4. ENCOUNTER DATA PROCESSING PROCEDURES

A. General Information

A. Reporting encounter data is a shared obligation of IEHP and Providers. CMS/DHCS has mandated encounter data report formats and reporting timelines with which IEHP is required to comply. IEHP, in turn, contractually requires capitated Providers to provide encounter data based on IEHP's regulatory obligations. IEHP has streamlined reporting requirements, to the extent possible, and implemented electronic methodologies for Providers to transfer encounter data as securely, economically, and efficiently as possible.

B. In accordance with CMS/DHCS regulations, IEHP requires Providers to submit encounter data within ninety (90) days of each month end. Encounter data must be submitted for all covered services provided to assigned capitated Members. Covered services include PCP visits as well as sub capitated services, regardless of place of service, type of service, or method of reimbursement to the Provider of Services. Failure to provide adequate and valid encounter data in the required format results in penalties being imposed as described in the IEHP Capitated Agreement. The attached Companion Guides describe some specific data element and format requirements for submission of encounter data to IEHP.

C. IEHP requires Providers to utilize the HIPAA Compliant 837I & 837P Version 5010 transaction code set, as well as compliance with IEHP companion guides when submitting encounter data. Records are identified by a unique Claim Reference Number (CRN) and the IEHP assigned Provider code. Notes describing some of the required data elements are outlined in this manual.

D. Upon receipt of an encounter data file, IEHP provides the TA1 (upon request), 999 and EVR response report. The TA1 is an X12 Interchange Acknowledgement Report that verifies the accuracy of the interchange segments (ISA, GS, GE, ST, SE and IEA). The 999 is a Functional Acknowledgment report that notifies Providers of any structural syntax errors. After IEHP processes and edits the encounter data received, a third report known as the Encounter Data Validity Report (EVR) is generated and uploaded to the Trading Partners Secure File Transfer Protocol (SFTP) folder.   The EVR report, formatted with either a RPH (Institutional) or RPM (Professional) extension, provides information describing the reasons the invalid data elements were denied\rejected.

E. All valid encounters are then uploaded to the IEHP encounter data processing system and prepared for submission to DHCS or CMS. After the outbound encounters have been submitted to DHCS and CMS, both regulatory bodies provide their own distinct set of response reports communicating the status for each encounter IEHP submitted. DHCS provides the 277CA and XML\EVR reports. While CMS provides the 277CA and MAO reports. IEHP will forward this information on to Providers in addition to the initial response reports provided.

4. ENCOUNTER DATA PROCESSING PROCEDURES

B. Naming Conventions

1. Hospitals

A. <u>Hospital Providers</u>: DHCS requires IEHP to report Outpatient Medical Encounters, Inpatient Admission Encounters, Long Term Care Encounters and Pharmacy Encounters. CMS/DHCS defines an Outpatient Encounter as each physician encounter, laboratory test, X-ray, therapy procedure, DME, prosthetic, orthotic, transportation, outpatient service, home health, skilled nursing, etc.

4. ENCOUNTER DATA PROCESSING PROCEDURES

B. Naming Conventions

2. Inbound Institutional & Professional Files

Inbound Encounter Data File Examples:

The naming convention for encounter data submissions consist of the following:

A. All file names start with the Provider's three (3) digit Submitter ID number.

B. The 3rd through 6th characters represent the two (2)-digit month and the last two (2) digits of the year (MMYY) (e.g. 0318 represent March 2018). The month should indicate the month the encounters were processed.

C. The 7th character identifies the type of encounter as "**h**" for **hospital** (institutional) or "**m**" for **medical** (professional).

D. The 8th, 9th and 10th characters represent the three (3)-digit iteration of the encounter data file.

E. The extension EDI must be .**enc** to identify encounter data files submitted by the Provider.

F. The file name is case sensitive. Use only lower case letters in the naming convention.

837I File Posted to **SFTP by Providers**

Examples of the file naming conventions for multiple files submitted on the same day for Institutional encounters are 0**1s0318h101.enc, 1s0318h102.enc and 1s0318h103.enc**

