Encounter Data Submission and Processing Report Resource Guides

Health Plan Management System (HPMS) Reports – Data Exchange Reports

Reports Overview

The Health Plan Management System (HPMS) is a web-enabled information system that serves a critical role supporting the ongoing operations of the Medicare Advantage (MA) and Part D programs. HPMS facilitates numerous data collection and reporting activities mandated for MAOs and other entities by legislation. HPMS provides support for the ongoing operations of the plan enrollment and plan compliance business functions as well as for longer-term strategic planning and program analysis.

The HPMS reports produced by the Medicare Plan Payment Group (MPPG) are operational reports and are intended to provide MAOs and other entities with a higher-level overview of encounter data quality across claim types and submission periods.

This job aid provides information about Data Exchange Reports, one of the three encounter data reports available through HPMS:
- ❖ Encounter Data Report Cards
- ❖ Submission Performance Reports
- ❖ **Data Exchange Reports**

All of the above named reports provide information about an MAO's and other entities' performance relative to benchmarks. Each may be used to identify target areas for improvement in data quality and may ultimately assist with payment accuracy.

Health Plan Management System (HPMS) Reports – Data Exchange Reports

Report Description

Data Exchange Reports inform MAOs and other entities about specific, discernable issues with their submitted encounter data records (EDRs). Using information associated with submitted encounter data records as well as Healthcare Effectiveness Data and Information Set (HEDIS) data, thirteen specific data integrity measures across three key areas are created. The measures provide indications of:

Accuracy of reporting for specific data fields

- Tabulation of invalid content in seven critical encounter fields with a through date of service in a designated year. The fields reported are: inpatient discharge status code, inpatient admission date, procedure perform date, all occurrences of procedure date, service through date, billing and rendering NPI.

HEDIS report comparison

- Identification and tabulation of beneficiaries reported in the numerator of four selected HEDIS measures that lack an encounter record for an expected numerator-qualifying service with the reference calendar-year service through date. The data reported relate to Breast Cancer screening, Colon Cancer screening, Medication Reconciliation Post Discharge and Diabetes Eye Exam.

Overall EDR submission completeness

- Beneficiaries enrolled in the contract with full year enrollment, but for whom no encounter data record with a service through date in that calendar year was submitted.
- Beneficiaries with chart review records with January through December through dates but no submitted encounters in the calendar year.

Data Exchange Reports will be prepared and transmitted to MAOs and other entities on a semi-annual basis.

![CMS logo] **Health Plan Management System (HPMS) Reports – Data Exchange Reports**

Report Screenshot

The screenshots below illustrate the layout of two of the measures in the Data Exchange report.

Parent Organization: ABC Inc.		
Contract ID: HXXXX		
Contract Name: XYZ Inc.		
Table 1: Discharge Status Code Format (Inpatient)		
Claim Control Number	**Claim Submission Date**	**Error Category**
1234567890000	12/09/2019	Invalid discharge status code (inpatient)
0000123456789	12/16/2019	Invalid discharge status code (inpatient)

Parent Organization: ABC Inc.			
Contract ID: HXXXX			
Contract Name: XYZ Inc.			
Table 12. No Submitted Encounter Data Records			
Beneficiary Identifier	**Error Category**	**Chart Review Claim Control Number**	**Chart Review Claim Submission Date**
555555555A	No EDRs submitted	NA	NA
000009999A	No EDRs submitted	1111111	11/16/2019
000009999A	No EDRs submitted	1111113	11/16/2019

Report Screenshot

The screenshots below illustrate the layout of Contract Summary data in the Data Exchange report.

Exhibit A. Contract HXXXX: Summary

Category	Sheet Name	Total Records (Duplicated Count)	Total Records With Anomalous Information or Encounter Record Missing (Duplicated Count)	Percentage of Records With Anomalous Information or Encounter Record Missing
Submitted Encounters with Jan-Dec2018 Service Through Dates				
Discharge Status Code Format (Inpatient)	Discharge Status Code	2,993,575	34	0.0%
Admission Date Sequence (Inpatient)	Admission Date	376,154	18,748	5.0%
Procedure Perform Date Sequence	Procedure Perform Date	104,606	5,615	5.4%
Procedure Date 1-6 Sequence	Procedure Date	106,797	4,063	3.8%
Service Through Date Sequence	Service Through Date	28,174,161	21	0.0%
Unknown Billing NPI	Billing NPI	35,788,988	22,005	0.1%
Unknown Rendering NPI	Rendering NPI	16,909,119	1,486	0.0%
Total		84,453,400	51,973	0.1%

Exhibit B. Contract HXXXX: Possible Failure to Submit Encounter Records

Category	Sheet Name	Total Beneficiaries Reviewed	Number of Beneficiaries with No Qualifying Encounter	Percent of Beneficiaries
2017 HEDIS Performance				
HEDIS Breast Cancer Screening Numerator	HEDIS BCS	87,808	44,605	50.8%
HEDIS Colon Cancer Screening Numerator	HEDIS COL	631	264	41.9%
HEDIS Medication Reconciliation Post Discharge Numerator	HEDIS MRP	410	160	38.9%
HEDIS Diabetes Eye Exam Numerator	HEDIS CDCEYE	509	153	30.0%
No Encounters for Full-year 2018 beneficiaries				
No Submitted Encounters with Jan-Dec2018 Service Through Dates	No encounter data records	590,758	11,287	1.9%
Chart Review Records with Jan-Dec2018 Through Dates but No Submitted Encounters	No encounter data records	24,155	79	0.3%

Health Plan Management System (HPMS) Reports – Data Exchange Reports

Accessing the Report

Like the Submission Performance Reports and Encounter Data Report Cards, each MAO or other entity's contract-specific information and technical notes with detailed specifications on the data presented are available via link on the HPMS portal:

HPMS Home Page > Risk Adjustment > Encounter Data > Data Exchange Report

Each Data Exchange Report will contain one tab for each performed data analyses and two additional tabs labeled README and TECHNICAL NOTES. Data Exchange Reports will be produced for all contracts, including those with no errors identified across all analyses. The analysis-specific tabs will only be present in the Data Exchange Report when issues are identified for the particular analysis.

Report Resources

October 17, 2019 Medicare Advantage Encounter Data – Announcement of Data Exchange Reports