

USING THE MEDICAL REVIEW (MR) MISSING DOCUMENTATION REPORT



PAYMENT ERROR RATE MEASUREMENT (PERM) REVIEW CONTRACTOR (RC) FAST FACTS

PURPOSE OF THE MR MISSING DOCUMENTATION REPORT

The purpose of the MR Missing Documentation report is to help reduce the volume of MR1 No Documentation errors and MR2 Document(s) Absent from Record errors. The report provides the state/district/territory¹ with a tool in the State Medicaid Error Rate Findings (SMERF) system to monitor MR missing documentation errors. The report reflects the current listing of claims cited with MR1 and MR2 errors. The state may use the report to:

- Identify trends, including providers with more than one missing documentation error;
- Review the provider contact information on the claim and identify updates to share with the RC; and/or
- Contact the providers directly to facilitate the submission of the missing records.

The report data is subject to change frequently as the RC continues to receive late documentation and missing documentation during the cycle. A claim is added to the report when the finding is reconciled, and the advance notice of error PERM alert will be sent to the state the following day. A claim will drop from the report when the RC reopens a review due to the receipt of late or missing documentation. If after reviewing the late or missing documentation an MR2 remains, the claim will reappear in the report and display a new date for the finding. The RC is dedicated to working with the states to obtain medical records and reduce missing documentation errors. Please contact the RC if you have questions about missing documentation errors. MR1 and MR2 errors are also standing discussion items for the state/RC check-in meetings.

GENERATING THE REPORT

I. ACCESSING REPORTS LIST IN SMERF

Log into SMERF and select **Reports** from the Menu Bar. See [Figure 1](#) on the next page.

¹ Hereinafter, collectively referred to as “state.”



FIGURE 1: SMERF MENU BAR

2. CREATING THE REPORT

From the state report listing, select **MR Missing Documentation**. See [Figure 2](#) on the next page.

