Encounter Data System User Group

December 15, 2011





Agenda

- CMS Update
- Institutional Business Cases
- Institutional Test Cases
- Reports Release schedule
- Reports Final Layout
- Submission Tips
- User Group Questions and Responses
- Resources
- Closing Remarks





Introduction

The purpose of this session is to provide Medicare Advantage Organizations (MAOs) and other entities with information on policy and operational guidance in order to continue testing and implementation of the Encounter Data System (EDS) by January 2012.





MAOs and Other Entities

- CMS requires the following types of organizations to submit encounter data:
 - Medicare Advantage (MA) Plans
 - Medicare Advantage-Prescription Drug (MA-PD) Plans
 - Health Maintenance Organizations (HMOs)
 - Special Needs Plans (SNPs)
 - Local Preferred Provider Organizations (PPOs)
 - Regional PPOs
 - Employer Group Health Plans
 - Programs of All-Inclusive Care for the Elderly (PACE) Plans
 - Cost Plans (1876 Cost HMOs/CMPs and 1833 HCPPs)
 - Medical Savings Account (MSA)
 - Private Fee-for-Service Plans (PFFS)
 - Religious Fraternal Benefit Plans (RFBs)
 - Provider Sponsored Organizations (PSO)





Session Guidelines

 This is a one (1) hour Encounter Data User Group for MAOs and other entities.

 If time allows, we will respond to questions.





CMS Updates





CIVIS

CENTERS for MEDICARE & MEDICAID SERVICES

5010 Update

- On 11/17/11, CMS released a memo indicating that it would not initiate enforcement actions with respect to the 5010 format until 3/31/12.
- CMS will also defer actions for noncompliance with encounter data requirements, with the exceptions of frequency of submission and system certifications, until 3/31/12.
- MAOs and other entities must submit encounter data, for dates of service from 1/1/12 onward, in the 5010 format.
- Once the EDS goes live on January 3, 2012, MAOs and other entities may submit data as often as daily and should not delay in the submission of data.
- CMS is currently working on options for submitting data that comes to MAOs and other entities in the 4010 format in accordance with encounter data system requirements.



Compliance

 Certified MAOs and other entities must submit encounters based on the following frequency guidelines:

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





Compliance

- CMS certification requirements will be based on the following rolling schedule:
 - Professional Certification deadline: March 1, 2012
 - Institutional Certification deadline: April 2, 2012
 - DME Certification deadline: July 2, 2012





Timeline for Certification & Implementation

- End-to-end testing begins January 4, 2012
- End-to-end testing will take place in the following sequence:
 - Professional encounters
 - Institutional encounters
 - DME encounters
- Rolling Certification:
 - Once MAOs and other entities have received certification, production data can be submitted
 - MAOs and other entities must submit production data for dates of service beginning January 1, 2012
 - Reminder: Dates of service for in-patient hospital services are based on "through dates."



EDPS Testing and Certification Timeline

	Testing Begins	EDPS Testing	Deadline for Resubmission of Corrected Encounters	Testing Ends/Deadline for Certification
Professional Encounters	1/4/12	Test cases plus 100 additional encounters	2/1/12	3/1/12
Institutional Encounters	2/1/12	Test cases plus 100 additional encounters	3/1/12	4/2/12
DME Encounters	5/7/12	Test cases plus 50 additional encounters	6/1/12	7/2/12





End-to-End Testing

- Plans must send CMS test cases, receive reports, and work through errors before they will be certified.
- Plans must hold institutional encounters until they have been certified to submit institutional encounters. The institutional certification process begins 2/1/12.
- Plans receive Encounter Data Processing Status Report, which contains information on accepted and rejected encounters.
- During end-to-end testing, plans will provide feedback to
 CMS regarding the process and the report.





Certification

- MAOs and other entities will receive three system certifications – one for professional, one for institutional, and one for DME.
- For certification, MAOs and other entities must achieve a pass rate of 95% of their test data.
- Once this is achieved, a certification notice will be sent to the submitter for each plan within two business days.
- MAOs and other entities begin submitting production data, for dates of service beginning January 1, 2012 forward, as soon as certification notice is received.



New Contracts

	Testing Begins	EDPS Testing	Deadline for Resubmission of Corrected Encounters	Testing Ends/Deadline for Certification
Professional Encounters	2/6/12	Test cases plus 100 additional encounters	3/1/12	4/2/12
Institutional Encounters	3/1/12	Test cases plus 100 additional encounters	4/2/12	5/1/12
DME Encounters	5/7/12	Test cases plus 50 additional encounters	6/1/12	7/2/12

^{*} This applies to new contracts who are not associated with parent organizations who currently submit risk adjustment data





Atypical Providers

- The requirement to submit atypical provider encounters has been delayed.
- Atypical providers are providers who are not eligible for an NPI.
- CMS will work with the industry on submission requirements for these encounters.
- MAOs and other entities should not delay in the submission of atypical provider encounters if they have enough information to submit in the 5010 format.



