



NEW MEXICO HEALTH INSURANCE EXCHANGE

RECONCILIATION GUIDE

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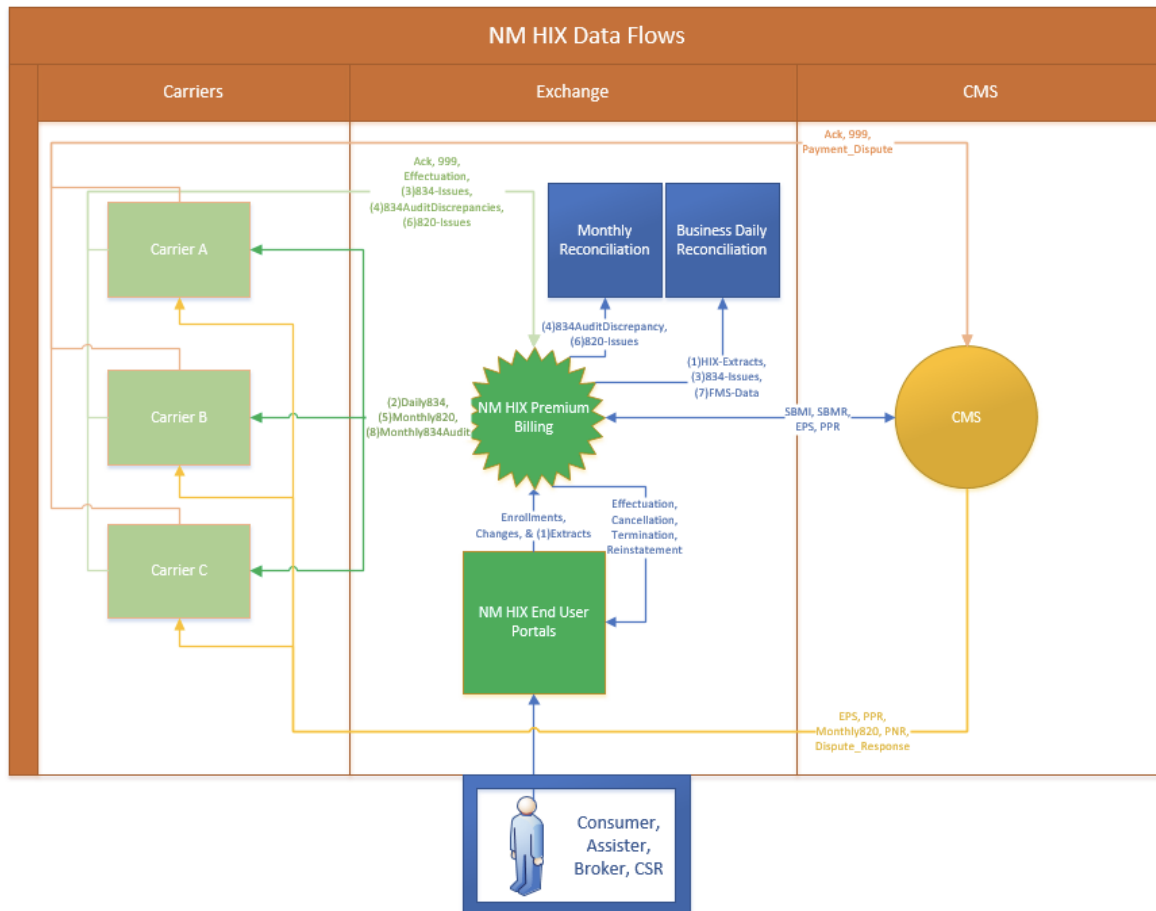
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2 RECONCILIATION OVERVIEW

The Reconciliation Team is responsible for monitoring all outbound and inbound files as well as reviewing and resolving all discrepancies identified through the 834 Daily, 834 Audit, 999 files, and 820 file. Through reconciliation, the goal is to identify issues as early as possible, in an effort to respond quickly and minimize the impact of issues and reduce the volume of discrepancies.

