RA/RI Attestation & Discrepancy Reporting Guide for the 2015 Benefit Year

Resources

The following 2015 benefit year risk adjustment and reinsurance attestation and discrepancy reporting resources are available for review or download:

- Attestation and Discrepancy Reporting web form: https://acapaymentoperations.secure.force.com/RARIReporting
- Download and review the Attestation and Discrepancy Reporting webinar training materials from the REGTAP library in the "ACA Financial Appeals" Program Area: https://www.regtap.info
- March 18, 2016 EDGE Server Data Bulletin: Evaluation of EDGE Data Submissions for 2015 Benefit Year, available at: https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Part-2-EDGE-Q_Q-Guidance_03182016.pdf
- EDGE Server overlapping inpatient claims reporting webinar: EDGE Server Overlapping Inpatient Claim Issue & Reporting Requirements (2015 Benefit Year) (5/3/16)

1 Introduction

All issuers of risk adjustment covered plans and reinsurance-eligible plans are required to provide an attestation to CMS attesting that the enrollment, claims and encounter data submitted to the EDGE server by 5:00 p.m. ET on May 2, 2016 for the 2015 benefit year is accurate and has been submitted in accordance with the regulatory and operational guidance for the EDGE server, risk adjustment and reinsurance programs, as applicable

If issuers identify a discrepancy between the data they believe should be present on their EDGE servers and what is reflected in their final EDGE risk adjustment and reinsurance report, they should qualify their attestation with a discrepancy.

CMS developed a web form for the 2015 benefit year risk adjustment and reinsurance attestation and discrepancy reporting process. The web form will use the CEO Designate email address to determine the HIOS ID(s) for which each organization must provide attestation and if applicable, discrepancy reporting.

Each organization's CEO Designate will receive a notification email containing information about the risk adjustment and reinsurance attestation and discrepancy reporting process. This email will contain a direct link to the attestation and discrepancy reporting web form.

This document is a step-by-step guide to log in, complete and submit the attestation and if applicable, report any discrepancies within the web form for a company's HIOS ID(s).

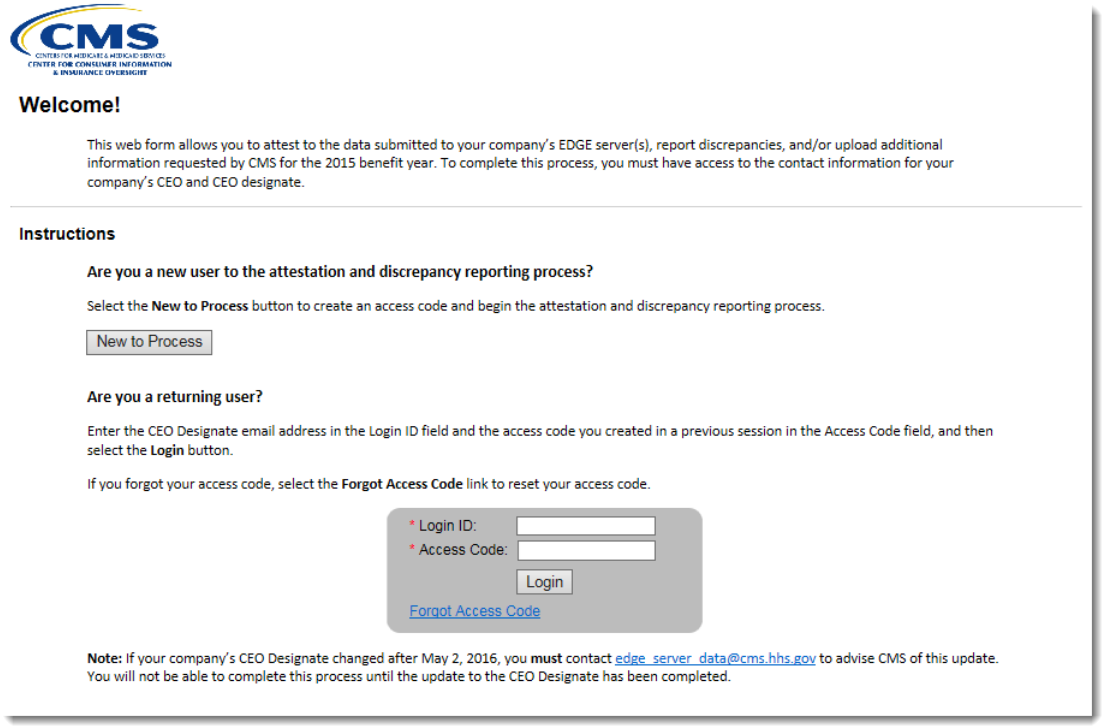
The web form provides the option to save and exit from specific pages. You do not need to complete the entire reporting process in a single session. However, **you must complete the attestation and discrepancy reporting process for the 2015 benefit year by 11:59 p.m. ET Friday, May 31, 2016.**

2 Welcome Page

Upon selecting the web form link in the notification email from raripaymentoperations@cms.hhs.gov, if you are accessing the web form for the first time, you are directed to select the **New to Process** button to enter contact information and create an access code (See Section 2.1). Returning users will log in using the CEO Designate email address and the access code created during a prior session (See Section 2.2).

If your company's CEO Designate changes after May 2, 2016, you **must** contact edge_server_data@cms.hhs.gov to advise of the update. You will not be able to complete the attestation process until the update to the CEO Designate has been made.

Figure 1: Welcome Page



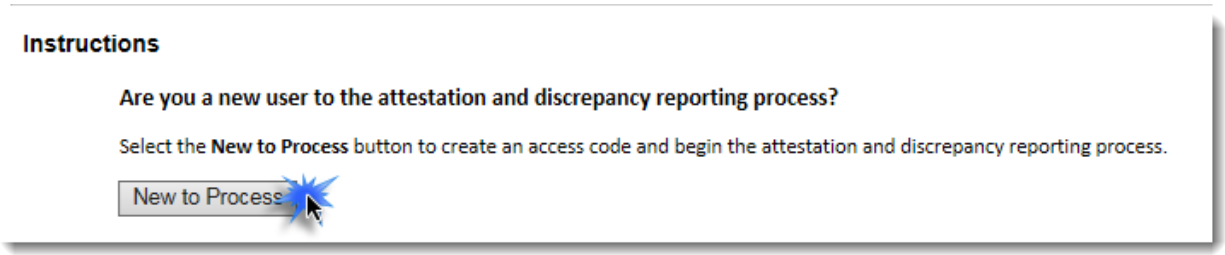
2.1 New to Process

Table 1: New to Process

Step	Action
1	Select the **New to Process** button.

Upon selecting the **New to Process** button, you will be directed to the **Contact Information** page of the web form. The Contact Information page requires that the CEO Designate contact information be entered as either the Submitter or the Alternate Contact. The web form will verify HIOS ID(s) against the CEO Designate information provided for attestation and discrepancy reporting. The Submitter and Alternate Contacts **must** be different.

Figure 2: New to Process Button

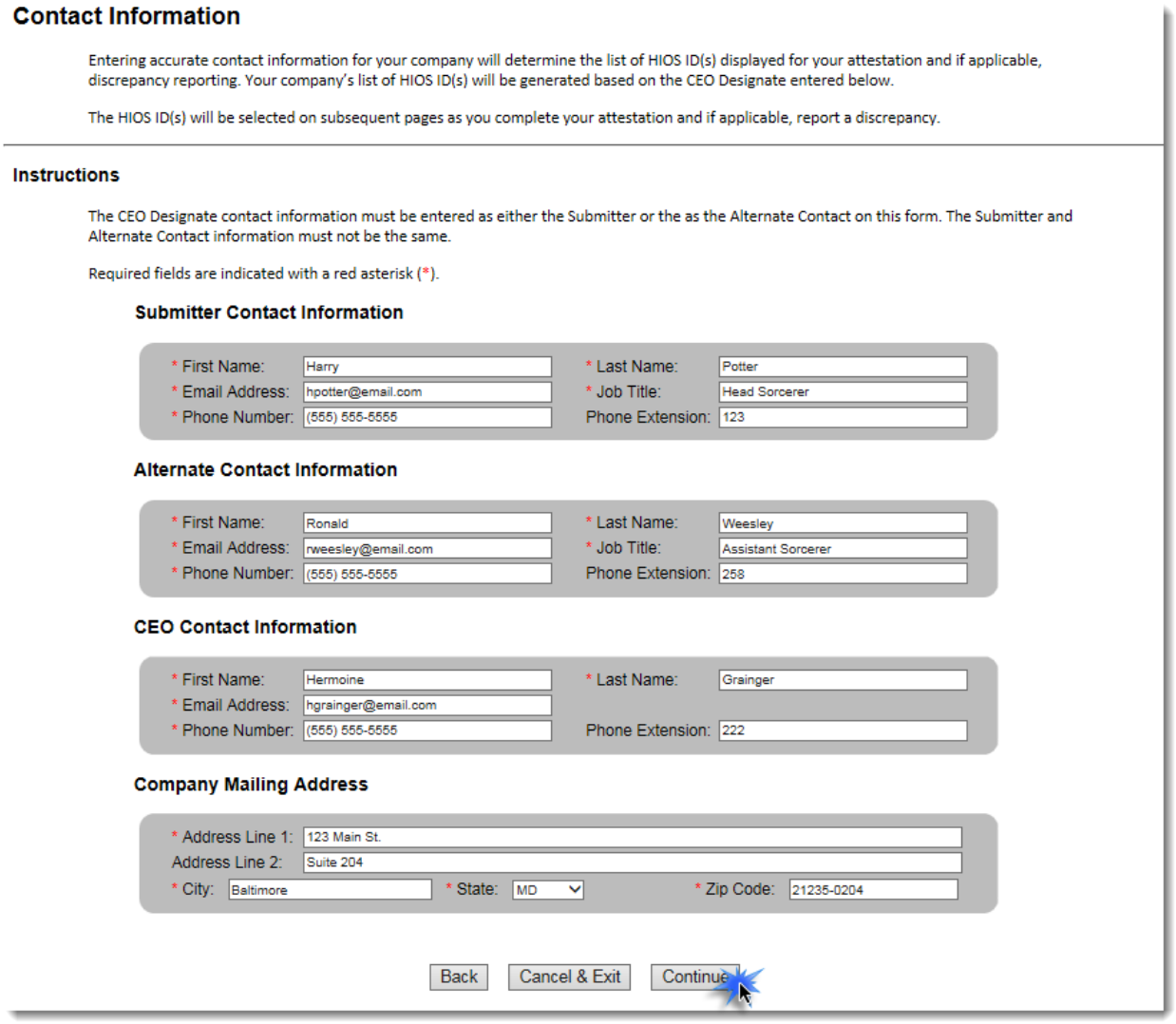


You will be required to enter CEO contact information, however, the CEO does not need to be either the Submitter or Alternate Contact. Additionally, the Attester does not need to be the Submitter or Alternate Contact.

Table 2: Contact Information

Step	Action
2	Enter the Submitter Contact information: • Submitter First Name • Submitter Last Name • Submitter Job Title • Submitter Email Address • Submitter Phone Number • Submitter Phone Extension (optional)
3	Enter the Alternate Contact information (must be different from the Submitter Contact): • Alternate Contact First Name • Alternate Contact Last Name • Alternate Contact Job Title • Alternate Contact Email Address • Alternate Contact Phone Number • Alternate Contact Phone Extension (optional)
4	Enter the CEO Contact information: • CEO First Name • CEO Last Name • CEO Email Address • CEO Phone Number • CEO Phone Extension (optional)
5	Enter the Company Mailing Address information: • Company Mailing Address Line 1 • Company Mailing Address Line 2 (optional) • City • State • Zip Code
6	Select the **Continue** button.

Figure 3: Contact Information Page



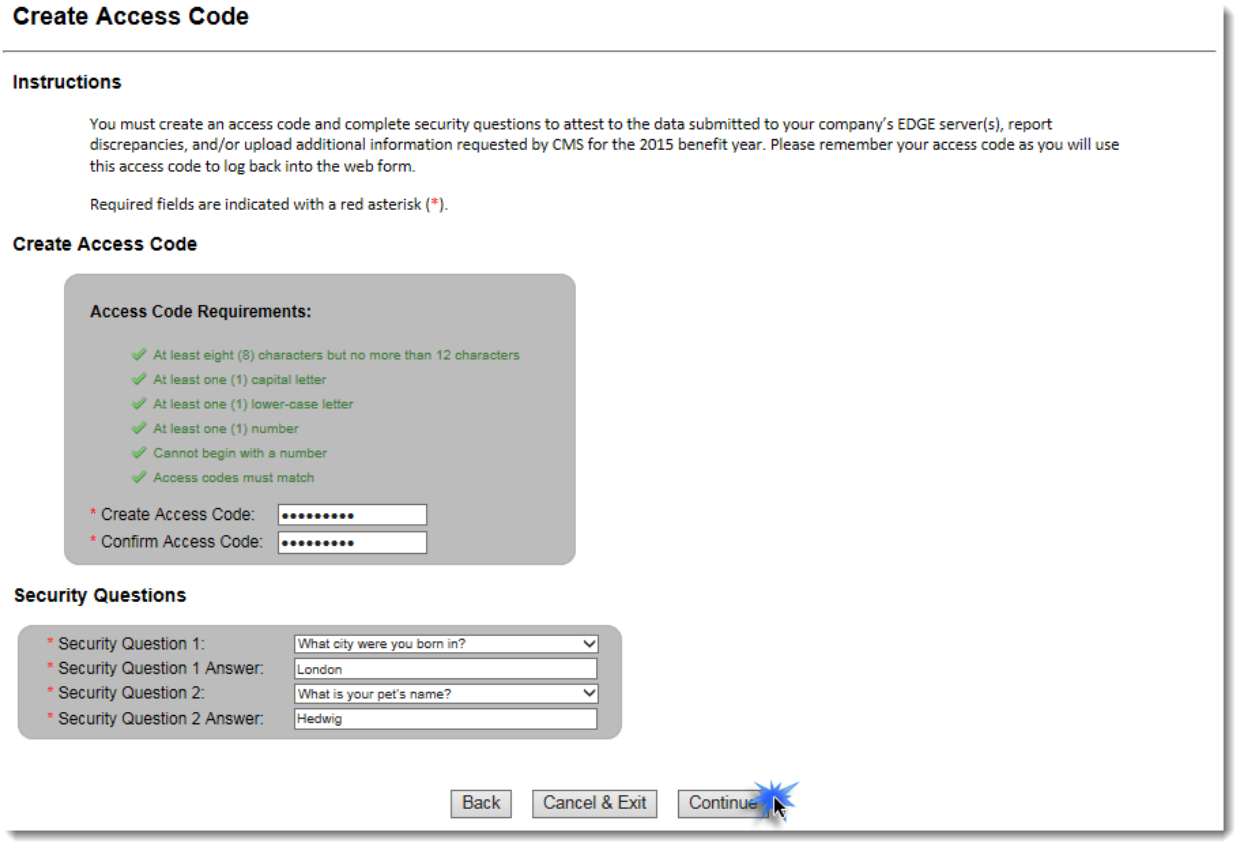
2.1.1 Create Access Code

The first time you access the web form, you will be required to create an access code and complete security questions. This access code, is your password, therefore we encourage you to remember the access code as this code will be used to log back into the web form later.

