

### HEADLINE NEWS

#### EDS & RAPS SUBMISSIONS FOR ICD-10 TRANSITION

MAOs and other entities preparing files for submission to EDS or RAPS must split claims for dates of service (DOS) spanning the 10/1/15 ICD-10 transition date.

If DOS...	Then submit...
From and Through dates are on, or before, 9/30/15	One (1) encounter with ICD-9 codes
From DOS is on, or after 10/1/15	One (1) encounter with ICD-10 codes
From DOS is before 10/1/15 and Through date is on, or after 10/1/15	Two (2) encounters one (1) with "through" DOS 9/30/15 using ICD-9 codes, and one (1) with "from" DOS 10/1/15 on using ICD-10 codes

#### International Classification of Diseases-10 (ICD-10)

##### Code Sets

The transition from ICD-9 to the ICD-10 is scheduled for October 1, 2015. Consistent with previous payment years, the data collection year for risk scores used for 2016 payment is the prior calendar year (CY2015). Therefore, both ICD-9 codes, from dates of service January 1, 2015 to September 30, 2015, and ICD-10 codes, from dates of service October 1, 2015 to December 31, 2015, will be used in calculating 2016 risk scores.

#### EDS and RAPS ICD-10 Testing Extension

In response to industry inquiries, CMS has extended EDS and RAPS ICD-10 testing. For ICD-10 testing requirements, please refer to the [RAPS and Encounter ICD-10 Testing](#) listserv dated 07/07/2015.

In the event you have questions, please contact CSSC Operations at 1-877-534-2772 (option 2) or by email at [CSSCOperations@palmettogba.com](mailto:CSSCOperations@palmettogba.com).



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### RECENT EVENTS

- June 11, 2015 Risk Adjustment for EDS & RAPS Webinar materials are available at <http://www.csscooperations.com>

### EVALUATION

Your feedback is very important to us. Please take a moment to note any feedback you wish to give concerning this newsletter by clicking <https://www.research.net/r/RANewsletterV113>.

### EDS Becomes Part of Risk Score Calculations

#### Payment Year 2016

There will be a change in the data sources used for calculating risk scores in PY 2016:

- Risk scores will be calculated by adding 90% of the score using RAPS and FFS with 10% of the score using ED and FFS.
- CMS will implement the risk score blend effective with PY 2016 final reconciliation, which will take place in the summer of 2017.

### HPMS GUIDANCE

#### Deadline for Submitting Risk Adjustment Data for Use in Risk Score Calculation

May 13, 2015 HPMS notice, *Deadline for Submitting Risk Adjustment Data for Use in Risk Score Calculation Runs for Payment Years 2015, 2016, and 2017* identifies the deadlines for submitting risk adjustment data (see table):

Risk Score Run	Dates of Service	Risk Adjustment Data Deadline for Submission
2016 Initial (RAPS)	07/01/14 – 06/30/15	Friday, 09/11/2015
2015 Final (RAPS, EDS)	01/01/14 – 12/31/14	Monday, 02/01/2016
2016 Mid-Year (RAPS)	01/01/15 – 12/31/15	Friday, 03/04/2016
2017 Initial (RAPS, EDS)	07/01/15 – 06/30/16	Friday, 09/09/2016
2016 Final (RAPS, EDS)	01/01/15 – 12/31/15	Tuesday, 01/31/2017

**Reminder:** Encounter data will not be added in to the risk scores until CMS calculates the final PY 2015 risk scores.

### COMMONLY ASKED QUESTIONS

#### Q: When will CMS release the MAO-004 Encounter Data Diagnoses Eligible for Risk Adjustment Report?

A: The MAO-004 Report requirements were included with the November Software Release, published through HPMS on August 28, 2015. The Memo is located on the CSSC Operations website at <http://www.csscoperations.com/internet/cssc3.nsf/docsCat/CSSC~CSSC%20Operations~Medicare%20Encounter%20Data~HPMS%20Memos?open&expand=1&navmenu=Medicare^Encounter^Data>.

#### Q: When will CMS post updated ICD-10 to HCC mappings?

A: Updated ICD-10 to HCC mappings are located on CMS' website at <http://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors-Items/IDC10Mappings.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending>; Continue to monitor this site for further updates.

### ATTENTION

Updates for the 5010 CEM Edits Spreadsheet will now be published through CMS transmittals on the cms.gov website <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/index.html?redirect=/transmittals/>

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### Encounter Data Front-End System (EDFES) Enhancements

#### Translator 999 Enhancements

Edit #	Edit Description	Prevention/Resolution Strategy
<b>X222.351.2400.SV104.045</b> (Professional)	IK403 = 5: "Data Element Too Long"	The quantity populated on the service line cannot be blank; must be greater than zero but less than 9999.9.
<b>X222.490.2430.DTP.010</b> (Professional)	IK304 = 16: "Implementation Dependent Segment Missing"	When a service line is adjudicated, a remittance date must be present.

#### Common Edit Module (CEM) 277CA Enhancements

Edit #	Edit Description	Prevention/Resolution Strategy
<b>X223.184.2300.HI.013</b> (Institutional) and <b>X222.226.2300.HI11-1.040</b> (Professional)	CSC 255: "Diagnosis code"	An encounter must be populated with either ICD-9-CM or ICD-10 codes; both cannot be present on the same encounter.
<b>X223.476.2430.SVD05.060</b> (Institutional)	CSC 476: "Missing or invalid units of service"	The units populated on the adjudicated service line cannot be blank; must be greater than zero.

### Encounter Data Processing System (EDPS) Enhancements

Edit #	Edit Description	Prevention/Resolution Strategy
<b>18120</b> (Institutional)	ICD-9 DX Code Error (deactivate edit)	All submissions to the EDS must contain valid diagnosis codes.
<b>03150</b> (Professional)	Modifier 26 and TC on the Same Line (new edit for diagnostic services)	Diagnostic services containing both a professional component (modifier 26) and a technical component (modifier TC) should be submitted on separate service lines; one for each component.
<b>03155</b> (Professional)	Modifiers Accepted are 26, TC, and 59 (new edit for diagnostic services)	Submitters should not report modifiers other than 26 (professional component), TC (technical component), or 59 (distinct procedural service) for diagnostic services.

Please reference the EDS Companion Guides for detailed comprehensive prevention and resolution strategies for these edits.