All files are shared via SFTP. Below is the list of files that are exchanged.

File Type	Carrier	File Direction	Frequency
834 EDI	All	Outbound	Daily (Mon- Fri)
999 Daily	All	Inbound	Daily (Mon- Fri)
834 EDI Issues File	All	Inbound	Daily (Mon- Fri)
834 EDI (Audit)	All	Outbound	Monthly, on 5 th of the month
999 Audit	All	Inbound	Monthly
834 EDI (Audit) Discrepancy File	All	Inbound	Monthly, between 5th-10 th of the month
Manual Request	All	Outbound	Daily (Mon- Fri)
Manual Request Question	All	Inbound	Daily (Mon- Fri)
820 EDI	All	Outbound	Monthly
820 Discrepancy File	All	Inbound	Monthly



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3 834 DAILY ISSUES RECONCILIATION

Enrollment additions, changes, cancelations, and terminations are sent daily to the carriers in an EDI format via the 834 job. The Daily 834 files are available for carriers on their SFTP server. Each carrier has specific requirements based on their system functionality and rules. Carriers process and validate the transactions against their enrollment data and generate a discrepancy report by the end of the next business day to be posted on the SFTP server.

On a daily basis (business days), the Reconciliation Team researches and resolves the issues reported by the carriers via the 834 Daily Issues Report. Any action that must be taken by the Recon team is sent via EDI or Manuals.

3.1 NAMING CONVENTION

From Carrier

CARRIER	FILE NAME
BCBS	834_Issues_BCBS_YYYYMMDD.csv
Molina	834_Issues_Molina_YYYYMMDD.csv
True Health	834_Issues_TrueHealth_YYYYMMDD.csv
Friday Health	834_Issues_FridayHealth_YYYYMMDD.csv
Western Sky	834_Issues_WesternSky_YYYYMMDD.csv
Best Life	834_Issues_BestLife_YYYYMMDD.csv
Presbyterian	834_Issues_Presbyterian_YYYYMMDD.csv

3.2 FILE DETAILS

The following logic should be used when creating the 834 Issues file:

- File can be sent as a CSV or Excel file.
- The file should contain all data the carrier received in the 834 EDI for that transaction.
- The file should also contain two additional fields that describe the error/issue the carrier experience, and the date of the file.
- We would expect to receive an 834 Issues file within one business after the 834 EDI was sent.

3.3 PROCESS DETAILS

As part of the daily operations calendar, the exchange (NFP) produces and distributes the 834 daily EDI files to Carriers. The Carrier's will run a process and provide enrollment issues in the form of an 834 issues response. All issues are tracked individually. To that end, the comparison results lead to one of three outcomes, new issue, updated issue, or closed issue. For each individual issue that remains open, the Team determines whether the Team will continue to observe, send/re-send 834 EDI, engage the Carrier via manual process (only when EDI cannot resolve), or engage the Carrier to resolve a technical EDI blocker issue.

- Each business day, produce an 834 EDI file and send it to each Carrier.

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- Each Carrier should process the 834 EDI and send back the 834 Issue file.
- Receive and review the 834 Issue file from each Carrier.
- Evaluate the error provided by Carrier and review the 834 EDI submitted
 - If an issue is identified in the 834 submission, correct it and resend
 - If no correctable issue is identified in the 834 submission and/or the error message indicates the systems are already in alignment (example: error says member already enrolled), then take no additional action
- Record/Update Issue
 - Record New Issue (issue observed for the first time across any Reconciliation touchpoint)
 - Update Existing Issue (issue observed is known issue from any Reconciliation touchpoint)

3.4 FILE LAYOUT

Below is an example layout of the 834 Issue file.

