



# ***MEDICAID ENCOUNTER DATA***

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## *What are Encounter Data?*

- Encounter data are electronic records of Medicaid-covered services provided to enrollees of, and paid by, a capitated health plan.
- Encounter data are submitted in federally-mandated HIPAA-compliant format from the MCO's (Managed Care Organization's) data system to the Florida Medicaid Management Information System (FMMIS).
- MEDS (Medicaid Encounter Data System) was established to collect, process and store the encounter data to support reporting and information requests, including:
  - Service utilization trends
  - Quality of care
  - Access to care
  - Cost, rate and risk models

## *Concepts to Remember*

- Fee-for-Service providers are required to submit claims directly to the Agency's fiscal agent (HP) for payment.
- Providers within an MCO network submit claims or report encounters directly to that MCO.
- MCOs are then required to report complete and accurate data to the Agency in a timely manner (within 60 days, per contract) to ensure their data reflects the services paid by the plan .
- AHCA collects encounter data from all capitated health plans, and from PSNs (Provider Service Networks) providing transportation services.

## *Encounter Data Collection*

- Encounter data are collected in federally-mandated HIPAA-compliant formats. Types of data collected include:
  - Pharmacy - NCPDP format
  - Professional (837-P), institutional (837-I) and dental (837-D) claims - X12 format, version 4010
- As of May 19, 2011, a total of 100,979,227 encounter claims have been processed.

## *Encounter Data Collection*

- On July 1, 2008 Encounter Data collection began.
- Data are processed for errors before admission into the system:
  - Invalid recipients, incorrect dates of service, missing data fields, etc.

## *Encounter Data Uses*

- Monitor service delivery by MCOs to Medicaid recipients
- MCO contract compliance
- Information and analytical support for other policy bureaus
- Rate-setting using Pharmacy (NCPDP) encounter data
  - Additionally, consideration of inpatient encounters as data source for rate-setting

## *Encounter Data Monitoring*

- Continuous monitoring of each MCO's encounter submissions for accuracy, completeness, timeliness and volume:
  - Volumetrics - Monitoring variations in MCO submission practices over extended periods of time using actual-versus-predicted encounter submissions by MCO.
  - Completeness and Accuracy – contractual requirement is that encounter submissions be 95% complete.
    - A Predictive Encounter Submission Model is under development to help assess completeness and accuracy.
  - Timeliness requirement - encounter data must be submitted within 60 days following the end of the month in which the MCO paid the claim (per contract requirements).

## *Additional Efforts*

- Preparations for collecting Nursing Home Diversion (NHD) encounter data.
- Preparations for collecting non-emergency transportation encounter data.
- Migration to new HIPAA-compliant 5010 format, and NCPDP 'Version 1' format in 2011.



## *Additional Information*

- More information is available on the Encounter Data Website:
  - <http://ahca.myflorida.com/Medicaid/meds/index.shtml>

*Questions?*