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To: IEHP Medicare Trading Partners

From: IEHP – EDI

Date: January 13, 2023

Subject: **NEW! Regulatory Submission Response Files – MAO-004 XWalk**

In addition to the CMS based MAO-004 (Risk Adjustment Eligible Diagnosis) response file currently being provided, Inland Empire Health Plan (IEHP) would like to introduce the **NEW MAO-004 Xwalk**. The MAO-004 Xwalk is a comma delimiter txt file that provides supplemental end-to-end encounter data tracking information that can be used in conjunction with MAO-004 responses files.

In most cases, using the CMS assigned Encounter ICN found in both the MAO-004 response file and the corresponding Xwalk, the submitter can reconcile CMS response information with their initial encounter's submissions to IEHP. However, it should be noted that the information within MAO-004 file has been batched by IEHP based on the member's current eligibility assignment, not who the member was eligible with at the time of service.

Therefore, there will be instances where information in the MAO-004 and crosswalk pertain to the member's previous IPA membership. Attached is an example of both the outbound Trading Partner CMS MAO-004 file and MAO-004 Xwalk which uses dummy data, along with the MAO-004 specification layout.

★ IEHP will provide a supporting Xwalk report for each MAO-004 response files on a monthly frequency via the SFTP effective January 15, 2023.

MAO-004 Xwalk File Naming Convention

File Name Example: P.**RH5355**.MAO00440.D221202_0ZZ_CCYYMMDD-HHMMSS_XWalk.txt

- **P** = Production (Usage Indicator)
- **RH5355** = Plan Contract Number (CMS assigned to Health Plan)
- **MAO00440** = Transaction Type
- **D201208** = YYMMDD (Date MAO file sent to IEHP)
- **0Z9** = Trading Partner IEHP assigned Submitter ID
- **CCYYMMDD-HHMMSS** = (IEHP MAO Create Date & Time)
- **Xwalk** = Document Type
- **TXT** = File extension

MAO-004 Xwalk File Field Names

- Encounter ICN = CMS Internal Control Number (ICN)
- Claim No = IEHP assigned outbound encounter Patient Control Number (PCN)
- Submitter ID = IEHP assigned 3-digit Submitter ID
- MBI = CMS assigned Medicare Beneficiary Identifiers (MBI)
- Patient Control Number = Original Inbound Submitter Patient Control Number (PCN)
- Encounter Submission File Name = Original Inbound Submitter File Name

MAO-004 Response File Naming Convention (CMC Dual Medicare - Date of Service Prior to January 1, 2023)

File Name Example: P.**RH5355**.MAO00440.D221202_0ZZ_CCYYMMDD-HHMMSS.DAT

- **RH5355** = Plan Contract Number
- **MAO00440** = Transaction Type
- **D201208** = YYMMDD (Date MAO file sent to IEHP)
- **0ZZ** = Trading Partner IEHP assigned Submitter ID
- **CCYYMMDD-HHMMSS** = (IEHP MAO Create Date & Time)
- **DAT** = File extension

MAO-004 Response File Naming Convention (DSNP Dual Medicare - Date of Service after December 31, 2022)

File Name Example: P.**RH8894**.MAO00440.D221202_0ZZ_CCYYMMDD-HHMMSS.DAT

- **RH8894** = Plan Contract Number
- **MAO00440** = Transaction Type
- **D201208** = YYMMDD (Date MAO file sent to IEHP)
- **0ZZ** = Trading Partner IEHP assigned Submitter ID
- **CCYYMMDD-HHMMSS** = (IEHP MAO Create Date & Time)
- **DAT** = File extension

We are here to answer inquires you may have regarding this process. IEHP is committed to supporting our trading partners and appreciates your understanding and cooperation with this new implementation.

If you have any questions, please do not hesitate to contact the IEHP EDI Team at EncounterData@iehp.org

As a reminder, all communications sent by IEHP can also be found at:

www.iehp.org > Providers > Plan Updates > Correspondence

Table 4: Phase IV Version 0 (Phase 4.0) MAO-004 Report File Layout

Table 4 provides the Phase 4.0 MAO-004 report file layout. Report items with content changes as described above in the Summary of Phase 4.0 MAO-004 Report Content Changes section are highlighted below. **The Phase 4.0 report layout structure is unchanged from the Phase 3.3 layout.**

