RDS File Submission

Slide 1 of 23 - RDS File Submission

MMSEA Section 111 Group Health Plan

RDS File Submission Introduction

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Slide notes

Welcome to the RDS File Submission course. This course is for those Section 111 reporters who will be submitting retiree file information to the Retiree Drug Subsidy (RDS) Center on behalf of a Plan Sponsor participating in the Part D RDS Program.

If you are not one of these Section 111 reporters, then you may disregard this course.

Slide 2 of 23 - Disclaimer

Disclaimer

While all information in this document is believed to be correct at the time of writing, this Computer Based Training (CBT) is for educational purposes only and does not constitute official Centers for Medicare and Medicaid Services (CMS) instructions for the MMSEA Section 111 implementation. All affected entities are responsible for following the instructions found at the following link: https://go.cms.gov/mirghp.

Slide notes

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Slide 3 of 23- Course Overview

Course Overview

- RDS Overview
- Why submit RDS Retiree Files
- Non-MSP Input File Overview
- Reporting RDS Retiree
- Retiree File Structure
- Processing Response Files
- Splits - Multiple Subsidy Records
- Converting S to D Records
- Unsolicited RDS Response Files

Slide notes

Topics for this course included an overview of the Retiree Drug Subsidy (RDS) program and reasons for submitting RDS Retiree Files for Section 111.

We also reviewed the Non-Medicare Secondary Payer (MSP) Input File and reporting RDS Retirees on the Non-MSP File, the retiree file structure, processing response files, splits (Multiple Subsidy Records), converting S (Subsidy Reporting) to D (Drug Reporting) records, and unsolicited RDS Response Files.

We will also review the Non-Medicare Secondary Payer (MSP) Input File and reporting RDS Retirees on the Non-MSP File, the retiree file structure, processing response files, splits (Multiple Subsidy Records),

converting S (Subsidy Reporting) to D (Drug Reporting) records, and unsolicited RDS Response Files.

Slide 4 of 23 - RDS Overview

Slide notes

The Retiree Drug Subsidy (RDS) is one of several options available under Medicare that enables employers and unions to continue assisting their Medicare eligible retirees in obtaining more generous drug coverage.

The positive benefits from the retiree drug subsidy program derive from the subsidy payments it will make available to plan sponsors, the special tax-favored status of the subsidy payments, and the flexibility provided to plan sponsors in using the subsidy to support their own retiree drug plans.

Please note: Section 111 reporting cannot be used to request payments from the RDS Center. It will only be used to submit retiree information.

For specific information on the RDS program and its payment process, visit the RDS website at the following link: RDS Website <http://rds.cms.hhs.gov/>. In order to submit records for the RDS program, you have to apply to the RDS program.

This site includes the links for submitting subsidy applications, as well as guidance and application instruction. You must re-apply annually for a new plan year for an existing plan sponsor.

For general information on the RDS program, visit the CMS website at the following link: CMS RDS Program Website <http://www.cms.gov/employerretireedrugsubsid/> where you will be provided with general guidance, as well as overview documents on the RDS program.

**Slide 5 of 23 - Why Submit RDS Retiree Files**

Slide notes

Responsible Reporting Entities may wish to submit their RDS files through Section 111 for several reasons.

The data reported for RDS retiree files is very similar to the data reported on the Section 111 supplemental drug (D records) on the Non-MSP File.

Responsible Reporting Entities may want to submit their RDS retiree files via Section 111 because they can use the same file transmission method and connectivity that they will be using for Section 111.

Responsible Reporting Entities may only use Section 111 to report retiree files. They may not use Section 111 to request payment. For more information on the RDS payment process, please refer to the RDS website: http://www.rds.cms.hhs.gov/.

