Financial Management Series IV: HIX 820 Testing

February 8, 2016

Financial Management Series IV

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

HTTPS://WWW.REGTAP.INFO

Agenda

- Session Guidelines
- February Production HIX 820 and HIX 820 Testing
- Upcoming Webinar Topics
- Frequently Asked Questions
- Question & Answer
- Resources
- Closing Remarks

Session Guidelines

- This is a 90-minute webinar session.
- Documented Q&As will be posted in the coming weeks.
- For questions regarding logistics and registration, contact the Registrar at: (800) 257-9520.

FM Series IV

- The Centers for Medicare & Medicaid Services (CMS) will continue to roll out trainings in 2016.
- Series IV will continue to provide information related to testing, timelines, HIX 820 scenarios, and any additional guidance related to the 2016 transition.
- As part of this series, CMS will conduct Monday content webinars and Friday Q&A sessions.

FM Series IV Dates: February 2016

Day of Session	Date of Session	Time	Session Title
Monday	February 1, 2016	2:00 – 3:30 p.m. ET	Webinar
Friday	February 5, 2016	12:00 – 1:00 p.m. ET	Q&A Session
Monday	February 8, 2016	2:00 – 3:30 p.m. ET	Webinar
Friday	February 12, 2016	12:00 – 1:00 p.m. ET	Q&A Session
Monday	February 15, 2016	N/A	HOLIDAY
Wednesday	February 17, 2016	1:00 – 2:00 p.m. ET	Webinar
Friday	February 19, 2016	12:00 – 1:00 p.m. ET	Q&A Session
Monday	February 22, 2016	2:00 – 3:30 p.m. ET	Webinar
Friday	February 26, 2016	12:00 – 1:00 p.m. ET	Q& A Session
Monday	February 29, 2016	2:00 – 3:30 p.m. ET	Webinar

Announcements

Update: HIX 820 Defect

- The Production January HIX 820 file transmitted on Friday, January 29, 2016 contained a defect in which the Exchange Payment Type Code was incorrectly displayed as “SHOPUFRPT” instead of “SHOPUF”, which may have caused issues processing the file in Issuers’ systems.
- For Issuers that requested the corrected production January HIX 820 payment file with the correct “SHOPUF” payment type code, updated HIX 820 files are scheduled to be retransmitted on February 9, 2016.

Policy-based Payment Contacts

- For questions about the HIX 820 file, please e-mail FMCC@cms.hhs.gov
- For questions about the Manual Payments Process or program-level amounts, please e-mail marketplacepayments@cms.hhs.gov
- For questions about the payment dispute process, please e-mail errsupportcenter@cognosante.com

Policy-based Payment Timeline

February and March 2016 Calendar

Dates	Action
February 1, 2016	Data Matching Outreach File
February 5, 2016	FFM Updated 2015
February 8, 2016	2015 Pre-audit Extract
February 9 – 23, 2016	2016 Orphan Finder File IPA Delivery to Issuers
February 11, 2016	2015 Recon Inbound Due 3:00 p.m.
February 12 – 13, 2016	Payees receive February PPR and those who are Net Negative receive February Dunning Letter Payees may begin Payment Discrepancy
February 15, 2016	FFM Updated 2016, 2016 Pre-audit and March Payment Extract (2/15) 6 p.m.
February 18, 2016	2016 Recon Inbound Due 3PM, March 2016 Final Manual Process Workbooks Due by 5:00 p.m. ET
February 22, 2016	March 2016 Manual Process Final Workbooks Due by Noon
February 29, 2016	Payees receive February HIX 820
March 4, 2016	FFM Updated 2015

February Production HIX 820 and HIX 820 Testing

February Production HIX 820

- Due to technical limitations, CMS will not be able to send the Production HIX 820 as a .T prior to sending it as a .P file.
- FMCC will send out notification on February 29, 2016 at around 1:00 – 2:00 p.m. ET once all HIX 820 transactions are sent.

February Production HIX 820
(Continued)



CMS staff are available for support so if Issuers have concerns with receiving a production HIX 820, please notify FMCC immediately. They can work with you to schedule sessions with necessary CMS staff to ensure Issuers are ready to process any files before CMS pushes them.

