Mollenhauer, Dave

From: Petre, Lori

Sent: Monday, January 20, 2014 6:41 PM

To: APIPA Jennifer Palumbo; Bridgeway Cheyenne Ross; Care1st Patty Dal Soglio; HCA

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(Evercare); Sherry Wince (DDD)

Cc: Wright, Kijuana; Aker, Gina; Kelly, Cheryl

Subject: Reporting of Medicare Encounters for Dual Members

Importance: High

The attached (previously presented) PowerPoint explains the claims data to be provided to Contractors by AHCCCS in order to eliminate "blind spots" for services provided to a member shared by multiple programs. It is anticipated that this information will be useful in the development of short- and long-term strategies to improve care coordination.

As outlined, Contractors will be required to submit Medicare encounters to AHCCCS for their dual members.

AHCCCS plans to have Contractors submit any claims for Medicare/Medicaid dual eligible where Medicare paid the full the claim or there was no pass thru to Medicaid as encounters, in addition to those encounters that are currently submitted where there is a secondary pass thru to Medicaid. These Medicare encounters will be submitted in the current encounter formats with a designation at the file level that they are Medicare only/zero paid Medicaid. Utilizing a redefinition of the current Administrative Denied Encounter submission process as outlined below.

AHCCCS has slatted this reporting to begin for dates of service beginning 1/1/14, with submissions beginning to no later than the 2^{nd} cycle for March 2014.

IV. Administratively Denied/Zero Payment Encounter Submissions

AHCCCS requires administratively denied and Zero Medicaid Payment 837P, 837I, and 837D encounters to be submitted in separate files from paid encounters. Denied encounters are encounters that have been denied or non-covered in full, and Zero Medicaid Payment encounters are encounters for which there was primary payment and no pass thru or secondary payment under Medicaid. Both are required to be reported for utilization and data sharing purposes.

Denied/Zero Payment files must have the input mode of '6' in Loop 1000A NM109, value of 'AHCCCSDENIED' in GS03 and add the extension of '.deny' to the file name. These files will undergo limited validator syntax editing and, when they pass validation, will be moved to the mainframe as a denied/zero paid file. Files that fail validation must be corrected or resubmitted.

AHCCCS will as redefine Encounter Adjudication Status 43 to reflect – 43 ADJUDICATED/DENIED ZERO PAID BY PLAN



If you have any questions, etc... please let us know. Thank you in advance for your initial and ongoing submissions of this data.