

**State of Ohio
MACSIS System Implementation
Project and Operations Planning Meeting
April 4, 2002**

MINUTES

Present:

J. Wiant, W. Hull, J. Raab, J. Hughes, K. Cluggish, L. Daniele, Jp. Martin, J. Fraser, E. Hood, A. Bergefurd, M. Herrel, D. Day, G. Grove, B. Cluggish.

Call In:

L. Bosserman, K. Schwartz, C. Couch, N. Burns, B. Taylor, B. Reynolds, K. McCloskey, C. Freeman, J. McIntosh, L. Clay, B. Hefner, R. Yeley, J. Sager, D. Dunn, T. Chambers, P. Quinn, T. Boyer, S. Baker, M. Glanville, J. Mauser, S. Kirschner, P. Garretson, J. McCluggage, C. Neff, P. Coates, S. Robinson.

Prepared By:

V. Waller

Topics Discussed:

- Special Topics
 - 100K Claim Problem
 - Load Balancing
 - Input on 835 and Payer Reporting
- Project Updates
 - HIPAA
 - BTAC
- User Group Updates
 - Member
 - Claims
 - MIS
 - BH Module
 - Finance
 - Outcomes
- Board Global Issues

Discussion/Decisions:

1. L. Daniele reported on the 100K Claim Problem:

- On 4/1/02 large batch of claims went thru – 35,000 not act. pay records, 30 boards were affected. Spot-check and perform checks on group claim detail, comp. code (act. pay record). Thinking about scattering claims from week to week. Laura will send out reports on delay of the claims (3/26/02) and how to spot check. Also will continue to identify and fix problem. J. Wiant is looking at a long-term solution 1) past mod 2) new version.

2. J. Wiant reported on Load Balancing:

- Load Balancing needs to be enforced across the boards. Why are the boards with cash flow problems sending in late claims (1-2 months)? Joe will talk to M. Spurgeon at the Ohio Council about placing article of load balancing with the provider in their newsletter. M. Herrel commented that only 1/3 of the providers are Ohio Council members. C. Neff was wondering about the BTAC issues and if load balancing was made to the boards. W. Hull stated that working more with the providers (not in-face attitude), but be more reconciling. Load claims 2nd week as opposed to 3rd week, so there will be more of a balance. Most of the Boards are balanced and received in timely manner. J. Wiant will look at the BTAC guidelines to make sure that they are still within range. The need to address this issue further was voiced.

3. Input on 835 and Payer reporting:

- There needs to be a joint meeting with representatives from MIS and Finance teams to determine what the needs are to be facilitated for the 835 standard. They agreed to meet on April 16th at 10am, M. Herrel will notify MIS and Finance teams of location.
- J. Wiant reminded everyone that the State will not be able to process 837 production files before July 1, 2003. But, if an agency or board can produce test, the State would be interested in obtaining copies for testing purposes, contact J. Martin or L. Daniele.

Project Updates

• **HIPAA Update:**

- Administration has lessened on private issues. EDI is still on the way (code sets are not on HCFA agenda); the delay was in submissions w/NASMHPD and NASADAD.
- J. Wiant stated that he had already sent a letter to Director Hogan.
- Potential Statewide EDI is probably not yet statewide. Electronic format is available on the website, all boards/agencies should have it by 8/12/02.
- Some of the POP team members did not receive the HIPAA letter that went out to the Board Executives, etc. in March '02. V. Waller will attach the letter to the minutes.
- Services delivered before cutover would have to be coded for 6/30/03. Billing under contract before 7/01/03, must use old format and after 7/01/03, must use new 837 format.

• **BTAC Update:**

- J. Wiant will look into the recommendation for Load Balancing.
- Nothing new to report at this time.