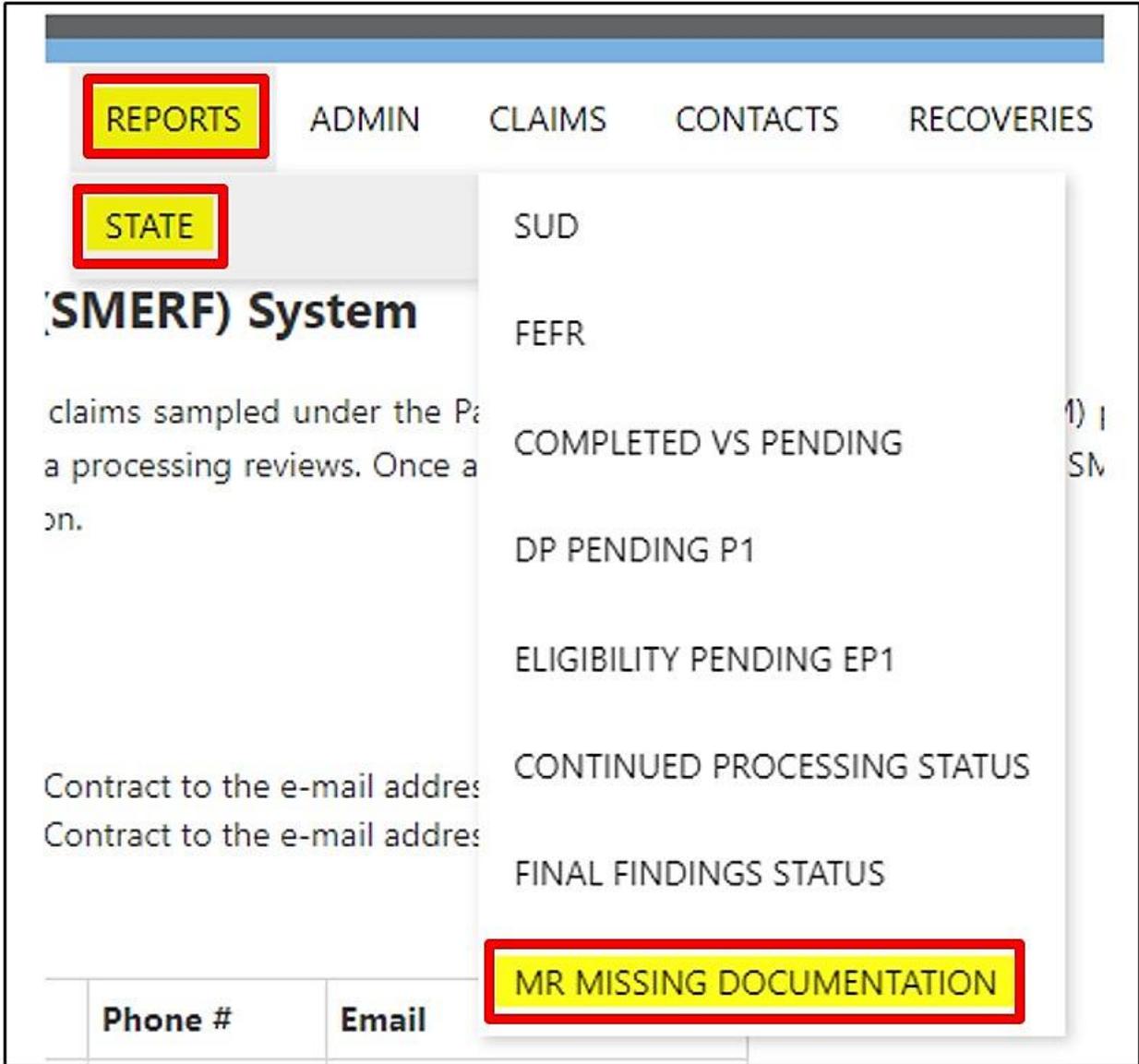


FIGURE 2: STATE USER REPORT LISTING

Select the year and quarter(s) via the **Year** and/or **Quarter** dropdowns and click **Find**. See [Figure 3](#) on the next page.

MR Missing Documentation Errors (MR1/MR2)

Provide states and review contractors a tool listing the current MR1/MR2 errors with key information.

Year	Quarter	Action
2024 ▼	ALL ▼	Find

FIGURE 3: REPORT CRITERIA

The report displays and provides Summary and Details sections. The Summary section shows the current total number of MR1 and MR2 errors and the related error amounts. The Details section provides key information for each claim including the provider contact information and the specific missing documents for MR2 errors. See [Figure 4](#) below. (Please note that Figure 4 is a truncated screen shot of test data and does not reflect actual data/errors.)

Selected Criteria: Year: 2024 - State:

Export to Excel

1 of 1 | 100% | [Icons]

CMS Sensitive Information - Requires Special Handling - CONFIDENTIAL

MR Missing Documentation Errors (MR1/MR2)

Year: 2024 - State: - Quarter: ALL

Summary ←

Error Code	Number of Errors	Error Amount
MR1	2	\$1,405.30
MR2	2	\$1,405.30
Total	4	\$2,810.60

Details ←

Perm ID	State Claim ID	Category Identifier	Error Amount	Date Paid	SUD Date
<u>M2301F431</u>		11	\$702.65	8/2/2019	6/30/2023
MR1	Primary Qualifier	Provider responded with a statement that they billed for the wrong beneficiary.			
	Billing Provider	RX			
	Phone				
	MR Point of Contact	S			
	Phone				
<u>M2301F431</u>		11	\$702.65	8/2/2019	6/30/2023
MR1	Primary Qualifier	Provider responded that they did not have the beneficiary on file or in the system.			
	Billing Provider	RX			

FIGURE 4: REPORT DISPLAY

3. SAVING THE REPORT

As is standard in SMERF, users may export the report to Excel by selecting **Export to Excel** at the top left of the SMERF page. See [Figure 4](#) on the previous page where this button is highlighted. [Figure 5](#) below shows an example of the Excel report. (Please note that Figure 5 displays test data and not actual data/errors.) Figure 5 shows the report in two images to display all report columns. The top image displays the left half of the report, and the bottom image displays the right half of the report. See [Table 1](#) below and on the next page for explanation of the key report elements.

