

# Encounter Data Submission and Processing Report Resource Guides



## Health Plan Management System (HPMS) Reports - Encounter Data Report Cards

### Reports Overview

The Health Plan Management System (HPMS) is a web-enabled information system that supports the ongoing operations of the Medicare Advantage (MA) and Part D programs, including the plan enrollment and plan compliance business functions as well as longer-term strategic planning and program analysis. HPMS facilitates numerous data collection and reporting activities that legislation requires of MAOs and other entities.

The Medicare Plan Payment Group (MPPG) produces HPMS operational reports that provide MAOs and other entities with an overview of encounter data quality across claim types and submission periods.

This job aid provides information about Encounter Data Report Cards, one of the two encounter data reports available through HPMS:

- ❖ **Encounter Data Report Cards**
- ❖ Submission Performance Reports

Each of the above-named reports provide information about an MAO's or other entity's 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 - Encounter Data Report Cards

### Report Description

Beginning in September 2015, CMS has used encounter data records (EDRs) to produce Encounter Data Report Cards that are transmitted to each Medicare Advantage contract to provide the contract with an understanding of its submission performance. The Encounter Data report cards are transmitted to Medicare Advantage contracts on a quarterly basis.

The report cards contain the following sections:

- Section 1A: Operational Performance
- Section 1B: Top Edits
- Sections 2A/2B: Volume Performance



# Health Plan Management System (HPMS) Reports - Section 1A: Operational Performance

## Section 1A Overview

The Operational Performance section presents information on the volume of submitted Encounter Data Records (EDRs) and Chart Review Records (CRRs).

Data presented in this section include:

- Frequency of Submissions
- Submissions per Beneficiary, Total and by Service Type
- Accepted Submissions, Total and by Service Type
- Final Action Submissions, Total and by Service Type
- Rejected Data (Record and Line Level), Total and by Service Type

Data are presented separately for EDRs and CRRs. Final Action Submissions are defined as the count of accepted records that have not been voided or replaced.

Results are displayed for the five most recent quarters based on the EDR submission date.



# Health Plan Management System (HPMS) Reports - Section 1A: Operational Performance

## Section 1A Report Example

**Parent Organization:** Parent MAO  
**Contract ID:** HXXXX  
**Contract Name:** MAO Contract ABC, Inc.  
**2022 Enrollment:** 44,000  
**2023 Enrollment:** 45,000  
**2024 Enrollment:** 46,000  
**Contract Size and Organization Type:** Small Local CCP

### SECTION 1A: ENCOUNTER DATA SUBMISSION REPORT – Q3-2024

Measure	Grouping	Q3 2024 CCP Average	Q3 Y2023	Q4 Y2023	Q1 Y2024	Q2 Y2024	Q3 Y2024
Number of submissions	Total Encounters	34.6	21	27	26	24	21
Number of months with submissions	Total Encounters	3.0	3	3	3	3	3
Number of months in the quarter	Total Encounters	3.0	3	3	3	3	3
Percent of months submitted	Total Encounters	98.5%	100.0%	100.0%	100.0%	100.0%	100.0%
Number of EDRs Submitted Per Beneficiary	Total Encounters	12.30	11.20	11.04	11.08	12.37	12.17
Number of EDRs Submitted Per Beneficiary	Durable Medical Equipment	0.57	0.20	0.04	0.08	0.37	0.17
Number of EDRs Submitted Per Beneficiary	Institutional	1.80	1.15	0.99	1.03	1.32	1.12
Number of EDRs Submitted Per Beneficiary	Professional	9.30	7.76	7.92	8.88	9.59	10.79
Number of EDRs Accepted Per Beneficiary	Total Encounters	11.40	11.08	12.92	11.96	10.25	10.05
Number of EDRs Accepted Per Beneficiary	Durable Medical Equipment	0.44	0.56	0.52	0.49	0.56	0.44
Number of EDRs Accepted Per Beneficiary	Institutional	1.07	1.25	1.44	1.40	1.55	1.30



# Health Plan Management System (HPMS) Reports - Section 1B: Top Edits

## Section 1B Overview

The Top Edits Section presents data on a contract’s top five 277 edits and the top five MAO-002 edits. The Top Edits section presents the following data elements:

- Edit level (277 or MAO-002)
- Edit code and description
- Edit rank
- Number of edits
- Number of encounters affected

It is important to note that at the 277 phase of editing, a single edit may affect several records due to the loop structure of the 837 format used for encounter data submission.

Data are reported by month and cumulative totals are provided as well.

