



Encounter Data Industry Update Q&A Documentation

TESTING AND CERTIFICATION REQUIREMENTS

Q1: What are the testing requirements for MAOs and other entities to begin submitting end-to-end testing data?

A: MAOs and other entities are required to complete front-end certification for Professional and Institutional data and receive certification notice from the Encounter Data Front-End System (EDFES) before they are able to submit data for end-to end testing.

Q2: How are MAOs and other entities notified that they have been front-end certified?

A: MAOs and other entities will receive an email notification stating that they have been certified for the front-end.

Note: If MAOs and other entities have received 277CA reports indicating that the data received has been 100% accepted for both professional and institutional submission and have not received a notice of certification, they should contact CSSC Operations at 1-877-534-2772 or email at csscooperations@palmettogba.com.

Q3: Should MAOs and other entities that submitted test files for end-to-end certification in January now resubmit those test files, or will CMS be able to use these files for certification?

A: Yes, MAOs and other entities should resubmit test files using the guidance released on the February 12, 2012 Industry Update. Any file submitted prior to February 12, 2012 will not be processed. For additional information on EDPS Professional testing requirements, go to www.csscooperations.com to view the Encounter Data Industry Update slide presentation.

TEST CASES

Q7: How do MAOs and other entities comply with the test case requirements when they do not have claims in 2012 that meet each of the end-to-end test case scenarios?

A: If an MAO or other entity does not currently receive claims that meet the test case specifications, mock encounters may be submitted with valid data to meet the test case specifications outlined in the document.



Q8: Should MAOs and other entities append the test case number at the end of the CCN or should the test case number be used as the claim ID?

A: The test case number should be populated in the Loop 2300, CLM01 data element in the last four (4) values of the Patient Control Number (PCN). Please ensure that the PCN is not truncated when moved into the 5010 format. If the PCN is truncated, the test case number may be lost.

Q9: Tax Identification Numbers (TINs) are not provided on the NPPES website or on the link provided in Test Case 6 for non-contracted providers. For the purpose of end-to-end testing, is it acceptable for MAOs and other entities to submit a default/dummy TIN as long as it is formatted correctly?

A: Yes, MAOs and others entities may submit a mock TIN for end-to-end testing. Editing is performed to ensure that the format of the TIN is valid and able to be processed.

Q10: Will MAOs and other entities be required to submit test cases for Test Case 7 (Atypical Provider Submission) if they do not process claims for Atypical Providers?

A: Yes. To ensure that MAOs and other entities understand the requirements for submission of encounter data and to ensure that the EDS obtains sufficient information to accurately process future claims, MAOs and other entities are required to submit all test cases with two (2) encounters per test case.

Q11: When submitting Test Case 7 - Atypical Provider Submission – is there a specific HCPCS code that CMS expects to see on the test case encounter?

A: For the purpose of end-to-end testing and certification, MAOs and other entities are advised to select any **valid** HCPCS for TC07. Guidance for submission of this data for end-to-end testing is provided in the Companion Guide Business Cases.

Q12: At what level should MAOs and other entities populate the Capitated Provider Submission indicator in CN101='05' for Test Case 9 – Capitated Provider Submission?

A: For professional data, MAOs and other entities should populate Loop 2400, CN101='05' for each service line. For institutional data, MAOs and other entities should populate Loop 2300 at the header level.

Q14: The expected results for Test Case 16 – causes the file to reject due to duplicate data contained in EODS. How will CMS handle the other encounters in this file if the duplicate causes a file failure?

A: For Test Case 16 – Duplicate, the expected result is that the **encounter** will reject not the entire **file**. The remaining encounters will process as appropriate.

Q15: What is the requirement for submission of data for Test Case 19 – Zip +4 for the encounters to be flagged for pricing?



A: CMS requires that a valid 5-digit Zip code plus the four (4)-digit default value of '9999' be submitted for testing. The pricing logic incorporates the Zip +4, so this test will allow CMS to determine if the system is taking the correct pricing path.

Q16: Will the Zip +4 default result in different pricing?

A: Yes, in some cases there is a different pricing algorithm for the default value of Zip Code and the default value of '9999' which is priced dependent on the Zip code location.

Q17: When submitting data for Test Case 19 – Zip +4, are MAOs and other entities required to populate all of the zip code fields with the valid Zip +4?

A: Yes, MAOs and other entities are required to populate all zip code fields with a valid Zip + 4. If the + 4 is not available, the default value of "9999" may be populated.

