



Implementation to Exchange the List of Electronic Medical Documentation Requests (eMDR) for Registered Providers via the Electronic Submission of Medical Documentation (esMD) System

MLN Matters Number: MM11003 **Revised**

Related Change Request (CR) Number: 11003

Related CR Release Date: April 16, 2019

Effective Date: July 1, 2019

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Implementation Date: July 1, 2019

Note: We revised this article on August 26, 2019, to reflect changes made to the eMDR registration screens within NPPES. The article includes illustrations of the new screens that providers will have to complete in order to register to receive the eMDRs. In particular, the steps and screens relating to “Create new Endpoint Information in NPPES” and “Delete an existing Endpoint Information in NPPES” have been revised or added. A section discussing “Who should Register the endpoint information in NPPES” was also added. The NPPES updates result in no changes to the CR. All other information is unchanged.

PROVIDER TYPES AFFECTED

This MLN Matters Article is for physicians, providers, and suppliers billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

CR 11003 introduced the enrollment process for the providers who intend to get their Additional Documentation Request (ADR) letters electronically (as eMDR) through their registered Health Information Handler (https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/ESMD/Which_HIHs_Plan_to_Offer_Gateway_Services_to_Providers.html).

Make sure your billing staffs are aware of these changes.

BACKGROUND

In response to a number of requests from Medicare providers, the Centers for Medicare & Medicaid Services (CMS) is adding the functionality to send ADR letters electronically. CMS conducted a pilot supporting the electronic version of the ADR letter known as Electronic Medical Documentation Request (eMDR) via the esMD system. Since the eMDRs may contain Protected Health Information (PHI) data being sent to the prospective provider, CMS will require a valid consent from the authorized individual representing the provider along with the destination details including any delegation to their associated or representing organizations such as Health Information Handlers (HIHs).

The article published as a part of CR 11003 (which follows) will educate providers on the steps to be performed in order to receive the ADR letter electronically as an eMDR.

MLN Article Information Attached to CR 11003

Terminology

- NPES: National Plan and Provider Enumeration System
- eMDR: Electronic Medical Documentation Request. (Electronic form of ADR)
- esMD: Electronic Submission of Medical Documentation
- HIH: Health Information Handler
- RC: Review Contractor
- ADR: Additional Documentation Request

Timeline

- July 2019 - Providers can register to give their consent that an HIH of their choice can receive transactions on their behalf.
- January 2020 - Providers can receive eMDR (Pre or Post Pay) through their HIH and process the data systematically.
- April 2020 - Providers can receive the list of 'Requested Documents for an ADR' along with eMDR through their HIH.

CMS requires its review contractors to support sending ADR letters electronically as eMDRs. The following contractors are exempted from participation in the eMDR process:

- Payment Error Rate Measurement (PERM) contractors
- The Comprehensive Error Rate Testing (CERT) contractors (can opt to participate in the eMDR process)
- Quality Improvement Organizations (QIO) (can opt to participate in the eMDR process)
- Unified Program Integrity Contractor (UPIC)

CMS is implementing systematic changes to esMD, for the providers to receive ADR letters (Pre/Post) electronically as eMDR. Advantages for the provider to receive eMDRs include:

- ADR letter data in an electronic format (eMDR) provides structured data that can be used for system processing
- Electronic ADR letter (as eMDR) reaches the provider faster and brings traceability to the exchange
- ADRs received electronically makes for efficient management of ADR requests and responses

Registration

To receive the ADRs electronically as an eMDR via the esMD system:

- Provider must ensure that they have a Business Associate Agreement (BAA) in place with an HIH of their choice
- Provider must update the NPPES system to authorize their HIH to receive electronic transactions on their behalf (details mentioned below)
- HIH must complete additional processing steps after which the provider will receive eMDR

Points to Note for Registered Providers

1. eMDR (ADR letters sent via esMD) may have PHI data and requires:

- Consent from authorized individual to receive electronically
- Endpoint information where the eMDR has to be sent
- Active agreements between Provider and HIH, covering security and privacy requirements to handle PHI data

2. eMDR enrollment must use NPPES system to gather provider consent and endpoint information (only provider's authorized individual has access to NPPES).

3. A provider (by NPI) must have an active agreement with one HIH at a time to send/receive data via esMD for all supported Lines of Businesses (LOBs).

4. A provider (by NPI) enrolling and registering for eMDR will receive ADR letters electronically via esMD from all RCs sending out ADR letters. CMS exempts PERM, CERT, UPIC, and QIO contractors from sending eMDRs.

5. A provider (by NPI) enrolling for eMDR is applicable to all its PTANs.

6. HIH shall complete additional processing steps after which provider receives eMDR (after January 2020).

7. The eMDR registration process (new, HIH change or removal) is not effective until all process steps are completed without any discrepancies.