Table 3: Create Access Code

Step	Action
1	Enter an access code in the **Access Code** field. Access codes must meet the following requirements: • At least eight (8) characters but no more than 12 characters • At least one (1) capital letter • At least one (1) lower-case letter • At least one (1) number • Cannot begin with a number
2	Re-enter the access code in the **Verify Access Code** field.
3	Select a security question from the **Security Question 1** pick list.
4	Enter the security question answer in the **Security Question 1 Answer** field.
5	Select a security question from the **Security Question 2** pick list.
6	Enter the security question answer in the **Security Question 2 Answer** field.
7	Select the **Continue** button.

Figure 4: Create Access Code Page



2.1.2 Forgot Access Code

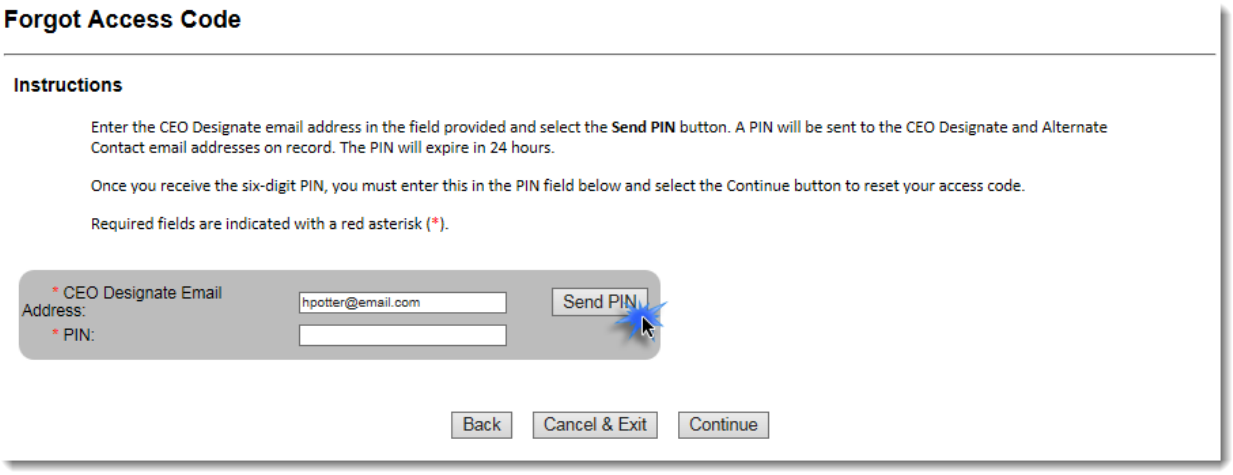
The web form allows you to reset your access code from the Welcome page in the event you have forgotten the access code.

Table 4: Forgot Access Code

Step	Action
1	Select the **Forgot Access Code** link.
2	On the Forgot Access Code page enter the CEO Designate email address in the **CEO Designate Email Address** field.
3	Select the **Send PIN** button. A six-digit PIN will be sent to the CEO Designate and Alternate email addresses. The PIN will expire in 24 hours.
4	Enter the PIN in the **PIN** field.
5	Select the **Continue** button.

Step	Action
6	On the Reset Access Code page, enter a new access code in the **New Access Code** field. Access codes must meet the following requirements: • At least eight (8) characters but no more than 12 characters • At least one (1) capital letter • At least one (1) lower-case letter • At least one (1) number • Cannot begin with a number
7	Re-enter the access code in the **Verify Access Code** field.
8	Enter the answer to Security Question 1 in the **Security Question 1 Answer** field.
9	Enter the answer to Security Question 2 in the **Security Question 2 Answer** field.
10	Select the **Continue** button.

Figure 5: Forgot Access Code Page

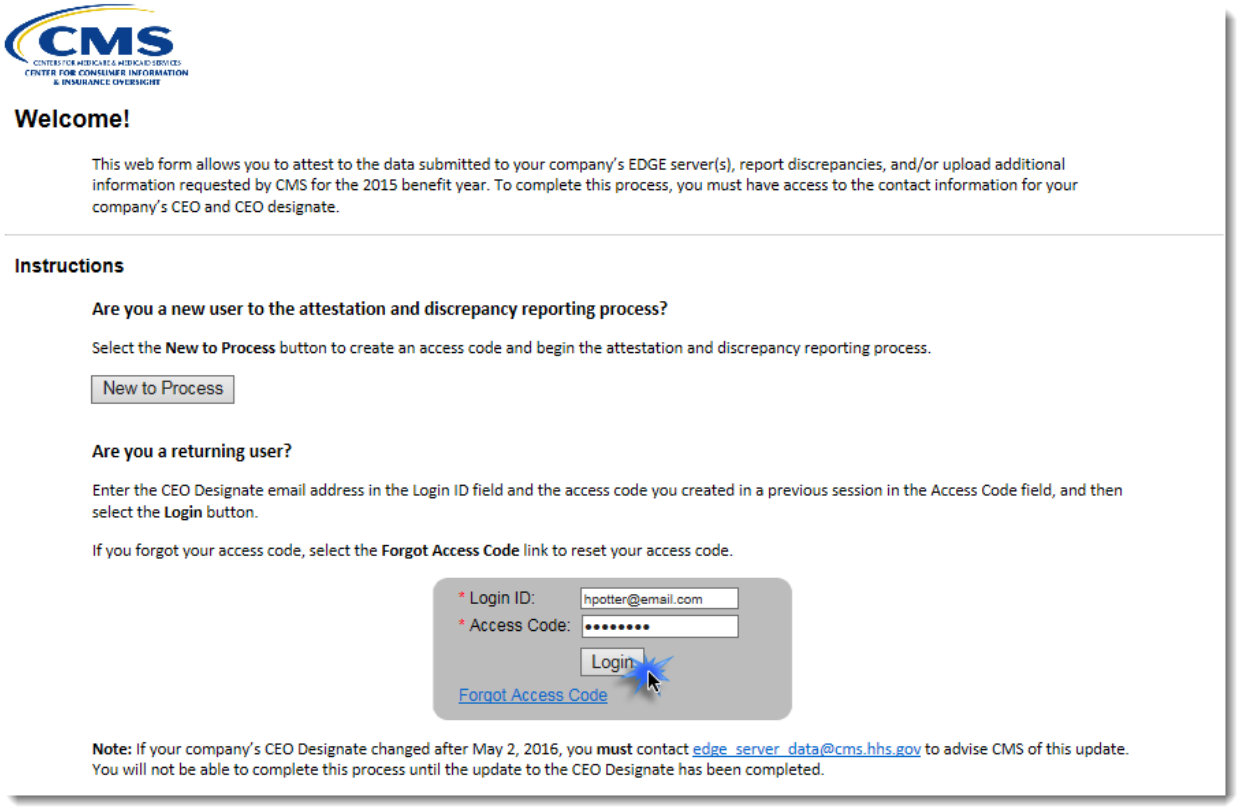


2.2 Log In With Access Code

Table 5: Log In With Access Code

Step	Action
1	Enter the CEO Designate email address in the **Login ID** field.
2	Enter your access code in the **Access Code** field.
3	Select the **Login** button.

Figure 6: Login With Access Code



3 Attest or Report Discrepancy and Attest Page

Once logged in to the web form, you will be directed to the Attest or Report Discrepancy and Attest page. To submit an attestation for all HIOS IDs see Section 3.1. To report at least one discrepancy and submit an attestation, see Section 3.2.

> CMS announced on 04/19/2016 and 04/26/2016 that a deficiency in the EDGE software may have allowed overlapping inpatient claims to be accepted and stored on the issuer's EDGE server as active making them erroneously eligible for the risk adjustment and reinsurance calculations. To identify this issue, CMS requires ALL issuers to run the "Overlapping Claims Summary Count" query on the EDGE server and to report a discrepancy if the resulting output identifies one (1) or more overlapping claims. For additional information on running the query, determining if this is applicable to you and reporting a discrepancy related to this issue, please refer to the CMS webinar presentation: EDGE Server Overlapping Inpatient Claim Issue & Reporting Requirements (2015 Benefit Year) (5/3/16) dated 05/03/2016.

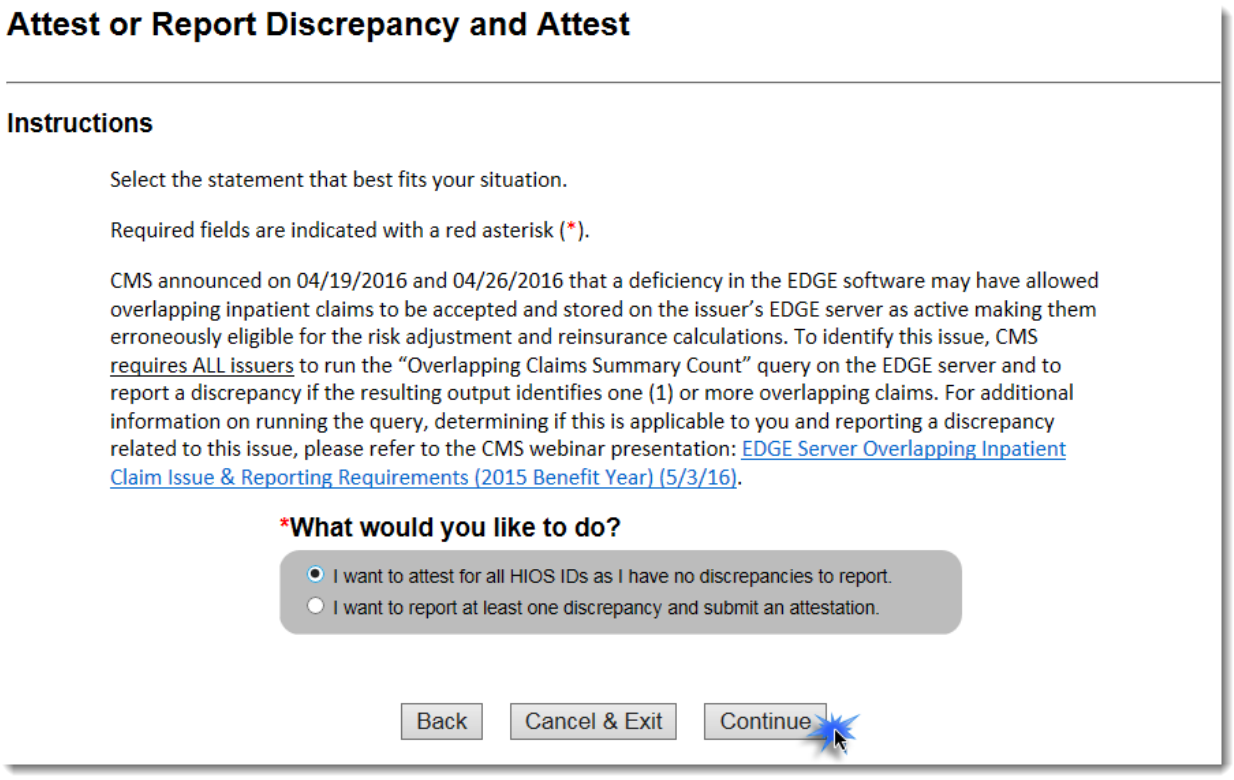
3.1 Attest for All HIOS IDs

Table 6: Attest for All HIOS IDs

Step	Action
1	Select the radio button next to the statement, "I want to attest for all HIOS IDs as I have no discrepancies to report."
2	Select the **Continue** button.
3	Review the **Contact Information** section on the Summary and Verification page for accuracy.
4	To edit Contact Information, select the **Edit Contact Information** button. *Note: You will not be able to edit the **Submitter Email Address** or the **Alternate Contact Email Address** fields.*
5	Review the **No Discrepancies Reported for the Following HIOS ID(s)** section.
6	Select **Yes** or **No** to the question, "Do you have a new discrepancy to report?" **If** / **Then** Yes / Follow the instructions in Section 3.2. No / Continue to Step 5.
7	Select the **Continue** button.

Step	Action
8	Follow steps in **Section 4: Submitting an Attestation**.

