

Encounter Data

August 28, 2024

Managed Care Data Quality Monitoring Webinar Series

Introduction

Alvin Bautista

Managed Care Data Support Section

Agenda

- » DHCS Encounter Data: How to Avoid Denied Duplicates
- » HIPAA Mandated Standards – Implementation & Companion Guides
- » Q&A
- » Communication & Resources

DHCS Staff

» Presenters

- Stephen LeFebre
- Jeff Jennings

» Support

- Alvin Bautista
- Abiy Gebereselassie
- Mei Shan Ng
- Xiaoyan Ma
- Samantha Van
- Soo Jung Kim
- Amy Peterson

Questions & Answers

- » For **GENERAL** questions, please submit your question to the WebEx chat and please ensure that your questions are visible to all participants, as opposed to sending a private chat to the host.
- » For **SPECIFIC** questions, please reach out to your Data Mailbox as will be instructed.



Before we move on

- » Today's webinar is being recorded.
- » The recorded video, script, and presentation materials will be uploaded to [Quality Webinar Series \(ca.gov\)](https://www.ca.gov/quality-webinar-series).

DHCS Encounter Data: How to Avoid Denied Duplicates

Stephen LeFebre

Data Quality Reporting Unit

Denied Duplicate Encounters Error Code 0x000CC

Continues to be the top denial reason during the period of July 2023 through June 2024.

DQRU estimates **1,596,614** during that period.

A total of **40%** of denied duplicates were successfully replaced or voided.

60% of denied duplicates have not been acted upon.

If you have any questions about 0x000CC errors, please email your assigned DQRU Specialist with a Cc. to MMCDEncounterData@dhcs.ca.gov.

For questions, please reach out to the appropriate Data Mailbox as will be instructed closer to the end of this presentation.

Duplicate Encounters: 0x000CC

EVR Message: This encounter is a duplicate of an existing encounter.

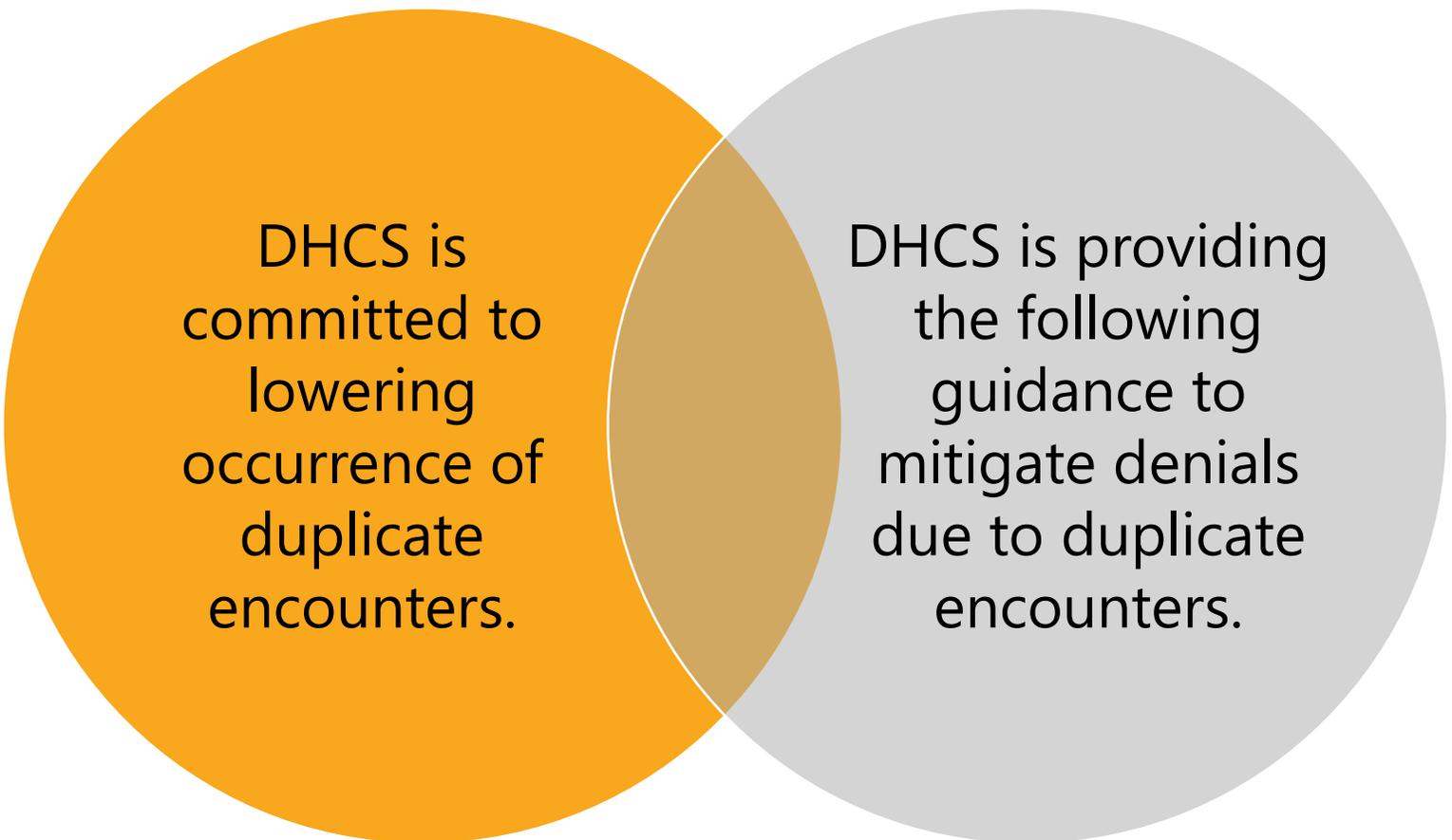
PACES edits check a series of values to determine whether an encounter is a duplicate.

