

PSHBS Enrollment Reconciliation Companion Guide

United States Office of Personnel Management

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1. Introduction

This document contains the information necessary for Carriers and PSHB system (PSHBS) to conduct Enrollment Reconciliation periodically. Reconciliation is a streamlined approach whereby Carriers must generate their member enrollment extracts (MENR files) monthly and send them inbound to PSHBS. PSHBS then processes these MENR files, runs the reconciliation rules, creates the enrollment reconciliation files (RCNO files) and provides instructions for carriers to remediate these discrepancies. This will help minimize operational issues related to enrollment discrepancies in both PSHB & Carrier systems.

Defining rules for reconciliation, streamlining the process, and automating the discrepancy report will:

- Reduce the resource needs for performing manual reconciliation and mitigating each discrepancy.
- Expedite the timeline for each reconciliation cycle.
- Standardize discrepancy reporting.

This companion guide defines business rules and processes for reconciling enrollment data between Carriers and PSHBS. Companion guides will evolve through collaborative efforts with the Carriers, and other participating entities within the PSHBS ecosystem.

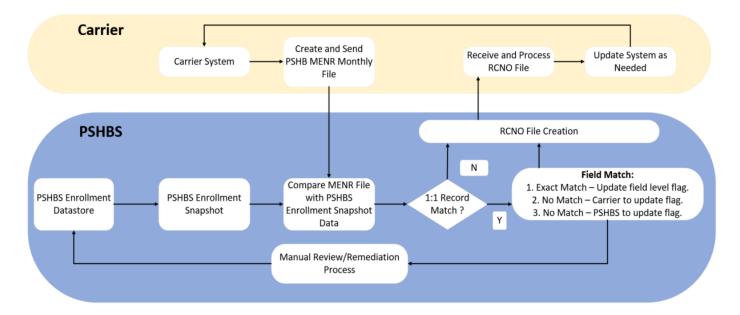
Please note that this companion guide is a supplement to Carrier Letter 2024-11. All information contained here aligns with Carrier Letter 2024-11 and does not replace it.

1.1 Guiding Principles

The Monthly Reconciliation process shall be based on the following guiding principles:

- Carriers are expected to generate the monthly enrollment extract (MENR) files as of 1st day of each month and securely transfer them to the Research and Oversight Repository (ROVR) by the 3rd day of the month.
- PSHBS will process the MENR files and generate the RCNO file containing the enrollment differences between Carrier and PSHB systems.
- The MENR files from each Carrier system should follow the consistent format and data field configurations (e.g., type, character length, etc.) in <u>CL 2024-11</u>.
- Carriers will review the discrepancy reports and act as necessary (e.g., required changes, research warnings) to remediate the findings as appropriate.
- The discrepancy report will identify differences between the PSHBS and the Carrier's system, but in some cases, may still require resolution discussions.

The diagram below depicts a PSHBS Monthly Reconciliation Process:

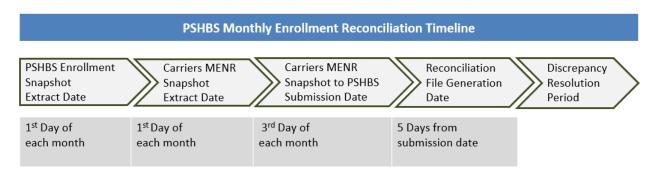


2. Monthly Reconciliation Methodology Overview

2.1 PSHBS Enrollment Snapshot & Carrier System-MENR Snapshot

The monthly reconciliation process starts with PSHBS generating an enrollment snapshot and Carrier System generating MENR snapshot on the 1st day of each month and storing it in their respective data stores.

The following is the high-level timeline to streamline the monthly enrollment reconciliation procedure for both PSHB and Carrier systems:



- Carriers must generate their MENR snapshots as of the 1st day of each month and submit them by the 3rd day of the month.
- Enrollment snapshots from PSHBS & Carrier systems must capture all Postal enrollments, as of the first of each month.

