

# A Comprehensive, End-to-End Solution for Medicare Advantage Encounter Data Processing System

Our industry is in the process of transitioning from the Risk Adjustment Processing System (RAPS) to the CMS Encounter Data Processing System (EDPS). Medicare Advantage plans will be required to submit data to both the RAPS and EDPS systems, in parallel, during the transition phase and until CMS sunsets RAPS.

The CMS EDPS requires the submission of claim and chart review encounters using the 837 version 5010 EDI transaction format. This format has far more data elements and edits than the RAPS submission file format. Additionally, health plans must submit all processed claims. This complicates the submission process exponentially as the volume of data coupled with the complexity of the new format expands the possibility of rejections. DST Health Solutions (DSTHS) has extensive experience with EDI transactions and with CMS processing and compliance requirements. Our solution supports Medicare Advantage Organizations (MAO) by providing accurate and timely encounter data submissions to the CMS EDPS.

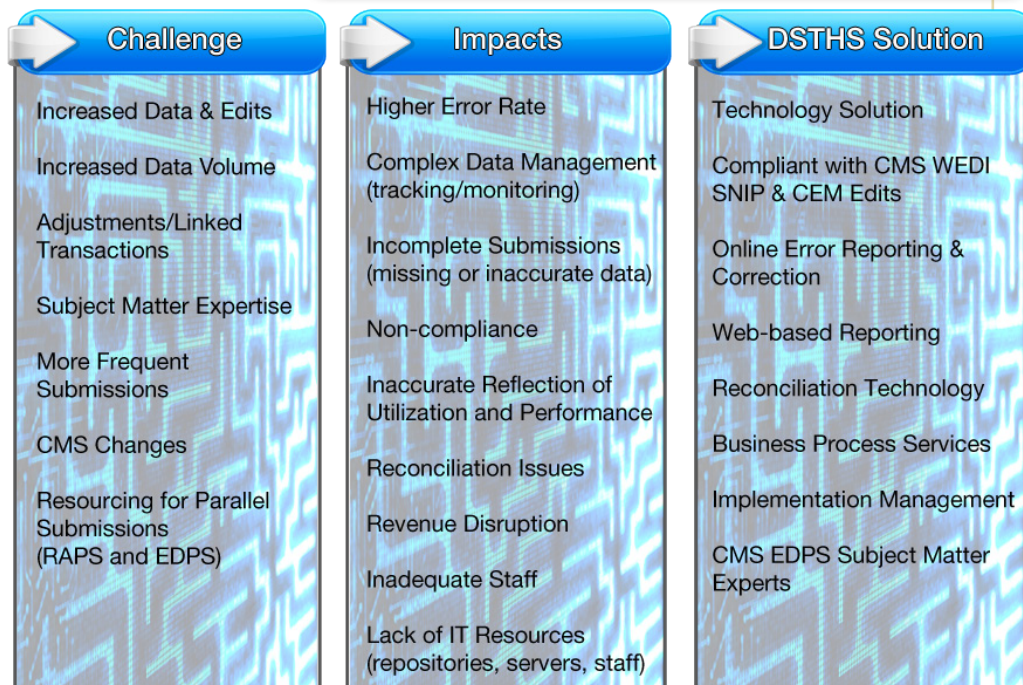
What should Medicare Advantage plans be preparing for now?

- Complex data management
- Encounter error remediation
- Continued changes and enhancements to technology and process
- Parallel submissions - EDPS & RAPS
- Reconciliation of encounter submissions to source data

## Why DST's EDPS Solution NOW?

Do you have a solution that enables you to effectively handle data edits, encounter rejections, and the management of the EDPS process from end-to-end? Can you quickly interpret and implement the changes required to maintain a compliant process? **DST's EDPS Solution** works with source data from any claim processing system and is 100% HIPAA compliant. The solution has been developed utilizing the CMS Companion Guides and rule sets. **DST's EDPS Solution** is continually maintained by DSTHS based on all changes published by CMS. It does not require end-users to maintain any additional rules-based engines, mapping documents, or requirements.

**DST's EDPS Solution** reduces health plan resource requirements needed to meet and maintain CMS encounter submission compliance. Our core team, made up of CMS and EDPS subject matter experts, is dedicated to consulting with health plans to ensure their success with encounter data submissions to CMS.



# Overview and Features of DST Health Solutions' EDPS Solution

## Accelerated Processing

Producing compliant, CMS-ready encounter transactions, this comprehensive solution enforces HIPAA edits and CMS rules to prevent non-compliant transactions from being submitted to the CMS EDPS. Our solution is designed and maintained based on HIPAA standards and CMS requirements.

