DISTRIBUTED DATA COLLECTION FOR REINSURANCE (RI) AND RISK ADJUSTMENT (RA): BASELINE DATA CALCULATIONS, MONITORING EDGE DATA SUBMISSIONS AND AN INTRODUCTION TO ECD/ECS REPORTS

November 12, 2015

Health Insurance Marketplace Program Training Series

CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

HTTPS://WWW.REGTAP.INFO/

Agenda

- Purpose
- Session Guidelines
- Intended Audience
- Baseline Calculations and EDGE Data Submission
- Enrollee (Without) Claims Detail (ECD) and Enrollees (Without) Claims Summary (ECS) Reports Overview
- ECD Report Specifications
- ECS Report Specifications
- Using the ECS and ECD Reports
- Upcoming Webinars
- Questions
- Resources
- Closing Remarks

Purpose

This External Data Gathering Environment (EDGE) server session will:

- Provide issuers and Third Party Administrators (TPAs) guidance on how CMS uses baseline data, and guidance on EDGE server orphan (ECD/ECS) reports.

NOTE: Outbound reports related to RA and RI are not included in this session.

Session Guidelines

- This is a 90-minute webinar session.
- For questions regarding content and the DDC program, please contact your Financial Management (FM) Service Representative directly and copy the Centers for Medicare & Medicaid Services (CMS) Help Desk at (CMS_FEPS@cms.hhs.gov).
- For questions regarding logistics and registration, please contact the Registrar at (800) 257-9520.

Intended Audience

- Issuers (Marketplace and Non-Marketplace) new to 2015 data submission
- Issuers interested in a refresher course in basic EDGE server orphan claim reports
- Third Party Administrators (TPAs) and Support Vendors

Baseline Calculations and EDGE Data Submission

Baseline Estimate Overview

- CMS collects baseline estimates from issuers on the total number of claims and enrollment records stored on the EDGE servers.
- Baseline data is used to assess the completion status of issuers' EDGE server data.
  - CMS calculates percent completion rate by comparing issuers' stored EDGE data to their baseline counts.
- CMS conducted training on how issuers should submit baseline data.
  - The training is titled 2015 EDGE Server Status and Baseline Reporting (10/20/15) and is currently available in the Registration for Technical Assistance Portal (REGTAP) Library.

Baseline and Data Submission Deadlines

Baseline Collection Deadline	EDGE Data Submission Deadline	Quarters Needed for Claims Baseline*	EDGE Data Submission Threshold (% of Baseline)	Notes
October 28 – November 4, 2015	November 16, 2015	Q1-Q2	• 90% enrollment • 25% claims	• No orphan deduction in % data completion
December 1 – December 9, 2015	January 8, 2016	Q1-Q3	• 90% enrollment • 90% claims	• Begin collection of baseline premiums • CMS begins subtracting orphans when calculating % completion
February 10 – February 17, 2016	March 4, 2016	Q1-Q4	• 90% enrollment • 90% claims	NULL
N/A	April 30, 2016	N/A	Last day to submit claims & enrollment records for 2015	In general, issuers will **NOT** be allowed to resubmit orphaned or rejected claims

* Applies to claims only; enrollment baseline is for the full year of 2015 only.

Baseline Estimates – First Deadline

- Issuers should have submitted expected counts of unique 2015 enrollees, total medical, and total pharmacy records for the first and second quarters of 2015 by Wednesday, November 4, 2015.
  - Note: issuers are still expected to submit 2014 enrollment to the EDGE server.
- CMS will **NOT** deduct orphan claim counts from issuers' percent completion **for the first data submission deadline only (November 16, 2015).**

Baseline Estimates – Subsequent Deadlines

- New for 2015 Benefit Year data collection:
  - CMS will ask for a total of issuers' 2015 Premium Amounts.
    - Will not begin until the second baseline data collection in December 2015.
    - Baseline premium data will be used to assess the sufficiency and quality of premium data submitted to the EDGE server for purposes of RA.
- CMS **WILL** deduct orphan claim counts from issuers' percent completion, beginning with the January 2016 data submission deadline.

Percent Data Submission Completion Calculation

For the November 16, 2015 data submission deadline, percent data completion will be calculated as follows, using data from the ECS report (*EnrolleeClaimsWithWithoutSummaryPlanCategory.xsd*):

- **Enrollment % completion**

$$\frac{[ECS]totalNumberOfActiveEnrollmentRecords\ as\ of\ 11/16}{Number\ of\ enrollees\ reported\ in\ baseline\ estimate} \times 100$$

- **Claims % completion**

$$\frac{\left([ECS]totalNumberOfStoredActiveClaims\ as\ of\ 11/16 + [ECS]totalNumberOfClaimsNoLinkedEnrolleeID\ as\ of\ 11/16\right)}{Total\ number\ of\ medical\ and\ pharmacy\ claims\ reported\ in\ baseline\ estimate} \times 100$$

Percent Data Submission Completion Calculation (continued)

Percent data completion for subsequent data submission deadlines will be calculated as follows, also using data from the ECS Report (*EnrolleeClaimsWithWithoutSummaryPlanCategory.xsd*):

- **Enrollment % completion**

$$\frac{[ECS]\ totalNumberOfActiveEnrollmentRecords\ as\ of\ deadline}{Number\ of\ enrollees\ reported\ in\ baseline\ estimate} \times 100$$