- The exception to this is the first MENR snapshot for PSHB, which will capture Carrier enrollment data as of 12/11/2024 and sent to PSHBS by 12/12/2024. This first snapshot will contain the enrollment records for Plan Year 2025. This 12/12/2024 file is a one-off file that will reflect future enrollments for decisions made during Open Season. Other than this specific one-off file, all other MENR files will reflect current enrollment.
- However, from January 2025 onwards, the extract timeline shall follow as mentioned in the figure above for both Carrier and PSHBS.
- The extract generation date must be captured by both systems for an accurate reconciliation and reconciliation purposes.

2.2 Receive Carrier's MENR File

Below are guidelines for Carriers to generate their MENR extracts for successful acceptance of the file and a timely/accurate reconciliation. All guidelines are reiteration of information in <u>CL</u> 2024-11.

- All Carriers should follow the consistent MENR file format where the schema and data/field's structure should align with the file layout specifications in <u>CL 2024-11</u>. Any deviations to the format will result in rejection of the MENR file and need for resubmission.
- The following table gives the subset of data elements from the MENR file used for the reconciliation process.

Field Label	Description
SUBSCR_ID	A Subscriber is the primary enrollee (e.g., employee, annuitant, or survivor) under PSHB. This field should include a unique number for a given Subscriber's coverage in the PSHB plan. This ID is used to associate all Members under a multi-person plan option. It should not be a Subscriber's social security number. Left justified with leading zeros only where appropriate
MBR_ID	ID that is unique to each Member. All Subscribers are Members, not all Members are Subscribers. Left justified with appropriate leading zeros to match with other files
ANNUITANT_NUM	The Civil Service retirement number assigned by OPM to a retiree or survivor
LAST_NM	Member's last name. Left justified.
FIRST_NM	Member's first name. Left justified.

BIRTH_DT	Member's date of birth. Format: YYYYMMDD.
MBR_SSN_NUM	Member's unique social security number.
SUBSCR_SSN_NUM	Subscriber's social security number. This will be the same as the Member SSN for the Subscriber.
PLAN_CD	3-digit PSHB enrollment code. The same as CLER Reporting Field ENROLLMENT_CODE if reflecting current enrollment code, or previously reported enrollment code if reflecting a change in a prior record such as a termination.
COV_START_DT	Member's coverage start date under the 3-digit PSHB enrollment code reported in Field 16. Format: YYYYMMDD
COV_END_DT	Member's coverage end date associated with enrollment code reported in Field 16. Leave blank if currently enrolled. Format: YYYYMMDD

2.2.1 MENR File Format

MENR file must comply with the requirements specified in the MENR structural layout, including data type, length, and mandatory/conditional fields as per the Carrier Letter CL 2024-11.

2.2.2 MENR Extract File Transfer

Carriers to securely place their respective MENR files in the designated SFTP location as per the Carrier Letter in <u>CL 2024-11.</u>

2.2.3 MENR File Naming Convention

File Type	Naming Format
MENR	PSHB_ATOZ_MENR_YYYYMMDD_YYYYMMDD_YYYYMMDD.txt.gpg
Inbound File	

- The first and second date represent the beginning and end of the reporting period (month), while third date represents the date of transmission.
- File type will be ASCII-encoded, fixed positional file with no padded characters; one record per line.

2.3 Reconciliation Process and Enrollment Reconciliation (RCNO) File

PSHBS will perform a match of enrollment data by comparing the enrollment data from the Carriers' MENR snapshots with the PSHB enrollment snapshot and generate an enrollment reconciliation file (RCNO) with the outcomes. This file from PSHBS will contain the results for each member enrollment that is part of the Inbound MENR File.

Below are the steps outlining the reconciliation process and guidelines for the RCNO file for a timely, accurate and successful reconciliation.

