



**PALMETTO GBA<sup>®</sup>**

A CELERIAN GROUP COMPANY

# Medicare Advantage and Part D Communications Handbook

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The *Medicare Advantage and Part D Communication Handbook* is subject to change. Updated versions of this document and other Electronic Data Interchange (EDI) related documents will be published on the Customer Service Support Center (CSSC) Operations website at [www.csscooperations.com](http://www.csscooperations.com).

# 1. Overview

## Introduction

Palmetto GBA's Front End System (FES) uses a secure, encrypted platform to support file transfer connectivity from organizations through Connect:Direct, and Secure File Transfer Protocol (SFTP) applications. Specifications on these applications are included later in this document.

The use of PKZIP compatible compression software is encouraged for file transfers. FES is defaulted to send uncompressed files to organizations. If files need to be received by organizations in a compressed format, notify the CSSC Operations at (877) 534-2772 (Option 2), or by email at [csscoperations@palmettogba.com](mailto:csscoperations@palmettogba.com).

Any other software referenced within this document is licensed or copyrighted by their respective companies and is for informational purposes only.

- FES supports the following file formats for file transfers:
  - ✓ Accredited Standards Committee (ASC) X12N 837 5010 for Encounter and Medicare Medicaid Plans (MMP)
  - ✓ MMP National Council for Prescription Drug Programs (NCPDP) Post Adjudication Standard, version 4.2
  - ✓ Prescription Drug Event (PDE)
  - ✓ Risk Adjustment (RA)
- FES is available 24 hours a day, seven days a week, except for scheduled maintenance performed on Sundays. If FES is not available, organizations may still transfer files to FES. As soon as FES becomes available, the files will be edited and processed. Upon completion of the initial edit process, a response report will be generated and returned to the organization and accessible for retrieval within two business days.

## Establishing Connectivity

- Organizations must contact a Centers for Medicare & Medicaid Services (CMS) approved Network Service Vendor (NSV) to establish file transfer connectivity with FES. A list of approved NSVs is published on the CSSC Operations website at [www.csscoperations.com](http://www.csscoperations.com).
- Organizations with less than 100,000 enrolled beneficiaries can elect to establish file transfer connectivity directly with CMS. For assistance in establishing file transfer connectivity directly with CMS, contact the Medicare Advantage Prescription Drug (MAPD) Help Desk at 1-800-927-8069 or by email at [MAPDHelp@cms.hhs.gov](mailto:MAPDHelp@cms.hhs.gov).

- Organizations must be enrolled with the CSSC Operations to use the file transfer connectivity with FES. To enroll, contact the CSSC Operations at (877) 534-2772 (Option 2) or by email at [csscoperations@palmettogba.com](mailto:csscoperations@palmettogba.com).  
Once the enrollment process has been completed, the CSSC Operations will provide a Submitter Identification (ID) and Password. Testing and certification is required.

## Who to Contact

In the event there are any questions, contact the CSSC Operations at (877) 534-2772 (Option 2) or by email at [csscoperations@palmettogba.com](mailto:csscoperations@palmettogba.com).

## 2. File Processing

To identify the submitter and ensure files are properly routed, include the following data elements in the appropriate fields applicable to the file type being submitted.

**Table 1: Medicare Advantage Encounter Data Payer ID Information**

Medicare Advantage Encounter	Payer ID
Institutional	80881
Professional	80882
Durable Medical Equipment (DME)	80887

**Table 2: Medicare Medicaid Plan (MMP) Encounter Data Payer ID Information**

MMP Encounter (Medicare)	Payer ID
Institutional	80888
Professional	80889
DME	80890
MMP Encounter (Medicaid)	Payer ID
Institutional	80891
Professional	80892
Dental	80893
NCPDP	80894
DME	80895

**Table 3: ASC X12N 837 5010 Required Data Elements to Identify the Submitter and Type of Data**

Field	Data Elements
ISA06 GS02	Submitter ID assigned
ISA08 GS03 1000B/NM109 2010BB/NM109	Payer ID
ISA13	Ensure the nine-digit File ID field is a unique number that has not been submitted within the past 12 months
ISA15	T (when submitting a certification test file OR a Tier 2 test file with ISA01 = 03 and ISA02 = 8888888888) P (when submitting a production file)
GS08	005010X223A2 – (Institutional) 005010X222A1 – (Professional) 005010X224A2 – (MMP Dental)

**Table 4: MMP NCPDP Post Adjudication Standard version 4.2 Required Data Elements to Identify the Submitter and Type of Data**

Field	Data Elements
601-04	PA (Post Adjudication)
102-A2	42 (Version Number)
879	Submitter ID assigned
806-5C	Batch Number (must be fixed length of seven numbers)
880-K7	80894 (Payer ID)
702-MC	T (when submitting a test file) P (when submitting a production file)

**Table 5: PDE Required Data Elements to Identify the Submitter and Type of Data**

Record ID	Field	Data Elements
HDR	2	Submitter ID assigned
HDR	3	Ensure the ten-digit File ID field is a unique number that has not been submitted within the past 12 months
HDR	5	TEST (when submitting a test file) CERT (when submitting a certification file) PROD (when submitting a production file)

**Table 6: Risk Adjustment Processing System (RAPS) Required Data Elements to Identify the Submitter and Type of Data**

Record ID	Field	Data Elements
AAA	2	Submitter ID assigned
AAA	3	Ensure the ten-digit File ID field is a unique number that has not been submitted within the past 12 months
AAA	5	TEST (when submitting a test file) PROD (when submitting a production file)



### 3. File Naming Conventions when connecting directly to CMS

Organizations with less than 100,000 enrolled beneficiaries that elect to establish connectivity directly with CMS will need the following File Naming Conventions to ensure successful submission and receipt of data.