February Production HIX 820

Similar to the PPR process, if an Issuer receives e-mail notification that their HIX 820 has been sent and they have not received the file, please send an e-mail to FMCC@cms.hhs.gov with your Payee ID and FMCC will provide the F820 File Naming Convention.

HIX 820 Testing - March

- All **new 2016 Issuers who have not transitioned to PBP** will have the option to receive a March PPR and HIX 820 transaction with 2016 production policy-level details. These files are **informational only** and will not replace the production PPR/HIX 820 transactions.
- These files will be generated and sent around the same timeline as March Production files. CMS will work with each Issuer to ensure no unexpected files are sent that may disrupt an Issuer's financial system.
- Any additional PPR or HIX 820 testing will be evaluated on an ad-hoc basis.

Upcoming Webinar Topics

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The Financial Management Team would like to solicit feedback from Issuers regarding key areas in which Issuers would like additional guidance and/or training.

Upcoming Webinar Topics
(Continued)

- Currently on the agenda:
  - o Payment and Enrollment Dispute Process
    - Response File Format
    - Response File Disposition Codes
  - o Additional 3Rs Payment Information and PPR and HIX 820 Transaction Examples
- Issuers may use the chat feature or ITMS to submit their requested topics.

Frequently Asked Questions (FAQs)

FAQ 1

Question: When will the Centers for Medicare & Medicaid Services (CMS) distribute a new HIX 820 transaction to replace the previously distributed HIX 820 with the invalid payment type code?

Answer: Requested updated files are scheduled to be retransmitted on February 9th, 2016.

FAQ 2

Question: May Issuers use the Subscriber Group ID in place of the Policy ID in the Policy ID field of the Dispute and Discrepancy Resolution Form?

Answer: Yes, Issuers may use the Subscriber Group ID instead of the Issuer Assigned Policy ID in the Policy ID field.

FAQ 3

Question: What is the most recent version of the Dispute and Discrepancy Resolution Form?

Answer: The most recent version of the Dispute and Discrepancy Resolution Form is Version 2, available at https://www.REGTAP.info in the Payments-Remittance Message (X12 HIX 820) section of the REGTAP Library.

FAQ 4

Question: What does Record Code Type 02 signify in the RCNO file?

Answer: The 02 Record in the RCNO file refers to the summary record that corresponds to the 01 detail records.

Questions?

To submit questions by phone:

- *dial '14' on your phone's keypad*
  - *dial '13' to withdraw your question*

To submit questions by webinar:

- *type your question in the text box under the 'Q&A' tab*

Acronyms

Acronym	Definition
DSH	Data Services Hub
EDI	Electronic Data Interchange
EPS	Enrollment and Payment System
FFM	Federally-facilitated Marketplace
FMCC	Financial Management Coordination Center
HIOS	Health Insurance Oversight System
HIX	Health Insurance Exchange
PBP	Policy-based Payments
PPR	Preliminary Payment Report
SBM	State-based Marketplace
SHOP	Small Business Health Options Program

