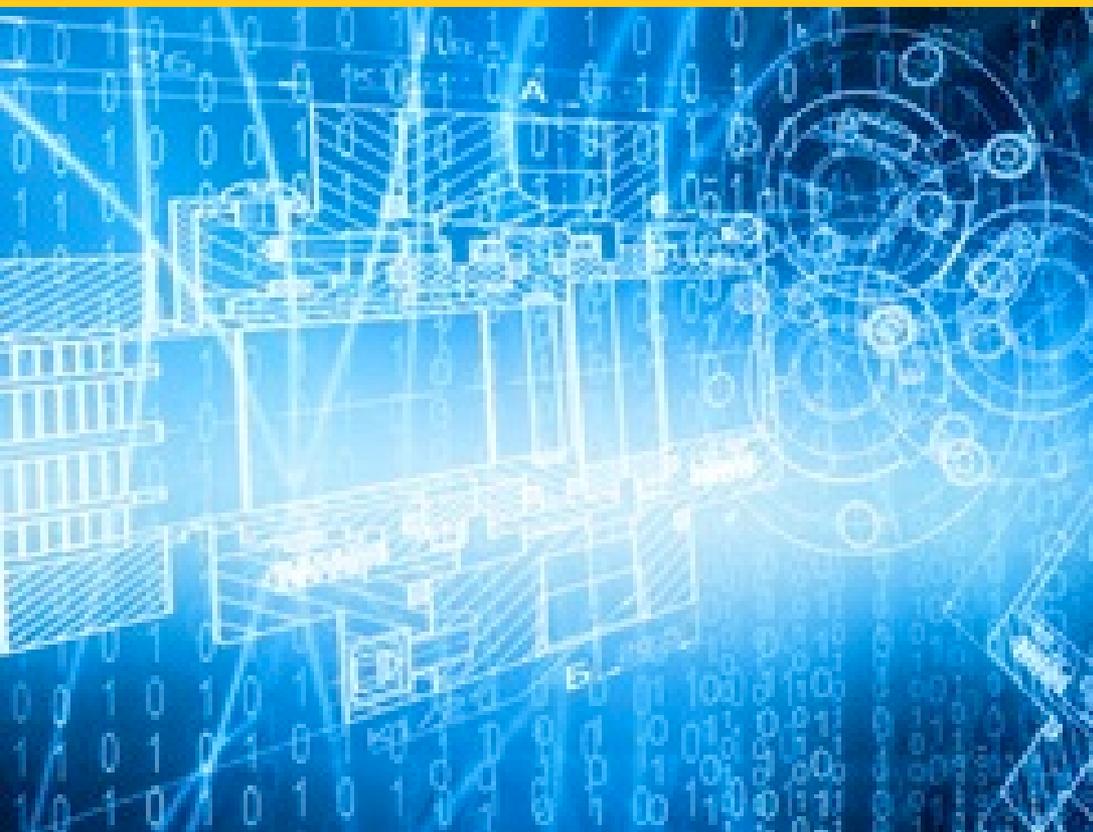


Risk Adjustment for EDS & RAPS User Group



April 27, 2017
2:00 p.m. – 3:00 p.m. ET

Session Guidelines

- This is a one hour User Group for MAOs submitting data to the Encounter Data System (EDS) and the Risk Adjustment Processing System (RAPS)
- There will be opportunities to submit questions via the webinar Q&A feature
- For follow up questions regarding content of this User Group, submit inquiries to CMS at RiskAdjustment@cms.hhs.gov or EncounterData@cms.hhs.gov
- User Group slides and Q&A documents are posted on the CSSC Operations website under Medicare Encounter Data>User Group and Risk Adjustment Processing System>User Group
- Please refer to <http://tarsc.info> for the most up-to-date details regarding training opportunities, session dates, and registration information
- User Group Evaluation

Agenda

- Introduction
- CMS Updates
 - MOR Record Types
 - MAO-004 Report Updates
 - Medicaid Status Data File
 - Final 2016 Risk Score Run
 - Risk Adjustment Overpayment Reporting Module (RAOR)
- CMS CY 2018 Call Letter
Encounter Data Monitoring and Compliance Activities
- EDS Training Topics
 - EDS Processing Overview
 - Encounter Data System Reports Overview
 - EDFES Acknowledgement Reports
 - EDPS Processing Status Reports
- Q&A Session



CMS Updates

MOR Record Types

- For the 2017 initial run, contracts should only expect to see Record Types “B,” “D,” and “2.”
- Record type “B” will continue to be used for the PACE and ESRD models
- Record type “C” will be used for the Part C aged/disabled model used in payment years 2014-2016
 - Only contains RAPS-based HCCs in the 2016 final model run
- Record type “D” will be used for the aged/disabled Part C (CMS-HCC) model used in payment year 2017
 - Only contains RAPS-based HCCs in the 2017 initial model run
 - The Encounter Data based HCCs will be used in the 2016 final model run and will be reported in another record type that will be added for the final run
- Record type “2” will be used for the Part D (RxHCC) model

PCUG Appendices Update

- The Plan Communication User Guide (PCUG) Appendices Version 11.0 (dated February 28, 2017) have been updated to include the new Part C MOR Record Type “D” and the new Part D MOR Record Type “2” and match those published in the February 22, 2017 HPMS memo “CORRECTION – Changes to Payment Year (PY) 2017 Initial Model Output Report (MOR).”
- The updated PCUG Appendices are posted on the CMS website (https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/mapdhelpdesk/Plan_Communications_User_Guide.html).

Phase III Version 1 MAO-004 Report

- MAO-004 reports for dates of service 2015 were distributed the week of April 2nd, 2017.
- MAO-004 reports for dates of service from January 2014 through April 2017 are scheduled for a separate distribution in late May.
- Report layout and additional information is available in the 3/22/17 HPMS Memo “Phase III MAO-004 File Layout”

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850



CENTER FOR MEDICARE
MEDICARE PLAN PAYMENT GROUP

DATE: March 22, 2017

TO: All Medicare Advantage Organizations, PACE Organizations,
Medicare-Medicaid Plans, Section 1833 Cost Contractors and Section
1876 Cost Contractors, and Demonstrations

FROM: Cheri Rice, Director
Medicare Plan Payment Group

SUBJECT: Phase III MAO-004 File Layout

Phase III Version 1 MAO-004 Report Layout

Key Fields – Header Section

- #5 – Medicare Advantage Contract ID assigned to the submitting contract
- #7 – Date of Report Creation
- #13 – Submission file type: PROD or TEST

HEADER SECTION						
<u>#</u>	<u>Item</u>	<u>Notes</u>	<u>Length</u>	<u>Starting Position</u>	<u>Ending Position</u>	<u>Format</u>
1	Record Type	0=Header	1	1	1	Numeric, no commas and/or decimals
2	Delimiter		1	2	2	Uses the * character
3	Report ID	Value is 'MAO-004'	7	3	9	Alpha Numeric
4	Delimiter		1	10	10	Uses the *

Reminder: Refer to the 3/22/17 HPMS Memo “Phase III MAO-004 Report Layout” for details.

Phase III Version 1 MAO-004 Report Layout

Key Fields – Detail Section

- #9 – Encounter ICN
- #11 – Encounter Type Switch (values 1-9)
- #13 – ICN of Encounter Linked To
- #15 – Allowed/Disallowed Status of Encounter Linked To
- #25 - Allowed/Disallowed Flag
- #27 – Allowed/Disallowed Reason Codes
- #33 – Add or Delete Flag

DETAIL SECTION						
<u>#</u>	<u>Item</u>	<u>Notes</u>	<u>Length</u>	<u>Starting Position</u>	<u>Ending Position</u>	<u>Format</u>
1	Record Type	1=Detail	1	1	1	Numeric, no commas and/or decimals
2	Delimiter		1	2	2	Uses the * character
3	Report ID	Value is 'MAO-004'	7	3	9	Alpha Numeric
4	Delimiter		1	10	10	Uses the *

Reminder: Refer to the 3/22/17 HPMS Memo “Phase III MAO-004 Report Layout” for details.

Phase III Version 1 MAO-004 Report Layout

Key Fields – Trailer Section

- #5 – Medicare Advantage Contract ID assigned to the submitting contract
- #7 – Total Number of Records (count of records represented on the report)

TRAILER SECTION						
<u>#</u>	<u>Item</u>	<u>Notes</u>	<u>Length</u>	<u>Starting Position</u>	<u>Ending Position</u>	<u>Format</u>
1	Record Type	9=Trailer	1	1	1	Numeric, no commas and/or decimals
2	Delimiter		1	2	2	Uses the * character
3	Report ID	Value is 'MAO-004'	7	3	9	Alpha Numeric
4	Delimiter		1	10	10	Uses the * character

Reminder: Refer to the 3/22/17 HPMS Memo “Phase III MAO-004 Report Layout” for details.

File Naming Conventions for Phase III MAO-004 Report

MAO-004 Report File naming conventions for April MAO-004 Reports with 2015 Dates of Service:

- Gentrax Mailbox/TIBCO MFT Internet Server:
P.Rpppppp.MAO004.Dyymmdd.Tttttttt
- Connect:Direct (Mainframe):
zzzzzzzz.Rpppppp.MAO004.Dyymmdd.Tttttttt
- Connect:Direct (Non-Mainframe):
[directory]Rpppppp.MAO004.Dyymmdd.Tttttttt

Where:

- zzzzzzzz is the plan sponsor-provided high level qualifier
- pppppp is the contract number, representing the contract that the MAO-004 report is for
- yy is the two digit year when the file was sent
- mm is the two digit month when the file was sent
- dd is the two digit day when the file was sent
- ttttttt is the timestamp, representing the time the file was sent

Phase III Version 2 MAO-004 Report Layout

Additional Field – Header Section

#	Item	Notes	Length	Starting Position	Ending Position	Format
1	Record Type	0=Header		1	1	1 Numeric, no commas and/or decimals
13	Submission File Type	Value of 'PROD,' for production and 'TEST' for test files	4	111	114	Alpha Numeric
14	Delimiter		1	115	115	Uses the * character
15	Phase	This field will designate which Phase layout the MAO-004 report is	1	116	116	Alpha Numeric
16	Delimiter		1	117	117	Uses the * character
17	Version	This field will designate which version within the phase	1	118	118	Alpha Numeric
19	Delimiter		1	119	119	Uses the * character
20	Filler		381	120	500	Spaces

Reminder: Watch out for an HPMS Memo before the report distribution

File Naming Conventions for Phase II Version 2 MAO-004 Report

- MARX UI:
Current: P#MMA.@BGD5050.PLNXXXXX.Ryyyymm.Ddd.MAO004
Change: P#MMA.@BGD5050.PLNXXXXX.Ryyyymm.Ddd.MAO004PV
- MAO-004 files to the Plans will have the following naming convention:
 - Gentrax Mailbox/TIBCO MFT Internet Server:
Current: P.Rxxxxx.MAO004.Dyymmdd.Thhmsst
Change: P.Rxxxxx.MAO004PV.Dyymmdd.Thhmsst
 - Connect: Direct (Mainframe):
Current: zzzzzzzz.Rxxxxx.MAO004.Dyymmdd.Thhmsst
Change: zzzzzzzz.Rxxxxx.MAO004PV.Dyymmdd.Thhmsst
 - Connect: Direct (Non-Mainframe):
Current: [directory]Rxxxxx.MAO004.Dyymmdd.Thhmsst
Change: [directory]Rxxxxx.MAO004PV.Dyymmdd.Thhmsst

P = Phase: The Phase can be 1 to 9 or A to Z

V = Version: The Version can be 1 to 9 or A to Z

Frequently Asked Questions (FAQ) - 1

Encounter 111 is submitted as an original EDR and accepted in EDS. A linked chart review 222 is then submitted, linking to encounter 111. The submitter now decides they need to void Encounter 111:

ICN Submission Type Linking ICN Accepted in EDS

111 Original EDR with no Linking ICN: Accepted

222 Linked Chart Review Linking ICN 111: Accepted

333 Void Encounter Linking ICN 111: Accepted

Does the submitter also need to submit a void for the linked chart review 222?

