

INDIAN HEALTH SERVICE
Business Office Coordinators, HIPAA Coordinators,
Information System Coordinators and Headquarters
Minutes for March 4, 2004
HIPAA Business Transactions Awareness Conference Call

Present

<i>ITSC</i>	Carl Gervais, Sandra Lahi, Adrian Lujan, and David White
<i>Headquarters</i>	Frank Martin; Elmer Brewster, Health Science Administrator; and Robert Harry, Operations Research Analyst
<i>Aberdeen</i>	Ray Grandbois, Associate Deputy Director, Joan Azure, BOC & Dori Junker <i>Fort Thompson:</i> Colleen Laverdure and Lovetta Whitemouse
<i>Alaska</i>	Lue Rae Erickson, BOC, ANTHC
<i>Albuquerque</i>	John Rael, BOM; and Sandra Winfrey, AAO Executive Officer
<i>Bemidji</i>	Margo Bahr, Site Manager; and Jan Thunder, BOM, Red Lake <i>White Earth:</i> Julie Heisler
<i>Billings</i>	<i>No Response. E-mail status report provided before the call</i>
<i>California</i>	Jan Bergemann, Area ISC; Toni Johnson, IT Specialist; and Cynthia Twiss, IT Specialist
<i>Nashville</i>	<i>No Response</i>
<i>Navajo</i>	Roland Todacheenie, BOC
<i>Oklahoma</i>	Mary Beaver, BOC
<i>Portland</i>	David Battese, IT Specialist, Leah Tom, BOC
<i>Phoenix</i>	Pat Gowan, Health Information Management Consultant; and Violet Kenny, Medical Assistant Supervisor, PIMC
<i>Tucson</i>	Kurt Priessman, Budget Analyst

Meeting Began at 10:00 AM

Roll Call	Roll call was taken. (Additional participants were received from the Conference Center that was emailed to David White.) David White continues to fill in as ITSC HIPAA Transaction Coordinator. Our permanent HIPAA Transaction Coordinator is scheduled to begin on March 22 nd .
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Top Item of Discussion: Trailblazers Part A and B. Modification to CMSs Contingency Plan for HIPAA Implementation CR 2981

An email distribution notice was made today on the above document and Sandra stated that clarification of this email was being made to both Trailblazers Part A and B. Initial responses stated that this document was providing an additional waiver or more time to convert over to the 837 format. Once clarification was made, Sandra would send an email out to the mail group with the clarification.

Minutes	The 02/19/04 Conference Call Minutes were approved by the group and posted to the IHS website.
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AGENDA ITEMS ADDRESSED

Item #2 – Items of Follow up from ITSC Training held in February 2004

997/824 Error Report software design

The effort continues toward developing a tool to assist users with understanding the Error Report function of the 837 processing. A meeting was scheduled with technical support but was cancelled due to Trailblazer 837 testing now become a priority since the deadline date was set for March 16, 2004. ITSC is still researching options and is still moving forward with this initiative. This issue remains a priority to resolve.

National TPA/BAA legal guidelines

The BAA is completed. The TPA is being discussed between Acquisitions and the General Counsel. Still trying to determine who can sign the TPA. Kurt raised the question if this an Acquisitions or Business Office responsibility? Other Areas had questions on this item. Each Area may need to decide who will sign the documents.

National Training Online Modules

Frank Martin is formulating a plan for training – looking at establishing 3 levels of training. He needs to know what the training requirements are prior to development. It is requested that each Area e-mail Frank with ideas as to what you see the training needs to be. Need to establish the scope of work for the training module. If you're interested in serving on a group to determine training requirements, contact Sandra or Frank and the details can be worked out via conference call.

Indian Health Service CMS representation

Elmer Brewster reported that he had Trailblazer contacts including Denise Mohling and Cheryl Cowan who are the POCs at Trailblazers but was still unclear as to what issues the group wants

to take forth. It was recommended that he review the issues list regarding what the group would like addressed to CMS. One recommendation was to make error reports more readable and did CMS understand the technical level of detail each site is required to learn. Elmer stated that the group really needs to determine what the issues are. Kurt would call Elmer later to discuss.

