



AUC UPDATE

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Revised Claims Companion Guides Scheduled for Release Approximately June 1

The AUC recently completed an email vote unanimously approving revisions to the Minnesota Uniform Companion Guides (MUCGs) for the claims transactions (837 Professional, 837 Institutional, and 837 Dental). The revisions incorporate a number of clarifications and technical updates, and were completed as part of “annual maintenance” of the guides to ensure that they remain up-to-date, accurate, and as clear and helpful as possible.

The revised guides have been submitted for review and adoption into rule by the Minnesota Department of Health (MDH). A notice of the revisions being adopted into rule will be published in the State Register on approximately June 1, 2015, and will become effective 30 days after the publication date.

A link to the State Register announcement and the revised guides when they are published will be posted on the [AUC website](http://www.health.state.mn.us/auc/index.html) (<http://www.health.state.mn.us/auc/index.html>).

Hold the Date: Next Regular Quarterly Meeting of the AUC Operations Committee is June 9

Reminder – Please mark your calendars. The next regular quarterly meeting of the AUC Operations Committee (committee of the whole) is scheduled for 2:00 p.m. – 4:00 p.m., June 9, 2015, at the Hamline Room of the TIES Event Center, 1644 Larpenteur Avenue West, Falcon Heights, MN 55108.

Watch for the May edition of the AUC Update for additional information.

MN ICD-10 Collaborative Co-sponsors Free CMS ICD-10 Webinar May 19

The Minnesota ICD-10 Collaborative, a consortium of providers and payers working together to aid the transition to the ICD-10 coding system scheduled for October 1, 2015, is co-sponsoring a free ICD-10 webinar presented by the federal Centers for Medicare & Medicaid Services (CMS).

The webinar will be held 9:00 a.m. – 11:00 a.m. CST, May 19. Designed for physicians and practice managers, the educational session will offer background and strategies for ICD-10 implementation, including:

- Clinical/business impacts of ICD-10;
- Customizable Action Plan;
- Documentation Requirements for Common Health Conditions;
- Interactive Practice Clinical Scenarios; and
- Resources.

Information about ICD-10 and the ICD-10 Collaborative is posted on the AUC website on the [ICD-10 page](http://www.health.state.mn.us/auc/ied10/ied10index.html) (<http://www.health.state.mn.us/auc/ied10/ied10index.html>).

To attend the free webinar discussed above, please preregister by following the directions from the link posted on the AUC's [ICD-10 page](#).

Medicare RARC Alerts Providers About Upcoming Transition to ICD-10

A recent notice from the federal Centers for Medicare and Medicaid Services (CMS) announced that:

By mid-April, providers will begin seeing a new Remittance Advice Remark Code (RARC) N742 on their Remittance Advices (RAs), “Alert: This claim was processed based on one or more ICD-9 codes. The transition to ICD-10 is required by October 1, 2015, for health care providers, health plans, and clearinghouses.

Medicare Administrative Contractors will start using the new RARC in April. Since RARCs are an industry standard, the new RARC has been available for other health plans to use since March 1, 2015.”

More information can be found at the [Medicare ICD-10 provider resources website](http://www.cms.gov/Medicare/Coding/ICD10/ProviderResources.html) (<http://www.cms.gov/Medicare/Coding/ICD10/ProviderResources.html>).

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.

EXECUTIVE COMMITTEE

The AUC Executive Committee met on April 6, 2015. At the meeting, the Committee:

- received updates on the status of companion guide annual maintenance and efforts to increase ICD-10 awareness and readiness, including a series of outreach and technical assistance sessions being planned for the [annual rural health conference June 29-30](#);
- discussed the AUC's ongoing interests in preparing for a changing health care delivery/financing environment that may include greater use of “bundled payment” and Accountable Care Organizations (ACOs). The Committee will learn more about activities of the Workgroup on Electronic Data Interchange (WEDI)'s recently established “[Bundled Payments Taskforce](#)” and possible opportunities for shared learning and participation;
- briefly discussed needs and possible emerging opportunities for exploring a convergence in the exchanges of clinical and administrative data. For example, the

AUC may wish to consider responding to a recent CMS request for comments regarding a proposed federal rule for Phase III of electronic health records (EHR) meaningful use incentives, particularly with any comments on the interplay between clinical and administrative data. Dave Haugen of MDH agreed to also discuss the proposed rule with the MDH Office of Health Information Technology (OHIT) staff assisting in the implementation and administration of state requirements for interoperable EHRs.

