



AUC EXECUTIVE COMMITTEE AGENDA and Meeting Materials

Monday, November 2, 2015 8:30 a.m. – 10:30 a.m.

[HealthPartners-Bloomington](#)

8170 Building, 1W Walnut Room

I. 11/02/15 Meeting Agenda

Agenda item	Notes	Follow-up/Action Item
A. Meeting to order – Ann Hale	Ann convened meeting to order	
B. Anti-trust statement	Reminded everyone to abide by anti-trust statement	
C. Review of notes from the previous meeting	Last month’s meeting was cancelled; previous meeting notes are already approved.	
D. Updates/Old business <ol style="list-style-type: none"> 1. Update -- TAG meeting to review Council of Health Plans’ Home Health PA form 2. Update – TAG to recommend standard data analytics for ACO providers 3. TAG/SBAR update 4. Rx PA form update 	<p>Council of HPs – will DHS be using this form; not applicable to DHS fee-for-service. Group reviewed form in more detail and Home Health made some changes; one additional meeting. Kathryn reached out to one of the county-based org not in attendance at meeting. Don’t know outcome.</p> <p>Is there a way to bring DHS in and make it work?</p> <p>Data Analytics TAG – Dave reported there are 20 members as of Friday, October 30 with good representation from</p> <p>Dave spoke with Nancy Garrett and Frank Gilbertson – to learn more about needs. Perception not sure Nancy and Hennepin’s is about variation right now or if they are participating that this</p>	<p>Ann will contact Kathryn to see if further information from DHS for further explanation or rationale why the form is not applicable to them. What needs to happen for them to use.</p> <p>Data analytics -</p>

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	<p>goes beyond DHS and applies to all payers. One of the things we've asked for is concrete examples (Heather and Nancy). Vickie Swanson, familiar with these folks and feel very good mix. Meeting Thursday, from 8:30 to 10:30. Assemble panel of three providers and three payers. Dave will give overview of AUC since Ann will not be able to attend. Dave and Heather will ask as moderators and lead Q&A for panel. After will develop work plan. Ask for concrete examples from everyone in attendance. Need for environment scan. Perhaps four or five meetings. Dave will continue to talk to Heather to recruit additional IHP; may have couple or three. Ann talked to Chet Hines--- measurements have standardized some demographics. Several people Tina Morey, concerned is that MN community measurements -work through process but need to bring info back to community measures - same type of data. Thought this was a starting point—few quality. See this as a parallel perhaps would not be involved in the year-long. AUC has discussion with MN Community Measurements.</p> <p>Nancy also expressed strongly desire to make sure that we're not operating too far out of sync with Medicare. AUC</p>	
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	<p>normally does not – Medicare has put out some guideline standards. Vicki also expressed concerned that. Vicki is doing great job as co-chair and has provide good input and insight. Dave contacted Shellagh Kalland to ask if she could serve as co-chair; she is unable to at this time.</p> <p>If need for additional meeting offline.</p> <p>Tony great start has been made especially since we have a great TAG now. Should be able to move pretty quickly.</p> <p>TAG update – Acknowledgment TAG has been approved by Ops and have been sent to EO's office. November 23 will be published in State Register. Ann thanked Bob for recommending Daryl to serve as co-chair. He did a great job in moving TAG forward.</p> <p>Eligibility TAG – statutory exception reviewed and renewed annually to determine if anything is different. Will put together for Ops, post in State Register. Reaching out to organizations, like P&C. to ensure they are aware of the continued exception.</p> <p>Look at pain points or general concerns, FAQs, best practices, etc.</p>	
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	<p>Bob indicated he feels that perhaps time to start over. As an organization perhaps put out some new expectations for TAG. Perhaps January start over, not assuming everyone know the transactions. Tackle basic 270/271 issues and perhaps develop FAQs.</p> <p>Claims guide will continue to be the coding. At October meeting, congratulated on work they've done. One of the accomplishments for the TAG is that we've gone to AAPC, national organization that awards CEU's. Very important to the TAG. MDH needs to demonstrate that you're doing good work all the time or we may not be giving them out. Doing work a little bit more differently, spread work out and everyone needs to be involved in meeting.</p> <p>Judy reported on the special October 28, meeting</p> <p>One change in guide, even though payment related rather than remit; will have brief mention in guide. Discussion re need for education, best practice and FAQs re the transaction.</p> <p>Contradictory laws – requirement starting in January PA forms must go electronically. Paper form – updated PA</p>	
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	<p>paper form; because ICD-9; not addressing their needs re substances; updated. Scanners being able to view; perhaps announce. Minimize – notice to be aware of technical changes. Work with industry to make process work and we still ahead of national.</p> <p>Send out redline and final, along with notes re changes.</p>	
<p>E. New business</p> <ol style="list-style-type: none"> 1. Eligibility TAG 2. Medical Code TAG 		
<p>F. Other business</p>	<p>Public Health standpoint – how many people were injured but how many</p> <p>Track long term for residual affect due to disasters</p> <p>Do we have data to track</p> <p>What are the best ways to track and monitor?</p> <p>What is the capacity of the claims data? If not there, how do you broaden?</p> <p>Have suggestions re condition codes on claims – facility</p>	