- The RCNO file will be created by comparing the enrollment data from the Carriers MENR snapshots with the PSHB Enrollment snapshot.
- The RCNO file is a pipe-delimited flat file.
- Below is the subset of the data elements from the Carriers' MENR file that will be used in the reconciliation process and the same will be represented on the RCNO file with appropriate Record-level or Field-level flags to indicate the recon outcomes.
- These data elements are denoted under Record type (01) within the Reconciliation outbound file (RCNO) layout indicating the outcomes of the reconciliation.

Field Label	Description
SUBSCR_ID	A Subscriber is the primary enrollee (e.g., employee, annuitant, or survivor) under PSHB. This field should include a unique number for a given Subscriber's coverage in the PSHB plan. This ID is used to associate all Members under a multi-person plan option. It should not be a Subscriber's social security number. Left justified with leading zeros only where appropriate
MBR_ID	ID that is unique to each Member. All Subscribers are Members, not all Members are Subscribers. Left justified with appropriate leading zeros to match with other files
ANNUITANT_NUM	The Civil Service retirement number assigned by OPM to a retiree or survivor
LAST_NM	Member's last name. Left justified.
FIRST_NM	Member's first name. Left justified.
BIRTH_DT	Member's date of birth. Format: YYYYMMDD.
MBR_SSN_NUM	Member's unique social security number.
SUBSCR_SSN_NUM	Subscriber's social security number. This will be the same as the Member SSN for the Subscriber.

PLAN_CD	3-digit PSHB enrollment code. The same as CLER Reporting Field ENROLLMENT_CODE if reflecting current enrollment code, or previously reported enrollment code if reflecting a change in a prior record such as a termination.
COV_START_DT	Member's coverage start date under the 3-digit PSHB enrollment code reported in Field 16. Format: YYYYMMDD
COV_END_DT	Member's coverage end date associated with enrollment code reported in Field 16. Leave blank if currently enrolled. Format: YYYYMMDD

Record-Level Match:

- As an initial step, the PSHBS reconciliation process will attempt to establish the
 1:1 record-level match between Carrier enrollment records with PSHBS enrollment records by using the:
 - I. SUBSCR_ID
 - II. MBR_ID
 - III. ANNUITANT_NUM
- Record-level reconciliation flags mentioned below will indicate outcome of record-level matching –

Record Level Flag	Definition	
F	Unmatched PSHBS Record – No matching Carrier records found	
1	Unmatched Carrier Record – No matching PSHB records found	
М	Exact match – No action required	
N	1:1 Record match with Carrier Action required – At least one of more field flagged for Carrier action	
Z	1:1 Record match with PSHBS Action required – At least one of more field flagged for PSHB action	

Field-Level Match:

 Post completing the Record-level match, as a next step, PSHBS will perform the Field-level matching for the records that has 1:1 match between both the systems. i.e., When the outcome of the record-level comparison results in M, N, Z then for such records the system proceeds with Field level match process for rest of the elements and will include the outcomes in RCNO file.

 Following are the field-level reconciliation flags indicating the outcome of field-level matches:

Field-Level Flag	Definition
М	Exact Match – No Action
I	Non-Match – Carrier to update to PSHB value
F	Non-Match – PSHB to update to Carrier value

- The RCNO file layout will also have the 02-record type elements indicating the highlevel summary.
 - 02 Record Type data elements provide a high-level summary at each plan code level as mentioned in the table below.

Field	Description	
PSHBS FILE PRCSS DT	Extraction Date of PSHBS Monthly	
	Enrollment Snapshot.	
	Format: YYYYMMDD	
MENR FILE PRCSS DT	Extraction Date for MENR Monthly File.	
	Format: YYYYMMDD	
PSHB PLAN CD	Unique value; containing first two digits	
	of PSHB plan enrollment code.	
Total Count of Enrollments	Total number of enrollments associated	
(PSHB Enrollment snapshot)	with the specific PSHB PLAN CD,	
	captured in PSHB Enrollment snapshot.	
Total Count of Enrollments	Total number of enrollments associated	
(Carrier MENR snapshot)	with the specific PSHB PLAN CD,	
	captured in Carrier's MENR snapshot.	

