AHCCCS Health Plan Technical Consortium

Thursday November 13, 2014
2:30 p.m.

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

Facilitator: Lori Petre

Handouts: PowerPoint

Attendees:

AHCCCS
Gina Aker
Howard Beam
Kim Bodary
Deborah Burrell
David Mollenhauer
Lori Petre
David Rudnick
Jacqueline Solomon
Terri Speaks
Rhonda Zollars

Bridgeway
Nancy Mauer

Care1st
Brent Ratteree

DBHS
Ruth Zona

Health Choice
Melissa Small

Health Net
Dee Dee
Bruce James

Mercy Care
Julie Dyer
John Monte

Mercy Maricopa
Vickie Payah

Phoenix Health Plan
Shawn Hunt
Vincent Menezes
Juan P
Jeff Schleidt
Joann Ward

United Healthcare
Deb Alix

Attended via GOTO: Tia Martinez, Mark Quincey, Susie Knobbe, BILL, Kim Bolton, Laurie K Schacht, Dan Parker, Jeffrey Greenspan, Susan Gilkey, Robert E Oetken, Rob E Reede, Cathy Karson, Mary Kaehler, Cheri Burian, Owen Blackshaw, Michelle Puente, Lindsay Miller, Maria Sanchez

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Welcome   Lori Petre

Lori Petre welcomed the attendees and any new participants.

✉ *…email comments and questions to lori.petre@azahcccs.gov*

System Updates   Lori Petre

Lori presented a PowerPoint presentation covering various AHCCCS technical projects.

A. Cost Sharing (Copay) Updates:
   - January 1st changes have been delayed pending CMS approval. This has to go through a state plan amendment process.
   - We anticipate this delay will be a minimum of 90 days but will likely be in excess of this. We will make sure you get as much notice as possible once we can move forward.
   - Matrix could change based on CMS's review so we are holding off on sending that out.
   - No changes to the current populations, services or amounts of copays at this point.

B. Encounter/Claims Data Exchange/Blind Spots Updates:
   - Medicare Paid Claims Data (Part D; Medicare FFS) is in progress.
   - D-SNP is complete.
   - We are still working through the part D data. This will be integrated into encounters and we are testing this. At this time the plans already receive this data, but as a separate not integrated file.
   - These quarterly data extracts are based upon claims and encounters adjudicated in the reporting quarter. If we are running a report of July-Sept, then it is only those things adjudicated during those months only. It's not a cumulative report
   - AHCCCS is also evaluating Contractor requested elements including revenue code line level detail information and recipient behavioral health category as supplemental or additional data for the quarterly Data Exchange.

C. APR-DRG's:
   a. We are pleased with the progress you have been reporting to us.
   b. Technical Workgroup meeting materials available at http://www.azahcccs.gov/commercial/EDIresources/EDITechnicalWorkgroups.aspx
   c. 3 Key Forms of Project Documentation – AHCCCS Policy Document (updated Track Changes version currently posted). AHCCCS Rule and AHCCCS DRG Calculator.
   d. Make sure you are using 3M version 31 or its equivalent of the APR-DRG product.
   e. Monthly milestone reporting can be stopped but Lori still needs the weekly claims status reporting through the end of the calendar year.

   QUESTION: We do our reports on Monday morning so it is ok to get them to you Monday morning?
   ANSWER: Lori mentioned that was fine since she doesn't do anything with them until Monday afternoons. So submission on a weekly basis on either Friday or Monday is acceptable.

QUESTION: A question was asked about changes to any documents and will you send an email to everyone to let them know.
ANSWER: Any time we post something new, or changes to documents like the policy document, the calculator or the rule, Lori will also try to send a notification to everyone.

D. ICD 10 Project Updates:
   a. The AHCCCS ICD10 Project implementation is still on target for 10/1/2015.
   b. Testing with Trading Partners began in January of 2014 and will continue through at least September of 2015.
   c. ICD10 Effective Date – October 1, 2015 (OP Dates of Services or IP Dates of Discharge).
   d. AHCCCS will be supplying a limited set of required Testing Scenarios that all Contractors must successfully complete prior to implementation (timing TBD). This will probably be 50 or less scenarios. This will be similar to DRG testing.
   e. Ongoing Contractor Milestone Reporting and Tracking should continue until 10/1/15.
   f. Post implementation status reporting requirements are current under development. This is through CMS.
   g. Lori will continue to update everyone on changes.

QUESTION: Is there any way to use the existing dashboard for CMS post implementation status reporting?
ANSWER: Lori responded saying not for what they are asking because it is trending over time. You might be able to for some things like denied percentages although they may not have the same meaning. They haven't formally rolled this out to all the states and we have an advisory board that we sit on and were talking about this last week.

QUESTION: We are looking for testing partners if anyone is interested.
ANSWER: Lori said she Dave can send the list of everyone who has tested out to the group.

Action Item: Dave to send list of current testing partners.

E. FQHQ/RHC Project:
   a. This is the where the payment mechanism is changing.
   b. The technical workgroup page has all of the information: http://www.azahcccs.gov/commercial/EDIresources/EDITechnicalWorkgroups.aspx
   c. The billing manual won't be final yet but is still in draft form which we hope to distribute shortly. There will be some examples included.
   d. The workgroup is looking at some issues raised by the FQHC/RHC's which may result in the delay of this project.
   e. There will be much more to come on this.

QUESTION: A question was asked about the look back period.
ANSWER: Lori said that relates to the whole incident to and its very situational; and is one of the issues being looked at in relation to the FQHC/RHC's comments/questions.

