Encounter Data Submission and Processing Report Resource Guides

**Health Plan Management System (HPMS) Reports –
Submission Performance Reports**

Reports Overview

The Health Plan Management System (HPMS) is a web-enabled information system that serves a critical role supporting the ongoing operations of the Medicare Advantage (MA) and Part D programs. HPMS facilitates numerous data collection and reporting activities mandated for MAOs and other entities by legislation. HPMS provides support for the ongoing operations of the plan enrollment and plan compliance business functions as well as for longer-term strategic planning and program analysis.

The HPMS reports produced by the Medicare Plan Payment Group (MPPG) are operational reports and are intended to provide MAOs and other entities with a higher-level overview of encounter data quality across claim types and submission periods.

This job aid provides information about Submission Performance Reports, one of the three encounter data reports available through HPMS:

❖ Encounter Data Report Cards
❖ **Submission Performance Reports**
❖ Data Exchange Reports

All of the above named reports provide information about an MAO's and other entities' performance relative to benchmarks. Each may be used to identify target areas for improvement in data quality and may ultimately assist with payment accuracy.

Health Plan Management System (HPMS) Reports – Submission Performance Reports

Report Description

On August 20, 2018, CMS released an HPMS memo, "CMS Monitoring and Compliance of Encounter Data" which finalized the encounter data performance metrics and thresholds. The memorandum discusses seven performance metrics and their respective thresholds for MA encounter data. The thresholds are designed to identify performance issues that are substantially below reasonable expectations for submissions.

All performance measures and thresholds are at the contract level and performed annually.

CMS identified the following seven measures (3 operational and 4 completeness) to help guide improvement in encounter data submissions.

Measure	Description	Performance Threshold
Failure to complete end-to-end certification (Operational Performance: O1)	Identifies contract sponsors who have not completed end-to-end certification and begun submission of production encounter data within 4 months of the contract's effective date.	Failure to complete end-to-end testing and certification for a contract within four (4) months of the beginning of operations
Failure to submit any accepted records to the Encounter Data System (Operational Performance: O2)	Identifies contracts that did not have any accepted records in EDS for the prior submission year.	No accepted records submitted during the calendar year.

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Report Description

Measure	Description	Threshold
Excessive encounter data submission at the end of the risk adjustment submission window (Operational Performance: O3)	Excessive submission of records during the final two months of the risk adjustment submission period.	Twenty-seven (27) percent or more of encounter data and chart review records for the applicable calendar year were submitted in the last two months before the risk adjustment deadline.
Extremely low volume of overall encounter data records (Completeness Performance: C1)	Low number of accepted records per beneficiary in the prior submission year.	One-third of the mean number of EDRs per beneficiary observed in the first calendar quarter (January through March) among contracts of the same organization type. The threshold value is recalculated in the first quarter of each calendar year.
Extremely Low Volume of Inpatient Encounter Data Records (Completeness Performance: C2)	Matching beneficiaries in the RAPS data to beneficiaries in the EDS data for inpatient services.	The number of enrollees with an accepted inpatient record in EDS falls at or below 40% of the number of enrollees with an inpatient RAPS record.
Extremely Low Volume of Professional Encounter Data Records (Completeness Performance: C3)	Matching beneficiaries in the RAPS data to beneficiaries in the EDS data for professional services.	The number of enrollees with an accepted professional record in EDS falls at or below 90% of the number of enrollees with a professional RAPS record.
Extremely Low Volume of Outpatient Encounter Data Records (Completeness Performance: C4)	Matching beneficiaries in the RAPS data to beneficiaries in the EDS data for outpatient services.	The number of enrollees with an outpatient record in EDS falls at or below 70% of the number of enrollees with an outpatient RAPS record.

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Report Screenshot

CENTER FOR MEDICARE

Name: ABC MAO

Contract: HXXXX

Metric	Contract-Specific Value	Threshold for Orange Light	Status (Orange Light/Green Light)
O1: Failure to complete end to end certification in 2020	Certification completed	Certification not completed	🟩
O2: Failure to submit any EDRs in 2019	EDRs submitted	No EDRs submitted	🟩
O3: Excessive submission EDRs with 2018 service dates at the end of the 2018 submission window	5%	>=27%	🟩
C1: Low Submission Volume -- Overall, EDRs with service dates in 2018	26 EDRs per beneiciary	< 10.95 EDRs per beneficiary	🟩
C2: Low Submission Volume -- Inpatient EDRs compared with RAPS, for service dates in 2018	85%	<=40%	🟩
C3: Low Submission Volume -- Professional EDRs compared with RAPS, for service dates in 2018	98%	<=90%	🟩
C4: Low Submission Volume -- Outpatient EDRs compared with RAPS, for service dates in 2018	95%	<=70%	🟩

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Accessing the Report

Each MAO or other entity's contract-specific information, showing performance for each metric and technical notes with detailed specifications on each metric and threshold are available on the HPMS portal:

HPMS Home Page > Risk Adjustment > Encounter Data > Submission Performance Report

Report Resources

Medicare Encounter Data Submission and Processing Guide

Final HPMS Memo: Encounter Data Performance Metrics Thresholds (20180820)