Encounter Data System User Group

November 17, 2011





Agenda

- Introduction
- Session Guidelines
- Companion Guide Updates
- Technical Update CAS Segment
- User Group Question & 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



Companion Guide Updates

- November release currently published at http://www.tarsc.info/Resources.aspx
- Major Updates
 - Atypical Provider Default Values
 - Correct/Replacement and Deletion
 Operational Guidance
 - CAS Segment





Technical Update CAS Segment





PREVIOUS Correct/Replace and Delete Operational Guidance

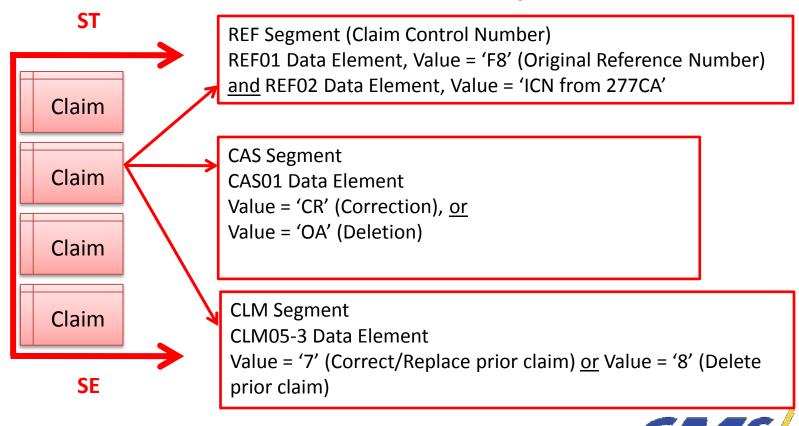
- MAOs and other entities were instructed to populate the following fields:
 - Loop 2300, REF01='F8', REF02=ICN
 - Loop 2300, CLM05-3='7' (Correct/Replace) or CLM05-3='8' (Delete)
 - Loop 2320, CAS01='CR' (Correct/Replace) or CAS01='OA' (Delete)





PREVIOUS Correct/Replace and Delete Operational Guidance

2300 Loop





Industry Update

CENTERS for MEDICARE & MEDICARD SERVI

NEW Correct/Replace and Delete Operational Guidance

- MAOs and other entities are instructed to populate the following fields:
 - Loop 2300, REF01='F8', REF02=ICN
 - Loop 2300, CLM05-3='7' (Correct/Replace) or CLM05-3='8' (Delete)
 - MAOs and other entities must not populate CASO1='CR' (Correct/Replace) or CASO1='OA' (Delete)





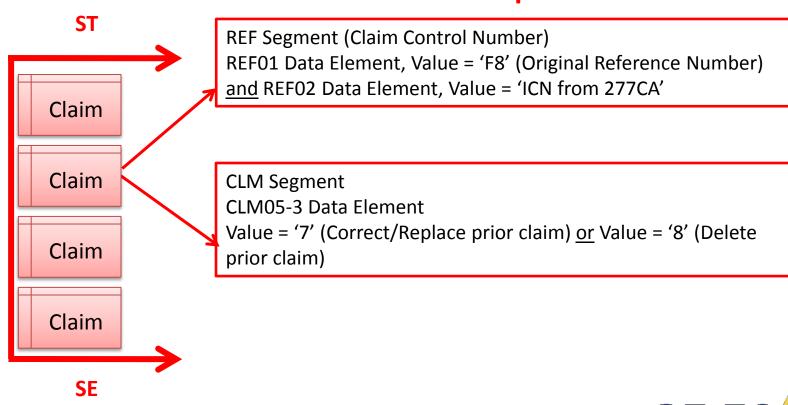
NEW Correct/Replace and Delete Operational Guidance

- If an original encounter is submitted, MAOs and other entities should populate Loop 2300, CLM05-3='1'.
- When an original encounter is rejected in the EDFES, MAOs and other entities should correct the original encounter and populate Loop 2300, CLM05-3='1' for the resubmitted encounter.
- When an MAO or other entity identifies that an original encounter must be corrected/replaced or deleted, the MAO or other entity should populate Loop 2300, REF01='F8' and REF02=ICN and Loop 2300, CLM05-3='7' (Correct/Replace) or CLM05-3='8' (Deletion).