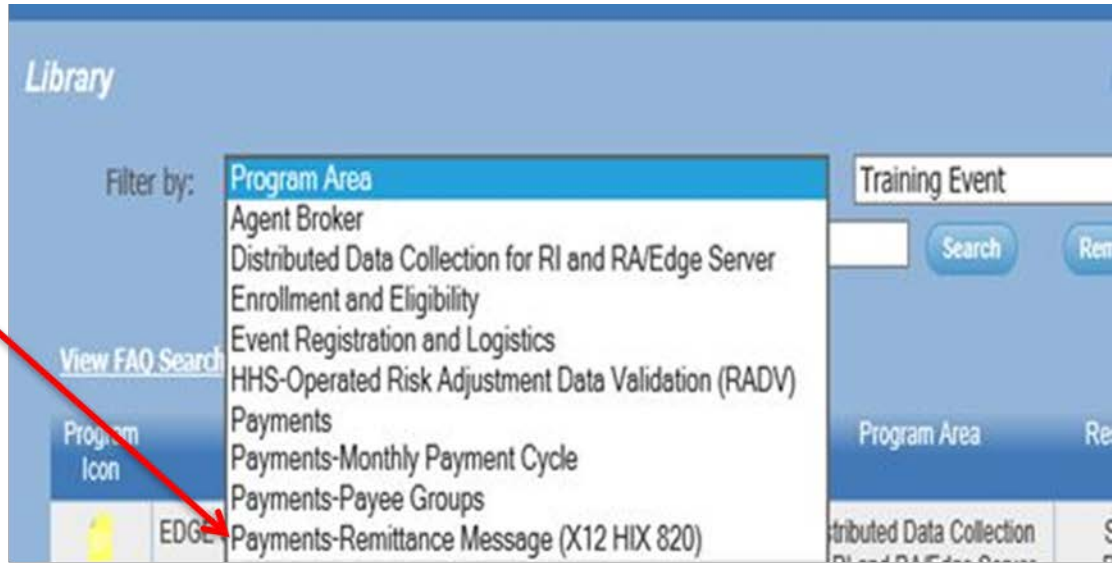
Resources

Resource	Resource Link
Centers for Medicare & Medicaid Services (CMS)	http://www.cms.gov/
U.S. Department of Health & Human Services	http://www.hhs.gov/
The Center for Consumer Information & Insurance Oversight (CCIIO) web page	http://www.cms.gov/cciio
Consumer website on Health Reform	http://www.healthcare.gov/
ASC X12 Store	http://store.x12.org/store/health-insurance-exchanges
Registration for Technical Assistance Portal (REGTAP) - presentations, FAQs	https://www.REGTAP.info

Document Location

Additional Materials for FM Series IV are available in the REGTAP Library at https://www.REGTAP.info

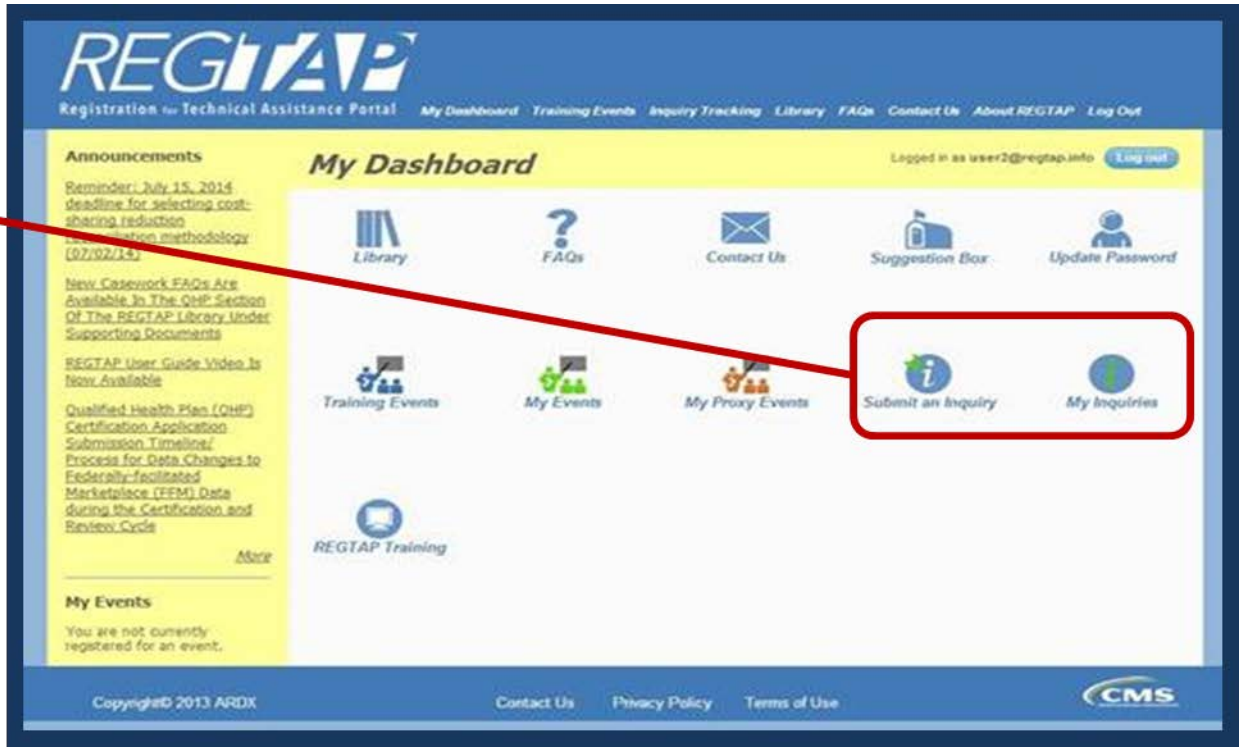
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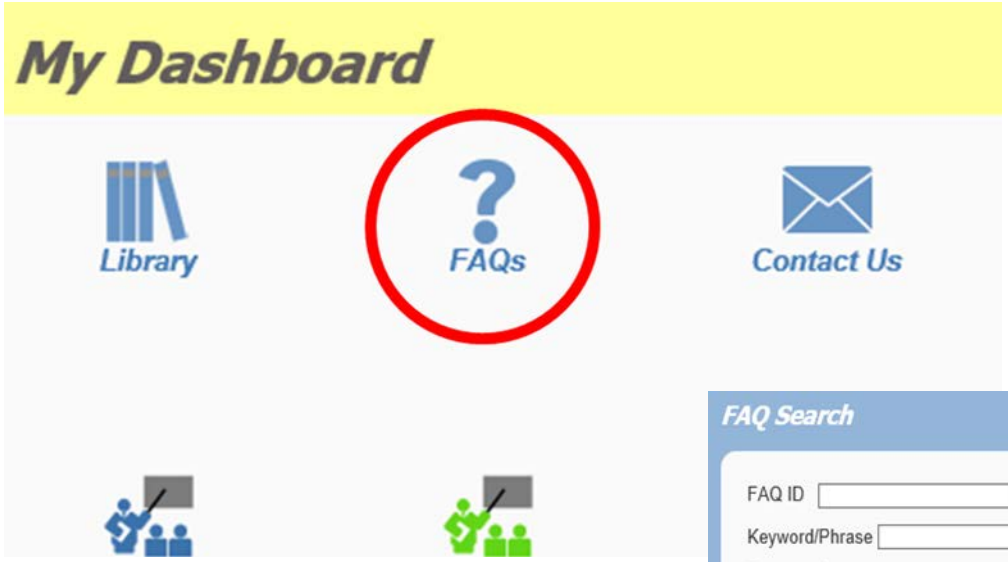
Inquiry Tracking and Management System (ITMS)