- **Claims % completion**

$$\frac{[ECS]\ totalNumberOfStoredActiveClaims\ as\ of\ deadline}{Total\ number\ of\ medical\ and\ pharmacy\ claims\ reported\ in\ baseline\ estimate} \times 100$$

Percent Data Submission Completion Calculation (continued)

- Example baseline and percent completion calculation

				COUNTS ON EDGE (SOURCE: ECS)						
Submission deadline	HIOS ID	Market type	File type	Total count	Count of linked claims	Count of orphans	Baseline	Percent completion	Threshold	Met threshold?
Nov. 16, 2015	12345	Small Group plans	Total claims	2,778	*N/A*	*N/A*	12,345	22.5%	25.0% Q1-Q2	NO
	12345	Small Group plans	Enrollment	7,109	*N/A*	*N/A*	7,890	90.1%	90.0% Q1-Q4	YES
Jan. 8, 2016	12345	Individual plans	Total claims	*N/A*	89,123	1,234	98,732	90.3%	90.0% Q1-Q3	YES
	12345	Individual plans	Enrollment	*26,049*	*N/A*	*N/A*	23,456	111.1%	90.0% Q1-Q4	YES*

** Exceeds baseline by more than 10 percent.*

Meeting EDGE Data Submission Thresholds

- CMS will review all baseline data submissions and contact issuers with missing or inaccurate baseline data.
- CMS will also conduct outreach to issuers with EDGE server data submission when accepted record counts exceed baseline counts by 10 percent or more.

Enrollee (Without) Claims Detail (ECD) Report and Enrollee (Without) Claims Summary (ECS) Reports: Overview

EDGE Server Outbound Reports: Background

- EDGE servers produce several types of outbound reports:
  - **File Processing Reports**: File Accept-Reject Report, Summary Accept-Reject Reports, Detail Error Reports - *covered in the EDGE Server File Processing - Outbound Reports (11/5/15) webinar**
  - **Orphan Reports**
    - Enrollee (Without) Claims Detail (ECD) Report (orphan detail report)
    - Enrollee (Without) Claims Summary (ECS) Report (orphan summary report)
  - **RI and RA Reports** – *covered in separate webinar**
    - Reinsurance Detailed Enrollee Report (RIDE)
    - Reinsurance Summary Report (RISR)
  - **Frequency Reports** – *covered in separate webinar**
    - Frequency by Data Element for *Enrollment* Accepted Files (FDEEAF)
    - Frequency by Data Element for *Pharmacy* Accepted Files (FDEPAF)
    - Frequency by Data Element for *Medical* Accepted Files (FDEMAF)
    - Frequency by Data Element for *Supplemental* Accepted Files (FDESAF)
    - Claim and Enrollee Frequency Report (CEFR)

*** Note: if a file or record shows up as rejected in Accept/Reject file processing reports, it should NOT show up in any of the other types of reports.**

ECD and ECS Overview

- What are the ECD and ECS Reports?
  - These reports contain information about active claims that are not associated with any active enrollees, and vice versa – referred to as orphans.
  - The reports use only *active* enrollment and claims data stored on the EDGE server.
- What should the ECD and ECS Reports be used for?
  - To be considered for RA and RI, an active, eligible enrollee must have active, eligible claims.
  - **Orphans do not contribute to RA or RI calculations.**
    - Orphaned claims and enrollees are a frequent cause of discrepancies in RA and RI payments and charges.
  - Issuers should use these reports to check for orphaned claims or enrollment.

ECD and ECS Overview (continued)

- What information is included in the ECD and ECS Reports?
  - Both the ECD and ECS Reports include plan-level total record counts, such as total number of stored active enrollment periods and total number of active claims.
  - The ECD Report also includes the following details not found in the ECS:
    - Specific Enrollee IDs without associated claims
    - Specific claims without associated enrollees
  - See the ***ICD Risk Adjustment and Reinsurance Addendum,*** published in the REGTAP Library, for additional information on data elements, descriptions, and report structure.
- Who receives the reports?
  - Issuers receive both the detail (ECD) and summary (ECS) report.
  - CMS will only receive the summary (ECS) report.

ECD and ECS Overview (continued)

- How are reports generated?
  - The ECD/ECS are generated in the production zone only.
  - They can be initiated by CMS or an issuer.
  - CMS will first run ECD/ECS reports for all issuers on **November 16, 2015**. Once initiated, the reports will automatically trigger when an issuer runs any ‘edge’ command.
  - Issuers will also have the ability to manually initiate these reports locally at any time by executing the following command:

    edge report orphanclaimenrollee <year>

    - Example for 2015:

      edge report orphanclaimenrollee 2015

Selection of Enrollees Without Claims

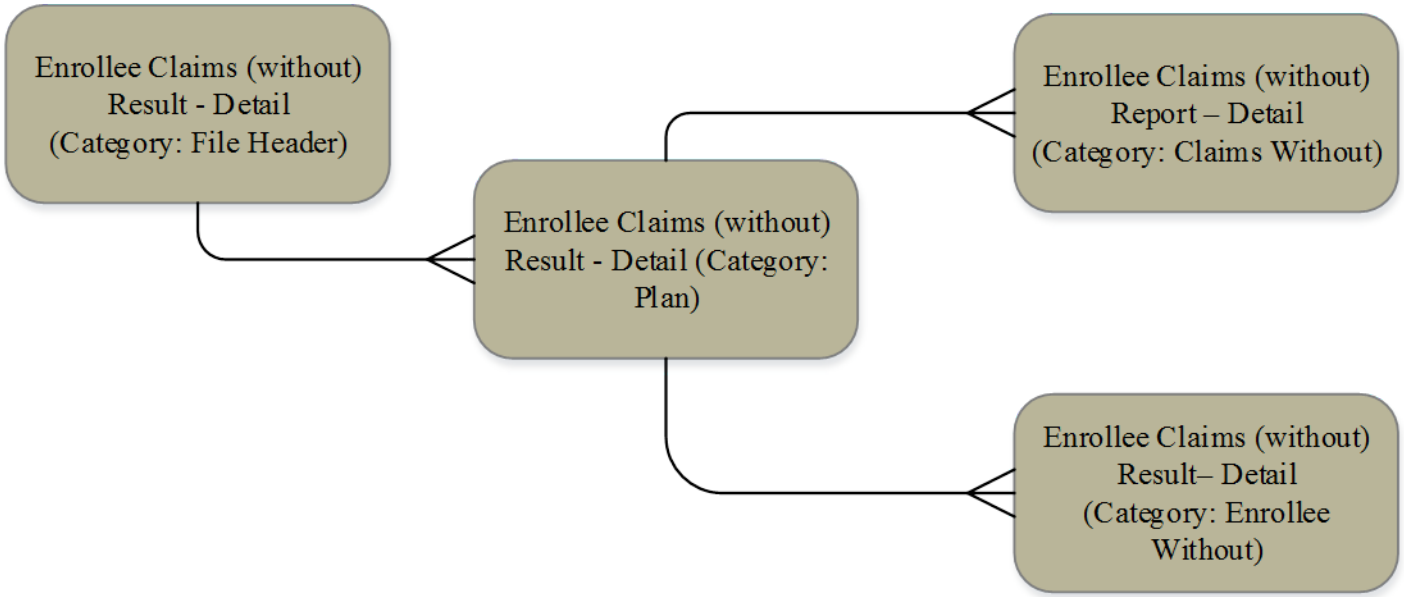
- Enrollees and claims are selected using this criteria:
  - Active enrollment periods are selected and must include at least one (1) calendar day in the 2015 Benefit Year.
  - Active claim records are selected and must include a Statement Covers Through date in 2015.
- Enrollees and claims are associated using the Unique Enrollee ID and Plan ID.
- Enrollees without claims appear on the report when either:
  - There are no claims identified for the enrollee or;
  - There is an active claim for the enrollee, but the **Statement Covers From** date is outside the enrollment period or;
  - The enrollee's Plan ID does not match stored claims on the EDGE server.

Selection of Claims Without Enrollees

- Enrollees and claims are selected using this criteria:
  - Active claims are selected and must include a Statement Covers Through date in the 2015 Benefit Year.
  - Active enrollment periods are selected and must include at least one (1) calendar day in the 2015 Benefit Year.
- The Unique Enrollee ID and Plan ID are used to find active enrollees and enrollment period records.
- Claims without enrollees appear on the report when either:
  - There are no enrollment periods identified for the claim or;
  - There is an active enrollment period but the Statement Covers From date is outside the enrollment period or;
  - The Plan ID for the claims do not match a Plan ID for an active enrollee on the EDGE server.

Enrollee (Without) Claims Detail (ECD) Report Specifications

ECD: Report Layout



- See the ICD Risk Adjustment and Reinsurance Addendum, published in the REGTAP Library, for additional information on data elements, descriptions and report structure.

ECD: File Header Level

- Each ECD Report has a file header component.
  - The file header is composed of common header elements and a calendar year.
    - snapShotFileName and snapShotFileHash are not populated for this report.
  - Note - the outboundFileTypeCode is ECD.

```
<?xml version="1.0"?>
- <enrolleeClaimsWithWithoutDetailReport xmlns="http://vo.edge.fm.cms.hhs.gov">
  - <includedFileHeader>
      <outboundFileIdentifier>94e5bf32-fc22-4480-84df-b8591d88a6b9</outboundFileIdentifier>
      <cmsBatchIdentifier>CMS001</cmsBatchIdentifier>
      <cmsJobIdentifier>CMSJOB001</cmsJobIdentifier>
      <snapShotFileName/>
      <snapShotFileHash/>
      <outboundFileGenerationDateTime>2014-12-18T11:49:45</outboundFileGenerationDateTime>
      <interfaceControlReleaseNumber>01.00.00</interfaceControlReleaseNumber>
      <edgeServerVersion>EDGEServer_4.00.00_b0106</edgeServerVersion>
      <edgeServerProcessIdentifier>5</edgeServerProcessIdentifier>
      <outboundFileTypeCode>ECD</outboundFileTypeCode>
      <edgeServerIdentifier>651</edgeServerIdentifier>
      <issuerIdentifier>16430</issuerIdentifier>
    </includedFileHeader>
    <issuerYear>2014</issuerYear>
```