These values are detailed in the Duplicate Encounters sections in the Companion Guides.

PACES Duplicate Logic Checks

File Elements	837I File	837P File	DQ Issues
Client Identification Number (CIN)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Date(s) of Service	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Admission Date/Hour	<input checked="" type="checkbox"/>		
Discharge Hour	<input checked="" type="checkbox"/>		
Attending Provider	<input checked="" type="checkbox"/>		
Rendering Provider	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	See X12 Implementation Guide for no NPI
Revenue Code	<input checked="" type="checkbox"/>		National Code Conversion
Procedure Code	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	National Code Conversion
Procedure Modifier(s)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Diagnosis Code	<input checked="" type="checkbox"/>		
Drug code	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	PAD/HCPCS/PACES Monthly Update

Duplicate Encounters Guidance



DHCS is committed to lowering occurrence of duplicate encounters.

DHCS is providing the following guidance to mitigate denials due to duplicate encounters.

Duplicate Encounters Guidance

For Denied Encounters PACES denotes as duplicates: Plans NEED to determine whether the encounter is a TRUE duplicate: Does it represent the same event as an already submitted encounter?

NOT a Duplicate: Replace Using Modifiers

A replacement must be submitted for the encounter using appropriate coding (**modifiers**).

- ✓ **This allows** PACES edits see that the events are distinct encounters.
- ✓ Replacements correct the denied encounter and improves data quality.
- ✓ Impact of mother/newborn reporting - follow the guidance provided by DHCS.



IS a Duplicate: VOID encounter

A VOID of the duplicate encounter must be submitted.

- ✓ The Void doesn't erase the denied original but results in the encounter being viewed as "complete"
- ✓ **60% of denied duplicates have not been VOIDED.**

Duplicate Encounters Guidance

Uncorrected Denied Encounters (Including Duplicates)

Per DHCS' Quality Measures for Encounter Data (QMED) v1.1 technical documentation DHCS expects:

50% of denied encounters to be corrected within 15 days of denial

80% of denied encounters to be corrected within 30 days of denial

95% of denied encounters to be corrected within 60 days of denial

Duplicate Encounters Guidance

Uncorrected Denied Encounters (Including Duplicates)

This is measured by DRMT.001, Denied Encounters Turnaround Time.

The QMED allows up to a 5% denial rate before grading MCPs against the above criteria in order to account for certain uncorrectable scenarios (e.g. denied voids and replacements, or invalid frequency code)

However, MCPs are still expected to send voids and replacements for correctable denied encounters in accordance with the above timeframe specifications.

Duplicate Encounters Guidance

Measures to Prevent Duplicate Encounters

Screen inbound AND outbound encounters to ensure they do not include duplicate encounters.

Systems inbound screening algorithms.

Such encounters should be returned to the provider for correction or to void.

Employ provider education efforts such as webinars and development of training materials.