MAO-002 ENCOUNTER DATA PROCESSING STATUS REPORTS

Q18: Please clarify the "Informational" status indicated on the MAO-002 Encounter Data Processing Status Report.

A: There are two (2) dispositions identified on the MAO-002 Encounter Data Processing Status Report – "Accepted" and "Rejected". "Informational" error code description indicates that the encounter or line was Accepted with an Informational error code.

Q19: When should MAOs and other entities expect to receive the MAO-002 reports after submitting a test file?

A: MAOs and other entities will receive MAO-002 reports within seven (7) business days after initial submission of test cases/encounters.

Q20: When MAOs and other entities receive an MAO-002 Encounter Data Processing Status Report with accepted and rejected lines, does CMS expect them to resolve rejected lines?

A: Yes, The '000' line on the MAO-002 report identifies the header level and should indicate an accepted status. If at least one (1) other line (i.e., 001 002 003 004) is accepted, then the overall encounter is accepted. MAOs and other entities should correct any lines that are rejected.

Q21: Does a replacement encounter keep the original ICN or will a new ICN be assigned?

A: When submitting a replacement encounter, it must be linked to an original encounter in order to be considered a replacement. The replacement encounter will receive a new ICN once it is accepted and processed through the Encounter Data Front-End System (EDFES). The new ICN will be identified on the 277CA.



If the replacement encounter is not linked to an original encounter and is accepted by the EDFES, it will receive an ICN, but it will not replace the original encounter.

SUBMISSION REQUIREMENTS

Q22: When submitting production data, what does CMS expect to receive for 4010 claims submitted by providers that do not include the required drop-off location for ambulance encounters?

A: In order to correctly process and price ambulance services, the ambulance drop-off location as populated in Loop 2310F is required and will need to be a valid location. CMS will provide additional guidance regarding submission of data for ambulance claims for production.

Q23: What are MAOs and other entities to do with the claims for 2012 dates of service that are submitted in the 4010 format?

A: All claims with 2012 dates of service must be submitted through the encounter process, MAOs and other entities must convert claims in the 4010 format to the 5010 format in order to comply with this CMS directive.

Q24: We are using 2012 dates of service but notice that files with onset dates (DTP*431) in 2011 are not accepted. Are there other dates to consider for the 2012 requirement?

A: Based on on-going testing, CMS determined that the EDS will validate only the Date(s) of Service to meet the 2012 criteria. Other date fields, such as Onset of Current Illness or Symptom, may be submitted with 2011 dates.

Q25: Can CMS provide guidance for MAOs and other entities that use paper claims for submission of ambulance data when there is no information provided for the pick-up and drop-off locations?

A: In order to correctly process and price ambulance services, the ambulance drop-off location as populated in Loop 2310F is required and will need to be a valid location. CMS will provide additional guidance regarding submission of data for ambulance claims for production.

Q26: Will CMS enforce the rule for diagnosis pointer integrity?

A: Yes, the rule for diagnosis pointer integrity will be enforced in the EDS.

Q27: Can MAOs and other entities submit more than two (2) iterations of Loops 2320, 2330, 2430 when there are multiple Coordination of Benefits scenarios involved?

A: Yes. MAOs and other entities may continue to use the iterations of the COB loops to illustrate the scenarios for the specific COBs.



EDITS/ERRORS

Q28: What Strategic National Implementation Process (SNIP) level edits will CMS review?

A: CMS will review SNIP level edits one (1) through seven (7). Levels one (1) through four (4) and level seven (7) will be tested in the translator and levels five (5) and six (6) will be tested in the CEM. These SNIP levels are HIPAA compliance checks and will be enforced through front-end translator (999) and CEM (277CA) edits.

Q29: When will CMS respond to the feedback MAOs provided regarding the edits grid (rejected, accepted, and informational)?

A: The January 2012 Professional Companion Guide reflects the outcome of the EDPS edits analysis conducted based on feedback received from the Industry. During the certification process, these edits will continue to be assessed and changes will be reflected in future releases of the Companion Guide.

Q30: In production, if an encounter is accepted but receives an informational edit, will that encounter still be priced?

A: Pricing of encounters with informational edits is dependent on the specific informational edit that is generated.

Q31: Our MAO is submitting CAS adjustments at the line level and is receiving out of balance errors. Is CMS expecting reason codes at 2320 or 2430 loop?

A: MAOs and other entities must populate the amount not paid at the CAS segment header (Loop 2300) and line level (Loop 2400) as appropriate. The encounter must balance and pass validation at all levels.