No, the submitter does not need to void linked chart review 222 just because it voids encounter 111. CMS will consider diagnoses on the linked chart review so long as the linked chart review record remains active (i.e., not voided). The MAO-004 report will report the diagnoses on 111 as deleted in the month after void 333 was submitted. The diagnoses on linked chart review 222 will be reported as added in the month after the record was submitted. When a void is submitted for 111, CMS will not re-report the diagnoses on linked chart review 222.

FAQ - 2

In what situation will Field #15 – Allowed/Disallowed Status of Encounter Linked To – on the Phase III MAO-004 Report be blank for reason (4)?

- (1) if the current record is an original encounter data record, or
- (2) if the current record is an unlinked chart review record and no record is referenced in Field #13, or
- (3) if the record is a linked chart review with an invalid ICN in Field #13, or
- (4) if the diagnoses on the record whose ICN is in Field #13 did not pass the filtering logic and were not previously reported on a MAO-004 report

Field #15 will be blank if the encounter ICN listed in Field #13 (The ICN of the encounter linked to) was not previously reported. This can occur if a record is submitted that links to an encounter or chart review record that does not meet the requirements of our filtering logic, or does not meet the MAO-004 reporting parameters. The slides from the March 23rd, 2017 User Group call provide more detail on which disallowed records are reported.

FAQ - 3

Will terminated and consolidated contracts receive an MAO-004 report?

No, MAO-004 reports are not pushed to terminated or consolidated contracts. If the contract(s) in question has been terminated, or was consolidated into another contract, reports will not be available in the plan's mailbox and the plan will not be able to access those reports on MARx for the contract that is no longer active. CMS is researching solutions so that terminated and consolidated contracts may access MAO-004 reports. We will inform MA organization as more information becomes available.

FAQ - 4

Encounters submitted, and accepted, on the MAO-002 report are not reflected on the MAO-004 Report.

If you believe there are risk adjustment eligible diagnoses not being reported on your MAO-004, please confirm the following before sending us a list of ICNs to review:

- ✓ Was the data submitted after January 1st, 2014?
- ✓ Does the data in question have a date of service January 1, 2014 or later (For Phase III version 1 only – 2015 dates of service)?
- ✓ Is the encounter data record accepted at the header level by Encounter Data System, as reported on the MAO-002 report?
- ✓ Does the encounter data record pass the CMS published filtering logic for each specific encounter type under consideration– Professional, Outpatient, Inpatient?
- ✓ Does the encounter data record meet the parameters for being reported on the MAO-004 shared in the March 2017 user group call?
- ✓ If questions remain, please send a description of what you are seeing, and what checks you have conducted, along with a sample of 13-digit ICNs in a Microsoft Excel document, to encounterdata@cms.hhs.gov. We will help you work through the issue you are seeing, conducting research, if needed.

Medicaid Status Data File Update

- The new Medicaid Status Data File is now available to plans via MARx
- This monthly report identifies the dual status and corresponding dual status codes for Full or Partial Dual eligible beneficiaries
- To verify that a beneficiary is a non-Dual for a month, plans can check the MARx UI for each instance of reported Medicaid for a beneficiary

Common Medicaid Status Data File Questions

- Plans may receive multiple detail records for a beneficiary, if the beneficiary has different Medicaid status (as indicated by the Dual status codes) across the months in the report.
- Record Types
 - Record Type 1 = Header. One per monthly report.
 - Record Type 2 = Beneficiary detail. One per monthly report.
 - Record Type 3 = Dual status for specified dates. For a monthly report, a separate Record Type 3 will be created for each dual status period. Record Type 3s will immediately follow the Record Type 2 for a beneficiary.

Common Medicaid Status

Data File Questions *(continued)*

- Example: Beneficiary A has three different dual status periods for January – June 2017. August monthly report will include:
 - Record Type 2 = Information about Beneficiary A
 - Record Type 3 = Full dual for 1/1/17 – 3/31/17
 - Record Type 3 = Partial dual for 4/1/17 – 5/30/17
 - Record Type 3 = Full dual for 6/1/17-6/30/17
- If a beneficiary's dual status for a month changes retroactively, the plan will see the updated status reported on the next monthly report.
- Reminder: retroactive adjustments to Dual status are not reflected in payment until final reconciliation.

PY 2016 Final Risk Score Run

- PY 2016 Final Risk Score Run
 - For PY 2016 CMS extended the deadline to submit encounter data (ED) to Monday, May 1, 2017.
 - The deadline for RAPS data remains the same: Tuesday, January 31, 2017.
 - Diagnoses will be considered for inclusion in the final 2016 risk score run if the respective ED or RAPS records are submitted by these deadlines.
 - Payment for 2016 based on ED diagnoses submitted through May 1, 2017 and RAPS diagnoses submitted through January 31, 2017 will go into October 2017 payment.

PY 2016 Final Risk Score Run *(continued)*

- To provide more time for plans to review the revised MAO-004 reports and assess their data submissions, CMS will later conduct a second run of the 2016 risk scores, taking in diagnoses data submitted on encounter data records submitted after May 1, 2017.

Risk Adjustment Overpayment Reporting Module (RAOR)

- Effective May 2, 2017, risk adjustment data submitters are instructed to report plan-identified overpayments through a new module in HPMS titled the “Risk Adjustment Overpayment Reporting” module (RAOR).
- To access this module follow this path:

HPMS Home Page > Risk Adjustment >
Risk Adjustment Overpayment Reporting

- Organizations will no longer report risk adjustment related overpayments to the Medicare Advantage and Part D (MAPD) Helpdesk.
- Step-by-step instructions for reporting in the RAOR module are provided in the Quick Reference Guide: Risk Adjustment Overpayment Reporting, available in the Documentation section of the module.



CMS CY 2018 Call Letter
***Encounter Data Monitoring and
Compliance Activities***

Monitoring and Compliance

- Goal:
 - to ensure the completeness and accuracy of encounter data overall and for risk adjustment purposes
- CY 2018 Final Call Letter
 - Presents CMS' framework for monitoring and compliance of encounter data
 - Solicits feedback from stakeholders

Monitoring and Compliance *(continued)*

- CMS has been conducting basic monitoring of MAOs' encounter data submissions since 2012. The continuation of monitoring and proposed compliance efforts was set forth in the Call Letter.
- Approach (laid out in Call Letter) –
 - 3 performance areas as framework
 - Operational Performance
 - Completeness Performance
 - Accuracy Performance

Monitoring and Compliance *(continued)*

- Incremental approach
- Performance measures
 - Begin with basic performance measures (i.e., failure to complete end-to-end certification and failure to submit any encounter data records (assuming the contract has enrollees))
 - Further development of additional measures over time
 - Propose and request feedback on new measures and acceptable performance thresholds (benchmarks) via the Call Letter, HPMS memos, or other guidance communications

