CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2417	Date: January 10, 2020
	Change Request 11142

Transmittal 2355, dated August 28, 2019, is being rescinded and replaced by Transmittal 2417, dated, January 10, 2020, to update the effective date to February 3, 2020. All other information remains the same.

SUBJECT: Implementation to Send Post-Pay Electronic Medical Documentation Requests (eMDR) to Participating Providers via the Electronic Submission of Medical Documentation (esMD) System

I. SUMMARY OF CHANGES: The purpose of this change request is to implement the changes required to generate and send the 'Additional Documentation Request (ADR) Letter Package' information, at the Review Contractor end, who conducts the post pay related reviews, to esMD.

EFFECTIVE DATE: February 3, 2020

*Unless otherwise specified, the effective date is the date of service.

IMPLEMENTATION DATE: October 7, 2019 - Analysis, Design, and Coding; January 6, 2020 - Testing and Implementation

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS: One Time Notification

Attachment - One-Time Notification

	Pub. 100-20	Transmittal: 2417	Date: January 10, 2020	Change Request: 11142
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IMPLEMENTATION DATE: October 7, 2019 - Analysis, Design, and Coding; January 6, 2020 - Testing and Implementation

I. GENERAL INFORMATION

A. Background: There have been several requests from Medicare providers to the Centers for Medicare & Medicaid Services (CMS) to enable the functionality to send Additional Documentation Request (ADR) letters electronically. CMS implemented a pilot supporting the electronic version of the ADR letter known as Electronic Medical Documentation Request (eMDR) via the Electronic Submission of Medical Documentation (esMD) system. Since the eMDRs may contain Protected Health Information (PHI) data being sent to the prospective provider, a valid consent is required 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 sender will have to complete the required identity proofing and always make sure to check for any registration updates before sending out each eMDR. With the implementation of this CR, automation of eMDR registration and any corresponding updates will be done with esMD support.

CMS is requiring its review contractors to support sending ADR letters (*for Medical and Non-Medical Review related*) electronically as eMDRs, with the following exceptions.

Any Post-Pay ADRs generated based on Appeals, either Medical or Non-Medical review related, are excluded from the scope of this CR. Any participant, for whom the Post-Pay ADRs are generated by the *Medicare as Secondary Payer (MSP) contractor*, is excluded from the scope of this CR.

The purpose of this change request is to implement the changes required to generate and send the 'ADR Letter Package' information, at the Review Contractor end, who conducts the **post pay** related reviews, to esMD. The 'ADR Letter Package' comprises of the general information about the ADR Letter and the PDF copy of the ADR letter. This is the first step required, from the Review Contractor side, for the purpose of exchanging the Additional Documentation Request (ADR) letters to registered Providers via the Electronic Submission of Medical Documentation (esMD) system.

Assumptions

- Post-Pay ADRs generated based on *Appeals*, and Post-Pay ADRs generated by the *MSP* contractor, are excluded from the scope of this CR.
- A provider (by billing National Provider Identifier (NPI)) registering for the first time to receive eMDR shall receive both electronically and by postal mail for the first three ADRs.
- A provider enrollment for Medicare Administrative Contractor (MAC) portals and Direct Data Entry (DDE) (Part A) are separate from eMDR enrollment and registration.

- A provider (by billing NPI) registering for eMDR will receive ADR letters electronically via esMD from all review contractors sending out ADR letters.
- A provider (by billing NPI) registering for eMDR is applicable to receive eMDRs for all its Provider Transaction Access Numbers (PTANs).

Terminology:

- eMDR Registered Providers File: Information sent from esMD to Review Contractors (Non-MACs), the cumulative list of eMDR Registered Providers and their registration status, via RC Client.
- 2. **eMDR Structured File:** A file of Information about the ADR letter (Extensible Markup Language (XML) format), generated by the Review Contractors (Non-MACs), to be sent to esMD. After the necessary validations, esMD sends the same as a part of *eMDR Letter Package*, to the intended HIH/Providers.
- 3. **ADR Letter in PDF:** A copy of the ADR letter in Portable Document Format (PDF) format, generated by the Review Contractors (Non-MACs), to be sent to Providers, via esMD as part of *eMDR Letter Package* bundle (also, to be posted on their respective portals).
- 4. **ADR Letter Package:** A ZIP file containing information comprising of '*eMDR Structured File*', '*ADR Letter in PDF*', and the process *meta data information file (XML)*, generated by Review Contractors (Non-MACs), to be sent to esMD
- 5. **eMDR Letter Package:** esMD generated Secured transaction comprising of '*eMDR Structure File*', and '*ADR Letter in PDF*', to be sent to HIH/Provider.
- 6. **eMDR Error Details File:** File containing details about the eMDR Letter Package(s), which encountered any unforeseen error, while generating the package OR sending the same, to HIH. HIH shall accordingly inform the intended Providers, to assist them to obtain the information from respective MACs.
- 7. **eMDR Provider Delivery Notification**: Notification sent by HIH as a confirmation regarding the delivery of the *eMDR Letter Package* to the intended Provider. esMD shall pass on the outcome information, to the respective MACs, upon the request.
- 8. **Analysis Factor**: Represents the element used, as the basis, to conduct the analysis. Such as Procedure Code, or Diagnosis Related Group (DRG) code, etc.
- 9. **Document Code**: Represents the document to be requested from the Provider, in a codified form.
- 10. **Process Meta Data File**: An XML file containing all the elements which are defined/expected by the esMD system, to process the Post-Pay eMDR transaction sent, by the Review Contractors.
- **B. Policy:** The Administrative Simplification provisions of Health Insurance Portability and Accountability Act (HIPAA) require the Secretary of the Department of Health and Human Services (HHS) to follow the Security Standards general rules as in *§* 164.306(a) and *§* 164.306(b)in order to protect the secure exchange of Protected Health Information/Personally Identifiable Information (PHI/PII) sensitive information electronically.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Re	espo	nsil	bilit	·V				
1 (dillo Ca	Кеципенен		A/B		D		Sha	red-		Other
			MA		M			tem		34161
					Е		•	aine		
		Α	В	Н		F	M	V	С	
				Н	M	Ι	C	M	W	
				Н	A	S	S	S	F	
					C	S				
11142.1	The contractors shall create the <i>ADR Letter Package</i> information, to be sent to esMD, via <i>RC Client</i> , as needed. <i>ADR Letter Package</i> comprises of the following components, representing a single ADR transaction, as a ZIP file.	X	X	X	X					RAC, RRB- SMAC, SMRC, esMD
	 eMDR Structured File, (XML format) ADR Letter in PDF, and Process Meta data File (XML format) 									
	NOTES:									
111/2 1 1	 The scope of the requirements stated in this CR are applicable to ADRs originating based on both Medical and Non-Medical Reviews, as stated in the background section of this CR. File naming conventions for eMDR Structure File, shall be provided by esMD. Creating the eMDR Structured File (as per the specifications/naming convention) and the PDF copy of the letter (as per the expected file naming convention), is the responsibility of the RCs. The ZIP file and Process Meta data file can be generated, by using the functionality (Application Program Interface (API) Methods) provided in RC Client software. esMD size limit for a given transaction is, 140 Megabyte (MB). esMD shall expect a single PDF copy of the letter, in the letter package. esMD shall release the RC Client API software and its specification to Review Contractors, 4 months in advance of go-live date. 	V	V	V	V					DAC DDR
11142.1.1	The contractors shall create the <i>eMDR Structured File</i> (for Post-Pay ADRs), as defined in the record layout spreadsheet/workbook provided. Workbook Name : "eMDR_Post Pay_Data_Elements_RCs_to_esMD.xlsx"	X	X	X	X					RAC, RRB- SMAC, SMRC, esMD

Number	r Requirement Responsibility									
Tidilibel	Requirement		A/B		D		Sha	red-		Other
			MA(M			tem		oulei
					Е		_	aine		
		Α	В	Н	_	F	M			
		71	ם	Н	M	I	C	M	_	
				Н	A	S	S	S	F	
					C	S		٥	•	
	Tab Name: 'eMDR Data Construct - Post Pay'					D				
	NOTES:									
	 The details regarding the data element set (termed as 'Required', 'Situational', and 'Optional') are defined in the requirements below. The applicable edit rules related to each data element is mentioned in the column 'Comments / Rules' of the workbook. 									
11142.1.1	The contractors shall send the following data elements of the <i>eMDR structured File</i> , termed as ' <i>Required</i> '.	X	X	X	X					RAC, RRB- SMAC,
	Following Data elements / section are Required to be sent as part of the eMDR:									SMRC, esMD
	 Type of eMDR(Must be = 'POST-PAY') Unique Letter ID (Must be present and can contain A-Z, a-z, 0-9, and no Special characters, and, must match the prefix portion of the Copy of PDF letter file name) Letter date (Must be valid date, affixed in the Letter) Respond to (Section) ('Organization Name', 'Address Line 1, City, State, ZIP Code'-Respective Element Rules as stated in the 									
	 workbook are applicable). 5. Provider Details (Billing Provider - Section) ('Name' 'Address Line1, City, State, ZIP Code' and 'Provider NPI' - Respective Element Rules as stated in the workbook are applicable). 6. Letter Details (Section) ('Respond by', 'Jurisdiction/Zone of RC', 'Program Name' - Respective Element Rules as stated in the workbook are applicable) 7. Claim Details - ('Claim ID', 'Beneficiary last name', 'Beneficiary ID' - Respective Element Rules as stated in the workbook 									
	are applicable)8. Review Level - ('Analysis ID' - The rules as stated in the workbook are applicable).									