The following table will assist in understanding the structure of the File Naming Conventions used when connecting directly to CMS.

**Table 7: Structure of the File Naming Conventions used when connecting directly to CMS**

Component Name	Description
guid	The Global User ID (GUID) is used to access CMS computer services and is assigned by the MAPD Help Desk
racf	The RACF ID is also assigned by the MAPD Help Desk
Data Type Indicator	The third component of the file name indicates the type of data such as EDS for Encounter Data System or PDE for Prescription Drug Event data
freq	Frequency code of the file (i.e. D = Daily, W = Weekly)
xxxxx	Contract ID
ssssss	Randomly assigned Sequential Number
<Sub ID>	Submitter ID Number
P	Production file
T	Test file

The following table should be used for the File Naming Conventions when connecting directly to CMS.

**Table 8: File Naming Conventions used when connecting directly to CMS**

File Type	Production	Test
Encounter	guid.racf.EDS.freq.xxxxx.FUTURE.P	guid.racf.EDS.freq.xxxxx.FUTURE.T
MMP Encounter (Medicare)	guid.racf.MEDS.freq.xxxxx.<Sub ID>.P	guid.racf.MEDS.freq.xxxxx.<Sub ID>.T
MMP Encounter (Medicaid)	guid.racf.MMCD.freq.xxxxx.<Sub ID>.P	guid.racf.MMCD.freq.xxxxx.<Sub ID>.T
MMP NCPDP	guid.racf.MNCP.freq.xxxxx.<Sub ID>.P	guid.racf.MNCP.freq.xxxxx.<Sub ID>.T
MMP PDE	guid.racf.MPDE.freq.xxxxx.<Sub ID>.P	guid.racf.MPDE.freq.xxxxx.<Sub ID>.T
MMP RAPS	guid.racf.MRAPS.freq.xxxxx.<Sub ID>.P	guid.racf.MRAPS.freq.xxxxx.<Sub ID>.T
PDE	guid.racf.PDE.freq.xxxxx.FUTURE.P	guid.racf.PDE.freq.xxxxx.FUTURE.T
RAPS	guid.racf.RAPS.freq.xxxxx.FUTURE.P	guid.racf.RAPS.freq.xxxxx.FUTURE.T

**Table 9: Encounter and MMP Encounter (Medicare) Report Names used when connecting directly to CMS**

Description	Production	Test
Pre-Screen Validation Report	P.xxxxx.EDS_RESPONSE.pn	T.xxxxx.EDS_RESPONSE.pn
TA1 Response	P.xxxxx.EDS_REJT_IC_ISAIEA.pn	T.xxxxx.EDS_REJT_IC_ISAIEA.pn
999 Response Accepted	P.xxxxx.EDS_ACCPT_FUNCT_TRANS.pn	T.xxxxx.EDS_ACCPT_FUNCT_TRANS.pn
999 Response Rejected	P.xxxxx.EDS_REJT_FUNCT_TRANS.pn	T.xxxxx.EDS_REJT_FUNCT_TRANS.pn
277CA Response	P.xxxxx.EDS_RESP_CLAIM_NUM.pn	T.xxxxx.EDS_RESP_CLAIM_NUM.pn
Post-Screen Invalid Report	P.xxxxx.EDS_RESPONSE.pn	T.xxxxx.EDS_RESPONSE.pn
MAO-001 Data Duplicate Report	P.xxxxx.EDPS_001_DataDuplicate_Rpt	Not Applicable
MAO-001 Data Duplicate File	P.xxxxx.EDPS_001_DataDuplicate_File	Not Applicable
MAO-002 Data Processing Status Report	P.xxxxx.EDPS_002_DataProcessingStatus_Rpt	T.xxxxx.EDPS_002_DataProcessingStatus_Rpt
MAO-002 Data Processing Status File	P.xxxxx.EDPS_002_DataProcessingStatus_File	T.xxxxx.EDPS_002_DataProcessingStatus_File

**Table 10: MMP Encounter (Medicaid) Report Names used when connecting directly to CMS**

Description	Production	Test
Pre-Screen Validation Report	P.xxxxx.MCD_RESPONSE.pn	T.xxxxx.MCD_RESPONSE.pn
TA1 Response	P.xxxxx.MCD_REJT_IC_ISAIEA.pn	T.xxxxx.MCD_REJT_IC_ISAIEA.pn
999 Response Accepted	P.xxxxx.MCD_ACCPT_FUNCT_TRANS.pn	T.xxxxx.MCD_ACCPT_FUNCT_TRANS.pn
999 Response Rejected	P.xxxxx.MCD_REJT_FUNCT_TRANS.pn	T.xxxxx.MCD_REJT_FUNCT_TRANS.pn
277CA Response	P.xxxxx.MCD_RESP_CLAIM_NUM.pn	T.xxxxx.MCD_RESP_CLAIM_NUM.pn
Post-Screen Invalid Report	P.xxxxx.MCD_RESPONSE.pn	T.xxxxx.MCD_RESPONSE.pn