A. **01s** identifies the Submitter ID

B. **03** is for the month of March

C. **18** represents the last (2) digits of the year (2016)

D. **h** identifies a hospital (Institutional) encounter

E. **101** is the first file on same day, 102 second file, and 103 third file on same day.

F. **.enc** defines an encounter data file

837P File Posted to **SFTP by Providers**

Examples of the file naming conventions for multiple files submitted on the same day for Institutional encounters are 0**1s0318m001.enc, 01s0318m002.enc and 1s0318m003.enc**

A. **01s** identifies the Submitter ID

B. **03** is for the month of March

C. **18** represents the last (2) digits of the year (2016)

D. **m** identifies a medical (professional) encounter

E. **001** is the first file on same day, 002 second file, and 003 third file on same day.

F. **.enc** defines an encounter data file

4.   ENCOUNTER DATA PROCESSING PROCEDURES

B.   Naming Conventions

3.   IEHP Outbound Response Reports

IEHP Outbound Response Report Examples:

TA1 Report from IEHP to Providers

An example of the file naming convention for the report describing the reasons the interchange control structure was not valid is 0**1s0318h101_40605_201604122150.TA1**

A.   **01s0318h101** identifies the original file name

   1.   (Reference the Provider Sub-ID Chart for your two (2)-character Submitter code.)

B.   **40605** is the transmission ID assigned to the file by IEHP for tracking purposes

C.   **201804122150** is a CCYYMMDDHHMM date stamp for when the report was generated

D.   TA1 describes the type of report

999 Report from IEHP to Providers

An example of the file naming convention for the report describing the reasons the file structure was not valid is **1s0318h101_40605_201804122150.999**

A.   **1s0318h101** identifies the original file name

   1.   (Reference the Provider Sub-ID Chart for your two (2)-character Submitter code.)

B.   **40605** is the transmission ID assigned to the file by IEHP for tracking purposes

C.   **201804122150** is a CCYYMMDDHHMM date stamp for when the report was generated

D.   **999** describes the type of report

EVR Report from IEHP to Providers

An example of the file naming convention for the report describing the reasons the data elements were not valid is 0**1s0318h101_40605_EVR_201804122150.rph**

A.   **01s** identifies the original file name

   1.   (Reference the Provider Sub-ID Chart for your three (3)-character Submitter code.)

B.   **40605** is the transmission ID assigned to the file by IEHP for tracking purposes

C.   **EVR (Encounter Validity Report) describes the type of report**

D.   **201804122150** is a CCYYMMDDHHMM date stamp for when the report was generated

.rph defines a report file that lists all invalid hospital encounters within the submitted file (the **h** identifies a hospital encounter)

4. ENCOUNTER DATA PROCESSING PROCEDURES

C Encounter Data File Due Date Schedule

Method of File Transmission

A. Encounter files must be submitted to IEHP using SFTP. The files must be placed in the **Encounter Folder within your Provider folder** on the SFTP server. If the Provider experiences difficulties accessing IEHP's SFTP server, the Provider should contact the IEHP Electronic Data Interchange (EDI) department by email at EncounterData@iehp.org.

B. If the server is down, please contact the IEHP Help Desk at (909) 890-2025. If the server is down for 48 hours, IEHP will contact you directly to establish an alternative method for file submission.

Response Report Transmission Schedule

IEHP places all response reports on the SFTP server in the RESPONSE_PROD folder in the Provider's folder, (Example: /01s/5010/Encounters/RESPONSE_PROD/). The files are placed in the Provider's response folder within three (3) working days from their receipt date, as long as the files conform to IEHP naming conventions and procedures. IEHP notifies the Provider via e-mail upon receipt of a file. Once the files have been processed, an additional e-mail is sent to notify the Provider that reports are ready to be picked up. It is the Provider's responsibility to check the SFTP server for any error reports within three (3) working days of file submission. A report is transmitted for each file submitted. If a report is not received within three (3) working days of file submission, the Provider should notify the Electronic Data Interchange department by email at EncounterData@iehp.org.

The following schedule outlines what data (the month that services were rendered) is due to IEHP. It also provides timelines when IEHP provides any error reports and the date this corrected data is due back to IEHP.