Number	ner Requirement Responsibility									
Number	Requirement		A/B		D		Cho	red-		Other
			MA(M			tem-		Other
		1	VI/IV	_	E		•	aine		
		_	Ъ	11	Ľ					
		A	В	Н	N	F	M			
				Н		_	C	M		
				Н	A C	S	S	S	F	
	NOTEG				C	S				
	NOTES:									
	• An amon response will be sent by soMD when									
	• An error response will be sent by esMD, when									
	any of the element did not satisfy any of the									
	associated rule(s).									
	Associated error codes shall be provided, by									
	esMD.									
11142.1.1	The contractors shall send the following data elements	X	X	X	X					RAC, RRB-
.2	of the <i>eMDR structured File</i> , termed as 'Situational',	Λ	Λ	Λ	Λ					SMAC, RRB-
.2	when the situational condition is satisfied.									SMRC, esMD
	when the situational condition is satisfied.									SWIKC, ESMID
	Following section(s) to be sent as part of each eMDR									
	are situational:									
	are situational.									
	Sender Details									
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~									
	• If the 'Sender' of the eMDR (MAC or Non-									
	MAC) RC is different from the 'Respond To'									
	RC, then the 'Sender Details' section shall be									
	populated by the contractors.									
	• If the 'Sender' of the eMDR (MAC or Non-									
	MAC) RC is the same as the 'Respond To' RC,									
	then the 'Sender Details' section shall be									
	populated with SPACES.									
	• While sending the information in the 'Sender									
	Details' section, follow the usage mention in									
	Column G (of the Layout workbook) for each									
	element.									
	NOTES:									
	• Applicable Rules for each of the data element									
	is mentioned in column 'Comments/Rules' of									
	the workbook.									
	• An error response will be sent by esMD, when									
	any of the element did not satisfy any of the									
	associated rule(s).									
	Associated error codes will be provided, by									
	esMD.									

Number	Requirement	Re	espo	nsil	bilit	.y				
			A/B MA(	3	D M E		Sha Sys aint	tem		Other
		A	В	H H H	M A C	F	M C S		С	
.3	The contractors should send any of the data elements of the <i>eMDR structured File</i> , termed as ' <i>Optional</i> ', as deemed necessary.  The following elements are termed 'Optional' in addition to the already existing elements:  • Review Level: 'Analysis Factor', 'Document Code'  • Claim Details: 'Date of Service (From)', 'Date of Service (To)'  **NOTES:*  • Analysis Factor element can be provided up to a maximum of 25 per, Analysis ID, if populated.  • Document Code element can be provided up to a maximum of 100, per Analysis ID, if populated.  • Applicable Rules for each of the data element is mentioned in column 'Comments / Rules' of the workbook.  • An error response will be sent by esMD, when any of the optional element submitted and did not satisfy any of the associated Type / Length / Format rule(s).  • Associated error codes will be provided.	X			X					RAC, RRB-SMAC, SMRC, esMD
11142.1.2	The contractors shall create the 'ADR Letter in PDF' file (for Post-Pay ADRs), to be sent, as a part of the 'ADR Letter Package', to esMD, via RC Client.  NOTES:  esMD shall record the error details, when any of the element did not satisfy any of the associated rule(s) stated in the workbook.  Please refer to the attached PDF document for the specific naming convention. (PDF Copy of ADR letter Naming Convention.PDF)	X	X	X	X					RAC, RRB- SMAC, SMRC, esMD

Number	Requirement	Re	espo	nsi	bilit	.V				
			A/B		D		Sha	red-		Other
			ИAO		M		Sys			
					Е	M	aint	aine	ers	
		A	В	Н		F	F M V C		C	
				Н		_	C	M		
				Н	A	S	S	S	F	
11140 1 0		37	37	37	C	S				DAG DDD
11142.1.3	The contractors shall receive and process the Acknowledgment OR Error Response from esMD, for	X	X	X	X					RAC, RRB- SMAC,
	the <i>ADR Letter Package</i> transaction submitted by RC,									SMRC, esMD
	to esMD.									21/11/0, 051/12
	NOTES:									
	The Acknowledgment Response will be sent									
	via RC Client, when all the applicable esMD									
	<ul><li>validations have been completed successfully.</li><li>An Error response will be sent by esMD, via</li></ul>									
	RC Client, when any of the applicable esMD									
	validation failure is encountered.									
	• RC can correct and re-submit the transaction,									
	when such an Error response is received, on									
	the same day.									
11142.2	The contractors should contact the esMD helpdesk,	X	X	X	X					RAC, RRB-
11142.2	when they require any information (Error or Delivery	Λ	Λ	Λ	Λ					SMAC, KKB-
	status) regarding any of the eMDRs submitted.									SMRC, esMD
	sources, regulating unity or one tributes and missing unity									21/11/2, 021/12
	NOTES:									
	• The information is regarding the outcome of									
	the delivery of the eMDRs, to the intended									
	Provider, by HIH.  • Unique letter id and the date of submission									
	shall be the key for any inquiry.									
	share of the key for any inquity.									
11142.3	The contractors shall participate during the 'User	X	X	X	X					RAC, RRB-
	Acceptance Testing' (UAT) sessions, to ensure the									SMAC,
	expected changes are effected, related to post pay									SMRC, esMD
	activities. (December 2019)									
11142.4	The contractors shall attend the following one-hour	X	X	X	X					RAC, RRB-
	coordination calls, to discuss and resolve any issues	**	**	**	**					SMAC,
	related to testing and the specification changes.									SMRC, esMD
	_									
	• Up to 2 one-hour calls shall be scheduled									
	between each contractor and the esMD team									
	starting in September 2019.									
1				•						