**Table 11: MMP Dental Report Names used when connecting directly to CMS**

Description	Production	Test
Pre-Screen Validation Report	P.xxxxx.MCD_RESPONSE.pn	T.xxxxx.MCD_RESPONSE.pn
TA1 Response	P.xxxxx.MCD_REJT_IC_ISAIEA.pn	T.xxxxx.MCD_REJT_IC_ISAIEA.pn
999 Response Accepted	P.xxxxx.MCD_ACCPT_FUNCT_TRANS.pn	T.xxxxx.MCD_ACCPT_FUNCT_TRANS.pn
999 Response Rejected	P.xxxxx.MCD_REJT_FUNCT_TRANS.pn	T.xxxxx.MCD_REJT_FUNCT_TRANS.pn
Dental Validation Report	P.xxxxx.MCD_RESPONSE.pn	T.xxxxx.MCD_RESPONSE.pn

**Table 12: MMP NCPDP Report Names used when connecting directly to CMS**

Description	Production	Test
NCPDP Validation	P.xxxxx.NCP_RESP.pn	T.xxxxx.NCP_RESP.pn

**Table 13: PDE Report Names used when connecting directly to CMS**

Description	Production	Test
PDFS Response Report	RSP.PDFS_RESP_\$\$\$\$\$\$	TEST.RSP.PDFS_RESP_\$\$\$\$\$\$
PDE Transaction Validation	RPT.DDPS_TRANS_VALIDATION_\$\$\$\$\$\$	TEST.RPT.DDPS_TRANS_VALIDATION_\$\$\$\$\$\$
PDE Error Summary	RPT.DDPS_ERROR_SUMMARY_\$\$\$\$\$\$	TEST.RPT.DDPS_ERROR_SUMMARY_\$\$\$\$\$\$
PDE Covered Cumulative Beneficiary	RPT.DDPS_CUM_BENE_ACT_COV_\$\$\$\$\$\$	TEST.RPT.DDPS_CUM_BENE_ACT_COV_\$\$\$\$\$\$
PDE Enhanced Cumulative Beneficiary	RPT.DDPS_CUM_BENE_ACT_ENH_\$\$\$\$\$\$	TEST.RPT.DDPS_CUM_BENE_ACT_ENH_\$\$\$\$\$\$
PDE Over the Counter Cumulative Beneficiary	RPT.DDPS_CUM_BENE_ACT_OTC_\$\$\$\$\$\$	TEST.RPT.DDPS_CUM_BENE_ACT_OTC_\$\$\$\$\$\$
Plan-to-Plan Covered	RPT.DDPS_P2P_PDE_ACC_COV.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_PDE_ACC_COV.\$\$\$\$\$\$
Plan-to-Plan Enhanced	RPT.DDPS_P2P_PDE_ACC_ENH.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_PDE_ACC_ENH.\$\$\$\$\$\$
Plan-to-Plan Over the Counter	RPT.DDPS_P2P_PDE_ACC_OTC.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_PDE_ACC_OTC.\$\$\$\$\$\$
Plan-to-Plan Receivable	RPT.DDPS_P2P_RECEIVABLE.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_RECEIVABLE.\$\$\$\$\$\$
Plan-to-Plan Reconcile	RPT.DDPS_P2P_PARTD_RECON.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_PARTD_RECON.\$\$\$\$\$\$
Plan-to-Plan Payable	RPT.DDPS_P2P_PAYABLE.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_PAYABLE.\$\$\$\$\$\$
PRS Exclusion Warning	RPT.DDPS_PRS_EXCLUSION.\$\$\$\$\$\$	TEST.RPT.DDPS_PRS_EXCLUSION.\$\$\$\$\$\$
Plan-to-Plan Phase 3	RPT.DDPS_P2P_PHASE3_RTN.\$\$\$\$\$\$	TEST.RPT.DDPS_P2P_PHASE3_RTN.\$\$\$\$\$\$

**Table 14: RAPS Report Names used when connecting directly to CMS**

Description	Production	Test
FERAS Response Report	RSP.FERAS_RESP_\$\$\$\$\$\$	TEST.RSP.FERAS_RESP_\$\$\$\$\$\$
RAPS Return Flat File Report	RPT.RAPS_RETURN_FLAT_\$\$\$\$\$\$	TEST.RPT.RAPS_RETURN_FLAT_\$\$\$\$\$\$
RAPS Error Report	RPT.RAPS_ERRORRPT_\$\$\$\$\$\$	TEST.RPT.RAPS_ERRORRPT_\$\$\$\$\$\$
RAPS Summary Report	RPT.RAPS_SUMMARY_\$\$\$\$\$\$	TEST.RPT.RAPS_SUMMARY_\$\$\$\$\$\$
RAPS Duplicate Diagnosis Report	RPT.RAPS_DUPDX_RPT_\$\$\$\$\$\$	TEST.RPT.RAPS_DUPDX_RPT_\$\$\$\$\$\$
RAPS Monthly Error Report	RPT.RAPS_MONTHLY_\$\$\$\$\$\$	TEST.RPT.RAPS_MONTHLY_\$\$\$\$\$\$
RAPS Cumulative Report	RPT.RAPS_CUMULATIVE_\$\$\$\$\$\$	TEST.RPT.RAPS_CUMULATIVE_\$\$\$\$\$\$
RAPS Error Frequency Report/Monthly	RAPS_ERRORFREQ_MNTH_\$\$\$\$\$\$	TEST.RAPS_ERRORFREQ_MNTH_\$\$\$\$\$\$
RAPS Error Frequency Report/Quarterly	RAPS_ERRORFREQ_QTR_\$\$\$\$\$\$	TEST.RAPS_ERRORFREQ_QTR_\$\$\$\$\$\$

## 4. SFTP Response Report Naming Conventions

Organizations that elect to use SFTP to connect to FES will need the following naming conventions to ensure the successful return of the Response Reports.

