AUC EXECUTIVE COMMITTEE AGENDA and Meeting Materials

Monday, April 6, 2015
8:30 – 10:30 a.m.
HealthPartners-Bloomington
8170 Building, 1W Walnut Room

*Teleconference and WebEx **OPTION***
Dial-in # **1-712-832-8300**, Access Code: 337213
WebEx, Password: Exc2010!

Meeting Objectives:

- Review and discuss several updates and follow-up

TENTATIVE AGENDA (DRAFT)

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HealthPartners Walnut room	

3. Review of notes from the previous meeting
AUC Executive Committee Meeting Notes

March 3, 2015

Agenda Item	Discussion	Action Item/Assigned to
8) Meeting to order – Ann Hale	Ann called meeting to order.	
9) Anti-trust statement	Reminded members to keep intent of AUC anti-trust in mind during discussion	
10) Review of notes from the previous meeting	Minutes approved with correction to Item #6 Other Business, third sentence– Add the letter "e" to Cheri to correctly spell Cherie	
11) Updates/Old business Companion Guides Update	Dave Haugen reported that the 270/271 and the 835 MUCGs will be published as adopted rules in the Minnesota State Register on Monday 3-14-15. He further stated that very minor, technical changes were made; nothing controversial. The 837 Minnesota Uniform Companion Guides (MUCGs) have been approved by the Claims DD Technical Advisory Group (TAG) and the Medical Code TAG and are currently out to Ops for an e-vote to approve as adopted rules. The next steps will be to forward guides to the Commissioner within the next few weeks perhaps and the have published in the State Register as adopted rules. Rules will become effective 30 days after publishing.	
b) ACO data analytics follow-up	Dave reported he attended the Data Analytics Subgroup ACO meetings. The subgroup has had three meetings now, and at this particular meeting they presented drafts for final review. This was called Phase 1 and the documents and material were high level guiding principles to be forwarded for review by the State Innovation Model (SIM) task force. The subgroup will hold a March 3 webinar to review and approve the preliminary products. The Subgroup asked if the AUC would be a resource and help in developing standards for risk mitigation and patient attribute methodologies. Dave explained that the AUC has different expertise and a different group would probably be more appropriate. The group thanked him for the clarification and for attending the meeting. Ann Hale asked if anyone from Minnesota Community Measurements (MCM) was on the subgroup and felt anyone from that group would be a resource. Ann also stated that HealthPartners VP was a member of the task force and hopefully he would be able to direct the group to the appropriate group working on those issues. Ann thanked Dave for clarifying the AUC	

Agenda Item	Discussion	Action Item/Assigned to
	scope of activity (mission).	
c) TAG and SBAR update	Dave presented the February edition of the AUC Update newsletter, which included the TAG updates. In addition, it was noted that an Autism SBAR was recently approved by the Medical Code TAG. Exec agreed to submit the SBAR to the AUC Operations for an email vote.	Dave volunteered to check the SIM task force membership roster to determine if MCM might be represented
d) ICD-10	MDH reported that its proposal for a special education/outreach session on ICD-10 was approved for the annual Rural Health Conference on June 29-30. Tony Rinkerberger agreed to serve as a speaker/resource at the conference.	
e) Plan for March 10 AUC meeting	The Executive Committee discussed and agreed on the following agenda items for the March 10, 2015 AUC Operations Quarterly meeting: • Introduction and welcome of Elise Westby, new Eligibility TAG co-chair • Companion guide updates • TAG and SBAR updates • ACO update • Workers Compensation symposium follow-up (Dept. of Labor and Industry draft proposal) • Workers compensation and ICD-10 • ICD-10 outreach and education opportunities (Rural Health Conference June 29-30) • Discussion of requirements to implement Rx ePA by 1/1/16	
12) New business a. NCVHS meetings 2/24 and 2/26	Dave Haugen provided a brief update at the Exec Committee regarding recent hearings of the National Committee VHS full committee and its Standards Subcommittee. Discussion focused on the Standards Committee meeting February 26, 2015, regarding "Overview of Proposed Operating Rules Health Care Claims, Prior Authorization, Enrollment/Disenrollment & Premium Payment." During the NCVHS session it was pointed out that several key minority positions exist regarding the proposed operating rules, especially in areas of: requirements for acknowledgments; requirements for higher levels of digital security; and setting expectations if real time claim processing were to become available. Findings from the hearing, and any possible recommendations, will be forwarded by NCVHS to the Secretary of the US Department of Health and Human Services (HHS).	