Number	Requirement	Re	espo	nsi	bilit	y				
			A/B MA(	3	D M E		Sys	red- tem aine		Other
		A	В	H H H		F I S S	M C S	V M S	_	
	NOTES:  • esMD team shall schedule the calls.  • Each contractor shall post the minutes of the meeting for their specific issues being discussed on the call. (within 2 business days of the meeting in eChimp)									
11142.5	esMD and the contractors shall exchange the test files as per the schedule included in the attached document "Testing Criteria-Post-Pay eMDR.docx".	X	X	X	X					RAC, RRB- SMAC, SMRC, esMD
11142.6	The contractors shall be aware that the term 'Date of Service' mentioned in the comment line below the CR 'Effective Date' has no functional impact to the requirements stated in this CR.	X	X	X	X					RAC, RRB- SMAC, SMRC, esMD

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spo	nsib	ility		
			A/B		D	С	
		]	M	Е			
					Е	D	
		Α	В	Н		I	
				Н	M		
				Н	A		
					C		
	None						

## IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

Section B: All other recommendations and supporting information: N/A

## V. CONTACTS

Pre-Implementation Contact(s): Melanie Jones, 410-786-5461 or Melanie.Jones@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR).

#### VI. FUNDING

#### **Section A: For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**ATTACHMENTS: 4** 

CR	<b>Change Requested</b>	Explanation/Purpose	Date
11142	esMD	Row 3 - The prefix (first 3 characters) of the [ Unique ID ] element note has been removed.	02/19/2019
11142	esMD	Row 4 - The date format has been made to 1 format. [Letter Date]	02/19/2019
11142	esMD	Row 37 - The date format has been made to 1 format. [Respond By]	02/19/2019
		Row 40 - A new section 'Review Level' has be included as a required section.	
		Under this section, two elements are added.	
		Analysis ID (Row 41)	
		Analysis Factor (Row 42)	
11142	RCs	Document Code (Row 43) - Has been moved from the Claim Details section to this section	02/19/2019
11142	esMD	Row 45 - For the element Case ID, a separate section has been made.	02/19/2019
11142	esMD	Row 54 - The elements (Procedure Code/Modifier) associated to the sampled claims has been moved from Claim Details section	02/19/2019
11142	esMD	Claims Header and Details sections are made into ONE section	02/19/2019
		Row 56 / 57 - The Dates of Service from both Claim Header and Detail has been made into ONE set as follows.	
		Date Of Service (From)	
11142	RCs	Date Of Service (To)	02/19/2019
11142	RCs	The element 'Reason Code' has been removed.	02/19/2019
11142	esMD	The length of the Unique Letter ID element has been increased to 40	03/07/2019
11142	RCs	Analysis Factor Limit is set to 25, per Analysis ID; Document Code limit is set to 100, per Analysis ID	03/07/2019
11142	esMD	Since the structured format is XML, padding with ZEROS or SPACES to fit the maximum length need not be done.	03/07/2019
11142	RCs	To be consistent across the layout, the date format of the elements 'Respond By' and 'Letter Date' has been updated as 'mm/dd/yyyy'.	03/07/2019
11142	esMD	Row 3, Column H, Rule 1 - The upper limit has been corrected to reflect 40 Characters.	03/22/2019
11142	esMD	Row 40, Column G - Section Usage has been updated to 'Required'. [Analysis ID element must be provided]	03/22/2019
11142	esMD	Row 41, Column D - A statement has been added to provide clarity, regarding the XML record hierarchy.	03/22/2019
11142	esMD	Row 46, Column H - The comment statement has been removed. [Claim information is expected for both Medical and Non-Medical Review baseds Post Pay ADRs.]	03/22/2019
11142	Based on the general	In the following rows the striked out content has been modified / removed.	07/08/2019
11142	suggestions made, the	in the following rows the striked out content has been modified / removed.	07/08/2019
	'Provider Details' section	Part 24	
	(rows 24 to 32) shall	NOW 24  (Column B (ID / Section) , the content of this column has been modified as 'Provider details (Billing Provider)'	
	,	Column D (by 5 ection), the contents of this column has been modified as 'Provider to whose the intended eMDR is to be delivered 'Addressed To'	
	the word 'Billing'. This	Column b (bescription), the contents of this column has been mounted as Provider to whom the intended evidor is to be derivated. Addressed to	
	Section shall have the	Row 25	
		Column D (associated to Data Element - First Name), the description has been modified as 'First Name of the Billing Provider'.	
	whom the eMDR is	Column b (associated to bata Element * rist waine), the description has been modified as Trist waine of the sample rowner.	
	'Addressed To'.	Row 26	
	Addressed To .	Column D (associated to Data Element - Middle Name), the description has been modified as 'Middle Name of the Billing Provider'.	
		Row 34	
		ROW 34  Column D (associated to Data Element - Provider NPI), the description has been modified as 'NPI of the eMDR Registered Billing Provider'.	
11142	Based on the recent	Column to (associated to Data remember - Provider NPT), to the solid provider as NPT of the eviden Registered single Provider.  The column named 'S.No.' in the tab 'eMDR Data Construct - Post Pay' has been updated with correct sequential numbers.	07/15/2019
11142	suggestions made by OIT	The column named 3.40. In the table mich data construct - rost ray has been updated with confect sequential numbers.	07/13/2019
	team.		
	ccum.		