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Slide 6 of 23 - Non-MSP Input File Overview
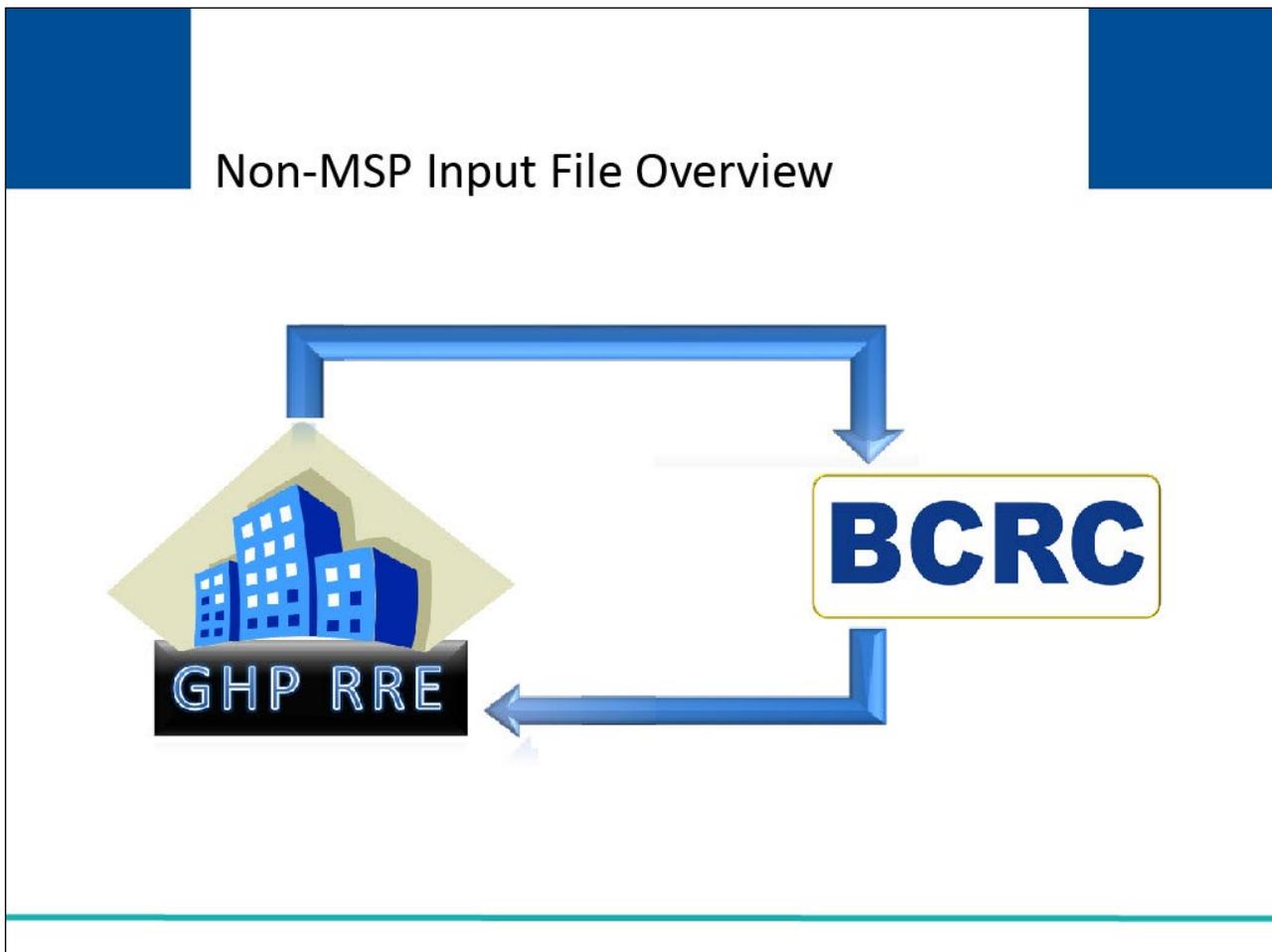
Slide notes

In order to submit retiree drug information, you must first register as a Section 111 Expanded Reporting Option submitter.

The basic and expanded option includes submission of the Non-MSP File with supplemental prescription drug coverage records, as well as Retiree Drug Subsidy (RDS) records. Effective January 1, 2020, RRE's that offer primary prescription drug coverage will be required to report this coverage for calendar quarters.

The Non-MSP Input File is the dataset that is transmitted from a GHP Responsible Reporting Entity to the Benefits Coordination & Recovery Center (BCRC).

This dataset is used to report information regarding the prescription drug insurance coverage information of your Inactive Covered Individuals, to collect prescription drug coverage information that may be supplemental or secondary to Medicare Part D, to query Medicare coverage information, and also to report RDS information.

Slide 7 of 23 - Non-MSP Input File Overview

Non-MSP Input File Overview

- Initially send add records for Inactive Covered Individuals/RDS records
- Once accepted send update or delete transactions
- Records with errors must be corrected and resent
- Records for Non-Medicare beneficiaries can continue to be sent
- The BCRC will send you a Non-MSP Response File after the information in your file has been processed

Slide notes

This file format requires you to send an "add" record for the initial report on supplemental prescription drug coverage for an Inactive Covered Individual or a RDS retiree file record.

If that record is accepted by the BCRC then you only need to apply any changes to that information using "update" or "delete" records going forward.

If the record is not accepted due to errors, you must correct it and resend.

If the record is not accepted because the individual is not a Medicare beneficiary, then you may continue to send it as an add record on all subsequent submissions until the record is either accepted or your coverage is terminated.

A Non-MSP Response File will be transmitted from the BCRC back to you after the information supplied in your Non-MSP Input File has been processed.

It consists of the same data elements in the Non-MSP Input File with corrections applied by the BCRC, disposition, and edit codes which let you know what was done to the record, as well as any new information regarding the covered individuals themselves, such as Medicare program coverage details.

Slide 8 of 23 - Reporting RDS Retirees

Reporting RDS Retirees

Header Record
- Field 5 - RDS Application Number

Detail Record - S Record
- Field 23 - Action Type
- Field 11 - Effective Date
- Field 12 - Termination Date

Trailer Record
- Field 5 - S Record Count

Refer to Appendix C of the GHP User Guide found at the CMS Section 111 Website

Slide notes

Each input file format contains at least three record types: a header record, detail records, and a trailer record that marks the end of the file.

To report RDS retiree files using the Section 111 Non-MSP File format, you must make use of several key fields. One key field on the header record is Field 5 (RDS Application Number).

This field will be used to enter the Retiree Drug Subsidy ID number that is associated with a particular RDS application.

This number, assigned by the RDS Center, is required for each retiree file that you submit and is specific to each employer/plan sponsor for each plan. You must obtain this number from the employer/plan sponsor.

This number may change when the application is renewed annually.

Other key fields are on the detail record:

Field 23 (Action Type) must include an S which will identify the record as a Subsidy Reporting Record containing drug coverage information on an individual, covered by the retiree plan, that the plan sponsor wants to claim for the subsidy.