The following table will assist in understanding the structure when using the Response Report Naming Conventions when connecting to FES using SFTP.

**Table 15: Structure for Response Report Naming Conventions used when connecting to FES using SFTP**

Component Name	Description
CCYYMMDD	Century, Year, Month, Day
THHMMSS	Time, Hour, Minutes, Seconds/Timestamp
nnnnnn	Nanosecond Timestamp
s	Randomly assigned Sequential Number

The following table should be used for the Response Report Naming Conventions when connecting to FES using SFTP.

**Table 16: Encounter and MMP Encounter (Medicare and Medicaid) Response Report Names used when connecting to FES using SFTP**

Description	Naming Conventions
Pre-Screen Validation Report	INVCCYYMMDDHHMMSSSSSS.INV
TA1 Response	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.TA1
999 Response	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.999
277CA Response	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.277CA
Post-Screen Invalid Report	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.REJECTED_ID.RSP
MAO-001 Data Duplicate Report	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.PROD_001_DATDUP_FILE.RPT
MAO-001 Data Duplicate File	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.PROD_001_DATDUP_RPT.RPT
MAO-002 Data Processing Status Report	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.PROD_002_DATPRS_FILE.RPT
MAO-002 Data Processing Status File	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.PROD_002_DATPRS_RPT.RPT

**Table 17: MMP Dental Response Report Names used when connecting to FES using SFTP**

Description	Naming Conventions
Pre-Screen Validation Report	INVCCYYMMDDHHMMSSSSSS.INV
Dental Validation Report	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.VALIDATION.RPT

**Table 18: MMP NCPDP Response Report Names used when connecting to FES using SFTP**

Description	Naming Conventions
Pre-Screen Validation Report	INVCCYYMMDDHHMMSSSSSS.INV
NCPDP Validation	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.NCPDP_VALIDATION.RPT

**Table 19: PDE Response Report Names used when connecting to FES using SFTP**

Description	Naming Conventions
Pre-Screen Validation Report	INVCCYYMMDDHHMMSSSSSS.INV
PDFS Response Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.PDFS_RESP.RPT
PDE Covered Cumulative Beneficiary Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_CUM_BENE_ACT_COV.RPT
PDE Covered Cumulative Beneficiary Report/Non-Pace	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_CUM_BENE_ACT_COV_NONPACE.RPT
PDE Enhanced Cumulative Beneficiary Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_CUM_BENE_ACT_ENH.RPT
PDE Enhanced Cumulative Beneficiary Report/Non-Pace	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_CUM_BENE_ACT_ENH_NONPACE.RPT
PDE Over the Counter Cumulative Beneficiary Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_CUM_BENE_ACT_OTC.RPT
PDE Over the Counter Cumulative Beneficiary Report/Non-Pace	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_CUM_BENE_ACT_OTC_NONPACE.RPT
PDE Transaction Validation	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_TRANS_VALIDATION.RPT
PDE Error Summary	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_ERROR_SUMMARY.RPT
Plan-to-Plan Payable	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_PAYABLE.RPT
Plan-to-Plan Covered	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_PDE_ACC_C.RPT
Plan-to-Plan Enhanced	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_PDE_ACC_E.RPT
Plan-to-Plan Over the Counter	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_PDE_ACC_O.RPT
Plan-to-Plan Phase 3	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_PHASE3_RET.RPT
Plan-to-Plan Receivable	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_RECEIVABLE.RPT
Plan-to-Plan Reconcile	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.DDPS_P2P_RECONCILE.RPT

**Table 20: RAPS Response Report Names used when connecting to FES using SFTP**

Description	Naming Conventions
Pre-Screen Validation Report	INVCCYYMMDDHHMMSSSSSS.INV
FERAS Response Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.FERAS_RESP.RPT
RAPS Cumulative Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_CUMULATIVE.RPT
RAPS Duplicate Diagnosis Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_DUPDX_RPT.RPT
RAPS Error Frequency / Monthly	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_ERRFREQ_MNTH.RPT
RAPS Error Frequency / Quarterly	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_ERRFREQ_QTR.RPT
RAPS Error Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_ERROR_RPT.RPT
RAPS Monthly Error Report	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_MONTHLY.RPT
RAPS Return Flat File	<Submitter ID>.CCYYMMDD.THHMMSS.nnnnnn.s.RAPS_RETURN_FLAT.RPT

Description	Naming Conventions
Report	
RAPS Summary Report	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.RAPS_SUMMARY.RPT

**Table 21: PRS Response Report Names used when connecting to FES using SFTP**

Description	Naming Conventions
PRS Exclusion Warning	<Submitter ID>.CCYYMMDD.THMMSS.nnnnn.s.DDPS_PRS_EXCLUSION.RPT







