

### ICD-10 Submission Guidance

To avoid processing errors, Medicare Advantage Organizations (MAOs) and other entities must adjust EDS and RAPS submissions to account for the 10/1/15 ICD-10 transition. Please note ICD-10 and ICD-9 must be submitted on separate files for RAPS. The Medicare Learning Network (MLN) articles below provide split claims submission guidance.

**REMINDER:**  
ICD-10 transition date is 10/1/15.

- **SE1325:** *Institutional Services Split Claims Billing Instructions for Medicare Fee-For-Service (FFS) Claims that Span the International Classification of Diseases, 10th Edition (ICD-10) Implementation Date* (<https://www.cms.gov/Outreach-and-education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1325.pdf>)
- **SE1408:** *Medicare Fee-For-Service (FFS) Claims Processing Guidance for Implementing International Classification of Diseases, 10th Edition (ICD-10) – A Re-Issue of MM7492* (<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE1408.pdf>)

### RAPS Remedy Tickets

| Process Update   | Remedy Tickets   | RAPS Error Codes   |
|--|--|--|
| When following up on a previous overpayment submission, or submitting additional information for a previously reported payment year, MAOs should use their existing Remedy ticket for that payment year. | When requesting Remedy Tickets from MAPD Help Desk for RAPS files, ensure that you are including <b>RAPS</b> ticket number in your RAPS submission.<br><br>Ensure all communication contains the Contract ID and the Remedy Ticket Number. | MAOs may refer to the RAPS Error Code Listing and Look-up Tool on <a href="http://www.CSSCoperations.com">http://www.CSSCoperations.com</a> > Risk Adjustment Processing System > Edits. Please submit all requests for assistance with RAPS error codes to the risk adjustment mailbox at <a href="mailto:riskadjustment@cms.hhs.gov">riskadjustment@cms.hhs.gov</a> .<br><br>Do not submit these requests to the MAPD Help Desk. |

### RAPS Overpayment Reminders

Medicare Advantage Organizations should be advised that the entire 12 digits (to include leading zeros) of the Remedy ticket must be provided in the RAPS Overpayment field on the BBB record. Failure to provide leading zeros, or all 12 digits, will result in rejects.

**For example:**  
000000123456 (12 digits, including leading zeroes)

Also, please note the distinction between the Payment Year (PY) and the Calendar Year (CY) dates when requesting a Remedy ticket. For example, PY 2012 is for dates of services in CY 2011. The BBB record requires the PY.

Submitters should wait 24 hours after receipt of the Remedy ticket number to submit the RAPS file.

# RISK ADJUSTMENT



## for EDS & RAPS Bulletin

September 2015

*ICD-10 Submission Guidance  
RAPS Remedy Tickets  
RAS Overpayment Layout Reminders  
New EDPS Edits*

### Encounter Data Processing System (EDPS) Edits – September 2015

| Edit #   | Edit Description                      | Prevention/Resolution Strategy  |
|--|---------------------------------------|---|
| <b>18300</b><br>(Institutional)                      | FQHC Payment Code is Missing          | FQHC encounters (TOB 77X), subject to PPS on or after 10/1/2015, must include a valid payment HCPCS code on the service line for each billed service date.  |
| <b>18305</b><br>(Institutional)                      | Invalid/Missing FQHC Qualifying Visit | FQHC encounters (TOB 77X), subject to PPS on or after 10/1/2015, must include a qualifying visit procedure code related to the FQHC payment codes G0466, G0467, G0468, G0469, or G0470 for the same DOS.  |
| <b>18310</b><br>(Institutional)                      | Required FQHC Revenue Code is Missing | FQHC encounters (TOB 77X), subject to PPS on or after 10/1/2015, must include a valid revenue code on the same service line for the payment HCPCS codes G0466, G0467, G0468, G0469, or G0470.   |
| <b>18315</b><br>(Institutional)                      | Item/Service Not Covered Under FQHC   | All FQHC encounters (TOB 77X), subject to PPS on or after 10/1/2015, must contain only qualified FQHC services.   |
| <b>00785</b><br>(Professional, Institutional, & DME) | Linked Encounter Not in EODS          | The ICN referenced in a linked chart review must match the ICN of an accepted encounter stored in the EODS.   |
| <b>00790</b><br>(Professional, Institutional, & DME) | Linked Encounter is Voided/Adjusted   | The ICN referenced in a linked chart review must match the ICN of an accepted encounter stored in the EODS.   |
| <b>00795</b><br>(Professional, Institutional, & DME) | Linked Encounter is Rejected          | The ICN referenced in a linked chart review must match the ICN of an accepted encounter stored in the EODS.   |
| <b>03165</b><br>(Professional)                       | Telehealth Facility Fee Not Allowed   | Professional Telehealth encounter service lines containing procedure code Q3014 (Telehealth Originating Site Facility Fee) must also contain place of service "11" (office setting).  |
| <b>03165</b><br>(Institutional)                      | Telehealth Facility Fee Not Allowed   | Institutional Telehealth encounter service lines containing procedure code Q3014 must include revenue code 078X (telemedicine) and one of the following bill types: 12X, 13X, 22X, 23X, 71X, 72X, 76X, 77X, or 85X.   |
| <b>98300</b><br>(Institutional)                      | Exact Inpatient Duplicate Encounter   | MAOs must submit adjustment or void encounters when altering Inpatient encounters. The EDPS will reject TOBs 11X, 18X, 21X, or 41X that contain duplicate header level (Loop 2300) data elements for HICN, DOS, TOB, and Billing Provider NPI of an accepted encounter in the EODS. |
| <b>00775</b><br>(Professional, Institutional, & DME) | Unable to Adjust Rejected Encounter   | MAOs must not submit an adjustment encounter that links to a rejected encounter stored in the EODS.   |