Field 11 is the Effective Date of the GHP prescription drug coverage for the Subsidy Record.

Field 12 is the Termination Date of the GHP prescription drug coverage (if applicable) for the Subsidy Record.

Field 5 (S Record Count) in the Trailer Record is the number of Action Type S records that are included on your submission file.

Please note: Subsidy (Action Type S) Records have other required fields for accurate submission. For specific information on these fields, please see Appendix C of the GHP User Guide.

Slide 9 of 23 - Retiree File Structure
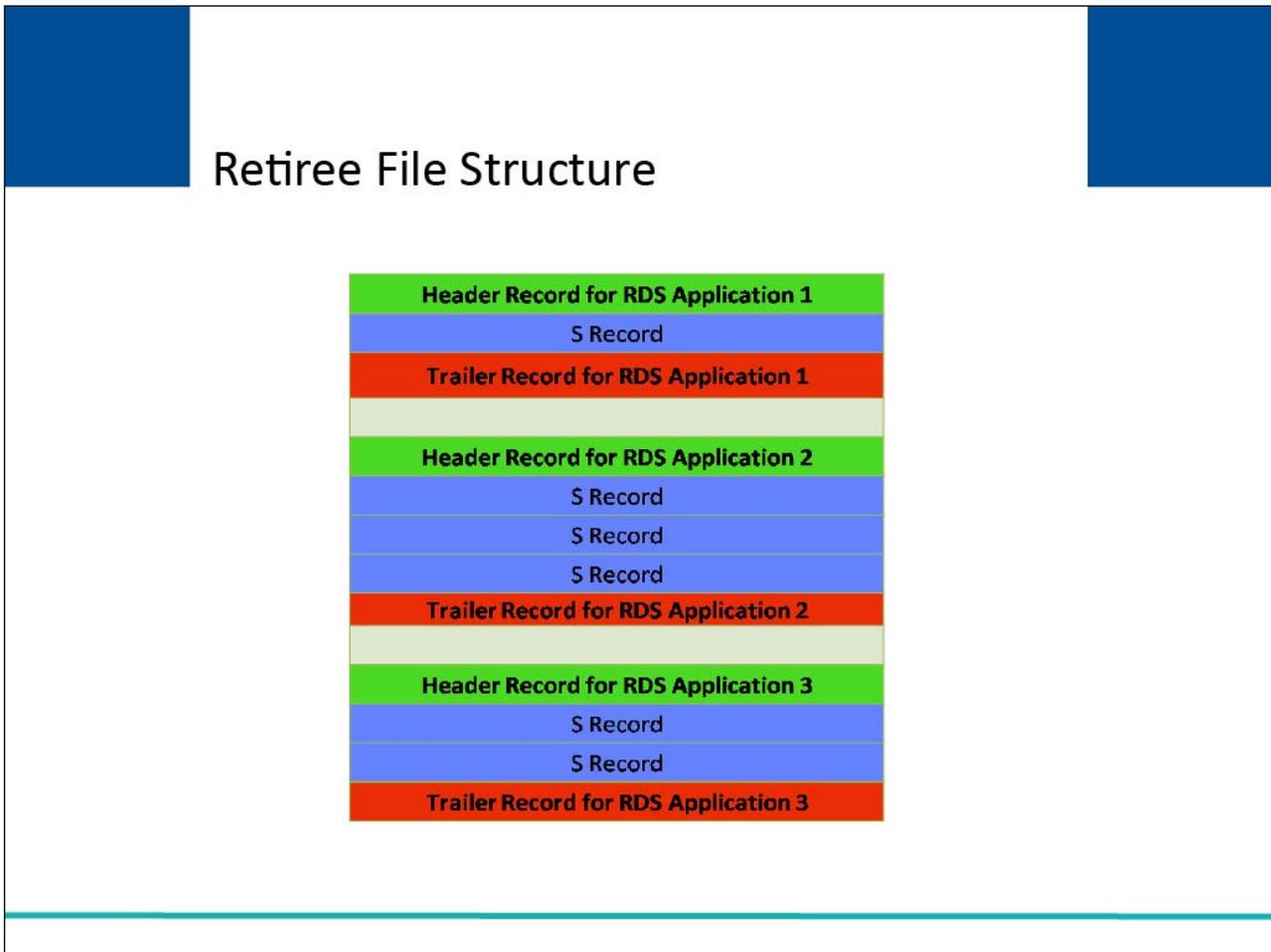
Slide notes

Responsible Reporting Entities may send in retiree files in different ways and as often as the RDS requirements specify.

However, when you are submitting retiree files for multiple plan sponsors (employers), you must put the S records associated with each application number in separate logical files separated by the corresponding header and trailer records.

All of these logical files can be submitted as separate physical files as shown on this slide.