## EDFES Post-Screen Invalid Report Edits

**Table 23: EDFES Post-Screen Invalid Report Edits for all Files**

Notification Message	Notification Message Description	INST	PROF	DME
File ID (XXXXXXXXXX) is a duplicate of a File ID sent within the last 12 months	The file ID must be unique for a 12-month period	Y	Y	Y
Submitter not authorized to send claims for the plan (Contract ID)	The submitter is not authorized to send EDRs for this contract	Y	Y	Y
Contract ID cannot be the same as the Submitter ID	The Contract ID cannot be the same as the Submitter ID	Y	Y	Y
At least one EDR is missing a Contract ID in the 2010BB-REF02 segment	The Contract ID is missing	Y	Y	Y
See service type columns	The maximum number of EDRs allowed in a file	File cannot exceed 5,000 EDRs	File cannot exceed 85,000 EDRs	File cannot exceed 85,000 EDRs
Transaction set (ST/SE) (XXXXXXXXXX) cannot exceed 5,000 claims	There can only be 5,000 claims in each transaction set	Y	Y	Y
Date of service cannot be before 2011	Encounters cannot be submitted with a date of service before 2011	Y	Y	Y
CAS adjustment amount must not be 0	The CAS adjustment amount cannot be (0)	Y	Y	Y
Billing provider loop is missing	The Billing Provider loop must be present	Y	Y	Y
Submitter not certified for production	The submitter must be certified to send EDRs for production	Y	Y	Y
No test cases found in this file	Test file received from uncertified submitter without reporting test cases ("TC<test case #>") OR test file received from certified submitter but not reported as a Tier 2 test file	Y	Y	Y

**Table 24: EDFES Post-Screen Invalid Report Edits for Testing**

Notification Message	Notification Message Description	INST	PROF	DME
See service type columns	See service type columns	File cannot contain more than 6 EDRs	File cannot contain more than 6 EDRs	File cannot contain more than 4 EDRs
Patient control number is more than 20 characters long the TC# was truncated	The Claim Control Number including the Test Case Number, must not exceed 20 characters	Y	Y	Y
File contains (X) test case (X) encounter(s)	The file must contain two (2) of each test case	Y	Y	Y
Additional files cannot be validated until an MAO-002 report has been received	The MAO-002 report must be received before additional files can be submitted	Y	Y	Y
File cannot contain both unlinked and linked test cases	The test cases from file 1 and file 2 cannot be in the same file	N	Y	N
Cannot send linked test cases until all unlinked test cases have been accepted	The test cases for file 2 cannot be sent before all file 1 test cases are accepted	N	Y	N

**Table 25: EDFES Post-Screen Invalid Report Edits for Tier 2 Files**

Notification Message	Notification Message Description	INST	PROF	DME
The interchange usage indicator must equal "T"	The Tier 2 file is being sent with a "P" in the ISA15 field	Y	Y	Y
The Contract ID has (X,XXX) claims in the file Only 2,000 are allowed	The number of encounters for a Contract ID cannot be greater than 2,000	Y	Y	Y

## Prescription Drug Front End System (PDFS) Response Report

Figure 3: Prescription Drug Front End System (PDFS) Response Report

```
REPORT: PDFS-RESP      PRESCRIPTION DRUG FRONT END SYSTEM
RUN DATE: 20170101    PDFS RESPONSE REPORT
PROCESSED: CCYMMDD CYCLE
SUBMITTER ID: SH#####
FILE ID: 012345678 REJECTED PROD

RECORD SEQ      ERROR
TYPE NO        CODE ERROR DESCRIPTION
HDR 0000001 132 DUPLICATE FILE ID IN LAST 12 MONTHS
** End of Report **
```

A list of PDFS errors is published on the CSSC Operations website at [www.csscoperations.com](http://www.csscoperations.com).

## Front End Risk Adjustment System (FERAS) Response Report

Figure 4: Front End Risk Adjustment System (FERAS) Response Report

```
REPORT: FERAS-RESP    FRONT END RISK ADJUSTMENT SYSTEM RUN
DATE: 20170101      FERAS RESPONSE REPORT
PROCESSED: CCYMMDD CYCLE

SUBMITTER ID: SH#####
FILE ID: 012345678 REJECTED PROD

RECORD SEQ      ERROR
TYPE NO        CODE ERROR DESCRIPTION
AAA 0000001 112 SUBMITTER ID NOT ON FILE
AAA 0000001 107 SUBMITTER ID NOT VALIDATED TO SEND PROD DATA
ZZZ 0000128 162 ZZZ SUB-ID DOES NOT MATCH SUB-ID ON AAA RECORD
** End of Report **
```

A list of FERAS errors is published on the CSSC Operations website at [www.csscoperations.com](http://www.csscoperations.com).

## 6. CONNECT:DIRECT Submission Dataset Names

Organizations that elect to use Connect:Direct to connect to FES will need the following dataset naming conventions to ensure the successful submission and receipt of data.

### Encounter Data Submission Dataset Names

**Table 26: Encounter Data Submission Dataset Names when connecting to FES using Connect:Direct**

Production	Test	Parameter Values
MAB.PROD.NDM.PROD.EDST.<Submitter ID>(+1)	MAB.PROD.NDM.TEST.EDST.<Submitter ID>(+1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(100,100),RLSE) DCB: (RECFM=FB,LRECL=80,BLKSI ZE= 27920)

The Encounter Data Connect:Direct Form is published on the CSSC Operations website at [www.csscoperations.com](http://www.csscoperations.com).

### MMP Data Submission Dataset Names

**Table 27: MMP Data Submission Dataset Names when connecting to FES using Connect:Direct**

Line of Business	Production	Parameter Values
Encounter (Medicare)	MAB.PROD.NDM.MMFS.ENC.<Submitter ID>(+1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(100,100),RLSE) DCB: (RECFM=FB,LRECL=80,BLKSIZE=27920)
Encounter (Medicaid)	MAB.PROD.NDM.MMFS.MCD.<Submitter ID>(+1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(100,100),RLSE) DCB: (RECFM=FB,LRECL=80,BLKSIZE=27920)
NCPDP	MAB.PROD.NDM.MMFS.NCP.<Submitter ID>(+1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(100,100),RLSE) DCB: (RECFM=FB,LRECL=3700,BLKSIZE=25900)
PDE	MAB.PROD.NDM.MMFS.PDE.<Submitter ID>(+1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(1200,500),RLSE) DCB: (RECFM=FB,LRECL=512,BLKSIZE=27648)
RAPS	MAB.PROD.NDM.MMFS.RAS.<Submitter ID>(+1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(75,10),RLSE) DCB: (RECFM=FB,LRECL=512,BLKSIZE=27648)

**Note:** MMP test files must be submitted using the production dataset names.

The MMP Data Connect:Direct Form is published on the CSSC Operations website at [www.csscoperations.com](http://www.csscoperations.com).