F. PCP Rate Parity Project Updates:
   a. AHCCCS will make quarterly cost-settlement payments to the Contractor based upon adjudicated/approved, error free PCP Rate Parity encounter data.
   b. Contractors will be required to refund payments to AHCCCS for any reduced claim payments in the event that a provider is subsequently "decertified" for enhanced payments as result of subsequent audits or other changes to providers.
   c. A650/A655 Edits changed to external pends for the current cycle.
   d. We are hoping most of the fixes will bring the pends down.
   e. There is a meeting on December 2nd and invites will go out through your compliance officers specific to the outcomes and next steps of the first completed attestation audit.
       i. A provider can become eligible two ways for PCP rate parity: They can either attest that they are board certified in one of the specialties or attest that 60 % of their claims fell into those codes that are eligible for PCP rate parity.
       ii. The law states we have to conduct an audit of each group of which we have been doing since August of those who attested at the 60%. There are some that we have to switch the indicators back and you will have to recoup your payments.
       iii. You will receive a specific package about why we have to do this and the tools you will need to cite to them in your letters. This package also contains a list of the providers, any encounters paid under the enhanced rates from you. We will give you a specific time frame for those adjustments and ask that you notify us. We will talk about defensive disputes and appeals on those recruitments and what the language needs to look like in your letters. You will receive a package for each of the 23 providers.
       iv. Lori will send everyone a list of those 20 plus providers and she is asking everyone to please look at the list carefully as you may see someone you use often and could get their board certification.
       v. We will be sending the providers a letter soon so they know this is coming.
       vi. The provider PCP indicator will not change until after the meeting of the time frame we agree to.
   f. The catch up reports have already gone out, the quarterly reports through June went out, and Lori will check on the July through September reports. Error reports have not been sent yet. Error report samples were sent to those plans who requested them.
   g. The process for giving you the report on the backend has 2 purposes: One is so you can verify the report. The bigger purpose is so that we can run it through and do this really complicated report to calculate how much we claim from the federal government. Your payment is based on report one.
   h. Lori believes all the corrections have been made to reports 1 and 2. We are testing now and will be starting monthly runs.
   i. Ninety percent of the problems on the error report had to do with the allowed amount and the paid amounts being the same. So you end up getting a zero enhanced payment due to the plan.

G. AHCCCS CRN Expansion Project (999 Lines) Updates
   a. AHCCCS 999 UB Lines HIPAA compliance changes proposed to begin mid to late 2015 and implement in late 2015 to early 2016.
   b. Will fully remediate the PMMIS system to expand the CRN by 1 additional digit for all form types; i.e.… AHCCCS CRN's will go from 14 digits to 15 digits in length.
   c. Will impact and require testing with Contractors and Trading Partners.
   d. We will share these detailed timelines as soon as we can.

   ACTION ITEM: Lori to follow up with Julie in ISD regarding the timeline for the CRN Expansion.

   QUESTION: Will the CRNs all be numeric? No alpha characters allowed?
   ANSWER: Lori responded correct.

H. Greater AZ SMI Integration Updates
   a. Plan is for ADHS/BHS to award two contracts one for southern AZ GSA's and one for northern AZ GSA's to serve as an Integrated Contractor (providing both behavioral and physical health services to SMI members) and the RBHA for all other members within these GSA's.
   b. The RFP responses are currently under evaluation with a team at BHS.
   c. AHCCCS assessment of impacts, required systems changes and timelines in progress.
   d. Lori has put together one comprehensive document that covers every population with in AHCCCS and it says if you are this then this is what your behavioral and physical health is and here are your choices. This is currently under internal review.
   e. We will be sharing some key points about what this project will look like and plan IDs will be assigned which we will share with you.

I. GMH/SA Duals Integration Updates
   a. AHCCCS will identify Medicare/Medicaid dual eligible General Mental Health (GMH)/Substance Abuse (SA) members and will assign their AHCCCS Health Plan to provide both their behavioral health services
   b. AHCCCS assessment of impacts, required systems changes and timelines in progress.
   c. We will share key updates in the future and this has a 10/2/2015 implementation date and testing will begin sometime next summer.

J. Encounter Data Audits
   a. AHCCCS OIG has been conducting assessments or inappropriate billing practices based upon processed claims and encounters data.
   b. A sample of the first of these audits, inappropriate use of 50 vs. RT and LT modifiers, will be provided for plan validation and response prior to provider contact.
   c. We meet internally on this and will be updating our manual and cleaning up the tables.
   d. OIG is working on a sample that Lori will able to provide to each of you. It won't be all inclusive but please go through and assess this report within the timeframe we set.

K. TPL Workgroup Updates
   a. Gina sent the group an update earlier today.
   b. Gina did say a response will be needed from you by December 5, 2014.
   c. The people Gina included in the email are those that attended the workgroup and she included your compliance officers.

L. Other Updates
   a. Pharmacy/NDC related Pends (N020 and N027 are examples). She finally received approval to update over 100 of those codes but not early enough to get into the cycle. She is working on the RTUs to hopefully get those updated.
   b. Lori is looking at the VCF related pends and the logic was pulled yesterday. Lori will get something out soon.

QUESTION: Brent asked about the S370 dental
ANSWER: Lori will meet with Dr. Salek and get an update out on the dental S370.

QUESTION: Jeff asked about copays and would the nonemergency and ER also be delayed?
ANSWER: Lori said everything that is a change is currently done is delayed.

Breakout Workgroup Meetings (DRG. TPL, Others?)   Lori Petre

No workgroups in addition to those already in place or outlined in the minutes were identified as needed at this time.

Next Meeting   Lori Petre

The next Technical Consortium will be held TBD. Watch your emails for more information.

There being nothing further, the meeting was adjourned.

Corrections to the minutes should be directed to Kimberly.Bodary@azahcccs.gov.