FIELD NAME	SOURCE
ERROR_MESSAGE	Carrier
CREATED_DATE	Carrier
Any other Fields Carrier wishes to append	Carrier
FILE_CNTRL_NUMBER	NMHIX 834 EDI
MAINTENANCE_TYPE_CODE	NMHIX 834 EDI
MAINTENANCE_REASON_CODE	NMHIX 834 EDI
MAINTENANCE_EFFECTIVE_DATE	NMHIX 834 EDI
ADDL_MAINT_REASON	NMHIX 834 EDI
ADDL_MAINT_EFFECTIVE_DATE	NMHIX 834 EDI
SUBSCRIBER_EXCHANGE_ID	NMHIX 834 EDI
MEMBER_EXCHANGE_ID	NMHIX 834 EDI
SUBSCRIBER_SSN	NMHIX 834 EDI
MEMBER_SSN	NMHIX 834 EDI
MEDICAL_HIOS_ID	NMHIX 834 EDI
DENTAL_HIOS_ID	NMHIX 834 EDI
LAST_NAME	NMHIX 834 EDI
FIRST_NAME	NMHIX 834 EDI
MIDDLE_INITIAL	NMHIX 834 EDI
GENDER_CODE	NMHIX 834 EDI
DATE_OF_BIRTH	NMHIX 834 EDI
RELATIONSHIP_CODE	NMHIX 834 EDI
MARITAL_CODE	NMHIX 834 EDI
HOME_ADDRESS_LINE1	NMHIX 834 EDI
HOME_ADDRESS_LINE2	NMHIX 834 EDI

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HOME_CITY	NMHIX 834 EDI
HOME_STATE	NMHIX 834 EDI
HOME_ZIP	NMHIX 834 EDI
HOME_FIPSCOUNTY	NMHIX 834 EDI
APTC_AMOUNT	NMHIX 834 EDI
APTC_AMOUNT_DATE	NMHIX 834 EDI
PREMIUM_AMT_TOTAL	NMHIX 834 EDI
PREMIUM_AMT_TOTAL_DATE	NMHIX 834 EDI
ETC.	NMHIX 834 EDI

4 834 AUDIT DISCREPANCY RECONCILIATION

All active enrollments are sent to the carriers monthly for audit purposes. Carriers submit a discrepancy report on the 2nd-3rd business day after the audit file is posted. Audit discrepancies file layout is similar to the daily discrepancies file layout. Therefore, apart from a few scenarios, the Monthly Audit File Process can follow the 834 Daily process for analysis.

4.1 NAMING CONVENTION

From Carrier

CARRIER	FILE NAME
BCBS	834_Audit_BCBS_YYYYMMDD.csv
Molina	834_Audit_Molina_YYYYMMDD.csv
True Health	834_Audit_TrueHealth_YYYYMMDD.csv
Friday Health	834_Audit_FridayHealth_YYYYMMDD.csv
Western Sky	834_Audit_WesternSky_YYYYMMDD.csv
Best Life	834_Audit_BestLife_YYYYMMDD.csv
Presbyterian	834_Audit_Presbyterian_YYYYMMDD.csv

4.2 FILE DETAILS

The following logic should be used when creating the 834 Issues file:

- File can be sent as a CSV or Excel file.
- The file should contain all data the carrier received in the 834 Audit EDI for that transaction.
- The file should also include two additional fields that describe the error/issue, the carrier experience, and the file's date.
- We would expect to receive an 834 Audit Discrepancy file within 2nd-3rd business day after the 834 Audit EDI was sent.

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4.3 PROCESS DETAILS

As part of the monthly Operations calendar, the Exchange (NFP) will produce and distribute 834 Monthly Audit files to Carriers (usually on the 5th). The Carrier’s will run a process and provide enrollment discrepancies in the form of an 834 Audit discrepancy response. All issues are tracked individually. To that end, the comparison results lead to one of three outcomes, new issue, updated issue, or closed issue. Regarding each individual issue that remains open, the Team member determines whether the Team will continue to observe, send/re-send 834 EDI to the carrier, engage the Carrier via manual process (only when EDI cannot resolve), or engage the Carrier to resolve a technical EDI blocker issue.