2.3.1 RCNO File Format

As an outcome of the Reconciliation process, PSHBS generates monthly reconciliation enrollment outbound file (RCNO) as a pipe-delimited flat file.

The RCNO layout is provided below. Each data element in the layout shall adhere to the guidelines specified in the document.



2.3.2 RCNO Outbound Recon File Sample

RCNO Outbound Recon File follow the layout provided above and attached here is the sample file.



2.3.3 RCNO Extract File Transfer

PSHBS will securely place the Reconciliation Outbound file in the designated SFTP location from where Carriers can read and process.

2.3.4 RCNO File Naming Convention

The following is the proposed file format to be used to transfer the RCNO outbound file(s) to a Carrier's secure location.

File Type	Naming Format
RCNO File	PSHB_ATOZ_RCNO_YYYYMMDD_YYYYMMDD_YYYYMMDD.txt.gpg

• The first and second date represent the beginning and end of the reporting period (month), while third date represents the date of transmission.

3. Discrepancy Review/Remediation Procedures

The discrepancies on the RCNO file are the result of PSHBS running a match on the enrollment snapshot data. The results will not be perfect. The input files and matching logic may need to be adjusted in the first few cycles. For example, there may be large groups of enrollees flagged with discrepancies that don't impact member coverage and all stem from one root cause.

Discrepancies between PSHBS extracts and MENR extracts may arise for a variety of reasons, including:

- Carrier enrollment records missing data due to potential data transmission or processing issues.
- PSHBS missing field-level data elements for a member.
- PSHBS not reflecting Carrier-modified or Carrier-sourced data.

Once the RCNO file has been transmitted, Carriers will review discrepancies contained within the file. Carriers are responsible for the initial research and initial determination of whether each discrepancy is presumed to be correct in the PHSB System or if additional research is required. In some cases, such as Carrier-sourced data fields, it is expected that there will be discrepancies between PSHBS and Carrier data. At this time, the only discrepancies that need to be addressed by Carriers are those listed in the RCNO file.

3.1 Data Processing Issues

When a discrepancy is identified in the RCNO file, the first action that a Carrier should take is to review the daily 834 files to ensure that there were no file processing issues. If this is identified as the root cause of the discrepancy, the Carrier must update the enrollment record to align with PSHBS extract data. If there is no apparent file transmission/processing issue driving the discrepancy, the Carrier must research the discrepancy further.

3.2 Carrier Systems Missing PSHBS Data

When a discrepancy is found in the RCNO file where the PSHBS extract contains data on a member and the Carrier extract is missing data, the Carrier must update the enrollment record to reflect the data contained in the PSHBS extract.

3.3 Carrier Systems Containing Conflicting Data

When a discrepancy is found in the RCNO file where both the PSHBS extract and MENR extract contain data, but the data between the two sources are different, the Carrier must research the discrepancy further.

OPM has provided guidance that Carriers may edit limited MENR data elements on an enrollment record outside of the PSHBS. These fields are as follows:

Field Name	Header Label	Notes
Subscriber/Contract -	CLIBCCD ID	
Unique Identification	SUBSCR_ID	
Patient Code	PAT_CD	
Unique Member ID	MBR_ID	