Stakeholders can submit inquiries to ITMS at https://www.REGTAP.info

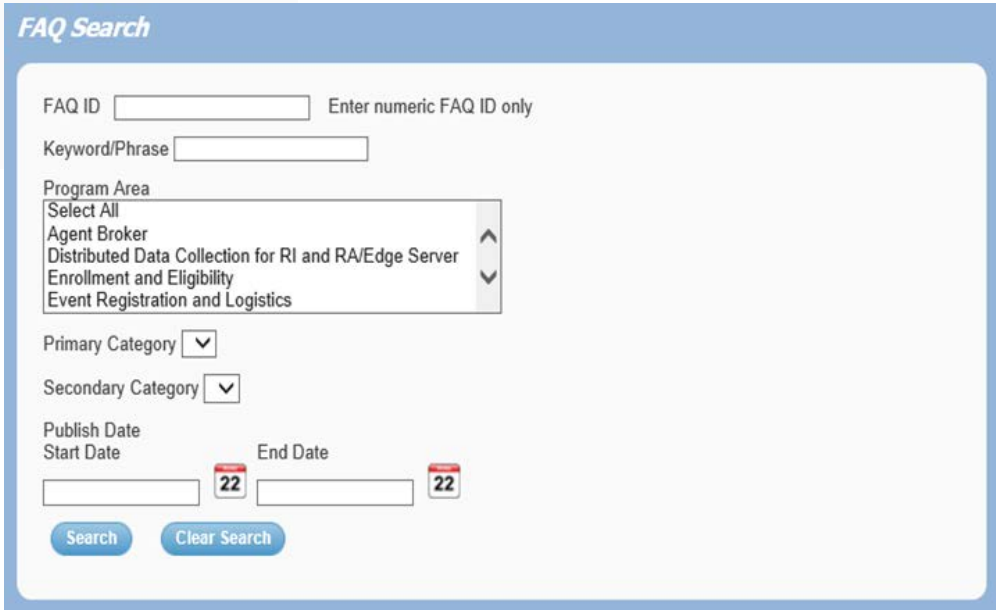
Select “Submit an Inquiry” from My Dashboard.



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