Slide 10 of 23 - Retiree File Structure
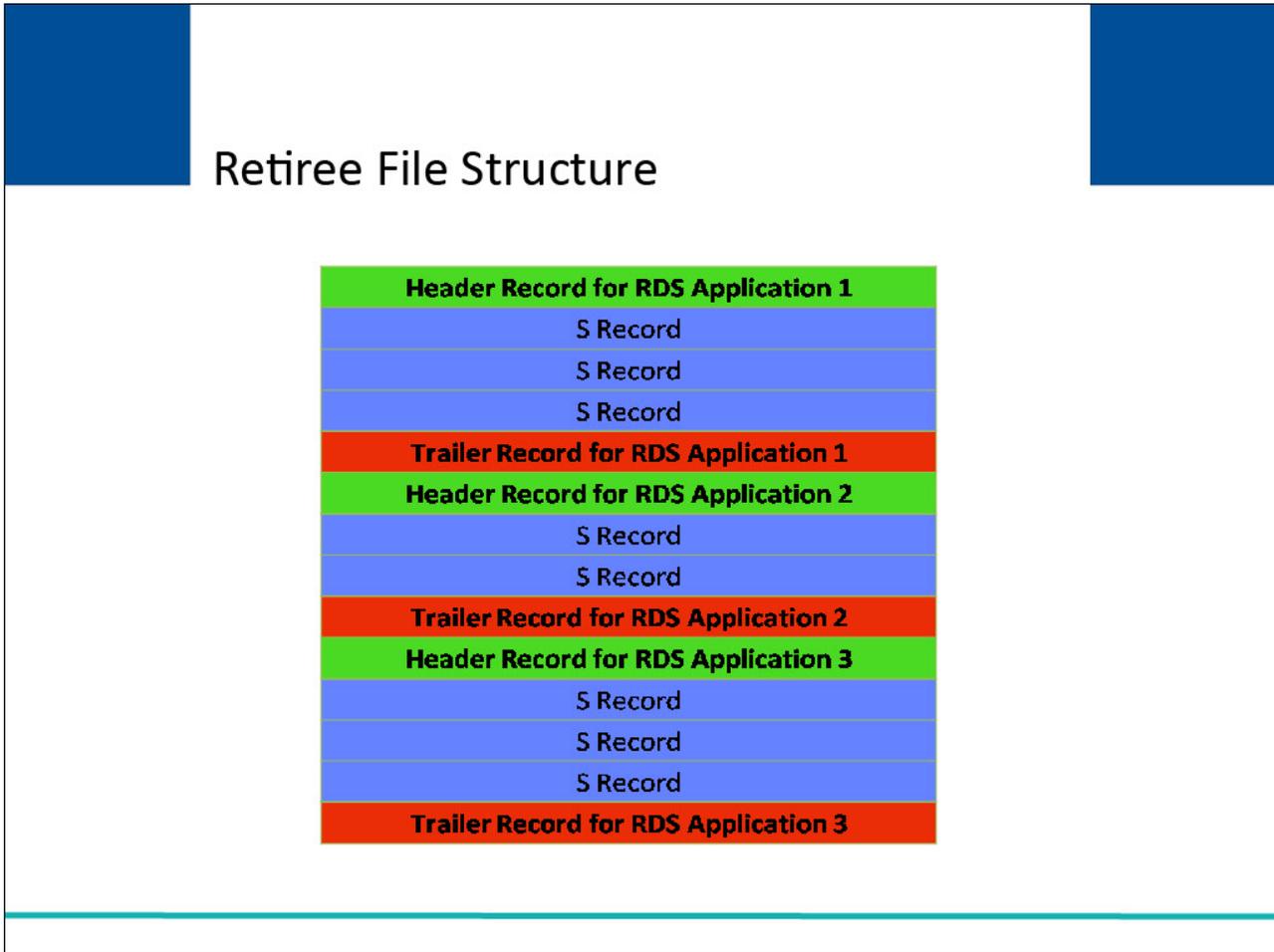
Slide notes

Another option for retiree file submission is to concatenate several logical files of S records and then submit them in one "physical" file as shown on this slide.