MR Missing Documentation Errors (MR1/MR2)								
Generated On: 8/3/2023								
PERM ID	Billing Provider Name	Billing Provider Phone	MR Point of Contact Name	MR Point of Contact Ph	Claim Category	Error Code	Error Amount	
XXM2401F449	RX		TEST	555555555	13	MR2	\$500.00	
XXM2401F450	RX		TEST	555555555	12	MR2	\$500.00	
Primary Qualifier	Sub Qualifiers	Missing Docs	MR2 Only	Other Missing Docs	SUD Date	State Claim ID	Claim Paid Date	Quarter
One or more document	Provider did not submit	School-based services	service note (behaviora		06/30/2023	TEST	08/02/2000	1
One or more document	Provider did not submit	Therapy visit notes (PT/OT/ST).			06/30/2023	TEST	09/30/2000	1

FIGURE 5: EXCEL REPORT

KEY ELEMENTS OF THE REPORT

[Table 1](#) below lists the report elements with notes regarding the element definition and/or source of the data.

Column Heading	Notes
PERM ID	Sourced from details files the RC receives from Lewin, the Statistical Contractor (SC).
Billing Provider Name	Sourced from details files the RC receives from Lewin, the SC.
Billing Provider Phone	Sourced from details files the RC receives from Lewin, the SC.
MR Point of Contact (POC) Name	Sourced from the RC’s letter data. Shows the entity to whom the <u>most recent</u> medical records request letter was addressed. This is often the same as the billing provider, but it will differ if the state provided alternate MR contact information in the details files or during subsequent communications with the RC. *Note: This may not represent any corporate contacts the RC has established for national providers, e.g., retail or chain pharmacy.
MR Point of Contact Phone	Sourced originally from the details file. If the RC has updated the phone number through medical records request provider outreach, data will show the most recent telephone number used by the RC Customer Service Representatives

Column Heading	Notes
	(CSRs). This will reflect the phone number the CSR called before sending the most recent letter.
Claim Category	Reflects the current claim category code assigned by the RC. The claim category code dictates the list of requested documents in the medical records requests. The RC may change the claim category when a more appropriate category is identified.
Error Code	The report only captures MR1 and MR2 errors. When late documentation is received, an MR1 or MR2 reopens for review. This action removes the error code. While the review of the late documentation takes place, the PERM ID will drop from this report. If after reviewing the late documentation an MR2 remains, the claim will reappear in the report and display a new date for the finding.
Error Amount	Reflects the dollar amount of the error.
Primary Qualifier	Reflects the primary qualifier associated with the MR1 or MR2 error.
Sub Qualifier (MR2 error only)	This column only populates for MR2 errors. It reflects the sub qualifier associated with the MR2 error and provides details on the reason for the error.
Missing Documentation Description (MR2 error only)	This column only populates for MR2 errors. It shows the specific missing documentation requested in the Additional Documentation Request (ADR) letter or in the Incomplete Information letter. The RC sends an Incomplete Information letter when the ADR response is not sufficient for the RC to complete the review.
SUD date	Reflects the date the MR1 or MR2 error posted to the Sampling Unit Disposition (SUD) report. This field may be blank if the claim has not yet posted to a SUD.
State Claim ID	Will be the same as appears in SMERF and may not represent the actual claim ID in the state system. For example, the State Claim ID will be a masked version of the ID if the original State Claim ID included Protected Health Information (PHI) or Personally Identifiable Information (PII).
Claim Paid Date	Sourced from details files the RC receives from Lewin, the SC.
Quarter	Indicates the quarter of the sampled data.

TABLE 1: KEY REPORT ELEMENTS