



Bureau of TennCare

IS Policy Manual

Last Revised--9/1/06

Policy No: BTC-Pol-Enc-200608-008	
Subject: Encounter Sequencing Within Managed Care Contractor Transaction Files	
Approval: Encounter Policy Workgroup	Date: 9/1/2006

PURPOSE: To clarify TennCare's position regarding the sequencing of transactions found in the encounter files sent in by the Managed Care Contractors (MCCs).

BACKGROUND INFORMATION: The Bureau of TennCare is undergoing an initiative to review the submission of encounter data in order to improve the data integrity and to more accurately reflect claims adjudication and payments by the MCCs. The incorrect sequence of transactions related to the same claim is causing inaccurate reporting.

TENNCARE POLICY:

TennCare requires that the sequence number assigned to the header NTE Segment for a void be greater than that of the sequence number assigned to the header NTE Segment for the original claim being voided. All future transactions associated with this claim should use sequence numbers that increment the header NTE Segment in such a way as to make the processing of the earlier transactions be accomplished before the later transactions.

All claims should be sequenced in the order in which they will be processed. Refer to the TennCare policy concerning Reuse of ICN by MCCs.

Instructions as to the creation of the header NTE segment can be found in the TennCare HIPAA Companion Guides.

POLICY EXCEPTIONS:

None

REFERENCE DOCUMENTS:

TennCare HIPAA EDI Companion Guides

OFFICES OF PRIMARY RESPONSIBILITY:

- TennCare IS Division—to ensure that encounters are submitted to TennCare in the approved format
- Information Systems Management Contractor – to process encounters through the TCMIS system
- MCCs - to follow transaction requirements