- On the 5th or the first business day after the 5th of each month, produce an 834 Audit file and send to each Carrier.
- Each Carrier will process their comparison and provide an 834 discrepancy response, usually within 2nd-3rd business days.
- Record/Update Issue
 - Record New Issue (issue observed for the first time across any Reconciliation touchpoint)
 - Update Existing Issue (issue observed is known issue from any Reconciliation touchpoint)
- For New and Existing Issues, evaluate the identified difference AND determine an action
 - Failure to propagate HIX/FMS data to Carrier
 - Corrective Action - Send/Re-send 834 EDI to bring Carrier in alignment with Exchange
 - Repeated failure of 834 EDI transmissions to resolve issue – if you are seeing the issue for the second month
 - Corrective Action Option A – Engage Carrier for manual file driven resolution. Systematic constraints, usually time oriented, won’t allow processing of EDI, thereby, Exchange submits corrective transactions via Excel workbook
 - Corrective Action Option B – Engage Carrier EDI counterparts to determine an EDI centric resolution by resolving a technical blocker (EDI processing issue is there on either side)
- Review Open Issues
 - Close Issues – if issues reported from the previous cycle are not recurring in the current audit, the issue may be closed

4.4 FILE LAYOUT

Below is an example layout of the 834 Audit file.

FIELD NAME	SOURCE
ERROR_MESSAGE	Carrier
CREATED_DATE	Carrier
Any other Fields Carrier wishes to append	Carrier
FILE_CNTRL_NUMBER	NMHIX 834 EDI
MAINTENANCE_TYPE_CODE	NMHIX 834 EDI

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MAINTENANCE_REASON_CODE	NMHIX 834 EDI
MAINTENANCE_EFFECTIVE_DATE	NMHIX 834 EDI
ADDL_MAINT_REASON	NMHIX 834 EDI
ADDL_MAINT_EFFECTIVE_DATE	NMHIX 834 EDI
SUBSCRIBER_EXCHANGE_ID	NMHIX 834 EDI
MEMBER_EXCHANGE_ID	NMHIX 834 EDI
SUBSCRIBER_SSN	NMHIX 834 EDI
MEMBER_SSN	NMHIX 834 EDI
MEDICAL_HIOS_ID	NMHIX 834 EDI
DENTAL_HIOS_ID	NMHIX 834 EDI
LAST_NAME	NMHIX 834 EDI
FIRST_NAME	NMHIX 834 EDI
MIDDLE_INITIAL	NMHIX 834 EDI
GENDER_CODE	NMHIX 834 EDI
DATE_OF_BIRTH	NMHIX 834 EDI
RELATIONSHIP_CODE	NMHIX 834 EDI
MARITAL_CODE	NMHIX 834 EDI
HOME_ADDRESS_LINE1	NMHIX 834 EDI
HOME_ADDRESS_LINE2	NMHIX 834 EDI
HOME_CITY	NMHIX 834 EDI
HOME_STATE	NMHIX 834 EDI
HOME_ZIP	NMHIX 834 EDI
HOME_FIPSCOUNTY	NMHIX 834 EDI
APTC_AMOUNT	NMHIX 834 EDI
APTC_AMOUNT_DATE	NMHIX 834 EDI
PREMIUM_AMT_TOTAL	NMHIX 834 EDI
PREMIUM_AMT_TOTAL_DATE	NMHIX 834 EDI
ETC.	NMHIX 834 EDI

5 820 MONTHLY DISCREPANCIES RECONCILIATION

CCSB will generate and send 820 EDI files to carriers. Carriers should compare the payments in the file against their records and generate/submit an 820 discrepancy report.

On a monthly basis (once we receive the 820 discrepancy report), the Reconciliation Team researches and resolves the discrepancies reported by the carriers via the 820 discrepancy report. Any action that the Recon team must take is sent via EDI or Manuals.

