

State of Ohio
MACSIS System Implementation
Project and Operations Planning Meeting
April 3, 2003

MINUTES

Present:

J. Martin, L. Daniele, K. Cluggish, J. Hughes, M. Herrel, J. Raab, W. Hull, J. Wiant, B. Cluggish

Call In:

K. McCloskey, K. Taylor, R. Yeley, J. McIntosh, C. Fratalonie, B. Tobin, Y. Quinn, M. Glanville, C. Freeman, P. Garretson, E. Hood, J. McCluggage, S. Baker, J. Averill, C. Couch, N. Burns, S. Robinson, T. Becker, G. Hall, C. Neff, J. Mausser, L. Clay, B. Heffner, J. Dillion, A. Parker, J. Howard, T. Boyer, B. Miller, S. Kirschner, J. Keaton and P. Coates

Topics Discussed:

- Special Topics
 - Board Rate Review Meeting
- Project Updates
 - HIPAA
 - Code Set Status
 - Test Files (ANSI 837 4010)
 - EDI Documentation
- User Group Updates
 - Members
 - Claims
- MIS
 - BH Focus
 - Finance
- Board Global Issues

Special Topics

A Board Rate Review Meeting has been scheduled for the MIS/Finance primary board contacts on May 6th at Dept. of Agriculture, 8995 E. Main Street, Reynoldsburg, Ohio from 10am-4pm. Peg Eichner and the EDI subcommittee will notify the boards on who to send to the meeting, as we get closer to the date, due to limited space.

Project Updates:

HIPAA

- Code Set Status
 - HIPAA Alert #6 recently went out and is posted to the web. Due to limitations in Diamond software, all non-healthcare procedure codes were reduced from 7 bytes to 5 bytes. This change is needed for duplicate checking to run as discussed in the EDI training sessions. Currently, the last 2 bytes of the procedure codes are used by boards/provider for local pricing differences. Under HIPAA, the 5th bytes of each non-healthcare code can be used for local pricing, and codes will be built in Diamond to accommodate 10 different prices per code (e.g. M1620, M1621, etc. – M1629). On the AOD side, two codes overlapped with actual HCPCS codes, so they were changed to be unique: A021000 will be A1210 and A022000 will be A1220. All new codes have been posted to the MACSIS-HIPAA website.
- Test Files (ANSI 837 4010)
 - Test files are still in the informal stage, notify Jp or Peg Eichner or (best choice) the MACSIS Support Desk (macsisupport@mh.state.oh.us) if you have any 837P 4010's to test. The files should be FTP'ed (in ASCII mode) to your ./hipaa/input directory. Tier 2 testing to come will allow you to request an 835 return file.

- EDI Documentation
 - AOD rollup guide has a number of incorrect items on it; please see updated webpage for correction.
 - First Vendor Call-In was on 4/2/03, with 20-30 software developers. All claim to have the Ohio MACSIS HIPAA 837 in place and ready to go and are working on the 835.

Users Group Updates:

- **Members** – John sent out a modified workplan a couple of weeks ago. There are plans to allow member records to be accessed for changes for maintenance in the old environment once the new HIPAA environment is in production. New members will need to be added only in the HIPAA environment or by the MACSIS Support staff. Any new member added in the old environment will be deleted immediately. Any user creating more than three member records in the old environment after June 30, 2003 will have their access removed until they have attended a retraining class. The class will be held in the Rhodes State Office Tower every other Friday afternoon beginning July 18, 2003. Each board needs to choose a default plan and panel. They do not need to build a new plan, just choose one of their existing plans and panels that is going to be in Diamond 8+. As members are moved from Diamond 5.3 to Diamond 8+, any members whose current plan does not exist in Diamond 8+ will be assigned the default plan and panel.
 - Enrollment of 27 members – invalid birth date (41776) with default as 111901. ODADAS plan to work with ODYS (Youth Services) and the Board. We will honor a two-way communication with Deb Downs and boards. When Deb moves existing member from a board plan to the ODADAS plan for ODYS, effected board member coordinator will be notified. When Deb moves the member back to the board plan, coordinator will also be notified. Boards must not move ODADAS Plan members out of the ODADAS Plan nor should boards create span dates which would cause ODADAS claims to be denied or rejected.
 - We are continuing to see Board staff making changes to members who are not members of their group and plan. There was a discussion as to what action should be taken against staff that fails to follow the rules. It was decided that this issue should be addressed, but would be tabled until a later date.
 - We all need to be more stringent with ending ID (initials).
 - BAAs (Business Associate Agreement) – everything will be outlined when job changes or employee leaving in share security codes.
- **Claims** – Claims User Group holding off until correction is in before scheduling next meeting.
 - Claims Correction Policy Status – The HIPAA Governance Committee has approved the basic policy. However, the EDI Sub-Group is waiting for (a) the Medicaid Policy staff to obtain final approval from ODJFS in writing that they will allow the 320-day deadline (for boards to deny claims based on date of service at the time the claim is received) and (b) on the sub-committee assigned to design the claims correction form to submit the form "draft". We hope to have these two issues resolved in two weeks.
 - EDI Subgroup meeting today from 1:00-3:00pm.
- **BH Focus** – AOD providers reporting is @ 65% with 40% data required, Dual providers reporting 63% with 26% data required and MH providers (which are not mandated) reported 29% with 12% data. There have been 540,000 records sent thru BH Mod process with 95% posted and 5% rejected.
 - Will no longer be deleting BH records that have been passed on to Washington, DC. You will have to go thru the proper channels of notifying them yourselves.
 - BH Reporting Group - Under development – working with vendors for summary reports, will be meeting on April 11th from 10:00-11:00am on the bridge line (614) 644-1098.
 - The next BH Focus meeting will be on April 10th from 9-10:30am on the bridge line (614) 644-1098.
- **MIS** –
 - The MIS User Group meeting for April 9th has been postponed.
 - Tom Chambers has accepted a draft to again co-chair the MIS User's Group.
 - Reminder that Jp/Kendall are accepting TCIP registration forms – a new form is required for (coming) access to the new HIPAA environment. The forms can be (snail) mailed or faxed to 614-752-6474 (% Kendall Fells).

- **Finance –**
 - Needs volunteers to dry run intervention programs into Diamond.

Global Issues:

- ODMH will be sending out the FY 2004 agreements and revised Expense Budget Overviews (047), hopefully by the end of next week.
- In the last POP minutes it stated that currently agencies bill Medication Somatic for the Physicians for Diagnostic Assessment, when actually only a few agencies bill in that manner. Agencies should budget and bill Diagnostic Assessment as that service. Beginning July 1, 2003, they should budget and bill the Physician code and the Non Physician code separately. Each code will have its own rate ceiling.
- Agencies can still bill for services provided with other professionals. They are considered essential others. They are to be billed using the new “UK” modifier. The “UK” modifier is to be used to identify services provided on behalf of the client to someone other than the client. See HIPAA Alert No. 4.
- Non-Medicaid Women’s plan? Board’s can specify crosswalks to be used when loading member records into the new HIPAA environment by contacting John Raab specifying the old plan and identifying what new plan to use for these members. This must be done by April 30, 2003. If boards do not provide a list and members are currently enrolled in plans that no longer exist when HIPAA environment is established (this includes Women’s Grant Plans) they will be assigned to the default plan that was communicated to John. If a board fails to communicate a default plan John will assign a default for each Group. Default plans must be requested by boards, no later than May 15, 2003.

Next meeting – May 1, 2003 from 9:00-11:00 in Room 806A of the Rhodes State Office Tower.
The call-in phone number is 614-644-1098.