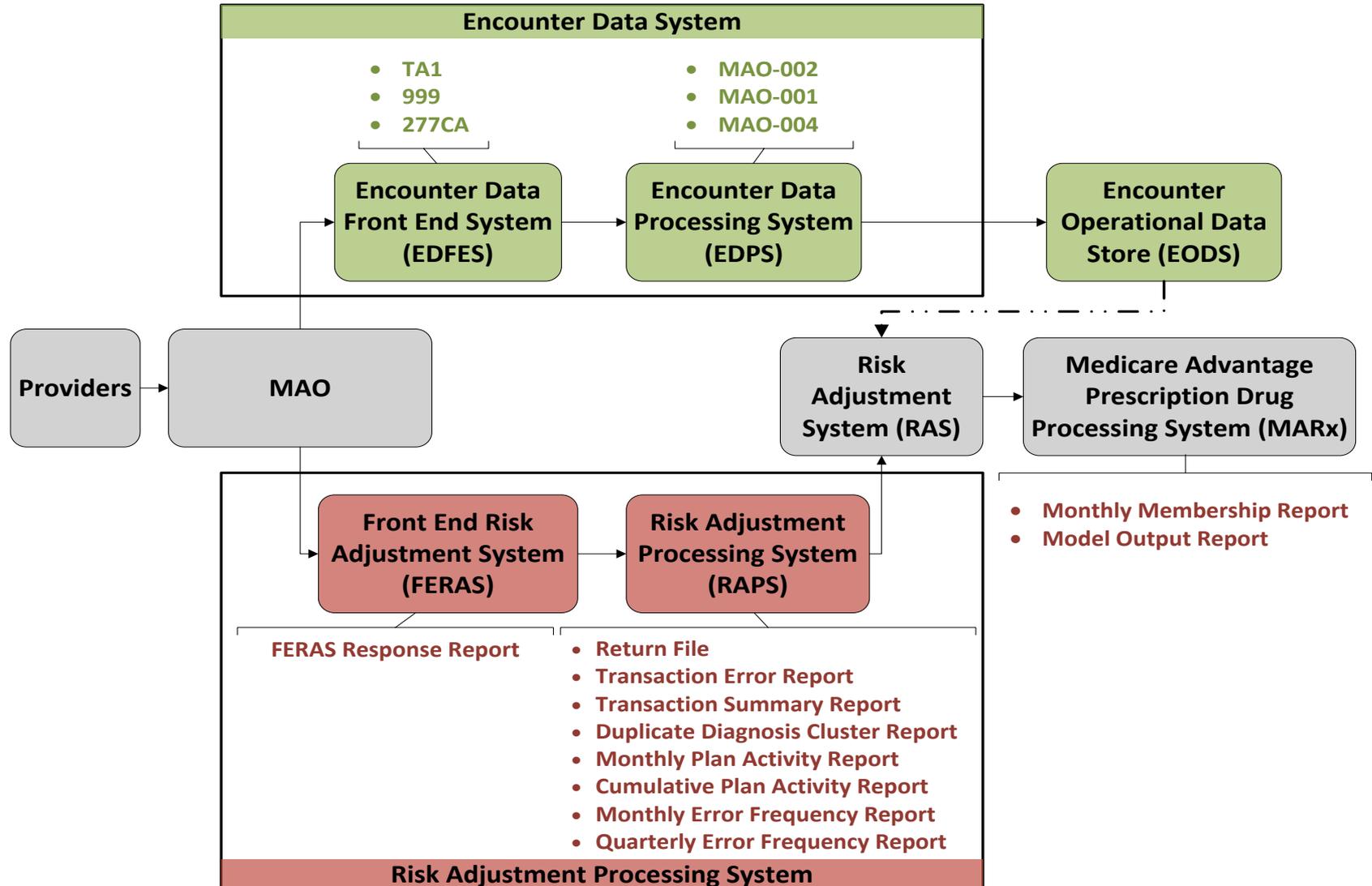
Additional Outreach

- CMS is planning to conduct one-on-one calls with submitters to provide technical assistance and will provide more information in coming months
- CMS has set a goal to issue report cards on quarterly basis in 2017
- CMS is developing consolidated guidance documents
- CMS has launched a project to conduct on-site visits to gather information about encounter data submission

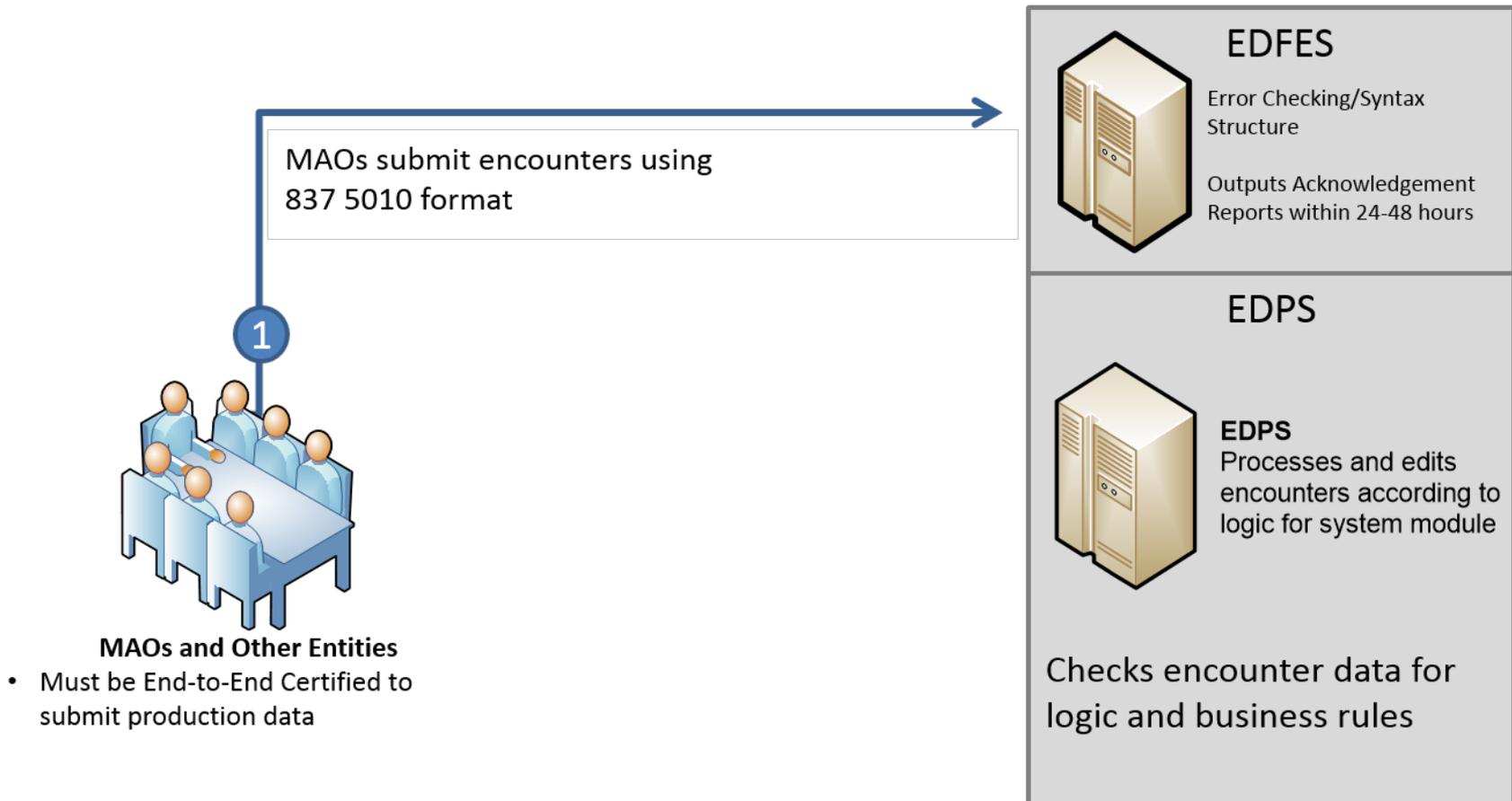


EDS Submission Overview

EDS & RAPS Processing Flow



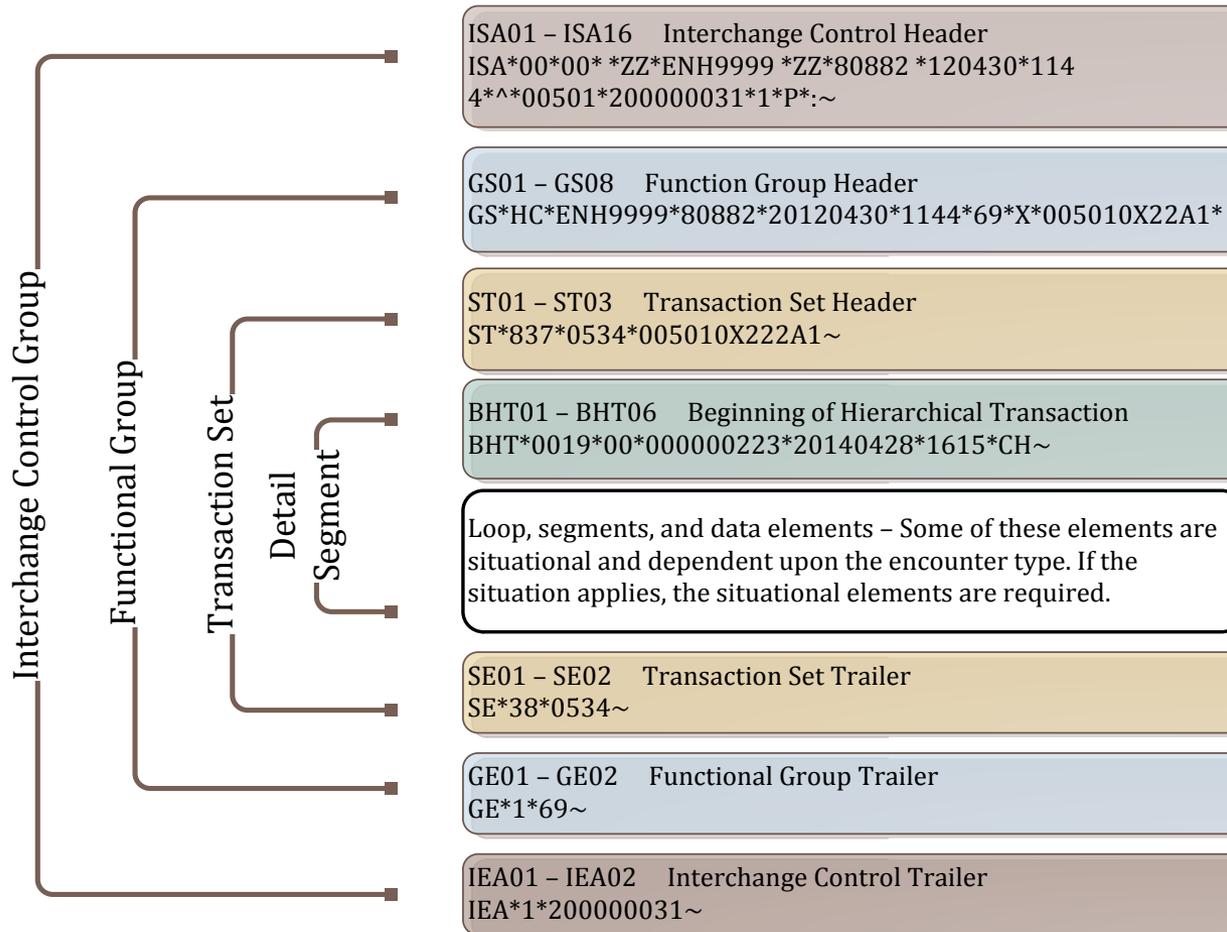
EDS Submission Overview



Submission Format

- The ANSI X12 5010 837 submission format comprises:
 - Interchange Control Group (ISA/IEA)
 - Functional Group (GS/GE)
 - Transaction Set (ST/SE)
 - Detail Segment (BHT)
 - Loop, segments, and data elements

X12 Submission Envelope



EDS reports follow the sequence of the submission envelope from submission file syntax through detailed line items.

