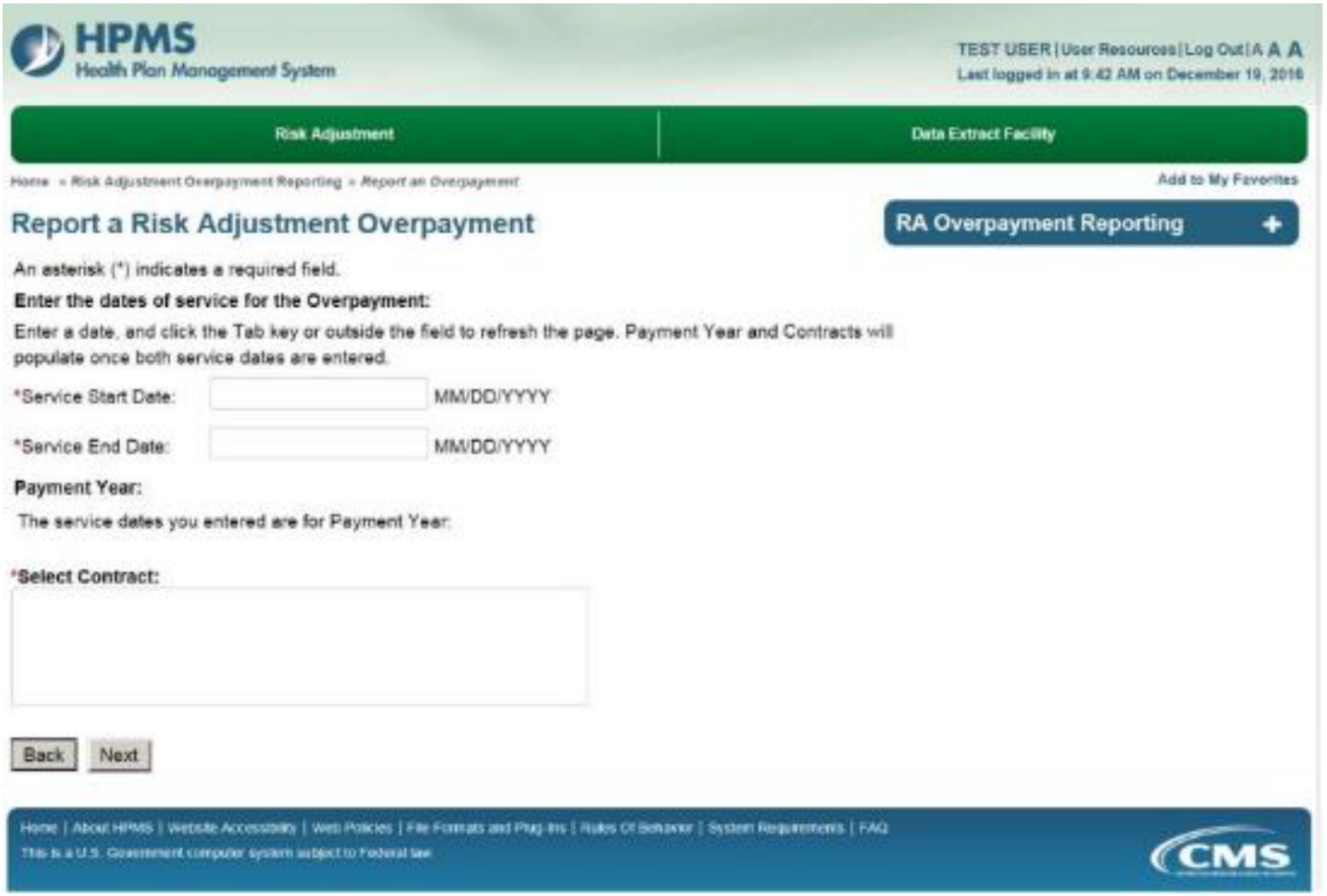
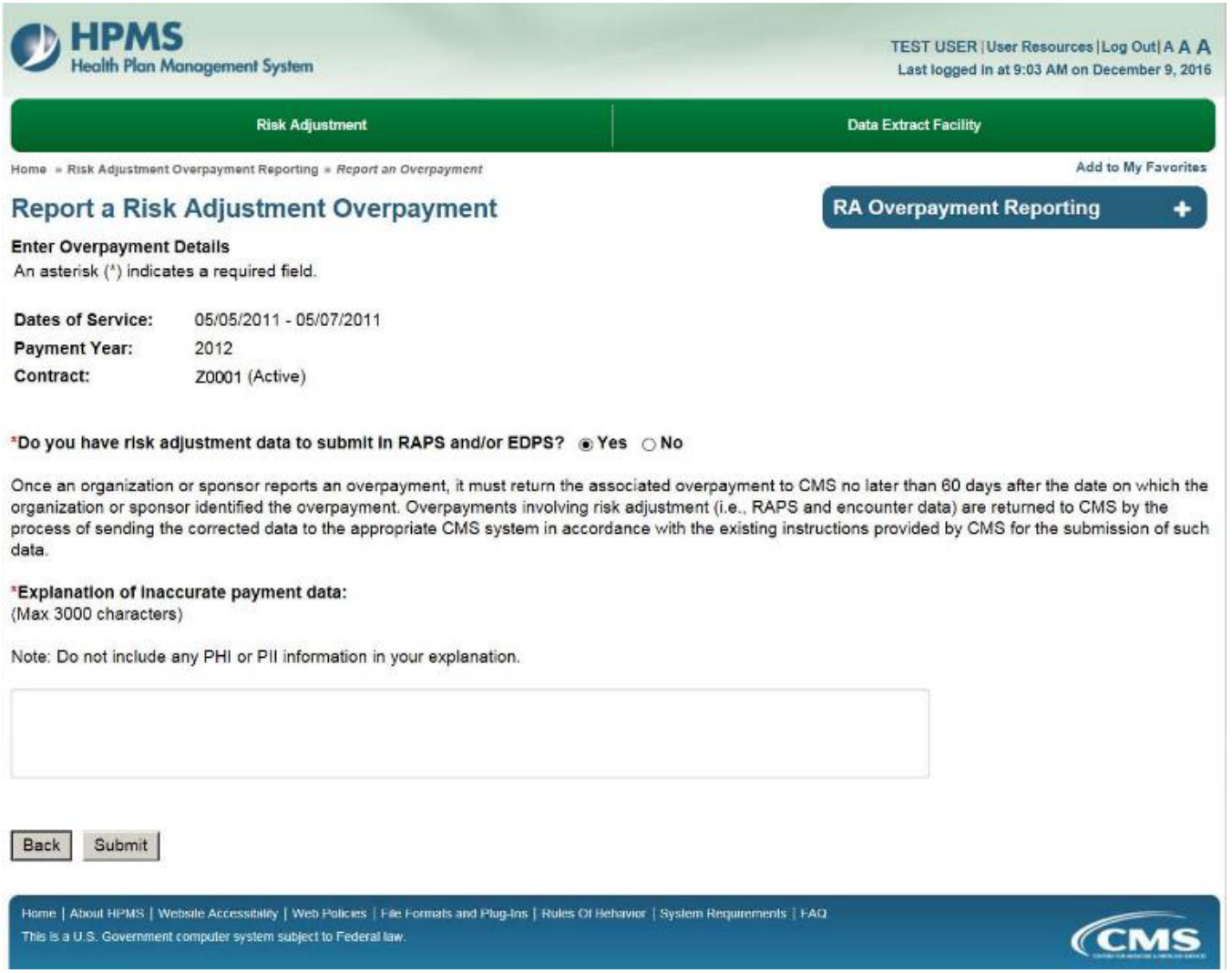
RAOR – Module *(continued)*