S. No.	ID / Section	Data Element	Description	Type / Format / Values	Length	Usaze Rez.	Comments / Rules	Ouestion / Posv Pav RC responses.
3. NO.	ID 7 Section	Data Element	To indicate the kind/type of eMDR	Value: POST-PAY	Length	Usare Nee.	Rules:	CONTRACTOR PARTICIPATION OF THE PARTICIPATION OF TH
1		Type of eMDR			8	R	1. Must be populated with the value provided in column $\boldsymbol{\mathcal{E}}$ .	
-			This represent the Identifier assigned by the Sender of the eMDR letter info (Non-	Type: Character			Rules:	
			MAC RC), to identify the eMDR letter record Uniquely, in their internal system.	,,			Must be present and can be upto a limit of 40 characters in Length.	
			Note to esMD:				Must not contain any special characters.	
2		Unique Letter Id	This Identifier Value,		40	R		
			Shall be used by the esMD to track each eMDR uniquely.     Shall be Used by esMD, as a linkage element, to create the bundle of the structured eMDR and the PDF format of the letter (received from the RCs).					
			structured eMDR and the PDF format of the letter (received from the RCs).					
-				Formet:			Dular	
							Auto.	
3		Letter Date	Date affixed on the ADR letter	mm/dd/yyyy	10	R	Must be valid date, in the specified format     Must not be later than the current system date	
							•	
	"Respond To" Details	N/A	RC to whom the ADR response needs to be sent by the Provider			R	Section is Required.	
	(Ocucrs ONE time)		Name of the Organization to which the ADR Response needs to be sent by the	Total Character			Pulos:	
4		Organization Name	Provider.	Type: Character	60	R		
			First Address Line of the RC, to which the documentation needs to be sent by the	Type: Character			Name of the Organization must be present.     Rules:	
5		Address 1	provider	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	55	R		
			Second Address Line of the RC, to which the documentation needs to be sent by	Type: Character			Address Line 1 of the Organization address must be present.	
6		Address 2	the provider		55	0		
7		City	City associated with the RC address, to which the documentation needs to be sent by the provider	Type: Character	30	R	Rules:	
,		city			30	n.	City of the Organization address must be present.	
			State associated with the RC address, to which the documentation needs to be sent by the provider	Volues: All standard 2 character value representation for US states			Rules:	
8		State	.,		2	R	State of the Organization address must be present.	
-			ZIP Code associated with the RC address, to which the documentation needs to be	Type: Character			Must be valid State value in US.     Rules:	
			ZIP Code associated with the RC address, to which the documentation needs to be sent by the provider	Formats:			ZIP Code of the Organization address must be present.	
9		Zip Code		99999	9	R	Must be valid value in US.	
				999999999				
			Information to the provider to contact the RC in case of any questions.	Type: Character		0	Rules:	
10		Telephone		Format: 999999999999 (10 numerics)	10	0	Must match the type/format, when submitted.	
			Information to the provider to contact the RC in case of any questions.	(10 numerics) Type: Character			Rules:	
11		Telephone Ext		Format: 99999	5	0	Must match the type/format, when submitted.	
				(5 numerics)			Pules:	
12		Fav number	Fax number to respond with documentation	Type: Character	10	0		
12		Fax number		Format: 9999999999 (10 numerics)	10		Must match the type/format, when submitted.	
							Condition:	
							<ol> <li>If the RC who is sending the eMDR is different from, the RC to whom the ADR Response needs to be sent by the Provider, the Sender Details section is Required.</li> </ol>	
							Note:	
							While sending the information in this section please follow the usage mention in column	
	Sender Details		RC who is generating/creating the ADR information package, to be sent to the Provider, electronically.				6 for each element.	
		N/A				S	<ol><li>If the RC who is sending the eMDR is same as the RC to whom the ADR Response needs to be sent by the Provider, the Sender Details information need not be populated.</li></ol>	
	(Occurs ONE time)		Note: RC who is creating the ADR information package may not always be the same RC, to whom the Provider need to Respond To.					
							Note: If information is populated in both 'Respond To' and 'Sender Details' sections, esMD system will NOT perform any editing to ensure the details are the same across the	
							sections, against respective elements.	
			Name of the Oreanization which is sending the ADR, to the Provider.	Type: Character			Defense.	
13		Organization Name	rearner or one Organization which is sending the ADK, to the Provider.	rype: character	60	R	Rules:	
			First Address Line of the RC, who is sending the ADR letter, to the Provider.	Type: Character	-		Name of the Organization must be present.	
14		Address 1			55	0		
15		Address 2	Second Address Line of the RC, who is sending the ADR letter, to the Provider.	Type: Character	55	0		
-			City associated with the RC address, who is sending the ADR letter, to the Provider.	Type: Character	-		Rules:	
16		City			30	0	Oty of the Organization address may be provided.	
			State associated with the RC address, who is sending the ADR letter, to the	Values : All standard 2 character value			Rules:	
17		State	Provider.	representation for US states	2	0	State of the Organization address may be provided.	
							Must be valid State value in US, when populated.	
			ZIP Code associated with the RC address, who is sending the ADR letter, to the Provider.	Type: Character		1	Rules:	
18		Zio Code		Formats: 99999	9	0	Must match the type/format, when submitted.	
10		zip cose		99999999	,	"		
					1			
			Contact Telephone Number of the Sender of the ADR, to facilitate Provider enquiry,	Type: Character			Rules:	
19		Telephone	as need arise.	Format: 9999999999	10	0	Must match the type/format, when submitted.	
$\vdash$			Contact Telephone Number extension of the Sender of the ADR, to facilitate	(10 numerics) Type: Character	-	-	Rules:	
20		Telephone Ext	Provider enquiry, as need arise.		5	0		
اللا				Format: 99999 (5 numerics)	ــــــــــــــــــــــــــــــــــــــ		Must match the type/format, when submitted.	
21	Provider details	N/A First Name	Provider to whom the intended eMDR is 'Addressed To' First Name of the Provider	Type: Character	35	R O		
		Middle Name	Middle Name of the Provider	Type: Character	25	0		
22		Middle Name	Middle Name of the Provider		25	· ·		
		·					· · · · · · · · · · · · · · · · · · ·	

