

Congratulations AUC on a great 2015!

4 National Submissions

- Response to HHS request for information (RFI) regarding Health Plan ID
- Comments to NCVHS ACA Review Committee
- Proposed new business scenario to CORE
- Preliminary adoption of AUC change request to X12 (CR 1359-continue AMT segment MinnesotaCareTax reporting capability in v7030)

50 meetings
of AUC TAGs and
groups

By the numbers:
AUC 2015

ICD-10
collaboration

2 new TAGS:

- ACO Data Analytics
- Home Health PA form

9

rule changes

- 4 companion guide revisions adopted
- 5 companion guide revisions proposed

5

Best practices
reviewed, revised

Congratulations AUC on a great 2015!

We start this month's AUC update with a cover showing some of the highlight's of this year's AUC work, with contributions to the maintenance of the state's uniform companion guide rules, submissions to national level health care administrative simplification, two new Technical Advisory Groups (TAGs) involved in two new areas, and collaboration to implement the ICD-10 coding system. The AUC's 2015 activities and accomplishments were discussed at the final AUC Operations meeting on December 8, 2015 (see related meeting summary in the TAG updates section.).

Recent AUC voting results



Illustration from Retail-Awards.com

The AUC Operations Committee recently concluded an email vote to unanimously approve the items below. For additional background regarding the items put to a vote, please see the [November issue of the AUC Update](#).

Recent AUC voting results:

- The September 2015 AUC Operations Committee meeting minutes were approved;
- Dave Andersen was approved as co-chair elect in 2016. He will be joined on the 2016 AUC Executive Committee by Tony Rinkenberger, who will replace Ann Hale as 2016 co-chair, while Ann will replace Bob Aliperto as immediate past chair. A recognition of the AUC leadership contributions and transitions is planned as part of the AUC's next regular quarterly meeting, March 8; 2016;
- The AUC approved a limited, annually-renewable, statutorily-permitted exception to the state's requirements for only the standard, electronic exchanges of health care benefit eligibility inquiries and responses (270-271). The exception applies only to the

exchange of 270-271 transaction with payers not subject to federal HIPAA regulations;

- An AUC statement in support of the rulemaking procedure used in adopting the Minnesota Uniform Companion Guides was approved and submitted to the Minnesota Department of Health (MDH) as part of public comments about the process being collected by MDH.

In a separate TAG vote, the Home Health Prior Authorization (PA) Form TAG approved a single, uniform home health PA form. The form will be emailed to the AUC Operations committee in the near future for a vote.

Coding Corner

The Coding Corner is a collection of updates, tips, and pointers intended to help address common medical coding issues and to pass along coding news and updates suggested by the AUC's Medical Code TAG and other sources.



Note for the following Coding Corner article: ICD-9-CM's condition coding instructions included one form of an "excludes" note that could be interpreted and applied two different ways, and was therefore subject to some confusion. ICD-10-CM addressed the issue by creating two different excludes notes—Excludes1

and Excludes2—to distinguish between the two possible situations or interpretations. The Excludes1 note is “used when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.” The Excludes 2 note “indicates that the condition excluded is not part of the condition represented by the code, but a patient may have both conditions at the same time.” In late October 2015, the federal Centers for Disease Control (CDC) identified circumstances where some conditions included in Excludes1 notes should be allowed to both be coded, and thus might be more appropriate for an Excludes2 note. Additional information and clarification from CDC regarding this issue is provided below.

Coding Corner –

CDC Provides Guidance for ICD-10 Excludes1 Notes

(Submitted by Medical Code TAG member, Cindy Norling, CCS-P, COC)

The Centers for Disease Control and Prevention (CDC) have corroborated circumstances identified where some conditions included in Excludes1 notes should be allowed to both be coded and thus might be more appropriate for an Excludes2 note. Responding to several questions regarding the interpretation of Excludes1 notes, the CDC issued guidance to allow conditions currently subject to an Excludes1 note to be reported together when appropriate as shown in the two examples below because no changes to Excludes notes or revisions to the official guidelines can be made until October 1, 2016.

Example 1:

If the two conditions are not related to one another, it is permissible to report both codes despite the presence of an Excludes1 note. For

example, the Excludes1 note at code range R40-R46, states that symptoms and signs constituting part of a pattern of mental disorder (F01-F99) cannot be assigned with the R40-R46 codes. However, if dizziness (R42) is not a component of the mental health condition (e.g., dizziness is unrelated to bipolar disorder), then separate codes may be assigned for both dizziness and the mental health condition.

Example 2:

Code range I60-I69 (Cerebrovascular Diseases) has an Excludes1 note for traumatic intracranial hemorrhage (S06.-). Codes in I60-I69 should not be used for a diagnosis of traumatic intracranial hemorrhage. However, if the patient has both a current traumatic intracranial hemorrhage and sequela from a previous stroke, then it would be appropriate to assign both a code from S06- and I69-.