Medi-Cal Managed Care Documents

» MCP Companion Guides

- 837I (v3.9)
- 837P (v3.7)
- 837D (v2.3)
- NCPDP 2.2 (Release 2.6)
- NCPDP 4.2 (Release 2.2)

Note: DHCS Documentation Center Access requests: dataexchange@dhcs.ca.gov

Supporting Documents

- » PACES Custom Error Messages
 - MMC (v2.0)
- » Coordination of Benefits Addenda - v1.2
- » XSD Schema - Encounter Validation Response (EVR) Description (v1.2)
- » Standard implementations for both 277 and 999 (no DHCS companion guide is available for these transactions)

Note: DHCS Documentation Center Access requests: dataexchange@dhcs.ca.gov

Contacts

- » For all questions, contact your Data Quality Reporting Unit analyst and copy MMCDEncounterData@dhcs.ca.gov
- » For access to Doc. Center, please send a request to DataExchange@dhcs.ca.gov

Questions...

- » Please review the [DHCS Managed Care Data Quality Monitoring Frequently Asked Questions](#) page for guidance related to Encounter Data and other Managed Care file questions.
- » Please submit managed care and PACE Plan encounter questions through the DQRU group mailbox MMCDEncounterData@dhcs.ca.gov with a copy to your DQRU specialist.
- » Technical questions (data feed, etc.), please send to EDIMDataSupport@dhcs.ca.gov
- » Feedback is always welcome.

HIPAA Mandated Standards – Implementation & Companion Guides

Jeff Jennings

Data Exchange Validation Unit Chief

HIPAA Mandated Data Standards

- » Title II of the Health Insurance Portability and Accountability Act (HIPAA) of 1996 establishes/mandates national standards for electronic health care transactions
- » Title II also establishes/mandates national identifiers & code sets
- » Mandated standards, code sets and identifiers are required to be used in the electronic exchange of administrative healthcare data, such as the 837 Claims/Encounters transaction
- » Title II of HIPAA designated specific Standards Development Organizations (SDOs) to develop and maintain the mandated data standards.

HIPAA SDOs and Claims/Encounters Transactions

- » X12 is the Standard Development Organization that develops & publishes data standards for the exchange of administrative healthcare data, such as the 837 transaction.
- » All entities submitting claim or encounter data to DHCS are required to use **837 Claim/Encounter data standard/transaction**
- » The National Council for Prescription Drug Programs (NCPDP) is the designated SDO that develops and maintains transactions used for pharmacy data exchange.
- » **Long-Term Care/Program of All-Inclusive Care for the Elderly Plans (LTC/PACE)** submit the **NCPDP 4.2 Pharmacy transaction** to DHCS.
- » Managed Care related pharmacy data is now submitted to Magellan, the Pharmacy Benefits Intermediary for Medi-Cal

Implementation Guides & Companion Guides

- » Implementation Guides (IGs) are the **complete** guide to each X12 transaction. IGs list the rules for each data element – values accepted, usage requirements, data element attributes
- » Companion Guides (CGs) outline those data elements in the transaction that are allowed to be customized by the Payer (DHCS)
- » Implementation Guides and Companion Guides are used in combination to create the complete transaction including values required by the Payer

Implementation Guides & Companion Guides

- » X12 publishes Implementation Guides for HIPAA transactions, including the 837 Claims/Encounters transactions
- » Current mandated X12 version is 5010, adopted by Congress in 2010. The 837 data standard has 3 variations – 837 Dental, 837 Institutional (Inpatient), 837 Professional (Outpatient)
- » 837 Implementation Guides are available from X12 (<https://x12.org/products>)
- » All DHCS Managed Care Companion Guides (including the 837 CGs) are posted to the [DHCS Documentation Center](#). Please contact DataExchange@dhcs.ca.gov to request access to the Doc Center

Questions ?

Communication & Resources

Communication

» Data group mailboxes

- 274 Medical (Physical Health): MCQMDProviderData@dhcs.ca.gov
- 274 Behavioral Health Plans (MHP & DMC-ODS): 274Expansion@dhcs.ca.gov
- 274 Dental: DMCdeliverables@dhcs.ca.gov
- Encounter: MMCDEncounterData@dhcs.ca.gov
- BH Short Doyle: MEDCCC@dhcs.ca.gov
- PACE: PACECompliance@dhcs.ca.gov
- DHCS Documentation Center Access requests: dataexchange@dhcs.ca.gov
- Technical questions, ECM/CS/CCM JSON: EDIMDataSupport@dhcs.ca.gov
- MCDSS Webinar Support: MCDSS@dhcs.ca.gov

» If the message is urgent, please mark [URGENT]

Data Security Reminders

- » Per the Social Security Administration and CMS, all data related to these programs is **prohibited** from being viewed, accessed, processed, or stored outside of the United States. As Medi-Cal data contains data related to both federal programs, DHCS data privacy rules specify data related to Medi-Cal beneficiaries cannot be processed, sent, or viewed by entities or individuals outside of the United States.
- » For additional information on DHCS Data Privacy, please visit:
<https://www.dhcs.ca.gov/formsandpubs/laws/priv/Pages/default.aspx>

Resources



Services Individuals Providers & Partners Laws & Regulations Data & Statistics Forms & Publications Search

Quality Measures & Reporting

DHCS monitors the quality of care provided to its members in a number of ways. Below are links to different types of reports that have been developed to monitor DHCS programs and the quality of care provided to our members.