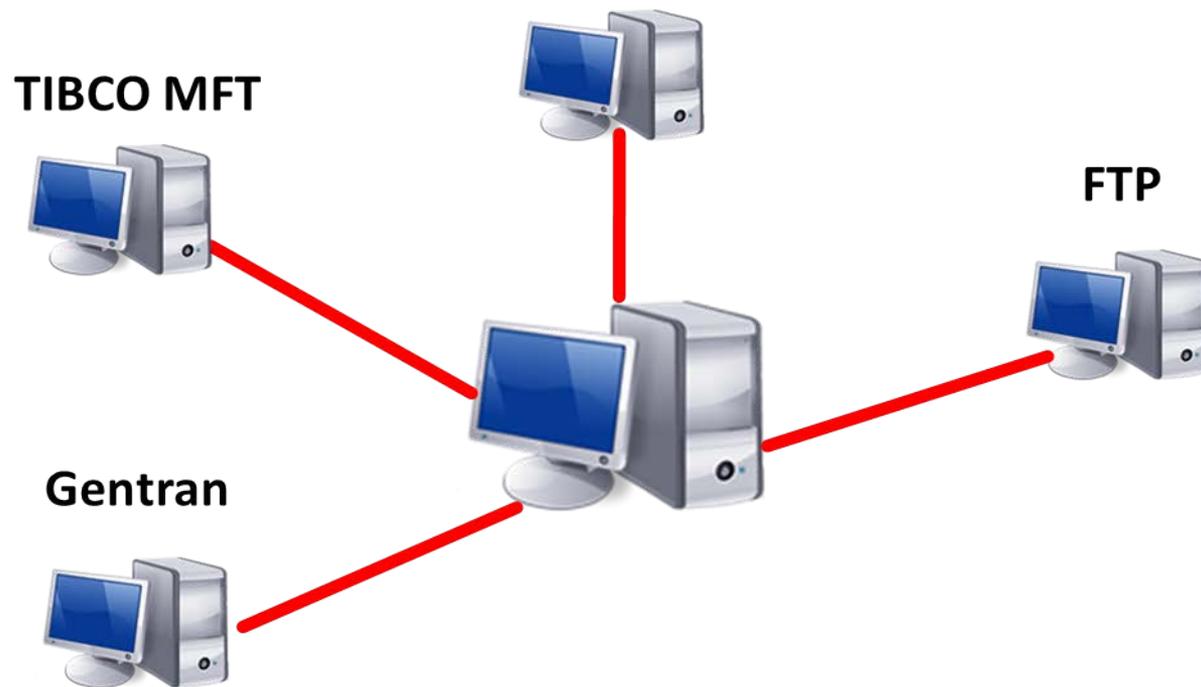
Note: The file structure overview populated on this slide is an example and does not provide full details for submission of all situational loops, segments, and data elements in the 837-P or 837-I.



Encounter Data System Reports Overview

Accessing Reports

Connect: Direct



EDFES, MAO-001, and MAO-002 Reports Restoration

- MAOs are encouraged to save reports
- CMS sets limits on restoring of EDS reports
 - 999 and 277CA cannot be older than 20 business days
 - MAO-001 and MAO-002 reports cannot be older than 60 business days
 - Requests for more than 200 files will not be accepted
- To request EDFES, MAO-001, or MAO-002 report restoration, contact

cssoperations@palmettogba.com

MAO-004 Reports Requests

MAO-004 reports are available through the MARx User Interface (UI)

- Access the MARx UI
- Go to the “Reports” menu
- Select “Monthly” frequency
- Select “Start Month/Year”
- Select “End Month/Year”
- On the “Report/Data File” drop down select “Risk Adjustment Eligible Diagnosis Report”
- Add your “Contract ID”
- Select “Find”

The reports will populate and become available for download.

NOTE: Do not specify file type.

EDS Reports Overview

EDFES Acknowledgement Reports

EDFES Report Type	Description
EDFES Notifications	Special notifications when encounters have been processed, but will not proceed to the EDPS for further processing.
TA1	Provides notification of syntax and formatting errors
999	Provides notification implementation compliance status
277CA	Provides a claim level acknowledgement of all encounters received

EDPS Processing Status Reports

EDPS Report Type	Description
MAO-001 Encounter Data Duplicates	Lists all encounters that received duplicate errors (98300, 98325, 98320, and 98315) *MAOs and other entities will not receive the MAO-001 report if there are no duplicate errors received on submitted encounters
MAO-002 Encounter Data Processing Status	Lists the accepted and rejected status of all encounters for claim and line levels along with error codes
MAO-004 Encounter Data Diagnoses Eligible for Risk Adjustment	Lists all diagnoses from accepted encounters which are eligible for risk adjustment

EDFES Notifications

- The EDFES distributes special notifications to submitters when encounters have been processed by the EDFES, but will not proceed to the EDPS for further processing.
- These notifications are in addition to standard EDFES Acknowledgement Reports (TA1, 999, and 277CA) in order to avoid returned, unprocessed files from the EDS.
- For a list of the EDFES Notifications, refer to the appropriate EDS Companion Guide, section 6.7, Table 10 on the CSSC Operations website:
<http://www.csscoperations.com/internet/cssc3.nsf/docsCat/CSSC~CSSC%20Operations~Medicare%20Encounter%20Data~Companion%20Guides?open&expand=1&navmenu=Medicare^Encounter^Data||>

File Naming Conventions

File name components for EDFES and MAO-001 and MAO-002 reports assist MAOs and other entities in identifying the report types

FILE NAME COMPONENT	DESCRIPTION
RSPxxxxx	The type of data 'RSP' and a sequential number assigned by the server 'xxxxx'
X12xxxxx	The type of data 'X12' and a sequential number assigned by the server 'xxxxx'
TMMDDCCYYHHMMS	The Date and Time stamp the file was processed
999xxxxx	The type of data '999' and a sequential number assigned by the server 'xxxxx'
RPTxxxxx	The type of data 'RPT' and a sequential number assigned by the server 'xxxxx'
EDPS_XXX	Identifies the specific EDPS Report along with the report number (i.e., '002', etc.)
XXXXXXXX	Seven (7) characters available to be used as a short description of the contents of the file
RPT/FILE	Identifies if the file is a formatted report 'RPT' or a flat file 'FILE' layout

EDFES File Naming Conventions

- CMS established unique file naming conventions for EDFES and EDPS reports
- The file names ensure that specific reports are appropriately distributed to each secure mailbox
 - Gentran/TIBCO
 - FTP

EDFES Acknowledgement Reports File Naming Conventions

Report Type	Gentran/TIBCO Mailbox	FTP Mailbox – Text
TA1	P.xxxxx.EDS_REJT_IC_ISAIEA.pn	X12xxxxx.X12.TMMDDCCYYHHMMS
999A	P.xxxxx.EDS_ACCPT_FUNCT_TRANS.pn	999#####.999.999
999R	P.xxxxx.EDS_REJT_FUNCT_TRANS.pn	999#####.999.999
277CA	P.xxxxx.EDS_RESP_CLAIM_NUM.pn	RSPxxxxx.RSP_277CA

EDPS File Naming Conventions

EDPS Processing Status Reports File Naming Conventions MAO-001 and MAO-002

CONNECT.	NAMING CONVENTION FORMATTED REPORT	NAMING CONVENTION FLAT FILE LAYOUT
GENTRAN/ TIBCO	P.xxxxx.EDPS_001_DataDuplicate_Rpt P.xxxxx.EDPS_002_DataProcessingStatus_Rpt	P.xxxxx.EDPS_001_DataDuplicate_File P.xxxxx.EDPS_002_DataProcessingStatus_File
FTP	RPTxxxxxx.RPT.PROD_001_DATDUP_RPT RPTxxxxxx.RPT.PROD_002_DATPRS_RPT	RPTxxxxxx.RPT.PROD_001_DATDUP_File RPTxxxxxx.RPT.PROD_002_DATPRS_File



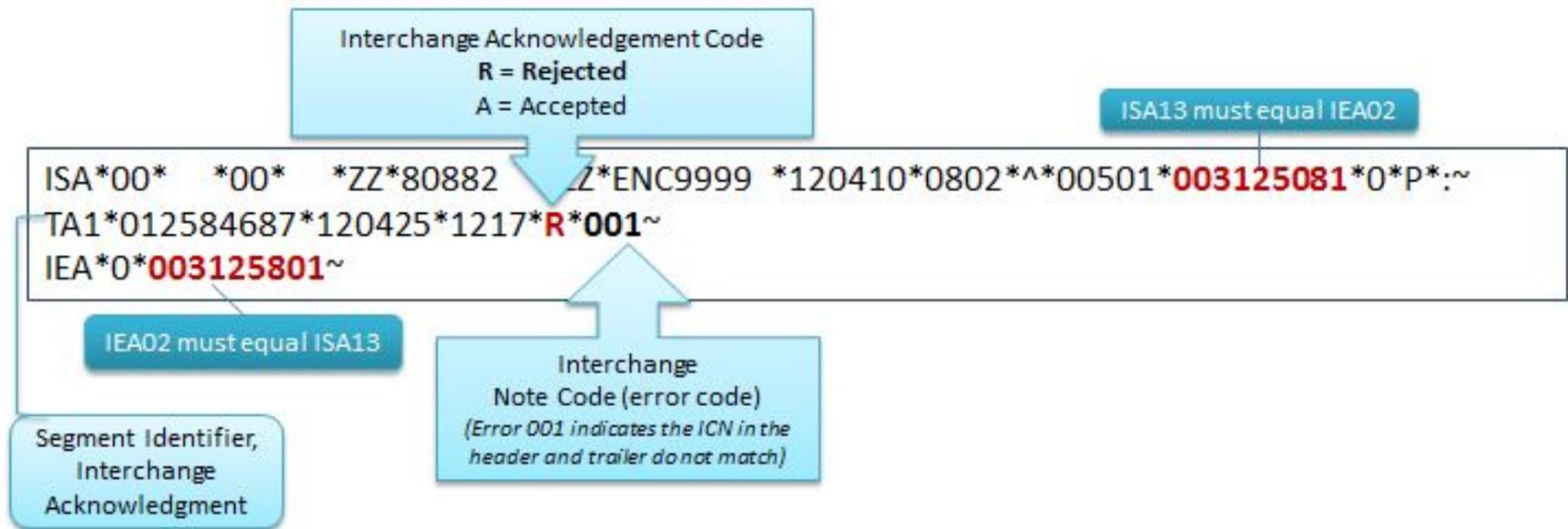
EDFES Acknowledgement Reports

Interchange Envelope Conformance and Acknowledgement

- Upon receipt of the inbound 837, the EDS Translator performs syntax editing
- Issues detected in the ISA/IEA interchange will cause the 837 file to reject
 - MAOs must correct and resubmit the entire file
- A TA1 Acknowledgement report is generated if the transaction is rejected