Figure 7: Attest for All HIOS IDs



3.2 Report Discrepancy and Attest

Table 7: Participation Questions

Step	Action
1	Select the radio button next to the statement, “I want to report at least one discrepancy and submit an attestation.”
2	Select the **Continue** button.
3	On the **Participation Questions** page select **Yes** or **No** to the question, “Is your company new to the EDGE server process?”
4	Select **Yes** or **No** to the question, “Is your company working with a Third Party Administrator (TPA) or other third party to support EDGE server operations?”

If	Then
Yes	A. Enter the name of third party working with your company in the **Third Party Name** field. B. If known, enter the TPA ID for the third party in the field provided. C. Select all applicable answers to the question, “How does your TPA or other third party support your EDGE server operations?”
No	Continue to Step 5.

Step	Action
5	Select the **Continue** button.

Figure 8: Participation Questions Page

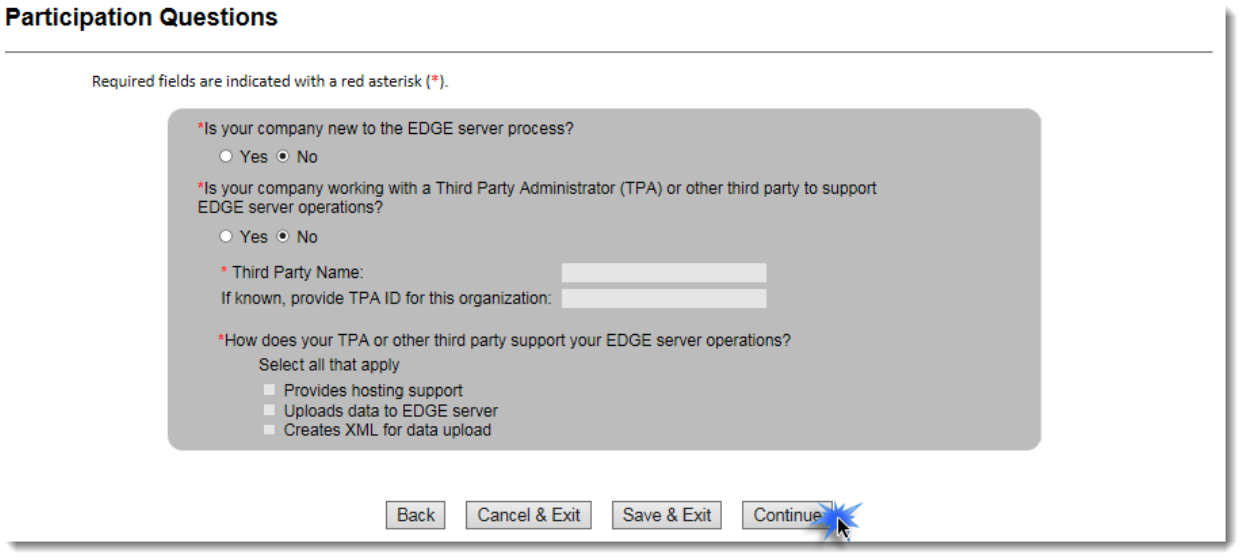


Table 8: EDGE Server Data Page

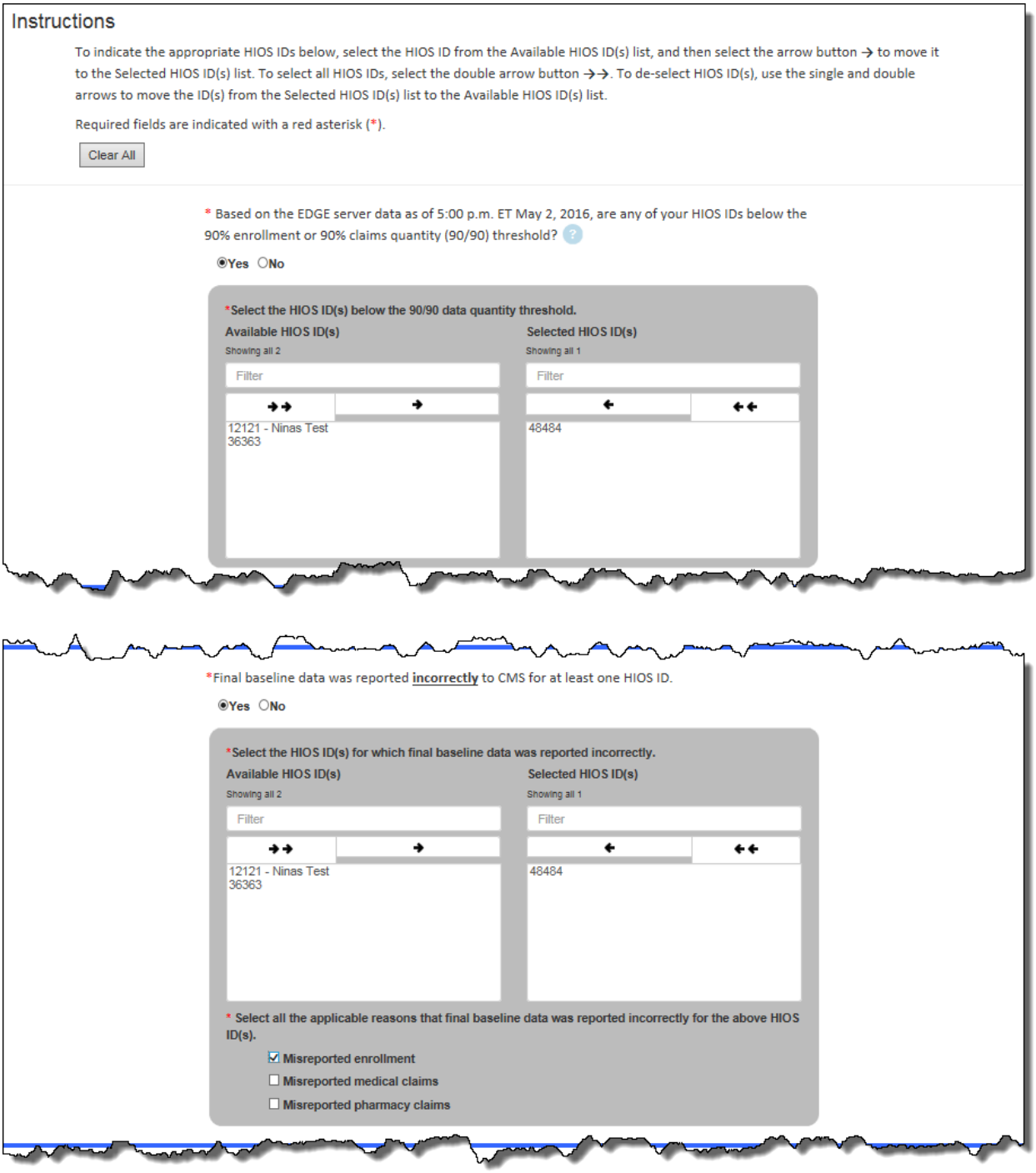
<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>6</td><td>On the EDGE Server Data page, select Yes or No to the question, “Based on the EDGE server data as of 5:00 p.m. ET May 2, 2016, are any of your HIOS IDs below the 90% enrollment or 90% claims quantity (90/90) threshold?”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>A. Select the HIOS ID(s) below the 90/90 data quantity threshold.
B. Select Yes or No to the statement, “Final baseline data was reported <u>incorrectly</u> to CMS for at least one HIOS ID.”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>i. Select the HIOS ID(s) for which final baseline data was reported incorrectly.
ii. Select all applicable reasons that final baseline data was reported incorrectly for the above HIOS ID(s)</td></tr>
<tr><td>No</td><td>Continue to Step C.</td></tr>
</table>
C. Select Yes or No to the statement, “For the HIOS ID(s) that fell below the 90/90 threshold, data <u>was not uploaded</u> properly to the respective EDGE server before the 5:00 p.m. ET May 2, 2016 data submission deadline.”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>Select the HIOS ID(s) for which the data <u>was not uploaded</u> properly by the submission deadline.</td></tr>
<tr><td>No</td><td>Continue to Step D.</td></tr>
</table>
D. Select Yes or No to the statement, “For the HIOs ID(s) that fell below the 90/90 threshold, an attempt <u>was not made</u> to upload the data by the final data submission deadline.”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>i. Select the HIOS ID(s) for which an attempt to upload the data <u>was not made</u> by the submission deadline.
ii. Enter an explanation for why the data was not uploaded.</td></tr>
<tr><td>No</td><td>Continue to Step E.</td></tr>
</table>
</td></tr>
</table>
</td></tr>
</table>

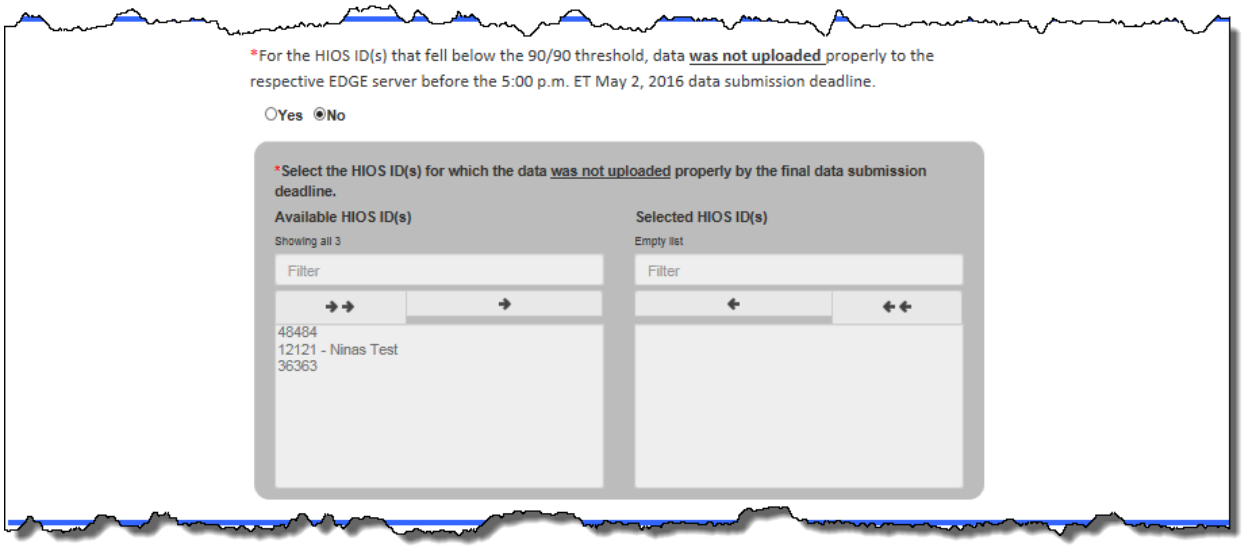
<table>
<tr><th>Step</th><th colspan="2">Action</th></tr>
<tr><td>6
(continued)</td><td></td><td>E. Select Yes or No to the statement, “The data was uploaded to the respective EDGE server test environment rather than the production environment.”
<table><tr><th>If</th><th>Then</th></tr><tr><td>Yes</td><td>Select the HIOS ID(s) for which the data was uploaded to the test environment.</td></tr><tr><td>No</td><td>Continue to Step F.</td></tr></table>
F. Select Yes or No to the statement, “For HIOS ID(s) below the 90/90 threshold, data was rejected on the EDGE server.”
<table><tr><th>If</th><th>Then</th></tr><tr><td>Yes</td><td>Select the HIOS ID(s) for which data was rejected.</td></tr><tr><td>No</td><td>Continue to Step 7.</td></tr></table></td></tr>
<tr><td></td><td>No</td><td>Continue to Step 7.</td></tr>
<tr><td>7</td><td colspan="2">Select the Continue button.</td></tr>
</table>

