Risk Adjustment for EDS & RAPS User Group

Thursday,

October 20, 2016

Agenda

➢Introduction

➢MAO-004 Reports

➢Chart Review

- Submission & Common Errors

- Chart Review Duplicate Logic

➢Q&A Session

Introduction

Session Guidelines

➢ This is a one hour webinar session for MAOs and other entities 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 QA feature.

➢ For questions regarding content of this webinar, submit inquiries to CMS at: EncounterData@cms.hhs.gov or Riskadjustment@cms.hhs.gov.

➢ Today's webinar slides will be posted on the CSSC Operations website under Medicare Encounter Data>User Group and Risk Adjustment Processing System>User Group. The Q&As will be posted in the coming weeks at the same location.

➢ Please refer to http://tarsc.info for the most up to date details regarding training opportunities.

Upcoming User Group Calls

➢ CMS plans to hold monthly user group calls to address topics related to risk adjustment data (EDS and RAPS data submissions)

➢ Next Session: November 17, 2016

➢ There will be no December 2016 user group call

➢ The topics and 2017 dates for future webinar sessions will be posted on http://tarsc.info

WHY The MAO-004 Report
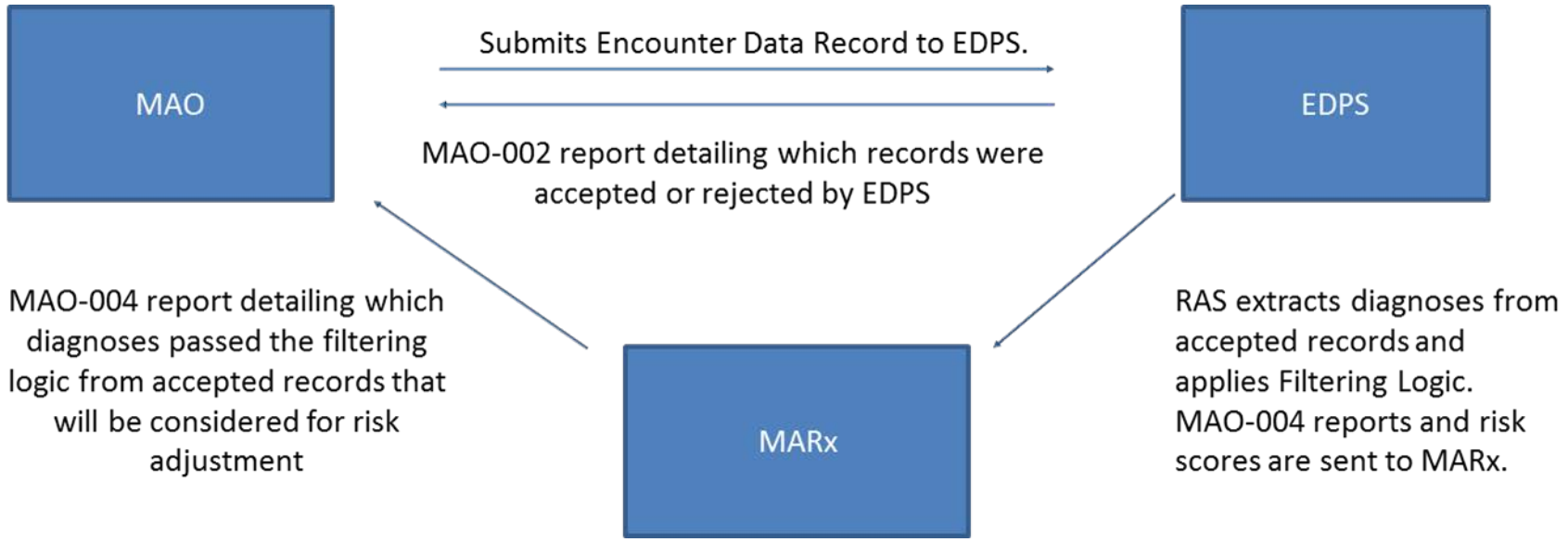
WHY The MAO-004 Report – Background

- When CMS calculates beneficiary risk scores, it uses diagnoses from the prior year, whether they were submitted by a FFS provider, or by a plan.

- For a diagnosis to be eligible for risk adjustment, it must be documented in a medical record from an acceptable provider type (hospital inpatient, hospital outpatient, or professional) and the result of a face-to-face visit. The objective of these rules is to ensure that we only use reasonably definitive diagnoses to predict costs. CMS has further established rules regarding which inpatient and outpatient facilities, and which professional encounters, are acceptable sources for risk adjustment-eligible diagnoses.

- Historically, Medicare Advantage Organizations (MAOs) have done their own filtering and submitted to CMS risk adjustment eligible diagnoses in a minimum data set to the RAPS. Therefore, CMS has not needed to filter diagnoses submitted by MAOs in order to calculate risk scores.

- In submitting encounter data, unlike in RAPs data, MAOs are required to submit the full breadth of information regarding services furnished to a beneficiary. CMS must identify those diagnoses, on accepted Encounter Data Records submitted to EDS, that meet risk adjustment rules.

- **These diagnoses that meet the risk adjustment rules are reported to the plans on the MAO-004 Report.**

Overview of the Encounter Data Filtering Process & The MAO-004 Report

MAO

Submits Encounter Data Record to EDPS.

MAO-002 report detailing which records were accepted or rejected by EDPS

EDPS

MAO-004 report detailing which diagnoses passed the filtering logic from accepted records that will be considered for risk adjustment

MARx

RAS extracts diagnoses from accepted records and applies Filtering Logic. MAO-004 reports and risk scores are sent to MARx.

WHEN Do Plans Receive The MAO-004 Reports?