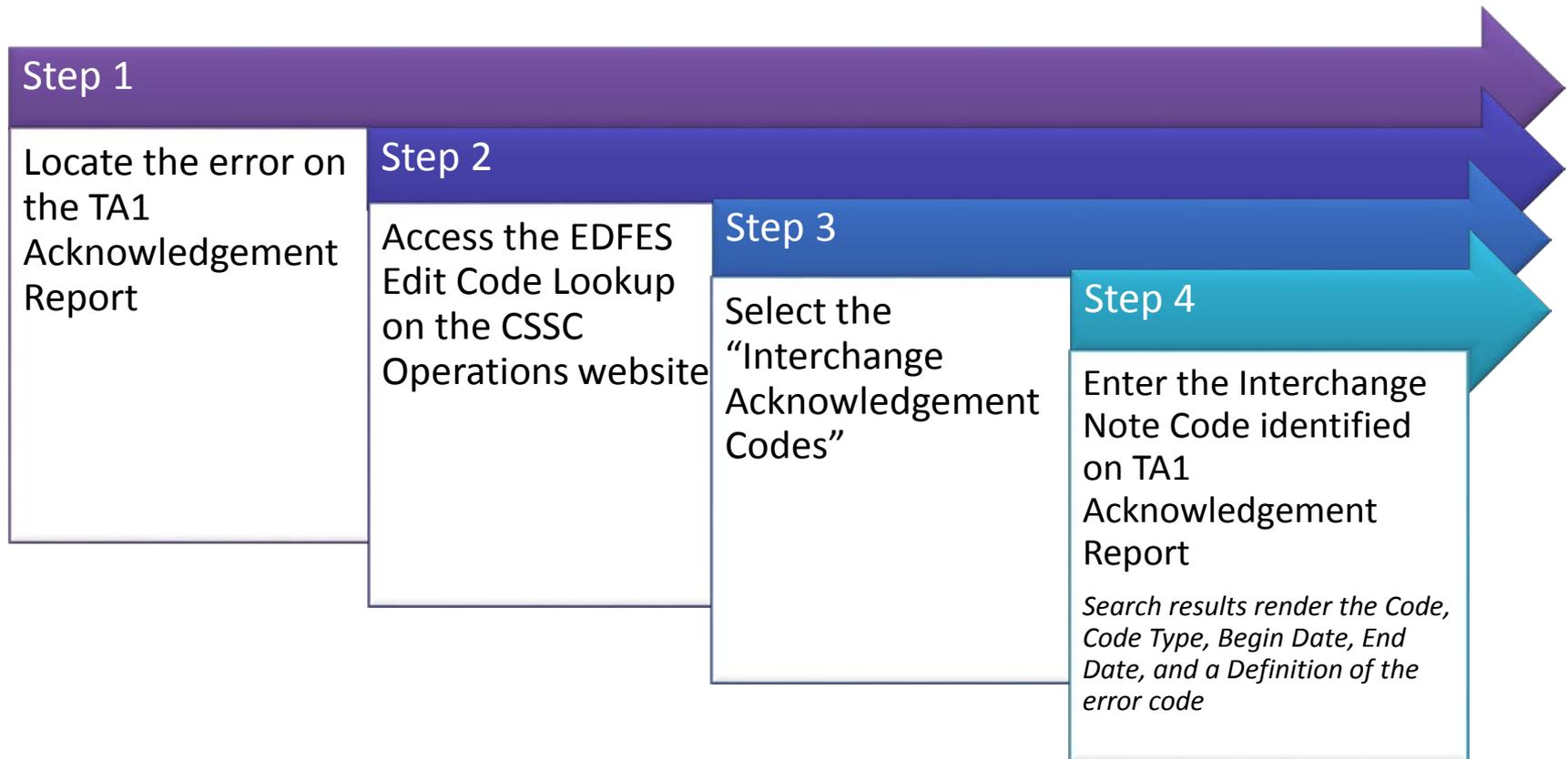
Interpreting the TA1 Acknowledgement Report - Rejected

TA1 Acknowledgement Report with inconsistent Interchange Control Numbers (ICNs):



For EDS processing, a TA1 is generated only when there is a rejection

TA1 Acknowledgement Report – Error Resolution



TA1 Acknowledgement Report – Error Resolution *(continued)*

CSSC > Medicare Encounter Data > Edits

Palmetto GBA
A CELEBRAN GROUP COMPANY

HOME ARCHIVES CONTACT US E-MAIL UPDATES

Electronic Data Interchange (EDI)
Medicare Encounter Data
Companion Guides
ED Testing
Edits
EDPS Bulletins
Enroll to Submit Encounter Data
HPMS Memos
ListServ
Newsletters

CSSC Operations / Medicare Encounter Data / Edits

Medicare Encounter Data
Edits

EDPS Error Code Look-up Tool
CMS 5010 Edit Spreadsheet
EDFES Edit Code Lookup

05/17/2013

Instructions: To look up an Encounter Data code description, enter the code, choose a code type then click the <Search> button.

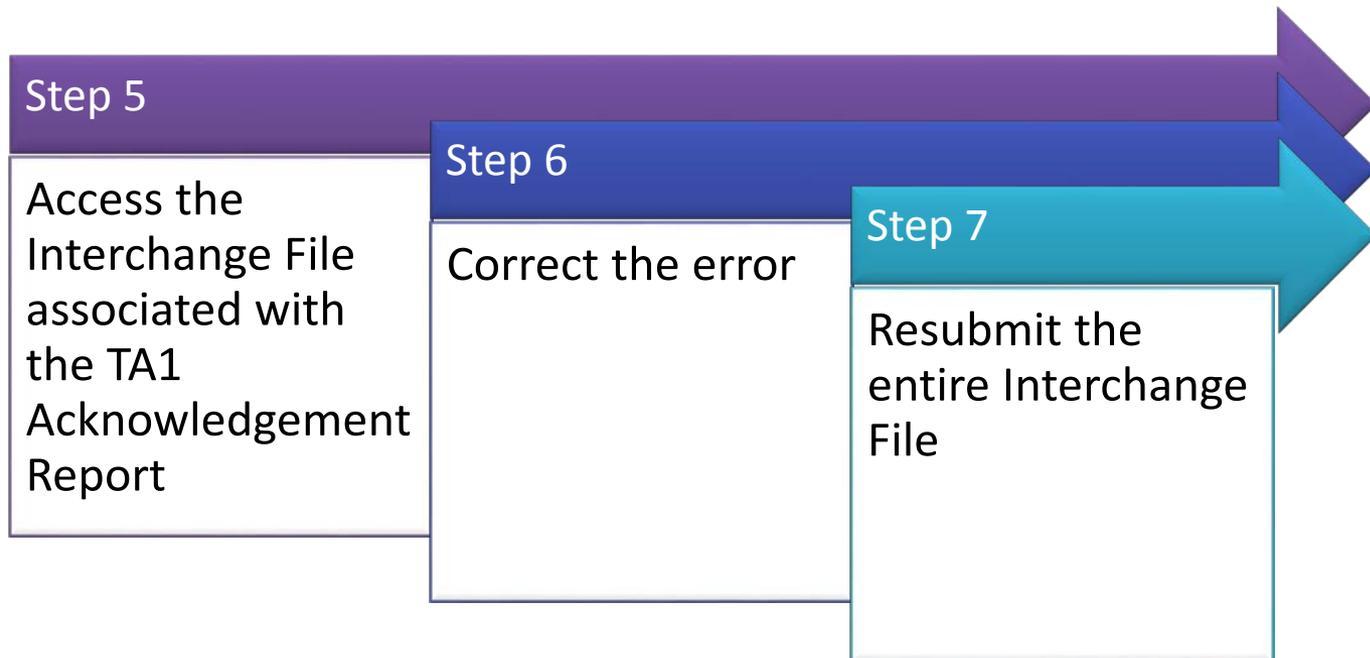
Enter Error Code

CLAIM ADJUSTMENT REASON CODES
 HEALTH CARE SERVICES DECISION REASON CODES
 PROVIDER TAXONOMY
 REMITTANCE ADVICE REMARK CODES
 CLAIM STATUS CATEGORY CODES
 CLAIM STATUS CODES
 INTERCHANGE ACKNOWLEDGEMENT CODES

Search Results

Code	001
Code Type	INTERCHANGE ACKNOWLEDGEMENT CODES
Begin Date	19950101
End Date	
Definition	The Interchange Control Number in the Header and Trailer Do Not Match. The Value from the Header is Used in the Acknowledgment.

TA1 Acknowledgement Report – Error Resolution *(continued)*



```
ISA*00*  *00*  *ZZ*80882  *ZZ*ENC9999 *120410*0802*^*00501*003125081*0*P*::~~  
IEA*0*003125081~
```

X12 Standard Conformance and Implementation Guide (IG) Conformance

- The 999 Acknowledgement Report:
 - Identifies the processing status of the functional groups (GS/GE) and transactions sets (ST/SE) within the submission
 - 999A = all transaction sets were accepted
 - 999P = partially accepted (at least one transaction set was rejected)
 - 999R = syntax errors were noted and submitter needs to correct/resubmit

999 Acknowledgement Report – Segments

The 999 report is composed of segments that report information on the submitted 837 file

Segment	Description
<u>IK3</u> error identification	Reports a segment error
<u>IK4</u> data element	Reports an error at the data element level and, if required, there is a CTX context segment after the IK4 to describe the context within the segment
<u>IK5</u> and <u>AK9</u> segments are always present	Notes the transaction set and/or the functional group's accept or reject status

Interpreting the 999 Acknowledgement Report Accepted (999A)

GS - Functional Group Header Segment

ST - Transaction Set Header Segment

```
ISA*00* 00* 828*33477*28*EM08041*101208*1104*^*00501*000004308*0*P*:~  
GS*FA*0046*ND00001*20101208*110418*1*X*005010X231A1~  
ST*999*0001*005010X231~  
AK1*HC*100000001*005010X222~  
AK2*837*PE72330A*005010X222~  
IK5*A~  
AK9*1*1*1~  
SE*6*0001~  
GE*1*1~  
IEA*1*000004308~
```

AK1 - Functional Group Response Header Segment

AK2 - Transaction Set Response Header Segment

AK9 - Functional Group Response Trailer Segment

Interpreting the 999 Acknowledgement Report Rejected (999R)

```
ISA*00* 00* 828*33477*28*EM08041*101208*0934*^*00501*000004287*0*P*::~~
GS*FA*0046*ND00001*20101208*093425*1*X*005010X231A1~
ST*999*0001*005010X231~
AK1*HC*100000001*005010X222~
AK2*837*PE72330A*005010X222~
IK3*DTP*33*2400*8~
IK4*3*1251*7*20090711~
IK5*R*5~
AK9*R*1*1*0~
SE*10*0001~
GE*1*1~
IEA*1*000004287~
```

IK3 and IK4 segments
identify errors within
the transaction

IK5 and AK9 indicate
the transaction has
been rejected

999R Error Resolution

Step 1 – Using data from the IK3 and IK4 segments, identify the error causing a rejection

IK3*DTP*33*2400***8**~

IK3	DTP	33 / 37	2400	8
999 segment ID “Error Identification”	ID of segment in error (DTP segment)	Position of the segment in error relative to the start of the transaction set	ID of loop containing segment in error (2400 loop)	Syntax error code 8 = “segment has data element errors. See TR3 document for the 999 transaction.