Data Due To IEHP	Claims Processed In The Month Of	First File Name Due (Assessed for Validity)	Month of Service Assessed for Adequacy	Final Date Corrected Errors Due to IEHP
1/2/2017	Nov-16	[id]1116[m or	Aug-17	1/31/2017
2/1/2017	Dec-16	[id]1216[m or	Sep-17	2/28/2017
3/1/2017	Jan-17	[id]0117[m or	Oct-17	3/31/2017
4/1/2017	Feb-17	[id]0217[m or	Nov-17	4/30/2017
5/1/2017	Mar-17	[id]0317[m or	Dec-17	5/31/2017
6/1/2017	Apr-17	[id]0417[m or	Jan-18	6/30/2017
7/1/2017	May-17	[id]0517[m or	Feb-18	7/31/2017
8/1/2017	Jun-17	[id]0617[m or	Mar-18	8/31/2017

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C Encounter Data File Due Date Schedule

9/1/2017	Jul-17	[id]0717[m or	Apr-18	9/30/2017
10/1/2017	Aug-17	[id]0817[m or	May-18	10/31/2017
11/1/2017	Sep-17	[id]0917[m or	Jun-18	11/30/2017
12/1/2017	Oct-17	[id]1017[m or	Jul-18	12/31/2017
1/2/2018	Nov-17	[id]1117[m or	Aug-18	1/31/2018
2/1/2018	Dec-17	[id]1217[m or	Sep-18	2/28/2018
3/1/2018	Jan-18	[id]0118[m or	Oct-18	3/31/2018
4/1/2018	Feb-18	[id]0218[m or	Nov-18	4/30/2018
5/1/2018	Mar-18	[id]0318[m or	Dec-18	5/31/2018
6/1/2018	Apr-18	[id]0418[m or	Jan-19	6/30/2018
7/1/2018	May-18	[id]0518[m or	Feb-19	7/31/2018
8/1/2018	Jun-18	[id]0618[m or	Mar-19	8/31/2018
9/1/2018	Jul-18	[id]0718[m or	Apr-19	9/30/2018
10/1/2018	Aug-18	[id]0818[m or	May-19	10/31/2018

*ID is your IEHP assigned Provider Number – (3) characters

4. ENCOUNTER DATA PROCESSING PROCEDURES

D. Tables

Q: **How is validity determined?**

A: Validity is determined by calculating the number of unique Claim Reference Numbers (CRNs) submitted within the file less the number of non-fatal errors. The number of valid CRNs is divided by the result. The accumulation of all encounter data records submitted with the same file name must be at least 95% valid in order to meet IEHP validity standards.

Note: Cumulative validity reports are placed on the SFTP server on a weekly basis.

Q: **How is adequacy determined?**

A: Adequacy is determined by grouping all the valid data received by month of service and then performing a count on place of service and/or procedure codes to determine if the encounter was an inpatient, physician visit, outpatient or emergency room service.

Providers must meet the following adequacy standards, on a monthly basis, for data that is due to IEHP:

Provider	Total Encounters: Non-SPD	Total Encounters: SPD	ER Visits [medical encounters]	Hospital Inpatient
PMPY Standard: IPA	5.00	13.00	Not Applicable	Not applicable
PMPY Standard: Hospital	No minimum standard	No minimum standard	0.23	0.17

Note: Adequacy reports are placed on the SFTP server on a weekly basis.

Q: **Can we use the same Patient Control Number (CLM01) as long as the files are named differently?**

A: No. The Patient Control Numbers (CLM01) must always be a unique number assigned to that encounter.

Q: **How do we correct an encounter that has been deemed invalid by IEHP?**

A: When an 837 encounter has been deemed invalid by IEHP make the necessary correction to the encounter In Loop 2300 (Claim Information), CLM segment must have one of these qualifier codes: CLM05-3 = 1 Original claim submission.

Q: **How do we correct an encounter once IEHP has accepted the 837 file containing that record?**

A: When an 837 encounter file has been accepted by IEHP please use the following guidelines for submitting a Corrected, Replacement or Void\Delete encounter record.

4. ENCOUNTER DATA PROCESSING PROCEDURES

D. Tables

1. In Loop 2300 (Claim Information), CLM segment must have one of these qualifier codes:

2. CLM05-03 = "7" (Replacement): the Corrected\Replacement records will process as a replacement and reverse the original encounter on file.

3. CLM05-03 = "8" (Void): The original encounter on file will be voided.

4. The CLM01 must be a new unique Patient Control Number and the REF*F8 segment must be the original Patient Control Number, exactly as it appeared in the original encounter being corrected.