Member - Last Name	LAST_NM	This field may only be modified in scenarios where a placeholder name (e.g., "Newborn") was used or when there is conflicting CMS data.
Member - First Name	FIRST_NM	See Member – Last Name.
Member SSN	MBR_SSN_NUM	This field may only be modified if the SSN data present is blank or invalid ("invalid" refers to SSN values of 000000000, 99999999, or instances where family members share SSNs) or when there is conflicting CMS data.
Subscriber SSN	SUBSCR_SSN_NUM	See Member SSN.
Date Enrollment Record Processed	RECD_PRCSS_DT	
Enrollment Coverage End Date, Including Possible 31-day Extension	EXTN_COV_END_DT	This field will need to be modified to include the 31-day extension for all ineligible individuals losing coverage.
Date of Death	DEATH DT	
Bad Address Indicator	BAD_ADDR_IND	
Date Address Last Processed	ADDR_PRCSS_DT	
Address Line 1	ADDR_LN1_NM	This field may only be modified in emergency scenarios where a member is otherwise unable to obtain care or when there is conflicting CMS data. Notification to OPM is required.
Address Line 2	ADDR_LN2_NM	See Address Line 1.
City	CITY_NM	See Address Line 1.
State	STATE_CD	See Address Line 1.
Zip Code	ZIP_CD	See Address Line 1.
Country Code	CNTRY_CD	See Address Line 1.
Medicare Flag	MCARE_FLG	
Date Record Added/Updated	MCARE_LAST_UPD_DT	
Medicare Other Group Insurance Coverage Code	MCARE_CVRG_CD	
Medicare ID Number	MCARE_ID	
Deceased Annuitant SSN	DEC_ANN_SSN	
Pseudo SSN	PSEUDO_SSN	
Date Monthly File Created	FILE_PRCSS_DT	

When researching a discrepancy, if a data field is not one that has been approved by OPM for modification, the Carrier must update the enrollment record to reflect the data contained in the

PSHBS extract. If the data field is approved for Carrier modification, the Carrier must follow the incident reporting process.

3.4 Fields that Require an Incident Report

Discrepancies between PSHBS data and Carrier data are expected in some scenarios and don't require an incident report. For example, since many data elements contained in the MENR are Carrier-sourced and can be modified by Carriers at any given time. As a result, OPM does not need to be notified for most of these changes.

Incident reports should instead be based on discrepancies identified in the RCNO file¹. If there is a discrepancy on an RCNO field that Carriers are not permitted to modify, no incident file should be submitted; instead, the Carrier should update their system to reflect the PSHBS data. Unnecessary incident reports result in additional processing time delayed resolution.

3.5 Incident Reporting

Incident files may be submitted to OPM in two scenarios:

- RCNO Dispute: There is a mismatch between PSHBS data and Carrier data in the RCNO, and the Carrier believes their enrollment record is more accurate.
- Member Update: The Carrier modifies a data element for a member that has been identified by OPM as an acceptable field to modify.

Both incident types are reported to OPM through ROVR, following the file structure and naming convention described in **Appendix: Guidance for Incident (INCD) file submission via Research and Oversight Repository (ROVR)**. OPM recommends consolidating incidents into one file submission when possible unless there are instances that require OPM's immediate attention.

Incident reports must contain the following elements:

- Carrier: Name of Carrier (4-digit code)
- Reporter: Carrier point of contact's name, email address, and phone number. This reported will be contacted for additional information or resolution updates.
- Summary: A high-level overview for why the Carrier's data is correct (50 characters or less).
- Description: A detailed justification for why the Carrier's data is correct and why OPM should update the PSHBS data.
 - Description should provide a detailed explanation for the dispute or change.
 This field may contain PII and other identifying information to indicate the record in the event of subscriber ID or member ID being the discrepant field.
 The description field should also include the RCNO file row number with the discrepancy and date of the incident.
- Coverage Year: The effectuated coverage year during which the incident exists.
- Subscriber ID: The ID used to associate all Members under a multi-person plan option.

¹ The exception to this is address changes. Companion Guide Monthly Enrollment Reconciliation

- Member ID: The unique ID of the member.
- Incident Type: "RCNO Dispute" or "Member Update"

To prevent unnecessary incident reports, Carriers are not required to submit an incident report during the first month in which the discrepancy is flagged if the discrepancy is believed to be a timing issue. For other discrepancies, an incident report should be submitted if the Carrier does not intend to revert to PSHBS values.