## PDE Data Submission Dataset Names

**Table 28: PDE Data Submission Dataset Names when connecting to FES using Connect:Direct**

Production	Test	Parameter Values
MAB.PROD.NDM.PDFS. PROD.<Submitter ID>( +1)	MAB.PROD.NDM.PDFS.TEST. <Submitter ID>( +1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(1200,500),RLSE) DCB: (RECFM=FB,LRECL=512,BLKSIZE=27648)

The PDE Data Connect:Direct Form is published on the CSSC Operations website at [www.csscooperations.com](http://www.csscooperations.com).

## RAPS Data Submission Dataset Names

**Table 29: RAPS Data Submission Dataset Names when connecting to FES using Connect:Direct**

Production	Test	Parameter Values
MAB.PROD.NDM.RAPS. PROD.<Submitter ID>( +1)	MAB.PROD.NDM.RAPS.TEST. <Submitter ID>( +1)	DISP: (NEW,CATLG,DELETE) UNIT: SYSDG SPACE: (CYL,(75,10),RLSE) DCB: (RECFM=FB,LRECL=512,BLKSIZE=27648)

The Risk Adjustment Data Connect:Direct Form is published on the CSSC Operations website at [www.csscooperations.com](http://www.csscooperations.com).

## 7. Creating a RAPS File Using Direct Data Entry (DDE)

### Getting Started

**Note:** For the expected results listed below, Microsoft Edge Web Browser will be used

1. **Access** the CSSC Operations website at: [www.csscooperations.com](http://www.csscooperations.com)
2. **Type** 'Risk Adjustment Data Entry Tool' in the 'Search for' box on the top right side of the Home Page and press 'Enter'
3. **Select** 'Risk Adjustment Data Entry Tool' on the Search Results page
4. **Select** the 'Risk Adjustment Data Entry Tool' link
5. **Select** 'Open' to the question in the pop up window to download the tool
6. **Select** 'Allow' to access the Workbook, which contains the following four tabs:
  - User Instructions (display of detailed instructions that must be followed)
  - Profile Information (entry of the Profile Information (AAA Record))
  - Input (entry of the Contract ID, Patient and Diagnosis Code Information (BBB and CCC Records))
  - Records (display of all fields and records entered)
7. **Select** the 'User Instructions tab' and follow the instructions for creating a RAPS File for submission

### Profile Information Tab

1. Reference the figure below for the Profile Information Tab (the AAA Record)
2. **Type** the following information:
  - a. Submitter Number (Required)
    - i. Must be 6 alphanumeric characters
    - ii. Must begin with 'SH', 'SE', 'SR', 'SRT' or 'SPT'
  - b. Prod/Test (Required)
    - i. Select PROD or TEST option from the drop-down listing
  - c. Diagnosis File Type (Required)
    - i. **Select** ICD9 or ICD10 option from the drop-down listing
    - ii. ICD9 Diagnosis Codes are before 10/1/2015
    - iii. ICD10 Diagnosis Codes are on or after 10/1/2015
  - d. Output File Path (Required)
    - i. Navigate to the location where the file should be stored (i.e. in a folder location on the workstation) by using the 'Select Path' link
  - e. File ID (Required)
    - i. Must be a maximum of 10 alphanumeric characters

**Note:** Alphanumeric is defined as characters A-Z, and numeric as 0-9

Figure 5: Profile Information

Profile Information			
Submitter Number	<input type="text"/>		
Prod/Test	<input type="text"/>		
Diagnosis File Type	<input type="text"/>		
Output File Path	<input type="text"/>	Select Path	
File ID	<input type="text"/>		

### Input Tab

- Reference the figure below for the Risk Adjustment Record Submission fields (the BBB Record)
- Type** the following information:
  - Contract ID (Required)
    - Must be a 5-character alphanumeric Contract ID (i.e. H9999)
    - Must begin with H or R
  - Patient Info
    - Patient Control # (Optional); Must be a maximum of 40 alphanumeric characters
    - Medicare ID (Required); Also known as the Health Insurance Claim Number (HICN) or the Medicare Beneficiary Identifier (MBI). Must be a maximum of 25 alphanumeric characters
    - Date of Birth (Optional); Must be in MM/DD/YYYY format

Figure 6: Risk Adjustment Record Submission

Risk Adjustment Record Submission			
Contract ID	<input type="text"/>		
Patient Info			
Patient Control #	<input type="text"/>		Optional
Medicare ID	<input type="text"/>		
Date of Birth	<input type="text"/>		Optional

3. Reference the figure below for the Diagnosis Cluster Information fields (the CCC Record)
4. **Type** the following Diagnosis Cluster information:
  - a. Enter up to 10 Diagnosis Clusters
    - i. Provider Type (Required); **Select** the desired Provider Type from the drop-down listing
    - ii. From Date (Required); Must be in MM/DD/YYYY format
    - iii. Thru Date (Required); Must be in MM/DD/YYYY
    - iv. Delete Ind (Optional); **Select** the desired Delete Indicator from the drop-down listing
    - v. **Enter** a Diagnosis Code (Required)
    - vi. **Select** the desired Risk Assessment Code from the drop-down listing (Required)