Slide 11 of 23 - Retiree File Structure

Retiree File Structure

Header Record for N and D Record File
N Record
D Record
N Record
D Record
Trailer Record for N and D Record File
Header Record for RDS Application 1
S Record
S Record
Trailer Record for RDS Application 1
Header Record for RDS Application 2
S Record
Trailer Record for RDS Application 2
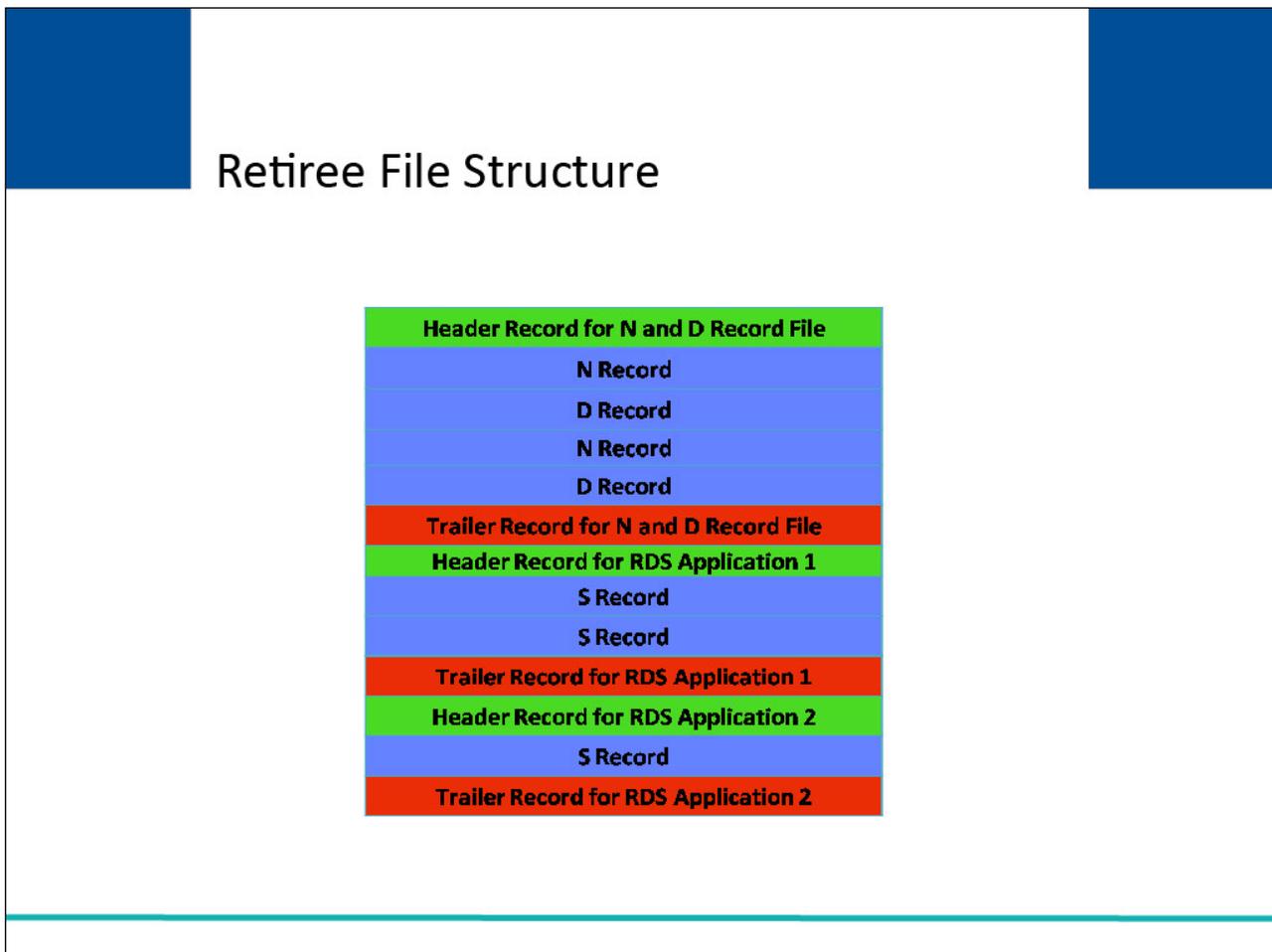
Slide notes

If you submit N, D, and S records at the same time, you must adhere to specific rules in creating your submission file. N and D records can be mixed together on one "logical" file between the same header and trailer records.

However, S records must be submitted on their own logical file with their own header and trailers. S records cannot be mixed in the same logical file as N and D records. An example of this file submission is shown on this slide.

Please note: Only one logical Non-MSP Input file with N and D records will be accepted per month. However, multiple Non-MSP Files with S records will be accepted and are to be sent on the frequency required by the RDS Center.

Slide 12 of 23 - Processing Response Files
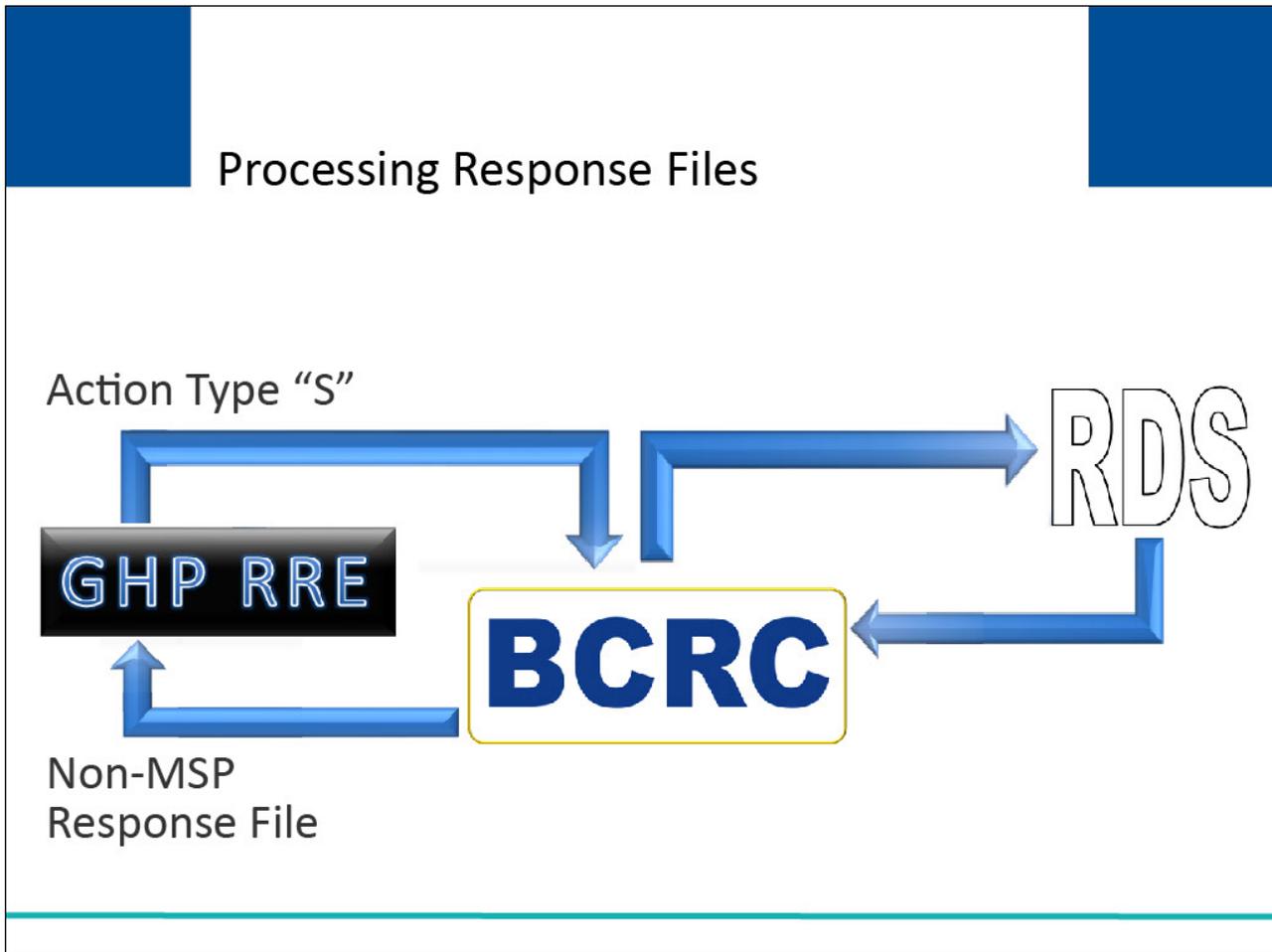
Slide notes

