



WHAT'S NEW WITH ENCOUNTER DATA?

The Encounter Data System (EDS) is continuing a great year, with many new submitters, end-to-end certification, and processing improvements! MAOs and other entities can find the latest information in this edition of the Encounter Data Quarterly Newsletter.

Test Your EDS IQ

(Answers can be found on page 5.)

Q1. Can the "Default NPI" & "Default Tax ID" be used in combination with a paper generated encounter, where PWK01 = 'OZ' and PWK02 = 'AA'?

Q2. How should MAOs and other entities submit more than 12 diagnosis codes for a single encounter?

Q3. Are MAOs and other entities required to submit dental claims?

Q4. If the true ambulance pick-up address is not available, what loop/segment should MAOs and other entities use to populate the Rendering Provider information?



Operational Guidance

Medicare Advantage Organizations (MAOs) and other entities may find the following information useful for encounter data submissions:

Update to EDS Inbox Email Address

- Effective immediately, questions related to CMS operational guidance, policy, and compliance should be sent to encounterdata@cms.hhs.gov (previously eds@ardx.net).
- MAOs and other entities should continue to submit questions related to EDFES/EDPS edits, EDFES Acknowledgement Reports, and EDPS MAO Reports directly to CSSC Operations at csscoperations@palmettogba.com or (877) 534-2772.

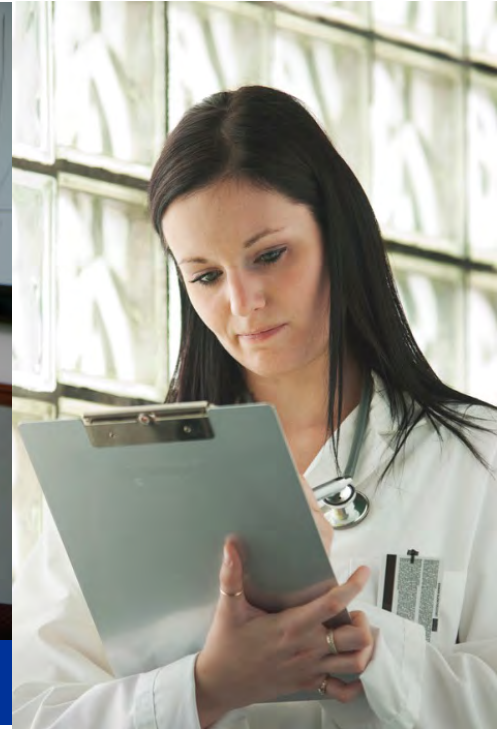
Types of Bills (TOB) Accepted by the EDS

- MAOs and other entities can submit the following TOBs to the EDS: 11X, 12X, 13X, 14X, 18X, 21X, 22X, 23X, 28X, 32X, 33X*, 34X, 41X, 71X, 72X, 74X, 75X, 76X, 77X, 79X, 81X, 82X, 83X, 85X, and 89X.

*Effective October 1, 2013, CMS will discontinue the use of Home Health TOB 33X. Any Institutional encounters submitted on or after October 1, 2013 with TOB 33X will be rejected in the Encounter Data Front End System (EDFES) and returned to the submitter.

CONTENTS

- Test Your EDS IQ
- Operational Guidance
- Known Issues
- Policy & Compliance
- Implementation Releases
- Best Practices
- Resources



Known Issues

During this quarter, CMS identified several known issues that are pending research and resolution:

Edit 16001 – No Rate on File for Service Line - CMS is currently analyzing this Professional edit. The logic for edit 16001 is applicable only to Professional encounter submissions; however, several Institutional encounter files submitted to the EDS have erroneously received this edit. MAOs and other entities affected by this known issue should continue to monitor User Groups, bulletins, and newsletters for further guidance.

Edit 25000 – CCI Error - During the migration of this edit into production, edit 25000 was assigned the incorrect disposition status of 'reject.' The defect was corrected within a few days and the accurate disposition status of 'informational' was assigned to the edit. MAOs and other entities affected by this known issue should continue to monitor User Groups, bulletins, and newsletters for further guidance.

