

MERCER GOVERNMENT HUMAN SERVICES CONSULTING

HELPING GOVERNMENTS SHAPE TOMORROW'S HEALTH PROGRAMS

QUALITY ENCOUNTER DATA

Quality encounter data can seem like an elusive unicorn in the healthcare world. However, having complete, accurate and timely data not only a useful tool but a necessity in building quality healthcare programs that provide members with needed services, ensure provider costs are being met and maintain a viable program going forward. Quality data comprises all the necessary components from claims or encounters delivered in a consistent format by each of the reporting entities.

Once we have complete, accurate and timely encounters, what can we do with that data? Below are a few areas in which encounter data can have an impact:

- Granular utilization analysis
- Cost analysis
- Accurate rate setting
- Value-based purchasing
- Utilization management
- Quality management
- Risk-adjusted rates

ELEMENTS FOR QUALITY DATA

Capturing the elusive unicorn requires planning, oversight and tools. The following items can be used individually; however, applying more of these elements increases the strength of the encounter data.

HEALTH PLAN CONTRACTS

Strong, clear and detailed encounter sections drive the expectations and accountability of the health plan. Consequences for not complying with requirements for submitting complete and accurate data should be outlined and adhered to. In addition to the encounter section of the contract, some specific requirements, such as requiring a facility that acts as both a nursing facility and adult day health provider



to have separate Medicaid provider IDs for each purpose, can help to insure that encounters are properly bucketed by service.

NATIONAL STANDARDS

Although national standards *seem* straightforward, it is important to remember that the standards cover all forms of health insurance, including commercial, Medicare and Medicaid. It's important for the state to use the flexibility provided within the national standards to align the data with programmatic needs; for example, although "Paid Amount" is optional for 837 formatted files, it's intended to be optional due to subcontracted, bundled or global payments. Those encounters should also include additional indicators to show they have other payment arrangements.

ENCOUNTER SYSTEM EDITS

Efficient and helpful edits can be a useful tool for guiding health plans toward better encounters. Medicaid programs vary by state, and using "off-the-shelf" edits may not meet the needs of each state. Additionally, using edits designed for fee-for-service claims may not meet the needs or may cause other problems for encounter submissions.

MANUALS

States should provide encounter manuals when possible. Encounter manuals provide direction to the health plans, including data specifications and how to resolve rejections due to encounter edits.

EQR ISCA OR PLAN REVIEWS

An in-depth review of the health plan's information systems and processes can be instrumental in identifying gaps, omissions or errors in the data or organizational processes. These gaps may result in missing or incomplete encounters. States may

choose to have reviews more often than required or reviews that vary in scope from the basics outlined by CMS. Reviews also offer the opportunity to work with health plans to improve their processes and become more efficient overall.

TECHNICAL ASSISTANCE

Regular technical assistance provides health plans with the opportunity to discuss challenges with encounter submissions as well as develop action plans and resolutions.

COMMUNICATION

States that provide more communication tend to have better encounter data. This communication can take the form of posted website updates, broadcast emails and regularly scheduled meetings. For example, if a problem is found in an encounter system edit, notification should be broadcast to the health plans to advise them that an error has been found, specifying the timeframe needed to update the edit logic and what actions the health plan should take. Notification shouldn't be limited to a few plans but provided to all health plans that submit encounters.

IN CONCLUSION

Clean, accurate and complete data is the cornerstone of good data analytics. Spending time and effort early on to ensure that data is functional and health plans are supplying comparable data makes future analysis more efficient and insightful. Constant vigilance over the quality of data is necessary to guarantee continued success with reporting and data visualizations. Through the use of outlined strategies and a continual focus on quality, encounter data can inform many inquiries and is the basis for positive research. It will bring that unicorn to you. Mercer can help your organization with all of the elements listed above.

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