When the Responsible Reporting Entity submits RDS retiree records (Action Type S), the BCRC essentially acts as a pass-through and will send S records directly to the RDS Center for processing.

The RDS Center will determine whether the covered individuals included on S records are eligible for the subsidy.

In order to be eligible for the subsidy, the individual must be a Medicare beneficiary who is eligible for Part D but not currently enrolled in Part D.

The BCRC will return the S records to the Section 111 reporter on a Non-MSP Response File.

As an added benefit, the BCRC will populate the response for the S record with Medicare entitlement and enrollment information for the individual (i.e., Medicare Part A, B, C, and D coverage information as applicable).

Slide 13 of 23 - Processing Response Files

Processing Response Files

Field 54 - RDS Determination Indicator
- Value of Y - Allowed to claim the subsidy
- Value of N - Not allowed to claim subsidy

Field 53 - RDS Reason Code
- Value of 10 - Enrolled in Part D
- Value of 11 - Not eligible for Medicare

Slide notes

The Non-MSP Response File will contain information from the RDS Center indicating whether the retiree was accepted for the subsidy program (i.e., eligible to be included as part of the plan sponsor's subsidy population) or rejected by putting a value of Y or N in Field 54 (RDS Determination Indicator). If the covered individual is not accepted for the subsidy or the record is in error, corresponding reason/error codes will be posted in Field 53 (RDS Reason Code).

Slide 14 of 23 - Processing Response Files

Processing Response Files

Example 1, Individual Enrolled in Part D
- Field 53 - RDS Reason Code = 10
- Field 54 - RDS Determination Indicator = N

Example 2, Individual not a Medicare Beneficiary
- Field 53 - RDS Reason Code = 11
- Field 54 - RDS Determination Indicator = N

Slide notes

For example, if the individual is enrolled in Part D during the GHP prescription drug effective period reported on the S record, the response record would have a value of 10 in Field 53 and a value of N in Field 54.

If the individual is not a Medicare beneficiary, the response record would have a value of 11 in Field 53 and a value of N in Field 54.

Slide 15 of 23 - Splits - Multiple S Records
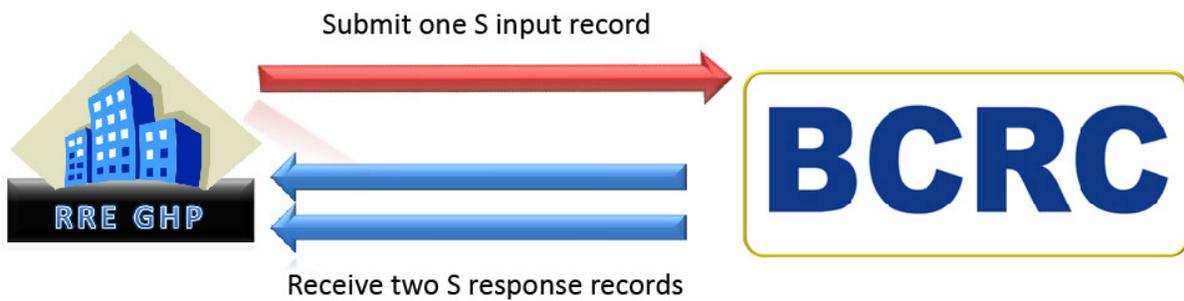
Slide notes

Because periods of eligibility can be interrupted, or a retiree is not eligible for the subsidy for the entire year, you may get more than one S response record for a given submitted S record for a beneficiary/retiree.

**Slide 16 of 23 - Splits - Multiple S Records**

Slide notes

When multiple S records are returned, Field 52 (RDS Split Indicator) will be set to Y and the RDS start and end dates in Fields 50-51 will reflect the split periods on each of the response records.

