

Monthly Claims Care Coordination Data (CCCD) Partner Meeting

March 2014

HFS Presenters:

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- Paul Stieber

Meeting Objective

- Confirm delivery schedule of Medicare data by the 5th working day of April
- •General updates on Medicare claims
- Review questions from health plans

Meeting Organization

Please attempt to submit questions online during the webinar.

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

• Testing of Pharmacy and Main claims complete. HFS is now completing testing of remaining files.

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.

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.
- Four fields unique to Medicare were newly added to CCCD to provide more information about the Medicare claim: MedicareBillProviderTaxonomy, MedicareProviderTaxonomy, RevenueHCPCSmod3cd, and RevenueHCPCSmod4cd. These will first appear in the April release. Health plans are encouraged to review this website to more fully understand these fields: <u>http://www.wpc-edi.com/reference/</u>

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.

Medicare in CCCD Update General Comments (Continued):

 The greatest challenge in working with Medicare data will be to identify when a Medicare claim is part of a crossover payment with a Medicaid claim. Please review the Data Dictionary now for how to best address this challenge.

#1 Service Line Number and Revenue Code Table

Question: I am not seeing any records on the Revenue Codes table that have a service line number that is anything other than 00.

Answer: Institutional claims don't have a line number. They are billed at the claim level and HFS fills in the line number with '00'.

#2 Service Units and Institutional Claims

Question: Is there not supposed to be service units for Institutional claims or is that found on a different table? There is one on the NIPS but not on the institutional. I thought perhaps that it would be based on the revenue code but that does not seem to be the case. I thought that maybe for items like bed days there would be maybe multiple records for the claims, but that does not seem to be the case either.

Answer: For inpatient claims we usually count services as either admissions or covered days. We didn't include covered days in the current layout and will list this as an improvement suggestion for a future release. Admissions can be calculated by counting as one admission any record with a UBTypeofBillCd where the last byte is 1 (admit through discharge claim) or 2 (first in a series bill).

#3 Timeframe for Claims

Question: The time frame for the claims seems to be all over the place. There seem to be records going back to 2006 and 2007, which should be outside of the time frame that the cover sheet said should be covered.

Answer: Records go back to 2006/2007 because we also send a 7 year history on immunizations.

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#4 When Do Adjustments Occur?

Question: (This question is from a plan newly getting data) On the first historical file coming, will there be adjustments for the incoming data or will the file it be blank and all adjustments are already accounted for?

Answer: The first file will not have any adjustments, the subsequent files can have records in the adjustment file, if the claims previously sent have either been voided or adjusted

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#5 Multiple Adjustments and DCN

Question: Can one claim have multiple adjustments so the DCN can show up multiple times in the header claim for example?

Answer: Its rare but possible for one claim to have multiple adjustments. If multiple adjustments show up, applying them sequentially (using adjudicated date to order the file) or applying the one with the highest adjudicated date will have the same impact as the new NetLiability amount is supplied in the adjustment files.

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Additional Medicare Note

HFS will send an email update about Medicare and CCCD prior to the April CCCD release. It will be sent to everyone who received an invite to this webinar.

Future CCCD Partner Meetings

- Wednesday, 4/16/2014; 10:00-11:00 AM Central
- Wednesday, 5/14/2014; 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