Quarter	Release Month	Description of Content
1	April	The top 5 edits are reported for December of the prior year, January and February of the current year, and cumulatively (year-to-date) through December of the prior year and February of the current year.
2	July	The top 5 edits are reported monthly and cumulatively (year-to-date) from January through May of the current year.
3	October	The top 5 edits are reported monthly and cumulatively (year-to-date) from January through August of the current year.
4	January	The top 5 edits are reported monthly and cumulatively (year-to-date) from January through November of the prior year.



# Health Plan Management System (HPMS) Reports - Section 1B: Top Edits

## Section 1B Report Example

**Parent Organization:** Parent MAO  
**Contract ID:** HXXXX  
**Contract Name:** MAO Contract ABC, Inc.  
**2022 Enrollment:** 44,000  
**2023 Enrollment:** 45,000  
**2024 Enrollment:** 46,000  
**Contract Size and Organization Type:** Small Local CCP

### SECTION 1B: TOP EDITS – 2024

Time Period	Edit Level	Edit Code	Edit Rank	Edit Description	Number of Edits	Number of Encounters Affected
062024	277	A7:513	1	Invalid: HIPPS Rate Code for Services Rendered	45	40
062024	277	A7:710	2	Invalid: Line Adjudication Information	33	27
062024	277	A7:228	3	Invalid: Type of bill for UB claim	33	19
062024	277	A7:465	4	Invalid: Principal Procedure Code for Service(s) Rendered	24	24
062024	MAO-002	2240	1	Beneficiary Not Enrolled in MAO for DO	199	199
062024	MAO-002	2256	2	Beneficiary Not Part C Eligible for DO	79	79
062024	MAO-002	98325	3	Service Line(s) Duplicated	43	40
062024	MAO-002	2125	4	Beneficiary DOB Mismatch	3	3
Year-to-082024	277	A7:710	1	Invalid: Line Adjudication Information	10,324	6,092



## Health Plan Management System (HPMS) Reports - Section 2A/2B: Volume Performance

### Section 2A/2B Overview

Sections 2A and 2B present information only on final action records. Section 2A presents the data in a table while Section 2B presents the same information in bar charts.

Data presented in Sections 2A and 2B include total and per-beneficiary counts of records by type of service for:

- Contract-level Submissions
- Medicare Advantage National Submissions
- Medicare Advantage Regional Submissions
- Medicare Fee-for-Service National Submissions
- Medicare Fee-for-Service Regional Submissions

Separate counts are provided for encounter data records and chart review records.

Sections 2A and 2B display results for the most recent 3 years based on the EDR service through date.



# Health Plan Management System (HPMS) Reports - Section 2A/2B: Volume Performance

## Section 2A Report Example

**Parent Organization:** Parent MAO

**Contract ID:** HXXXX

**Contract Name:** MAO Contract ABC, Inc.

**2022 Enrollment:** 44,000

**2023 Enrollment:** 45,000

**2024 Enrollment:** 46,000

**Contract Size and Organization Type:** Small Local CCP

### SECTION 2A: ENCOUNTER DATA SUBMISSIONS BY SERVICE YEAR (2022 – 2024)

Grouping	Claim Year	Enrollment (beneficiaries in thousands)	Professional records (in thousands)	Professional records per Beneficiary	Inpatient records (in thousands)	Inpatient records per Beneficiary	Outpatient records (in thousands)	Outpatient records per Beneficiary	DME records (in thousands)	DME records per Beneficiary	Home Health records (in thousands)	Home Health records per Beneficiary	Skilled Nursing Facility records (in thousands)
HXXXX Encounters	2022	69.46	2,590.26	27.95	19.41	0.65	413.20	6.54	253.19	8.46	33.75	0.84	6.72
HXXXX Encounters	2023	115.80	3,309.96	84.13	24.36	0.63	803.48	20.67	260.37	6.65	31.34	0.95	4.97
HXXXX Encounters	2024	86.85	2,530.57	45.44	28.68	0.45	251.17	4.89	147.83	2.62	20.50	0.35	3.98
MA National Encounters	2022	19,665.43	883,955.47	37.88	5,039.90	0.44	119,231.83	6.23	43,346.26	1.55	11,445.33	0.38	2,364.91
MA National Encounters	2023	39,583.38	1,115,595.70	50.47	7,733.65	0.25	96,495.29	5.45	52,150.24	2.19	9,757.55	0.63	2,645.05
MA National Encounters	2024	31,024.83	758,758.89	28.24	6,220.47	0.27	126,974.29	3.92	35,320.16	2.34	12,327.33	0.54	2,386.40
MA Region XX Encounters	2022	979.53	33,781.39	35.22	463.11	0.30	5,176.34	5.05	1,699.26	2.36	714.95	0.51	78.39
MA Region XX Encounters	2023	1,691.94	33,115.59	38.50	421.58	0.30	4,996.42	5.93	1,571.51	1.88	625.21	0.81	101.66
MA Region XX Encounters	2024	907.28	22,520.85	24.83	400.05	0.30	5,025.85	5.43	1,225.85	2.15	600.28	0.75	65.80