IK4*3*1251***7***20090711~

IK4	3	1251	7	20090711
999 Segment ID “Implementation Data Element Note”	Position of the data element error in the segment	Data element reference number. See TR3 document for the 999 transaction.	Syntax Error Code 7 = “Invalid Code Value”	Date

999R Error Resolution *(continued)*

Step 2 – Identify the error code in the CMS 5010 Edit Spreadsheet

837I Edit Reference	Segment/Element	Description	5010 Values	TA1/999/277CA	Accept/Reject	Disposition/Error Code	Proposed 5010 Edits
X223.433.2400.DT P02.020	DTP02	Date Time Period Format Qualifier	D8, RD8	999	R	IK403 = 7 “Invalid Code Value”	2400.DTP02 must be valid values
X223.433.2400.DT P03.020	DTP03	Service Date	CYYMMDD, CCYYMMDD- CCYYMMDD	999	R	IK403 = 8 “Invalid Date”	If 2400.DTP02 = “D8” then 2400.DTP03 must be a valid date in CCYYMMDD format

- Step 3 – Use the guidance in the “Proposed 5010 Edits” column to correct submission issues
- Step 4 – Resubmit transaction

Note: this is an excerpt of the CMS 5010 Edit Spreadsheet and does not completely represent all fields contained in the spreadsheet.

CMS 5010 Edits Spreadsheet

MAOs and other entities are able to access the CMS 5010 Edits information on the CMS website at:

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/>

1. Select the current year in the left navigation column (e.g., 2017 Transmittals)
2. Key in 'EDI Front End Updates' in the 'Filter On' box
3. Select the most current transmittal to obtain the latest versions of the CEM Edits Spreadsheets
4. Click on the link(s) under 'Downloads' at the bottom of the page

The screenshot illustrates the steps to access the CMS 5010 Edits Spreadsheet. It shows the '2017 Transmittals' page with a search filter set to 'EDI Front End Updates'. The table below lists the transmittals, with the most current one (R1806OTN) highlighted. The 'Downloads' section at the bottom provides links to the spreadsheet files.

Transmittal #	Issue Date	Subject	Implementation Date	CR #	MM Article #	MM Article Release Date
R1767OTN	2017-01-06	Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for July 2017	2017-07-03	9881		
R1806OTN	2017-03-14	Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for July 2017	2017-07-03	9881		

Downloads

- [R1767OTN \[ZIP, 3MB\]](#)
- [R1767OTN \[PDF, 14KB\]](#)

CMS 5010 Edits Spreadsheet (continued)

1	Version EA20144V01			<p>Automatic formats of the CMS 5010 Edits Spreadsheet are required, please use the "Submit" button located at the bottom of the Technical Documentation Web page, from which these documents were downloaded.</p> <p>http://www.cms.gov/MFFS5010D0/20_TechnicalDocumentation.asp</p> <p>The Data Interchange Standards Association(DISA) holds a copyright on the TR3 documents: Copyright (c) 2009, Data Interchange Standards Association on behalf of ASC X12. Format (c) 2009, http://store.x12.org/</p>												
2																
3																
4	837I Edit Reference	Implementation Date to Activate Edit	Implementation Date to De-activate Edit	Segment or Element	Description	ID	Min. Max.	Usage Req.	Loop	Loop Repeat	5010 Values	TA# 999/ 277C A	Accept/Reject	Disposition / Error Code	Proposed 5010 Edits	Misc. No
3398	X223.429.2400.PWK08.010	7/1/2011		PWK08	ACTIONS INDICATED			NIU				999	E	IK403 = I0: "Implementation "Not Used" Element Present"	Must not be present.	
3399	X223.429.2400.PWK09.010	7/1/2011		PWK09	Request Category Code	ID	1-2	NIU				999	E	IK403 = I0: "Implementation "Not Used" Element Present"	Must not be present.	
3400		7/1/2011														
3401	X223.433.2400.DTP.010 deactivated	7/1/2011	7/1/2011													
3402	X223.433.2400.DTP.020	7/1/2011		DTP	SERVICE LINE DATE		1 S	2400				999	R	IK304 = 5: "Segment Exceeds Maximum Use"	Only one iteration of 2400.DTP with DTP01 = "472" is allowed.	
3403	X223.433.2400.DTP01.010	7/1/2011		DTP01	Date TimeQualifier	ID	3-3	R		472		999	R	IK403 = 1: "Required Data Element Missing"	2400.DTP01 must be "472".	
3404	X223.433.2400.DTP02.010	7/1/2011		DTP02	Date Time Period FormatQualifier	ID	2-3	R		D8, RD8		999	R	IK403 = 1: "Required Data Element Missing"	2400.DTP02 must be present.	
3405	X223.433.2400.DTP02.020	7/1/2011		DTP02								999	R	IK403 = 7: "Invalid Code Value"	2400.DTP02 must be valid values.	
3406	X223.433.2400.DTP03.010	7/1/2011		DTP03	Service Date	AN	1-35	R		CYYMMDD, CCYYMMDD-CCYYMMDD		999	R	IK403 = 1: "Required Data Element Missing"	2400.DTP03 must be present.	
3407	X223.433.2400.DTP03.020	7/1/2011		DTP03								999	R	IK403 = 8: "Invalid Date"	If 2400.DTP02 = "D8" then 2400.DTP03 must be a valid date in CCYYMMDD format.	
3408	X223.433.2400.DTP03.030	7/1/2011		DTP03								999	R	IK403 = 8: "Invalid Date"	If 2400.DTP02 = "RD8" then 2400.DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format.	
3409	X223.433.2400.DTP03.040	7/1/2011		DTP03								277	C	CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 187: "Date(s) of service"	2400.DTP03 may not be a future date.	CMS business ed 02/04: Companio Note needed
3410		7/1/2011														

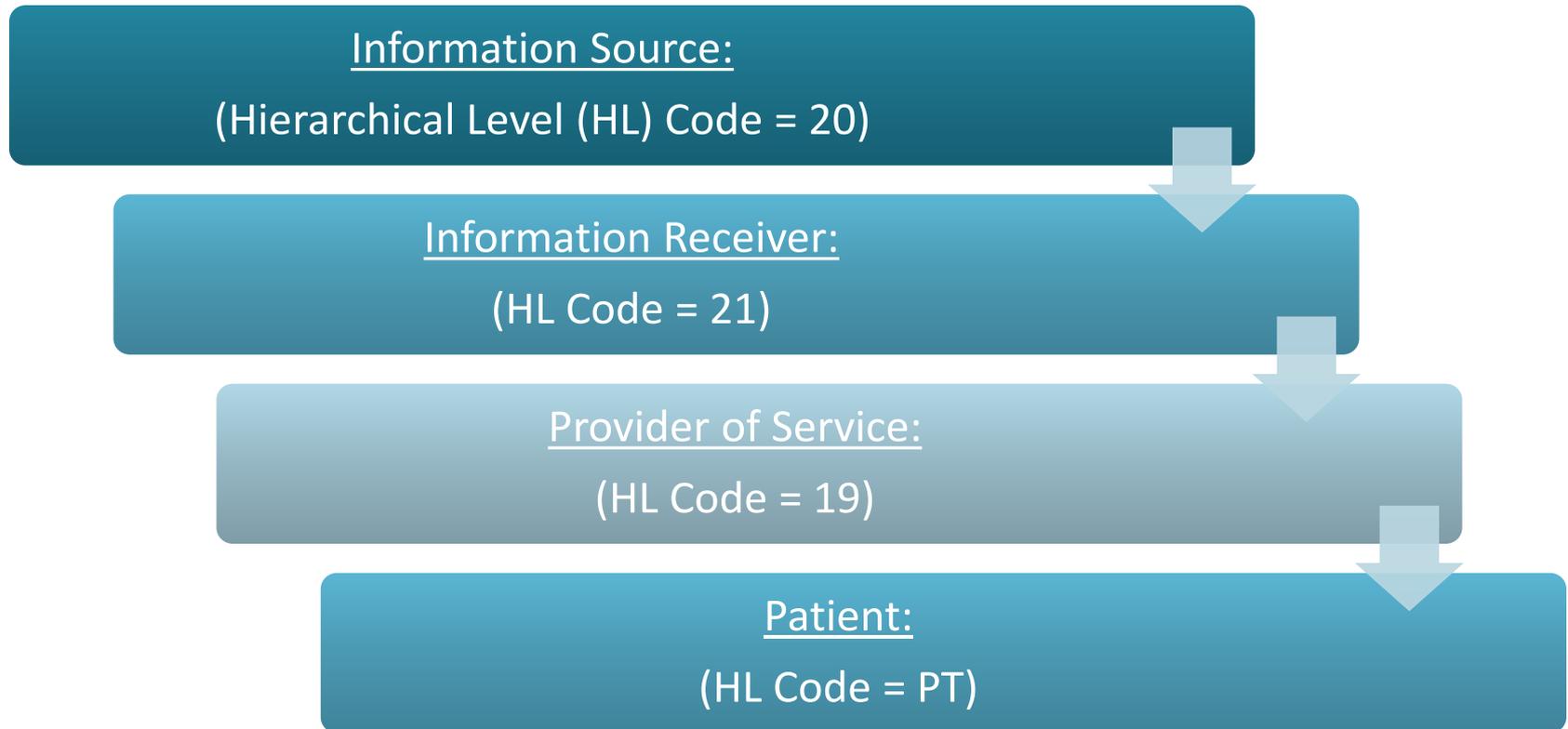
277CA Acknowledgement Report

- The 277CA Acknowledgement Report:
 - Provides rejection responses based on edit failures detected by CEM
 - Assigns an ICN for each *accepted* encounter

Note: Rejected encounters must be corrected and resubmitted in order to receive an ICN

277CA Acknowledgement Report Structure

- The 277CA Acknowledgement is divided into hierarchical levels



Interpreting the 277CA Acknowledgement Report - Accepted

ISA*00* *00* *ZZ*10302 *ZZ*GA12345678 *140914*1105*^*0 0501*000000001*0*T*:~
 GS*HN*10302*GA12345678*20140914*110505*1*X* 005010X214~
 ST*277*000000001*005010X214~
 BHT*0085*08*11257*20 140914*1355*TH~

HL*1**20*1~
 NM1*PR*2*PALMETTO GBA SOUTH CAROLINA*****46*80882~
 TRN*1*11111333111113335555555001~
 DTP*050*D8*20140914~
 DTP*009*D8*20140914~