Agenda Item	Discussion	Action Item/Assigned to
13) Other business	There was no other business and the meeting was adjourned at approximately 10:30 a.m.	
14) Next meeting: April 6, 2015, 8:30am-10:30am HealthPartners Walnut room		

4.   Tentative -- Updates/Old business

    a. Companion Guides Update
        i.   Repeat proposed update process for claims guides – for discussion

Back in Dec. 15, 2014 we published proposed revisions to the MN companion guides for the claims (837) transactions as "version 9.0," and announced a 30 day public comment period. Following the conclusion of the 30 day public comment period, we began finalizing the revised guides to be published as adopted rules ("version 10"). At that time we became aware of some errors in the guides (for repeat lab services, and the public health nursing tables). We also recently passed the Autism SBAR.

Given these additional changes, we are considering republishing our proposed revisions, with the 30 day public comment period, and then finalizing them as adopted rules. (Essentially we would be publishing a "version 9.1" as the new proposed revised revision, that when finalized would still be adopted into rule as "version 10.0.")

Given the number of steps that would need to be completed, it would likely be approximately July 1 before version 10.0 was adopted into rule.

a) TAG and SBAR update

The TAG updates are summarized in the latest issue of the AUC newsletter. In addition, we would like to discuss/brainstorm experimenting with some new meeting formats and content.

b) ICD-10 outreach opportunities

WEDI conducted a webinar last week regarding the findings of its latest national ICD-10 readiness survey. The survey results indicated that many parties, especially providers, seem unprepared or lagging in their ICD-10 preparedness.

Judy has been meeting with and organizing additional potential resources for the ICD-10 sessions at the rural health conference June 29-30. We have been including a steady stream of reminders and ICD-10 articles in the AUC monthly newsletter.

5. Tentative -- New business

a) Future challenges – meeting business needs for new payment mechanisms

One of the AUC's interests has been to prepare for a changing health care delivery/financing environment. WEDI recently announced the formation of a project team as part of its Payment Models Workgroup to focus on Bundled Payments. This "Bundled Payments Taskforce" will "assess the attributes, information, and technology needs and requirements of

this model, and develop solutions, in the form of an industry action plan, to foster their adoption and implementation while increasing sustainability." As a possible step toward learning more about the issues and contributing to solutions, what if the AUC recruited members (a new TAG?) to actively participate on the AUC's behalf on the WEDI Task Force, and to periodically report back findings, lay out issues and options being explored, and help lead the AUC in a new area of inquiry and technical assistance? This new "TAG" then would essentially meet by participating on the WEDI Task Force, as well as any additional meetings they might need to synthesize and react to findings and recommendations of the Task Force and to engage with the AUC.

b) <u>Future challenges – Convergence of clinical and administrative data exchange</u>
    i. <u>Meaningful use phase III rules review and response?</u>

Several sources have cited the needs and possible emerging opportunities for a convergence in the exchanges of clinical and administrative data. CMS recently released its [proposed rule for Phase III of EHR meaningful use incentives](#), and is seeking comments through May. Is this a possible opportunity for recommending changes to foster the convergence of clinical and administrative data?

6. **<u>Other business</u>**

7. **<u>Next Exec Committee meeting:</u>**
- April 6, 8:30-10:30 am HealthPartners-Bloomington
- 8170 Building, 1st Floor - Walnut Room