5.1 FILE NAMING CONVENTION

From Carrier

CARRIER	FILE NAME
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BCBS	820_Discrepancies_BCBS_YYYYMMDD.xlsx
Molina	820_Discrepancies_Molina_YYYYMMDD.xlsx
True Health	820_Discrepancies_TrueHealth_YYYYMMDD.xlsx
Friday Health	820_Discrepancies_FridayHealth_YYYYMMDD.xlsx
Western Sky	820_Discrepancies_WesternSky_YYYYMMDD.xlsx
Best Life	820_Discrepancies_BestLife_YYYYMMDD.xlsx
Presbyterian	820_Discrepancies_Presbyterian_YYYYMMDD.xlsx

5.2 FILE DETAILS

The following logic should be used when creating the 820 Discrepancy file:

- File can be sent as a CSV or Excel file.
- The file should only contain the discrepancies from the most recent 820 EDI file.

5.3 PROCESS DETAILS

Usually, the only valid reason for a payment discrepancy is an unresolved enrollment or demographic data discrepancy. The premium rates are pre-set, and the business criteria for applying the rates are also well defined and thoroughly tested. In the rare case that a payment discrepancy does not correlate to an enrollment or demographic data discrepancy, the stakeholders must review the case(s) and determine a peripheral reason for the discrepancy. In these cases, a process or software defect is most likely occurring, residing in the process or software of either the Carrier or the Exchange. Through collaboration, the stakeholders will share information and data and agree on a game plan to try to identify and resolve the underlying issue.

- On a monthly basis, produce an 820 EDI file and send to each Carrier.
- Each Carrier will process and provide an 820 discrepancy response within five business days from when they received the 820 EDI.
- Receive and review the 820 Issue file from each Carrier.
- For each 820 issue reported, review the relevant enrollment and billing history.
 - Check if there is an open or recent reconciliation issue that could be responsible for the 820 discrepancy
 - If so, proceed to Record/Update Issue and indicate known issue as source of the 820 discrepancy.
 - If not,
 - Proceed and record a new issue.
 - Then proceed to Payment Issue mitigation process.
- Record/Update Issue
 - Record New Issue (issue observed for the first time across any Reconciliation touchpoint)
 - Update Existing Issue (issue observed is known issue from any Reconciliation touchpoint)
- Payment Issue Mitigation Process

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- Ad-hoc meetings, as/when needed. For any payment issues which cannot be correlated to an enrollment discrepancy, we will meet and review each issue with the following stakeholders – Exchange Finance, NFP Reconciliation team, and Carrier Finance. There should not be payment issues which do not correlate to an enrollment issue, but, if there are we will need to understand the issue and subsequently NFP Reconciliation team will review each case, engage Optum/HIX Ops as needed, and create a customized plan to resolve an identified underlying issue which resides on the Exchange side or coordinate and collaborate with Carrier IT staff for resolving a Carrier issue.

5.4 FILE LAYOUT

Below is an example layout of the 820 Discrepancy file.

FIELD NAME	SOURCE
CARRIER_RATE	Carrier
ERROR_DESCRIPTION	Carrier
Any other Fields Carrier wishes to append	Carrier
SUBSCRIBER_FIRST_NAME	NMHIX 820
SUBSCRIBER_LAST_NAME	NMHIX 820
EXCHANGE_SUBSCRIBER_ID	NMHIX 820
PLAN_ID	NMHIX 820
EXCHANGE_POLICY_ID	NMHIX 820
PAYMENT_AMOUNT	NMHIX 820
COVERAGE_PERIOD	NMHIX 820

6 999 FILES

999 files are received from carriers for daily and monthly audit EDI files. These files contain acceptance and reject for each transaction sent on the EDI. Rejects are for EDI transactions which carriers cannot consume.

The reconciliation team will review these files on a daily basis and will take action on any rejections that are reported via these files.

999 File is covered in more detail in the 834 companion guide.

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7 QUESTIONS

Questions regarding reconciliation or any other information covered in this guide should be sent to:

New Mexico Reconciliation Support Team

NMReconciliationSupport@nfp.com