WHEN Do Plans Receive The MAO-004 Reports?

- MAOs receive the MAO-004 Reports on a **monthly** basis; around the 22nd/23rd of each month

- Each monthly report contains risk adjustment eligible diagnoses that were submitted on encounter data and chart review records during the previous month

- An MAO will receive MAO-004 Report only if:

  - **Criteria 1:** The encounter data records are 2014 or later date of service (DOS)

  - **Criteria 2**: Those EDRs are accepted at the header level to EDS on the MAO-002 Report

  - **Criteria 3:** Diagnoses on these EDRs pass the CMS filtering logic

Example

- In July 2016, Happy Health Plan submitted 60 EDRs to EDS with the following breakdown:

Date of Service	Total EDRs Submitted	MAO-002 Header Accepted	MAO-002 Header Rejected
2012	2	2	0
2013	3	3	0
2014	10	9	1
2015	15	15	0
2016	30	25	5

Example (continued)

- When should Happy Health Plan (HHP) be expecting to receive July 2016 MAO-004 Report?
  - 22nd/23rd August, 2016

- Which submissions month data will HHP's MAO-004 received on August 22nd/23rd 2016 MAO-004 contain?
  - Data submitted in July 2016

- Based on **Criteria 1**, which DOS will HHP's July MAO-004 report contain?
  - 2014, 2015 & 2016

- Based on **Criteria 2**, how many EDRs will HHP's July MAO-004 report contain?

2014	2015	2016
9	15	25

Example (continued)

- Out of the EDRs that were accepted, below is the breakdown of EDRs that passed the CMS filtering logic:

DOS	MAO-002 Header Accepted	Passed CMS Encounter Data Filtering Logic
2014	9	9
2015	15	15
2016	25	20

- Question: Based on Criteria 3, diagnoses from how many of HHP's EDRs submitted in July 2016 will be in the MAO-004 received on August 22nd/23rd 2016?

2014	2015	2016
9	15	20

Example Summary

- In Summary, HHP's MAO-004 Report received on August 22nd/23nd will contain diagnoses from a total of 44 records out of the 60 records submitted:

Date of Service	Total EDRs Submitted	MAO-002 Header Accepted	MAO-002 Header Rejected	Failed CMS ED Filtering Logic	Passed CMS ED Filtering Logic & MAO-004
2012	2	2	0	N/A	N/A
2013	3	3	0	N/A	N/A
2014	10	9	1	0	9
2015	15	15	0	0	15
2016	30	25	5	5	20
TOTAL	60	54	6	5	44

WHERE Can Plans Find MAO-004 Reports?

WHERE Can Plans Find MAO-004 Reports?

- MAO-004 Reports are sent to Plans through MARx

- The file naming convention for the MAO-004 Reports is as follows:

  - **Gentran Mailbox/TIBCO MFT Internet Server**: P.Rppppp.MAO004.Dyymmdd.Ttttttt
  - **Connect:Direct (Mainframe)**: zzzzzzzz.Rppppp.MAO004.Dyymmdd.Ttttttt
  - **Connect:Direct (Non-Mainframe)**: [directory]Rppppp.MAO004.Dyymmdd.Ttttttt,

- Where:
  - zzzzzzzz is the plan sponsor-provided high level qualifier
  - ppppp 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

WHERE Can Plans Find MAO-004 Reports?

- Download through MARx UI

WHAT Are the Contents of the MAO-004 Reports?

Definitions

Phase I MAO-004 Reports: These are the version of the reports the MAOs have been receiving since December 2015.

Phase II MAO-004 Reports: These are the version of the reports the MAOs will begin receiving in the fall of 2016 with the revised template & corrections to errors – on which this presentation will focus.

MAO-004 Report Header

#	Item	Notes	Length	Starting Position	Ending Position	Format
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 * character
5	Medicare Advantage Contract ID	Medicare Contract ID assigned to the submitting contract	5	11	15	Alpha Numeric
6	Delimiter		1	16	16	Uses the * character
7	Report Date	Date of report creation	8	17	24	Numeric, format CCYYMMDD
8	Delimiter		1	25	25	Uses the * character
9	Report Description	Value is "Encounter Data Diagnosis Eligible for Risk Adjustment"	53	26	78	Alpha Numeric, left justify, blank fill
10	Delimiter		1	79	79	Uses the * character
11	Filler		30	80	109	Spaces
12	Delimiter		1	110	110	Uses the * character
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	Filler		385	116	500	Spaces

MAO-004 Report Detail

#	Item	Notes	Length	Starting Position	Ending Position	Format
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 * character
5	Medicare Advantage Contract ID	Medicare Contract ID assigned to the submitting contract	5	11	15	Alpha Numeric
6	Delimiter		1	16	16	Uses the * character
7	Beneficiary HICN	Beneficiary Health Insurance Claim Number	12	17	28	Alpha Numeric
8	Delimiter		1	29	29	Uses the * character
9	Encounter ICN	Encounter Data System (EDS) Internal Control Number. In encounter data, only 13 spaces represent the ICN; however, there are 44 spaces on the records to allow enhancement of the ICN.	44	30	73	Numeric
10	Delimiter		1	74	74	Uses the * character
11	Encounter Type Switch	This field can take on 9 different values: "1" = original encounter, "2" = Void to an original Encounter, "3"= Replacement to an original Encounter, "4" = Linked Chart Review, "5"= Void to a Linked Chart Review, "6"=Replacement to a Linked Chart Review; "7"=Unlinked Chart Review; "8"=Void to an unlinked chart review; "9"=Replacement to an unlinked chart review	1	75	75	Alpha Numeric
12	Delimiter		1	76	76	Uses the * character
13	Original Encounter ICN	Encounter Data System (EDS) Internal Control Number. This field in an Adjustment or Linked Chart Review contains the ICN of the claim/encounter to which the adjustment or linked chart review links. It will be blank on Original encounters (and Unlinked Chart Reviews).	44	77	120	Numeric