HL*2*1*21*1~
 NM1*41*2*INTERNAL MED ASSOC*****46*GA12345678~
 TRN*2*0001~
 STC*A1:19:PR*20140914*WQ*7766.00~

QTY*90*1~
 QTY*AA*1~
 AMT*Y J*5803.00~
 AMT*Y/*1963.00~

HL=20
(Information Source)

HL=21
(Information Receiver)

“WQ = Accept: Indicates the file was accepted at the receiver/submitter level

Claim status category code (A1 = “The claim/encounter has been received”): Claim status code (19 = “Entity acknowledges receipt of claim/encounter”): Entity identifier code (PR= “Payer”)

Number of claims accepted and rejected

Interpreting the 277CA Acknowledgement Report – REF Segment ICN

HL=PT
(Patient –
Claim Level)

HL*4*3***PT**~
NM1*QC*1*SUMMER*BREEZE****MI*ABC123456789~
TRN*2*AR100839~
STC*A1:1:QC*20140914***WQ***7433~
REF*1K***1911290153580**~
DTP*472*D8*20140816~

“WQ = Accept: Indicates the
file was accepted at the **claim**
level

The REF Segment
provides the ICN for
accepted submissions

Interpreting the 277CA Acknowledgement Report – Rejected

STC Segment Action Code
U = Rejected

NM1*41*2*ABCMAO 0 ENC9999
TRN*2*6F7E5A388D59474 040C014AC~
STC*A8:746:40*20140403***U***1274321.46~
QTY*AA*4908~
AMT*YY*1274321.46~
SE*14*000000001~

Claim status category code (A8 = "Acknowledgement / Rejected for relational field in error"); Claim status code (746 = "Duplicate Submission Note"); Entity identifier code (40 = "Receiver")

277CA Acknowledgement Report – Error Resolution

Step 1

- Locate the error(s) on the 277CA Acknowledgement Report

Step 2

- Access the EDFES Edit Code Lookup on the CSSC Operations website

Step 3

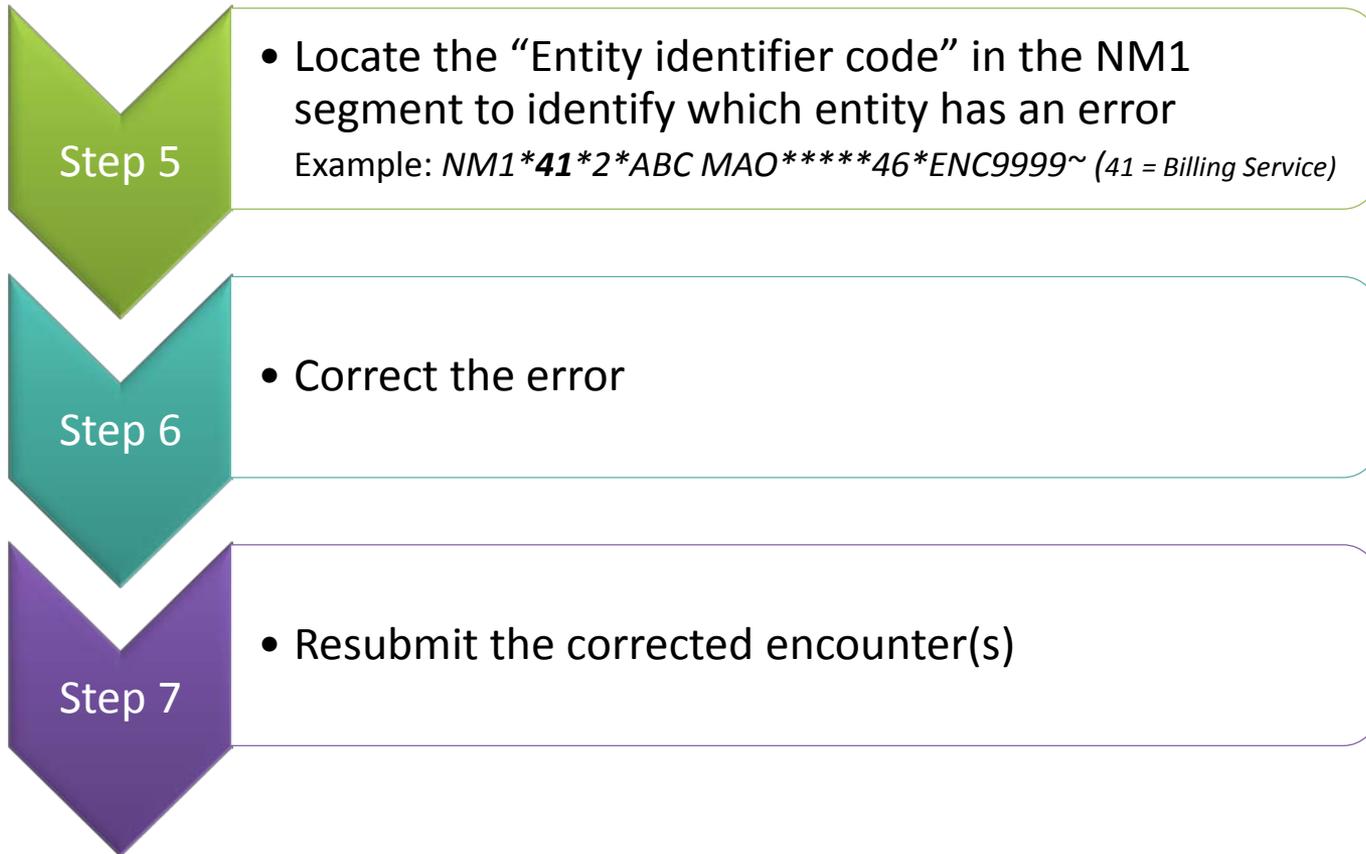
- Select the “Claim Status Codes” option in the Lookup tool listing

Step 4

- Locate the QTY segment on the 277 CA Acknowledgement Report and determine total rejected quantity

Example: *QTY*AA*4908 (AA = Unacknowledged Quantity)*

277CA Acknowledgement Report – Error Resolution *(continued)*



Note: MAOs are encouraged to coordinate with their vendors to assist with translating the 277CA.



EDPS Processing Status Reports

Report Layout

- MAO-001 and MAO-002 reports are delivered to submitters in two layouts - flat file and formatted
- MAO-004 reports are delivered to submitters in a flat file layout
- Flat file reports are categorized by:
 - Header record
 - Detail record
 - Trailer record

MAO-001 and MAO-002 Reports

- The MAO-001 Encounter Data Duplicates Report provides information exclusively for rejected encounters and service lines that receive:
 - Error Code 98300 - Exact Inpatient Duplicate Encounter
 - Error Code 98315 – Linked Chart Review Duplicate
 - Error Code 98320 – Chart Review Duplicate
 - Error Code 98325 – Service Line(s) Duplicated
- The MAO-002 Encounter Data Processing Status Report reports the status of all encounter service lines (accepted and rejected) in an encounter file along with error codes and descriptions.

MAO-001 Duplicates Report – Flat File Layout

Header Record

There is only one header per record per file.

Position(s)	Item	Notes	Length	Format
1	Record Type	0=Header	1	Numeric, no commas and/or decimals
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "MAO-001"	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-18	Report Date	Date that the report was created by EDPSC	8	Numeric, format CCYYMDD
19	Delimiter		1	Uses the * character value
20-27	Transaction Date		8	Numeric, format CCYYMMDD
28	Delimiter		1	Uses the * character value
29-67	Report Description	Value is "Encounter Data Duplicates Report"	39	Alpha Numeric, Left Justify, Blank Fill
68	Delimiter		1	Uses the * character value
69-73	Filler		5	Blank – (Removal of Contract ID)
74	Delimiter		1	Uses the * character value
75-104	Submission Interchange Number	Interchange Sender ID (ISA06) + Interchange Control Number (ISA13) + Interchange Date (ISA09)	30	Alpha Numeric
105	Delimiter		1	Uses the * character value
106-108	Record Type	Value is "INS", "PRO", "DME"	3	Alpha Numeric
109	Delimiter		1	Uses the * character value
110-113	Submission File Type	Value is "TEST" or "PROD"	4	Alpha Numeric
114	Delimiter		1	Uses the * character value
115-200	Filler		86	Spaces

MAO-001 Duplicates Report – Flat File Layout *(continued)*

Detail Record

There may be multiple detail records per file.

Position(s)	Item	Notes	Length	Format
1	Record Type	1=Detail	1	Numeric, no commas and/or decimals
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "MAO-001"	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-15	Medicare Advantage Contract ID	Medicare Contract ID assigned to the MA Plan	5	Alpha Numeric
16	Delimiter		1	Uses the * character value
17-36	Plan ID (CCN)	Plan Internal Control Number	20	Alpha Numeric
37	Delimiter		1	Uses the * character value
38-56	Encounter ICN	Internal Control Number. In encounter data, only 13 spaces represent the ICN; however, additional spaces allow for other use.	19	Alpha Numeric
57	Delimiter		1	Uses the * character value
58-60	Encounter Line Number	Internal line number generated by EDPS.	3	Numeric, no commas and/or decimals
61	Delimiter		1	Uses the * character value
62-81	Duplicate Plan Encounter ID (CCN)	Duplicate Plan ID stored in EODS	20	Alpha Numeric
82	Delimiter		1	Uses the * character value
83-101	Duplicate Encounter ICN	Duplicate Encounter ICN identified in EODS. In encounter data, only 13 spaces represent the ICN. Additional spaces allow for other use.	19	Alpha Numeric
102	Delimiter		1	Uses the * character value
103-105	Duplicate Encounter Line Number	Internal line number generated by EDPS	3	Numeric, no commas and/or decimals
106	Delimiter		1	Uses the * character value
107-118	Beneficiary HICN	Beneficiary Health Insurance Claim Number	12	Alpha Number
119	Delimiter		1	Uses the * character value
120-127	Date of Service		8	Numeric, format CCYYMMDD
128	Delimiter		1	Uses the * character value
129-133	Error Code	Error Code	5	Alpha Numeric
134	Delimiter		1	Uses the * character value
135-200	Filler		66	Spaces

MAO-001 Duplicates Report – Flat File Layout *(continued)*

Trailer (Totals) Record

There is only one trailer per record file.