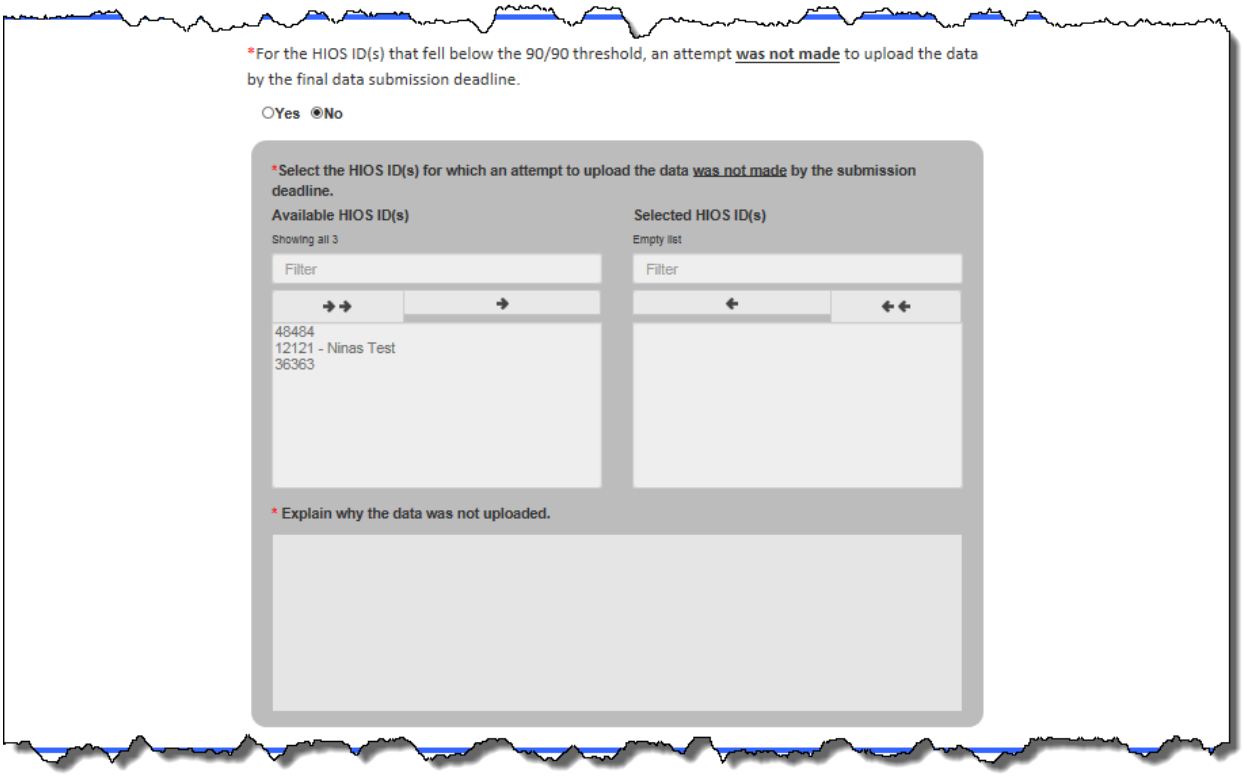


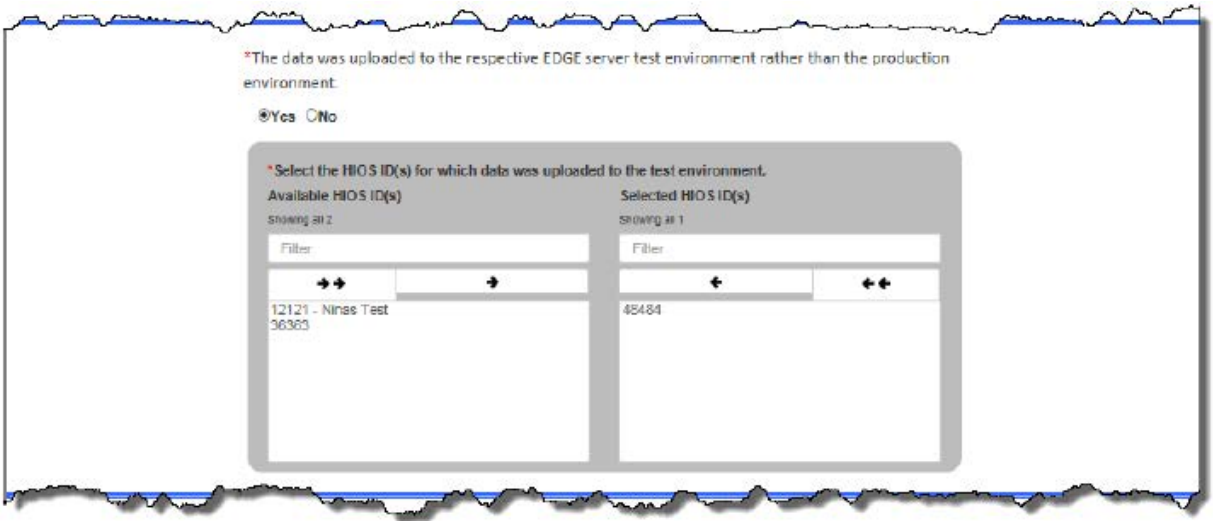
Data Quantity Threshold – Your company’s enrollment and claims data quantity must be sufficient for CMS to calculate reinsurance payments and apply the risk adjustment methodology. To determine if an issuer meets the data quantity standards, CMS compares an issuer’s self-reported baseline data on its total enrollment and claims counts by market for a given benefit year to the issuer’s data submitted and accepted into its EDGE server. For the 2015 benefit year, CMS used a 90% enrollment and 90% claims data threshold for an issuer to be flagged for outreach on potential data quantity issues. For more information, please reference the March 18, 2016 EDGE Server Data Bulletin.

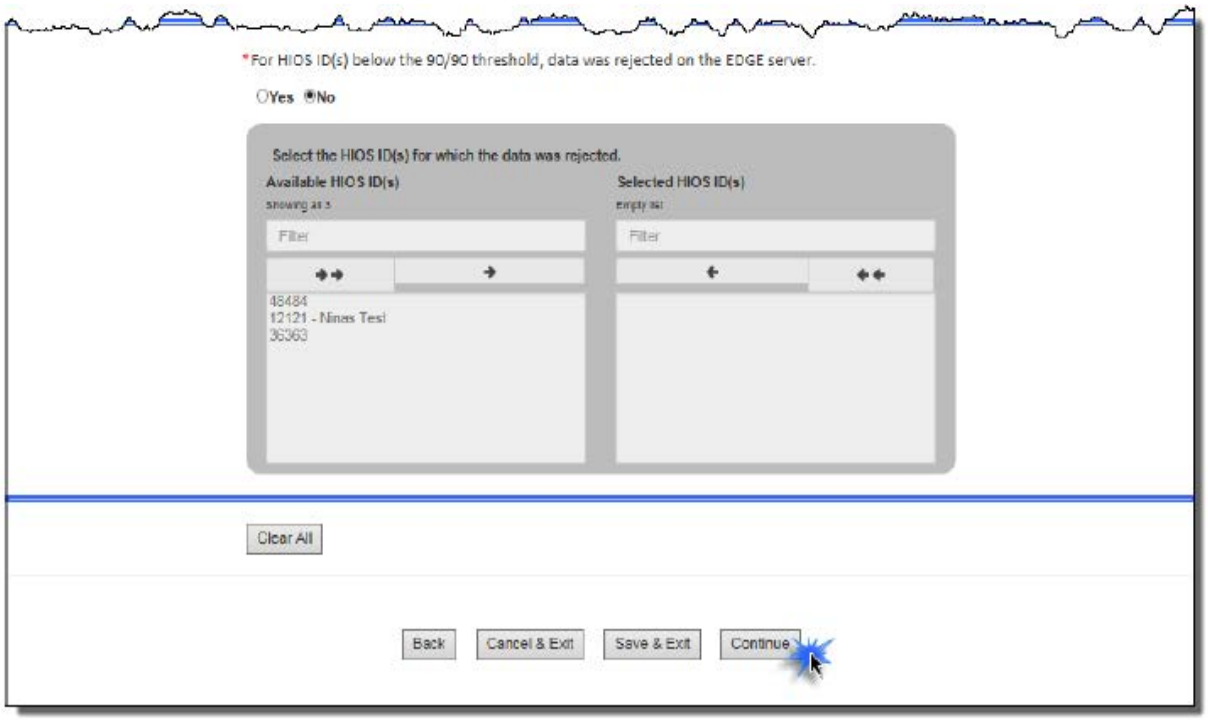
Figure 9: EDGE Server Data Page




*For the HIOS ID(s) that fell below the 90/90 threshold, data was not uploaded properly to the respective EDGE server before the 5:00 p.m. ET May 2, 2016 data submission deadline.
Yes
No
*Select the HIOS ID(s) for which the data was not uploaded properly by the final data submission deadline.
Available HIOS ID(s)
Showing all 3
Filter
48484
12121 - Ninas Test
36363
Selected HIOS ID(s)
Empty list
Filter


*For the HIOS ID(s) that fell below the 90/90 threshold, an attempt was not made to upload the data by the final data submission deadline.
Yes
No
*Select the HIOS ID(s) for which an attempt to upload the data was not made by the submission deadline.
Available HIOS ID(s)
Showing all 3
Filter
48484
12121 - Ninas Test
36363
Selected HIOS ID(s)
Empty list
Filter
* Explain why the data was not uploaded.


*The data was uploaded to the respective EDGE server test environment rather than the production environment.
Yes No
*Select the HIOS ID(s) for which data was uploaded to the test environment.
Available HIOS ID(s)
Selected HIOS ID(s)
Filter
12121 - Ninas Test
36363
45484


*For HIOS ID(s) below the 90/90 threshold, data was rejected on the EDGE server.
Yes No
Select the HIOS ID(s) for which the data was rejected.
Available HIOS ID(s)
Selected HIOS ID(s)
Filter
48484
12121 - Ninas Test
36363
Clear All
Back
Cancel & Exit
Save & Exit
Continue

3.2.1 Communication from CMS

Table 9: Communication from CMS

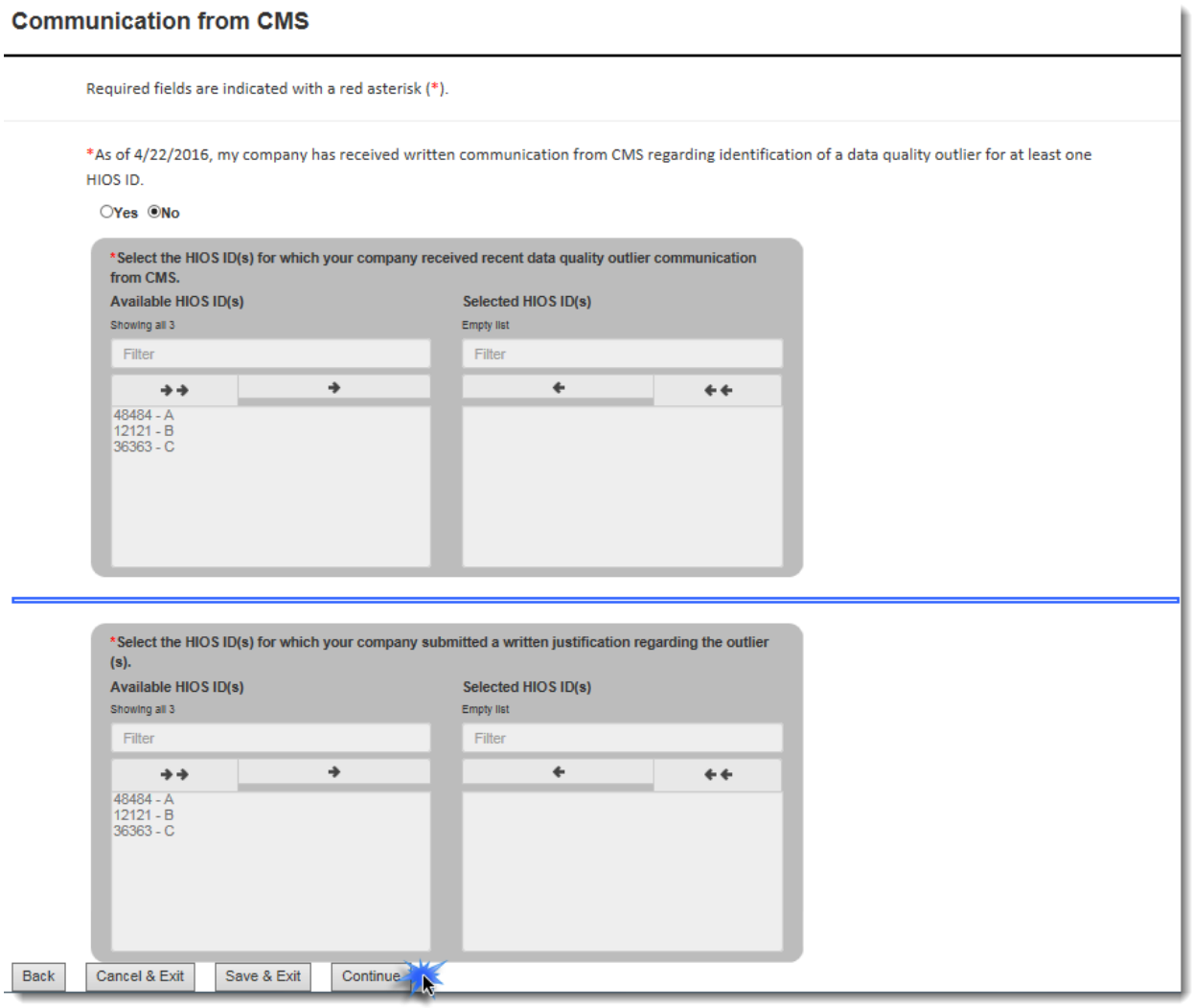
Step	Action
1	Select **Yes** or **No** to the statement, "As of <today's date>, my company has received written communication from CMS regarding identification of a data quality outlier for at least one HIOS ID."
2	Select the **Continue** button.

If	Then
Yes	A. Select the HIOS ID(s) for which your company received data quality outlier communication from CMS. B. Select the HIOS ID(s) for which your company submitted a written justification regarding the outliers (optional).
No	Continue to Step 2.



Data Quality Outlier – CMS has assessed issuers' data quality using 11 metrics which assess quality in risk adjustment data, reinsurance data, and EDGE claims and enrollment data. CMS conducted outlier analysis to identify outliers for each metric. Issuers identified with data quality outlier(s) received a written data quality notification from CMS and were provided the opportunity to mitigate data submission issues if notified prior to the May 2, 2016 data submission deadline. For more information, please reference the March 18, 2016 EDGE Server Data Bulletin.

Figure 10: Communication from CMS Page



3.2.2 Discrepancy-Specific Information

You are required to report one discrepancy at a time. You will select all HIOS ID(s) that have the specific discrepancy being reported. You will have the opportunity to report additional discrepancies within the web form prior to submitting your attestation. In summary, you can file multiple discrepancies applicable to multiple HIOS ID(s) within one web form, prior to completing a qualified attestation for the HIOS ID(s) within your company.

Table 10: Discrepancy-Specific Information

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>1</td><td>Enter a nickname for the discrepancy you are reporting in the Create a nickname for this discrepancy field. The discrepancy nickname will allow you to identify the specific discrepancy on the summary pages of the web form. There is a 100 character limit for this field.

Note: Use the nickname CMS Identified Overlapping Claims for a discrepancy related to the 05/02/2016 email communication which contained a query to identify all active overlapping inpatient claims.</td></tr>
<tr><td>2</td><td>Select the HIOS ID(s) for which you are reporting this specific discrepancy.</td></tr>
<tr><td>3</td><td>Select Yes or No from the picklist next to each risk adjustment and reinsurance (RA/RI) report name for the statement, “The information in the final risk adjustment and reinsurance (RA/RI) reports listed below accurately reflects the data submitted to the EDGE server(s) by 5:00 p.m. on May 2, 2016.”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>Continue to Step 4</td></tr>
<tr><td>No</td><td>Enter the Batch ID for each applicable RA/RI report.