MAO-004 Report Detail (continued)

#	Item	Notes	Length	Starting Position	Ending Position	Format
14	Delimiter		1	121	121	Uses the * character
15	Plan Submission Date	Identifies MAO data submission date	8	122	129	Numeric, format CCYYMMDD
16	Delimiter		1	130	130	Uses the * character
17	Processing Date	Identifies Encounter Data Processing System (EDPS) processing date.	8	131	138	Numeric, format CCYYMMDD
18	Delimiter		1	139	139	Uses the * character
19	"From" Date of Service	The beginning of a provided service	8	140	147	Numeric, format CCYYMMDD
20	Delimiter		1	148	148	Uses the * character
21	"Through" Date of Service	The end date for a provided service.	8	149	156	Numeric, format CCYYMMDD
22	Delimiter		1	157	157	Uses the * character
23	Claim Type	Type of Claim: Professional, Inpatient, or Outpatient (Values: P, I, O)	1	158	158	Alpha Numeric
24	Delimiter		1	159	159	Uses the * character

#	Item	Notes	Length	Starting Position	Ending Position	Format
25	Diagnosis Code	ICD-9 codes will be accepted prior to the ICD-10 implementation date. Only ICD-10 codes will be accepted starting with ICD-10 implementation date.	7	160	166	Alpha Numeric
26	Delimiter		1	167	167	Uses the * character
27	Diagnosis ICD	ICD code for Diagnosis (9 or 0). 9=ICD-9 and 0=ICD-10	1	168	168	Alpha Numeric
28	Delimiter		1	169	169	Uses the * character
29	Add or Delete flag	This will flag a diagnosis if it is an add or delete. A=Add, D=Delete. Original encounters which Add diagnoses, and Replacements that effectively Add or Delete diagnoses, shall be flagged with A or D accordingly. Replacements that have no effect on the diagnoses submitted in the Original encounter are not reported again in the MAO-004 report in the submission month of the Replacement, as the diagnoses in the Original submission stand as originally submitted.	1	170	170	Alpha Numeric
30	Delimiter		1	171	171	Uses the * character
31	Diagnosis Codes	This field represents up to 11 (for Professional) or up to 24 (for Institutional) occurrences of the diagnosis codes along with the corresponding Diagnosis ICD and Add or Delete flag (field #25-30 values).	288	172	459	Alpha Numeric
32	Filler		41	460	500	Spaces

MAO-004 Report Trailer

#	Item	Notes	Length	Starting Position	Ending Position	Format
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
5	Medicare Advantage Contract ID	Medicare Contract ID assigned to the submitting contract	5	11	15	Alpha Numeric
6	Delimiter		1	16	16	Uses the * character
7	Total Number of Records	Count of records on this report	18	17	34	Numeric, no commas and/or decimals
8	Delimiter		1	35	35	Uses the * character
9	Filler		465	36	500	Spaces

Understanding the "Add"/ "Delete" Functionality (Detail Field #29)

Definitions:

- **Add**: All diagnoses submitted on original encounters, unlinked chart reviews, non-delete linked chart reviews, and diagnoses reported on an accepted replacement that were not previously submitted and accepted original encounter or chart review are considered "Adds."

- **Delete**: All diagnoses submitted on void encounters, void chart reviews, linked chart review deletes, and diagnoses not submitted on the latest accepted replacement encounter, but were submitted on a previously accepted encounter the replacement is linked to.

Understanding the "Add"/ "Delete" Functionality (Detail Field #29) (continued)

Definitions:

- **Acceptable HCPCS code**: The HCPCS code submitted on the encounter or chart review record is found on the Medicare CPT/HCPCS list.

- **Encounter Family**: A group of encounter data records that are linked by an ICN(s) (can include original encounter data records, original chart review records, replacements, and voids).

Scenario 1:

Happy Health Plan submitted an original encounter ICN 1234 with ICD-10 diagnoses AAA, BBB, CCC. Encounter 1234 was accepted into EDS and **it passes** the CMS filtering logic.

AAA*0*A*BBB*0*A*CCC*0*A

Scenario 2:

Happy Health Plan submitted an original encounter ICN 1234 with ICD-10 diagnoses AAA, BBB, CCC. Encounter 1234 was accepted into EDS and **it passes** the CMS filtering logic. Happy Health Plan submitted a replacement encounter data record ICN 9876 with ICD-10 diagnoses AAA, BBB, GGG linked to ICN 1234. Encounter 9876 **passes** the CMS filtering logic.

GGG*0*A*CCC*0*D

- GGG was not on the original encounter; therefore, it is reported as an "Add" since it was reported for the first time on the replacement encounter.
- CCC was on the original, and has been reported on the MAO-004 Report before as an "Add." However, it is not on the replacement; therefore, the MAO-004 reports CCC as a "Delete" for the month when the replacement encounter was submitted.
- AAA & BBB were on the original encounter and have been reported as an "Add" before, therefore, they are not reported on the MOA-004 again as an "Add."

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Scenario 3:

Happy Health Plan submitted an original encounter ICN 2345 with ICD-10 diagnoses XXX, YYY, ZZZ. EDR 2345 **does not pass** the CMS filtering logic.

No diagnoses will be reported

Scenario 4:

Happy Health Plan, contract H1234, submitted an original encounter ICN 2345 with 27 ICD-10 diagnoses AAA, BBB, CCC …… YYY, ZZZ, AAB. EDR 2345 **passes** the CMS filtering logic.