The guidance above was originally posted on October 19, 2015 and was updated on October 26 to include the following statement: “This coding advice has been approved by the four Cooperating Parties—the American Health Information Management Association (AHIMA), the American Hospital Association (AHA), the Centers for Medicare and Medicaid Services (CMS), and the National Center for Health Statistics (NCHS). This advice will also be published in the 4th Quarter 2015 issue of Coding Clinic for ICD-10-CM and ICD-10-PCS.”

You may view the full CDC October 26, 2015 Excludes1 Notes Update at the [CDC website](http://www.cdc.gov/nchs/data/icd/Interim_advice_updated_final.pdf) (http://www.cdc.gov/nchs/data/icd/Interim_advice_updated_final.pdf).

A final caution and reminder below regarding the excludes1 and excludes2 notes, as well as the “Holiday Song Quiz,” were also submitted as part of this month’s Coding Corner feature.



Reminder: Closely monitor for internal system edits as well as claims edits from the payors or your clearinghouse. Before appealing on the basis of the CDC October communication, review the documentation to verify that it clearly supports that the two conditions affected by the Excludes 1 note are not related (different areas, conditions, unrelated sign and symptom).

Watch for further guidance in the AHA Coding Clinics and with the October 2016 updates.

TAG Updates

Information about AUC committees and Technical Advisory Groups (TAGs) and their activities, including meeting minutes, can be accessed from the [AUC TAG page](http://www.health.state.mn.us/auc/activity.htm) (<http://www.health.state.mn.us/auc/activity.htm>).

Meeting agendas and other materials are posted on the AUC website in advance of meetings. TAG meeting schedules and information are also available on the [AUC calendar page](http://www.health.state.mn.us/auc/calendar.htm) (<http://www.health.state.mn.us/auc/calendar.htm>).

With the exception of the Medical Code TAG, TAG meetings are generally conducted via teleconference rather than in-person. All AUC meetings are open, public meetings.

Note: The AUC reviews Minnesota Uniform Companion Guides (MUCG) approximately annually for any revisions and updates to ensure that the guides remain up to date and accurate. The review and revisions occur generally during the second half of the calendar year. During the next several months then, it is anticipated that several TAGs will be assisting the "annual

maintenance" of the companion guides in addition to any other projects or tasks that they are completing.

Operations Committee

The Operations Committee met for its last regularly scheduled quarterly meeting of the year on December 8, 2015. The Committee reviewed and discussed a number of items also reported on in the November Update, and reviewed the accomplishments shown on the cover of this issue. The Minnesota Department of Health (MDH) thanked the Committee for its contributions to the maintenance of the Minnesota Uniform Companion Guide rules, its support of ICD-10 implementation, including participation of several members as resources at a two-day ICD-10 clinic associated with this year's annual Rural Health Conference in Duluth, Minnesota, and for other activities, including formation of the Data Analytics TAG to help recommend more standard ACO member files. As follow-up to the meeting discussion, the Committee also subsequently completed several related email votes (see related story on page 2).

HOME HEALTH PRIOR AUTHORIZATION FORM TAG

The Home Health Prior Authorization Form TAG completed and approved recommendations for a single, common form for home health prior authorizations. The form will be emailed to the AUC Operations Committee for further review and a vote in the near future. No further meetings of the TAG are scheduled at this time.

Executive Committee

The Executive Committee met December 7 for a series of updates and to make final plans and preparations for the December 8 Operations Committee meeting.

Medical Code TAG (MCT)

The Medical Code TAG met on December 10 and reviewed a coding request regarding tele-

dentistry services. MDH also requested the TAG's assistance in providing coding information as part of this newsletter (see related "Coding Corner" article, page 3) and other related outreach, education, and technical assistance materials.

ACO Data Analytics TAG

The TAG met on December 16 to review responses to requests for examples of ACO member file data dictionaries and record layouts from TAG members. During the review and discussion of the responses at the meeting, the TAG agreed to use HIPAA standard transaction formats for exchanging key demographic variables of interest, as well as a single common file layout based on a pipe-delimited text file. MDH agreed to provide additional information and examples regarding the HIPAA standard formats and how they would be applied in exchanging the data of interest. MDH recently completed the analysis and examples and forwarded them to the TAG for review. A follow-up TAG email vote to approve these products is pending the TAG's current review. If approved by the TAG, the materials will be forwarded to AUC Operations for review and an email vote.

The TAG is next scheduled to meet on January 14, 2016. However, if the TAG completes its work via email and email voting prior to the meeting date, the meeting will likely be canceled. As with all TAGs, meeting information for the ACO Data Analytics TAG will be posted on the [AUC Calendar](#).

TAGs that did not meeting December 2016

The following TAGs did not meet in December:

- Eligibility
- Claims DD
- EOB/Remit
- Acknowledgment
- Legislative.