If a Carrier does not submit an incident report, the discrepancy will appear in the following month's RCNO file again. If a discrepancy is listed in the RCNO file for three consecutive months, the Carrier must submit a corrective action plan to their Health Insurance Specialist detailing how the discrepancy will be resolved. The Carrier must also provide OPM regular updates on progress towards correcting the discrepancy.

3.5.1 Incident Reporting Template



3.5.2 Incident Reporting Sample



3.6 OPM Review and Resolution

Once OPM has received an incident file, OPM will review and triage each member included. After reviewing, OPM will determine the appropriate next actions to take. If OPM agrees that PSHBS data needs to be updated, no additional action is required by the Carrier; OPM will effectuate the change in the system. If OPM determines that the Carrier's justification is invalid, OPM will submit a file to the Carrier POC identified in the incident report to update their record to match PSHBS. Additionally, OPM may contact the Carrier POC directly if more information is needed to resolve the incident.

3.7 Examples

Example #1

A Carrier receives their monthly RCNO file and sees a discrepancy in PLAN_CD between the PSHBS data and the MENR data. The Carrier should update their record to reflect the PSHBS data. The discrepancy is resolved during the next RCNO file generation and drops off of the report. No incident report is required.

Example #2

A Carrier receives their monthly RCNO file and sees a discrepancy in COV_END_DT on every member in their population. PSHBS shows the final day of the calendar year, while the Carrier data is blank. This is known system behavior in PSHBS at this time, and the Carrier is not

required to investigate further. The discrepancy continues in the following month's RCNO file until a future PSHBS release or RCNO file logic addresses this issue. No incident is required.

Example #3

A Carrier receives a phone call from a member who says that their name is listed incorrectly in PSHBS. PSHBS shows FIRST_NM as "Robert" whereas they prefer to be addressed as "Bobby". The Carrier should direct the member to contact OPM and address the issue there. The Carrier should not make any modification to their record.

The following month, the Carrier receives their RCNO file and sees a discrepancy on FIRST_NM for the individual who called. PSHBS data indicates "Bobby" while the Carrier shows "Robert". The Carrier updates their data to reflect the PSHBS data. No incident report is required.

Example #4

A Carrier receives a phone call from a member who says their address is incorrect and that they are unable to pick up a prescription as a result. The Carrier advises the member to contact OPM to modify their address in PSHBS if possible. The member indicates that there is an emergency and there is no time to do so, the Carrier makes the change in their system to ensure the member is able to receive their prescription.

The Carrier submits an incident file two weeks later to OPM via ROVR with a Carrier Incident Type of "Member Change". OPM receives the file and updates the PSHBS value. There is no discrepancy in the following month's RCNO file since address is not a field used to match, but OPM remains informed and is able to communicate with the member as needed.

Example #5

A Carrier receives their monthly RCNO file and sees a discrepancy in MBR_SSN_NUM for an individual. The PSHBS value and Carrier value are similar but don't match for the ninth digit. The Carrier recently performed a family member verification audit and believes that the documentation they reviewed indicates that the Carrier value is correct.

The Carrier submits an incident file with a Carrier Incident Type of "RCNO Dispute" along with other identifying information to assist OPM in locating the record. OPM receives the file, agrees with the justification provided, and updates the PSHBS value. There is no discrepancy in the following month's RCNO file.

Example #6

A Carrier receives a phone call from a member who says their new spouse is unable to receive their prescription. The Carrier reviews the member's record and finds that the member is enrolled in a Self Only plan, and the new spouse has not yet been added to the plan. The Carrier directs the member to contact OPM to process a QLE for the new spouse.

