

**All Plan(s) System Technical
February 18, 2015
8:00 a.m. – 11:00 a.m.
MEETING NOTES**

Chair: Sheila Anders, AllCare
Co-Chair: Johanna Watson, FamilyCare

Workgroup Website: <http://www.oregon.gov/oha/healthPlan/Pages/CCO-System-Technical.aspx>

ATTENDEES:

Angie Torres (PH Tech); Carla Jones (IHN CCO); Charles Sorgie (Health Share); Cristie Lende (CareOregon); Cynthia Ackerman (AllCare); Dayna Steringer (WOAH); Del Texley (Trillium); Johanna Watson (FamilyCare); John Mapes (PacificSource); Kathy Cereghino (Kaiser); Katrina Alspaugh (Umpqua Health Alliance); Keri Holloway (PH Tech); Louie Weber (FamilyCare); Maggie Rollins (PrimaryHealth); Matthew Byrne (GOBHI); Misty Mastin (GOBHI); Monique Evers (PH Tech); Patricia Wilson (EOCCO); Rebecca Preston (PH Tech); Sheila Anders (AllCare); Sonya Saucedo (PH Tech)

BY PHONE:

Aleesa Ogden (Primary Health); Angela Leach (Cascade Health Alliance); Brooke Lamb (IHN CCO); Dacia Farley (Umpqua Health Alliance); Eryn Womack (IHN CCO); Heather Medina (CareOregon); Jane Hannabach (PacificSource); John Eyman (AllCare); Krista Lovaas (WVCH); Laura McKeane (AllCare); Lori Gillespie (AllCare); Naomi Brazille (ABCT); Patrick (AllCare); Rachel Arnold (Health Share); Rod Meyer (CareOregon)

OHA/MAP STAFF:

Carrie Shike (MAP); Chris Norman (MAP); David Fischer (MAP); Kory Murray (MAP); Lydia Gutierrez (MAP); Mary Durrant (MAP); Michelle Benson (MAP); Pam Learned (OHA/OPAR); Patricia Krewson (MAP); Richard Labarthe (MAP); Stacy O’Connell (MAP); Suzanne Hart (MAP)

Introductions / Structure of Meeting

<i>Review notes from January meeting</i>	Notes from January meeting were reviewed and approved as written.	
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Workgroup Name Change	<p>Recommendation was made to change the name of the workgroup to “All Plan(s) System Technical” to mirror the name change in the workgroup charter.</p> <p>Per group discussion, workgroup supports this change.</p> <p><u>Action Item (Michelle):</u> Agenda and note templates will be revised to reflect this change.</p>	
SSN in the capitation (820) and enrollment (834) transactions	<p>Per Rhonda Busek, a decision was made to discontinue using social security numbers in the 820/834s due to security/privacy concerns. MAP will work with Plans on how to transition this info out of the 834. This will be a phased approach and MAP will work with Plans to mitigate as much as possible.</p>	
Encounter Data Discussion		
— <i>Provider Enrollment Status</i>	<p>Encounter only enrollments received 1/13 are currently being processed. FFS is on 2/2.</p>	
— <i>Encounter Accuracy Issues/1% Withhold</i>	<p>Encounter Accuracy Issues will be addressed in the RAP Data Validation Workgroup.</p>	
— <i>Traditional Health Workers</i>	<p>Creating a provider type. A change request has been submitted.</p>	<p>Keep on agenda Add to Issue Tracker</p>
— <i>Definition of “Clean Claims” and data pull (Info from ASU)</i>	<p>Definition of “Clean Claims” will also be discussed in the Data Validation Workgroup</p>	
— <i>Provider Validation</i>	<p>Mary reported that a task has been written to remove encounter only providers that have not been included on any claim for more than 3 years. This will help limit the number on the spreadsheets for validation. This will be added to the issue tracker once it’s received a change order number. Plans will be given notice in advance of any changes. A workgroup may be created.</p>	<p>Add to Issue Tracker</p>