ECD: Plan Level

- Following the file header is the plan level data:
  - Plan ID
  - Total number of active enrollment records
  - Total number of stored active claims
  - Total number of enrollees with linked claims
  - Total number of enrollee linked claims flagged for RA claim selection
  - Total number of enrollees with no linked claims
  - Total number of claims with no linked Enrollee ID

```
- <includedPlanIdentifier>
    <planIdentifier>16430UT001000202</planIdentifier>
    <totalNumberOfActiveEnrollmentRecords>2</totalNumberOfActiveEnrollmentRecords>
    <totalNumberOfStoredActiveClaims>2</totalNumberOfStoredActiveClaims>
    <totalNumberEnrolleesWithLinkedClaims>1</totalNumberEnrolleesWithLinkedClaims>
    <totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>1</totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>
    <totalNumberOfEnrolleesNoLinkedClaims>1</totalNumberOfEnrolleesNoLinkedClaims>
    <totalNumberOfClaimsNoLinkedEnrolleeID>1</totalNumberOfClaimsNoLinkedEnrolleeID>
```

ECD: Enrollee and Claim Detail Level

- Following the plan level is information about the individual orphaned enrollees and claims.
  - Active Enrollee IDs without claims
  - Active Claim IDs without enrollee records

```
- <includedEnrolleeWithout>
    <activeEnrolleeIDswithoutClaims>JESSIE09</activeEnrolleeIDswithoutClaims>
  </includedEnrolleeWithout>
- <includedClaimWithout>
    <activeClaimsIDsWithoutEnrolleeRecords>PCLAIM08</activeClaimsIDsWithoutEnrolleeRecords>
  </includedClaimWithout>
</includedPlanIdentifier>
```

ECD: Multiple Plans

```
<?xml version="1.0"?>
- <enrolleeClaimsWithWithoutDetailReport xmlns="http://vo.edge.fm.cms.hhs.gov">
  - <includedFileHeader>
      <outboundFileIdentifier>94e5bf32-fc22-4480-84df-b8591d88a6b9</outboundFileIdentifier>
      <cmsBatchIdentifier>CMS001</cmsBatchIdentifier>
      <cmsJobIdentifier>CMSJOB001</cmsJobIdentifier>
      <snapShotFileName/>
      <snapShotFileHash/>
      <outboundFileGenerationDateTime>2014-12-18T11:49:45</outboundFileGenerationDateTime>
      <interfaceControlReleaseNumber>01.00.00</interfaceControlReleaseNumber>
      <edgeServerVersion>EDGEServer_4.00.00_b0106</edgeServerVersion>
      <edgeServerProcessIdentifier>5</edgeServerProcessIdentifier>
      <outboundFileTypeCode>ECD</outboundFileTypeCode>
      <edgeServerIdentifier>651</edgeServerIdentifier>
      <issuerIdentifier>16430</issuerIdentifier>
    </includedFileHeader>
    <issuerYear>2014</issuerYear>
  - <includedPlanIdentifier>
      <planIdentifier>16430UT001000202</planIdentifier>
      <totalNumberOfActiveEnrollmentRecords>2</totalNumberOfActiveEnrollmentRecords>
      <totalNumberOfStoredActiveClaims>2</totalNumberOfStoredActiveClaims>
      <totalNumberEnrolleesWithLinkedClaims>1</totalNumberEnrolleesWithLinkedClaims>
      <totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>1</totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>
      <totalNumberOfEnrolleesNoLinkedClaims>1</totalNumberOfEnrolleesNoLinkedClaims>
      <totalNumberOfClaimsNoLinkedEnrolleeID>1</totalNumberOfClaimsNoLinkedEnrolleeID>
    - <includedEnrolleeWithout>
        <activeEnrolleeIDswithoutClaims>JESSIE09</activeEnrolleeIDswithoutClaims>
      </includedEnrolleeWithout>
    - <includedClaimWithout>
        <activeClaimsIDsWithoutEnrolleeRecords>PCLAIM08</activeClaimsIDsWithoutEnrolleeRecords>
      </includedClaimWithout>
    </includedPlanIdentifier>
  - <includedPlanIdentifier>
      <planIdentifier>16430UT014000801</planIdentifier>
      <totalNumberOfActiveEnrollmentRecords>6</totalNumberOfActiveEnrollmentRecords>
      <totalNumberOfStoredActiveClaims>3</totalNumberOfStoredActiveClaims>
      <totalNumberEnrolleesWithLinkedClaims>3</totalNumberEnrolleesWithLinkedClaims>
      <totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>2</totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>
      <totalNumberOfEnrolleesNoLinkedClaims>3</totalNumberOfEnrolleesNoLinkedClaims>
      <totalNumberOfClaimsNoLinkedEnrolleeID>2</totalNumberOfClaimsNoLinkedEnrolleeID>
    - <includedEnrolleeWithout>
        <activeEnrolleeIDswithoutClaims>FAMILY01-AC</activeEnrolleeIDswithoutClaims>
        <activeEnrolleeIDswithoutClaims>JESSIE07</activeEnrolleeIDswithoutClaims>
        <activeEnrolleeIDswithoutClaims>JESSIE08</activeEnrolleeIDswithoutClaims>
      </includedEnrolleeWithout>
    - <includedClaimWithout>
        <activeClaimsIDsWithoutEnrolleeRecords>MCLAIM03</activeClaimsIDsWithoutEnrolleeRecords>
        <activeClaimsIDsWithoutEnrolleeRecords>MCLAIM08</activeClaimsIDsWithoutEnrolleeRecords>
      </includedClaimWithout>
    </includedPlanIdentifier>
</enrolleeClaimsWithWithoutDetailReport>
```