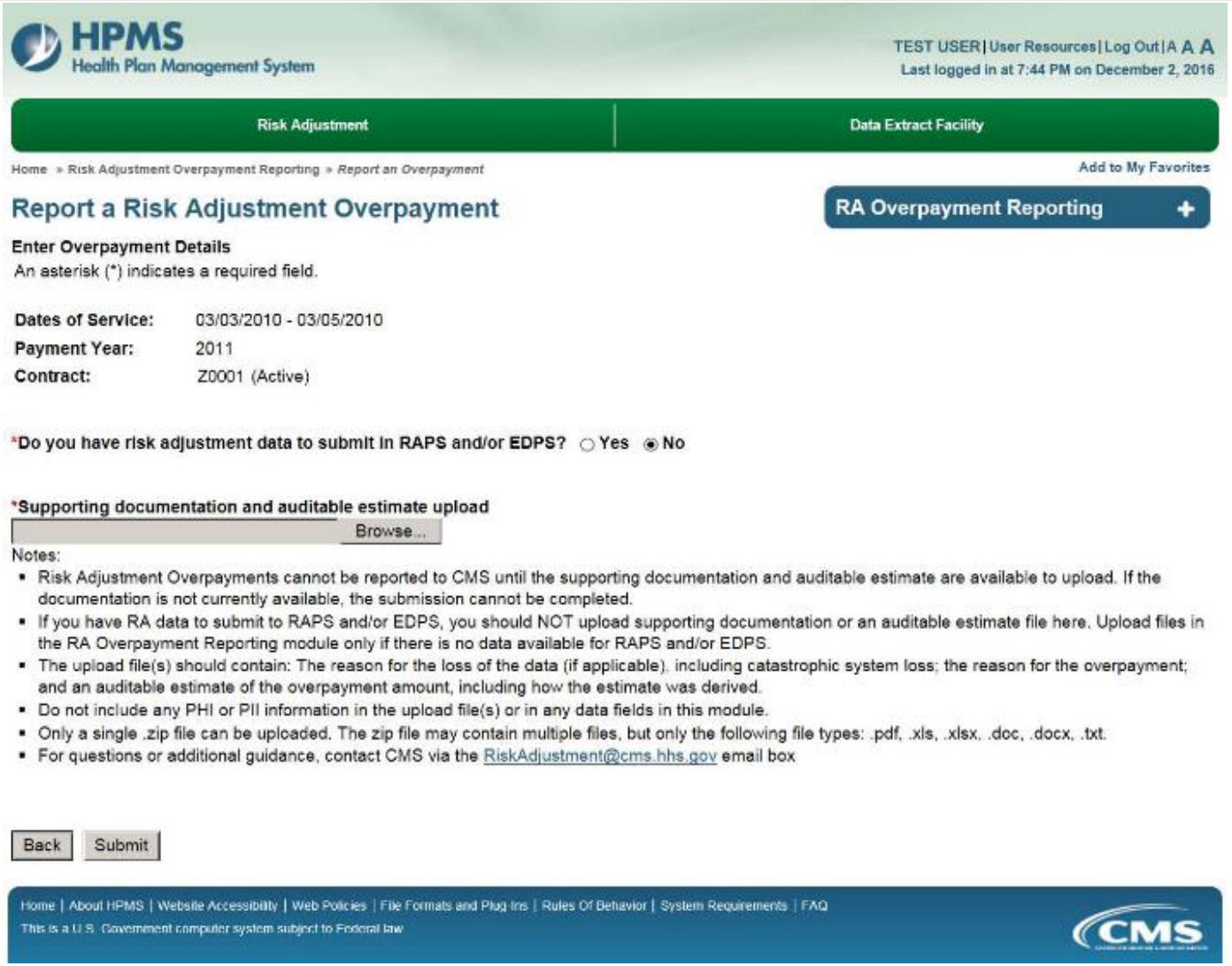
RAOR – Module *(continued)*



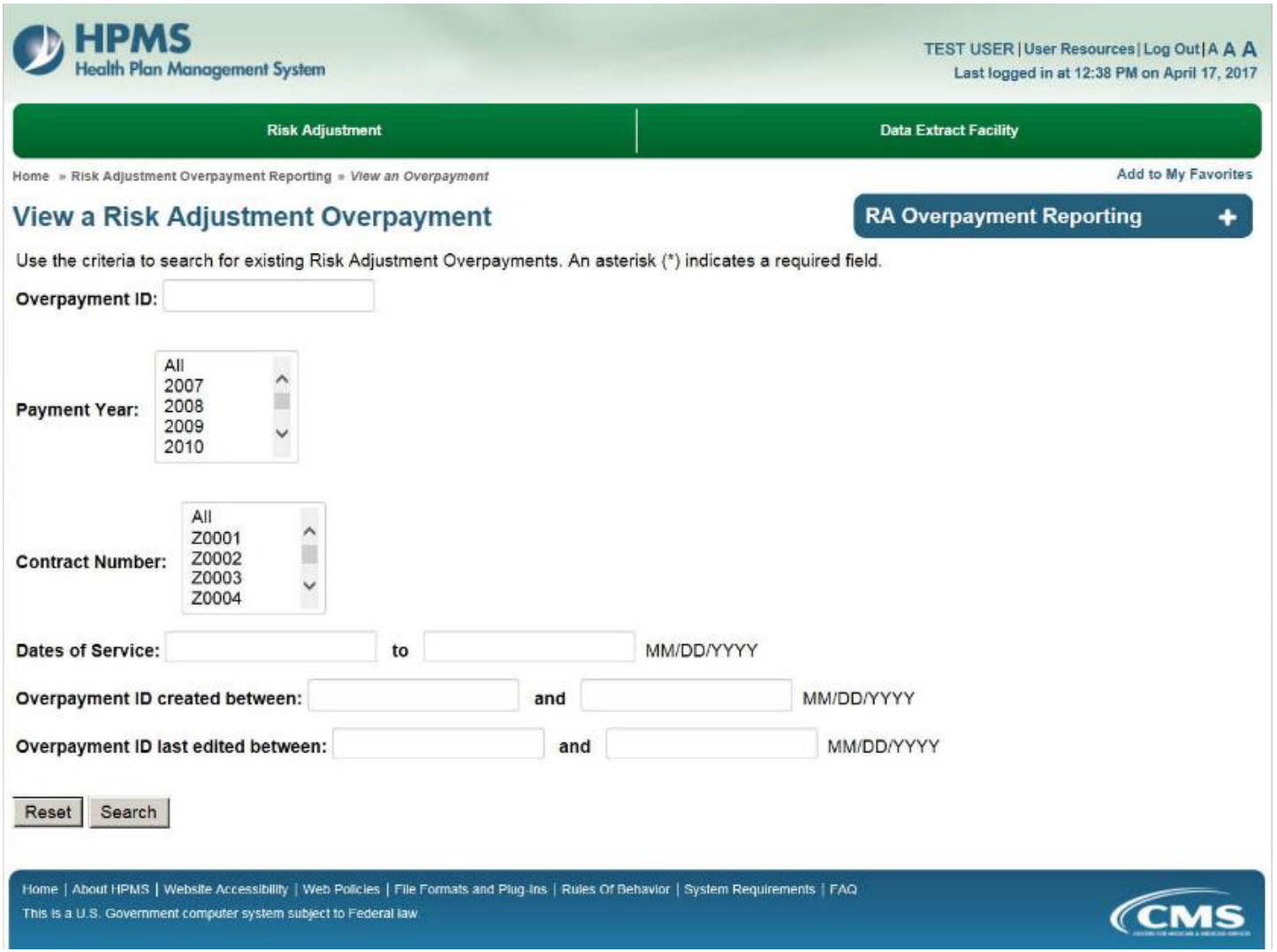
RAOR – Module *(continued)*



RAOR – Module *(continued)*



RAOR – Module *(continued)*



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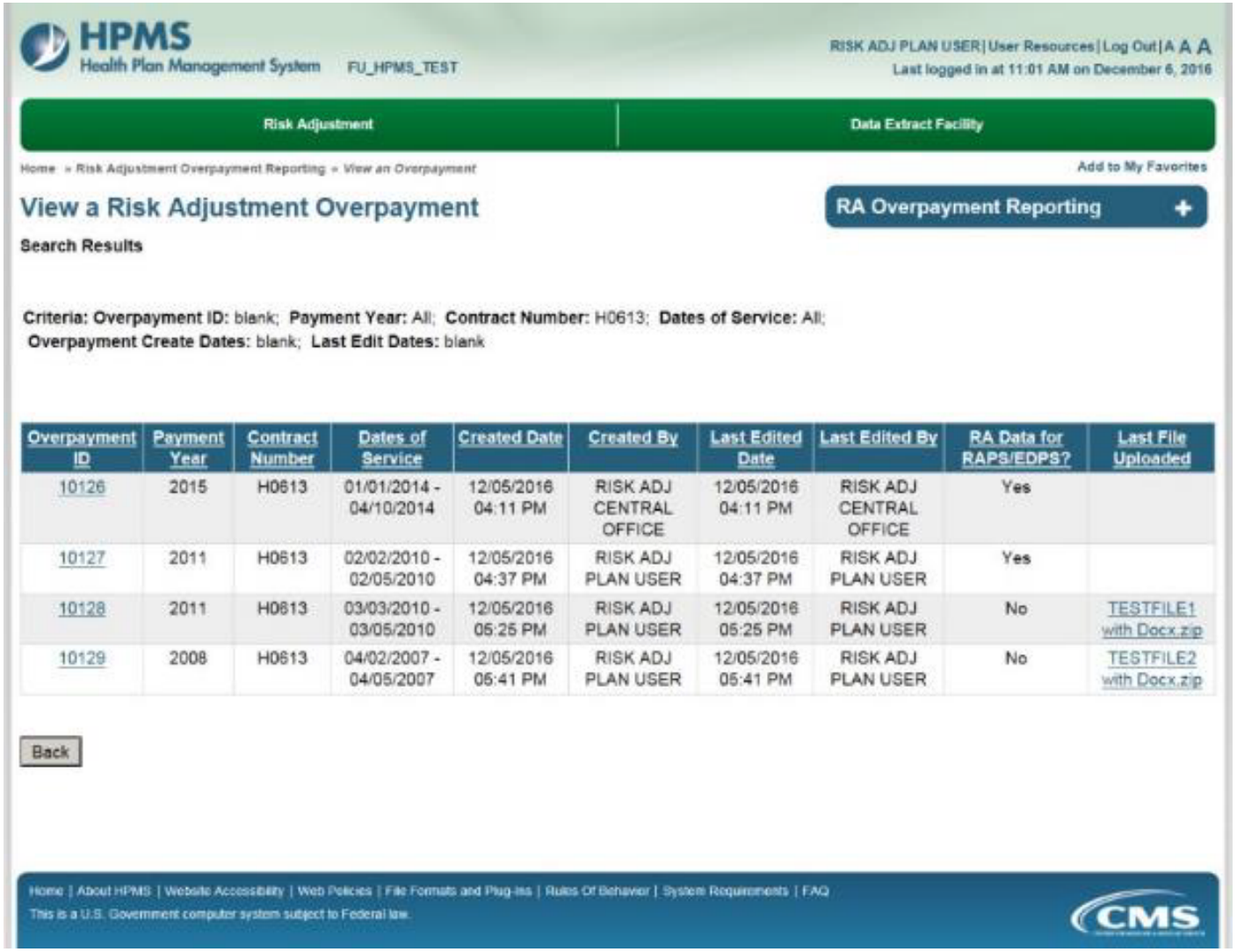