Diagnoses AAA, BBB, CCC …… YYY, will be reported on one line of the MAO-004 report. Diagnosis code ZZZ and AAB will be reported on a second line that is identical to the first except for the diagnosis codes.

1*MAO-004*H1234…*2345*1*…*AAA*0*A*BBB*0*A*CCC*0*A*……*YYY*0*A
1*MAO-004*H1234…*2345*1*…*ZZZ*0*A*AAB*0*A

MAO-002 Report

Recent MAO-002 Report Updates

ListServ Release Date	ListServ Information
August 30, 2016	Future enhancement for the edit logic of informational error code 22100 - Rev Code 0023 Invalid for DOS.
October 5, 2016	Restoration of MAO-002 Reports based on the date that the report was originally distributed to an MAO, MMP or other entity.

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

Note: Diagnoses from "Accepted" encounters that pass the filtering logic will display on a corresponding MAO-004 Report.

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 (CCN)	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

Position(s)	Item	Notes	Length	Format
TRAILER (TOTALS) RECORD				
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-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 Formatted Report Layout

MAO-002 Report – Accepted


```
D:\CSSC\MAO-002 Encounter Processing Report (enhanced) - Formatted Report Layout.txt          Friday, August 31, 2012 11:14 AM

                              Encounter Data Processing Status Report
                                 Report Run Date 08/23/2012 11:58AM
                                Medicare Advantage Contract ID: H9997

   TEST

   Page 1                                       Submission Interchange Number: ENH999912400000020120822
                                                                Report Date: 08/23/2012
   Report ID: MAO-002                                      Transaction Date: 08/22/2012


                                              Encounter
                                              Line      Encounter
   Record Type  Plan Encounter ID (CCN)       Encounter ICN           Number    Status       Error Error Description
   -----------  -----------------------  ------------------------ ---------------------------------------------
   PRO          07520534                 E212031011480TEST        000       Accepted     -     -
                                                                  001       Accepted     -     -
                                                                  002       Accepted     -     -
                                                                  003       Accepted     -     -
                                                                  004       Accepted     -     -
                                                                  005       Accepted     -     -
   TOTALS:

   Total Processing Errors: 0
   Total Number of Encounter Lines Accepted : 6           Total Number of Encounter Records Accepted : 1
   Total Number of Encounter Lines Rejected : 0           Total Number of Encounter Records Rejected : 0
   Total Number of Encounter Lines Submitted: 6           Total Number of Encounter Records Submitted: 1
```

- Note: "Accepted" encounters will display on a corresponding MAO-004 Report.

37

MAO-002 Formatted Report Layout (continued)

MAO-002 Report - Rejected

```
                               Encounter Data Processing Status Report
                                  Report Run Date 08/23/2012 11:58AM
                                 Medicare Advantage Contract ID: H9997

TEST

Page 1                                             Submission Interchange Number: ENH999912400000020120822
                                                                    Report Date: 08/23/2012
Report ID: MAO-002                                             Transaction Date: 08/22/2012


                                         Encounter
                                         Line        Encounter
Record Type  Plan Encounter ID (CCN)      Encounter ICN               Number      Status       Error Error Description
-----------  -----------------------  ----------------------------   ------------------------------------------------
PRO          07520534                 E212031011480TEST              000         Rejected    -      -
                                                                     001         Rejected    98325 Service Line(s) Duplicated
TOTALS:

Total Processing Errors: 0
Total Number of Encounter Lines Accepted : 0         Total Number of Encounter Records Accepted : 0
Total Number of Encounter Lines Rejected : 2         Total Number of Encounter Records Rejected : 1
Total Number of Encounter Lines Submitted: 2         Total Number of Encounter Records Submitted: 1
```

38

HOW Do Plans Map MAO-004 & MAO-002 Reports?

HOW Do Plans Map MAO-004 & MAO-002 Reports?

- Recommended fields to map MAO-002 Accepted EDRs to MAO-004 Reports
    - Encounter ICN (Detail #9)
    - Header From Date of Service (Detail #19)
    - Header Through Date of Service (Detail #21)

Quick Checklist To Map Missing MAO-004 Reports, EDRs, Or Diagnoses On The MAO-004

- ✓ Did the MAO submit 2014 and later data during that submission month?
- ✓ Were the EDRs' MAO-002 Headers accepted by EDS?
- ✓ Did the EDRs pass the CMS published filtering logic for each specific Encounter Type – Professional, Outpatient, Inpatient?
- ✓ If questions remain, please send ICN scenarios to the encounterdata@cms.hhs.gov

Resources

CMS Final Filtering Memo

http://csscoperations.com/internet/cssc3.nsf/DocsCat/A5GM6K3403

Acceptable Risk Adjustment CPT/HCPCS List

https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors-Items/CPT-HCPCS.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending

