
5. CAPITATION PROCESSING PROCEDURES

A. Capitation Processing General Information

In order to facilitate capitation reconciliation, Capitated Providers will receive Summary and Member Detail files on the Secure File Transfer Protocol (SFTP) Server on a monthly basis. Medicare Capitation files are placed on the SFTP server by the 16th of each month for the mid-month capitation payment. End of month Capitation files are placed on the SFTP server by the 1st of each month for the prior month's capitation. Capitation is based on the Provider enrollment as of the 15th day of each month. Retro Member additions and deletions are reflected on the capitation files but not the eligibility files.

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B. Capitation Data File Transmission Schedule

1. Mid-Month

Mid-Month File Transmission Schedule

Medicare files are placed on the Secure File Transfer Protocol (SFTP) server by the 16th of each month.

If you identify that the server is down, please contact the IEHP Help Desk at (909) 890-2025. If the server is down for forty-eight (48) hours, IEHP will contact you directly to establish an alternative methodology.

The following schedule outlines when capitation files are available to Providers for review.

Capitation Month	File Transferred
January	January 16 th
February	February 16 th
March	March 16 th
April	April 16 th
May	May 16 th
June	June 16 th
July	July 16 th
August	August 16 th
September	September 16 th
October	October 16 th
November	November 16 th
December	December 16 th

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B. Capitation Data File Transmission Schedule

2. End of Month

End of Month File Transmission Schedule

Files are placed on the Secure File Transfer Protocol (SFTP) server by the 1st of each month for the prior month's capitation.

If you identify that the server is down, please contact the IEHP Help Desk at (909) 890-2025. If the server is down for forty-eight (48) hours, IEHP will contact you directly to establish an alternative methodology

The following schedule outlines when capitation files are available to Providers for review.

Capitation Month	File Transferred
January	February 1
February	March 1
March	April 1
April	May 1
May	June 1
June	July 1
July	August 1
August	September 1
September	October 1
October	November 1
November	December 1
December	January 1

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C. Capitation Data File Format and Element Descriptions

#	DATA ELEMENT	FORMAT	DESCRIPTION
1	Capitation Month	YYYYMM	Month capitation is being processed and paid.
2	Eligibility Month	YYYYMM	Eligibility month
3	Hospital Number		Hospital Number
4	Hospital Name		Hospital Name
5	IPA	AAA	IPA Code
6	IPA Name		IPA Name
7	Tax ID		Employer Identification Number
8	Provider Number		Provider Number
9	Provider Last Name		Provider Last Name
10	Provider First Name		Provider First Name
11	Member Last Name		Member Last Name
12	Member First Name		Member First Name
13	Member Middle Initial		Member Middle Initial
14	Member Number	12345678901234	This is the fourteen (14) digit IEHP assigned Member # (See notes).
15	Member Age	999	Member Age
16	Member Aid Code	AA	Member's two (2) digit Aid Code (See notes)
17	Member Gender	M or F or U	Member Gender
18	Member CIN	12345678X-Non-Healthy Kids	The nine (9) digit alpha-numeric CIN #
19	Member SSN	123456789	This field consists of one of the following: SSN#, PSEUDO#, or CIN# (See notes)
20	Member Group	AAA-AAA or Cal MediConnect	Member Group
21	Member Category of Aid		Member Category of Aid
22	Member DOB	YYYYMMDD	Member date of birth
23	Plan Code		Identifies product line and county
25	Enrollment	1, -1 or 0	Enrollment

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26	HCCA	99.9999	CMS Risk Score Part A
27	HCCB	99.9999	CMS Risk Score Part B
28	Band Begin	99	Age Band Begin
29	Band End	999.9999	Age Band End
30	LOB		Line of Business
31	Pay Code	P1, P2, or NULL	Identifies when the payment is made.
32	ACG Risk Score	999.99	
33	Normalized Risk Score	999.99	
34	COA Base Rate	999.99	

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NOTES

Data Element

Element: 14

Note # 14: Member Number

The Member Number is the IEHP assigned number for each Member. An example of a Member Number is 19960900000100. Medi-Cal Members that became IEHP eligible in 9/96 have a Member Number that matches their original Medi-Cal #.

Element: 18

Note # 18: Member CIN

Client Index Number.

A state assigned number to identify Medi-Cal Members. The first eight (8) characters are numeric and the last character is alpha.

Element: 19

Note # 19: Member SSN

A nine (9)-digit number that is the primary and unique Member identifier.

For Medi-Cal Members, this field consists of one of the two (2) numbers:

SSN - Member SSN, or

PSEUDO - This number appears in this field if no SSN is available as provided by 834 File. First digit begins with the number "8" or "9" and ends with a letter.

CIN – Member Client Index Number if no SSN is available.

The following aid codes are covered aid codes by IEHP.

Element: 16 & 21

Note # 16 & 21: Member Aid Code and Member Category of Aid

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LTC	MEDI-CAL						MEDICARE		
	Child/Adult			SPD		MCE	Child/Adult	Dual Over 21	Dual Under 21
13	01	0A	5K	20	10		5C		
23	02	2P	7A	24	14	7U	5D		
53	03	2R	7J	26	16	L1	H1		
63	04	2S	7S	27	17	M1	H2		
	06	2T	7W	2E	1E	L6	H3		
	07	2U	7X	2H	1H		H4		
	08	3A	8P	36	1X		H5		
	30	3C	8R	0N	1Y		E6		
	32	3E	E2	0P			E7		
	33	3F	E5	60			M5		
	34	3G	M3	64			T1		
	35	3H	M7	66			T2		
	37	3L	P5	67			T3		
	38	3M	P7	6A			T4		
	39	3N	P9	6C			T5		
	40	3P	K1	6E					
	42	3R	86	6G					
	43	3U	0E	6H					
	45	3W	5L	6J					
	46	4A	8U	6N					
	47	4F	R1	6P					
	49	4G	2C	6R					
	54	4H		6W					
	59	4K		6V					
	72	4L		0W					

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	82	4M		6X					
	83	4N		6Y					
	87	4S		7L					
		4T							
		4U		0L					
		4W		0M					
				0R					
				0T					
				0U					
				0W					

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<u>MEDI-CAL</u> RIVERSIDE	<u>MEDI-CAL</u> SAN BERNARDINO	<u>Medicare</u> RIVERSIDE	<u>Medicare</u> SAN BERNARDINO
RVC-MED RVC-MMD RVC-CCI	SBC-MED SBC-MMD SBC-CCI	Cal MediConnect	Cal MediConnect

Element: 25

Note # 25: Enrollment

Each Member that capitation is paid for is counted as an enrollment of one (1). If we have to take back capitation that we previously paid for a Member (decapitation) the enrollment count for that Member is -1. The field "Enrollment" stands for either a positive enrollment (1) or a negative enrollment count (-1) or enrollment of 0.

Element: 31

Note # 31: Pay Code

Pay Code consists of three possible values P1, P2 or Null. P1 is for payments made on the 16th for the paid Capitation month. P2 and Nulls are for payments made at the end of the Capitation month.

P1=Mid-Month

NULL, P2= End of Month