



AHCCCS 5010 834 Consortium

Thursday, July 15, 2010 – 10:00 a.m.

AHCCCS 701 E. Jefferson St. – 3rd Floor - Gold Room

Facilitator: Lori Petre

Attendees: Teleconference attendees are shown with an *

Abrazo Health

Veronica Rivera*
JoAnn Ward

ADES

Leo Booth
David Gardner

ADHS

Kevin Gibson
Paula Rendfeld
Terri Speaks

AETNA

Todd Cassel
Maurice Hill
Brian Horgeshimer
Cathy Jackson-Smith*
Alice Johnson
Wendy Lytle
Mark Palmisano*

AHCCCS

Deborah Burrell
Dwanna Epps
Kelly Gerard
Ester Hunt
Cheryl Kelly*
Dennis Koch
Dora Lambert*
Jacqueline McElroy
Brent Ratterree
Michael Upchurch
Rhonda Zollars

AmeriChoice

Karen Saelens

APIPA

Jean Peterson*
Cheryl Prescott

Care 1st Arizona

Anna Castaneda
Margie Reyes
Kathy Thurman

Centene Corporation

Peter Durso*
Antonio Estrada*
Keith Lueking*

Iasis Healthcare

Jaime Perikly*
Jessie Perlmutter

Pima Health Systems

Robert Imperio*

Pinal County

Cheryl Davis
Jennifer Schwartz

Scan Healthplan

Vicki Wright*

UHC

Debra Alix
Carolyn Anderson*
Helen Bronski
Nancy Mischung
Kelly Morken*
Jane Upton*

UPH

Maria Sanchez*
Kathy Steiner*

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OVERALL STATUS UPDATES

Lori Petre

Lori Petre opened the meeting by greeting everyone and stating that the Consortium format for today's meeting would be somewhat similar to the last Consortium, in that we will discuss 5010 items first then other technical items not related to 5010. All documents for this meeting were placed on the Web. Therefore, if anyone is missing anything from the meeting, please look there. If we (AHCCCS) advised an update, we will revise the documents and repost them.

- 834 and 820 testing:

In regards to the 834 and 820 testing overviews, Lori originally sent out to key contacts on July 2. On July 7, these were revised and sent out again on Friday. Lori pointed out the accompanying schedules were to have begun on July 5, but started on July 6. AHCCCS will run test files at least through the end of September. This documentation sets out how we will be going about this. We have a dedicated test environment. There was a limited refresh on July 5. In the current schedule, there are no defined plans to refresh again. If it becomes necessary, please let us (AHCCCS) know. We will run according to the published schedule. Lori presented a "calendar" showing when and what things will be run. Dennis Koch is working so that all test files will be available by 7 am whenever possible. But, we will try to make sure everything is available by no later than noon.

Question was asked, "What will be in the test files?" Dennis stated that they are pulling data through to the test environment. If you require specific test cases, let Lori and Dennis know. Lori will add a paragraph to the testing overview documents describing what the test data will be.

Our original intent for testing the 834 monthlies was to try running regular monthlies twice a month. However, due to how these processes are constructed, we can only run monthlies once a month. Therefore, the originally scheduled monthly on the calendar for the 16th has been removed, but monthly on 30th will run. Lori will publish a revised calendar after the meeting.

So, there will be three monthlies scheduled during the testing period. We have been discussing ideas in case we need more than three monthlies.

As we make changes and updates to the Testing Overviews and Calendars, these documents will show revision number and date, so that you can use the most recent.

Also, note that not every scenario happens in production, so if there is anything specific that you want to see, let us know. Also, let Lori know when you have come to the end of testing for each transaction.

Draft companion documents are also on the Web. Again, these will have revision numbers and dates. Dennis has already identified some revisions needed so we will be working on revision #1. These documents are for your use, so your comments, etc. are important. All documents will be placed on the website.

If you encounter problems with any aspect of testing, let Lori and Dennis know and they will correct as soon as possible. Be sure to include all available information in an e-mail in secure mode.

Lori went on to thank everyone for getting their monthly Milestone reports back to her in a timely manner. She hoped to get back to each plan in the next week or so with questions.

- Revised AHCCCS 5010 timeline:

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Current AHCCCS 5010 timeline by transactions was shared, showing our dates for each of the 5010 transactions. We (AHCCCS) are sharing dates for not only those transactions we trade with you, but all transactions such as the 270/271, 837 claims – these are not mandated dates, you can choose your own dates within the limits of the law, but we are sharing these to make you aware of our plans.

- 834/820 dates for plan implementation:

We will have testing overviews, testing calendars, and companion documents for all transactions that you are welcome to come back. Lori asked everyone if it would be helpful in a future meeting for us to share with you our requirements and design for some of the transactions not traded directly with the plans (i.e., 270/271, etc.). Anyone interested should e-mail Lori.

