

### AUC Exec Committee 10-7-13 Whiteboard

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1) Meeting to order – Keri Silvernagel	The meeting was called to order at approximately 8:30 a.m.
2) Anti-trust statement	The anti-trust statement was noted.
3) Review of notes from the previous meeting	The meeting notes of the August 5 meeting were approved.
4) Plan for AUC Operations Meeting 10/15/13 a) HPID webinar b) Other?	<p>The AUC Ops Meeting on October 15, 2013 will be focused on Health Plan ID. Laurie Darst and Dave Anderson will be presenting in a teleconference/webinar format.</p> <p>Laurie provided the following update:</p> <p>The webinar will cover the “basics” of the HPID rule and lead to a discussion of the most challenging aspect of HPID – how HPID should be implemented. The industry continues to have many questions and concerns, and is particularly challenged with issues related to:</p> <ul style="list-style-type: none"> <li>• The level of granularity in the HPID;</li> <li>• Cross-walking; and</li> <li>• The information that will be available through the HPOES system.</li> </ul> <p>In addition, after enumeration and cross walk issues are resolved, testing will be needed, and planning should be undertaken for testing.</p> <p>She also noted that WEDI recommendations on HPID issues are pending and will be submitted to CMS when complete. Laurie will send a copy of a powerpoint to MDH staff to send to the AUC in advance of the meeting.</p>
5) Brief update on any recent TAG activity and plans	Dave Haugen reviewed TAG activities and accomplishments since the last executive committee. The TAGs have been working primarily on the annual maintenance of the

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	<p>companion guides and other related issues. (see handout discussed at the meeting, attached.)</p> <p>Shelagh Kalland noted that the CMS 1500 form has been updated and that the AUC manual instructions for the form that are posted on the AUC website (<a href="http://www.health.state.mn.us/auc/cms1500nov2006.pdf">http://www.health.state.mn.us/auc/cms1500nov2006.pdf</a>) are out of date and should be updated. MDH will contact the Claims DD TAG to follow-up and to request that the TAG review the AUC 1500 manual.</p>
6) Companion Guides Update	<p>Dave Haugen noted that one public comment has been received to date regarding recent revisions to the companion guides. The comment suggests adding HCPCS codes and modifiers to a group of substance abuse services described in the medical coding appendix of the 837I and 837P companion guides. The Medical Code TAG will review the comment at its next meeting. MDH will distribute any additional comments received to the appropriate TAGs for review.</p>
7) Review 2013 AUC Plan with accomplishments to date and plan for 4 <sup>th</sup> quarter 2013	<p>Dave Haugen briefly reviewed a summary of AUC 2013 Priorities and Goals, and progress to date. Generally, the AUC has made progress in all areas, with the exception of planning to address administrative aspects of new payment and delivery models. It was agreed that this remains an important topic and opportunity for the AUC but that it should be delayed until next year in order to complete other already started work, and also because more information and recommendations from WEDI and other groups will be available to aid the AUC's work. (See also handout discussed at the meeting.)</p>
a) Plan for addressing administrative aspects of new payment and delivery models	<p>See note above.</p>
b) AUC response to SIM RFI?	<p>The joint MDH-DHS State Innovation Model (SIM) grant project is broadly disseminating a request for information (RFI) throughout the community to aid in</p>

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	developing Requests for Proposals (RFPs) and other information for the project. MDH forwarded a copy of the RFI to the AUC for any responses, and will send a reminder to the AUC Ops email list to respond to the RFI.
c) Discuss any possible implications of implementing ICD-10 per Medicare	MDH has announced that non-HIPAA covered entities subject to Minnesota Statutes, section 62J.536 must also comply with requirements for using ICD-10 coding. At this time, if asked for more specifics regarding the state's requirements, the answer is anticipated to be that the state will follow Medicare on the implementation of ICD-10.
d) Follow-up with X12 or others regarding the 90 grace period for nonpayment of premiums	<p>The Committee discussed continued questions regarding implementation and administration of the 90 grace period for nonpayment of premiums as part of Health Insurance Exchange rules. Providers in particular are seeking information from payers about how the payers will notify providers when a member has entered the grace period.</p> <p>Keri Silvernagel will contact the Minnesota Council of Health Plans for help compiling information regarding health plans' communications with providers to notify them of members who are in the grace period.</p>
e) Update on national resources – e.g., X12, WEDI, etc.	<p>Dave Haugen noted that the several national organizations provide resources to help clarify and address administrative simplification issues, and that it is important to both be aware of the resources and to possible help contribute to or shape them.</p> <p>Discussion of these resources, and any possible AUC contributions, will be considered for upcoming Ops meetings and TAG meetings later this year and next year.</p>
8) Other business	There was no other business and the meeting was adjourned.