NEW Correct/Replace and Delete Operational Guidance

2300 Loop







Adjustments

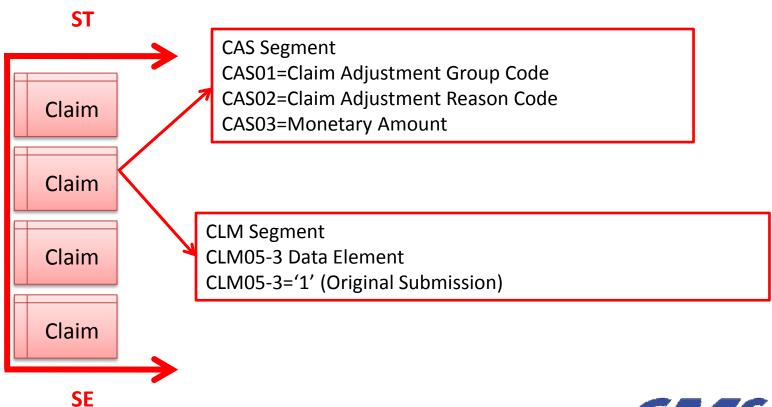
- If the billed amount is different than the amount paid on an encounter, MAOs and other entities should populate the CAS segment.
- When a claim or line is denied in the MAO or other entities adjudication system, the CAS segment should be populated as instructed by the TR3:
 - Claim Denials Loop 2320, CAS segment
 - Line Denials Loop 2430, CAS segment
 - CAS01=the applicable Claim Adjustment Group Code
 - CAS02=the Claim Adjustment Reason Code
 - CAS03=the Monetary Amount

NOTE: Based on new guidance, MAOs and other entities are no longer required to populate the NTE field with the Remittance Advice Remark Code.



Original Encounter with an Adjustment

2300 Loop







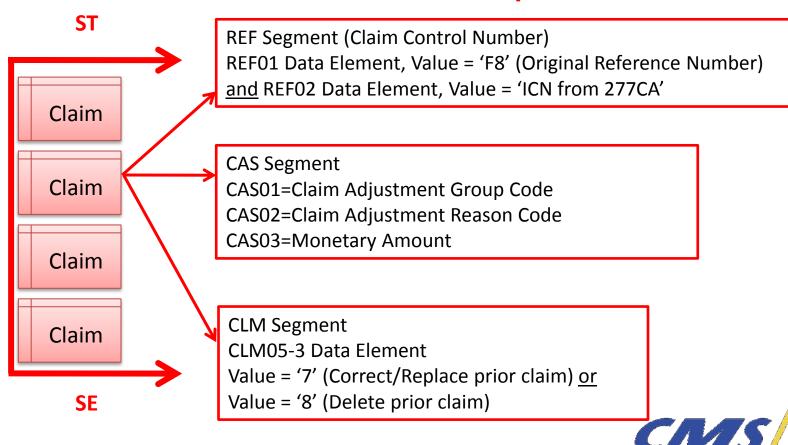
Correct/Replace or Delete an Adjusted Encounter

 If an MAO or other entity is correcting/replacing or deleting an original encounter with an adjustment for nonmonetary reasons, MAOs and other entities must populate Loop 2300, REF01='F8', REF02=ICN, Loop 2300, CLM05-3='7' (Correct/Replace) or CLM05-3='8' (Deletion), and Loop 2320, CAS01=Claim Adjustment Group Code, CAS02=Claim Adjustment Reason Code, CAS03=Monetary Amount



Correct/Replace or Delete an Adjusted Encounter

2300 Loop





Industry Update

CENTERS for MEDICARE & MEDICARD SERVICE

User Group Questions and Responses





Where can MAOs and other entities find materials from the October 27, 2011 Industry Update and November 3, 2011 User Group session?





Should MAOs and other entities submit correct/replace or deletion encounters for interest and penalty payments or overpayments to providers?





Does failing an edit in the EDPS mean the encounter will not be priced or used for risk adjustment?





If a member is admitted to the hospital in 2011 but is discharged in 2012, should that claim be submitted for encounter data?





Will there ever be situations where an 837-D claim should be converted to an 837-P or 837-I encounter record? If so, please provide a list of those situations.





Does End-to-End testing require adjudication?

Should the 50-100 encounters sent for end-to-end testing also be adjudicated claims only?





How can MAOs and other entities verify that encounters successfully processed past the EDFES?

Is there any acknowledgement of processing without errors?





If a claim is rejected as a duplicate, is that duplicate stored by CMS? If yes, does CMS assign a new ICN to the duplicate claim?





On the October 27, 2011 Industry Update call, it was mentioned that, if there is no diagnosis on the claim for Atypical Providers, MAOs and other entities should submit the default diagnosis code of 78099. Please identify which providers to which this refers. Specifically, if the Servicing Provider is "Atypical" or do you mean any provider (Billing, Operating, Attending, etc.)?





What is CMS' expectation for submission of encounters for services where Medicare would not be liable for payment in a claims setting? In the past, CMS has advised that diagnoses from non-covered encounters could be submitted as long as they met the requirement of a face-to-face encounter with a physician provider. Should services covered under workers compensation, self-funded employer groups, and other third party liability services be included in encounter data submissions?





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.)

- 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 will be held on Thursday, December 1, 2011 from 3:00PM EST – 4:00PM EST.





Questions and Answers





Closing Remarks