- Other HIPAA-Related Updates:

In regards to ERRATA and Addenda, Mary Kay has prepared a more detailed overview. This document shows the original transaction itself (base transaction) with the changes listed [errata and addenda]. The column on the right contains the mandated federal regulation. The ERRATA E1 for January 1 was a printing error, contained in all transactions with that date. Appendix A, basic and extended character set were missing a few characters. A1 and E2 will be of more interest. 270/271 had a lot of changes. It has not yet gone to the publisher as final. At the June X12 meeting in Texas, we voted and there are no changes. If there are any changes between here and the publisher, we will let everyone know. 277 actually made it to the publisher. Mary Kay highlighted in yellow the 275 that was approved in June at X12. Also, we have included NCPDP, which is easier. Highlighted in pink is the emergency change discovered in the 837I. The issue is that, the 837I requires a HCPCS Code on all secondary claims in the payer paid loops. It is an open issue document at www.wpc-edi.com. Mary Kay showed in the document the problem is open for 15 days and then will vote and send to publisher. CMS is waiting for this before completing the Federal Register Documents to add all Errata and Addenda documents to the Federal Mandate. It should be out at the end of August. Mary Kay stressed that ERRATA and Addenda changes are free. If you ordered the TR3s through DISA/WPC, you will receive an e-mail stating they are available.

Final Meaningful Use regulations are out. Eligible Providers have a set of core elements and new optional elements. Provider gets to pick what they want to use. Mary Kay stated a major provider database was being built, but she had no specific details.

Mary Kay went on to state that if you (attendees) were not working on 5010, you were behind. WEDI has a clinical meeting on I10 on Monday morning. It is very clinical. The co-chairs are made up of two doctors and the third is a coder.

ICD10 committee will be meeting in September, so if people have issues with cross-walk, this is a public meeting.

There is talk of bringing actuaries together regarding all data in 9 and 10. CMS has been directed to create a standard cross-walk. Again, the I10 committee will be meeting in September, so if people have issues, let us know.

Lori advised on a recent change to the NUBC Point of Origin codes. That presented a challenge related to non-medical vs. medical code sets, effective July 1st. Please review the encounter communications recently distributed by the Encounter unit for more information.

Lori advised the attendees that AHCCCS was starting to look at things related to Health Care Reform such as the October 1 CCI/MUE editing requirements and the 7/1/2011 requirements related to Present on Admission and Health Care Acquired Conditions.

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- **Adult Benefit Changes:**

In regards to adult benefit changes, Lori sent out a matrix last week summarizing the comments/questions received from the plans as well as related AHCCCS responses. Lori asked that everyone please take a look at it in draft form. If you now have additional questions, please let Lori know so that she can publish document in final. General questions are at the bottom.

Lori made a few changes to Adult Benefit Changes System Impacts Matrix based upon these comments and distributed this document. There were no changes to the codes, except for a few dental codes. Three were dropped and there were three changed to transplant only. Lori advised that if there were no questions, then in the next few days she would finalize and resend this document also. Lori added a third worksheet to this document that outlines in more detail the physical therapy limitations. Please look at this sheet and let us know if you have any questions. Additional question was asked regarding an ETA on when the new PT tracking screen and report will be available. Answer - We should be able to share in week or so.

Lori then asked if there were any other questions on benefits. There were none.

- **Co-Pays:**

Next, the discussion moved to co-pays. The Consortium was advised that there were no changes to what was discussed last time. Included with service matrix (final service codes), final design documentation are two extracts, please review these documents. Please go through everything one last time and let us know if you have any questions. Otherwise, these documents will be published as final.

A question was asked concerning co-pays. Is AHCCCS providing test files? No plan for this. However, Dennis stated that 834 5010 test files will include this information and if a 4010a test file is needed, please let us know.

- **Future Meetings:**

For future meetings, Lori will send out proposed list of Agenda topics. Lori stated that she will generally try making the Agenda pretty diverse, so she needed feedback on topics.

Question was asked regarding 275 electronic attachments. The Agency would like to see electronic attachments. To clarify, the 275 is not currently mandated, so most providers cannot do it, but we expect that it soon will be mandated. The Agency is looking for providers to be able to use electronic attachments through any options that can be offered, not just the 275 at this time. We (AHCCCS) would like to see how you plan or are accomplishing this in your plan. For example, Lori stated that Banner has electronic attachments now, where instead of sending them to you, you have permissions to access them directly from their system, this would count as an electric attachment option. We are monitoring 275 and will let you know if status moving forward.

A further question was asked regarding timeframes for 5010 encounters. Lori advised that the Agency is making a lot of progress. Lori stated that the timeline for encounters requirements and design phases actually run through about November, we will begin to share more on this in September,

A lot of the work on these transactions is restructuring of our internal processes to make them more flexible to accommodate future versions in a timely and efficient manner due to anticipated shorter turnaround requirements and no enhanced funding for future revisions. Lori advised that AHCCCS will keep everyone apprised of progress.

There being nothing further, the meeting was adjourned at 11:06 a.m.

Corrections to the minutes should be directed to NpiConsortiumCoordinator@azahcccs.gov.