Quality Webinar Series

The resources below provide materials and webinar information related to the quality of managed care data.

- [Managed Care Data Quality Monitoring Webinar Series](#): DHCS is currently hosting a monthly webinar series to improve quality monitoring of Managed Care Data.
- [Frequently Asked Questions \(FAQ\)](#).
- [DHCS Documentation Center \(DDC\)](#): The DDC is our solution for sharing Companion Guides and other Managed Care docs and artifacts used by trading partners (MCPs). The PACES, CAPMAN, MCPD and PCPA Companion Guides and other docs and artifacts are posted here and are available to trading partner staff. Access to the DDC is available to trading partners upon request. Access requests can be sent to dataexchange@dhcs.ca.gov.

Quality Measures

The reports below provide quality measures based on administrative and clinical data such as the Healthcare Effectiveness Data and Information Set (HEDIS) measures and self-reported data such as the Consumer Assessment of Healthcare Providers and Systems (CAHPS) surveys.

- [Dashboard Initiative](#): DHCS is developing a comprehensive dashboard initiative to strengthen public reporting practices throughout the department while improving transparency and accountability.

» DHCS Quality Webinar Series webpage

- [Data & Statistics -> Reports -> Quality Measures and Reporting](#)

Resources (cont.)



- Services
- Individuals
- Providers & Partners
- Laws & Regulations
- Data & Statistics
- Forms & Publications
- Search

Managed Care Data Quality Monitoring Webinar Series

This monthly webinar series will allow for continued discussion on the status of Managed Care Data Quality Monitoring, which is currently underway at DHCS. Additionally, it will allow for ongoing plan on the development of the necessary changes of the Managed Care Data Quality Monitoring. This discussion will include on the Quality Monitoring Process of 274 Physical Health Medi-Cal Managed Care Provider Data, Dental Data, Mental Health Plan Data, Drug Medi-Cal Organized Delivery System Data, Encounter Data, and Behavioral Health Short Doyle Data.

If you would like notifications regarding these and any upcoming webinars, [please click here](#) to Subscribe/Unsubscribe.

Please contact MCDOSS@dhcs.ca.gov if you have questions about this webinar series.

Next webinar: June 26, 2024 at 10 a.m.

Additional Resources and Related Materials

- [DHCS Documentation Center \(DDC\)](#): The DDC is our solution for sharing Companion Guides and other Managed Care docs and artifacts used by trading partners (MCPs). The PACES, CAPMAN, MCPD and PCPA Companion Guides and other docs and artifacts are posted here and are available to trading partner staff. Access to the DDC is available to trading partners upon request. Access requests can be sent to dataexchange@dhcs.ca.gov.
- [DHCS Managed Care Data Quality Monitoring Frequently Asked Questions](#)
- [Managed Care Data Quality Webinar Glossary](#)

[Back to the Quality and Measures Reporting page](#)

2024 Webinar Schedule

Month	Topic	Webinar Date	Webinar Materials
January	Semi Annual Data Checks	1/31/2024	Presentation Slides
February	Behavioral Health Short Doyle	2/28/2024	Presentation Slides
March	Excel Data Templates	3/27/2024	Presentation Slides
April	Annual Address	4/24/2024	Presentation Slides
May	Encounter Data Validation Testing	5/29/2024	Presentation Slides
June	274 Behavioral Health	6/26/2024	Available July 2024
July	Semi Annual Data Checks	7/31/2024	Available August 2024
August	Encounter Data	8/28/2024	Available September 2024
September	274 Dental Data	9/25/2024	Available October 2024
October	Monthly Data Checks	10/30/2024	Available November 2024
November	274 Behavioral Health / Drug Medi-Cal ODS	11/27/2024	Available December 2024
December	MCPD/PCPA files and expansion	To be determined	Available January 2025

» [Webinar Series Webpage](#) (monthly updates!)

- Recording/script
- PPT slides deck
- Upcoming Webinar schedule
- Distribution List Subscription Link

» [Frequently Asked Questions](#)

» [Glossary](#)

Thank you!

Please send any questions and comments about the webinar series or this event to MCDSS@dhcs.ca.gov