MAOs and other entities are required to submit encounter data according to the following guidelines:

'Proxy' Data Changes to 'Default' Data

- Effective immediately, CMS has changed all references to 'Proxy Data' to 'Default Data.' MAOs and other entities may reference the July 2013 EDS Companion Guides, Section 11 on the [CSSC Operations website](#) for the existing Default Data guidance.

Encounter Data Duplicate Logic Enhancements

- The EDS validates duplicate encounters based on a select number of elements. After thorough analysis of the duplicate errors, the EDS will incorporate additional logic to validate edit 98325 (Service Line(s) Duplicated)
- The EDPS will validate the paid amounts on the line level prior to checking the paid amounts on the header level.
- The EDPS will validate the billed (charge) amount on the header and line level.
- The implementation of this change will be announced in a future communication.



In this section, MAOs and other entities are provided information regarding the implementation releases for July, August, and September.

July Implementation Release

Deactivated Edits

The following two (2) edits were deactivated in the July 2013 EDPS Maintenance Release:

- Edit 30055 - Duplicate in Encounter – Same Supplier
- Edit 03101 - Invalid Gender for CPT/HCPCS (Institutional)
 - Professional encounters will continue to generate edit 03101 on MAO-002 Reports.

Void/Delete Processing

Void/delete encounters were previously edited based on the logic used for original and correct/replace submission. As of July 10, 2013, the editing logic for void/delete encounter submissions will exclude all but the following six (6) EDPS edits:

- 00265 - Correct/Replace or Void ICN Not in EODS
- 00699 - Void Must Match Original
- 00755 - Void Encounter Already Voided
- 00761 - Billing Provider Different from Original
- 00762 - Unable to Void Rejected Encounter
- 00764 - Original Must Be a Chart Review to Void

August Implementation Release

During the month of August, CMS will implement the following enhancements:

- Institutional CEM edit for Patient Status, X223.153.2300.CL103.015 - Occurrence Code 55 will deactivate on the front-end (EDFES), however, it will still edit in the EDPS. This edit is specific to patients that have expired and were discharged with Patient Status Code 20, 40, 41, or 42.
- The enhanced logic to EDPS for storage of providers with multiple specialty coded “Multiple Provider Specialty For Database” will be deactivated.
- Edit 02255 - Beneficiary Not Part A Eligible for DOS - The EDPS editing logic will bypass this edit when encounters are submitted for beneficiaries that have a Part A waiver.
- Edit 02256 - Beneficiary Not Part C Eligible for Date of Service - The EDPS will ensure appropriate processing of encounters for beneficiaries that have changed plan benefit packages (PBPs) within the same MAO.
- Edit 21035 – Non-Private Room Charges divided by Accommodation Rate is Not a Whole Number (INPT and SNF) - This Institutional edit will be enhanced to match the FISS editing logic. The edit applies to non-private room charges and accommodations for Hospital Inpatient/SNF only (i.e. Revenue Codes 010X, 012X, 013X, 015X, 016X, 020X, and 021X and TOBs 11X, 18X, and 21X).

(continued on page 4)

Implementation Releases (continued)

August Implementation Release *(continued from page 3)*

HIPPS Code Required for Skilled Nursing Facility (SNF) and Home Health (HH)

Effective for Dates of Service (DOS) on or after 7/1/2013, the EDPS will generate three (3) new 'informational' edits for SNF and HH encounters:

- **Edit 22390 - HIPPS Code Required for SNF/HH** - This new Institutional edit will ensure a HIPPS code value is submitted for SNF and HH encounters.
- **Edit 22395 - HIPPS Code Conflicts with Revenue Code** - This new Institutional edit will ensure that valid SNF and HH HIPPS Codes are submitted for respective Revenue Codes.
- **Edit 22400 - HP Qualifier Must Exist for HIPPS Code** - This new Institutional edit will ensure the HIPPS Code qualifier is submitted for SNF and HH encounters.

MAOs and other entities are expected to communicate the HIPPS code requirements with SNF and HH providers so that they are able to make any changes to their systems, etc.

Tentative Medicare Fee Schedule Amount – the system will be enhanced to use the Tentative Medicare Fee Schedule Amount as the priced line item to compare the billed amount on the service line to the calculated.