MAO-004 Phase 2 Memo & Layout

http://csscoperations.com/internet/cssc3.nsf/DocsCat/ACHPHW3337

EDS Chart Review

Chart Review Submission

- Chart review encounters may be submitted for the following reasons:
  - Add specific diagnoses to full encounters,
  - Delete specific diagnoses from full encounters,
  - Replace one chart review encounter with another chart review encounter, or
  - Void a previously accepted chart review encounter
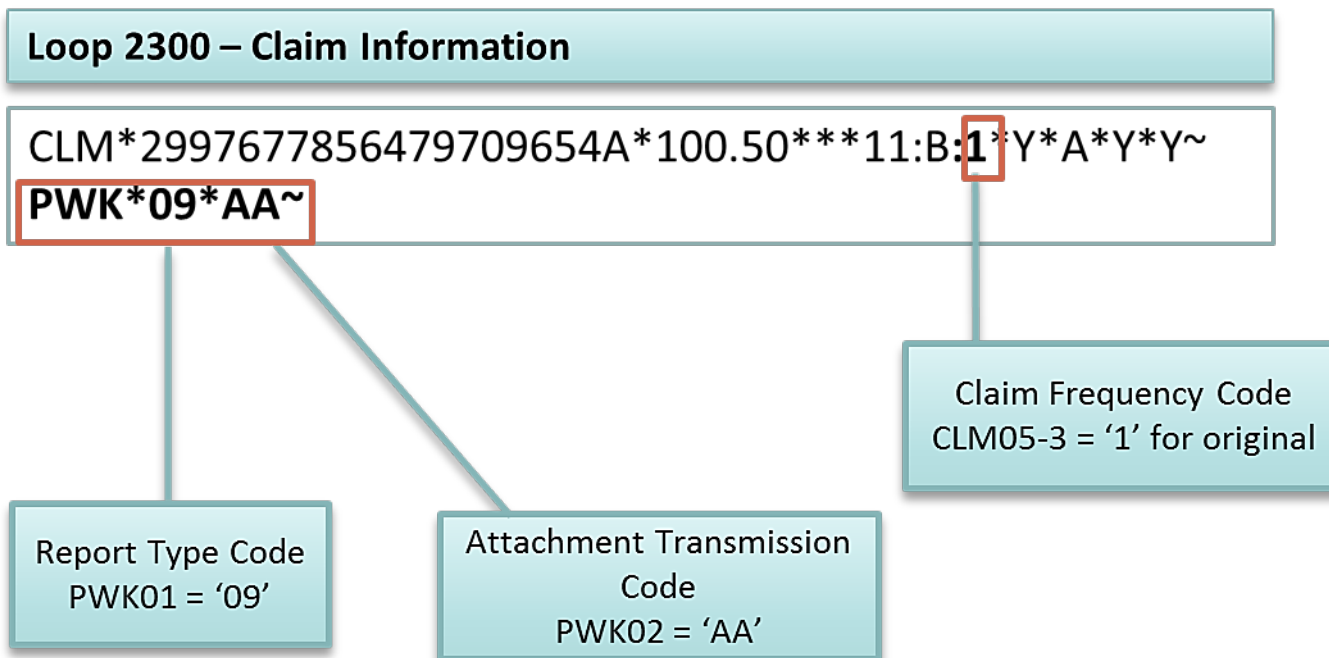
Chart Review Submission (continued)

- In addition to submitting encounters, plan sponsors are also allowed to submit encounter data records that reflect chart reviews. The chart review records allow MAOs to:

  - Submit additional diagnoses that were not submitted on the encounter

  - Delete diagnoses via linked chart review that had been submitted on a previously-submitted encounter

Linked and Unlinked Chart Review

- Linked Chart Review – defines an encounter data record that is linked or referenced by the ICN assigned to a previously-submitted and accepted encounter.

- Unlinked Chart Review – defines an encounter that is not linked to a previously-submitted and accepted encounter.

- Chart review records must be submitted using at least the Minimum Data Elements.

- Linked chart review records containing E-codes or Manifestation codes must include the primary diagnosis code identified on the encounter data record to which the chart review record is linked or the EDS will reject the encounter.

Chart Review Indicators

- The EDS recognizes that an MAO has submitted a chart review record when the Loop 2300, PWK segment is populated with the following values:

    – PWK01 = '09"

    – PWK02 = 'AA'

Loop 2300 – Claim Information

CLM*2997677856479709654A*100.50***11:B:1*Y*A*Y*Y~
PWK*09*AA~

Report Type Code
PWK01 = '09'

Attachment Transmission Code
PWK02 = 'AA'

Claim Frequency Code
CLM05-3 = '1' for original

Unlinked Chart Review Indicators

- Data elements to identify an unlinked chart review:

Loop 2300 – Claim Information

CLM*29976778564797096 54A*100.50***11:B:**1***Y*A*Y*Y~
PWK*09*AA~
HI*BK:78901~
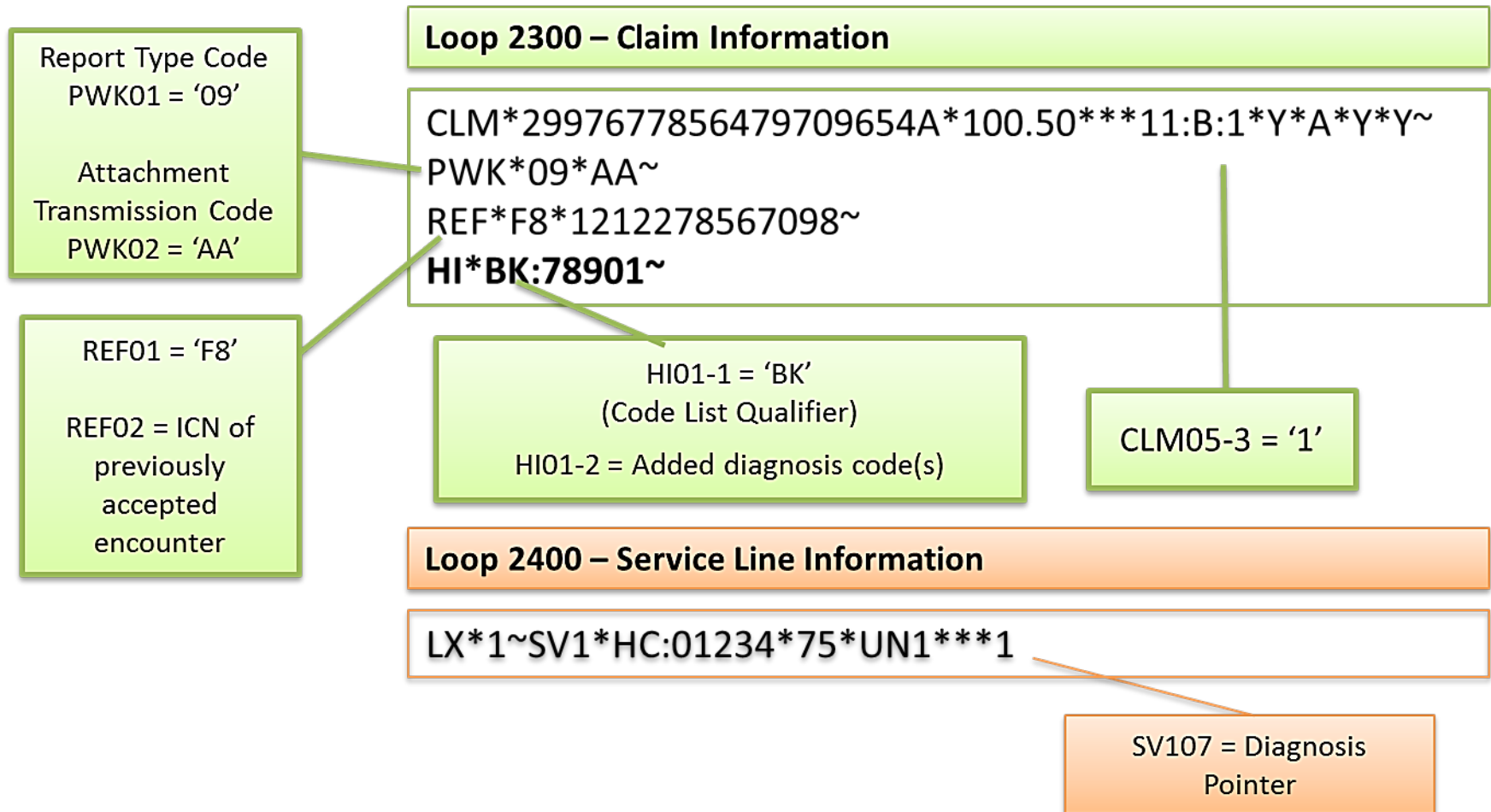SBR*P*18*XYZ1234567******16~

Report Type Code
PWK01 = '09'

Attachment
Transmission Code
PWK02 = 'AA'

CLM05-3 = '1'

Loop 2300 REF Segment is not required for submission of unlinked chart review encounters
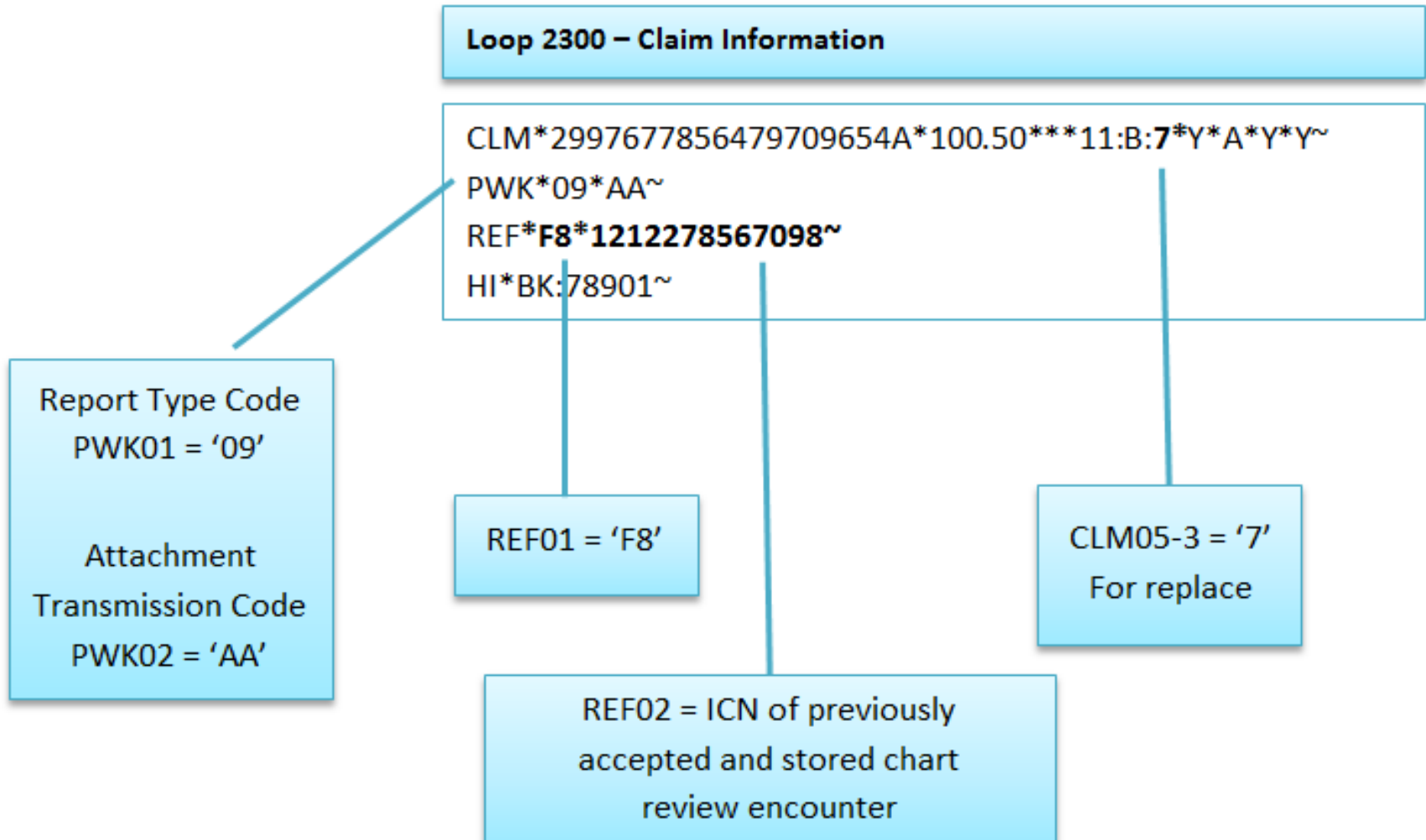
Add Diagnosis to Linked Chart Review Record

