ILLINOIS DEPARTMENT OF
HFS Healthcare and
Family Services

Monthly Claims Care Coordination Data (CCCD) Partner Meeting

February 2014

HFS Presenters:

- Katey Staley
- Nivedita "Nive" Baliga
- Patricia Murphy
- Paul Damian
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Meeting Objective

- Review delivery schedule of Medicare data

- General updates on Medicare claims

- Review two sets of questions:
  1. Non-Medicare
  2. Medicare

Meeting Organization

Please attempt to submit questions online during the webinar. There was a problem with this last month that we hope is now resolved. We will attempt to take individuals off mute as clarification is needed for questions submitted.

These slides will be modified to include any updates as the result of today's discussion and will be posted on the CCCD Data Webpage within the next two days.

Medicare in CCCD Update

Medicare data will be included in the April run (to occur by 4/7/2014). Issues currently being addressed include:

- Federally provided tool to convert X12 Medicare data to a flat file format malfunctioned in recent weeks and needed to be repaired.

- Testing of data needs to occur by HFS into March to ensure reliability.

Medicare in CCCD Update

General Comments:

- HFS reviewed the available Medicare fields and made a match where possible to existing CCCD fields. Please review CCCD Data Dictionary carefully.

- Not all files will have Medicare fields. The files with Medicare fields are Main Claims, Institutional, NIPS, Pharmacy, Revenue, Diagnosis, and Procedure.

Medicare in CCCD Update

General Comments:

- Three fields in the NIPS file had changes to their byte length. These fields are outlined on the Update tab and the changes are documented on the NIPS tab of the CCCD Data Dictionary.

- Two fields unique to Medicare were newly added to CCCD to provide more information about the Medicare claim: MedicareBillProviderTaxonomy and MedicareProviderTaxonomy. Health plans are encouraged to review this website to more fully understand these fields: http://www.wpc-edi.com/reference/

Medicare in CCCD Update

General Comments (Continued):

- Two years of historical Medicare data will be provided for all recipients. Examples of how this will work in April are:

  - ➤ If a recipient is a new enrollee to a plan starting in April, there would be two years of historical data for both Medicaid and Medicare in the April CCCD run.

  - ➤ If a recipient is an existing enrollee and the plan already received two years of historical Medicaid data, there would be an incremental update of Medicaid data and two years of Medicare data in the April CCCD run.

Questions are broken out into two categories:

1. Non-Medicare
2. Medicare

#1 Can IMMTYP AND VACCINE_ID Have Overlapping Values?

Question: In the ICARE Immunization/Cornerstone file, can/will IMMTYP and VACCINE_ID ever have overlapping values? For example, can IMMTYP and VACCINE_ID have a value of 25 for different vaccines/immunization's?

Answer: Yes, there can be overlapping codes between the two files. This can happen because ICARE and Cornerstone immunization files come to HFS from two different agencies and both systems use an internal ID to track vaccines. Example: VACCINE_ID of "45" means Varivax in the ICARE system, however the same ID is used for INFLUENZA - LAIV in the Cornerstone system.

NB

#2 Updates to ICARE Immunization File?

Question: Will we be receiving any updates to data already received? For example, if we get vaccine ID = "20" one day, but it was actually supposed to be "21", will we receive the update a couple days later? Are there going to be updates to records or just straight inserts into the database?

Answer: Currently there are no updates to the data already received. They are straight inserts.

NB

#3 Multiple Immunization Shots

Question: . If there is an immunization series and someone gets multiple shots for the same vaccine (DTaP), how will we be able to distinguish between the 1st dose and the 3rd dose? Will they have the same value but a different date? Do we need to be concerned with which shot it was in the series?

Answer: Only Date of Service can distinguish the subsequent doses. It is a possibility that the 1st dose is a combo shot. However, due to an allergic reaction or other reasons, the second shot is a different combo than the first.

NB

#4 Distribution of Lead Data

Question: When do we get specific lead data? For example: the Confirm date, when do we get it? I'm assuming since the data is sent on the 5th business data of the month, there will be a month lag and data will be ~30 days old? I understand we may get historical and current data on a monthly basis.

Answer: Lead data comes to HFS from another agency (Illinois Department of Public Health) on a monthly basis, hence there will be lag in transmission of this data through the CCCD extracts.

NB

#5 Are Sequence Numbers Included in Claims to Determine Episode of Care?

Question: How are the same stays or episodes of care for the same diagnosis linked? For example, some hospitals I worked with would append the sequence number to the end of the claim. 1st claim: ABCD**01**, 2nd claim: ABCD**02**, 3rd claim: ABCD**03**. I could not determine the sequence number in the medical claims (institutional) especially since the DCNs are all the same lengths.

Answer: HFS does not link stays or episodes of care to the same diagnosis. Unfortunately, this is not included in the claim information we receive.

#6 Adjustments without Sequencing

Question: The "Adjustments" file corrects the patient liability but the "Main Claims" has the liability already. How does the "Adjustments" file work with the rest of the files/data without sequencing? Can you give a brief description or example of how the "Adjustments" file works with the rest of the financial data?

Answer: Adjustments can be of two types, changes to Liability Amount or a complete void of the transaction (the provider rebills for this service at a later time and then they appear in a future CCCD files). When there is a void, the VoidInd in the Adjustment file will be set to a 'Y' and this should be used to trigger a delete of the original claim in all the files. When the VoidInd is not set to a 'Y', then only the NetLiabilityAmt in the Main File or Pharmacy File should be adjusted to the net liability amount from the adjustment file.

NB

#7 Medicare Taxonomy Codes

Question: What kind of values will be there in below fields:

- MedicareBillProviderTaxonomy
- MedicareProviderTaxonomy

Answer: Please visit http://www.wpc-edi.com/reference/ - Health Care Provider Taxonomy Code Set for more info.

M

#8 RecipientID and Medicare Claims

Question: For Medicare claims, please confirm that RecipientID will be the Medicare Id.

Answer: No, 'RecipientID' will always be the member's Medicaid id number, regardless if it's Medicare or Medicaid data.

PM

#9 What Health Plans Get Medicare Data?

Question: Are only MMAI plans going to get Medicare claims?

Answer: Medicare claims will be provided when there is a match to an existing HFS recipient. If a recipient not in the MMAI plan is found to have Medicare claims, those claims will be reported.

PS

#10 Medicare Indicator

Question: Do we have an indicator on the layout which can differentiate Medicare & Medicaid claims?

Answer: Medicare claims can be identified using RecordIDCd = 'M' in the Main Claims and Pharmacy files.

PD

#11 Medicare Adjustments?

Question: If Medicare Ind is "N" for Adjustment file, are we not going to get any adjustments?

Answer: Correct, adjustments will not be provided for Medicare data.

PD

#12 Medicare and HIPAA Standard Codes

Question: PlaceOfServiceCd (NIPS) - Are these codes Standard POS codes? Below is the list of a few Standard POS codes.

01	PHARMACY
11	PHYSICIAN'S OFFICE
20	URGENT CARE FACILITY
23	EMERGENCY ROOM - HOSPITAL
24	AMBULATORY SURGICAL CENTER

Answer: Yes, for Medicare they are the HIPAA standard codes.

PM

Future CCCD Partner Meetings

- Wednesday, 3/12/2014; 10:00-11:00 AM Central

- Wednesday, 4/16/2014; 10:00-11:00 AM Central

Please send feedback. . .

- Complete survey at the end of this webinar

   and/or

- Email Paul Stieber, paul.stieber@illinois.gov