8. Provider is responsible to update NPPES with the latest HIH details.

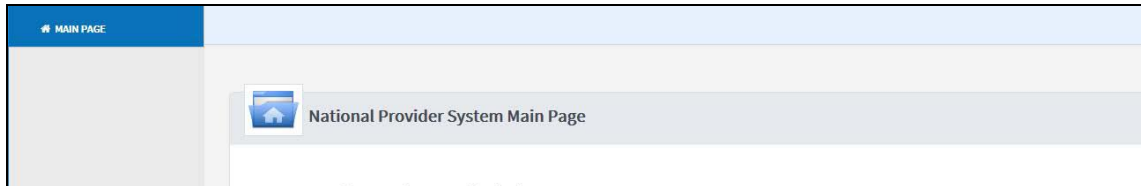
9. A provider registering for the first time to receive eMDR will receive both electronically and by mail for the first three ADRs as a transition step.

10. A provider enrollment for MAC portals and DDE (Part A) are separate from eMDR enrollment and registration.

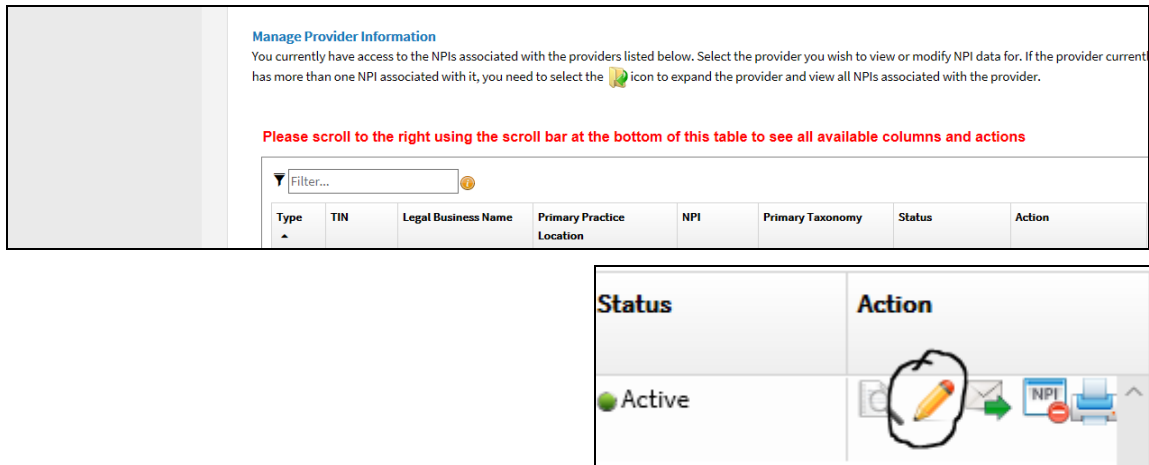
Create new 'Endpoint Information' in NPES

Provider Profile in NPES (to be updated by the provider's authorized person)

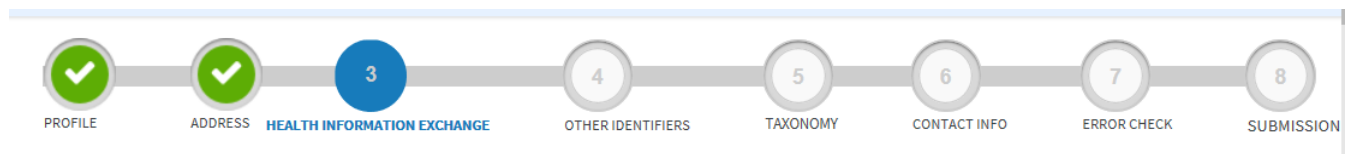
Step 1: Navigate to the main page after logging in. (<https://nppes.cms.hhs.gov>)




Step 2: Scroll down and click on the edit icon under the 'Action' column.



Step 3: Proceed to the 'HEALTH INFORMATION EXCHANGE' section.



Step 4: Scroll down to 'Endpoint for Exchanging Healthcare Information (optional)' section and fill out the details as mentioned below the screen shot.


Endpoint for Exchanging Healthcare Information (optional)

* Indicates Required fields.

The exchange of health information between doctors, nurses, pharmacists, other health care providers and patients can use endpoints to appropriately access and securely share a patient's vital medical information electronically. An endpoint is a device/address that provides a secure way for participants to communicate with each other.

Endpoint information will be made available on the [NPI Registry](#), [APIs](#), and [Data Dissemination Files](#) for users to receive and consume.

For Additional information, please visit- <https://www.healthit.gov/topic/health-it-basics/health-information-exchange>

Endpoints should not include personal email information.

* Endpoint Type: * Endpoint: Endpoint Description:

Endpoint Use: * Other Endpoint Use: Endpoint Content Type:

* Is the Endpoint affiliated to another organization? Yes No

* Affiliation: * Endpoint Location:

* Endpoint Use Terms and Conditions: By checking this box, I agree that the information I provided is accurate to the best of my knowledge and can be shared electronically for healthcare information exchange purposes.

