

POLICY AND PROCEDURE

DEPARTMENT: Encounter Business Operations	DOCUMENT NAME: Encounter Submission Policy & Procedure
PAGE: Page 1 of 7	REPLACES DOCUMENT: N/A
APPROVED DATE: 10/2010	RETIRED: N/A
EFFECTIVE DATE: 1/1/11	REVIEWED/REVISED: 11/17/11; 11/28/12; 11/14/13; 04/16/2014; 8/29/16; 9/7/2017
PRODUCT TYPE: All	REFERENCE NUMBER: MS.CLMS.11

Encounter Business Operations Policy and Procedure

SCOPE:

Magnolia Health Plan (Plan), Centene Corporation's (Centene) Corporate Encounter Business Operations, Corporate Encounter Analytics, and Corporate Finance

PURPOSE:

The purpose of this document is to establish roles and responsibilities of Encounter Business Operations (EBO), Plan, and Centene's IT and Finance departments for encounter submissions

POLICY:

It is the Plan's policy to generate and submit accurate, timely, and complete encounters to the Mississippi Division of Medicaid (DOM)

PROCEDURE:

Pre-Payment Encounter Edits

In-bound claims are "scrubbed" for Health Insurance Portability and Accountability Act (HIPAA) compliance according to national industry standards and code sets as published by ASC X12N (Accredited Standards Committee X12) and State specific edits to insure Plan and State quality and data guidelines are met. In-bound claims which do not pass these quality checks are handled on a pre-payment basis. Appropriate handling includes a minimum of one of the following steps: (a) pending of paper claims for a manual review to ensure missing or invalid data is recorded correctly in the source system, Amisys; (b) correction to source system if data was entered or scanned incorrectly, (c) manual denial of the paper claim if data submitted was missing or invalid; (d) automated denial of electronically submitted claim when required data is missing or invalid.

Encounter Compilation

Every Centene/ Plan check run is followed by several processes that build encounter files to be submitted to DOM. Centene uses **EDM** which is written primarily to give analysts a comprehensive tool to schedule or manually create encounter files, run reports, and manually load inbound files. The product consists of two (2) applications: (1) the EDM engine, and (2) the Scrub Analyzer for analysis.

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Encounter Processing

All claims finalized in the Amisys adjudication system are stored in Centene's Enterprise Data Warehouse (EDW). From EDW, EDM extracts the adjudicated encounter data and loads it in the EDM Repository.

Encounters are then "scrubbed" for Health Insurance Portability and Accountability Act (HIPAA) compliance according to national industry standards and code sets as published by ASC X12N (Accredited Standards Committee X12) and scrubbed to insure Plan and State quality and data guidelines are met. Any encounter which does not pass these quality checks is held for correction.

The held encounters are corrected or adjusted in the source system, Amisys, as necessary. The EBO team is responsible for parsing out the held encounters to the appropriate team for research and resolution.

Encounter File Creation

Encounter Pro creates Medical and Behavioral Health 837 Professional and 837 Institutional Encounter submission files for those encounters which pass the quality checks discussed above.

Centene and Plan use the HIPAA Claims Implementation Guides, coupled with DOM companion guides as resources for appropriate encounter transaction submission.

Encounter Submission

Encounter files submitted in accordance with DOM submission schedule timeframes. The finalized Encounter Submission files are submitted via secure FTP to DOM.

Plan submits encounters to DOM for every service rendered to an enrolled member, inclusive of such information as procedure codes, diagnoses, service location, and amounts remitted to providers.

Through its contracts, Centene holds its subcontracted vendors responsible for the integrity of claims data and for contributions to encounter transactions

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provided to DOM. Vendors are routinely provided oversight and required to address issues or concerns regarding incomplete, inaccurate, or untimely data.

Encounter Response File Processing

Response files received from DOM are loaded into the EDM Repository for reporting and analysis of encounter edits, warnings or rejections. The encounter submission file's error rate must be within the acceptable range set by DOM.

Encounter Correction and Resubmission

Any encounter errors received are parsed out by the EBO team to the appropriate team for resolution. Root cause analysis is performed to ensure necessary changes are implemented.

Where appropriate, Change Requests (CRs) are completed by Plan or Centene to amend the Amisys system and/or EDM to correct any errors in encounter data or data submission attributable to applicable program logic.

Any encounter submission errors for Centene processed claims are corrected by Centene according to DOM'S prescribed procedures, as applicable. When appropriate, these erred encounters will be resubmitted to DOM upon correction.

Encounter submission errors processed by vendors (such as vision or dental providers) are corrected by the vendor in collaboration with Centene.

Encounter Pass Rate and Reporting

Centene and Plan strive to achieve a pass rate of 98%, according to DOM'S requirements, for all encounter data submitted. Plan strives to avoid liquidated damages that may be imposed by DOM for failure to meet the aforementioned targets.

Centene and Plan collaborate and maintain processes for tracking encounter submission, error correction, resubmission, and compliance with targets for accuracy, timeliness and completeness.

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Centene and Plan generate, review, and act on multiple reports specifically developed to ensure encounter reporting completeness and accuracy. Reports are prepared for and reviewed by business analysts, Plan VP of Finance, and Corporate Finance.

Encounter Balancing and Reconciliation Tracking

EBO works with the Encounter Analytics team to reconcile that all adjudicated claims expected are being reported on encounter files created. This process is completed according to the submission schedule that will exist between Plan and DOM.

Monthly, a process is completed by EBO and Encounter Analytics to reconcile adjudicated claims to their current encounter status. This reconciliation is based on paid dollars by Date of Service month.

