

Encounter Data Requirements

Attachment 26

Version 10.1.18



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General Encounter Data Standards

- The CONTRACTOR's claims management system shall contain the following capabilities for the purpose of encounter data submissions:
- Collection and maintenance of sufficient enrollee encounter data to identify the provider who delivers any item(s) or service(s) to enrollees.
- Submission of enrollee encounter data to ASES at a frequency and level of detail to be specified by CMS and ASES, based on program administration, oversight, and program integrity needs.
- Submission of all enrollee encounter data that ASES is required to report to CMS.
- Specifications for submitting encounter data to ASES in standardized Accredited Standards Committee (ASC) X12N 837 and National Council for Prescription Drug Programs (NCPDP) formats, and the ASC X12N 835 format as appropriate.
- Adherence to HIPAA Standards

Quality of Submission

The Contractor shall submit encounter data that meets established ASES data quality standards. These standards are designed to ensure receipt of complete and accurate data for program administration and will be closely monitored and strictly enforced. ASES will revise and amend these standards as necessary to ensure continuous quality improvement. The Contractor shall make changes or corrections to any systems, processes or data transmission formats as needed to comply with ASES data quality standards as originally defined or subsequently amended. The Contractor shall comply with industry-accepted clean claim standards for all encounter data, including submission of complete and accurate data for all fields required on standard billing forms or electronic claim formats to support proper adjudication of a claim. In the event that the Contractor denies provider claims for reimbursement due to lack of sufficient or accurate data required for proper adjudication, the Contractor shall submit all available claim data to ASES without alteration or omission. Where the Contractor has entered into capitated reimbursement arrangements with providers, the Contractor shall require submission of all utilization or encounter data to the same standards of completeness and accuracy; the Contractor shall require this submission from providers as a condition of the capitation payment and shall make every effort to enforce this contract provision to ensure timely receipt of complete and accurate data. The Contractor shall be required to submit all data relevant to the adjudication and payment of claims in sufficient detail, as defined by ASES, in order to support comprehensive financial reporting and utilization analysis. The Contractor shall submit encounter data according to standards and formats as defined by ASES, complying with standard code sets and maintaining integrity with all reference data sources including provider and member data. All encounter data submissions will be subjected to systematic data quality edits and audits on submission to verify not only the data

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content but also the accuracy of claims processing. Any batch submission which contains fatal errors that prevent processing or that does not satisfy defined threshold error rates will be rejected and returned to the Contractor for immediate correction. Re-submittals of rejected files, or notification of when the file will be resubmitted shall be completed within one (1) business day.

ASES will reject an entire file or an individual encounter failing certain edits, as deemed appropriate and necessary by ASES to ensure accurate processing or encounter data quality, and will return these transactions to the Contractor for research and resolution. ASES will require expeditious action on the part of the Contractor to resolve errors or problems associated with said claims or the adjudication thereof, including any necessary changes or corrections to any systems, processes or data transmission formats.

Provision of Encounter Data

Any encounter data from a subcontractor shall be included in the file from the Contractor. The Contractor shall not submit separate encounter files from subcontractors.

The files shall contain settled claims and claim adjustments, including but not limited to adjustments necessitated by payment errors, processed during that payment cycle, as well as encounters processed during that payment cycle from providers with whom the Contractor has a capitation arrangement.

The level of detail associated with encounters from providers with whom the Contractor has a capitation arrangement shall be equivalent to the level of detail associated with encounters for which the Contractor received and settled a fee-for-service claim.

The Contractor shall adhere to federal and/or ASES payment rules in the definition and treatment of certain data elements, e.g., units of service that are standard fields in the encounter data submissions and will be treated similarly by ASES across all MCOs.

The Contractor shall institute processes to insure the validity and completeness of the data it submits to ASES. At its discretion, ASES will conduct general data validity and completeness audits using industry-accepted statistical sampling methods. Data elements that will be audited include but are not limited to: member ID, date of service, provider ID (including NPI number and Medicaid I.D. Number), category and sub category (if applicable) of service, diagnosis codes, procedure codes and modifiers, revenue codes, adherence to hard benefit limits, date of claim processing, and date of claim payment. Control totals shall also be reviewed and verified.

The Contractor shall be able to receive, maintain and utilize data extracts from ASES and its contractors, e.g., pharmacy data from ASES or its PBM.



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