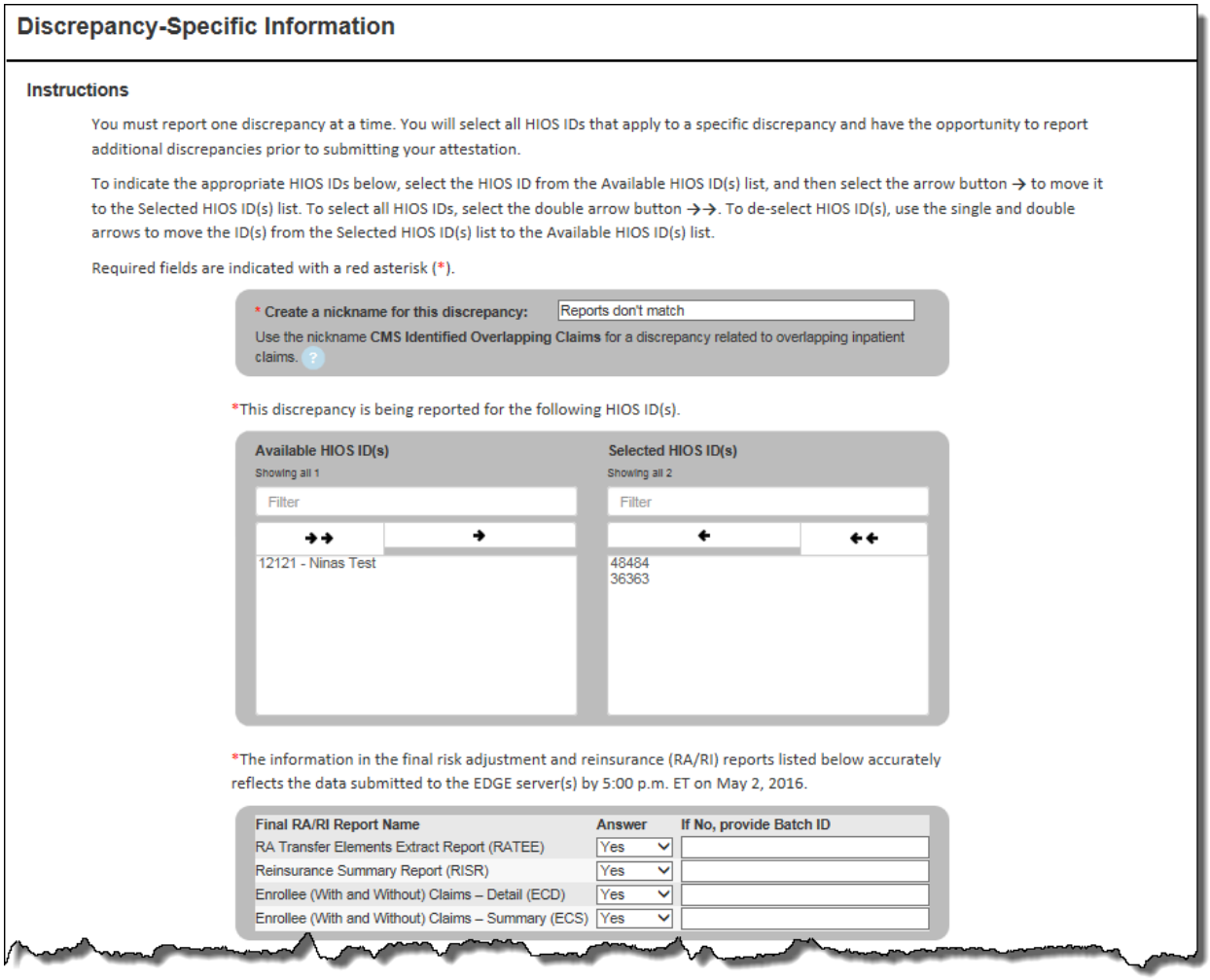
Note: The Batch ID consists of 14 alphanumeric characters in the following format:
[3 letter code]-[4-digit benefit year]-[5-digit batch number]</td></tr>
</table>
</td></tr>
<tr><td>4</td><td>Select Yes or No to the question, “Is this discrepancy related to any of your EDGE reports?”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>A. Select the applicable EDGE report(s) related to this discrepancy.

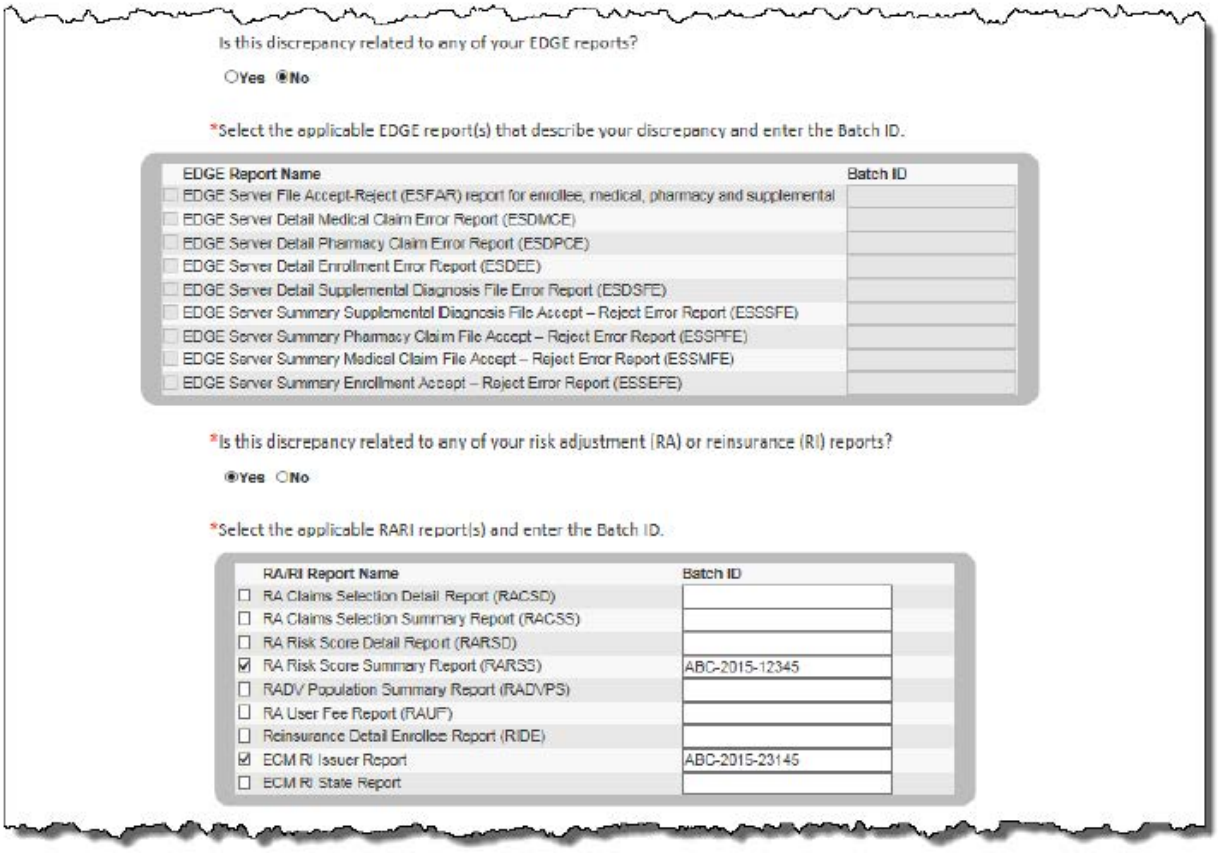
B. Enter the Batch ID for each applicable EDGE report.

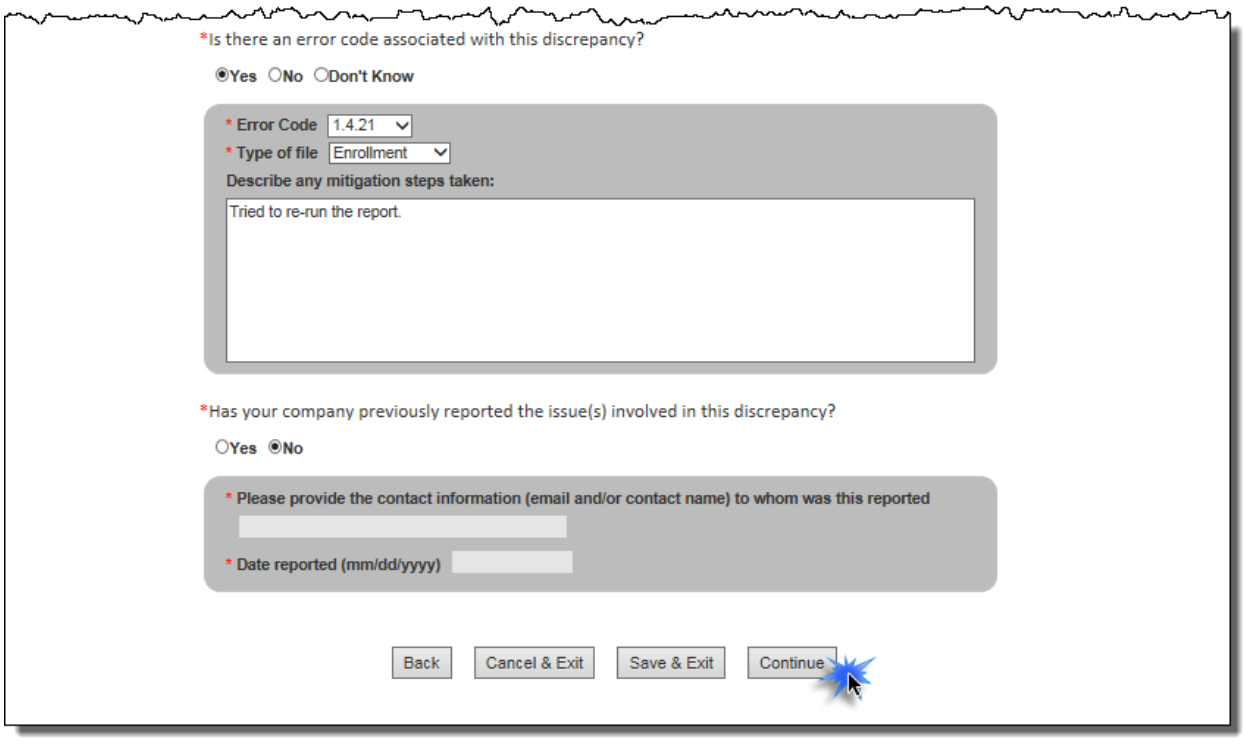
Note: The Batch ID consists of 14 alphanumeric characters in the following format:
[3 letter code]-[4-digit benefit year]-[5-digit batch number]</td></tr>
<tr><td>No</td><td>Continue to Step 5.</td></tr>
</table>
</td></tr>
</table>

<table>
<tr><th>Step</th><th>Action</th></tr>
<tr><td>5</td><td>Select Yes or No to the question, “Is this discrepancy related to any of your risk adjustment (RA) or reinsurance (RI) reports?”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>A. Select the applicable RA/RI report(s) related to this discrepancy.
B. Enter the Batch ID for each applicable RA/RI report.
Note: The Batch ID consists of 14 alphanumeric characters in the following format:
[3 letter code]-[4-digit benefit year]-[5-digit batch number]</td></tr>
<tr><td>No</td><td>Continue to Step 6.</td></tr>
</table></td></tr>
<tr><td>6</td><td>Select Yes, No, or Don’t Know to the question, “Is there an error code associated with this discrepancy?”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>A. Select the applicable error code from the Error Code pick list.
B. Select the type of file from the Type of File pick list.
C. Enter mitigation steps taken in the Describe any mitigation steps taken field.</td></tr>
<tr><td>No</td><td>Continue to Step 7.</td></tr>
<tr><td>Don’t Know</td><td>Continue to Step 7.</td></tr>
</table></td></tr>
<tr><td>7</td><td>Select Yes or No to the question, “Has your company previously reported the issue(s) involved in this discrepancy?”
<table>
<tr><th>If</th><th>Then</th></tr>
<tr><td>Yes</td><td>A. Enter the contact information (email and/or contact name) to whom the issue(s) were reported.
B. Enter the date reported in mm/dd/yyyy format in the Date reported field.</td></tr>
<tr><td>No</td><td>Continue to Step 8.</td></tr>
</table></td></tr>
<tr><td>8</td><td>Select the Continue button.</td></tr>
</table>

Figure 11: Discrepancy-Specific Information Page




Is this discrepancy related to any of your EDGE reports?
Yes No
*Select the applicable EDGE report(s) that describe your discrepancy and enter the Batch ID.
EDGE Report Name
Batch ID
EDGE Server File Accept-Reject (ESFAR) report for enrollee, medical, pharmacy and supplemental
EDGE Server Detail Medical Claim Error Report (ESDMCE)
EDGE Server Detail Pharmacy Claim Error Report (ESDPCE)
EDGE Server Detail Enrollment Error Report (ESDEE)
EDGE Server Detail Supplemental Diagnosis File Error Report (ESDSFE)
EDGE Server Summary Supplemental Diagnosis File Accept – Reject Error Report (ESSSFE)
EDGE Server Summary Pharmacy Claim File Accept – Reject Error Report (ESSPFE)
EDGE Server Summary Medical Claim File Accept – Reject Error Report (ESSMFE)
EDGE Server Summary Enrollment Accept – Reject Error Report (ESSEFE)
*Is this discrepancy related to any of your risk adjustment (RA) or reinsurance (RI) reports?
Yes No
*Select the applicable RARI report(s) and enter the Batch ID.
RA/RI Report Name
Batch ID
RA Claims Selection Detail Report (RACSD)
RA Claims Selection Summary Report (RACSS)
RA Risk Score Detail Report (RARSD)
RA Risk Score Summary Report (RARSS)
ABC-2015-12345
RADV Population Summary Report (RADVPS)
RA User Fee Report (RAUF)
Reinsurance Detail Enrollee Report (RIDE)
ECM RI Issuer Report
ABC-2015-23145
ECM RI State Report