						1	
23		Last Name / Organization Name	Last Name of the Individual Provider OR Name of the Organization	Type: Character	60	R	Rules:  1. Name of the Organization OR the Last name of the Individual Provider, must be present
24		Address 1	First Address Line of the Provider, to whom the ADR letter is getting sent.	Type: Character	55	R	Rules:  1. First address line must be present.
25		Address 2	Second Address Line of the Provider, to whom the ADR letter is getting sent.	Type: Character	55	0	
26		Gty	City associated with the Provider address, to whom the ADR letter is getting sent.	Type: Character	30	R	Rules:  1. City of the Organization address must be present.
27		State	State associated with the Provider address, to whom the ADR letter is getting sent.	Volues : All standard 2 character value representation for US states	2	R	Lity to the digentization assess must be present.  Rules:  1. State of the Organization address must be present.
			ZIP Code associated with the Provider address, to whom the ADR letter is getting	Type: Character			State to the Organization across must be present.     Must be valid State value in US.     Rules:
28		Zip Code	SAINT.	Formats: 99999 999999999	9	R	ZIP Code of the Organization address must be present, when Provider Detail information is provided.     Z. Must be valid State value in US.
29		Provider Number/ PTAN	Represents the Provider Number OR Provider Transaction Access Number (PTAN)	Type: Alphanumeric	13	0	
30		Provider NPI	NPI of the eMDR Registered Provider	Type: Numeric	10	R	Makes:  1. Most be present and 10 numeric digit.  2. Most be a Valid eMDR Registered NPL, associated to the corresponding HHI.
31		Fax	Fax number of the Provider / Provider Organization	Type: Character Format: 999999999	10	0	Rules:  1. Must match the type/format, when submitted.
	Letter Details	N/A	Represent few of the dynamic elements that appears in the ADR letter	(10 numerics)		R	
	(Occurs ONE time)		Date by which the Response to the ADR is expected from the Provider, by the RC	Formats:		-	Rules:
32		Respond By		mm/dd/yyyy	10	R	The Date must be present and valid,     Note: be in the mentioned format,     Note: be in the mentioned format,     Note: be included the included format,
			Represents the Jurisdiction or the Region to which the RC is associated.	Type: Character Examples:			Rules:  1. Jursdiction OR Zone text must be present.
33		Jurisdiction / Zone of the RC		'QIO Area 1' 'RAC Region 1' 'UPIC Mid-Western'	40	R	Note: esMD system will neither maintain the values, nor, verify whether the populated value is valid.
			Indicates the Name of the Program which is sending this ADR letter	Type: Character			Rules:
34	Review Level	Program name (Line of Business)		Volues: The following are suggested: Part A, Part B, DME, HHH	10	R	The Value must be present     Mote: exhtD system will neither maintain the values; nor, verify whether the populated value is valid.
	(Section Can Repeat more than Once)	N/A				R	
35		Analysis IO	System Identifier assigned by the RC, to indicate a specific analysis/project.  (Example: Reference 8, Issue 9, or Project ID)  (Analysis IO, Analysis Foctor, Document Code, Care ID, Claim Detroils constitutes a block, and, can Repeat up to a limit of 100 times, [or a pinn ADII Letter]	Type: Character	40	R	Mute:  1. Must be present  2. Gan contain special Chriscites (Hypheri).