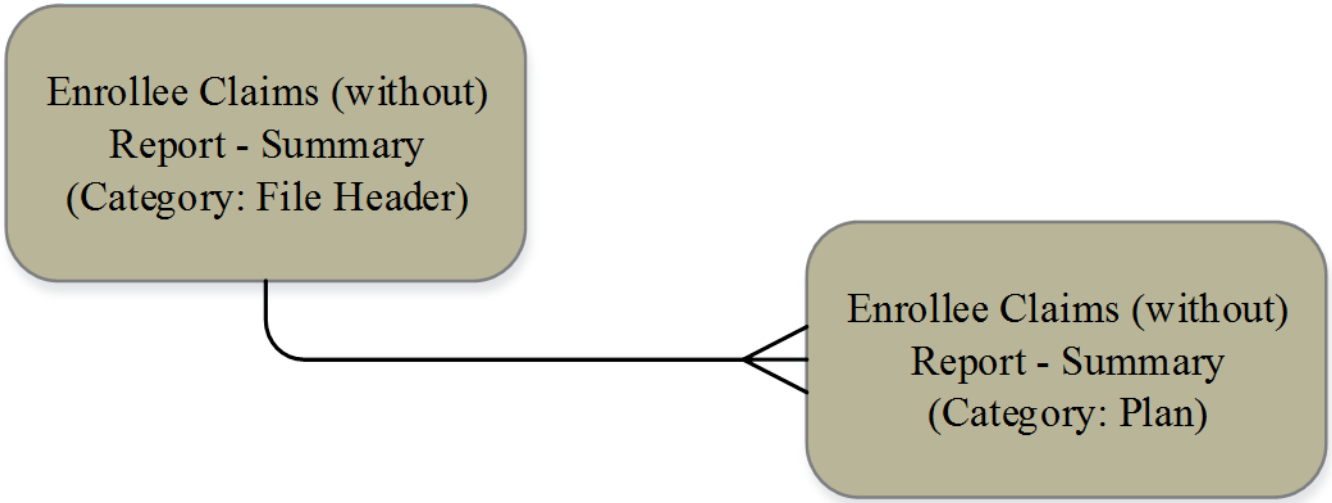
ECD: XSD and XML Data Element Summary

- EnrolleeClaimsWithWithoutDetailReport.xsd
  - issuerYear: calendar year of coverage (2015)
- EnrolleeClaimsWithWithoutDetailPlanCategory.xsd
  - planIdentifier: 16-digit Plan ID
  - totalNumberOfActiveEnrollmentRecords
  - **totalNumberOfStoredActiveClaims: total count of linked claims**
  - **totalNumberEnrolleesWithLinkedClaims: total count of linked enrollees**
  - totalNumberEnrolleelinkClaimFlaggedRaClaimSelection
  - **totalNumberOfEnrolleesNoLinkedClaims: total count of orphaned enrollees**
  - **totalNumberOfClaimsNoLinkedEnrolleeID: total count of orphaned claims**
- EnrolleeClaimsWithWithoutDetailEnrolleeCategory.xsd
  - activeEnrolleeIDswithoutClaims: individual orphaned enrollee
- EnrolleeClaimsWithWithoutDetailClaimCategory.xsd
  - activeClaimsIDsWithoutEnrolleeRecords: individual orphaned claim

The fields in red are also in the ECS, and will be used to determine EDGE data completion as indicated in slides 9-10.

Enrollee (Without) Claims Summary (ECS) Report Specifications

ECS: Report Layout



- See the ICD Risk Adjustment and Reinsurance Addendum, published in the REGTAP Library, for additional information on data elements, descriptions and report structure.

ECS: File Header

- Each ECS Report has the same file header component as the ECD Report.
  - Note - the outboundFileTypeCode here is from the ECS Report instead of the ECD Report.
    - snapShotFileName and snapShotFileHash are not populated for this report.

```
<?xml version="1.0"?>
- <enrolleeClaimsWithWithoutSummaryReport xmlns="http://vo.edge.fm.cms.hhs.gov">
  - <includedFileHeader>
      <outboundFileIdentifier>29b7d448-325a-4730-aeb4-547f2ea67e92</outboundFileIdentifier>
      <cmsBatchIdentifier>CMS001</cmsBatchIdentifier>
      <cmsJobIdentifier>CMSJOB001</cmsJobIdentifier>
      <snapShotFileName/>
      <snapShotFileHash/>
      <outboundFileGenerationDateTime>2014-11-12T21:12:44</outboundFileGenerationDateTime>
      <interfaceControlReleaseNumber/>
      <edgeServerVersion>EDGEServer_4.00.00_b0050</edgeServerVersion>
      <edgeServerProcessIdentifier>6</edgeServerProcessIdentifier>
      <outboundFileTypeCode>ECS</outboundFileTypeCode>
      <edgeServerIdentifier>105005</edgeServerIdentifier>
      <issuerIdentifier>17437</issuerIdentifier>
    </includedFileHeader>
    <issuerYear>2014</issuerYear>
```

