

MHDO CHAPTER 247 FREQUENTLY ASKED QUESTIONS (FAQS)

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REVISION HISTORY

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9/12/2022	1	Initial draft for Chapter 247	Q. Lawrence
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OVERVIEW

This is a list of frequently asked questions from payer–submitters and the MHDO responses. It will be updated on an ongoing basis, as needed.

GENERAL QUESTIONS

Question: What if some of the data being required is not available within our data warehouse?

Answer: In general, all data elements that can have an appropriate blank/null value have been identified in the layouts for the individual files. However, it is understood that there are limitations within different processing and data warehouse structures. Please reach out to Philippe Bonneau, Compliance Officer, Maine Health Data Organization at philippe.bonneau@maine.gov if you have specific questions or concerns.

REPORTING AND SUBMISSION REQUIREMENTS

Question: Who should I contact if I have questions about the reporting requirements and compliance?

Answer: Please contact Philippe Bonneau, Compliance Officer, Maine Health Data Organization at philippe.bonneau@maine.gov.

Question: Should AC files include pharmacy claims data?

Answer: No, only medical data for now. If your entity only submits pharmacy claims to Chapter 243, you do not need to submit NC or AC files.

FILE/FIELD FORMATS

Question: Is there a sample or template for the supplemental (supporting information) files?

Answer: Yes, the portal provides links to sample Excel files for NS and AS supporting information file types.

Question: Are fields AC004 and AC005 meant to be dates tied to MC059 in Chapte 243 claims files?

Answer: These fields should be incurred rather than paid dates. For incurred FROM date vs incurred THROUGH/TO date, then no, they should relate to MC060, the Service THROUGH date to determine whether a claim falls into the reporting period. For many claims, the FROM and TO date are the same so it doesn't matter which date field is used. But for inpatient (IP) claims, as well as professional/outpatient (Prof/OP) claims that cover a series of services over a period of time, the last date of service determines the period the claim falls into.

Question: Will the values submitted in NC006, NC007, AC006, and AC007 be tied to the APCD membership or to the state DOI filings?

Answer: The reported values should correspond to your APCD membership.

Question: Are NC006, NC007, AC006, and AC007 asking for the count of all eligible members and member months of those members, regardless of any claim activity or the total eligible members attributed to the non-claims-based payments?

Answer: Per 90-590 C.M.R. Chapter 570 Sec 2(A)(3), payors shall report NC payments for Medicare and non-Medicare Advantage (commercially insured) populations separately, combining plans as needed within those populations. It may be necessary to estimate portions of NC payments by population if amounts are paid to provider systems for plans that include both populations. Population counts encompass all eligible members, not just those associated with providers who received Non-Claims-Based Payments. Payors shall aggregate redacted claims (AC) payments by the product code identified in AC003 and report totals for each product code. The total members and total member months in the AC file include all members eligible for the product code in the performance period, not just those with redacted claims.

Question: Could you provide more clarification regarding what is required for NC006, NC007, AC006, and AC007?

Answer: Yes, please see the information below:

NC006 Total Number of Members The count of individual members with any eligibility in the performance period in the population identified in NC012. No decimal places; round to nearest integer Example: 12345

NC007 Total Member Months The total number of member months of eligibility in the performance period in the population identified in NC012. No decimal places; round to nearest integer Example: 12345

AC006 Total Number of Members The count of individual members with any eligibility in the performance period in the product code identified in AC003. No decimal places; round to nearest integer Example: 12345

AC007 Total Member Months The total number of member months of eligibility in the performance period in the product code identified in AC003. No decimal places; round to nearest integer Example: 12345

DATA SUBMISSION/TRANSFER PROCESS

Question: How are sensitive data protected before transmission?

Answer: Sensitive information within files is protected using file-level encryption. Submitters use commercially available, payer-approved file compression and encryption software, rather than proprietary software created and distributed by the vendor.

Question: Do my files have to be named a certain way for data submission?

Answer: Yes, there is a standard naming convention outlined in pages 10-11 of the User Guide that helps the system identify what is being submitted and by whom.

Question: If we choose to submit files via SFTP, are the files required to be zipped/encrypted prior to sending?

Answer: Yes. Submitters will use commercially available, payer-approved file compression and encryption software, rather than proprietary software created and distributed by the vendor. Specifications and instructions for file compression and encryption can be found on pages 11-12 of the User Guide.

Question: How will I find out if my submission failed?

Answer: All files will be validated within 24 hours of submission. Once the validation process has completed you will receive a notification email. Any validation issues found can be viewed and resolved in the Payer Data Portal.

Question: Whom do I contact if I am having upload problems either via the Portal or SFTP?

Answer: The MHDO Help Desk is available for any technical/system issues that a user may encounter. Payer Data Portal users should expect support during regular business hours (8am-5pm ET, Monday – Friday) within two hours of request. Below is the contact information for the Help Desk:

Toll-free Phone Number: 866-451-5876

Email Address: mhdohelp@hsri.org

Question: When we submit the encrypted files to the MHDO Payer Data Portal for validation (through the portal or by SFTP), are the files landed on a NORC at the University of Chicago server for the validation process, or are the files validated outside of the NORC environment and moved to the NORC environment after validation?

Answer: The files are either uploaded or SFTP'd to NORC-controlled servers. They are then validated and stored entirely within NORC's secure data enclave.

Question: Can I submit test files?

Answer: During specified testing periods, a testing portal (https://mhdo.maine.gov/portal-test) will be made available and monitored by the Help Desk. During the testing period, files will only be submitted via the portal and SFTP submissions will not be available.

Question: We had submitted our files via SFTP, but they aren't showing up on the submission history screen on the MHDO portal page.

Answer: If files that are not properly compressed and encrypted (example: .txt file) are submitted via SFTP, they will not show up on the submission history screens.

Question: I am trying to submit a file (C0123_2021NC1v1.txt). The portal is telling me my file is improperly named. Why?

Answer: Leading zeroes must be used in the Sequence and Version number. The proper naming of the file is: C0123_2021NC**0**1v**0**1.txt.

Question: Where does the MHDO Data Warehouse reside? Describe what protections are in place for system security.

Answer: Please refer to the Security and Privacy page on the MHDO website for this information: https://mhdo.maine.gov/sec_priv.htm.

DATA VALIDATION

Question: My file has a structural issue saying the row is too long. Why?

Answer: Do not include an extra asterisk (*) at the end of a row or the validation system will detect it as an extra field and cause a structural failure on the file. Do not submit anything longer than required field length or it will cause a validation issue.