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Health Plan Management System FU_HPMS_TEST

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Risk Adjustment | Data Extract Facility

Home » Risk Adjustment Overpayment Reporting » View an Overpayment

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RA Overpayment Reporting +

Search Results

Criteria: Overpayment ID: blank; **Payment Year:** All; **Contract Number:** H0613; **Dates of Service:** All; **Overpayment Create Dates:** blank; **Last Edit Dates:** blank

Overpayment ID	Payment Year	Contract Number	Dates of Service	Created Date	Created By	Last Edited Date	Last Edited By	RA Data for RAPS/EDPS?	Last File Uploaded
10126	2015	H0613	01/01/2014 - 04/10/2014	12/05/2016 04:11 PM	RISK ADJ CENTRAL OFFICE	12/05/2016 04:11 PM	RISK ADJ CENTRAL OFFICE	Yes	
10127	2011	H0613	02/02/2010 - 02/05/2010	12/05/2016 04:37 PM	RISK ADJ PLAN USER	12/05/2016 04:37 PM	RISK ADJ PLAN USER	Yes	
10128	2011	H0613	03/03/2010 - 03/05/2010	12/05/2016 05:25 PM	RISK ADJ PLAN USER	12/05/2016 05:25 PM	RISK ADJ PLAN USER	No	TESTFILE1 with Docx.zip
10129	2008	H0613	04/02/2007 - 04/05/2007	12/05/2016 05:41 PM	RISK ADJ PLAN USER	12/05/2016 05:41 PM	RISK ADJ PLAN USER	No	TESTFILE2 with Docx.zip

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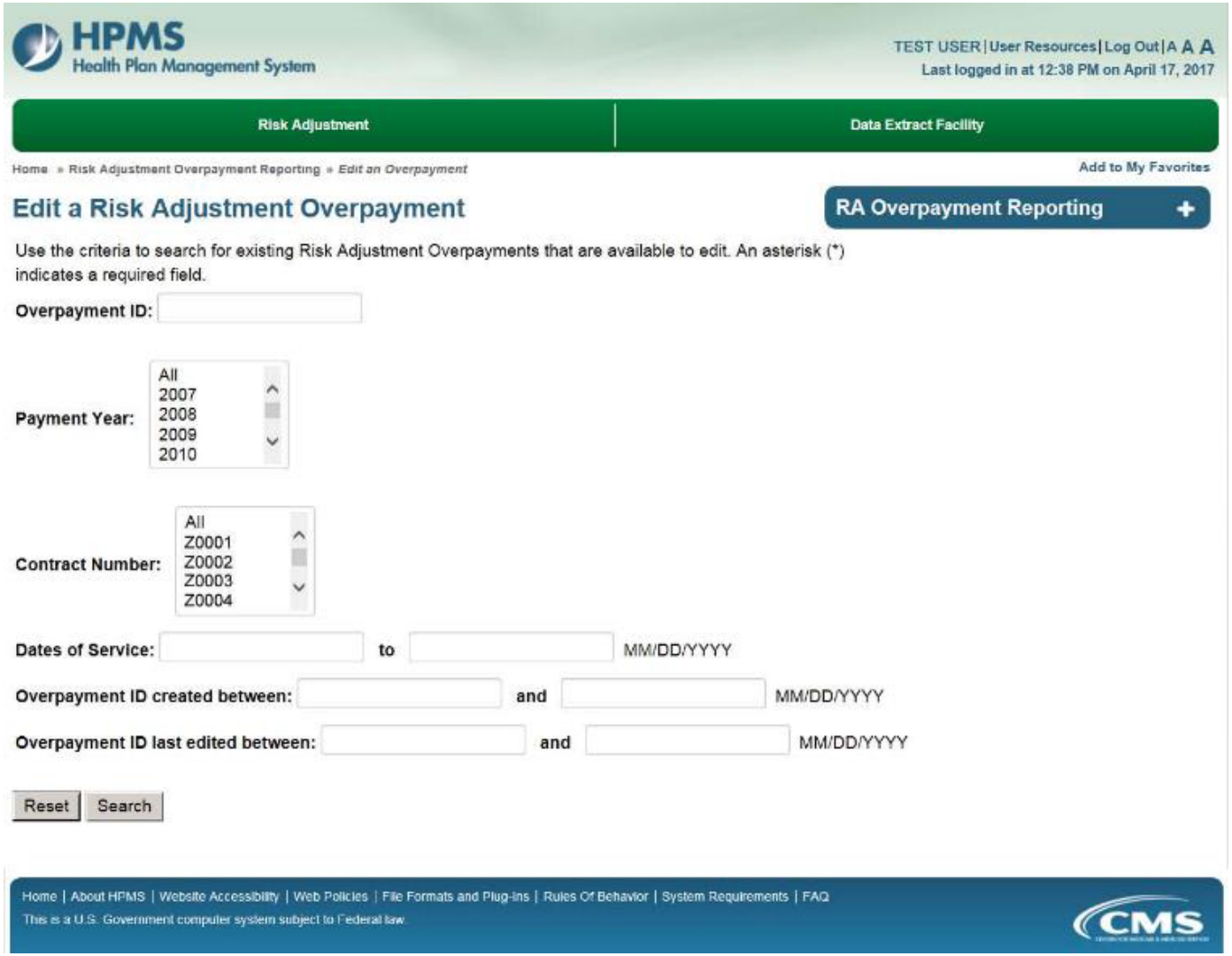
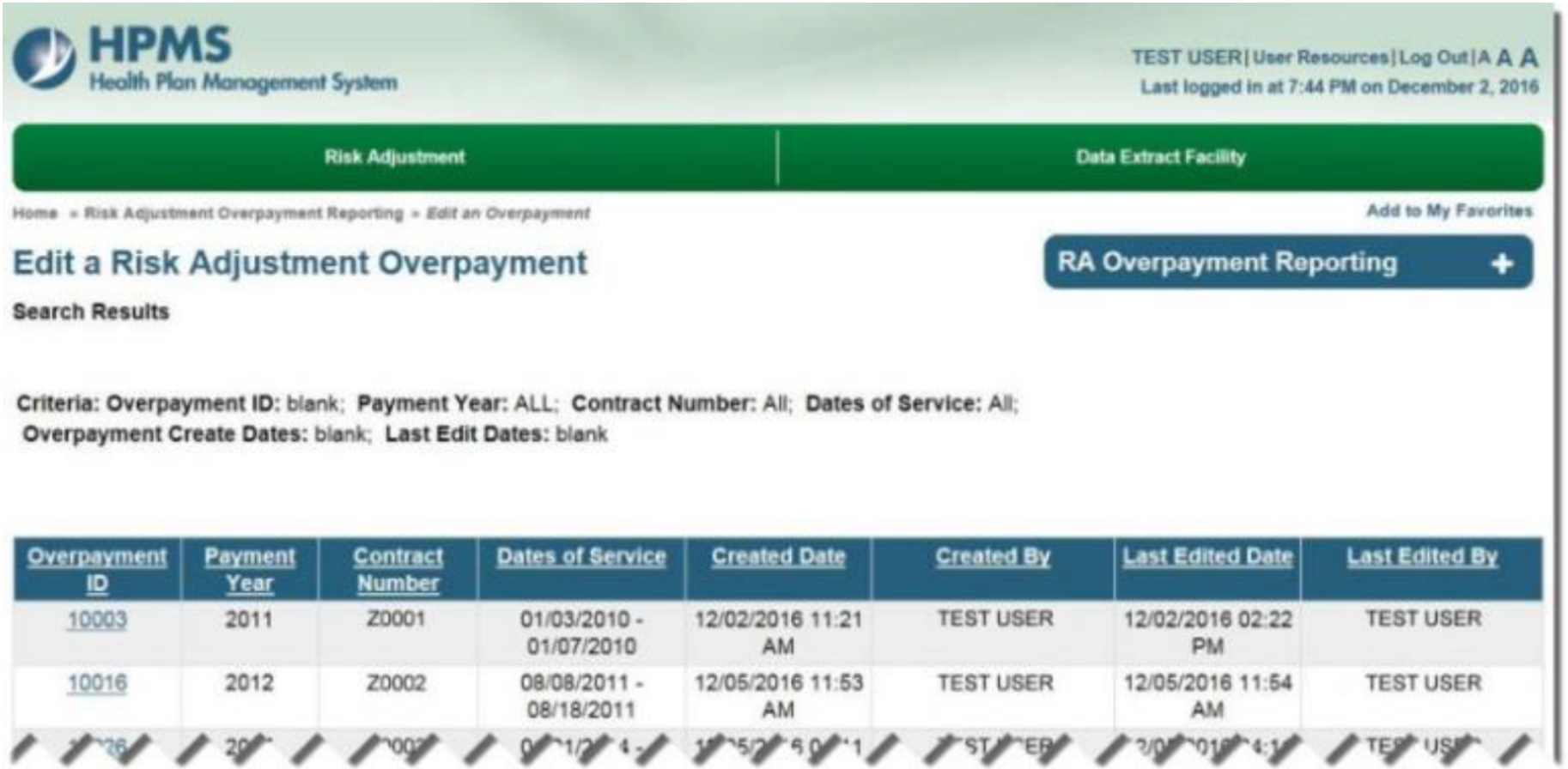
RAOR – Module *(continued)*