## Advanced Reporting

The powerful reporting engine provides insight and control through secure portal technology. Clients are able to access and share detailed information including volume statistic, success rate, and drill-down error reports to automate error correction. All reports are exportable into industry standard formats.

## Online Error Correction

Online reporting and automation decrease time-consuming error correction research. Features include:

- Form-based transaction view providing detailed, easy-to-read error reporting with direct links to detailed descriptions of problems. Users do not need EDI expertise to locate and understand errors.
- On screen error correction enables users to correct and resubmit encounter transactions with real-time validation.

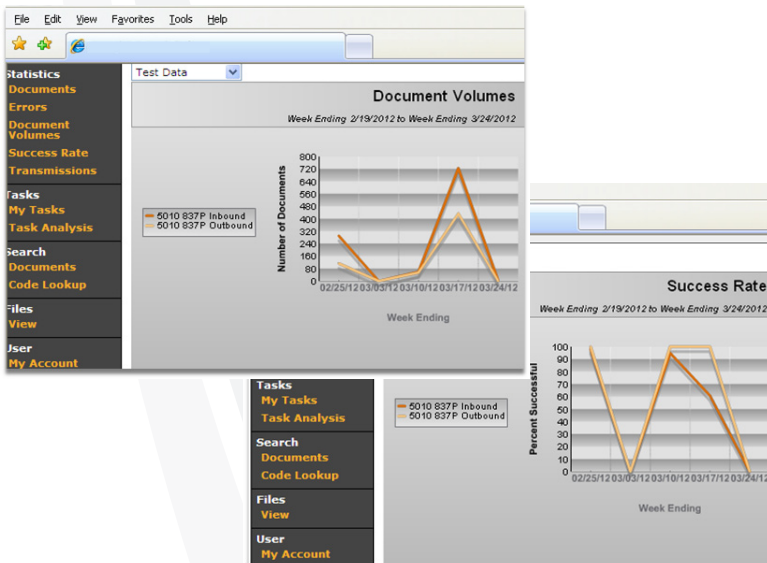
The screenshot shows a web-based form for a medical encounter. The form is divided into several sections. At the top, there are fields for '17a. Referring Provider ID' and '19. RESERVED FOR LOCAL USE'. Below this is a section for '21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY' with a value of '1. I78390'. To the right, there are fields for '20. PURCHASED SERVICE CHARGE AMOUNT', '22. CLAIM FREQUENCY TYPE CODE', '23. PRIOR AUTHORIZATION NUMBER', 'CLIA NUMBER', and 'MAMMOGRAPHY CERTIFICATION NUMBER'. The main body of the form contains a table with columns for '24. A. SERVICE DATE', 'B. FACILITY', 'C. EMERGENCY', 'D. PRODUCT/SERVICES', 'E. DIAG. CODE', 'F. LINE ITEM', 'G. SERVICE', 'H. PSPOT', 'I. ID', and 'J. RENDERING PROVIDER ID'. Below the table, there are fields for '25. BILLING PROVIDER ID' (with a red error box), '26. PATIENTS ACCOUNT NO.', '27. MEDICARE ASSIGNMENT CODE', '28. TOTAL CLAIM CHARGE AMOUNT', '29. PATIENT AMOUNT PAID', and '30. PAYER AMOUNT'. At the bottom, there are fields for '31. PROVIDER OR SUPPLIER SIGNATURE INDICATOR', '32. LABORATORY OR FACILITY NAME', and '33. BILLING PROVIDER LAST OR ORG. NAME'. The form also includes a 'SIGNED' field with a date of '3/12/2012' and a 'Form Actions' section with buttons for 'Save', 'Validate', 'Submit', 'Restore To Original', and 'Cancel'.

### Online Error Correction Example View

Note: Errors are shadowed in red and can be corrected within the form.

## DST Health Solutions' EDPS Client Experience

- ✓ Ability to meet CMS encounter submission certification deadlines
- ✓ Continued support from DSTHS Subject Matter Experts as liaisons to CMS, health plans, and the DSTHS EDPS solution team
- ✓ Proactive monitoring, analysis, and response to CMS requirements and developments



Please contact DSTHS if your organization would like to learn more about:

- EDPS required data elements and testing guidelines
- How CMS will utilize EDPS data
- A strong technology solution and operational process to support the new submission requirements and timelines
- Readiness and testing support coupled with strategies for error remediation

## Contact Us

For more information call us at 800.272.4799, email us at [inforequests@dsthealthsolutions.com](mailto:inforequests@dsthealthsolutions.com), or visit us at [www.dsthealthsolutions.com](http://www.dsthealthsolutions.com).

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