
Encounter Data User Group Q&A Documentation

Questions and Answers – August 21, 2012 Live Session

Q1: Is CMS able to provide a high-level description of the incidents submitted, using the EDS Incident Tracking tool, that are not yet resolved?

A1: CMS is currently analyzing the incidents received by MAOs and other entities for common issues. Once the analysis is complete, CMS will further consider the option of distributing the results to MAOs and other entities.

Q2: Will CMS consider providing a sample of the enhanced MAO-002 Encounter Data Processing Status report for MAOs and other entities to use for system testing in order to better prepare for submission of production data?

A2: CMS will consider providing a sample enhanced MAO-002 for MAOs and other entities to prepare their internal systems prior to September 4, 2012. Once a final decision is made, CMS will notify the industry through the EDS Bulletin.

Q3: Can MAOs and other entities utilize the MAO-002 Encounter Data Processing Status report in lieu of the MAO-001 Encounter Data Duplicates report to filter and identify duplicate encounters?

A3: Yes, the MAO-001 report allows MAOs and other entities the ability to reconcile errors specific to edit 98325 – Exact Duplicate of a Service Line within this Claim or a Previously Priced Claim. However, if the MAO or other entity chooses to use the MAO-002 report, they can filter on 98325 to identify duplicate errors.

Q4: If Home Health and Skilled Nursing encounters are submitted prior to the approved EDS submission date, will the edits received on these encounters count towards the organization's error rate?

A4: The edits associated with Home Health and Skilled Nursing encounters submitted prior to the approved submission date will be reflected in the total error count. CMS has not yet determined error frequency benchmarks that will be included in the compliance requirements and will perform analysis to determine the overall impact of the edit on the error rates.

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Q5: Can CMS provide additional guidance for submission of encounters for non-emergency transportation when the service is covered by Medicaid but the MAO or other entity is not paid by Medicaid?

A5: MAOs and other entities are required to extract codes that are covered by Medicaid and lines that contain Medicare Non Covered codes. Encounters containing these codes will be rejected in the EDFES; therefore, must be extracted prior to submission.

Q6: What is the earliest date that CMS anticipates distributing the initial MAO-004 Encounter Data Risk Filter report?

A6: The MAO-004 report will not be distributed to MAOs or other entities before November 2012. Based on feedback from the industry, CMS will evaluate the EDS risk filtering logic and the values/elements to be included on the associated MAO-004 from August 2012 through November 2012 and will notify MAOs and other entities of the initial distribution date at that time.

Q7: Will the MAO-004 Encounter Data Risk Filter report include all diagnosis codes filtered for risk adjustment from the May 2012 (the effective date of production data submission) until the date of the MAO-004 report distribution?

A7: CMS will evaluate the values included on the MAO-004 report based on feedback from MAOs and other entities that have submitted recommendations and requests regarding risk filtering logic and the associated report. Please submit your recommendation to eds@ardx.net by Friday, August 24, 2012 3:00 P.M.

Q8: What is date for the next Encounter Data User Group session?

A8: CMS has scheduled the next Encounter Data User Group for Thursday, August 30, 2012 3:00 P.M. – 4:00 P.M. EST.

The schedule for fourth quarter User Group sessions will be published in September 2012 at www.tarsc.info.

Q9: Will CMS provide a proxy data default for invalid codes (i.e., invalid HCPCS codes or invalid diagnosis codes) in lieu of proxy data for rejected line extraction?

A9: No, CMS will not allow the use of proxy data for invalid HCPCS or diagnosis codes.

Please reference the 2012 Regional Technical Assistance Participant Guide – Module 3 – Policy, Monitoring, and Compliance for guidance regarding use of proxy data.

Q10: Can CMS provide clarification of the DME edits 32030 and 32035?

A10: Edit 32030 Place of Service is not 11 or 23 for Professional Encounter is generated on the MAO-002 report when a professional/physician services encounter is submitted for DME services provided by a

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physician in an office or an emergency department – hospital setting and the POS codes of 11 or 23 have not been used.

Edit 32035 Place of service is 11 or 23 for DME Encounter is generated on the MAO-002 report when a DME supplier encounter is submitted for DME services using POS codes 11 or 23, which are specifically identified for professional/physician services.