RAOR – Module *(continued)*



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RA Overpayment Reporting +

Search Results

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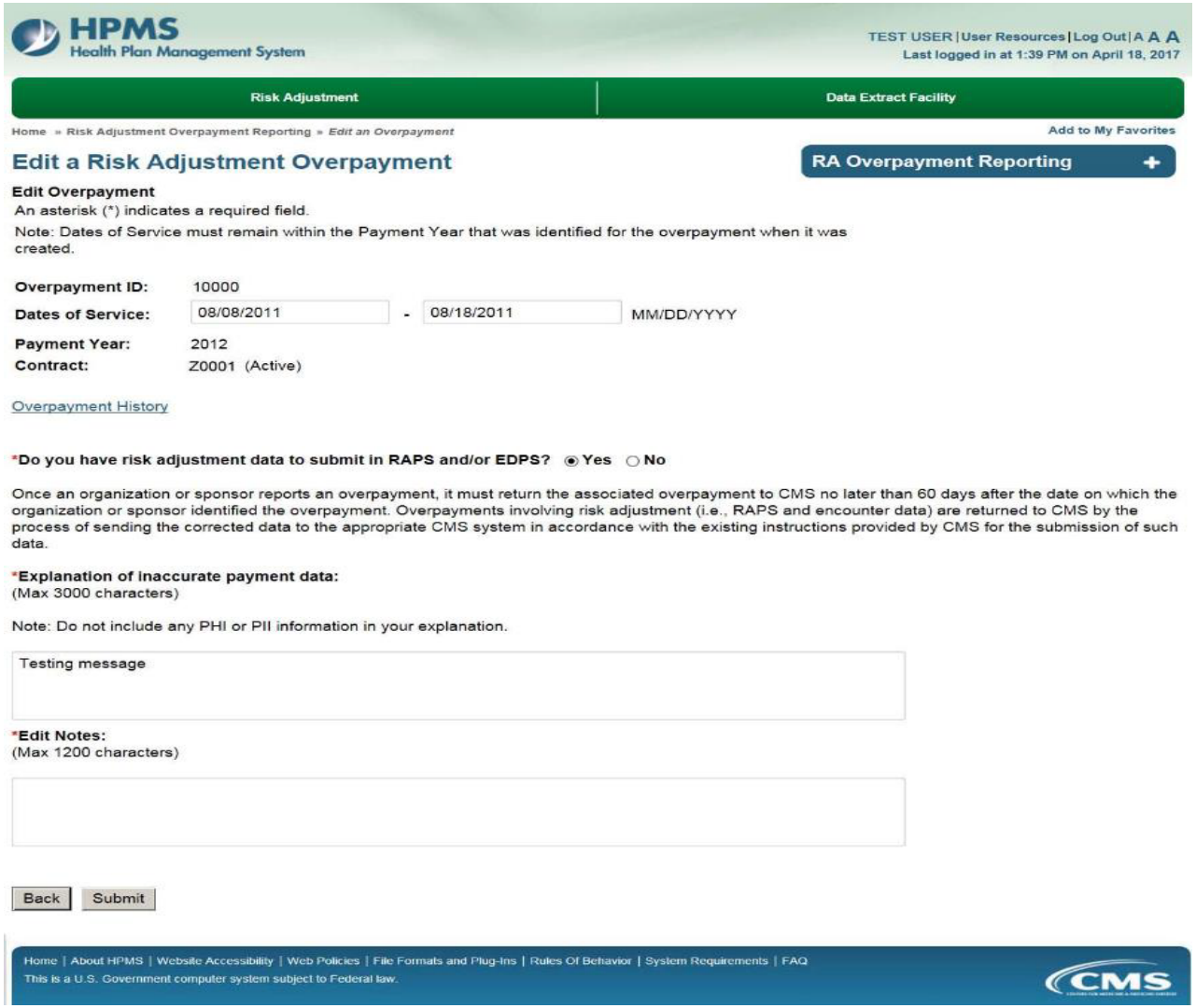
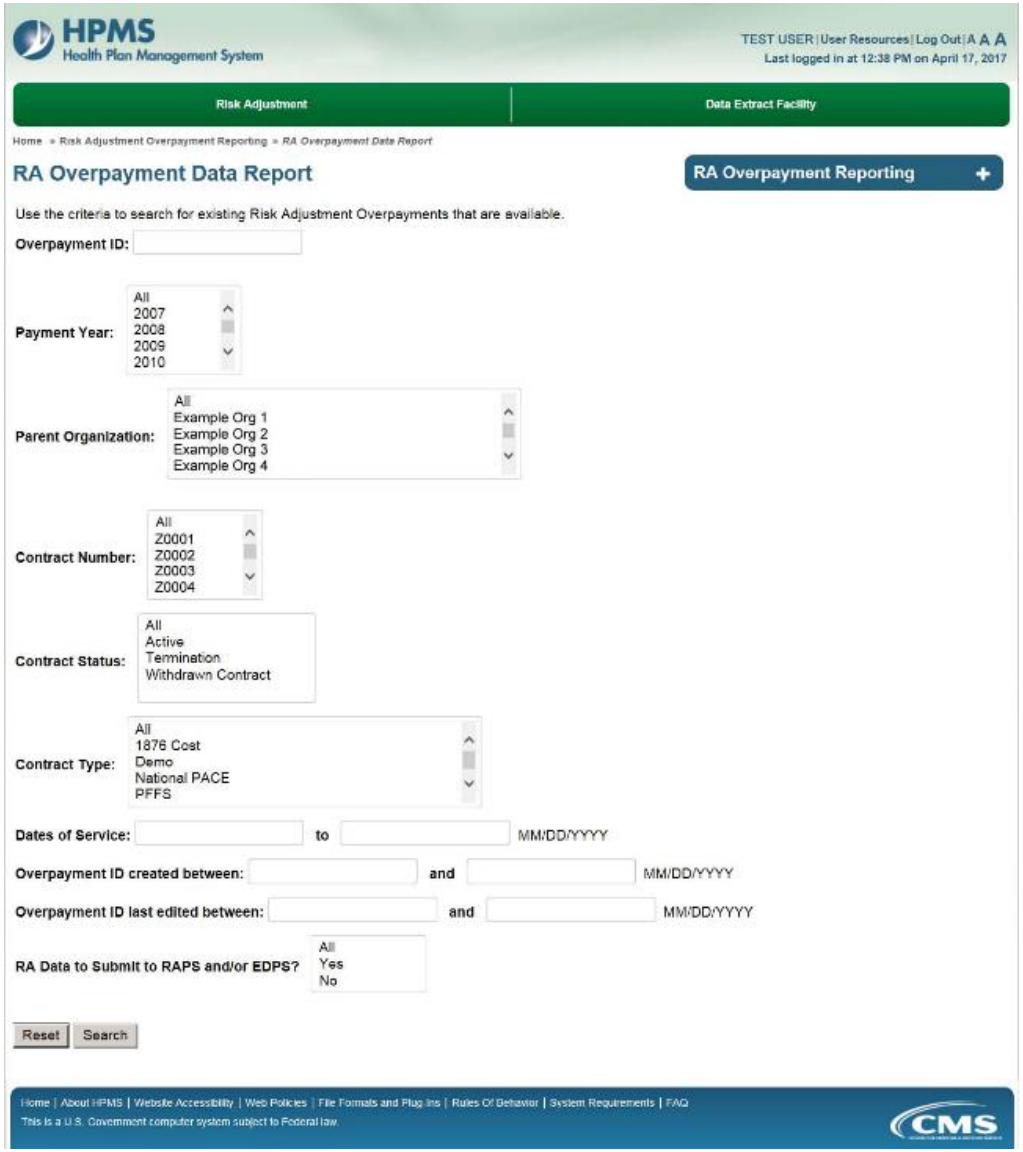
10016	2012	Z0002	08/08/2011 - 08/18/2011	12/05/2016 11:53 AM	TEST USER	12/05/2016 11:54 AM	TEST USER

