# **PROVIDER***Update*

CONTRACTUAL

FEBRUARY 13, 2019

UPDATE 19-123 |

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## Medicare Encounter Data Submission Deadlines for Risk Adjustment

Submit encounter data for 2018 dates of service by February 15, 2019

Providers must submit encounter data for any outstanding 2018 dates of service to Health Net\* by **February 15, 2019**. Refer to the table below to submit Medicare encounter data. Contact the clearinghouse as listed below with any questions.

Clearinghouse	Payer IDs	Contact Information
EMDEON	95568 and 95570	1-877-469-3263 www.emdeon.com
TRANSUNION HEALTHCARE	95568 and 95570	(310) 973-2880 pdl_dddcsr@transunion.com
DIRECT HEALTH NET SUBMITTER	95568	enc_group@healthnet.com (encounters only)

Health Net utilizes the standard Health Insurance Portability and Accountability Act (HIPAA) X12 837 format for encounter submissions as it is the most effective method to meet CMS submission deadlines.

## **RISK-ADJUSTMENT CALCULATIONS**

Health Net must submit encounter data with dates of service from January 1, 2018, through December 31, 2018, to the Centers for Medicare & Medicaid Services (CMS) by early March 2019 for the Medicare Risk Adjustment 2018 mid-year cutoff.

CMS uses encounter data in its risk-adjustment (encounter data-based) formula to calculate risk-adjustment scores for each Medicare Advantage (MA) member. The accuracy and completeness of risk-adjustment calculations depend on reporting encounter diagnosis code data accurately and to the highest level of specificity.

Inaccurate or incomplete data submissions may result in a reduced payment from CMS to Health Net, which would affect provider reimbursements.

## **RISK ADJUSTMENT REPORTS**

The Provider Risk Adjustment Factor Reconciliation Report (PRRR):

- Identifies the diagnosis codes that are accepted by the CMS Risk Adjustment Processing System (RAPS) for 2018 dates of service.
- Helps participating physician groups (PPGs) compare the diagnosis codes that are accepted at CMS for provider groups with the diagnosis codes in the system or charts for their MA members.
- Available upon request (monthly) via email at medicareops@healthnet.com.

Missing diagnosis codes should be submitted through the standard encounter method in the 837 format.



## THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

## Physicians

- Participating Physician Groups
- $^{\circ}$  Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS/HSP
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
  - Kern
  - $^{\odot}$  Los Angeles
    - Molina
  - Riverside
  - Sacramento
  - $^{\odot}$  San Bernardino
  - $^{\bigcirc}$  San Diego
  - $^{\bigcirc}$  San Joaquin
  - $^{\odot}$  Stanislaus
  - $^{\circ}$  Tulare

#### PROVIDER SERVICES provider\_services@healthnet.com

## Medicare (individual)

1-800-929-9224 provider.healthnetcalifornia.com **Medicare (employer group)** 1-800-929-9224 provider.healthnet.com

PROVIDER COMMUNICATIONS provider.communications@ healthnet.com

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