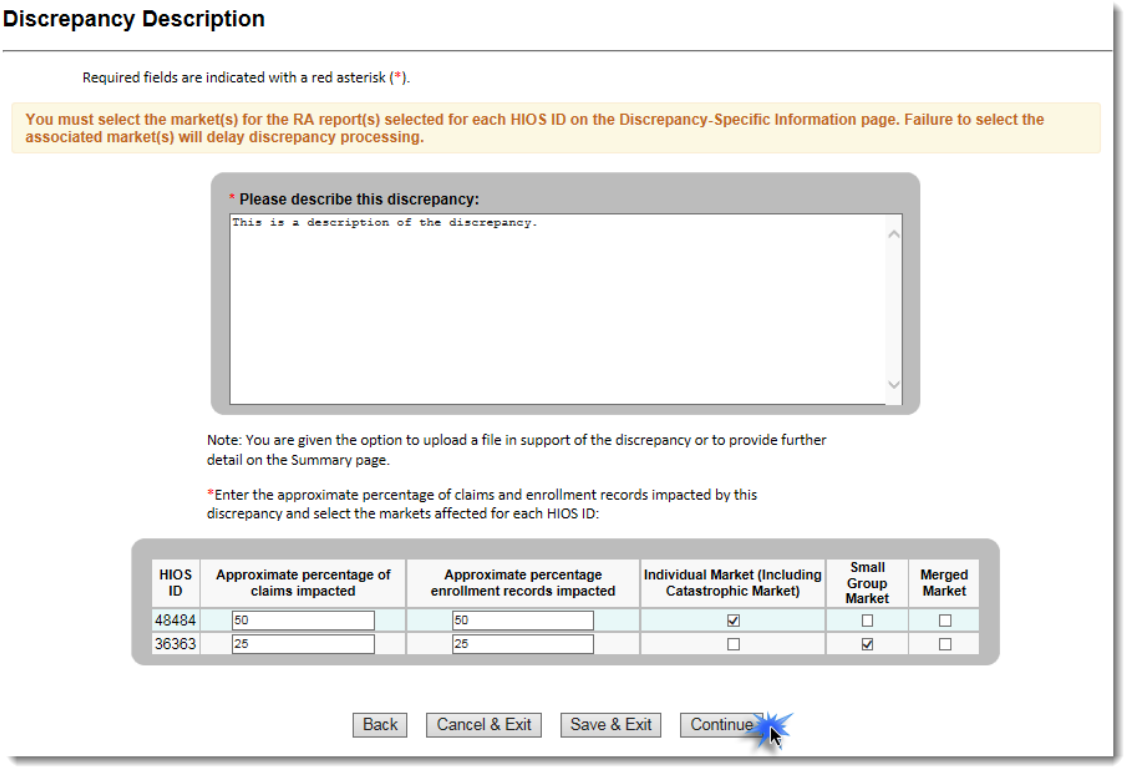

*Is there an error code associated with this discrepancy?
Yes No Don't Know
* Error Code 1.4.21
* Type of file Enrollment
Describe any mitigation steps taken:
Tried to re-run the report.
*Has your company previously reported the issue(s) involved in this discrepancy?
Yes No
* Please provide the contact information (email and/or contact name) to whom was this reported
* Date reported (mm/dd/yyyy)
Back
Cancel & Exit
Save & Exit
Continue

3.2.3 Discrepancy Description

Table 11: Discrepancy Description

Step	Action
1	Enter a brief description of the discrepancy in the field provided. You are given the option to upload a file in support of this discrepancy or multiple discrepancies to provide further detail from the Attachments Summary on the Summary and Verification page (see Section 3.2.5 – Upload Attachments). **Note:** If your discrepancy is related to the "Overlapping Claims Summary Count" query, you should enter, for each HIOS ID, the total enrollee count, total claim count and total paid amount returned by the query. You may also submit a screenshot of the query results as an attachment as outlined in section 3.2.5.
2	In the table provided, enter the approximate percentage (in whole numbers) of claims and enrollment records impacted by this discrepancy for each HIOS ID.
3	Select the market(s) affected by this discrepancy for each HIOS ID.
4	Select the **Continue** button.

Figure 12: Discrepancy Description Page



3.2.4 Summary and Verification

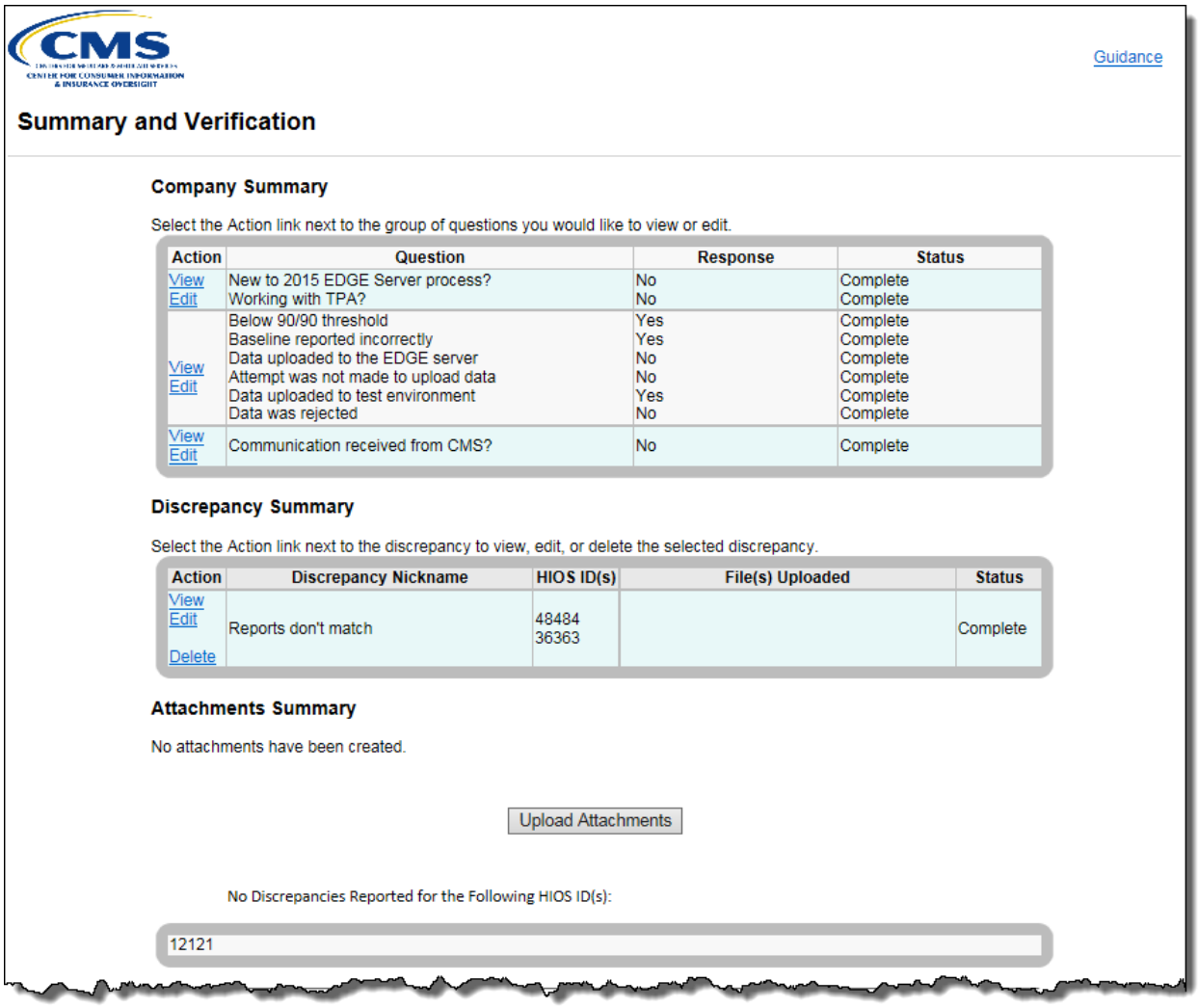
Table 12: Summary and Verification

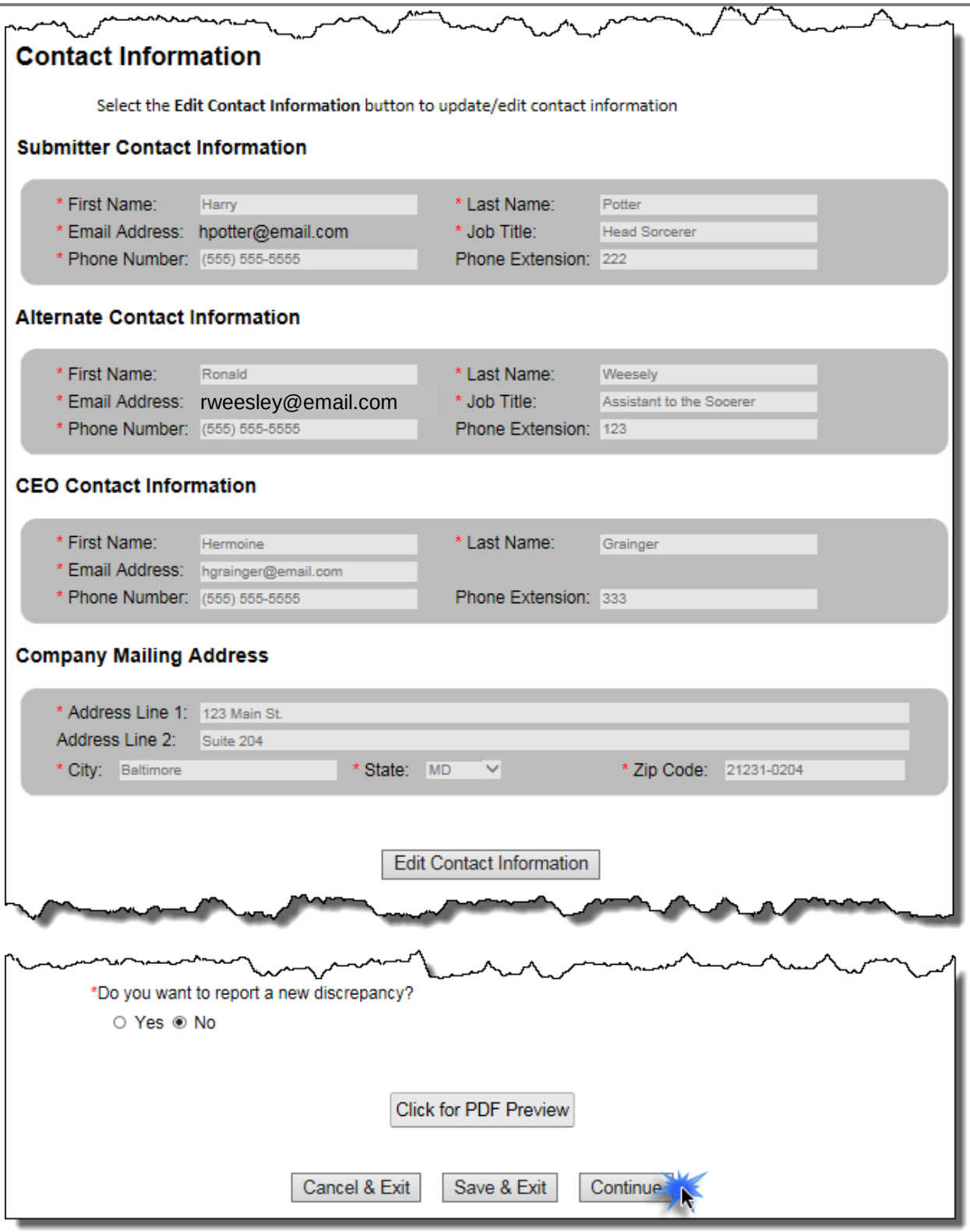
Step	Action
1	Review the **Company Summary** section to ensure the following: • Accurate responses have been entered • All statuses show **Complete**. Select the **Action** link (**View** or **Edit**) next to the group of questions you would like to view or edit.
2	Review the **Discrepancy Summary** section to ensure the following: • Discrepancy(s) listed linked to the appropriate HIOS ID(s) • When applicable, files have been uploaded • All statuses show **Complete** Select the **Action** link (**View**, **Edit**, or **Delete**) next to the discrepancy you would like to view, edit, or delete.
3	Review the **Attachments Summary** section to ensure the following: • Appropriate named file(s) have been uploaded • Uploaded file(s) listed linked to the appropriate discrepancy(s) Select the **Action** link (**View**, **Edit**, or **Delete**) next to the file name you would like to view, edit, or delete. To edit attachments, follow the instructions in Section 3.2.6. To upload a(n) attachment(s), follow the instructions in Section 3.2.5.
4	Review the **No Discrepancies Reported for the Following HIOS ID(s)** section.
5	Review the **Contact Information** section on the Summary and Verification page for accuracy. To edit Contact Information, select the **Edit Contact Information** button. *Note: You will not be able to edit the **Submitter Email Address** or the **Alternate Contact Email Address** fields.*
6	Select **Yes** or **No** to the question, “Do you have a new discrepancy to report?”

If	Then
Yes	Follow steps outlined in Section 3.2.2.
No	Continue to Step 7.