National News



CAQH CORE REJECTS AUC PROPOSED OPERATING RULE BUSINESS SCENARIO

As previously reported in the [January 2015](#) and [November 2015](#) AUC Updates, the AUC submitted a proposed change in early 2015 to federally mandated operating rules via the national authoring organization for the rules, CAQH CORE. The proposal was to adopt a new additional business scenario describing remittance advice coding for situations in which claim adjudication cannot be completed because information needed from the patient is missing, invalid, or incomplete.

The AUC's proposal was reviewed and voted by the delegated CORE group, the CORE Code Combinations Task Group, earlier this month. The proposal garnered only 30% support from the Task Group and will therefore not be recommended for further consideration. In a meeting held December 15 to discuss its decisions, the Task Group noted that:

- Whereas the AUC's proposal recommended a single Claim Adjustment Reason Code (CARC) update, and several related Remittance Advice Remark Codes (RARC), several CORE Task Force members felt that, to be valid, CORE-defined Business Scenarios should include multiple associated CARCs;

- One respondent felt that the situation described in the AUC proposal could be addressed through an already existing CORE operating rule business scenario (“Scenario #3”);
- One respondent did note that advising the provider what information is needed from the patient in a consistent way may expedite the process, or enable the provider to assist in obtaining information.

CORE seeks and reviews recommendations for additional operating rule business scenarios annually. For more information about the process, please visit the [CORE website](#).

CMS UPDATES “ICD-10 WHEEL”

The Centers for Medicare & Medicaid Services (CMS) recently released an updated [ICD-10 Website Wheel for Medicare Fee-for-Service \(FFS\) providers](#). The [Website Wheel](#) provides easy access to official resources on CMS ICD-10 web pages including:

- [ICD-10-CM/PCS Frequently Asked Questions](#)
- [Medicare Learning Network® \(MLN\) Products](#)
- [Medicare FFS Provider Resources](#)
- [CMS Industry Resources](#)
- [Statute and Regulations](#)

WALTER G. SUAREZ, MD, MPH RECEIVES WEDI’S 2015 SULLIVAN AWARD

Walter G. Suarez, MD, MPH, Executive Director of Health IT Strategy and Policy of Kaiser Permanente received the national Workgroup for Electronic Data Interchange (WEDI) 2015 Sullivan Award on October 28, 2015. The award is named in honor of former HHS Secretary, Louis W. Sullivan, MD who created WEDI in 1991 and recognizes individuals who have distinguished themselves through their leadership, vision and

achievements in advancing the overall quality and efficiency of healthcare.

Dr. Suarez has served a variety of health care leadership roles, and in 2015 he was appointed the Chair of the National Committee on Vital and Health Statistics (NCVHS). He is familiar to many AUC members as he previously served as President and CEO of the Institute for HIPAA/HIT Education and Research, CEO of the Midwest Center for HIPAA Education, Executive Director and CEO of the Minnesota Health Data Institute, and in various senior policy positions in the Minnesota Department of Health.

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Comments or questions about this newsletter? Please contact us at the [AUC mailbox](#): health.auc@state.mn.us.

AUC January – February 2016 Meeting Calendar

AUC meetings currently scheduled for January and February 2016 are listed below. For more information, please see the [AUC calendar page](http://www.health.state.mn.us/auc/calendar.htm) (<http://www.health.state.mn.us/auc/calendar.htm>)

Date/Time	Event	Location
January 4 8:30am - 10:30am	Executive Committee Meeting Executive Committee Meeting Information	HealthPartners-Bloomington 8170 Building, 1st Floor - Walnut Room
January 14 8:30am - 10:30am	ACO Data Analytics TAG Meeting ACO Data Analytics TAG Meeting Information	TBD
January 14 9:00am - 12:00pm	Medical Code TAG Meeting Medical Code TAG Meeting Information	HealthPartners-Bloomington 8170 Building, 1st Floor - St. Croix Room
January 19 1:00pm - 2:30pm	EOB/Remit TAG Meeting EOB/Remitt TAG Meeting Information	Teleconference & WebEx only
January 27 2:00pm - 4:00pm	Eligibility TAG Meeting Eligibility TAG Meeting Information	Teleconference & WebEx only
February 1 8:30am - 10:30am	Executive Committee Meeting Executive Committee Meeting Information	HealthPartners-Bloomington 8170 Building, 1st Floor - Walnut Room
February 3 9:00am - 10:30am	Claims DD TAG Meeting Claims DD TAG Meeting Information	Teleconference & WebEx only
February 10 8:30am - 10:30am	ACO Data Analytics TAG Meeting ACO Data Analytics TAG Meeting Information	TBD
February 11 9:00am - 12:00pm	Medical Code TAG Meeting Medical Code TAG Meeting Information	HealthPartners-Bloomington 8170 Building, 1st Floor - St. Croix Room
February 16 1:00pm - 2:30pm	EOB/Remit TAG Meeting EOB/Remit TAG Meeting Information	Teleconference & WebEx only
February 24 2:00pm - 4:00pm	Eligibility TAG Meeting Eligibility TAG Meeting Information	Teleconference & WebEx only

Season's Greetings!