- Data elements to add a diagnosis code(s):

Report Type Code
PWK01 = '09'

Attachment
Transmission Code
PWK02 = 'AA'

REF01 = 'F8'

REF02 = ICN of
previously
accepted
encounter

Loop 2300 – Claim Information

CLM*29976778564479709654A*100.50***11:B:1*Y*A*Y*Y~
PWK*09*AA~
REF*F8*1212278567098~
HI*BK:78901~

HI01-1 = 'BK'
(Code List Qualifier)

HI01-2 = Added diagnosis code(s)

CLM05-3 = '1'

Loop 2400 – Service Line Information

LX*1~SV1*HC:01234*75*UN1***1

SV107 = Diagnosis
Pointer

Replace Chart Review Record

- Data elements to replace chart review record:

Loop 2300 – Claim Information

CLM*29976778564479709654A*100.50***11:B:**7***Y*A*Y*Y~
PWK*09*AA~
REF***F8*1212278567098**~
HI*BK:78901~

Report Type Code
PWK01 = '09'

Attachment
Transmission Code
PWK02 = 'AA'

REF01 = 'F8'

REF02 = ICN of previously
accepted and stored chart
review encounter

CLM05-3 = '7'
For replace

Void Chart Review Record

- Data elements to void chart review record:

Loop 2300 – Claim Information

CLM*29976778564479709654A*100.50***11:B:**8***Y*A*Y*Y~
PWK*09*AA~
REF***F8*****1212278567098**~
HI*BK:78901~

Report Type Code
PWK01 = '09'

Attachment
Transmission Code
PWK02 = 'AA'

REF01 = 'F8'

REF02 = ICN of previously
accepted and stored chart
review encounter

CLM05-3 = '8'
For void
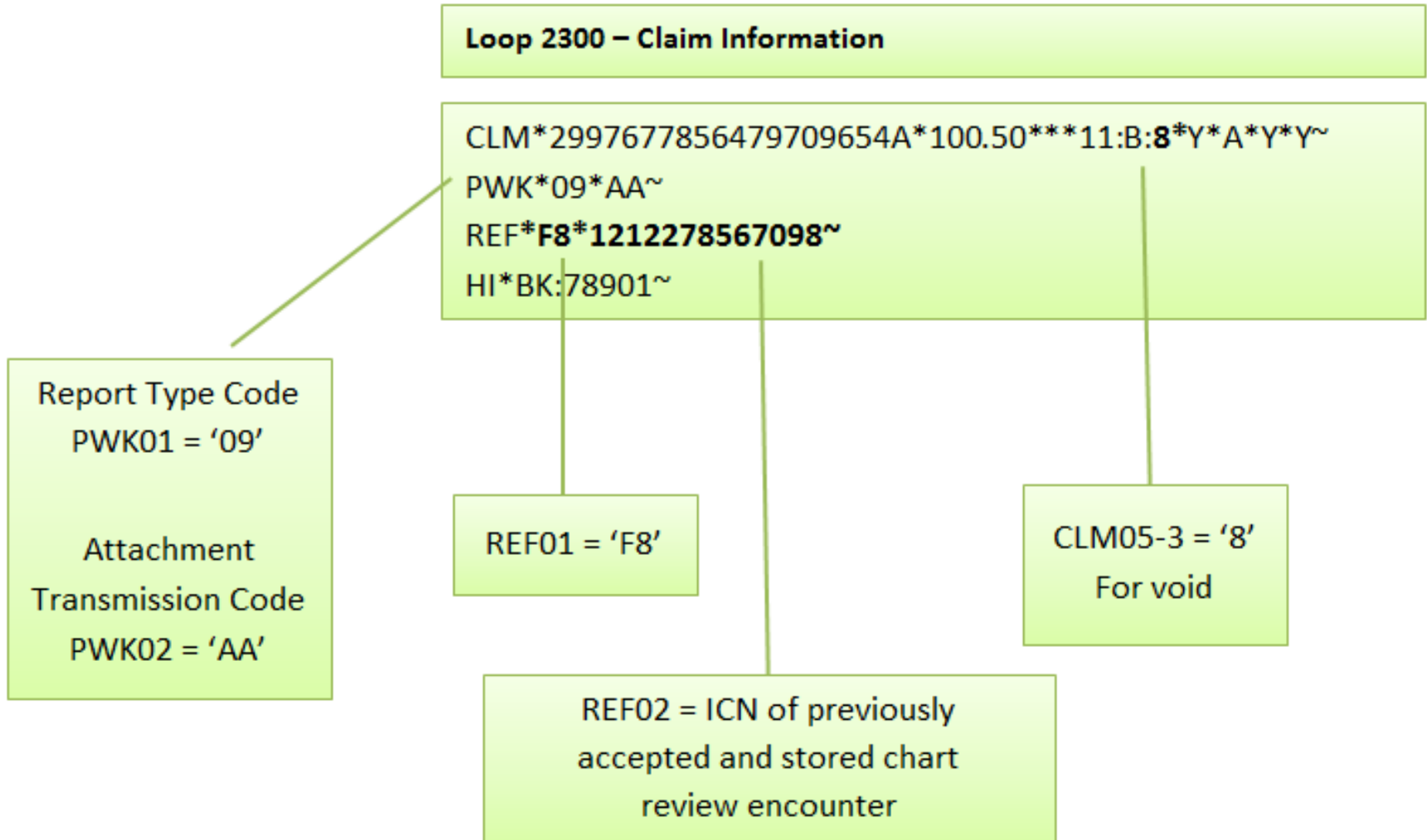
Chart Review Edits and Resolution Strategies