Provider shall enter the following information in NPPES:

- Endpoint Type: 'Connect URL'
- Endpoint: [Website URL of the HIH] *(to be provided by HIH)*
- Endpoint Description: [HIH OID] *(to be provided by HIH)*
- Endpoint Use: 'Other'
- Other Endpoint Use: 'CMS esMD eMDR'

Is this Endpoint affiliated to another Organization? (Here provider shall choose 'Yes' and enter all the details of the HIH) *(If the provider themselves are HIHs then choose their own name and address)*

- Affiliation: [Click on 'Choose Affiliation' and try to search the HIH name using 'Organization name' parameter]

If there are no results, enter the HIH organization name (to be provided by HIH) in the 'Affiliated Organization Legal Business Name' and Click Save. (Shown as below)

- Endpoint location: [If the HIH address is not part of the dropdown, Click on 'Add New Endpoint Location' and enter the HIH address] (to be provided by HIH)

Endpoint Location Address

* Indicates Required fields.

Select Type of Address:

US Domestic Military Outside US / Foreign

This is my home address

* Address Line 1: (Street Number and Name)

Address Line 2: (e.g., Apartment/Suite Number)

* City: * State: * Zip Code: Zip Ext:

Telephone Number: Extension: Fax Number:

Organization Name (Optional):

CANCEL **SAVE**

Click Save.

Step 5: After all the details are entered on this screen, please check the terms and conditions check box and click 'Save'.

Endpoint for Exchanging Healthcare Information (optional)

* Indicates Required fields.

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Endpoints should not include personal email information.

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 Yes No

* Affiliation:

* Endpoint Location:

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Delete an existing 'Endpoint' information in NPPES

Step 1: After logging in to NPPES, Navigate to the "Health Information Exchange section" you will find all existing Endpoints listed in a grid (see screen shot below)

Please scroll to the right using the scroll bar at the bottom of this table to see all available columns and actions

Endpoint Type	Endpoint	Endpoint Description	Endpoint Use	Endpoint Content Type	Affiliation	Endpoint Location	Action
CONNECT URL	mary@hs@hsop	radiology imaging	Health Information Exchange (HIE)	CSV		802 Hargold St, Baltimore MD 21201-2465, US	

1 of 1 items

Step 2: To delete an Endpoint, click on the “Delete” icon in the “Action” column, the system will prompt the user, click “yes” to delete the Endpoint and add another one.

Note : Users can only delete Endpoints. They cannot modify any end point.

Use cases

1. A new enrollment and registration request.

- **Provider** - Provider shall enter an agreement with an HIH to accept eMDR on their behalf. An authorized user of the provider shall update the NPPES system with the HIH details.
- **HIH** - HIHs after getting a confirmation of the NPPES update shall send an eMDR enrollment request to esMD.

2. Removal of an eMDR registered provider (does not want ADRs electronically any more).

- **Provider** - An authorized user of the provider shall remove the HIH details from the NPPES system.
- **HIH** - HIHs after getting a confirmation of the NPPES deletion, shall send an eMDR remove request to esMD.

3. Change from one HIH to the other (HIH1 to HIH2)

1. **Provider** - An authorized user of the provider shall remove HIH1 and add HIH2 details in the NPPES system.
2. **HIH1** - HIH1 after getting a confirmation of the NPPES deletion, shall send an eMDR remove request to esMD.
3. **HIH2** - HIH2 after getting a confirmation of the NPPES update shall send an eMDR enrollment request to esMD.

4. Who should Register the end point information in NPPES?

All Provider(s) or Provider Organizations who intends to receive the Additional Documentation Request (ADRs) electronically, via esMD, as a pre-requisite need to register in NPPES.

○ Use Case A (Individual Providers)

In the current process a physical ADR letter is delivered to the provider 'A' with NPI 123X.

If the provider is willing to receive the ADRs electronically, then the provider must register in NPPES with the details of their End-Point who will receive the electronic ADRs on their behalf.

○ Use Case B (Group Practices / Hospitals)

When a claim is submitted by a hospital or a group practice (for a provider), our assumption is, a physical ADR is being sent to the group practice or Hospital address

and further gets dispersed to the intended Provider via internal communication mechanism.

If the group practice / Hospital is interested to receive ADRs electronically (on behalf of their provider(s)), then the group practice / Hospital specific NPI shall be registered in NPPEs.

ADDITIONAL INFORMATION

The official instruction, CR11003, issued to your MAC regarding this change is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2019Downloads/R2281OTN.pdf>. A detailed provider education document is attached to CR11003.

CMS will notify providers via MLN Matters articles if there are any changes to the process of registration.

If you have questions, your MACs may have more information. Find their website at <http://go.cms.gov/MAC-website-list>.

For more information on esMD visit <https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/ESMD/index.html>

DOCUMENT HISTORY

Date of Change	Description
August 26, 2019	We revised this article to reflect changes made to the eMDR registration screens within NPPES. The article includes illustrations of the new screens that providers will have to complete in order to register to receive the eMDRs. In particular, the steps and screens relating to "Create new Endpoint Information in NPPES" and "Delete an existing Endpoint Information in NPPES" have been revised or added. A section discussing "Who should Register the endpoint information in NPPES" was also added. The NPPES updates result in no changes to the CR
April 17, 2019	We reissued this article to reflect an updated Change Request (CR) that added an MLN article attachment. The article is reissued to include the CR attachment (MLN article) in its entirety. The CR release date, transmittal number and link to the transmittal was also changed.
February 1, 2019	Initial article released.

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