RAOR – Module *(continued)*



RAOR – Module *(continued)*

RAOR – Module *(continued)*



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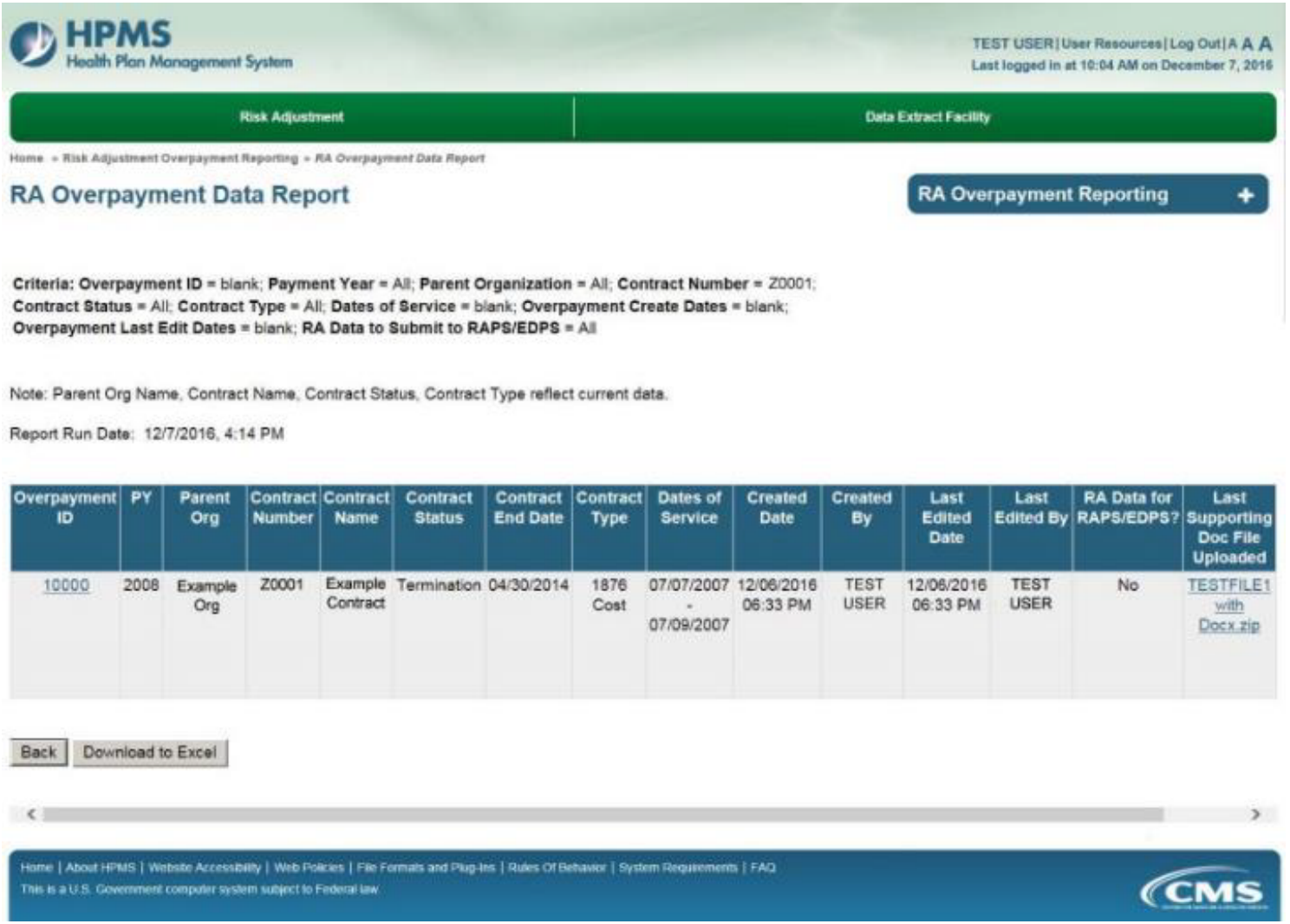

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Risk Adjustment | Data Extract Facility

Home » Risk Adjustment Overpayment Reporting » RA Overpayment Data Report

RA Overpayment Data Report

RA Overpayment Reporting +

Criteria: Overpayment ID = blank; **Payment Year** = All; **Parent Organization** = All; **Contract Number** = Z0001; **Contract Status** = All; **Contract Type** = All; **Dates of Service** = blank; **Overpayment Create Dates** = blank; **Overpayment Last Edit Dates** = blank; **RA Data to Submit to RAPS/EDPS** = All

Note: Parent Org Name, Contract Name, Contract Status, Contract Type reflect current data.

Report Run Date: 12/7/2016, 4:14 PM

Overpayment ID	PY	Parent Org	Contract Number	Contract Name	Contract Status	Contract End Date	Contract Type	Dates of Service	Created Date	Created By	Last Edited Date	Last Edited By	RA Data for RAPS/EDPS?	Last Supporting Doc File Uploaded
10000	2008	Example Org	Z0001	Example Contract	Termination	04/30/2014	1876 Cost	07/07/2007 - 07/09/2007	12/06/2016 06:33 PM	TEST USER	12/06/2016 06:33 PM	TEST USER	No	TESTFILE1 with Docx.zip