HIPAA Training CD

Sandra stated that the HIPAA Training Manual (Word format) that was burned on the HIPAA Training Workshop CD was corrupt and unusable. ITSC has worked with Navajo Area and a new document is now available. If you need a copy of the HIPAA Training Manual in Word format, contact David White or Sandra.

Item #4 -- Reports from Area Office Leads/ITSC – (1) What Advances Have Your Area Made Towards HIPAA Business Transaction Testing? (2) Do you have a schedule for providing TCS Training sessions? 3) How is everyone addressing the Trailblazers Part A and B (March 16, 2004 deadline for 837 testing?)

Aberdeen	Joan reported that she has began prepping the files for submission to Medicare by setting up the table maintenance files. Will send a Medicare file today (03/04/04) for one of six of the hospitals. There is a possibility of problems reading the error reports. Aberdeen may submit a waiver which will depend on the response on the new Trailblazer issue that was sent out today.
Alaska	AK Medicaid is diligently working with Tribal sites directly. AK Medicaid has participated on conference calls and in workshops to ensure everyone is working from the same page of instructions. Lue Rae has been providing HIPAA information and training. Sandra will send Lue Rae the RPMS setup information regarding Trailblazer Part A and B.
Albuquerque	John Rael reported they had a meeting and provided the training to all of the Albuquerque Area sites last week. They also held a conference call in which ITSC provided training on TB Part A and B 837 testing. They are getting instructions together for working with “Grandfathered” facilities working under larger facilities. There is a question whether NM Medicaid’s drop dead date is March 29 th . Confirmation would be done.
Bemidji	Jan stated that she had received Medicare instructions and will start testing. MN Medicaid will also begin testing. The training and setup will be provided with Cass Lake, Red Lake, and White Earth.
Billings	Per Cynthia Larsen via e-mail: Actively testing with Montana Medicaid (March 31 st deadline), Wyoming Medicaid (January deadline), Part A Medicare for one site (2 more to go), and haven't started testing Part B (12 sites) as of today. Billings Area will be submitting a Waiver to Medicare for an extension on the March 16th date.
California	Toni Johnson reports they had their first HIPAA Awareness Conference call - mostly with RPMS sites. Have set up their HIPAA

	<p>training for April 15th and 16th. They've asked the sites to assign a HIPAA POC. Have taken the ITSC Transaction Status Reports and modified them for their own needs in the California Area. Toni is also setting this up for each site to update and maintain. California Area is not involved with Trailblazers. Have been testing with MediCal – files have passed. Have tested with UGS and only had 4 or 5 errors on their error reports.</p>
Nashville	<i>No updated report provided.</i>
Navajo	<p>Roland Todacheenie reported that most Navajo sites are up and running with AHCCCs. Some sites are still testing with NM Medicaid. Navajo Area has also scheduled area wide HIPAA training for March 9th and 10th. Still discussing the possibility of submitting a waiver for Trailblazers but will discuss with higher management.</p>
Oklahoma	<p>Mary Beaver reported that Clinton Hospital is testing Medicare Part B. Received error report and sent to Albuquerque for assistance. Oklahoma Area is concerned about the upcoming March 16th deadline. Lawton is ready to begin testing Part A and B Medicare. Oklahoma Area has been live with Oklahoma Medicaid for over a year.</p>
Portland	<p>David reports that he is working with Medicare Trailblazers Part B since notification was received. Yakima Indian Health Center went into production a couple of weeks ago. Portland Area has noted problems with submitter IDs to three tribes with problems. Other issues included Burns-Paiute Health Clinic having their password taken away and Muckleshoot Tribal Clinic has been out of the office until today (03/04/04). Most other tribes have switched over to production in lieu of testing. Portland is still testing in Oregon and still developing with Washington. Portland Area is still having issues with the Provider Taxonomy file. Some files have been mapped, some have not. Per Carl Gervais, the files that have not been mapped need to be added to the Provider Taxonomy file via FileMan. Also had issues with the 837 (Professional). Within Page three, there are specific fields that are not available. Another issue is 3P cannot have more than four diagnoses tied to one CPT code which overloads the 837 submission. On the Provider page, the provider that is assigned to the CPT level of service code is not tied to the provider on the 837 format. Oregon Medicaid has also switched their form so he is working to retest this form. Washington Medicaid also developed an envelope that is difficult. There is still an issue with the Provider taxonomy issue. Is there a written procedure on how to populate Fileman with this taxonomy? ITSC will follow-up on this item.</p>
Phoenix	<p>Pat Gowan reported due to Charolett not being on the call. Violet from PIMC stated that PIMC has met with the Area Office and is willing to offer assistance/guidance for 837 submissions with all of the Phoenix sites. PIMC will be sending Medicare Part A and B claims today. Is</p>