Table 4 Header

#	Item	Notes	Length	Starting Position	Ending Position	Format
1	Record Type	0: Header	1	1	1	Numeric, no commas and/or decimals
2	Delimiter		1	2	2	Uses the * character
3	Report ID	Value is “MAO-004”	7	3	9	Alpha Numeric
4	Delimiter		1	10	10	Uses the * character
5	Medicare Advantage Contract ID	Medicare Contract ID assigned to the submitting contract	5	11	15	Alpha Numeric
6	Delimiter		1	16	16	Uses the * character
7	Report Date	The last date of the submission month the report is created for	8	17	24	Numeric, format CCYYMMDD
8	Delimiter		1	25	25	Uses the * character
9	Report Description	Value is “Encounter Data Diagnosis Eligible for Risk Adjustment”	53	26	78	Alpha Numeric, left justify, blank fill
10	Delimiter		1	79	79	Uses the * character
11	Filler		30	80	109	Spaces
12	Delimiter		1	110	110	Uses the * character
13	Submission File Type	Value of “PROD,” for production and “TEST” for test files	4	111	114	Alpha Numeric
14	Delimiter		1	115	115	Uses the * character
15	Phase	This field designates the Phase layout of the MAO-004 report (In this case “4”)	1	116	116	Alpha Numeric
16	Delimiter		1	117	117	Uses the * character

#	Item	Notes	Length	Starting Position	Ending Position	Format
17	Version	This field designates the Version within the phase of the MAO-004 report (In this case “0”)	1	118	118	Alpha Numeric
18	Delimiter		1	119	119	Uses the * character
19	Filler		381	120	500	Spaces

Table 4 Details

#	Item	Notes	Length	Starting Position	Ending Position	Format
1	Record Type	1: Detail	1	1	1	Numeric, no commas and/or decimals
2	Delimiter		1	2	2	Uses the * character
3	Report ID	Value is “MAO-004”	7	3	9	Alpha Numeric
4	Delimiter		1	10	10	Uses the * character
5	Medicare Advantage Contract ID	Medicare Contract ID assigned to the submitting contract	5	11	15	Alpha Numeric
6	Delimiter		1	16	16	Uses the * character
7	Beneficiary Identifier	Beneficiary Health Insurance Claim Number (HICN) or Medicare Beneficiary Identifier (MBI)	12	17	28	Alpha Numeric
8	Delimiter		1	29	29	Uses the * character
9	Encounter ICN	EDS ICN. In encounter data, only 13 spaces represent the ICN; however, there are 20 spaces on the records to allow for enhancements to the ICN.	20	30	49	Alpha Numeric
10	Delimiter		1	50	50	Uses the * character
11	Encounter Type (Table 2A)	This field can take on 9 different values: “1”: Encounter Data Record	1	51	51	Alpha Numeric

<u>#</u>	<u>Item</u>	<u>Notes</u>	<u>Length</u>	<u>Starting Position</u>	<u>Ending Position</u>	<u>Format</u>
		<p>“2”: Void to an Encounter Data Record</p> <p>“3”: Replacement to an Encounter Data Record</p> <p>“4”: Chart Review Record Add</p> <p>“5”: Void to a Chart Review</p> <p>“6”: Replacement to a Chart Review Record</p> <p>“7”: Chart Review Record Delete</p> <p>“8”: Void to a Chart Review Record Delete</p> <p>“9”: Replacement to a Chart Review Record Delete</p>				
12	Delimiter		1	52	52	Uses the * character
13	ICN of Encounter Linked To	EDS ICN. This field reports the ICN submitted and referenced on replacement, void, and linked CRRs. It will be blank for original encounters data records and unlinked CRRs.	20	53	72	Alpha Numeric
14	Delimiter		1	73	73	Uses the * character
15	Allowed/ Disallowed Status of Encounter Linked To	<p>This field reports the risk adjustment status of the referenced ICN (field #13)</p> <p>“A”: The referenced record and its associated diagnoses were allowed.</p> <p>“D”: The referenced record and its associated diagnoses were disallowed.</p> <p>Blank: (1) if the current record is an original EDR, or (2) if the current record is an unlinked chart review record or</p>	1	74	74	

#	Item	Notes	Length	Starting Position	Ending Position	Format
		(3) if the record is a linked chart review with an invalid ICN in Field #13, or (4) if the diagnoses on the record whose ICN is in Field 13 did not pass the filtering logic and were not previously reported on a MAO-004 report. (5) if the record points to another record which the allowed/disallowed was not set and reported before				
16	Delimiter		1	75	75	Uses the * character
17	Encounter Submission Date	Identifies the date the MAO submitted the encounter record	8	76	83	Numeric, format CCYYMMDD
18	Delimiter		1	84	84	Uses the * character
19	"From" Date of Service	The beginning of a provided service	8	85	92	Numeric, format CCYYMMDD
20	Delimiter		1	93	93	Uses the * character
21	"Through" Date of Service	The end date for a provided service.	8	94	101	Numeric, format CCYYMMDD
22	Delimiter		1	102	102	Uses the * character
23	Service Type (Table 1)	Type of Claim: “P”: Professional; “I”: Inpatient; “O”: Outpatient; “D”: DME; “N”: All Others (Not Applicable)	1	103	103	Alpha Numeric
24	Delimiter		1	104	104	Uses the * character
25	Allowed/ Disallowed flag (Figure 1)	This field indicates if the current record (field #9) together with its associated diagnoses are Allowed or Disallowed for risk adjustment. “A”: The record together with its associated	1	105	105	Alpha Numeric