ECS: Plan Level

- Plan level data is the same as in the ECD – except the ECS also includes the following data elements:
  - Total number of active enrollment periods
  - Total number of enrollees with linked medical claims
  - Total number of enrollees with linked pharmacy claims
  - Total number of medical claims with no linked Enrollee ID
  - Total number of pharmacy claims with no linked Enrollee ID

```
- <includedPlanIdentifier>
    <planIdentifier>45515VT004000101</planIdentifier>
    <totalNumberOfActiveEnrollmentRecords>2</totalNumberOfActiveEnrollmentRecords>
    <totalNumberOfActiveEnrollmentPeriods>3</totalNumberOfActiveEnrollmentPeriods>
    <totalNumberOfStoredActiveClaims>2</totalNumberOfStoredActiveClaims>
    <totalNumberEnrolleesWithLinkedClaims>1</totalNumberEnrolleesWithLinkedClaims>
    <totalNumberEnrolleesWithLinkedMedicalClaims>1</totalNumberEnrolleesWithLinkedMedicalClaims>
    <totalNumberEnrolleesWithLinkedPharmacyClaims>1</totalNumberEnrolleesWithLinkedPharmacyClaims>
    <totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>1</totalNumberEnrolleelinkClaimFlaggedRaClaimSelection>
    <totalNumberOfEnrolleesNoLinkedClaims>1</totalNumberOfEnrolleesNoLinkedClaims>
    <totalNumberOfClaimsNoLinkedEnrolleeID>1</totalNumberOfClaimsNoLinkedEnrolleeID>
    <totalNumberOfMedicalClaimsNoLinkedEnrolleeID>0</totalNumberOfMedicalClaimsNoLinkedEnrolleeID>
    <totalNumberOfPharmacyClaimsNoLinkedEnrolleeID>1</totalNumberOfPharmacyClaimsNoLinkedEnrolleeID>
  </includedPlanIdentifier>
```

ECS: XSD and XML Data Element Summary

- EnrolleeClaimsWithWithoutSummaryReport.xsd
  - issuerYear: benefit or coverage year (2015)
- EnrolleeClaimsWithWithoutSummaryPlanCategory.xsd – same as ECD plus:
  - totalNumberofActiveEnrollmentPeriods
  - totalNumberEnrolleesWithLinkedMedicalClaims
  - totalNumberEnrolleesWithLinkedPharmacyClaims
  - totalNumberOfMedicalClaimsNoLinkedEnrolleeID
  - totalNumberOfPharmacyClaimsNoLinkedEnrolleeID
- No individual enrollee or claim data

Using the ECS and ECD Reports

HTTPS://WWW.REGTAP.INFO/

Enrollees Without Claims: Example One (1)

Assuming this enrollee generated only the one (1) claim shown:

- **The active enrollment period (1/1/15 – 6/30/15) includes at least one (1) day in the 2015 Benefit Year.**
- **The active claim has a Statement Covers Through date (7/15/15) within 2015.**
- **Claim and enrollee are associated by the Unique Enrollee ID and Plan ID.**
- **The Statement Covers From date of the claim (7/13/15) is outside the Enrollment Start and End dates.**
- Therefore, this enrollee is orphaned and would appear in the ECD EnrolleeClaimsWithWithoutDetailEnrolleeCategory.xsd , XML element activeEnrolleeIDswithoutClaims.
- **If this is the only enrollee record, the claim would be orphaned as well.**

Enrollee Table element	Value
Unique Enrollee ID	MBR8765$mmp
Plan ID	15687KY001000104
Enrollment Start Date	2015-01-01
Enrollment End Date	2015-06-30

Claim Table element	Value
Claim ID	APR20141299999
Unique Enrollee ID	MBR8765$mmp
Plan ID	15687KY001000104
Statement Covers From	2015-07-13
Statement Covers Through	2015-07-15

- Meets Criteria

- Fails Criteria

Enrollees Without Claims: Example Two (2)

Assuming this enrollee generated only the one (1) claim shown:

- **The active enrollment period (1/1/15 – 6/30/15) includes at least one (1) day in the 2015 Benefit Year.**
- **The active claim has a Statement Covers Through date (7/15/15) within 2015.**
- **The Statement Covers From date (6/28/15) is within the Enrollment Start and End dates.**
- **While the Unique Enrollee IDs are the same, the Plan IDs are not.**
- Therefore, this enrollee is orphaned and would appear in the ECD EnrolleeClaimsWithWithoutDetailEnrolleeCategory.xsd, XML element activeEnrolleeIDswithoutClaims.
- **If this is the only enrollee record, the claim would be orphaned as well.**

Enrollee Table element	Value
Unique Enrollee ID	PRSN77665#
Plan ID	99221PA001000100
Enrollment Start Date	2015-01-01
Enrollment End Date	2015-06-30

Claim Table element	Value
Claim ID	JAN20153199999
Unique Enrollee ID	PRSN77665#
Plan ID	15687KY001000104
Statement Covers From	2015-06-28
Statement Covers Through	2015-07-15

- Meets Criteria

- Fails Criteria

Claims Without Enrollees: Example One (1)

- **The Statement Covers Through date of the claim (4/8/15) is in 2015.**
- **The enrollment period (1/1/15 – 3/31/15) has at least one (1) day in 2015.**
- **Claim and enrollee are associated by Unique Enrollee ID and Plan ID.**
- **The Statement Covers From date of the claim (4/2/14) is not within the Enrollment Start and End dates.**
- Therefore, this claim is orphaned and would appear in the ECD *EnrolleeClaimsWithWithoutDetailClaimCategory.xsd*, XML element *activeClaimIDswithoutEnrolleeRecords*.
- **The enrollee may or may not be orphaned, depending on whether there are other associated claims.**

Enrollee Table element	Value
Unique Enrollee ID	1185$Jt995#
Plan ID	30114TX001000101
Enrollment Start Date	2015-01-01
Enrollment End Date	2015-03-31

