

Appendix F: System Generated Files and Reports

The overarching purpose of these reports is to enhance the quality of the encounter data. They provide LDH and the submitting MCE with basic accuracy and completeness assessment of claims after each encounter cycle, so that preliminary corrections and repairs can be conducted and the encounter resubmitted to the FI. These reports will take advantage of the existing MES reporting capacity for claims data. However, the reports are altered, as necessary, to enhance their usefulness in depicting encounter data errors.

Encounter data is submitted through the Fiscal Agent's Electronic Data Interchange (EDI) and undergoes a series of 837 COB edits, passing through to the MES, and then going through a set of edits that will result in Encounter Edit Disposition Summary Report. The report provides the repairable edit codes for the encounter data submitted; and can be found in this Section. The complete list of repairable edit codes are listed in **Appendix F**.

The following reports are generated by the FI's MES system and have been selected specifically to provide each MCE with useful information that, when compared with the 835 Remittance Advice for the specific encounter, will provide a complete explanation for the edit code. A second set of reports that focus more closely on the overall quality of the data will also be created from the encounter data. These reports and the process for Data Quality Assessment are discussed in **Section 6**. These quality reports will also depict accuracy and completeness at a volume and utilization level.

Encounter Claims Summary

CNN-W-001 (weekly) – This report will serve as a high-level error report for the MCE as a summarization of the errors incurred. The report is by claim type. Report will be distributed to MCEs as a delimited text file and it will include the overall claim count, the disposition of MES paid or denied status occurrence, and overall percentage. The number and percent to be denied represent all denials, repairable or non-repairable.

Encounter Edit Disposition Summary

CCN-W-005 (weekly) - This report serves as the high-level edit report for the MCE as a summarization of the edit codes incurred. The format, as depicted below, is by claim

type. This report will be distributed to MCEs as a delimited text file and it will produce the overall edit add

Edit Code Detail

CCN-W-010 (weekly) – This report lists all encounters and their error codes, including denied error codes. Some of the denied edits are repairable. Refer to <https://ldh.la.gov/page/4480> - Edits Comprehensive, Repairable and Non-Repairable for a listing of repairable edits. This report will be distributed to MCEs as a delimited text file and it is a detailed listing by header and line item of the edits applied to the encounter data. Claims history includes behavioral health encounters.

CCN-M-010 (monthly) - This monthly report lists all encounters and their error codes, including denied error codes. Some of the denied edits are repairable. This report will be distributed to MCOs as a delimited text file and it is a detailed listing by header and line item of the edits applied to the encounter data. Claims history includes behavioral health encounters.

Provider File – FI to MCE – This file is sent to MCEs on a weekly basis.

Provider Rates File – FI to MCE

820 File – FI to CCN

Prior Authorization File – FI to MCE - This file is a weekly file that contains a 2-year history of prior authorization and Pre-Admission Certification (Pre-cert) authorization transactions performed by the Louisiana Medicaid MES. Modifications to include ICD-10 coding (Columns 148-149) and Chronic Needs Indicator.

Diagnosis File for Pre-Admission Certification – FI to MCE - This file shows all diagnosis codes applicable to the Inpatient Pre-Admission Certification (Pre-cert) operation with Louisiana Medicaid MES. Modifications for ICD-10 have been made to Columns 7; 27-35.

Procedure File for Prior Authorization - FI to MCE - This file shows all procedure codes applicable to the Prior Authorization (PA) operation with Louisiana Medicaid MES.

CLIA File – FI to MCE - This file shows all CLIA (clinical laboratory improvements amendment) registrations associated with laboratory providers enrolled with the Louisiana Medicaid MES.

Quality Profiles Submission File – MCE to FI - There will be 1 single file, formatted as a text, CSV (comma-separated value) file.

There will be 4 record types on the file as shown in the grid below, so the file will have exactly 4 records:

Record Type 1: Performance Standards Record

Record Type 2: Incentive-Based Measures Record

Record Type 3: Level I Measures Record

Record Type 4: Level II Measures Record

Denied Encounter Error Analysis – E-CP-O-90-D - On a weekly basis LDH provides to the MCE the Denied Encounter Error Analysis (E-CP-O-90-D) via the MCE's sFTP site. The report provides a list of encounter denials by error code, description, and the number of denials for each claim type. MCE is required to retrieve the report, and review for encounters with correctable errors; and resubmit the corrected encounter according to the RFP guidelines.

An example of the E-CP-O-90-D can be found on the following page.

Encounter EOB Analysis – E-CP-O-90-E - On a weekly basis, LDH provides to the MCE, thru the Fiscal Intermediary, the Encounter EOB Analysis Report (E-CP-O-90-E) via the MCE's sFTP site. The report is broken down by EOB codes that are set to "Educational" disposition, the description, and the number of edits for each claim type. The report is INFORMATIONAL ONLY, therefore, no action is required on the part of the MCE.

An example of the Encounter EOB Analysis (e-cp-o-90-E) can be found on the page following the Denied Encounter Error Analysis (E-CP-O-90-D) sample report.