The member uses PSHBS to process their QLE, selects a Self Plus One Plan, and adds their new spouse. An SF 2809 is generated and transmitted to the Carrier, who processes the transaction. There is no discrepancy in the following month's RCNO file. No incident file is required.

Example #7

A Carrier receives a phone call from a member who recently had a birth in their family. The

member is requesting that the Carrier updates the newborn's name in the system from "Baby" to the newborn's real name. The Carrier updates FIRST_NM and LAST_NM to reflect the true child's name.

The Carrier submits an off-cycle incident report to OPM with a Carrier Incident Type of "Member Change". OPM reviews the report and updates the newborn's name in PSHBS. There is no discrepancy in the following month's RCNO file.

4. Appendix: Guidance for Incident (INCD) files submission via Research and Oversight Repository (ROVR)

Please read and follow these instructions carefully before submitting incident files to PSHBS via ROVR.

SFTP Connectivity

Carriers that are already set up for submitting files to ROVR via Secure File Transfer Protocol (SFTP) do not have to take any additional action. If a Carrier is not set up to transfer files to ROVR, the point of contact information and the outbound IP addresses or URLs from which files will be pushed from the Carrier's organization must be sent to ROVR to start the initial setup. Additional details necessary during initial setup to submit the files using a SFTP account and encryption will be shared with the Carriers at the time of initial setup. Carriers are expected to use the folder designated to them for submitting incident files like monthly enrollment (MENR) files and other file types that are being submitted to ROVR.

File Naming Standards

All Carriers must use the file naming standards, noted below, to clearly delineate their incident file submission to ROVR:

<ProgramID>_<CarrierID>_<FileTypeID>_<TransferDt>.<FileExtension>

- Program ID: PSHB.
- CarrierID: Four-character ID assigned by OPM, for example ATOZ.
- FileTypeID: INCD for incident files.
- TransferDt: File transfer/submission date. It should be in CCYYMMDD format.
- FileExtension: File extension should be .csv.pgp. Incident files should be comma separated value (csv) files and they should be PGP encrypted when submitting files to ROVR.

If the Carriers have the need to submit test files, TST_ prefix should be included in the file name.

Sample File Name

When a Carrier is submitting an incident file for PSHB program on the fourth of December 2024, and the Carrier ID assigned to the Carrier is ATOZ, then the file name will be as provided below.

PSHB_ATOZ_INCD_20241204.csv.pgp

Sample file name with TST_ prefix for a test file is provided below.

TST_PSHB_ATOZ_INCD_20241204.csv.pgp

Carriers should check and update the three IDs and the file transfer/submission date in the file name while submitting while submitting files to ROVR.

If the files are named following the file naming standards and the files are encrypted with the OPM Postal Service Health Benefit System

PGP public key provided by ROVR, the incident files will be passed on to PSHBS automatically without any modifications to the files submitted.

File Resubmission

If there are issues with file naming or encryption, files will be rejected and OPM will notify Carriers for resubmission with necessary corrections. The file transfer/submission date value in the file name should be updated for every file resubmission. This is required to be able to uniquely identify the file, store the file without replacing the earlier file, determine which is the latest file, and prevent issues with duplicates while processing the data in the files. Resubmitting files with the same file transfer/submission date in the file name is not recommended.

File Submission Frequency

OPM recommends that Carriers accumulate incidents into one file submission and submit them between 16th and 19th of the month unless there are instances that prohibit waiting. Carriers can submit one incident file on any given day.

Contacts for File Submissions

Carriers should send the Email IDs of the contacts for communications on incident file submissions to ROVRSupport@opm.gov and keep the contacts updated when there are changes. Carrier's designated Health Insurance Specialist should be included on all communications sent to ROVRSupport@opm.gov.

Once the files are processed in ROVR and passed on to PSHBS, the Carriers will be contacted based on the contact information provided in the incident files for further communications. ROVR will not be able to assist Carriers with issues related to incidents themselves. All communications on incidents should be sent directly to the team working on incident resolution.