

-- Meeting Minutes --
Indiana – State Uniform Billing Committee
February 26, 2013 – 2 p.m. EST
Johnson Memorial Hospital (Franklin, Indiana)

1. Welcome & Introductions

Jim Miller called the meeting to order at 2:03 p.m. EST. Fifteen (15) committee members were present in person or by teleconference, and introductions of those attending followed. Jim Miller thanked Johnson Memorial Hospital for hosting the meeting.

2. Review of July 17, 2012 and October 30, 2012 SUBC meeting minutes

The minutes of the July 17, 2012 and October 30, 2012 meetings were approved as submitted.

3. SUBC administrative matters

Jim Miller reported that Indiana HFMA had agreed to provide repository space on its website for I-SUBC purposes, and that minutes and agendas to previous meetings will be stored on the website as well as links to associated billing groups (i.e., NUBC, NUCC and WEDI.) After a brief discussion, it was determined that the Indiana HFMA website is not password protected and that both draft and final minutes would be posted on the website for I-SUBC purposes.

Jim Miller reiterated the offer to SUBC members to contact him for NUBC-related items.

4. NUBC update

Jim Miller recapped the outcomes of two NUBC conference calls in late 2012.

10/17/12 Conference Call:

Items discussed included (1) Freestanding Birth Centers as an in- or outpatient facility and their designation under Revenue Code 084X; (2) Combination drug-alcohol treatment centers as an in- or outpatient facility, their designation under revenue code series for Behavioral Health Treatment/Service (090x-091x), Other Therapeutic Services (094x-095x) and/or Behavioral Health Accommodations (100x) and use of applicable HCPCS codes and/or units of service to describe level of service intensity; and (3) Discharge status 71: discharged/transferred to a Designated Disaster Alternative Care Site and the need to use Discharge status 69 (effective 10/1/2013) instead due to NUBC's previous deletion of Discharge status 71 by NUBC in 2003.

11/28/12 Conference Call:

Items discussed included: (1) SUBC subcommittee recommended striking word "treatment" from the nomenclature for RC100X series (Behavioral Health Accommodations) and establish revenue codes RC1001 (Residential Psychiatric) and RC1002 (Residential Chemical Dependency) with accommodation days serving as units of service and (2) Subcommittee recommended creating Revenue Code 0953 [Chemical Dependency (Drug and Alcohol)] with HCPCS and units of service (in outpatient hours) to indicate the level of service intensity. Both recommendations were approved with an effective date of 10/1/2013).

Jim Miller noted that NUBC will host a joint meeting with NUCC on 3/7/2013 in Linthicum, Maryland and a two-day meeting in Chicago on 7/31-8/1/2013, along with its monthly conference calls for the balance of 2013.

Jim Miller provided an update on the UB-04 change implementation calendar. He noted that new value codes (Y1 through Y5) for a Part A&B demonstration would be effective 4/1/2013. Janet Mateo of WPS stated that she was not familiar with this Medicare demonstration project and stated she would investigate this further. Jim Miller then reported Revenue Code 089X (Special Facility-Outpatient) would become effective 7/1/2013 and that the following UB billing items would become effective 10/1/2013:

1. New patient discharge status 69 – discharge/transferred to a Designated Disaster Alternative Care Site;
2. 15 new patient charge codes (for Form Locator 17) to indicate a planned acute care hospital inpatient readmission;
3. Revised titles for home health bill types 032X and 034X and discontinuation of home health bill type 033X; and
4. New revenue codes 0953 (outpatient) and 1001 and 1002 (inpatient) for chemical dependency.

5. Old Business

- a. ICD-10 preparedness: A discussion ensued regarding preparations for ICD-10 implementation. Chris Kern reported that MDwise is duplicating claim editing processes by HP and is training its staff to prepare for the conversion. Janet Mateo reported that WPS is relying on its EDI staff to handle ICD-10 preparations and that WPS has and will be hosting presentations on ICD-10 preparedness. Katie Hopper reported that Relay Health is conducting outreach efforts with all payers – both government and commercial – and will be doing targeted testing with selected providers. Randy Mills stated that MHS is doing the same preparations as MDwise – duplicating HP claim editing and monitoring state activity – and is preparing for system testing for a yet-to-be-determined date. Virginia Hudson reported that HP is still moving toward a 10/1/2013 implementation date to allow for a full year of EDI partner testing and has made changes to the Web interchange system, continues to work with the managed care entities in their preparation and will be contacting provider associations for ICD-10 educational efforts. Michael Puskarich stated it's his belief that software vendors are ready – that he's not received feedback that vendors aren't ready. Discussion then ensued regarding possible issues involving (Medicare-Medicaid) crossover claims for ESRD claims. Jim Miller indicated that he had information that ESRD claims involving composite rate billing might present problems with dates spanning the 10/1/2013 implementation date. He stated he would contact NUBC sources for possible clarification and report back to committee members.

6. New Business

- a. FISS update: Janet Mateo of WPS provided an update on Medicare/FISS issues. She asked committee members to access WPS' website for updates regarding claim processing alerts, current system issues, workarounds involving missing beneficiary information, and return to provider (RTPs) errors involving DDE – initiated and adjustment claims. She recommended use of WPS online tools to obtain Medicare beneficiary information. Janet Mateo then recapped the most recent J8 tracking report on top claim errors (i.e., missing condition codes on

claims involving separate services on the same date, beneficiary name/number mismatch, claim filing limitations, etc.) and then clarified two WPS alerts involving mismatch of Medicare beneficiary name and HIC numbers and rejection of subscriber's insured group or policy number appearing on electronic claims. Jim Miller noted that Change Request CR8211 alerted providers of the latest updated list of healthcare provider taxonomy codes.

- b. Restricted use of ICD procedure codes for Indiana Medicaid: A brief discussion ensued regarding IHCP Banner Page BR201249 (dated 12/4/2012) which reminded providers to report ICD-9 surgical codes only on inpatient institutional and inpatient institutional crossover claims. Virginia Hudson stated that there was no change in billing instructions (involving reporting of ICD-9 surgical coding) and that editing was in place to reject invalid claims with these codes.

7. Next Steps – Next Meeting

Discussion ensued regarding the next SUBC meeting – proposed for June 4, 2013. Chris Kern offered to host the next SUBC meeting at MDwise's offices in Indianapolis. Jim Miller stated he would notify SUBC committee members about meeting information in his next communique.

8. Open Discussion

Home health: Michael Puskarich reported that there is a push to make home health and hospice providers report place of service (POS) on claims – possibly by 7/1/2013. He also reported that commercial plans will require “Q” procedure codes for claims involving assisted living and home services. A brief discussion also ensued regarding how the home health industry is under the government's microscope for past practices and is subject to increased revalidation and enrollment scrutiny involving changes in ownership.

Medicare replacement plans: Maureen Simmons reported that St. Vincent's had been experiencing recent problems with Medicare replacement (Medicare Advantage) plans. Other SUBC-hospital members present stated they were unaware of claim issues involving replacement plans.

IHIMA annual conference: Danita Forgey reported that IHIMA (Indiana Health Information Management Association) will hold its annual conference in downtown Indianapolis on April 17-19, 2013. She noted that all programming on April 17 will be dedicated to ICD-10 preparedness.

There being no additional business, the meeting adjourned at 3:40 p.m. EST.

Respectfully submitted,

Jim Miller, Indiana SUBC Chairperson