	<p>PH Tech requested guidance on how to use the provider file appropriately. An explanation was given that the provider file may have inaccuracies if updates are not provided to MAP on encounter only enrollments (i.e. changes to name, address, terminations, etc.). It is important for Plans to let MAP know of these changes in order to help the provider file be more accurate. Additional discussions will continue on the taxonomy codes in the provider file.</p> <p>Many billing provider issues have been fixed. Billing provider pends are being corrected as they are identified.</p>	
<p>— <i>Flexible Services</i></p>	<p>Letters have been sent to Plans by MAP giving them feedback on the policies which were submitted in October 2014; Plans have until March 6th to respond to MAPs letters.</p> <p><i>*This topic will be taken off the agenda as a standing agenda item.</i></p> <p>Group had questions about the guidance document that was created in the Flex SVS workgroup last year. Will this document be revised? Will the workgroup be reconvened?</p> <p>-Housekeeping updates will need to be made to the document i.e. change the name from flex services to non-medical services</p> <p><u>-Action Item (Rhonda/Mary):</u> Creation of a guidance document around encounter data/flex services</p>	
<p>— <i>School based provides (must bill under sponsor)</i></p>	<p>Always bill under the sponsor fully qualified health centers (FQHC). A question was asked about what if the school brings in an outside provider to do services and who bills.</p>	<p>Update: In order to answer the question, more specific information about the provider and the services being performed is necessary.</p>

— <i>Attestation of providers</i>	This has been completed. Very few stragglers may be left. *Will be removed as an agenda item.	
EDI Transactions		
— <i>834 Release 3 Update</i>	Release 3 is on track to implement the end of March. HP is testing. The only change format wise will be for redetermination date. Plans will be given approximately 3 weeks with a test file.	
OTHER AGENDA ITEMS		
FFS Fee Schedule	Per Nathan Roberts, FFS fee schedule will be published by March 1 st ; the anesthesia section will look different. (Base rate x RVU)	
Duplicate Provider #'s	<p>Per Del Texley, can't see all of the taxonomies, need to get to that level of data without having to go through the liaison. This has been a longstanding issue with the provider file. MAP will look to see if there is any way to add more taxonomy codes and/or an indicator as to which one is primary. MAP is also working internally to avoid errors when enrollments are completed.</p> <p><u>Action Item (Mary):</u> Reconsideration of a change request to create a provider file from MMIS rather than the MAP data warehouse.</p>	
Retro terms and enrollments	<p>A lot of this has to do with newborn/mother issues. How do we put mom and baby together? What is the process for enrolling a newborn? The group discussed how this is going and how these cases are being corrected.</p> <p>MAP is working on cleaning up some process pieces. Will share information with the Plans when available.</p> <p>— <i>Suggestion from Maggie Rollins was to have a more formal process of acknowledgement, and a signature of retro enrollments. Cynthia Ackerman asked that potential consequences be considered when</i></p>	

	<i>creating a process.</i>	
Redetermination Update	<p>Fast Track dates were pushed out from the end of January to the end of February. 30,000 closures around the state. Expedited members are expected to close in March. Working on creating a file of upcoming closures to send to Plans. Letters will be going out this week.</p> <p>High call volumes continue at the call center. Hold times are under 1 hour.</p> <p><u>Action Item (Chris):</u> Confirm what month's redets will be included in the 3/31 file?</p>	
New Group Codes	<p>Children (ages 1-5) were missing from the PERC list. This has been corrected per Patricia Krewson.</p> <p><u>Action Item (Michelle):</u> Send out Medicare TBQ Member Codes document and Summary of Member Codes Documents to group.</p>	(Documents have been posted to the workgroup website 2/23/15)
ICD-10 Testing	<p>Bariatric and Maternity Kick documents were sent to the group before the meeting.</p> <p>Who are the ICD-10 contacts from each Plan? Mary asked that the Plans send her this information.</p> <p>MAP is still looking for Plans to participate in a pilot, contact Mary if interested.</p> <p><u>Action Item (Mary):</u> Check-in with Metrics to see if everything is on track.</p>	
Johanna Watson, Nomination	Group approved Johanna Watson as the co-chair of this	

for Co-Chair	workgroup.	
Other	Mary will not be at the March meeting. Trudy Watson/Patricia Krewson will be filling in for her.	
Standing Agenda Items		
<i>Issue Tracker – (handout)</i>	The issue tracker was reviewed and discussed.	
<i>MMIS Calendar</i>	January-March 2015 MMIS calendars have been sent to the group, and are posted on the workgroup website.	
Public Comment	There was no public comment.	
Future Agenda Items/ Parking Lot	<ul style="list-style-type: none"> ▪ Incentive Measures Update ▪ Common terminology ▪ ICD 10 Update 	
Adjourn	<p>Meeting was adjourned at 10:30am.</p> <p><i>Meeting ended at 10:30am to accommodate the RAP Data Validation Workgroup, which will be held from 10:30am-11:30am February-May)</i></p>	

Next Workgroup Meeting:

March 19, 2015

8:00am-10:30am (*Meeting will be ending at 10:30am to accommodate the RAP Data Validation Workgroup, which will be held from 10:30am-11:30am)*

HSB Conference Room 160

Toll free dial-in: 888-278-0296

Participant code: 310477