Edit	Category	Description	Prevention Strategy
00764	Validation	Original Must Be a Chart Review to Void	If the void encounter (frequency code '8') is populated with PWK01='09' and PWK02='AA', the encounter submission to be voided must be a chart review encounter.
00765	Validation	Original Must Be a Chart Review to Adjust	If the replacement encounter data record (frequency code '7') is a chart review record (PWK01='09' and PWK02='AA'), the encounter data record that it is replacing must also be a chart review record. The submitter must also ensure that the ICN references the most recent chart review record , ***not the most recent non-chart review encounter record***. The replacement chart review record must contain all data elements, including all relevant diagnosis codes populated on the most recent chart review record it is replacing.

Chart Review Edits and Resolution Strategies
(continued)

Edit	Category	Description	Prevention Strategy
00785	Validation	Linked Encounter Not in EODS	The ICN referenced in a linked chart review record must match the ICN of an accepted encounter data record.
00790	Validation	Linked Encounter is Voided/Adjusted	The ICN referenced in a linked chart review record must not match the ICN of a voided encounter data record.
00795	Validation	Linked Encounter is Rejected	The ICN referenced in a linked chart review record must not match the ICN of a rejected or adjusted encounter data record.

Chart Review Edits and Resolution Strategies
(continued)

Edit	Category	Description	Prevention Strategy
00805	Validation	Deleted Diagnosis Code Not Allowed	• An unlinked chart review record should not be submitted with an indicator for deleting diagnosis code(s) • A replacement chart review record for a previously accepted unlinked chart review encounter should not be submitted with an indicator for deleting diagnosis code(s). • The EDPS does not allow an unlinked chart review to delete diagnoses. To delete a diagnosis code from an encounter or unlinked chart review, the plan should either replace or void the existing encounter or unlinked chart review, or submit a linked chart review delete.

EDPS Submissions: Linked Chart Review Duplicate Logic

EDPS rejects a chart review record with edit "98315 – Linked Chart Review Duplicate" at the header level when a Linked Chart Review contains the same exact data values as an existing linked chart review record accepted by EDPS, based on the following data elements:

1. Associated ICN
2. Health Insurance Claim Number (HICN)
3. Header Date of Service
4. Diagnosis code
5. For institutional records only the Type of Bill is an additional requirement for duplicate check

EDPS Submissions: Unlinked Chart Review Duplicate Logic

EDPS rejects a chart review record with edit "98320 – Chart Review Duplicate" at the header level when a chart review record contains the same exact data values as an existing linked or unlinked chart review accepted by EDPS, based on the following data elements:

1. Health Insurance Claim Number (HICN)
2. Header Date of Service
3. Diagnosis code
4. For Institutional Records only the Type of Bill is an additional Requirement

Questions & Answers
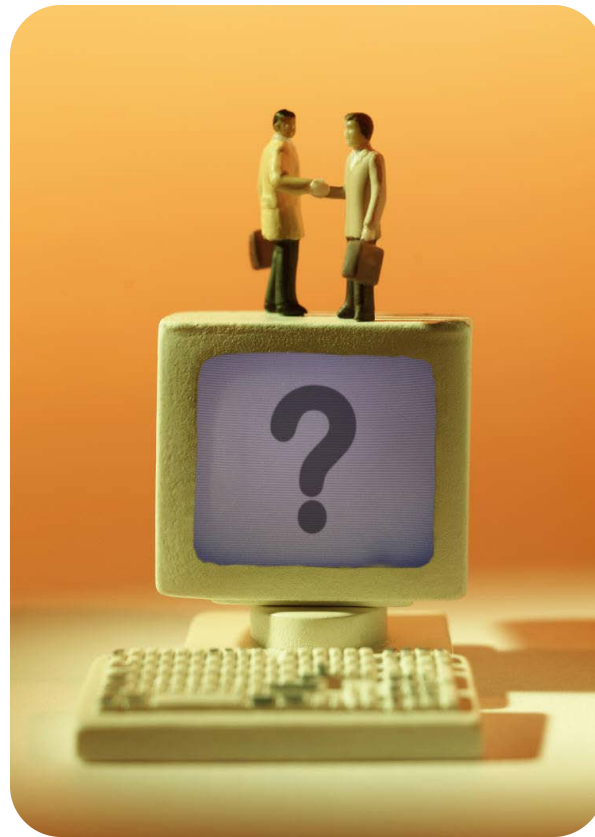
Closing Remarks

Commonly Used Acronyms

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

Contact Us

- Additional questions may also be submitted following the webinar to:

  EncounterData@cms.hhs.gov

  or

  RiskAdjustment@cms.hhs.gov

- Questions submitted to other CMS mailboxes will be forwarded to the risk adjustment or encounter data mailboxes as appropriate.

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.

Thank You!

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