Figure 7: Diagnosis Cluster Information

Diagnosis Cluster Information		
<b>1</b>	Provider Type	
	From Date	
	Thru Date	
	Delete Ind	
	Diagnosis Code	
	Risk Assessment Code	
<b>2</b>	Provider Type	
	From Date	
	Thru Date	
	Delete Ind	
	Diagnosis Code	
	Risk Assessment Code	
<b>3</b>	Provider Type	
	From Date	
	Thru Date	
	Delete Ind	
	Diagnosis Code	
	Risk Assessment Code	
<b>4</b>	Provider Type	
	From Date	
	Thru Date	
	Delete Ind	
	Diagnosis Code	
	Risk Assessment Code	
<b>5</b>	Provider Type	
	From Date	
	Thru Date	
	Delete Ind	
	Diagnosis Code	
	Risk Assessment Code	



5. Reference the figure below for additional functions:
  - a. After all diagnosis clusters have been entered on the Input Tab, **Select** 'Add Next CCC Record' to create or add the CCC Record
  - b. **Select** 'New Batch' to create a new BBB and CCC Record
    - i. When entering a new Contract ID, a new batch will automatically be created
  - c. **Select** 'Create File' after all information has been entered
    - i. File name is user defined
  - d. **Select** 'Clear CCC Records' to remove CCC record entries from the screen or current Input tab
  - e. **Select** 'Clear Records Tab' to remove all records on that tab

Figure 8: Additional Functions

Add Next CCC Record	Click this button to add CCC records. You must click this button to move the CCC record to the Records tab before adding a new batch or creating a file.
New Batch	Click here to create a new batch.
Create File	Click here to create a file.
Clear CCC Records	Click here in the event you want to remove CCC record entries from this tab only.
Clicking this button will clear <u>ALL</u> records on the Records tab. Do not select this unless you want to delete all records created so far.	
Clear Records Tab	

6. **Select** 'Records Tab' at the bottom of the Workbook to display all the fields and records entered for the file, if needed

The user must **submit** the file via SFTP Command Line

## DDE Edit Examples

Table 30: DDE Edit Examples

Error	Tab/Screen/Field Name	Resolution
Alphanumeric. This must be 6 characters. (i.e. SHnnnn)	Profile Information/Submitter Number	Enter up to 6 alphanumeric positions for the Submitter Number.
Alphanumeric 10 character maximum	Profile Information/File ID	Enter up to 10 alphanumeric positions for the File Id.
Alphanumeric. This must be 5 characters. (i.e. Hnnnn)	Input/Contract ID	Enter up to 5 alphanumeric positions for the Contract ID
OPTIONAL FIELD Alphanumeric 40 character maximum	Input/Patient Control #	Enter up to 40 alphanumeric positions for the Patient Control #. This is an optional entry and is not required.
Alphanumeric 25 character maximum	Input/Medicare ID	Enter up to 25 alphanumeric positions for the Medicare ID. Also known as the HICN or the MBI.
Must be formatted as MM/DD/YYYY	Input/Date of Birth	Enter the Patient Date of Birth in the MM/DD/YYYY format where 'MM' is a 2-position month (i.e. 05), DD is a 2-position day (i.e. 06) and YYYY is a 4-position year (i.e. 1964). This is an optional entry and is not required.
Must be formatted as MM/DD/YYYY	Input/From Date	Enter the Diagnosis Cluster From Date in the MM/DD/YYYY format where 'MM' is a 2-position month (i.e. 05), DD is a 2 position day (i.e. 06) and YYYY is a 4 position year (i.e. 1964).
Must be formatted as MM/DD/YYYY	Input/Thru Date	Enter the Diagnosis Cluster Thru Date in the MM/DD/YYYY format where 'MM' is a 2-position month (i.e. 05), DD is a 2-position day (i.e. 06) and YYYY is a 4-position year (i.e. 1964).
Must be 3 to 7 Characters	Input/Diagnosis Code	Enter a 3 to 7 position Diagnosis Code.
The Contract ID must begin with H or R	Input/Contract ID	Enter a Contract ID that begins with H or R.
Submitter Number must begin with SH, SE, SR, SRT or SPT and be followed by numbers	Profile Information/Submitter Number	Enter a Submitter Number that begins with SH, SE, SR, SRT or SPT followed by 3 or 4 numbers depending on the entry.
Thru date should not be < from date	Input/'Next CCC Record' is selected	Enter a Thru Date that is less than the From Date.
For ICD10 File Type the from date should be >= 10/01/2015	Input/'Add Next CCC Record' is selected	For ICD10 Diagnosis Codes, the From Date must be greater than or equal to 10/01/2015.
For ICD10 File Type the thru date should be >= to 10/01/2015	Input/'Add Next CCC Record' is selected	For ICD10 Diagnosis Codes, the Thru Date must be greater than or equal to 10/01/2015.
For ICD9 File Type the from date should be < 10/01/2015	Input/'Add Next CCC Record' is selected	For ICD9 Diagnosis Codes, the From Date must be less than 10/01/2015.
For ICD9 File Type the thru date should be < to 10/01/2015	Input/'Add Next CCC Record' is selected	For ICD9 Diagnosis Codes, the Thru Date must be less than 10/01/2015.