#	Item	Notes	Length	Starting Position	Ending Position	Format
		<p>diagnoses are Allowed for risk adjustment.</p> <p>“D”: The record together with associated diagnoses are Disallowed for risk adjustment.</p> <p>Blank: Voids and Chart Review Deletes that have an EDS submission dates <i>prior</i> to the risk adjustment deadline.</p> <p>“N”: Designated for all Service Types “N”. The record together with associated diagnoses are not applicable for risk adjustment</p>				
26	Delimiter		1	106	106	Uses the * character
27	Allowed/ Disallowed Reason Code (Figure 1)	<p>If applicable, this field will indicate why the current record and its associated diagnoses are Disallowed for risk adjustment; or will indicate that diagnoses which previously was Disallowed for risk adjustment are now Allowed for risk adjustment based on an updated quarterly CPT/HCPCS list.</p> <p>“H”: The current record and its associated diagnoses are Disallowed for risk adjustment due to CPT/HCPCS. This value is applicable to only Service Types “O”, “P” and “D”.</p> <p>“T”: The current record and its associated diagnoses are Disallowed for risk adjustment due to Type of Bill. This value is</p>	1	107	107	Alpha Numeric

#	Item	Notes	Length	Starting Position	Ending Position	Format
		<p>applicable to only Service Types “O”.</p> <p>“D”: The current record and its associated diagnoses are Disallowed due to the final year-specific risk-adjustment payment deadline</p> <p>If the current record and its associated diagnoses are Disallowed for both Type of Bill and CPT/HCPCS code, reason code “T” will be reported. This is only applicable to Service Types “O”.</p> <p>“Q”: The current record and its associated diagnoses are now Allowed due to CPT/HCPCS quarterly update. This value is only applicable to reprocessed Service Types “O”, “P” and “D”.</p> <p>Blank: The current record and its associated diagnoses are Allowed for risk adjustment.</p> <p>“N”: The current record and its associated diagnoses are not applicable for risk adjustment. This is applicable records with Service Types “N”.</p> <p>Order of hierarchy: N> D>T>H</p>				
28	Delimiter		1	108	108	Uses the * character
29	Diagnoses ICD	<p>ICD code for All the diagnoses (9 or 0). “9”: ICD-9 or “0”: ICD-10</p>	1	109	109	Alpha Numeric

<u>#</u>	<u>Item</u>	<u>Notes</u>	<u>Length</u>	<u>Starting Position</u>	<u>Ending Position</u>	<u>Format</u>
30	Delimiter		1	110	110	Uses the * character
31	Diagnosis Code	ICD-9 codes will be accepted prior to the ICD-10 implementation date. Only ICD-10 codes will be accepted starting with ICD-10 implementation date.	7	111	117	Alpha Numeric
32	Delimiter		1	118	118	Uses the * character
33	Add or Delete flag (Table 3)	This will flag a diagnosis code as: “A”: Diagnoses are added "A"; “D”: Diagnoses are deleted. “N”: Diagnoses that are not applicable for adding and/or deleting.	1	119	119	Alpha Numeric
34	Delimiter		1	120	120	Uses the * character
35	Diagnosis Codes & Delimiters & Add/Delete flags for 37 diagnoses	This field represents up to 37 subsequent diagnoses, for a total of 38 diagnoses and add/delete flags per ICN. Any diagnoses beyond 38 will wrap around in the next line of the report with repeated detail lines except the diagnoses.	370	121	490	Alpha Numeric

Table 4 Trailer

#	<u>Item</u>	<u>Notes</u>	<u>Length</u>	<u>Starting Position</u>	<u>Ending Position</u>	<u>Format</u>
1	Record Type	9: Trailer	1	1	1	Numeric, no commas and/or decimals
2	Delimiter		1	2	2	Uses the * character
3	Report ID	Value is “MAO-004”	7	3	9	Alpha Numeric
4	Delimiter		1	10	10	Uses the * character
5	Medicare Advantage Contract ID	Medicare Contract ID assigned to the submitting contract	5	11	15	Alpha Numeric
6	Delimiter		1	16	16	Uses the * character
7	Total Number of Records	Count of detail records on this report	18	17	34	Numeric, no commas and/or decimals
8	Delimiter		1	35	35	Uses the * character
9	Filler		465	36	500	Spaces