DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

CENTER FOR MEDICARE

DATE: September 18, 2020

TO: All Medicare Advantage, Cost, PACE, and Demonstration Organizations Systems
              Staff

FROM: Jennifer R. Shapiro, Director, Medicare Plan Payment Group

SUBJECT: Announcement of the October Encounter Data Software Release Updates

The Centers for Medicare and Medicaid Services (CMS) continues to implement software
improvements to the systems related to accepting and processing encounter data to support the
Medicare Advantage (MA) program. These changes will be implemented on October 30, 2020.

Edit Deactivation: The following five reject edits will be deactivated on October 30, 2020 for
encounter data records. Records submitted after this date, regardless of Date of Service will be
accepted. If you choose to resubmit previous encounters that were rejected with any of these
edits CMS recommends resubmitting on or after October 31, 2020.

- Edit 17330 – 'RAP Not Allowed.' The edit applies to requests for anticipated payments
  (RAP) that are submitted on type of bill (TOB) 322 for all dates of service or submitted
  on TOB 332 with dates of service prior to October 1, 2013.

- Edit 18300 – 'FQHC Payment Code Missing.' This edit applies to institutional TOB 77x
  with a from date of service and the billing provider's prospective payment system (PPS)
  effective date on or after October 1, 2014. The edit is triggered when at least one of the
  following Federally Qualified Health Center (FQHC) payment HCPCS codes G0466,
  G0467, G0468, G0469 or G0470 is <u>not</u> present on the institutional service line for each
  billed date of service.

- Edit 18305 – 'Invalid/Missing FQHC Qualifying Visit.' This edit applies to institutional
  encounters with TOB 77x with a from date of service and the billing provider's PPS
  effective date on or after October 1, 2014. The edit is triggered when a FQHC payment
  HCPCS code (G0466, G0467, or G0468) is present on an institutional encounter service
  line and a valid qualifying visit code related to the submitted FQHC payment code is not
  present on any other service line for the same day on the same encounter.

- Edit 18310 – 'FQHC Revenue Code is Missing.' This edit applies to institutional
  encounters with TOB 77x with a from date of service and the billing provider's PPS

effective date on or after October 1, 2014. This edit is triggered when a FQHC payment HCPCS code (G0466, G0467, or G0468) is present without the appropriate required medical visit revenue code (0519 or 052X), or a FQHC payment HCPCS code (G0469 or G0470) is present without the appropriate required mental health visit revenue code (0519 or 0900).

- Edit 21980 – 'CC D2 Requires a Change in One HIPPS.' This edit applies to institutional encounters with TOB 217 and service line from dates of service on or after January 1, 2009. The edit is triggered when condition code D2 is submitted on the encounter and the encounter service line revenue code submitted is 0022 and the HIPPS codes on the original and adjustment encounters are the same.

Questions can be addressed to RiskAdjustmentOperations@cms.hhs.gov, please specify, "October 2020- Encounter Data Software Release" in the subject line.