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Test Cases – Institutional





Test Cases - Institutional

- In order to assist MAOs and other entities to prepare for end-to-end testing, CMS has developed test case specifications.
- MAOs and other entities must use the test cases to submit end-to-end testing files.
- Each test case contains the following:
 - Test Case Purpose
 - Prerequisite Conditions
 - Test Procedures
 - Assumptions and Constraints





Test Cases - Institutional

- A total of 33 test specifications will be required.
 Examples include:
 - Beneficiary Eligibility
 - TOB Data Validation Submissions
 - Processing
 - Pricers





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Business Cases-Institutional





Business Cases - Institutional

- In order to assist MAOs and other entities to submit Institutional encounter data, CMS has developed business cases.
- The business cases provide sample data, which may be used as guidance to populate an encounter.
- MAOs and other entities must submit valid data.



Business Cases – Institutional (cont'd)

- The 837-I Companion Guide provides the following business cases:
 - Standard Institutional Encounter
 - Capitated Institutional Encounter
 - Chart Review Institutional Encounter No Linked ICN
 - Chart Review Institutional Encounter –
 Linked ICN





Business Cases – Institutional (cont'd)

- Complete Replacement Institutional Encounter
- Complete Deletion Institutional Encounter
- Atypical Provider Institutional Encounter
- True Coordination of Benefits Institutional Encounter
- Bundled Institutional Encounter
- * Paper Claim Generated Encounter Business Case is currently under development.





Thursday, December 15, 2011 4:00 P.M., ET

Reports Release Schedule





Reports Release Schedule

- Initial Release January 3, 2012
 - MAO-002: Encounter Data Processing Status Report
- Second Release February 2012
 - MAO-001: Encounter Data Duplicates Report
- Future Release
 - MAO-003: Pricing Status Report
 - MAO-005: Encounter Summary Report
 - MAO-006: Edit Disposition Summary Report
 - MAO-007: Encounter Detail Report
 - MAO-004: Encounter Data Risk Filter Report



MAO-002: Encounter Data Processing Status Report Final Layout





MAO002 - Encounter Data Status Report

- Returned after each transaction
- Reports the disposition of each encounter
 - Accepted
 - Rejected
 - Informational
- Illustrates 0, 1, or more errors per encounter line





Submission Tips





Submission Tips

- Loop 2010BA, NM109 HIC number must be valid
- Loop 2320, AMT02 MAO paid amount must be included
- Loop 2430, CAS02 Adjustment reason codes must be valid
- Loop 2400, SV202 and Loop 2430, SVD03
 - HCPCS and modifiers must be valid





User Group Questions & Responses





If providers submit information for referring, attending and other optional or situational providers, are MAOs and other entities required to submit valid NPIs for these?





BHT06 states we should send 'CH'. Is this accurate? Normally this value would be sent as 'RP' since MAOs and other entities are sending an encounter and not a claim that requires reimbursement.





- Which encounters with errors does CMS store?
- If an encounter is accepted on the 277CA and assigned an ICN, but fails an edit at a later stage, does CMS store the encounter?
- Does failing a later edit mean the encounter will not be priced or used for risk adjustment?
- Should the MAO or other entity send a correction as an adjustment, using the ICN of the encounter that had the error?





Why is 5010 submission for DME claims separate from professional claims?





Will CMS require the National Drug Code (NDC) number with the HCPCS code for pharmaceuticals as part of the encounter data submission?





Will NPI be a required field for paper claims received by MAOs and other entities?





Why was the requirement for MAOs and other entities to populate Loop 2000B, SBR09 with a value of "MB" for Professional encounters and "MA" for Institutional encounters and Loop 2320, SBR09 with a value of "16" for both Institutional and Professional encounters changed from what was originally communicated?

Will the companion guide be updated to reflect this new requirement for these values to be different?





Because of the 90-day non-compliance, when converting a 4010 to 5010, what happens when MAOs and other entities have to send required/mandatory information on 5010 that is optional on a 4010? Where will MAOs and other entities collect data that is not required for 4010?





When MAOs and other entities process the 277CA file, there have been claims with following acknowledgement codes. For Example: STC*A1:19.

Is an encounter with a Claim Status Category Code of 'A1' considered as accepted or is there a case where these claims can be rejected?





Once Third Party submitters are certified through the end-to-end testing process in January 2012, can Third Party submitters continue to send test data for individual contracts (i.e. new MAOs who select us as their third party submitter)?





Resources





Resources

- CSSC Operations: <u>http://www.csscoperations.com/internet/cssc.ns</u>
 <u>f/Home</u>
- Encounter Data Outreach Registration: www.tarsc.info
- CMS: www.cms.gov
- EDS Inbox: eds@ardx.net





Resources (cont'd)

- X12 Version 5010 Standards: <u>http://www.cms.gov/Version5010andD0/01 overview.asp</u>
- CEM/CEDI Technical Reporting Formats: <u>http://www.cms.gov/MFFS5010D0/20 TechnicalDocumentation.asp</u>
- Washington Publishing Company: http://www.wpc-edi.com/content/view/817/1





User Group

REMINDER: The next User Group session will be held on Thursday, January 12, 2012 from 3:00 PM EST – 4:00 PM EST.

Please remember to review the latest Companion Guide published at www.csscoperations.com.





Questions & Answers





Closing Remarks