User Group Updates:

- **Members –**

- J. Raab reported they would start working the Medicaid span bi-weekly.
 - Extract programs are not Med Elig.
 - Identifying claims modified to ODJFS the 10th and 25th of each month and claims over 365 days are flushed.
 - Will discuss the Double-Loop process at the Claims meeting on April 12th.
 - Next Members Meeting will be on April 18, 02 at the Dept. of Commerce, 6606 Tussing Road in Reynoldsburg from 9:30am-3:30pm.
- **Claims –**
 - K. Cluggish reported that there is a new Claim procedure, she will email the POP team and go into more detail at the Claims Users Meeting on April 12th.
 - M. Herrel and D. Day reported that the policy guidelines would be coming out in the near future after review. Still waiting for input from state auditors and will send out at a later date.
 - L. Daniele stated that production dup claim problems were 25% of batches are dups and Medicaid. The State runs NSF files against Hublink, compares them to the master database and read the files next day.
 - Boards that are not following the Level 1 checking are affecting other boards. K. Cluggish will email boards that need further clarification on procedures in claims.
 - Next Claims Users Group Meeting will be on April 12, 02 at the Dept. of Commerce, 6606 Tussing Road in Reynoldsburg from 9am-3pm.
 - **BH Module –**
 - E. Hood reported that 144 providers sent in live claims data. Reminded the POP team members to review, pre-scrub resubmit list.
 - Diagnosis, mismatch and EDI codes the scrubbing should be able to decipher. The duplicates BH – prescrubbing will filter out.
 - Problems with the closures not matching the admission records.
 - C. Neff mentioned that Montgomery, Eastern Miami Valley and Summit boards are also incorporating NEXUS product with the State. The NEXUS products will be used within the next 30-45 days by 31 boards to scrub their BH data.
 - E. Hood said that there would be a BH scrub next week.
 - W. Hull strongly encouraged boards that are not yet submitting Behavioral Health data to start doing so. And that the two largest boards that are sending in BH data are MH boards.
 - J. Wiant will ask at the next MSPA/QI meeting issues regarding BH Modules.
 - **MIS Update –**
 - Jp. Martin mentioned that the SOT AIX servers would be down this weekend. Should not affect anyone.

- The Diamond 7.2 version is being tested.
- **Finance Update –**
 - C. Neff reported that there is a possibility of ASCII files to export claims information.
 - M. Herrel and D. Day said there were problems with the 90W plan codes.
 - D. Swank will facilitate the Finance email group, members, minutes and schedules.
- **Outcomes Update –**
 - G. Grove reported that the testing was going well. There were 162 providers, 41 boards and 900 test files.
 - Outcomes User group meeting on 4/04/02 at 1:30pm on state bridge line (614) 644-1097.
 - J. Fraser said that there were 296 files waiting for production (have been run through pre-check). Meeting with contractor Friday to discuss issues.

Board Global Issues

- Montgomery Board – has no user control temp plates defined.
- P. Coates is experiencing problems with Diamond responsiveness. L. Daniele mentioned that with large claims running from Monday-Friday it is to be expected. Benefit accumulators do not work in x-files.
- Beef-up hardware or upgrade with DAS in the future (\$\$).
- Hardware and re-design might help with speed. Report any unusual slowness to the MACSIS HelpDesk.
- Medicaid Contract – MH and ADA is in negotiation with ODJFS over inter-agency until 7/1/02.
- Proc. P's – raising ceilings and changes.
- Modifiers – can't deny claims over 300 days.
- S. Kirschner reported that the Medicaid Reconciliation Meeting will be on 4/9/02 at Office of Support Services from 1-4pm, and the follow-up meeting will be on 4/24/02 from 8:30a-12:30p. Finance, MIS and agencies will be attending.

Single Board Contact WebPage (W. Hull) –
<http://www.odadas.state.oh.us/rfc/Boards/Boards.html>

Next Meeting:

May 2, 2002 from 9 a.m. to 11 a.m. in Room 1165 of the State Office Tower.
 The call-in phone number is 614-644-1098.