Essentially, this means that the RDS made a different determination for different parts of the coverage period reported on the input S record.

Each response record will contain your original DCN (Document Control Number) in the response Field 21. Additionally, each response record will contain the RDS Determination and Reason Codes that apply to the date span specified.

Slide 17 of 23 - Splits - Multiple S Records
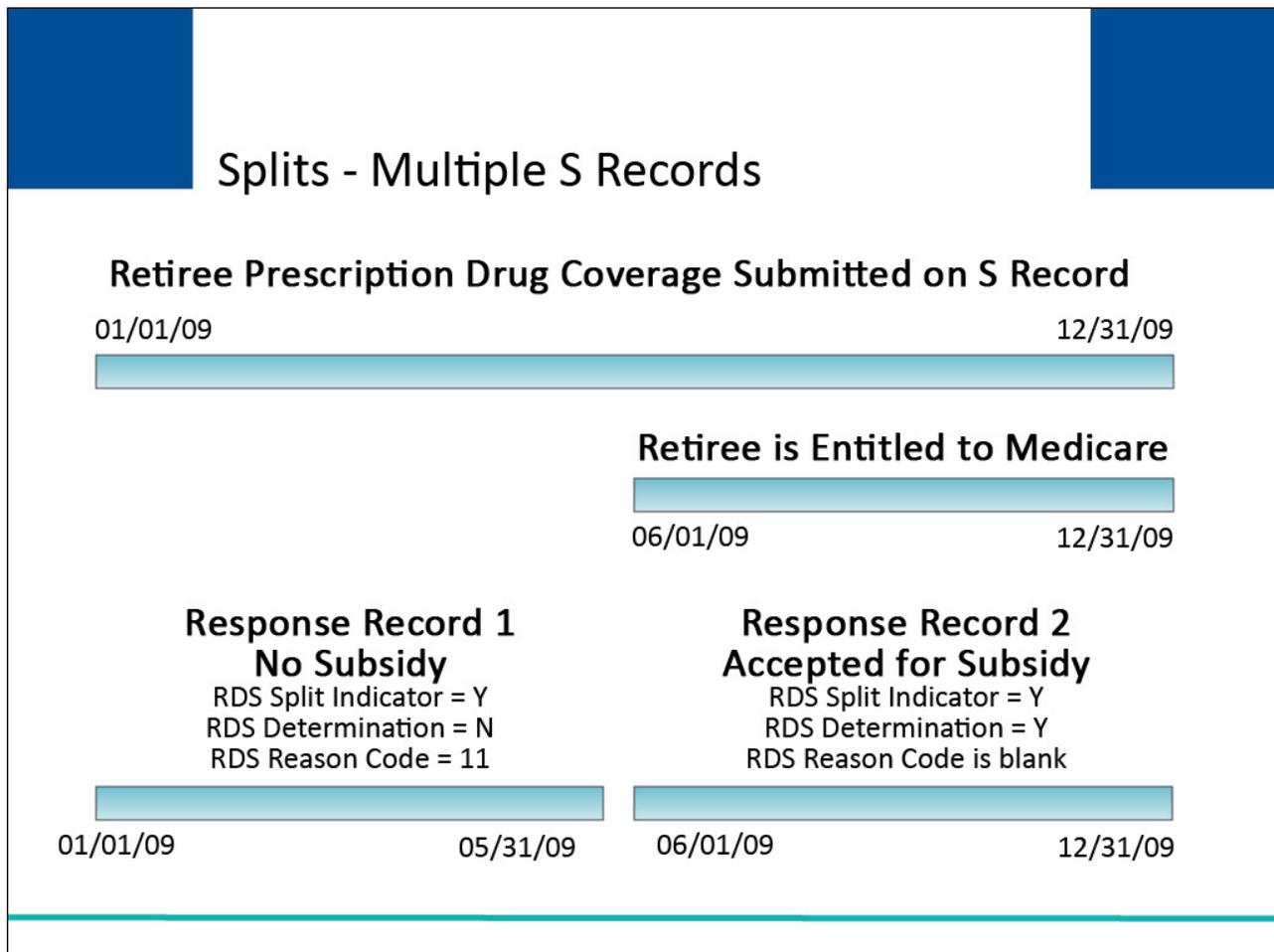
Slide notes

The following example explains what happens when a split occurs.

An S record is sent claiming subsidy eligibility for a retiree from 01/01/2009 through 12/31/2009. However, the retiree is not entitled to Medicare until 06/01/2009.

The RDS will create two response records. Each response record will have a value of Y in Field 52 (RDS Split Indicator). One response record will include RDS start and end dates of 01/01/2009 through 05/31/2009.

Field 54 (RDS Determination Indicator) on this response will be set to N and Field 53 (RDS Reason Code) will be set to 11 (person is not yet eligible for Medicare).

The second response record will have start/end dates of 06/01/2009 through 12/31/2009, which covers the remainder of the plan year. Field 54 (RDS Determination Indicator) will be set to Y and Field 53 (RDS Reason Code) will be blank.

A blank RDS Reason Code means this record was accepted by the RDS.