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Questions & Answers

EDFES Acknowledgement Reports

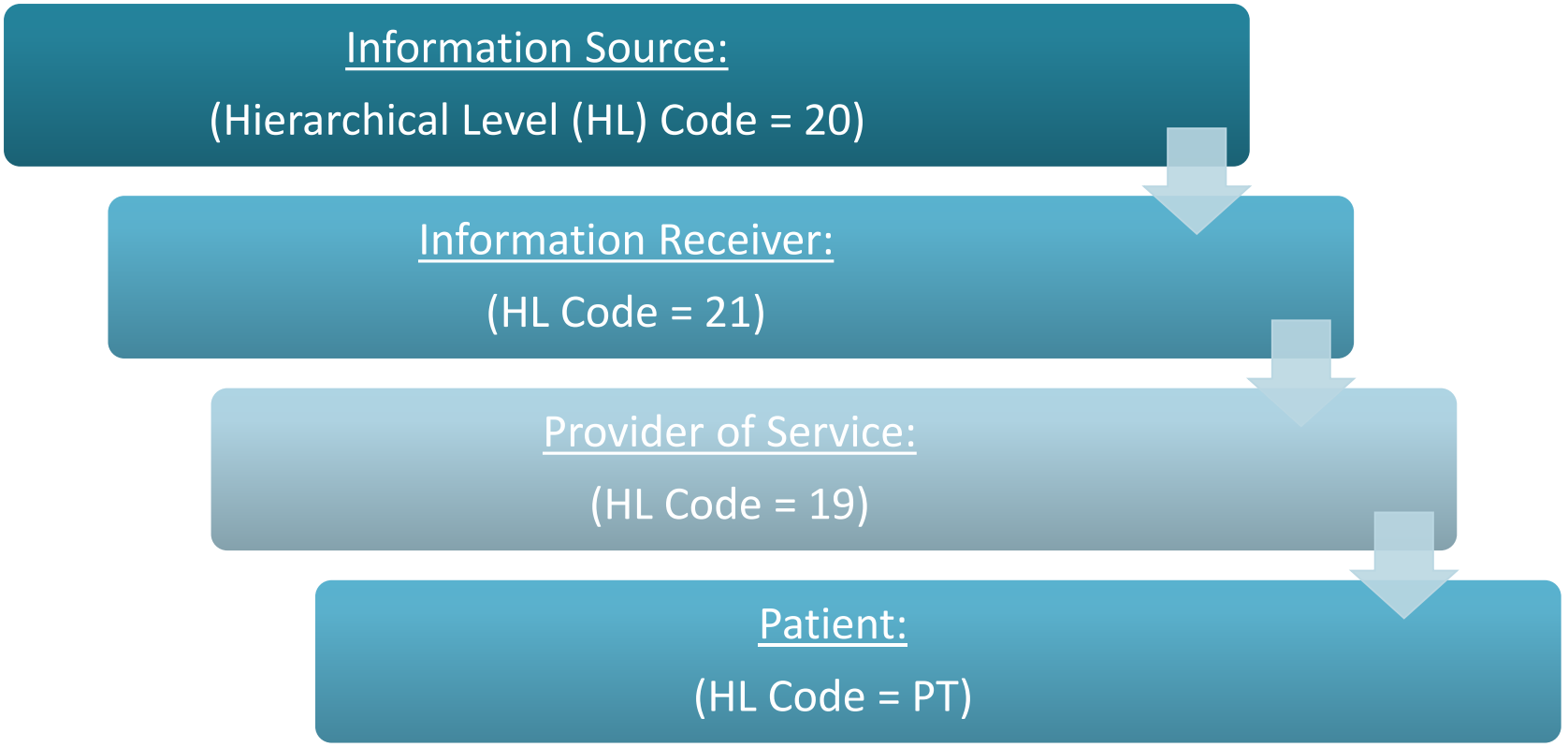
277CA Acknowledgement Report

- The 277CA Acknowledgement Report:
  - Provides rejection responses based on edit failures detected by CEM
  - Assigns an ICN for each ***accepted*** encounter

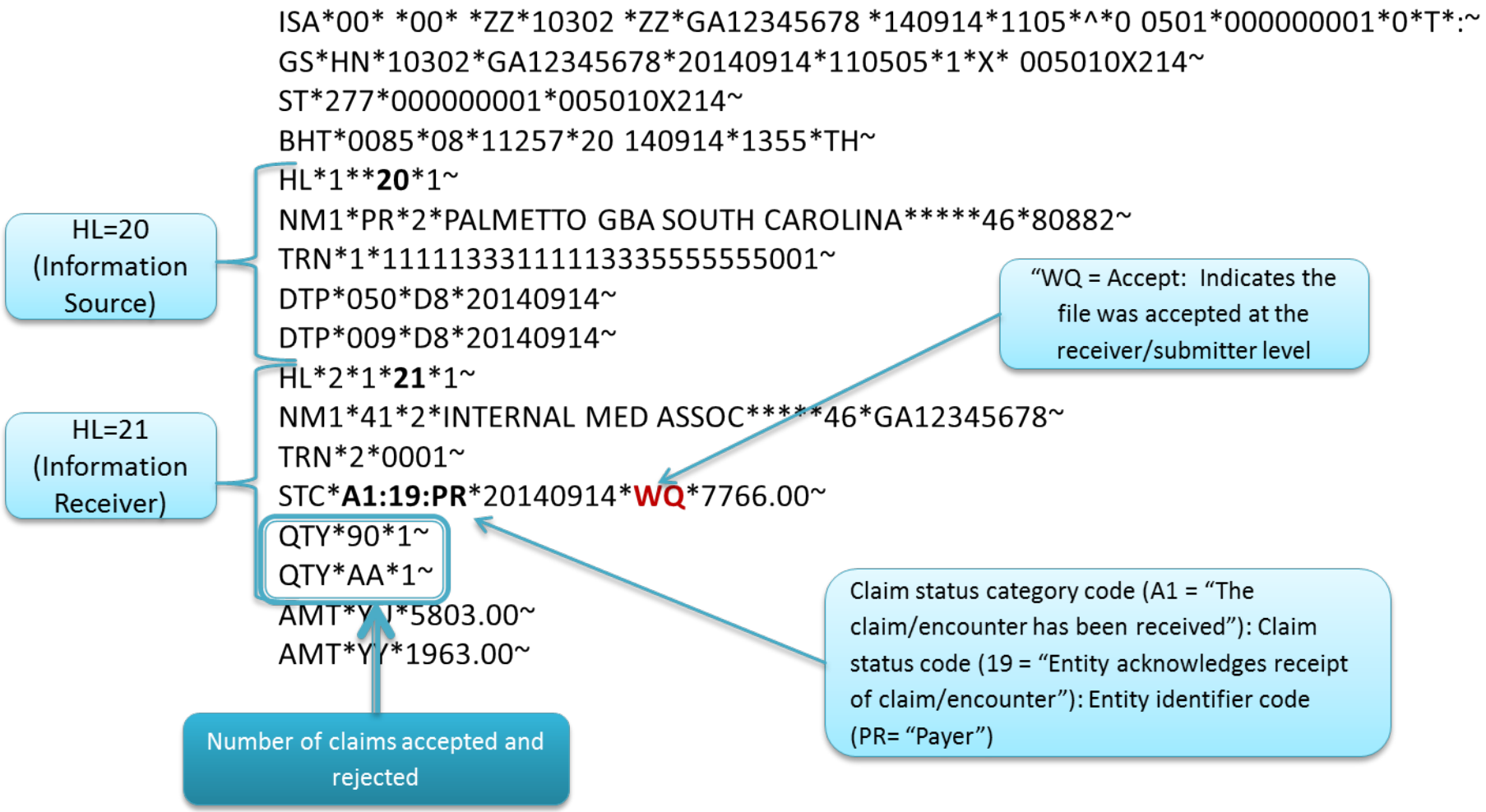
Note: Rejected encounters must be corrected and resubmitted in order to receive an ICN.

277CA Acknowledgement Report Structure

- The 277CA Acknowledgement is divided into hierarchical levels



Interpreting the 277CA Acknowledgement Report - Accepted



Interpreting the 277CA Acknowledgement Report – REF Segment ICN

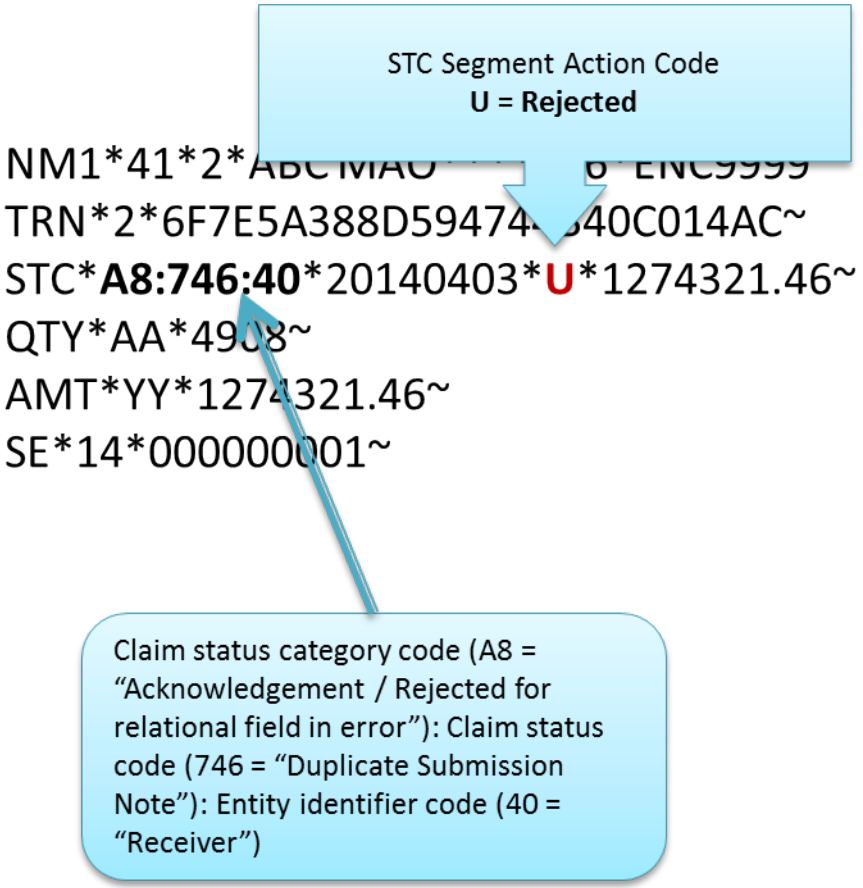
HL=PT (Patient – Claim Level

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

Interpreting the 277CA Acknowledgement Report – Rejected



277CA Acknowledgement Report – Error Resolution

Step 1

- Locate the error(s) on the 277CA Acknowledgement Report

Step 2

- Access the EDFES Edit Code Lookup on the CSSC Operations website

Step 3

- Select the “Claim Status Codes” option in the Lookup tool listing

Step 4

- Locate the QTY segment on the 277 CA Acknowledgement Report and determine total rejected quantity

  Example: *QTY*AA*4908 (AA = Unacknowledged Quantity)*

277CA Acknowledgement Report – Error Resolution *(continued)*

Step 5

- Locate the "Entity identifier code" in the NM1 segment to identify which entity has an error

  Example: *NM1*__41__*2*ABC MAO*****46*ENC9999~* (*41 = Billing Service)*

Step 6

- Correct the error

Step 7

- Resubmit the corrected encounter(s)

***Note**: MAOs are encouraged to coordinate with their vendors to assist with translating the 277CA.*

EDPS Processing Status Reports

Report Layout

- MAO-001 and MAO-002 reports are delivered to submitters in two layouts - flat file and formatted.
- MAO-004 reports are delivered to submitters in a flat file layout.
- Flat file reports are categorized by:
  - Header record
  - Detail record
  - Trailer record

MAO-001 and MAO-002 Reports

- The MAO-001 Encounter Data Duplicates Report provides information exclusively for rejected encounters and service lines that receive:
  - Error Code 98300 – Exact Inpatient Duplicate Encounter
  - Error Code 98315 – Linked Chart Review Duplicate
  - Error Code 98320 – Chart Review Duplicate
  - Error Code 98325 – Service Line(s) Duplicated
- 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 and descriptions.