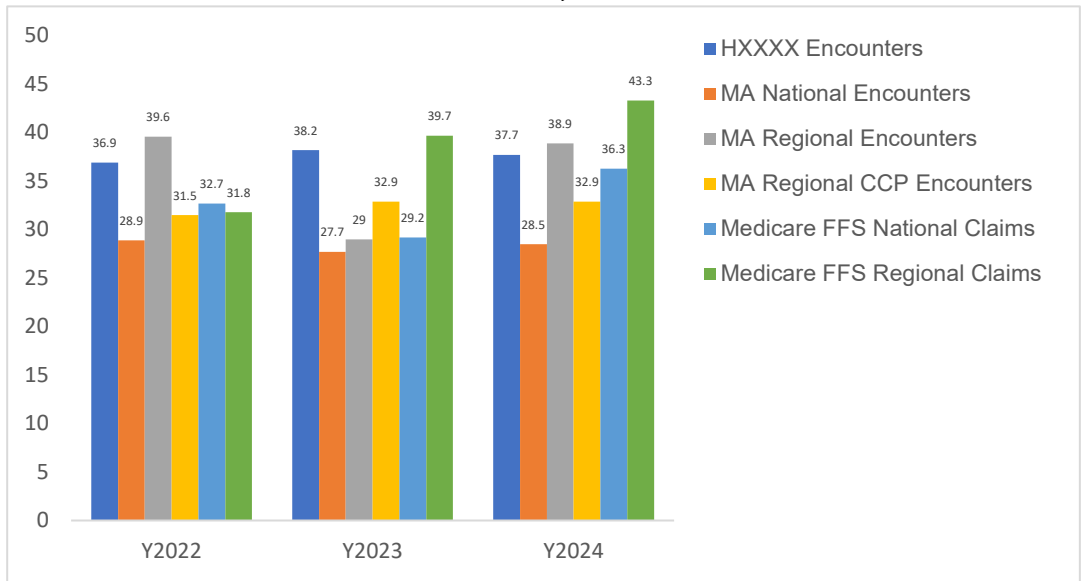


# Health Plan Management System (HPMS) Reports - Section 2A/2B: Volume Performance

## Section 2B Report Example

**Parent Organization:** Parent MAO  
**Contract ID:** HXXXX  
**Contract Name:** MAO Contract ABC, Inc.  
**2022 Enrollment:** 44,000  
**2023 Enrollment:** 45,000  
**2024 Enrollment:** 46,000  
**Contract Size and Organization Type:** Small Local CCP

### Professional EDRs Per Beneficiary





## Health Plan Management System (HPMS) Reports - Section 2A/2B: Volume Performance

### Section 2B Report Example (continued)

#### *Total EDR Graph Data*

<b>GROUPER</b>	<b>Y2022</b>	<b>Y2023</b>	<b>Y2024</b>
HXXXX Encounters	46.2	40.6	45.8
MA National Encounters	42.6	53.5	63.5
MA Regional Encounters	34.5	43.4	35.4
MA Regional CCP Encounters	42.5	59.7	45.7
Medicare FFS National Claims	47.2	61.4	62.4
Medicare FFS Regional Claims	48.1	56.1	57.4

#### *Professional Graph Data*

<b>GROUPER</b>	<b>Y2022</b>	<b>Y2023</b>	<b>Y2024</b>
HXXXX Encounters	36.9	38.2	37.7
MA National Encounters	28.9	27.7	28.5
MA Regional Encounters	39.6	29.0	38.9
MA Regional CCP Encounters	31.5	32.9	32.9
Medicare FFS National Claims	32.7	29.2	36.3
Medicare FFS Regional Claims	31.8	39.7	43.3



# Health Plan Management System (HPMS) Reports - Encounter Data Report Cards

## Accessing the Report

Each MAO or other entity's contract-specific information, showing performance for each metric and technical notes with detailed specifications on each metric and threshold are available on the HPMS portal:

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

Reports are maintained on the HPMS portal and MAOs may select the desired time period of the reports they wish to review.

HPMS > Risk Adjustment > Encounter Data > Encounter Data Report

### Encounter Data Report

**Note:** Users may request a tab or comma delimited version of this file by contacting RiskAdjustmentOperations@cms.hhs.gov. The request must include the time period of the report needed.

Reporting Period\*

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