Position(s)	Item	Notes	Length	Format
1	Record Type	9=Trailer	1	Numeric, no commas and/or decimals
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "MAO-001"	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-18	Total Number of Duplicate Encounter Lines Rejected		8	Numeric, no commas and/or decimals
19	Delimiter		1	Uses the * character value
20-27	Total Number of Encounter Lines Submitted		8	Numeric, no commas and/or decimals
28	Delimiter		1	Uses the * character value
29-36	Total Number of Encounter Records Submitted		8	Numeric, no commas and/or decimals
37	Delimiter		1	Uses the * character value
38-200	Filler		163	Numeric, no commas and/or decimals

MAO-001 Duplicates Report – Formatted Layout

Encounter Data Duplicates Report
 Report Run Date 04/07/2017 06:31AM
 Medicare Advantage Contract ID: XXXXX
 PROD

Page 1
 Report ID: MAO-001
 Submission Interchange Number: XXXXXXXXXXXXXXXXXXXX20170404
 Report Date: 04/07/2017
 Transaction Date: 04/06/2017

Record Type	Plan Encounter ID (CCN)	Encounter ICN	Encounter Line Number	Duplicate Plan Encounter ID (CCN)	Duplicate Encounter ICN	Duplicate Encounter Line Number	Beneficiary HICN	Date of Service	Error Code
PRO	11111111101	11111111111	001	22222222221	22222222211	001	XXXXXXXXXXXX	DD/MM/YYYY	98325
PRO	11111111102	11111111112	001	22222222222	22222222212	001	XXXXXXXXXXXX	DD/MM/YYYY	98325
PRO	11111111103	11111111113	001	22222222223	22222222213	001	XXXXXXXXXXXX	DD/MM/YYYY	98325
PRO	11111111104	11111111114	001	22222222224	22222222214	001	XXXXXXXXXXXX	DD/MM/YYYY	98325
			002	22222222224	22222222214	002	XXXXXXXXXXXX	DD/MM/YYYY	98325
PRO	11111111105	11111111115	001	22222222225	22222222215	001	XXXXXXXXXXXX	DD/MM/YYYY	98325
PRO	11111111106	11111111116	001	22222222226	22222222216	001	XXXXXXXXXXXX	DD/MM/YYYY	98325

TOTALS:

Total Number of Duplicate Encounter Lines Rejected: 7
 Total Number of Encounter Lines Submitted: 6769
 Total Number of Encounter Records Submitted: 4998

MAO-002 Processing Status Report – Flat File Layout

HEADER RECORD		There is only one header record per file.		
Position(s)	Item	Notes	Length	Format
1	Record Type	0=Header	1	Numeric, no commas and/or decimals.
2	Delimiter		1	Uses the * character value
3-9	Report ID	Value is "MAO-002"	7	Alpha Numeric
10	Delimiter		1	Uses the * character value
11-18	Report Date	Date that the report was created by EDPSC.	8	Numeric, format CCYYMMDD
19	Delimiter		1	Uses the * character value
20-27	Transaction Date		8	Numeric, format CCYYMMDD
28	Delimiter		1	Uses the * character value
29-67	Report Description	Value is "Encounter Data Processing Status Report"	39	Alpha Numeric
68	Delimiter		1	Uses the * character value
69-73	Filler		5	Blank - (Removal of Contract ID)
74	Delimiter		1	Uses the * character value
75-104	Submission Interchange Number	Interchange Sender ID (ISA06) + Interchange Control Number (ISA13) + Interchange Date (ISA09)	30	Alpha Numeric
105	Delimiter		1	Uses the * character value
106-108	Record Type	Value is "INS", "PRO", "DME"	3	Alpha Numeric
109	Delimiter		1	Uses the * character value
110-113	Submission File Type	Value is "TEST" or "PROD"	4	Alpha Numeric
114	Delimiter		1	Uses the * character value
115-160	Filler		46	Spaces

MAO-002 Processing Status Report – Flat File Layout *(continued)*

DETAIL RECORD		There may be multiple detail records per encounter line dependent upon the number of errors on a line. Up to 10 errors will be reported for an encounter line.		
Position(s)	Item	Notes	Length	Format
1	Record Type	1=Detail	1	Numeric, no commas and/or decimals.
2	Delimiter		1	Uses the *character value
3-9	Report ID	Value is "MAO-002"	7	Alpha Numeric
10	Delimiter		1	Uses the *character value
11-15	Medicare Advantage Contract ID	Medicare Contract ID assigned to the MA Plan	5	Alpha Numeric
16	Delimiter		1	Uses the *character value
17-54	Plan ID (OCN)	Plan internal encounter control number.	38	Alpha Numeric
55	Delimiter		1	Uses the *character value
56-99	Encounter ICN	Internal Control Number. In encounter data, only 13 spaces represent the ICN however 44 spaces are coded to allow enhancement of the ICN.	44	Alpha Numeric
100	Delimiter		1	Uses the *character value
101-103	Encounter Line Number	Internal line number generated by EDPS. For any given ICN (claim document) the line numbers will start from "000" representing the claim level, the first encounter line will start from "001" and increment by 1 for every additional line.	3	Numeric, no commas and/or decimals.
104	Delimiter		1	Uses the *character value
105-112	Encounter Status	Value is "Accepted" or "Rejected"	8	Alpha Numeric
113	Delimiter		1	Uses the *character value
114-118	Error Code		5	Alpha Numeric
119	Delimiter		1	Uses the *character value
120-159	Error Description	Description associated with error code identified.	40	Alpha Numeric
160	Delimiter		1	Uses the *character value

MAO-002 Processing Status Report – Flat File Layout *(continued)*

TRAILER (TOTALS) RECORD				
Position(s)	Item	Notes	Length	Format
1	Record Type	9=Trailer	1	Numeric, no commas and/or decimals.
2	Delimiter		1	Uses the *character value
3-9	ReportID	Value is "MAO-002"	7	Alpha Numeric
10	Delimiter		1	Uses the *character value
11-18	Total Number of Processing Errors		8	Numeric, no commas and/or decimals.
19	Delimiter		1	Uses the *character value
20-27	Total Number of Encounter Lines Accepted		8	Numeric, no commas and/or decimals.
28	Delimiter		1	Uses the *character value
29-36	Total Number of Encounter Lines Rejected		8	Numeric, no commas and/or decimals.
37	Delimiter		1	Uses the *character value
38-45	Total Number of Encounter Lines Submitted		8	Numeric, no commas and/or decimals.
46	Delimiter		1	Uses the *character value
47-54	Total Number of Encounter Records Accepted		8	Numeric, no commas and/or decimals.
55	Delimiter		1	Uses the *character value
56-63	Total Number of Encounter Records Rejected		8	Numeric, no commas and/or decimals.
64	Delimiter		1	Uses the *character value
65-72	Total Number of Encounter Records Submitted		8	Total Number of Encounter Records Submitted
73	Delimiter		1	Uses the *character value
74-160	Filler		87	Spaces

MAO-002 Encounter Data Processing Status Report

Encounter Data Processing Status Report
 Report Run Date 03/07/2013 12:58PM
 Medicare Advantage Contract ID: H9999

Page 1

Submission Interchange Number: ENC000000000000120130305

Report ID: MAO-002

Report Date: 03/04/2013

Transaction Date: 03/05/2013

Record Type	Plan Encounter ID (CCN)	Encounter ICN	Encounter Line Number	Encounter Status	Error	Error Description
837P	XXXXXXXXXX000001	10101010	000	Rejected	-	-
			001	Rejected	98325	Service Line(s) Duplicated
			002	Rejected	98325	Service Line(s) Duplicated
837P	XXXXXXXXXX000002	20202020	000	Accepted	-	-
			001	Accepted	-	-
			002	Accepted	-	-

Encounter rejected

Encounter accepted

Encounter Status

TOTALS:

Total Processing Errors:	2	Total Number of Encounter Records Accepted:	1
Total Number of Encounter Lines Accepted:	2	Total Number of Encounter Records Rejected:	1
Total Number of Encounter Lines Rejected:	2	Total Number of Encounter Records Submitted:	2
Total Number of Encounter Lines Submitted:	4		

Questions & Answers





Closing Remarks

Commonly Used Acronyms

Acronym	Definition
BHT	Beginning Hierarchical Transaction
CEM	Common Edits and Enhancements Module
CFR	Code of Federal Regulations
DOS	Date(s) of Service
EDDPPS	Encounter Data DME Processing and Pricing Sub-System
EDFES	Encounter Data Front-End System
EDIPPS	Encounter Data Institutional Processing and Pricing Sub-System
EDPPPS	Encounter Data Professional Processing and Pricing Sub-System
EDPS	Encounter Data Processing System
EDR	Encounter Data Record
EDS	Encounter Data System
EODS	Encounter Operational Data Store
FERAS	Front-End Risk Adjustment System
FFS	Fee-for-Service

Commonly Used Acronyms *(continued)*

Acronym	Definition
FTP	File Transfer Protocol
HCC	Hierarchical Condition Category
HH	Home Health
HIPPS	Health Insurance Prospective Payment System
ICN	Internal Control Number
MAOs	Medicare Advantage Organizations
MARx	Medicare Advantage Prescription Drug System
MMR	Monthly Membership Report
MOR	Monthly Output Report
PY	Payment Year
RAPS	Risk Adjustment Processing System
RAS	Risk Adjustment System
SNF	Skilled Nursing Facility
TPS	Third Party Submitter

Resources

Resource	Resource Link
Centers for Medicare & Medicaid Services (CMS)	http://www.cms.gov/
Customer Support and Service Center (CSSC) Operations	http://www.csscooperations.com csscooperations@palmettogba.com
EDS Inbox	encounterdata@cms.hhs.gov
Risk Adjustment Mailbox	riskadjustment@cms.hhs.gov
Technical Assistance Registration Service Center (TARSC)	http://www.tarsc.info/
Washington Publishing Company	http://www.wpc-edi.com/content/view/817/1
Medicare Advantage and Prescription Drug Plans Plan Communications User Guide	http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/mapdhelpdesk/Plan Communications User Guide.html

Resources *(continued)*

Resource	Link
RAPS Error Code Listing and RAPS-FERAS Error Code Lookup	http://www.csscooperations.com/internet/cssc3.nsf/docsCat/CSSC~CSSC%20Operations~Risk%20Adjustment%20Processing%20System~Edits?open&expand=1&navmenu=Risk^Adjustment^Processing^System
CMS 5010 Edit Spreadsheet	https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/
EDFES Edit Code Lookup	https://apps.csscooperations.com/errorcode/EDFS_ErrorCodeLookup
EDPS Error Code Look-up Tool	http://www.csscooperations.com/internet/cssc3.nsf/DocsCat/CSSC~CSSC%20Operations~Medicare%20Encounter%20Data~Edits~97JL942432?open&navmenu=Medicare^Encounter^Data

Evaluation

A formal request for evaluation feedback will be sent at the conclusion of this session.

Please take a moment to note any feedback you wish to give concerning this session.

Your Feedback is Important.



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