Capitated encounters and/or service line data elements are present when:

- Loop 2300, CN101 = '05' (Capitated Encounter Header/Encounter Level)
- Loop 2400, CN101 = '05' (Capitated Encounter Line/Detail Level)

September Implementation Release

During the month of September, CMS has scheduled several implementation enhancements for the EDS.

Enhancements for the release include:

- **Occurrence Code 55** – A new edit will be created for validation of occurrence code 55 with Date Of Death (DOD) for Institutional encounter only.
- An enhancement to processing of encounters when one of the data elements (patient number data field) contains an asterisk(*).
- **Edit 00745 – Anesthesia Service Requires Modifier** – This edit will allow MAOs and other entities to submit encounters populated with modifier 59.
- **The Religious Nonmedical Health Care Institutions (RNHCI)** enhancement will allow MAOs and other entities to submit encounters populated with TOB 41x for pricing and editing.



Best Practice Highlights from Encounter Data 101

On July 31, 2013, CMS conducted the Encounter Data 101 webinar. Over 250 MAOs and other entities attended this event. Listed below are best practices that are useful for MAOs and other entities for effective data submissions:

Remain Current with Industry Updates

MAOs and other entities can stay current with industry updates by utilizing the CSSC Operations ListServ. The ListServ provides current reference documents posted to CSSC's website, in descending chronological order. MAOs and other entities can register for email updates at: <http://www.csscoperations.com/internet/cssc3.nsf/EmailUpdates?OpenForm>.

Align Internal Systems

MAOs and other entities should ensure that their internal processing systems balance with CMS' systems. MAOs and other entities should use EDS data specifications, map systems to EDS requirements, and correct logic errors. By being proactive, and inspecting system reports against CMS data specifications, potential problems are diffused when submitting production data.

Regularly Reconcile Reports

MAOs and other entities should analyze and research errors received on EDS Reports to address trends. MAOs and other entities may need to modify their internal systems to ensure data will pass EDS edits.

Test Your EDS IQ - Answers
(Questions can be found on page 1.)

- A1.** If the default NPI is used in combination with a paper generated encounter, where PWK01 = 'OZ' and PWK02 = 'AA,' the EDS will flag the encounter for pricing. MAOs and other entities may submit a default Employer Identification Number (EIN) in Loop 2010BB, REF01 = 'EI,' REF02 = '199999998' for atypical provider submissions only if the true EIN is not available.
- A2.** MAOs and other entities may submit additional diagnoses, after the initial 12, using a linked or unlinked chart review encounter if the diagnoses are verifiable by the patient's medical records. If the chart review results in one or more diagnoses that, if audited, may be supported in the actual medical record, MAOs or other entities may submit those diagnoses using a chart review encounter (linked chart review if an original encounter was submitted for the services; unlinked if no encounter was previously submitted).
- A3.** MAOs and other entities should only submit ancillary dental data incident to a physician or institutional visit, and that contain a diagnosis code. Per the TR3, CEM edits spreadsheets, and the EDS Companion Guides, the diagnosis code is a required element.
- A4.** MAOs and other entities should use, data element N301- Address Information to populate the rendering provider's information if the true ambulance pick up information is not available.

Resources

Encounter Data System Information

<http://www.csscooperations.com>
csscooperations@palmettogba.com

Risk Adjustment Model Diagnoses

http://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk_adjustment.html

X12 Version 5010 Standards

<https://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Versions5010andD0/index.html?redirect=/Versions5010andD0>

CEM/CEDI Technical Reporting Formats

http://www.cms.gov/MFFS5010D0/20_TechnicalDocumentation.asp

Washington Publishing Company

<http://www.wpc-edi.com>

CMS

<http://www.cms.gov>

EDS Inbox

encounterdata@cms.hhs.gov



*The **Encounter Data Quarterly Newsletter** is a CMS publication providing an overview of the latest developments in encounter data system operations, policies, and guidelines. For further information about the Encounter Data System, please visit <http://www.csscooperations.com>.*

*For questions regarding the **Encounter Data Quarterly Newsletter**, please contact <http://www.tarsc.info>.*