Where discrepancies arise in these reconciliations, it is the responsibility of the Encounter team members to reconcile and resolve these issues to ensure all encounters are submitted to DOM in a timely and complete manner.

Encounter Communications

EBO will host bi-weekly meetings with each of their Encounter/Finance representatives. Bi-Weekly encounter email will be distributed to Plan Encounter/Finance and IT representatives to communicate items such as encounter status, pass rates, paid claims to encounters reconciliation rates, as well as outstanding and upcoming business issues.

EBO also hosts regular meetings with all Vendors responsible for producing encounter files. These meetings are geared toward a focus on timely, accurate, and complete encounter reporting.

REFERENCES:

ATTACHMENTS: None

DEFINITIONS: None

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REVISION LOG

REVISION	DATE
Provide clarity around document's policy and purpose	10/20/10
Annual review; add Director of Finance as approver	11/17/11
Changed ACS to XEROX; Added Pre-Payment Encounter Edits; Added Finance Designee; Updated Director to VP; Changed It Encounter to Encounter Analytics	11/17/12; 11/28/12;
Annual review	11/14/13
Changed Mississippi Department of Medicaid to Mississippi Division of Medicaid (DOM) and removed Xerox and replaced it with DOM	04/16/14
Encounter Data Rate updated from 95% to 98% per new contract	8/29/16

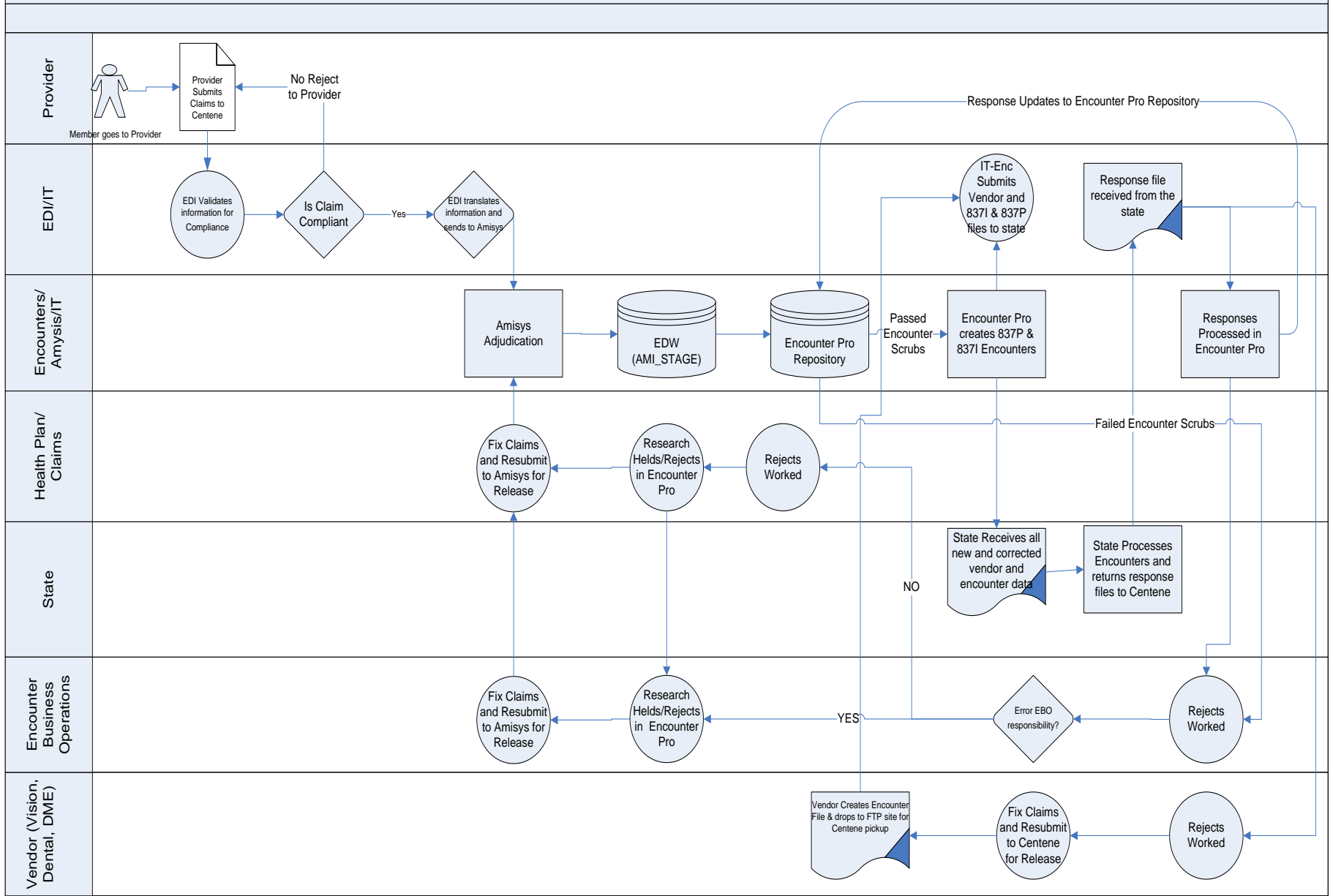
POLICY AND PROCEDURE APPROVAL

The electronic approval retained in Compliance 360, Centene's P&P management software, is considered equivalent to a physical signature.

Claims Designee: _____ Signature on File: _____

VP, Finance: _____ Approval on File: _____

Claim to Encounter Processing - End to End (High Level)



Encounter Roles / Responsibilities