MAO-001 Duplicates Report – Flat File Layout

Header Record

There is only one header per record per file.

Position(s)	Item	Notes	Length	Format
1	Record Type	0=Header	1	Numeric, no commas and/or decimals
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "**MAO-001**"	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-18	Report Date	Date that the report was created by EDPSC	8	Numeric, format CCYYMDD
19	Delimiter		1	Uses the * character value
20-27	Transaction Date		8	Numeric, format CCYYMMDD
28	Delimiter		1	Uses the * character value
29-67	Report Description	Value is "**Encounter Data Duplicates Report**"	39	Alpha Numeric, Left Justify, Blank Fill
68	Delimiter		1	Uses the * character value
69-73	Filler		5	Blank – (Removal of Contract ID)
74	Delimiter		1	Uses the * character value
75-104	Submission Interchange Number	Interchange Sender ID (ISA06) + Interchange Control Number (ISA13) + Interchange Date (ISA09)	30	Alpha Numeric
105	Delimiter		1	Uses the * character value
106-108	Record Type	Value is "**INS**", "**PRO**", "**DME**"	3	Alpha Numeric
109	Delimiter		1	Uses the * character value
110-113	Submission File Type	Value is "**TEST**" or "**PROD**"	4	Alpha Numeric
114	Delimiter		1	Uses the * character value
115-200	Filler		**86**	Spaces

MAO-001 Duplicates Report – Flat File Layout *(continued)*

Detail Record

There may be multiple detail records per file.

Position(s)	Item	Notes	Length	Format
1	Record Type	1=Detail	1	Numeric, no commas and/or decimals
2	Delimiter		1	Uses the " character value
3-9	Report ID	Value is "**MAO-001**"	7	Alpha Numeric
10	Delimiter		1	Uses the " character value
11-15	Medicare Advantage Contract ID	Medicare Contract ID assigned to the MA Plan	5	Alpha Numeric
16	Delimiter		1	Uses the " character value
17-36	Plan ID (CCN)	Plan Internal Control Number	20	Alpha Numeric
37	Delimiter		1	Uses the " character value
38-56	Encounter ICN	Internal Control Number. In encounter data, only 13 spaces represent the ICN; however, additional spaces allow for other use.	19	Alpha Numeric
57	Delimiter		1	Uses the " character value
58-60	Encounter Line Number	Internal line number generated by EDPS.	3	Numeric, no commas and/or decimals
61	Delimiter		1	Uses the " character value
62-81	Duplicate Plan Encounter ID (CCN)	Duplicate Plan ID stored in EODS	20	Alpha Numeric
82	Delimiter		1	Uses the " character value
83-101	Duplicate Encounter ICN	Duplicate Encounter ICN identified in EODS. In encounter data, only 13 spaces represent the ICN. Additional spaces allow for other use.	19	Alpha Numeric
102	Delimiter		1	Uses the " character value
103-105	Duplicate Encounter Line Number	Internal line number generated by EDPS	3	Numeric, no commas and/or decimals
106	Delimiter		1	Uses the " character value
107-118	Beneficiary HICN	Beneficiary Health Insurance Claim Number	12	Alpha Number
119	Delimiter		1	Uses the " character value
120-127	Date of Service		8	Numeric, format CCYYMMDD
128	Delimiter		1	Uses the " character value
129-133	Error Code	Error Code	5	Alpha Numeric
134	**Delimiter**		**1**	**Uses the * character value**
135-200	**Filler**		**66**	**Spaces**

MAO-001 Duplicates Report – Flat File Layout *(continued)*

Trailer (Totals) Record

There is only one trailer per record file.

Position(s)	Item	Notes	Length	Format
1	Record Type	9=Trailer	1	Numeric, no commas and/or decimals
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "**MAO-001**	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-18	Total Number of Duplicate Encounter Lines Rejected		8	Numeric, no commas and/or decimals
19	Delimiter		1	Uses the * character value
20-27	Total Number of Encounter Lines Submitted		8	Numeric, no commas and/or decimals
28	Delimiter		1	Uses the * character value
29-36	Total Number of Encounter Records Submitted		8	Numeric, no commas and/or decimals
37	Delimiter		1	Uses the * character value
38-200	Filler		**163**	Numeric, no commas and/or decimals

MAO-001 Duplicates Report – Formatted Layout

Encounter Data Duplicates Report
Report Run Date 04/07/2017 06:31AM
Medicare Advantage Contract ID: XXXXX
PROD

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Submission Interchange Number: XXXXXXXXXXXXXXX20170404
Report Date: 04/07/2017
Transaction Date: 04/06/2017

Report ID: MAO-001

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	Error Code
PRO	111111111101	1111111111111	001	222222222221	2222222222211	001	XXXXXXXXXX	DD/MM/YYYY	98325
PRO	111111111102	1111111111112	001	222222222222	2222222222212	001	XXXXXXXXXX	DD/MM/YYYY	98325
PRO	111111111103	1111111111113	001	222222222223	2222222222213	001	XXXXXXXXXX	DD/MM/YYYY	98325
PRO	111111111104	1111111111114	001	222222222224	2222222222214	001	XXXXXXXXXX	DD/MM/YYYY	98325
			002	222222222224	2222222222214	002	XXXXXXXXXX	DD/MM/YYYY	98325
PRO	111111111105	1111111111115	001	222222222225	2222222222215	001	XXXXXXXXXX	DD/MM/YYYY	98325
PRO	111111111106	1111111111116	001	222222222226	2222222222216	001	XXXXXXXXXX	DD/MM/YYYY	98325

TOTALS:

Total Number of Duplicate Encounter Lines Rejected: 7
Total Number of Encounter Lines Submitted: 6769
Total Number of Encounter Records Submitted: 4998

MAO-002 Processing Status Report – Flat File Layout

HEADER RECORD		There is only one header record per file.		
Position(s)	**Item**	**Notes**	**Length**	**Format**
1	Record Type	0=Header	1	Numeric, no commas and/or decimals.
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is **"MAO-002"**	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-18	Report Date	Date that the report was created by EDPSC.	8	Numeric, format CCYYMMDD
19	Delimiter		1	Uses the * character value
20-27	Transaction Date		8	Numeric, format CCYYMMDD
28	Delimiter		1	Uses the * character value
29-67	Report Description	Value is **"Encounter Data Processing Status Report"**	39	Alpha Numeric
68	Delimiter		1	Uses the * character value
69-73	Filler		5	Blank – (Removal of Contract ID)
74	Delimiter		1	Uses the * character value
75-104	Submission Interchange Number	Interchange Sender ID (ISA06) + Interchange Control Number (ISA13) + Interchange Date (ISA09)	30	Alpha Numeric
105	Delimiter		1	Uses the * character value
106-108	Record Type	Value is **"INS", "PRO", "DME"**	3	Alpha Numeric
109	Delimiter		1	Uses the * character value
110-113	Submission File Type	Value is **"TEST"** or **"PROD"**	4	Alpha Numeric
114	Delimiter		1	Uses the * character value
115-160	Filler		46	Spaces