36		Analysis Factor	Data attribute used by the RC, to conduct the analysis/project with, OR the basis on which the analysis began.  (Example: Procedure Code, DRG, etc)  (Can Repeat upto a limit of 25 for a given Analysis ID)	Type: Character	30	0	Rules:  1. When populated, can contain special Characters (at least "Dot", or, "Highlen"),
37		Document Code	Code to indicate the document to be requested. (Can Repeat upto a limit of 500 for a given Analysis (0)	Type: Character Formats: (999999), (99999999999999), (9999999999	24	٥	Makes:  1. When populated, must be in one of the stated formats.  Compared to Make (1)  Stone in Central State (1)
	Claim Set Level (Section Can Repeat more than	N/A				0	
38	once)	Case ID	Case ID reference for the letter (On some of the ADR letters it is the document #)	Type: Character	35	0	
	Claim Details (Section Can Repeat more than once)	N/A	Represents the elements which are represented at the Clam details.  Note: Section Could be repeated as many times as needed			R	
39	oncej	Claim ID	The Claim Reference Number in CMS/RC system	Type: Character	23	R	Autor La greater  1. Mont la greater  2. Mont la greater  2. Mont et de l'indusing formats  2. Montenic Characteris in langels,  3. Montenic Characteris in langels,  4. Montenic Characteris in langels,  4. Montenic Characteris in langels,  5. Montenic Characteris in langels,  5. Montenic Characteris in langels,  6. Montenic Characteris in lan
			The reference number of the Beneficiary in Provider system.	Buse Mehanimeri			length )
40		Medical Record number	The reference number of the Beneficiary in Provider system.  Identifier of the Beneficiary who is receiving the Service	Type: Alphanumeric  Formats: Applicable HICN or MBI formats	25	0	Rules:
41		Beneficiary ID		,,	12	R	1. Must be present
42 43		Beneficiary First Name Beneficiary Middle Name	First Name of the Beneficiary who is receiving the Service Middle Name of the Beneficiary who is receiving the Service Last Name of the Beneficiary who is receiving the Service	Type: Character Type: Character Type: Character	35 25	0	Rules:
44		Beneficiary Last Name	Represent the Bill Type for institutuinal Claims	Type: Charatcer	60	R	Last Name of the Beneficiary must be present     Condition: Why be populated for institutional Claims only.
45		Type Of Bill		Format: Numeric	3	0	Rules:
46		Procedure Code & Modifier(s)	Procedure Code and/or associated Modifiers associated with the Claim	Туре: Character Formuts: (99999) (99999) (99999) (99999) (99999) (9000000) (96000000) (96000000) (96000000)	5+8	0	2. More to a numer, when propilated,  Moreov: Can convent for Procedure code and upto a manium of 4 Modifiers.  Additional potent will enable mentionate the Procedure Code / Modifier values, nor, verify whether the populated value is valid.  Modes:  Modes:
47		Date Of Service (From)	From Date of Service	mm/dd/yyyy  Format:	10	0	Rules:  1. Must be a valid date, when populated;  Rules:
48		Date Of Service (To)	To Date of Service	mm/dd/yyyy	10	o	. Must be a valid date, when populated. 2. Must later than the Date Of Service (From), when populated