Slide 18 of 23 - Converting S to D Records

Converting S to D Records

- Rejected from RDS because of enrollment in Part D
- Original MSP Input S record added as D record
- Response File Example
    - Field 24 - Action Type = D
    - Field 23 - Original Action = Type S
    - Field 53 - RDS Reason Code = 10
    - Field 54 - RDS Determination Indicator = N
    - Field 29 - S Disposition Code
    - Field 48 - D/N Disposition
    - Field 21 - RRE Assigned DCN = Original DCN

Submit updates and/or deletes for Supplemental Drug Record

Slide notes

When the RDS Center returns the S record response file to the BCRC, the BCRC will screen the file to identify covered individuals who do not qualify for the Plan Sponsor's drug subsidy because of their enrollment in Part D.

These individuals will be considered to have other drug coverage supplemental to their Part D coverage.

The BCRC will add a supplemental drug coverage record (a D record) to the Medicare Beneficiary Database (MBD) for these individuals using the information sent on the S record. Essentially, the BCRC will convert the S record to a D record.

When the BCRC converts your S record to a D record, you will receive one response record with a D in Field 24 (Action Type (applied by the BCRC)) and an S in Field 23 (Original Action Type).

Field 53 (RDS Reason Code) will be set to 10 which indicates that this record was rejected for the subsidy because the beneficiary is enrolled in Medicare Part D. Field 54 (RDS Determination Indicator) will be set to N.

Field 29 (S Disposition Code) will have the BCRC disposition code for the S record. Field 48 (D/N Disposition) will indicate the results of posting the record as a supplemental drug record.

The response record will contain your original DCN (Document Control Number) in Field 21.

You are expected to submit updates and/or deletes to maintain this supplemental drug record going forward on your subsequent Non-MSP Input Files with D record action types.

The system has been updated to remove the patient relationship disposition codes of 05 (Stepchild) and 18 (Parent) as valid entries for SP33 and SP52 error codes (see Section 111 GHP SP Error Codes).

Slide 19 of 23 - Unsolicited RDS Response Files

Unsolicited RDS Response Files

- Non-MSP Response File Format
- Notification file
- Identifies changed situations since last submission
- Identified by a value of "RDSU" in Field 3 (File Type) of the header record
- Plan sponsor must adjust subsidy periods or resend original records

Slide notes

The Non-MSP Response File format will also be used to send unsolicited response files that originate from the RDS Center to the Responsible Reporting Entity.

This is the one time where you will be getting a response file (basically a notification file) from the RDS Center without first having sent an input file.

This unsolicited RDS Response File from the RDS Center will inform you about changes made to data that you previously submitted due to changes in Medicare's information since your file was processed.

For example, an individual previously accepted by RDS for the subsidy may have enrolled in Part D making them no longer eligible for the subsidy after their Part D Effective Date.

An unsolicited RDS Response File will be identified by a value of "RDSU" in Field 3 (File Type) in the header of the Non-MSP Response File and will be sent separately from the regular Non-MSP Response Files.

When a plan sponsor receives an unsolicited RDS Response File, they must adjust the periods for claiming the subsidy for affected individuals using this information or resend the original records for proper subsidy determination.

Slide 20 of 23 - Unsolicited RDS Response Files

Slide notes

When you receive an unsolicited response file from the RDS Center, the RDS Reason Code found in Field 53 will identify the reason you have received this file.

Additionally, the RDS start and end dates in Fields 50-51 may have been updated and the RDS Determination Indicator may show a changed value of N instead of Y for Reason Codes 10, 11, and 12.

The following table lists some of the RDS Reason Codes which are supplied by the RDS Center.

10 - Cannot be covered under the RDS program because the retiree is/was enrolled in Medicare Part D during the coverage period provided by the Plan sponsor.

11 - Cannot be covered under the RDS program because the retired is/was not enrolled/entitled to Medicare during the coverage period provided by the Plan sponsor.

12 - Beneficiary is deceased.

20 - Tried to enroll in Medicare Part D when the retiree was already covered under the RDS program and as a result this initial attempt to enroll in Part D was denied.

The Plan Sponsor may counsel the beneficiary that they have equal or better prescription drug coverage through the RDS program. The Plan Sponsor will not be able to claim the subsidy for the beneficiary if the retiree overrides the denial and enrolls in Part D.

21 - After an initial rejection of the retiree's record, the RDS Center has now been notified of a change in the retiree's Medicare enrollment/entitlement status.

The Plan sponsor should resubmit the retiree data on its next monthly update to determine if the retiree is now eligible for RDS program coverage.

Slide 21 of 23 - Course Summary

Slide notes

Topics for this course included an overview of the Retiree Drug Subsidy (RDS) program and reasons for submitting RDS Retiree Files for Section 111.

We also reviewed the Non-Medicare Secondary Payer (MSP) Input File and reporting RDS Retirees on the Non-MSP File, the retiree file structure, processing response files, splits (Multiple Subsidy Records), converting S (Subsidy Reporting) to D (Drug Reporting) records, and unsolicited RDS Response Files.

Slide 22 of 23 - Conclusion

Slide notes

You have completed the RDS File Submission course. Information in this presentation can be referenced by using the GHP User Guide's table of contents and any subsequent alerts.

These documents are available for download at the following link: http://go.cms.gov/mirghp.

Slide 23 of 23 - GHP Training Survey

Slide notes

If you have any questions or feedback on this material, please go the following URL: https://www.surveymonkey.com/s/GHPTraining.