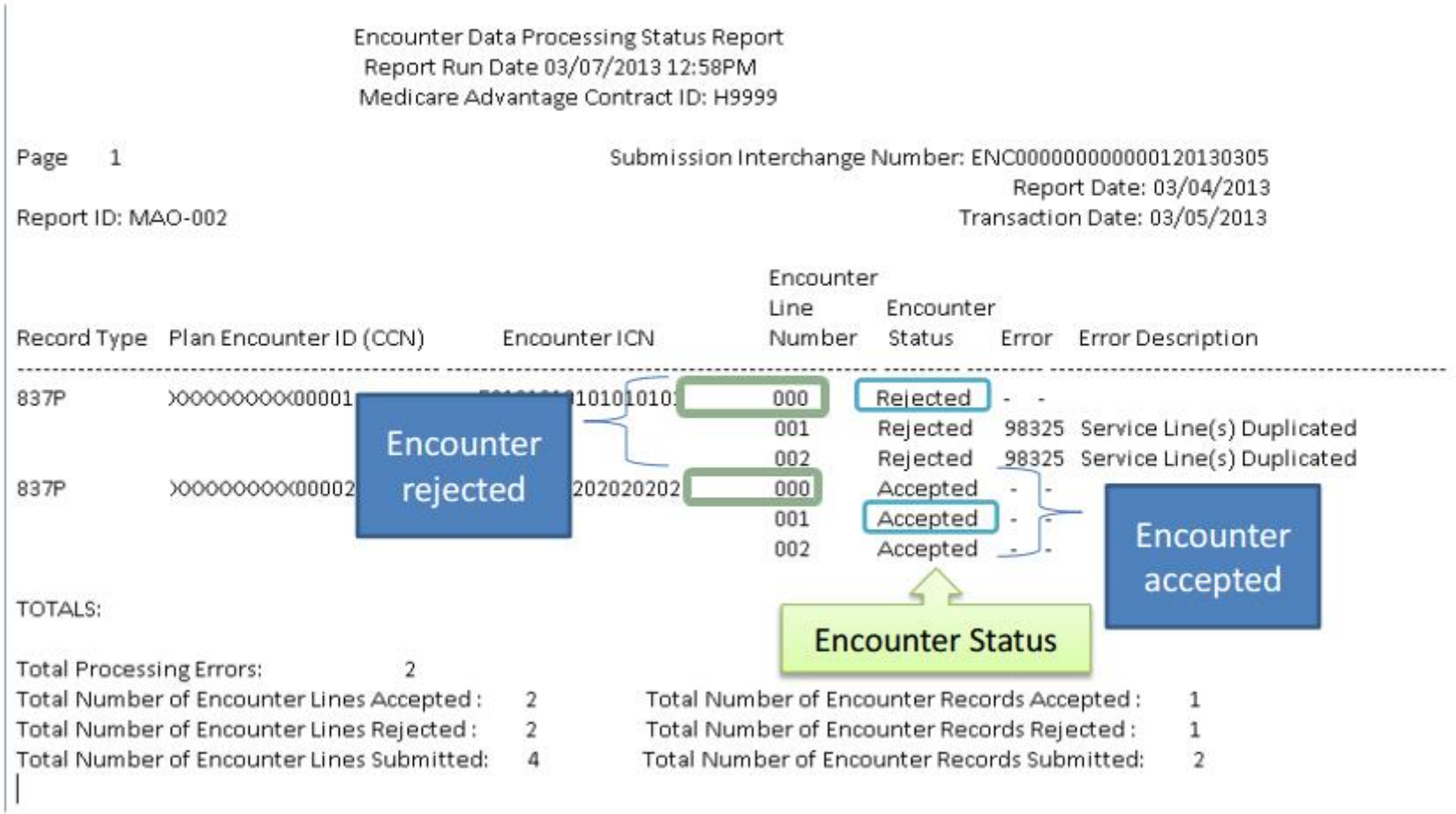
MAO-002 Processing Status Report – Flat File Layout *(continued)*

DETAIL RECORD		There may be multiple detail records per encounter line dependent upon the number of errors on a line. Up to 10 errors will be reported for an encounter line.		
Position(s)	**Item**	**Notes**	**Length**	**Format**
1	Record Type	1=Detail	1	Numeric, no commas and/or decimals.
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "**MAO-002**"	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-15	Medicare Advantage Contract ID	Medicare Contract ID assigned to the MA Plan	5	Alpha Numeric
16	Delimiter		1	Uses the * character value
17-54	Plan ID (CCN)	Plan internal encounter control number.	38	Alpha Numeric
55	Delimiter		1	Uses the * character value
56-99	Encounter ICN	Internal Control Number. In encounter data, only 13 spaces represent the ICN however 44 spaces are coded to allow enhancement of the ICN.	44	Alpha Numeric
100	Delimiter		1	Uses the * character value
101-103	Encounter Line Number	Internal line number generated by EDPS. For any given ICN (claim document) the line numbers will start from "000" representing the claim level, the first encounter line will start from "001" and increment by 1 for every additional line.	3	Numeric, no commas and/or decimals.
104	Delimiter		1	Uses the * character value
105-112	Encounter Status	Value is "**Accepted**" or "**Rejected**"	8	Alpha Numeric
113	Delimiter		1	Uses the * character value
114-118	Error Code		5	Alpha Numeric
119	Delimiter		1	Uses the * character value
120-159	Error Description Description	associated with error code identified.	40	Alpha Numeric
160	Delimiter		1	Uses the * character value

MAO-002 Processing Status Report – Flat File Layout *(continued)*

TRAILER (TOTALS) RECORD				
Position(s)	**Item**	**Notes**	**Length**	**Format**
1	Record Type	9=Trailer	1	Numeric, no commas and/or decimals.
2	Delimiter		1	Uses the *character value
3-9	Report ID	Value is "MAO-002"	7	Alpha Numeric
10	Delimiter		1	Uses the *character value
11-18	Total Number of Processing Errors		8	Numeric, no commas and/or decimals.
19	Delimiter		1	Uses the *character value
20-27	Total Number of Encounter Lines Accepted		8	Numeric, no commas and/or decimals.
28	Delimiter		1	Uses the *character value
29-36	Total Number of Encounter Lines Rejected		8	Numeric, no commas and/or decimals.
37	Delimiter		1	Uses the *character value
38-45	Total Number of Encounter Lines Submitted		8	Numeric, no commas and/or decimals.
46	Delimiter		1	Uses the *character value
47-54	Total Number of Encounter Records Accepted		8	Numeric, no commas and/or decimals.
55	Delimiter		1	Uses the *character value
56-63	Total Number of Encounter Records Rejected		8	Numeric, no commas and/or decimals.
64	Delimiter		1	Uses the *character value
65-72	Total Number of Encounter Records Submitted		8	Total Number of Encounter Records Submitted
73	Delimiter		1	Uses the *character value
74-160	Filler		87	Spaces

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

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Submission Interchange Number: ENC00000000000120130305
Report Date: 03/04/2013
Transaction Date: 03/05/2013

Report ID: MAO-002

Record Type	Plan Encounter ID (CCN)	Encounter ICN	Encounter Line Number	Encounter Status	Error	Error Description
837P	XXXXXXXXX00001	10101010	000	Rejected	-	-
			001	Rejected	98325	Service Line(s) Duplicated
			002	Rejected	98325	Service Line(s) Duplicated
837P	XXXXXXXXX00002	202020202	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 Lines Rejected : 2
Total Number of Encounter Lines Submitted: 4

Total Number of Encounter Records Accepted : 1
Total Number of Encounter Records Rejected : 1
Total Number of Encounter Records Submitted: 2

Questions & Answers

Closing Remarks

Commonly Used Acronyms

Acronym	Definition
BHT	Beginning Hierarchical Transaction
CEM	Common Edits and Enhancements Module
CFR	Code of Federal Regulations
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
EDS	Encounter Data System
EODS	Encounter Operational Data Store
FERAS	Front-End Risk Adjustment System
FFS	Fee-for-Service

Commonly Used Acronyms *(continued)*

Acronym	Definition
FTP	File Transfer Protocol
HCC	Hierarchical Condition Category
HH	Home Health
HIPPS	Health Insurance Prospective Payment System
ICN	Internal Control Number
MAOs	Medicare Advantage Organizations
MARx	Medicare Advantage Prescription Drug System
MMR	Monthly Membership Report
MOR	Monthly Output Report
PY	Payment Year
RAOR	Risk Adjustment Overpayment Reporting
RAPS	Risk Adjustment Processing System
RAS	Risk Adjustment System
SNF	Skilled Nursing Facility
TPS	Third Party Submitter

Resources

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

Resources *(continued)*

Resource	Link
RAPS Error Code Listing and RAPS-FERAS Error Code Lookup	http://www.csscoperations.com/internet/cssc3.nsf/docsCat/CSSC~CSSC%20Operations~Risk%20Adjustment%20Processing%20System~Edits?open&expand=1&navmenu=Risk^Adjustment^Processing^System||
CMS 5010 Edit Spreadsheet	https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/
EDFES Edit Code Lookup	https://apps.csscoperations.com/errorcode/EDFS_ErrorCodeLookup
EDPS Error Code Look-up Tool	http://www.csscoperations.com/internet/cssc3.nsf/DocsCat/CSSC~CSSC%20Operations~Medicare%20Encounter%20Data~Edits~97JL942432?open&navmenu=Medicare^Encounter^Data|||
Request Health Plan Management System (HPMS) Access	https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/HPMS/UserIDProcess.html

Evaluation

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

We are interested in learning how we can make the User Groups better for you. As part of this evaluation, we solicit Risk Adjustment topic(s) of interest for future User Groups. Topics can be technical or policy-related, related to the models or data submission, updates on various topics or trainings.

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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