	also working on an Ambulatory Surgery crosswalk.
Tucson	<p>Tucson has submitted successful claims to AHCCCs except for Ambulance services and Ambulatory Surgery. Kurt requested from Violet a copy of their crosswalk. AHCCCs is still including local codes and Tucson is still addressing these. Tucson is in production with Medicare A and B. Tucson is having no problems with reading error reports. Future plans are to test with AZ BCBS who uses the methodology of Edifax. Tucson is still moving forward with PNC Bank but is still working to resolve TPA issues with AZ BCBS.</p> <p>Question of why Tucson is not having problems reading error reports. Kurt responded that Dave Walton wrote a script program to make the error report into a more readable format. IT fully understands the error codes and can identify why the error codes are creating and where in RPMS the error codes are coming from. For example, many are redundant as Patient Registration errors or ICD codes. IT is now teaching the billers to read the error reports.</p>
ITSC	<u>837 Third party billing, p5 status</u>
Sandra Lahi	<p>Efforts are being made to get Patch 5 developed. Linda Lehman has now been added as back-up support for Shonda regarding 837 testing and development of Patch 5. Items to be included will be needed released nationally because it includes some 837 edits.</p> <p>Choctaw has been successful with MS Medicaid and MS BCBS. Patch 4 is certified with Trailblazers Medicare Part A&B. Letters of certification are available if needed, contact Sandra Lahi or David White.</p>
Sandra Lahi	<p>835 AR Version 1.7 patch 5</p> <p>Accounts Receivable v1.7p5 added expanded functionality to Remark codes and has added inquiry option. This patch will be ready to be tested in the next couple of days. Patch 5 will also include Pharmacy POS Remarks code which were identified at Portland Area when we were testing Med-co file. Patch 5 will also include the most recent update of the Adjustment and Reason codes released in the February update of the WPC.</p> <p>With the PNC Bank initiative, more payers are being identified to include Medicare Part B, MEDCO Pharmacy, Aetna, Mailhandlers, MN Medicaid and CIGNA. Medicare Part A and B is also ready.</p> <p>For testing Trailblazer Part A and B 837, ITSC will work with you to get converted over. We will also provide training if needed. It is also recommended that Areas look internally for Superusers to assist.</p> <p>Some other recommendations that came up:</p> <ul style="list-style-type: none"> • When testing 837s for one service unit, have one point

	<p>of contact for each facility to coordinate the testing. More than one end user gets confusing when trying to respond to issues</p> <ul style="list-style-type: none"> • It is requested that all 837 testing be logged into the Service Center (ITSC Helpdesk) so we can track the issues. When logging in, please follow this format: 837 testing, Name of payer, Name of site. ITSC will contact you as soon as possible but this format will move the issue higher on the priority listing • Each Area should identify IT support to be ready to assist. Sometimes local routines will need to be installed and it would be easier to have the Areas install than having our development staff install the routines. It will help ease our workload so we continue with HIPAA software development/maintenance. <p>Toni Johnson volunteered to provide IT support for the California Area. <u>270/271 – Eligibility Inquiry & Response</u></p>
<p>Sandra Lahi</p>	<p>There have been some inquiries from Infinity from Oklahoma and Medifax from Phoenix Area. Phoenix Area has negotiated an area wide contract with Medifax. It was also noted that Indian Health Service is still working on a nationwide contract with Quovadx as a possible clearinghouse solution for Areas.</p>

QUESTIONS/CONCERNS/DISCUSSION

Sandra will find out today about the new Trailblazer email today and guidance on how to apply for a waiver and send an email out with information.

NEXT CONFERENCE CALL

The next call is scheduled for Thursday, 3/18/04 at 10:00 AM (MST). The conference call-in number is: (888) 531-9517 (Passcode: 46879).

MEETING ADJOURNED AT 11:10 AM