Claim Table element	Value
Claim ID	MAY20140188888
Unique Enrollee ID	1185$Jt995#
Plan ID	30114TX001000101
Statement Covers From	2015-04-02
Statement Covers Through	2015-04-08

- Meets Criteria

- Fails Criteria

Claims Without Enrollees: Example Two (2)

- **The Statement Covers Through date of the claim (5/2/15) is in 2015.**
- **The enrollment period (1/1/15 – 4/30/15) has at least one (1) day in 2015.**
- **The Unique Enrollee ID and Plan ID are used to associate the enrollee and claim.**
- **The Statement Covers From date of the claim (4/28/15) is within the Enrollment Start and End dates.**
- Therefore, this claim is **NOT** orphaned and would **NOT** appear on the ECD *EnrolleeClaimsWithWithoutDetailClaimCategory.xsd*.
- However, it would be counted in the ECD *EnrolleeClaimsWithWithoutDetailPlanCategory.xsd,* XML element *totalNumberOfStoredActiveClaims.*

Enrollee Table element	Value
Unique Enrollee ID	mJ!043PRT
Plan ID	60640IL001000102
Enrollment Start Date	2015-01-01
Enrollment End Date	2015-04-30

Claim Table element	Value
Claim ID	JUL20140255421
Unique Enrollee ID	mJ!043PRT
Plan ID	60640IL001000102
Statement Covers From	2015-04-28
Statement Covers Through	2015-05-02

- Meets Criteria

- Fails Criteria

Tips On Using Orphan Reports

- Orphans can occur for many different reasons, but they must be identified first.
  - Use the ECD Report to get an example of an orphaned individual claim or Enrollee ID, then select all data associated with that Enrollee ID.
- Issuers should regularly review all orphaned individuals and claims.
  - A very small number of orphaned claims or enrollees can have a disproportionate impact on RA or RI for an issuer.
- Orphaned claims are frequently of greater concern than orphaned enrollees because healthy enrollees commonly do not generate any claims, **BUT**:
  - Be aware that unusually high percentages of orphaned enrollees could indicate a problem with the enrollment file.

Common Reasons For Orphans

- When troubleshooting individual claim or Enrollee IDs from the ECD report, issuers should look for:
  - Duplicate or overlapping enrollment periods or statement dates.
    - If EDGE rejects an enrollee because of overlapping enrollment periods, this may cause orphaned claims that will appear in the ECD Report..
  - Subscriber-dependent non-affiliation – for example:
    - The issuer assigned incorrect dependent Enrollee IDs to a subscriber, or vice versa.
    - The issuer assigned a subscriber's claims to a dependent's Enrollee ID, or vice versa.
  - Orphaned claim or enrollee is inactive.
    - May result from issues with void/replace.
  - Double check Plan IDs.
    - Make sure Individual Market enrollees and claims are not associated with Small Group plans.

Upcoming Webinars

HTTPS://WWW.REGTAP.INFO/

Upcoming Webinars

Webinar/User Group Topic	Scheduled Event Date
Data Retention and Truncation Management	November 19, 2015

HTTPS://WWW.REGTAP.INFO/

Questions?

To submit questions by phone:

- ❑ Dial ‘14’ on your phone’s keypad
- ❑ Dial ‘13’ to exit the phone queue

Resources

HTTPS://WWW.REGTAP.INFO/

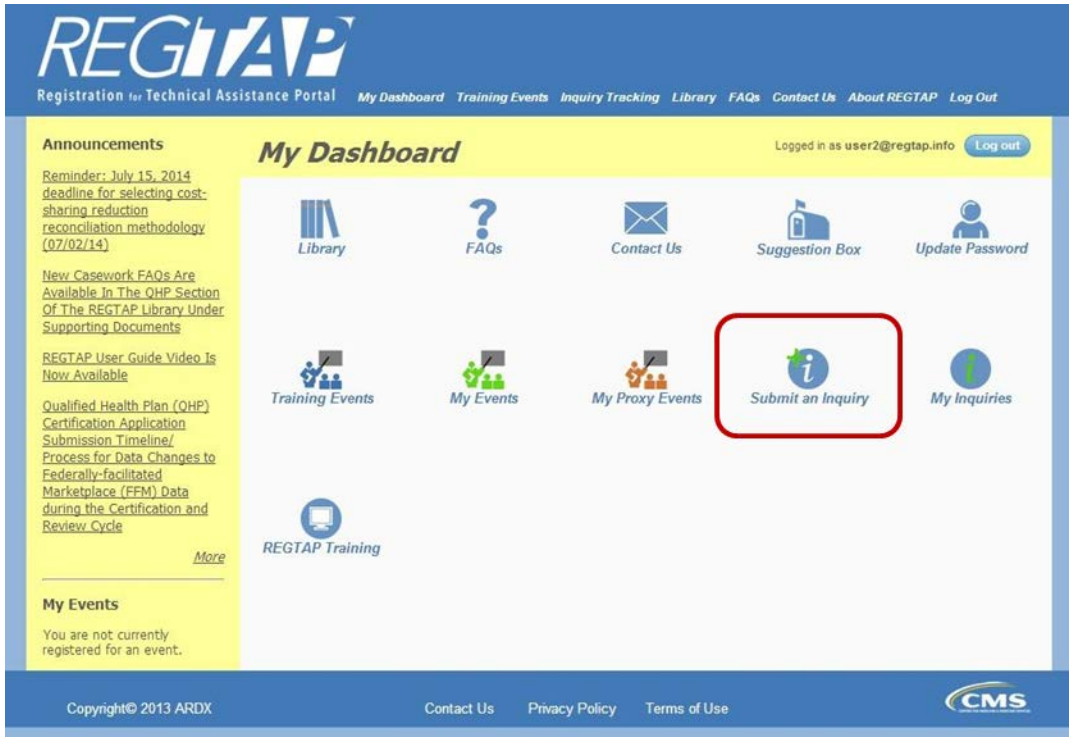
Resources

Resource	Link/Contact Information
Center for Consumer Information and Insurance Oversight (CCIIO)	http://cms.gov/cciio/
Registration for Technical Assistance Portal (REGTAP) • Registration • Inquiry Tracking and Management System (ITMS) • Resource Library • Frequently Asked Questions (FAQs)	https://www.REGTAP.info/
CMS Help Desk • Technical assistance with EDGE Registration, Provisioning and File Processing	CMS_FEPS@cms.hhs.gov 855-CMS-1515

Inquiry Tracking and Management System (ITMS)

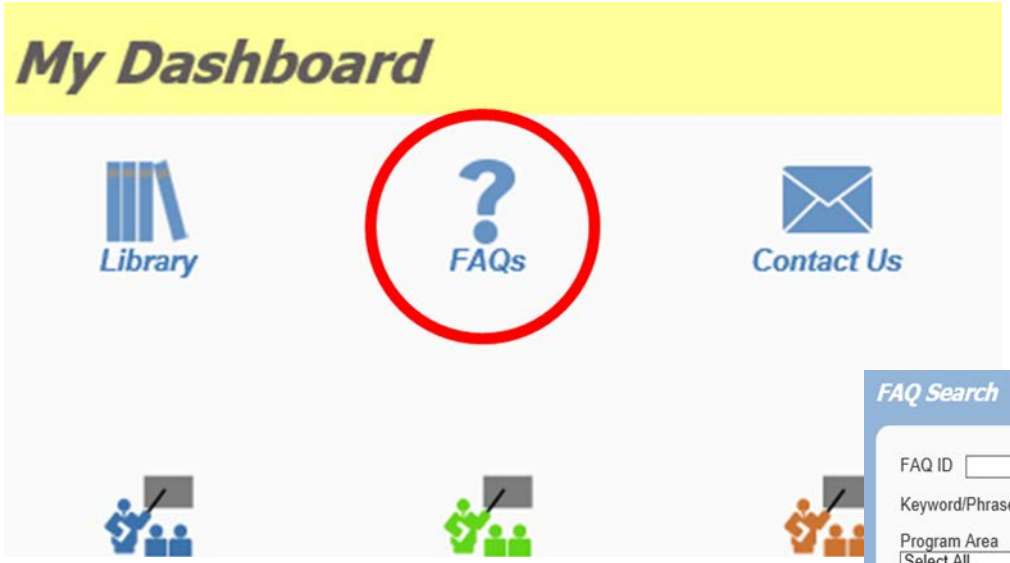
ITMS is available at https://www.REGTAP.info/

Users can submit questions after the webinar by selecting "Submit an Inquiry" from My Dashboard.

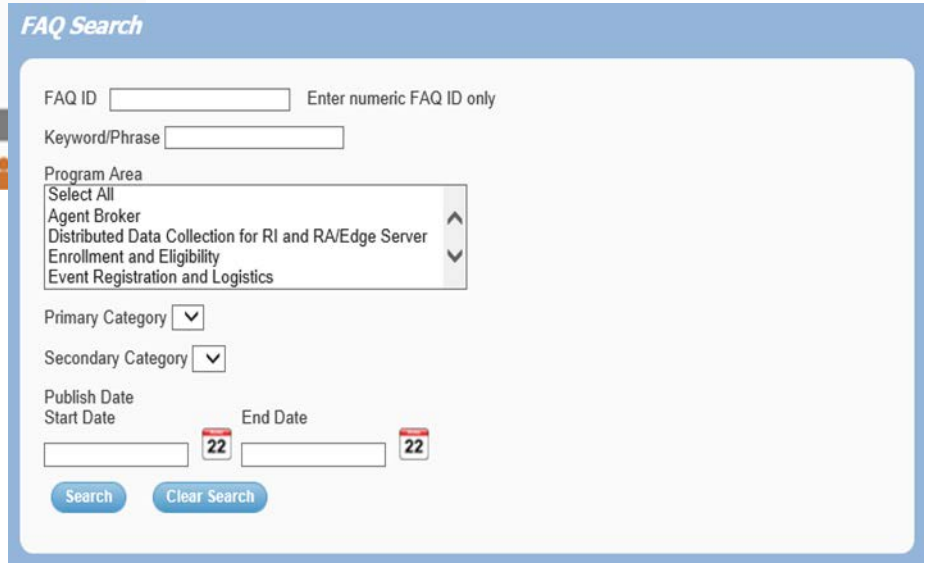


Note: Enter only one (1) question per submission.

FAQ Database on REGTAP



The FAQ Database allows users to search FAQs by FAQ ID, Keyword/Phrase, Program Area, Primary and Secondary categories, and Publish Date.



FAQ Database is available at https://www.REGTAP.info/

Closing Remarks

HTTPS://WWW.REGTAP.INFO/