Step	Action
7	Select the **Continue** button.
8	Continue to Section 4.

Figure 13: Summary and Verification for Reported Discrepancies




Contact Information
Select the Edit Contact Information button to update/edit contact information
Submitter Contact Information
* First Name: Harry
* Last Name: Potter
* Email Address: hpotter@email.com
* Job Title: Head Sorcerer
* Phone Number: (555) 555-5555
Phone Extension: 222
Alternate Contact Information
* First Name: Ronald
* Last Name: Weesely
* Email Address: rweesley@email.com
* Job Title: Assistant to the Socerer
* Phone Number: (555) 555-5555
Phone Extension: 123
CEO Contact Information
* First Name: Hermoine
* Last Name: Grainger
* Email Address: hgrainger@email.com
* Phone Number: (555) 555-5555
Phone Extension: 333
Company Mailing Address
* Address Line 1: 123 Main St.
Address Line 2: Suite 204
* City: Baltimore
* State: MD
* Zip Code: 21231-0204
Edit Contact Information
*Do you want to report a new discrepancy?
Yes
No
Click for PDF Preview
Cancel & Exit
Save & Exit
Continue

3.2.5 Upload Attachments

You have the option to upload a file in support of reported discrepancies or to provide further information from the Attachments Summary section on the Summary and Verification page. You can select one or more discrepancies to link to your uploaded file(s). Please note that uploaded files must NOT contain any protected health information (PHI) or personally identifiable information (PII). Files containing PHI or PII will be deleted and not considered as part of the discrepancy filing. The maximum file size for uploaded files is 10 MB, and you may upload up to 10 files per discrepancy. If you need to submit additional information, please email raripaymentoperations@cms.hhs.gov to request assistance in uploading or sending additional materials.

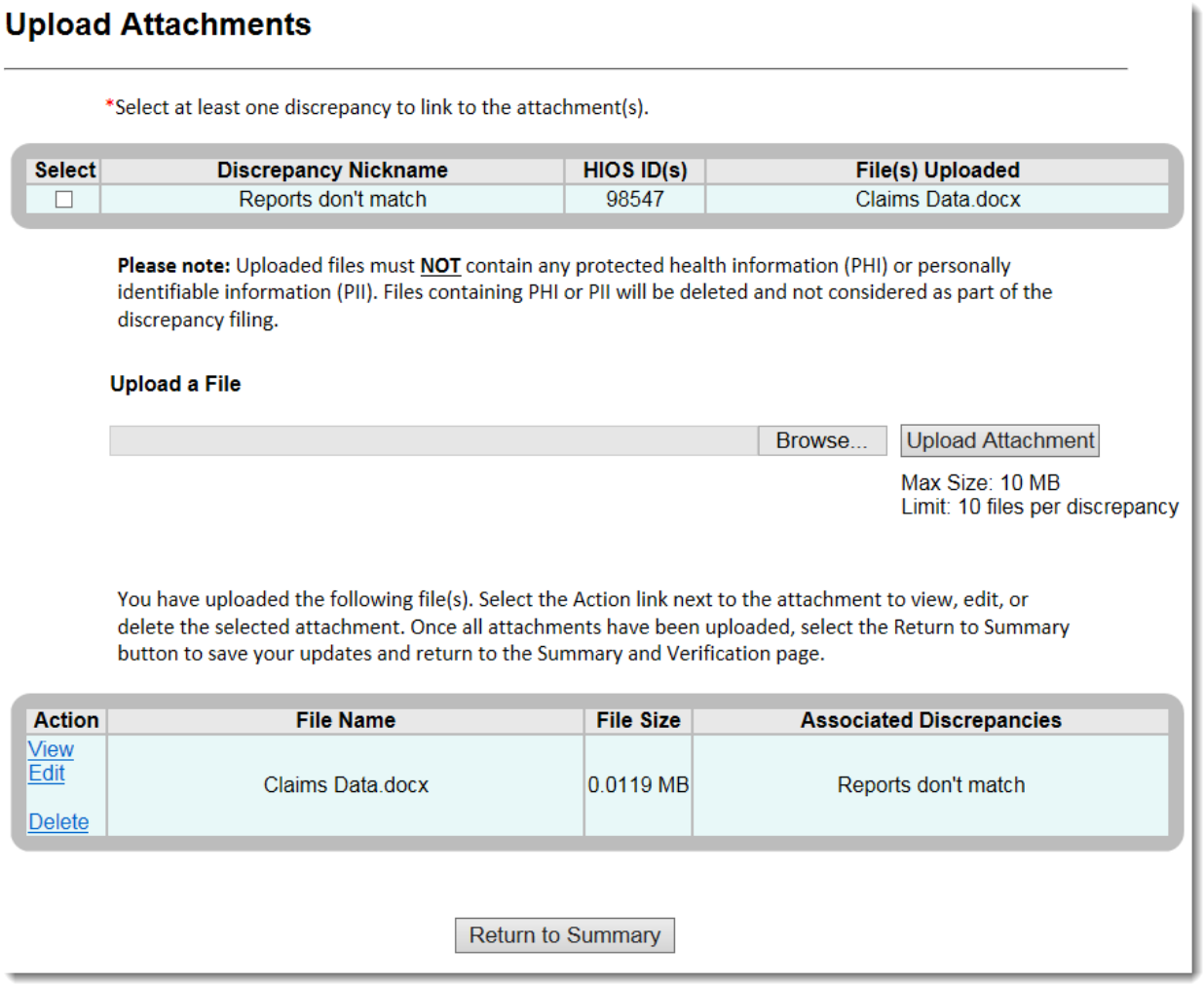

Uploaded files must **NOT** contain any protected health information (PHI) or personally identifiable information (PII). Files containing PHI or PII will be deleted and not considered as part of the discrepancy filing.


Maximum file size for uploaded files is 10 MB. You may upload up to 10 files per discrepancy.

Table 13: Upload Attachments

Step	Action
1	On the **Summary and Verification** page, select the **Upload Attachments** button.
2	On the **Upload Attachments** page, select at least one discrepancy for which you want to upload attachment(s).
3	Select the **Browse** button in the Upload a File section.
4	Select the file for upload (the file name will appear in the **Upload a File** field).
5	Select the **Upload Attachments** button. All uploaded files for this discrepancy will appear in a table at the bottom of the page. Select the **Action** link (**View**, **Edit**, or **Delete**) next to the file name you would like to view, edit, or delete.
6	Repeat Steps 2-5 for each discrepancy for which you want to upload attachment(s).
7	Select the **Return to Summary** button to save your updates and return to the **Summary and Verification** page.

Figure 14: Upload Attachments Page



Upload Attachments

*Select at least one discrepancy to link to the attachment(s).

Select	Discrepancy Nickname	HIOS ID(s)	File(s) Uploaded
☐	Reports don't match	98547	Claims Data.docx

Please note: Uploaded files must **NOT** contain any protected health information (PHI) or personally identifiable information (PII). Files containing PHI or PII will be deleted and not considered as part of the discrepancy filing.

Upload a File

Browse... Upload Attachment

Max Size: 10 MB
Limit: 10 files per discrepancy

You have uploaded the following file(s). Select the Action link next to the attachment to view, edit, or delete the selected attachment. Once all attachments have been uploaded, select the Return to Summary button to save your updates and return to the Summary and Verification page.

Action	File Name	File Size	Associated Discrepancies
View Edit Delete	Claims Data.docx	0.0119 MB	Reports don't match

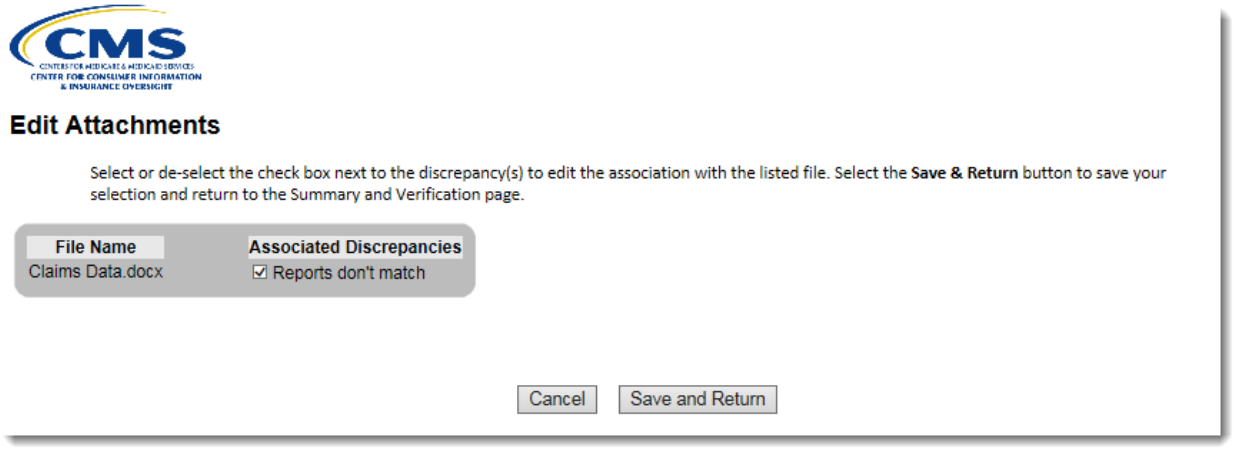
Return to Summary

3.2.6 Edit Attachments

Table 14: Edit Attachments

Step	Action
1	On the **Summary and Verification** or the **Upload Attachments** page, select the **Edit** link next to the attachment(s) you would like to edit.
2	On the **Edit Attachments** page, select or de-select the check box next to the discrepancy(s) to edit association with the listed attachment file.
3	Select the **Save & Return** button to save your selection and return to the **Summary and Verification** or the **Upload Attachments** page.
4	Repeat Steps 1-3 to edit additional attachments.

Figure 15: Edit Attachments Page



4 Submitting an Attestation

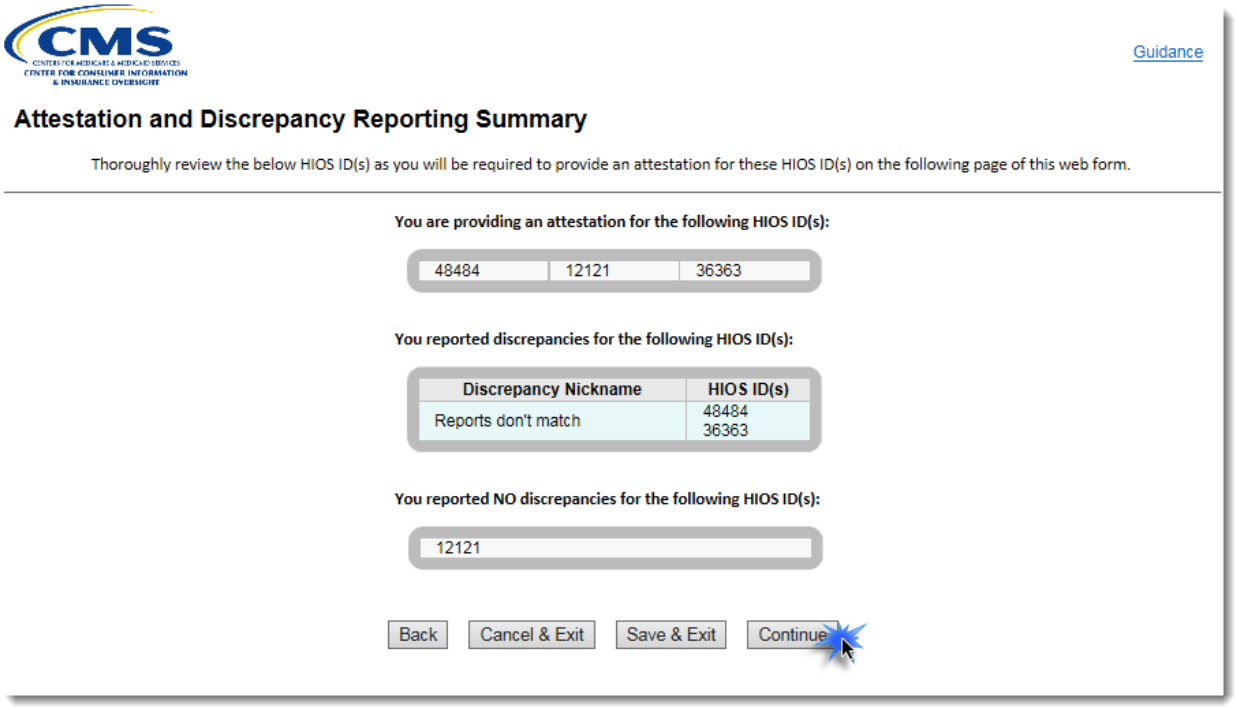
This section will cover review of the Attestation and Discrepancy Reporting Summary, completion of the Attestation page, and review and printing Confirmation of the web form submission.

4.1 Attestation and Discrepancy Reporting Summary

Table 15: Attestation and Discrepancy Reporting Summary

Step	Action
1	On the **Attestation and Discrepancy Reporting Summary** page, thoroughly review all the HIOS ID(s) shown on the page as you will be required to provide an attestation for these HIOS ID(s) on the Attestation page of the web form.
2	Select the **Continue** button.

Figure 16: Attestation and Discrepancy Reporting Summary Page



4.2 Attestation



The individual providing the attestation must be someone who can legally and financially obligate the company. This person is not required to be the Submitter, Alternate Contact nor CEO.

Table 16: Attestation

Step	Action
1	Thoroughly review the **Attestation** statement in its entirety.
2	Select the check box next to each section of the Attestation statement to indicate agreement.
3	In the **Overlapping Claims** section, select the radio button next to the statement that matches your company's situation regarding overlapping claims.