## 8. Connecting Using SFTP

The following information is needed when creating a new entry within the SFTP application:

1. HOST Name (The *HOST Name* is an IP address provided along with a Submitter ID once enrolled by CSSC Operations)
2. Port: 22
3. Protocol: SSH/SFTP File Transfer Protocol
4. User: Submitter ID/Submitter ID (i.e. SH9999/SH9999)  
**Note:** All letters within the Submitter ID are in all caps
5. Password: Received via email notification to the technical contact after enrollment is complete  
**Note:** Password is case sensitive and must be submitted as given on the email notification.
6. Once entry setup is complete, launch the SFTP software to connect

When access to the SFTP server is successful, see steps below for sending and receiving files

### Sending Files

The following steps explain how to send files through the SFTP server:

1. Access Outbox directory path to submit files: outbox/EZComm/BC/1.0/Notify
2. Once access is successful to the outbox directory, upload or drop files into outbox directory for processing
3. A message will be received that the upload was successful

**Note:** Uploaded files in a PK-ZIP 14+ compatible format can decrease upload time

**Note:** It is recommended to use sequential file names (i.e. FILE1, FILE2, etc.) instead of repeatable file names to prevent the files from being overwritten

### Receiving Files

The following steps explain how to receive files through the SFTP server:

1. Access Inbox directory path to download files: inbox/EZComm/BC/1.0/Notify
2. Follow the commands outlined in the SFTP software to download the files available in the inbox

**Note:** Reports should be downloaded and saved prior to viewing as the SFTP environment removes reports from the SFTP mailbox once viewed

It is recommended not to select the wildcard option (\*.\*) for options like ALL SUBMITTERS or ALL REPORTS. Specific reports can be downloaded by Grouping, Date, or Individual File. Refer to the table below for an example

Table 31: Download Example

Grouping	Date	Individual File
<Submitter ID>*.TA1	<Submitter ID>.20180419.*.TA1	<Submitter ID>.20180419.T115449.381992.1.TA1

CSSC Operations has report restore capabilities

**Note:** After 14 days, if reports still reside in a SFTP mailbox without any activity (i.e. viewing), the reports will be removed from the SFTP mailbox.

## Appendix A: Record of Changes

Table 32: Record of Change

Version Number	Date	Author/Owner	Description of Change
2.10	10/05/2021	Palmetto GBA	Updated Section 7 - Creating a RAPS File using Direct Data Entry (DDE). DDE accepts 'SRT' or 'SPT' prefixes for the Submitter Number.
2.9	07/13/2021	Palmetto GBA	Updated document for clarification and consistency
2.8	02/10/2020	Palmetto GBA	Updated document to be in compliance with CMS XLC Standards
2.7	01/24/2020	Palmetto GBA	Updated the term "Gentran" to "TIBCO MFT" throughout the document
2.6	12/12/2018	Palmetto GBA	Updated GENTRAN mailbox Processing File Names for Production and Test PDE Cosmetic changes for consistency Added Note for after 14 days reports are removed if not viewed
2.5	10/11/2018	Palmetto GBA	Added Gentran mailbox Processing File Names Section Added Invalid File Naming Conventions Cosmetic changes for better clarification Updated Table of Contents
2.4	09/13/2018	Palmetto GBA	Revised SFTP process Moved Appendix A: Record of Change to the last page Changed to Appendix B Updated Table of Contents
2.3	09/11/2018	Palmetto GBA	Remove File Transfer Protocol (FTP) Information Added new DDE processes
2.2	08/21/2018	Palmetto GBA	Updates to the SFTP Naming Conventions including RA and PDE and SFTP processes
2.1	08/10/2018	Palmetto GBA	Updates to Encounter and MMP due to the TIBCO/SFTP Migration Included NCPDP and Encounter Dental naming conventions for TIBCO mailboxes
2.0	08/04/2018	Palmetto GBA	Updates due to decommissioning of websites and TIBCO/SFTP Migrations
1.0	11/20/2017	Palmetto GBA	Initial creation

## Appendix B: Acronym List

Table 33: Acronym List

Acronym	Definition
<b>A</b>	
ASC	Accredited Standards Committee
<b>C</b>	
CA	Claim Acknowledgement
CMS	Centers for Medicare & Medicaid Services
CSSC	Customer Service Support Center
<b>D</b>	
DDE	Direct Data Entry
DDPS	Drug Data Processing System
DME	Durable Medical Equipment
<b>E</b>	
EDFES	Encounter Data Front End System
EDI	Electronic Data Interchange
EDPS	Encounter Data Processing System
<b>F</b>	
FES	Front End System
FERAS	Front End Risk Adjustment System
<b>H</b>	
HICN	Health Insurance Claim Number
<b>I</b>	
ICD-9/ICD-10	International Classification of Diseases, Clinical Modification (Versions 9 and 10)
ID	Identification
<b>M</b>	
MAPD	Medicare Advantage Prescription Drug
MAO	Medicare Advantage Organization
MBI	Medicare Beneficiary Identifier
MFT	Managed File Transfer
MMP	Medicare Medicaid Plan
<b>N</b>	
NCPDP	National Council for Prescription Drug Programs
NDM	Network Data Mover
NSV	Network Service Vendor
<b>P</b>	
PDE	Prescription Drug Event
PDFS	Prescription Drug Front End System
<b>R</b>	
RA	Risk Adjustment
RAPS	Risk Adjustment Processing System
<b>S</b>	
SFTP	Secure File Transfer Protocol