- reviewed the meeting schedule for September. Due to the Labor Day holiday on September 7 this year, the AUC Executive Committee meeting calendar included tentative meeting dates for September 8 and September 14. September 8 is also currently reserved for the AUC Operations regular quarterly meeting. After discussion it was agreed to cancel the Executive Committee meeting on September 8 and to meet only on September 14;
- discussed adding an agenda item to the June 9th Operations meeting to obtain payer status for the implementation of the [AUC best practices for Health Insurance Exchange Grace Period Notifications](#).

The Executive Committee is next scheduled to meet on May 4.

OPERATIONS COMMITTEE

As noted above, the next regularly scheduled AUC Operations Committee meeting is June 9, 2015. Additional meeting information will be circulated in the near future.

MEDICAL CODE TAG

The Medical Code TAG met on April 9, 2015 and completed a final review of several proposed revisions to the claims companion guides as part of annual maintenance of the guides prior to an AUC Operations Committee review and vote regarding the changes (see related article, page 1).

In addition, the TAG received an update from the Department of Human Services (DHS) regarding:

- a clarification for coding for Autism Early Intensive Developmental and Behavioral Intervention benefit (EIDBI) services. The place of service for the benefit will be POS 11 or 12 and the new EIDBI benefit modifier will be UB;
- proposed gambling addiction treatment coding. The coding was necessary because DHS currently covers these services as professional and facility based treatment services, using an invoice system rather than a health care claim transaction. DHS plans to have the service be billed as a claim for processing through the claims system, and so approved codes for billing will be necessary. In discussion, concerns were raised about possible double billing for both professional and facility services. It was agreed to continue discussion of the proposed coding at a subsequent TAG meeting, and to request that DHS program staff and service providers attend the meeting;
- coding recommendations for Behavior Health Home (BHH). The program will become effective January 1, 2017, pending federal approval of the recommended codes.

The TAG also discussed:

- variations in coding for Maternal and Child Health services as part of Child and Teen Check-ups (C&TC). TAG members agreed to research their coding practices for these services and report back at the next TAG meeting.
- that an Asthma Education SBAR submitted in 2014 had been withdrawn with no action.

The TAG is next scheduled to meet on May 14.

EOB/REMIT TAG

The EOB/Remit TAG canceled its April meeting due to a light agenda. The TAG is next scheduled to meet on May 18.

ELIGIBILITY TAG

The Eligibility TAG met April 22, 2015. It had previously polled its members to identify issues with the use of the 270/271 transactions for further review and discussion. At the meeting, the TAG reviewed and discussed three draft best practices to address issues that had been identified. The following two best practices were unanimously approved by the TAG:

1. *Reporting Termination Date for Inactive Coverage* -- This best practice applies to Information Sources and provides for reporting of a member’s termination date when the information source has found the member to no longer be active (inactive coverage response).
2. *Service Type 60 Response (Active Coverage, No Benefits Reported)* - provides an option for Information Receivers to receive a 271 eligibility response without receiving a detailed, comprehensive response. This inquiry is intended as an option for subsequent inquiries when the Information Receiver needs to verify the patient’s status (active/inactive) and that the subscriber/patient demographic information has not changed. This inquiry may be practical and better meet the needs for smaller or single specialty Information Receivers than a comprehensive response.

After much discussion, the TAG agreed that the third best practice, Service Type Inquiry/Response, which provides a mechanism for Information Receivers to request eligibility on specific Service Types, needed additional discussion and review by the members within their respective organizations prior to a vote to approve.

The two best practices that were approved by the TAG will be forwarded to the Executive Committee for review and then to the Operations Committee for its review and vote to approve them.

Correction for Article in March 2015 Issue of AUC Update

Please note: Page five of the March 2015 issue of the AUC Update carried a brief review of recent EOB/REMIT TAG activity. The first sentence of the article stated that “The EOB/Remit TAG met on March 16, 2015 and discussed coding on remittance advices to report an enrollee’s proper Prepaid Medical Assistance Program (PMAP) designation.” For greater clarity, the sentence should read: “The EOB/Remit TAG met on March 16, 2015 and discussed coding on remittance advices to report an enrollee’s proper Prepaid Medical Assistance Program (PMAP) designation include an enrollee’s eligibility type along with the major program (“4 digit PMAP code”).”

We apologize for any confusion or inconvenience.


AUC May 2015 Meeting Calendar

For more information, 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
May 4, 2015 8:30am - 10:30am	Executive Committee Meeting
May 6, 2015 9:00am - 10:30am	Claims Data Definition TAG Meeting
May 14, 2015 9:00am - 12:00pm	Medical Code TAG Meeting

Date/Time	Event
May 18, 2015 1:00pm -2:30pm	EOB/Remit TAG Meeting
May 27, 2015 2:00pm - 4:00pm	Eligibility TAG Meeting

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