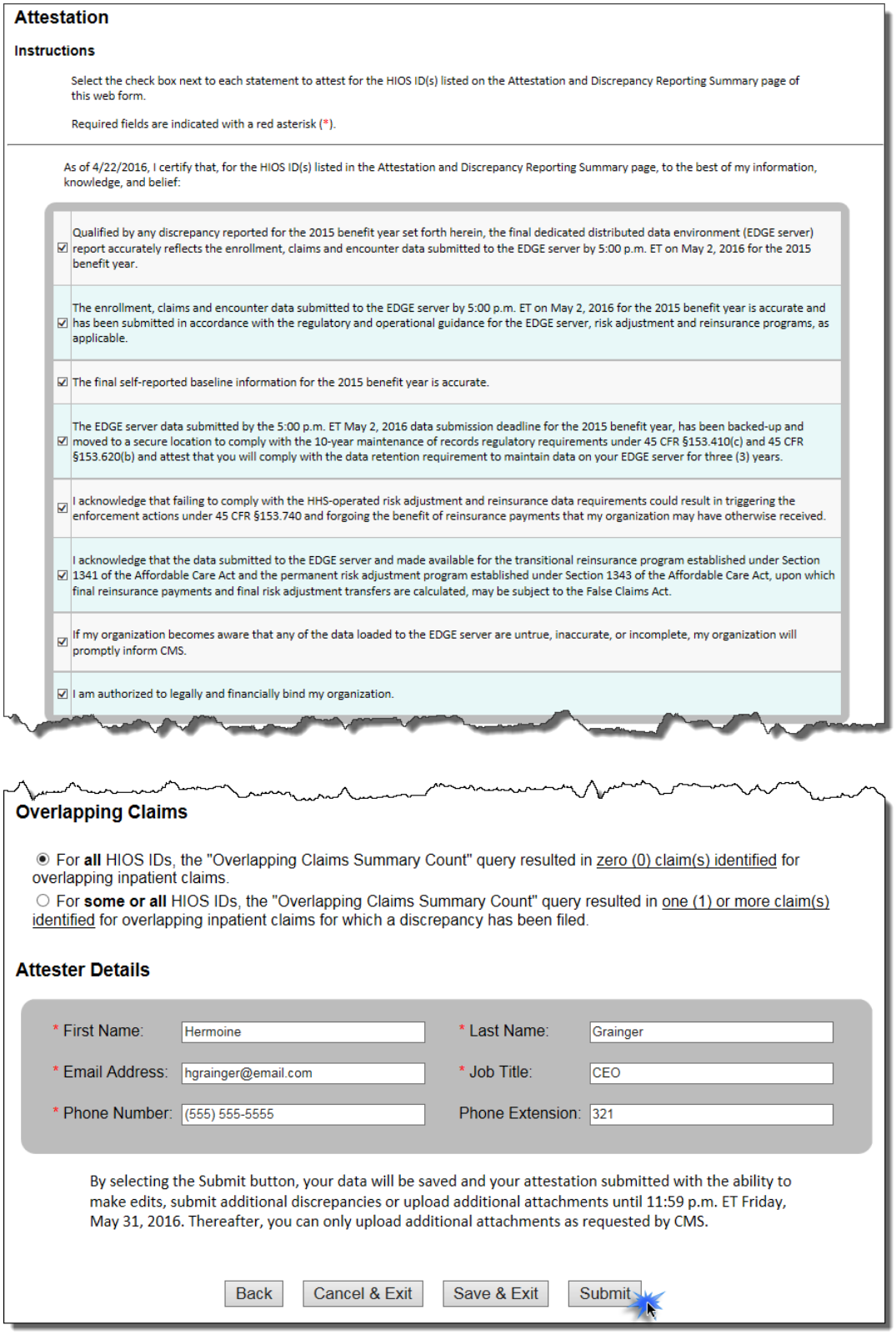
If you selected the statement…	AND	Then
"For **all** HIOS IDs, the 'Overlapping Claims Summary Count' query resulted in zero (0) claim(s) identified for overlapping inpatient claims."	N/A	Continue to Section 4.4
"For some or all HIOS IDs, the 'Overlapping Claims Summary Count' query resulted in one (1) or more claim(s) identified for overlapping inpatient claims for which a discrepancy has been filed."	You have **not** reported any discrepancies,	Continue to Section 4.3
"For some or all HIOS IDs, the 'Overlapping Claims Summary Count' query resulted in one (1) or more claim(s) identified for overlapping inpatient claims for which a discrepancy has been filed."	You **have** reported discrepancies,	Continue to Section 4.4

Step	Action
4	Complete the **Attester Details** section with the following information: • First Name • Last Name • Email Address • Job Title • Phone Number • Phone Extension (optional) **Reminder:** The individual providing the attestation must be someone who can legally and financially obligate the company. This person is not required to be the Submitter, Alternate Contact, nor CEO.
5	Select the **Submit** button.



By selecting the Submit button on the Attestation page, your data will be saved and your attestation and discrepancies will be submitted and deemed complete by CMS. CMS may request that you provide additional information, however, **you will not be able to edit your attestation and discrepancy report after 11:59 p.m. ET Tuesday, May 31, 2016**.

Figure 17: Attestation Page



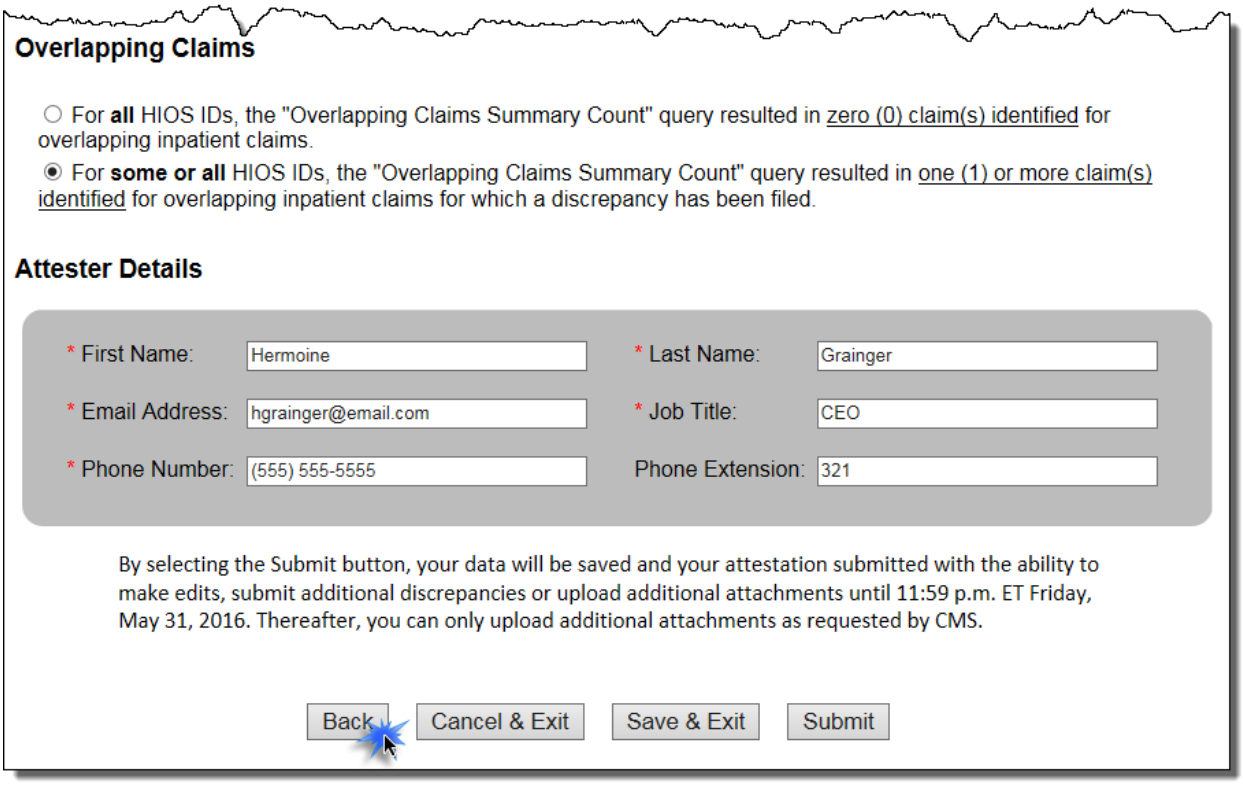
4.3 Overlapping Claims

If you selected, “For some or all HIOS IDs, the ‘Overlapping Claims Summary Count’ query resulted in one (1) or more claim(s) identified for overlapping inpatient claims for which a discrepancy has been filed” on the Attestation page, but you did not report a discrepancy, you can report the discrepancy by following the steps below.

Table 17: Overlapping Claims

Step	Action
1	Select the **Back** button at the bottom of the Attestation page.
2	Once on the Attestation and Discrepancy Reporting Summary page, select the **Back** button.
3	Once on the Summary and Verification page, select the **Yes** radio button under the question, “Do you want to report a new discrepancy?”
4	Follow the steps outlined in Section 3.2 beginning with Step 6 for reporting a discrepancy.

Figure 18: Back Button on the Attestation Page



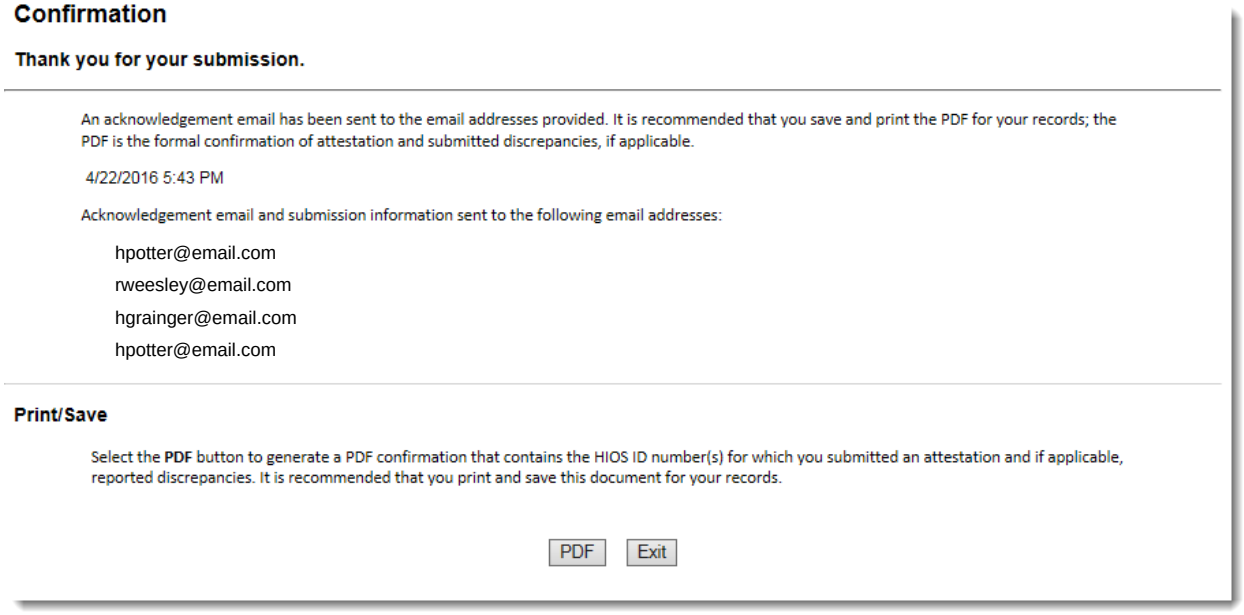
4.4 Confirmation

An acknowledgement email will be sent from raripaymentoperations@cms.hhs.gov to the email addresses provided in the **Contact Information** and **Attester Details** sections of the web form. It is recommended that you save and print a PDF of your confirmation for your records. The PDF is the formal confirmation of attestation and submitted discrepancies, if applicable.

Table 18: Confirmation

Step	Action
1	Select the **PDF** button to print/save the confirmation for your records.
2	Once your confirmation has been printed and/or saved, select the **Exit** button to exit the web form.

Figure 19: Confirmation Page



5 Uploading Documentation after the Deadline

Upon review of a reported discrepancy, CMS may request that additional documentation be uploaded to the web form in support of the discrepancy. You should only upload additional documentation at the request of CMS. To upload the requested documentation, follow the steps below.

Table 19: Table Title Here

Step	Action
1	Access the web form using the original link.
2	Enter the CEO Designate email address in the **Login ID** field.
3	Select the **Login** button.
4	Enter the access code created during a prior session in the **Access Code** field. **Note:** If you have forgotten your access code, please see **Section 2.1.2 Forgot Access Code** to reset your access code.
5	On the Contact Information page, complete all required fields in the **Submitter Contact Information** section.
6	Select the **Continue** button.
7	On the Summary and Verification page, locate the **Attachments Summary** section. **Note:** Previously uploaded attachments will not be available to edit or delete after the May 31, 2016 deadline.
8	Select the **Upload Attachment** button.
9	On the Upload Attachments page, select one or more discrepancy to link to the attachment(s) you will be uploading.
10	Select the **Browse** button.
11	Select the file for upload (the file name will appear in the **Upload a File** field.
12	Select the **Upload Attachments** button. All uploaded files for this discrepancy will appear in a table at the bottom of the page. Select the **Action** link (**View**, **Edit**, or **Delete**) next to the file name you would like to view, edit, or delete.
13	Repeat Steps 9-12 for each discrepancy for which you want to upload additional attachment(s).
14	Select the **Return to Summary** button to save your updates and return to the **Summary and Verification** page.

Step	Action
15	Select the **Continue** button.
16	Select the **PDF** button to print/save the confirmation for your records.
17	Once your confirmation has been printed and/or saved, select the **Exit** button to exit the web form.

Figure 20: Upload Attachments