#### January 2020 Release

# <u>Criteria Required to Generate Test Files from MACs/RACs/SMRC to esMD for CRs 31231 (eChimp CR 11142)</u>

***esMD UAT Starts at the end of December 2019 ***

## Testing support call schedule and expected attendees:

DPSS esMD Team would need to set up 2 calls, starting in September 2019 (once a month) to collaborate on the content of the *Test Files/Test cases*. The goal of these calls it to ensure that the MACs/RACs/SMRC discuss about any *technical questions about eMDR post-pay functionality* and also MACs/RACs/SMRC would provide the timelines to the esMD teams on when they can provide *test NPIs*. esMD would register the test NPIs in the NPPES Provider Registry.

September : Technical Support Calls (MAC, RAC & SMRC teams and esMD teams)

October : UAT Preparation Calls (MAC, RAC & SMRC teams and esMD teams)

#### Note:

The RC mailbox are currently setup in UAT and PROD, hence sharing the unit test files from esMD dev environment will not be possible. The Technical Support Call will be organized to address any **technical** clarification questions and/or concerns related to RC Client API or specifications.

During subsequent call, esMD would wish to ensure/provide the following, regarding the Post Pay eMDR implementation.

- a. The Providers information which would be used for testing, are all registered in NPPES system. (Test Provider NPIs in NPPES system)
- b. The same Provider information has been shared with the associated *Health Information Handlers* (HIHs) who intends to participate in UAT.
- c. esMD to provide UAT Test Plan to all the Participating Review Contractors. (MACs, RACs, and SMRC)
- d. For the Post-Pay testing, esMD team is recommending using the *same set of NPI's* that are used for testing purpose as part of eMDR Provider Registration.

## January 2020 Release MAC/RAC & SMRC Testing Plan:

Test Criteria (Refer to Figure 1 for eMDR Post-Pay flow)	MACs/Non-MACs UAT Test Key Dates
1: RCs eMDR structured (xml)file and ADRs as PDF document	
within a zip file via RC Client API	
<b>Note</b> : esMD team would provide RC Client API to support this	12/1/2019
functionality.	to
1.1: esMD sends error messages to RCs only if there are	12/10/2019
validation errors during processing of the Zip package received	
from RCs.	
2: esMD sends eMDR structured file and ADRs in PDF format to	12/10/2019
the HIHs	to

Note: HIH would receive the eMDR and ADR files only after esMD	12/18/2019
has successfully processed the files received from RCs.	
2.1: esMD receives eMDR delivery acknowledgement from HIH	
after esMD successfully sent the eMDR and ADR files to HIH.	
2.2: esMD sends the success/failure delivery acknowledgement	
to RC's depending on whether esMD successfully/failed	
delivering to HIH.	

3 esMD receives eMDR provider delivery notification from HIH after HIH sends the eMDR and ADR files to Providers. Delivery notification will be captured in the esMD database for any reporting/audit purpose.

## **Unit/UAT Test POC details:**

1. POCs from esMD team : <u>DATSDev@grsi.com</u>; <u>DATSAnalysts@grsi.com</u>; <u>DPSSESMD@cms.hhs.gov</u>

2. POCs from MACs team
 3. POCs from SMRC team
 4. POCs from RAC team
 5 MRC Teams' information needed
 6 RAC Teams' information needed
 7 RAC Teams' information needed

## The end-end flow for eMDR Post-Pay are shown in Figure 1: eMDR Post-Pay Flow

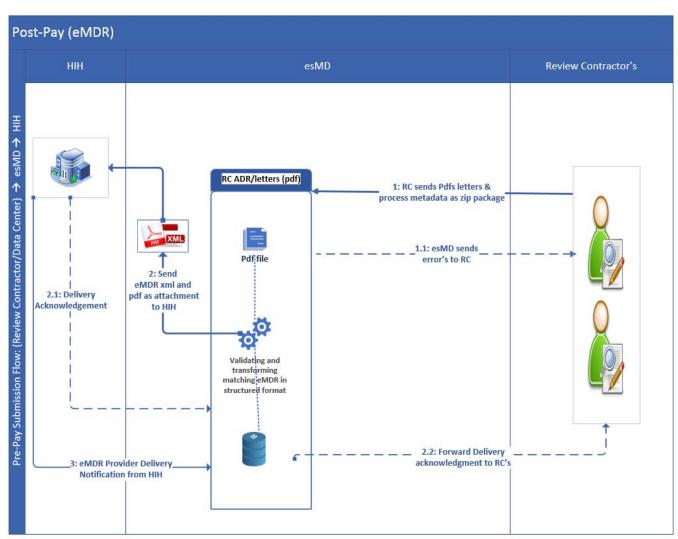


Figure 1: eMDR Post-Pay Flow

Naming Convention for the PDF copy of the ADR letter

<Unique letter id>_<Current time stamp>_<Name>.PDF

Unique letter id => The value as provided in the eMDR structured file record Current time => creation date/time < format - YYYYMMDDHHMMSS>
Name => Name of the document itself

## **Process flow for Post-Pay eMDRs**

