



GOBIERNO DE PUERTO RICO

ADMINISTRACIÓN DE SEGUROS DE SALUD

Director Ejecutivo | Jorge E. Galva, JD, MHA | [jgalva@asespr.org](mailto:jgalva@asespr.org)

## CIRCULAR LETTER 21-0806

August 6, 2021

**TO: MANAGED CARE ORGANIZATIONS (MCOS) CONTRACTED TO OFFER SERVICES UNDER THE GOVERNMENT HEALTH PLAN PROGRAM (PLAN VITAL)**




**RE: MEMBER RATE CELL (MRC) FILE**

On mid-June, 2021, ASES inaugurated a trial access portal allowing several Primary Medical Groups (PMGs) direct access to the population, rate cell and reimbursement information of their respective populations. The idea behind the trial access portal is to allow PMGs a direct evaluation and corroboration of this data as part of the efforts of the agency to promote transparency and open exchange of all information impacting the finances, operations, and quality of care by the PMGs as regards their relationship with the Managed Care Organizations (MCOs).

After the initiation of the trial run of the access portal, all participating PMGs brought to ASES's attention material discrepancies between the data accessed directly at ASES regarding their High Cost High Need (HCHN) population, and the information provided in this same regard by the MCOs. A careful analysis of the situation has led ASES to conclude that the reason behind these discrepancies is that the MCOs are not using the Member Rate Cell (MRC) file developed by ASES to transmit this HCHN information to the MCOs, but rather the Eligibility File (.EXP). ASES has also concluded that the use of the .EXP file is causing the significant discrepancies identified by the PMGs in the tracking and evaluation of their HCHN information.

It is necessary to elaborate on the process whereby the MRC came to be used for the transmission of this information. The MRC file entered use by ASES in June 2019. At the inception of Plan Vital, ASES provided a transitional period where the HCHN population was established by the historical periods identified by ASES Actuaries. Once this period finalized in June 2020, ASES initiated the transmission of the HCHN Registry fed by the MCO identification of the population and the Encounters validated by the Actuary. ASES also initiated the transmission of the MRC file with the adjudication of rate cell for all the assigned population to each MCO, this also started the adjustment process for the HCHN population according to the SOP. The calculation of premium payments to the MCOs uses the MRC file to adjudicate payment to all MCOs. This information, as well as the intended utilization of the MRC file, was communicated to the MCOs as early as June 18, 2019. It was further discussed with the MCOs in subsequent meetings detailing the contents, utilization, and importance of the MRC file. Routine Objection to Payment meetings with the MCOs have been utilizing the MRC since then to ascertain payment and verify if all HCHN reimbursement has been

P.O. Box 195661, San Juan, P.R. 00919-5661

 787-474-3300  787-474-3346  [asespr.org](http://asespr.org)

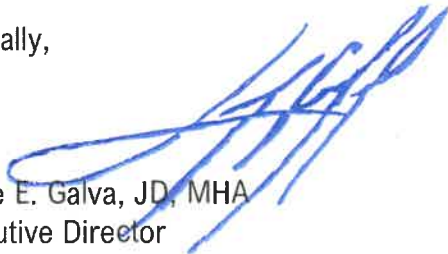
properly accounted for. Any agreement between the MCOs and PMG utilizing rate cell information must, perforce, use the MRC file and not the rate cell field in the (.EXP) file, since ASES ceased using the referenced field in that file in favor of the MRC file more than two years ago.

In summary, ASES has made an initial finding based upon a sampling provided by the PMGs that the MCOs are using the incorrect rate cell field in the .EXP file to share the HCHN population, instead of the correct MRC file and explanation of payment file 820. The use of the incorrect rate cell field has resulted in the transmission to the PMGs of incorrect information in this regard, impeding the sharing of accurate information and causing the discrepancies identified by the PMGs.

At this stage ASES has not been able to ascertain the possible financial effects of the use of the incorrect rate cell field in the .EXP file in regards with payment for the HCHN population of each PMG. The agency is still sharing information with the PMGs to identify the scope of the discrepancies and their potential financial effect on provider reimbursement. These findings will be shared with all parties when appropriate.

In regards with the issue mentioned above, ASES has determined that MCOs must cease the use of the rate cell field in the .EXP file as soon as possible, as well as assist the agency, as required, in ascertaining the potential financial effects of the improper use of that file to transmit HCHN rate cell information. Consequently, all MCOs must notify ASES, within the term of ten (10) calendar days, a comprehensive Corrective Action Plan (CAP) to deal with the issue mentioned herein and provide for the most expedited correction of the problem, enabling the proper use of the MRC file for its transmission of data to the PMGs. ASES will review the CAPs submitted for its consideration, and approve, amend, or disapprove them as needed. Once this process is finished, the MCOs will strictly adhere to the terms and conditions of the CAPs as approved, subject to all the regulatory consequences for non-compliance with the terms and conditions of the CAPs submitted to and approved by ASES.

Cordially,



Jorge E. Galva, JD, MHA  
Executive Director