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	<p>DR – disaster related</p> <p>What is being done on national level? Have approval at the UB committee? Is the SBAR correct or what does it take to make it more widely</p> <p>Medical Code TAG to provide interpretation to determine if appropriate; how would they extract from the medical</p> <p>Dave contacted Marty LaVenture – info resides in EHR. He had many suggestions</p> <p>If coded, may trigger third party liability. Accident-related</p> <p>Is claim data really the best place to – should it be electronic health record (EHR) data</p> <p>CAQH CORE – re EOB/Remit business scenario- perhaps November.</p> <p>Heard anymore from Lisa Wichterman where they are with workers’ comp law. MDH has asked DLI about plans or anymore defined plan. – Still under consideration. Lisa has maintained DLI are aware of concerns; September 1 not causing problems. Not a big deal but attachments – WEDI concerns and AUC Ops concerns also because there is a</p>	
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I. 11/02/15 Meeting Agenda

	<p>penalty. Providers are struggling with what to tell their clearinghouse to do. Peter Anderson raised questions at EOB/Remit about the requirements regarding information to be placed in checks and limitations of EFT and paper checks to meet requirements.</p> <p>Can Lisa provide update at December Ops meeting?</p> <p>Exec meeting – Dave Andersen is payer co-chair.</p> <p>Ann will check on scheduling room for 2016 Exec meetings.</p> <p>Continued meeting sites – look at calendar – Ann will check for availability at Healthpartners.</p> <p>TIES meeting center -</p>	
<p>G. Next meeting: December 7, 2015 8:30am - 10:30am</p> <p>a. Health Partners 8170 Bldng, 6W - Lilac Room</p>		

II. Discussion Guide – Old Business

Agenda item #	Agenda Item	Background, discussion	Notes/Next steps/Follow up
D1	Next steps – form TAG to review Council of Health Plans’ Home Health PA form	<p>The Council discussed the development of the form at the last Operations meeting.</p> <p>In an email vote completed 9/17, the AUC agreed to create a temporary TAG to review the form. In creating the TAG, it was agreed to invite participation by the Minnesota Department of Human Service (DHS) and “county-based purchasing organizations.”</p> <p>The TAG met Oct. 23. One of the main issues that was to be clarified is whether the form was to be used for DHS FFS home health PA. It was clarified at the meeting that the form is not for use with DHS FFS. The rest of the meeting was spent revising and refining the form.</p>	<p>The product from the Oct. 23 meeting will be reviewed by stakeholders. I believe there will be another meeting scheduled to finalize and approve the form.</p>
D2	Next steps – form TAG to recommend standard data analytics for ACO providers	<p>The ACO Data Analytics TAG above has been formed. The current list of members (17 as of 10-28-15) is attached. The first meeting will be held at the Minnesota Humanities Center 8:30-10:30 am, Thursday, Nov. 5.</p>	
D3	TAG/SBAR update	<p>Acknowledgment TAG – last met August 17. Has completed revisions of Acknowledgment companion guides, which are being voted on Ops in an email vote due Sept. 30. Ops is also voting on revisions to two best practices, and the vote is also to be completed Sept. 30. No further meetings are planned at this time but will be needed in the future to review public comments on companion guide revisions.</p> <p><u>Update:</u> AUC-approved changes to companion guide</p>	

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		<p>forwarded to Commissioner’s office. When approved, we plan to publish a State Register notice of 30 day public comment period on November 23.</p> <p><u>Eligibility TAG</u> – The Eligibility TAG met Oct. 28. It reviewed and approved the continuation of a current, statutorily allowed exception to the state’s e-transactions for entities not subject to HIPAA, for only the 270-271 transaction. We will be sending the exception and the TAG’s approved continuation of it to Ops, for a final review and vote. Today’s meeting was short (20 minutes) and we would like to discuss the TAG’s future meeting schedule and focus.</p> <p><u>Claims DD TAG</u> – The TAG is next scheduled to meet Dec. 9.</p> <p><u>Medical Code TAG</u> – The MCT met Oct. 8 and made final changes as part of annual companion guide maintenance to the 837P and 837I. We are preparing the guides for an Ops vote. We also discussed with the MCT several other items, which we can summarize at the Exec meeting.</p> <p>The TAG met again on Oct. 27 to review and discuss 2 dental-related SBARs submitted by DHS. The TAG concluded that the proposed U modifiers suggested by DHS were not needed (NPIs could be used) and that additional review and discussion was needed for an SBAR proposing coding for tele-dentistry services.</p> <p><u>EOB/Remit TAG</u> – The TAG met Oct. 18 to review a proposed companion guide change related to exchange of workers’ comp remittances and payments. The proposed change was considerably shortened and approved at the meeting.</p>	

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		The TAG will be developing a best practice regarding the PLB segment.	
D4	Rx PA form update	<p>A few weeks ago we discussed changes to the single Rx PA form requested by DHS and agreed to several changes that seemed to have the least impact on scanning of the form. The changes are being made at this time.</p> <p><u>Update</u>: See final version of form, along with an underline-strikeout version showing the changes, embedded at the end of this document.</p>	

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III. Discussion Guide – New Business

Agenda item #	Agenda Item	Background, discussion	Notes/Next steps/Follow up

VI. Other business

VII. Next Exec Committee meeting

Dec. 7, 2015	HealthPartners-Bloomington 8170 Building, 1st Floor - Walnut Room
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ACO Data Analytics Membership as of 10-28-15

Nancy	Martens	CentraCare
Chad	Heim	HealthPartners - Health Plan
Ann	Hale	HealthPartners - Health Plan
Abdi	Abdirahman	Fairview Health Services
Tina	Morey	Allina
Janet	Coenen	Blue Cross Blue Sheild of Minnesota
Margareth	Ranheim	PreferredOne
Patrice	Lingren	PreferredOne
Frank	Gilbertson	Hennepin County Medical Center
Joe	Schindler	Minnesota Hospital Association
Chuck	Anderson	North Memorial Health Care
Kellie	Roberts	Optum
Ruqayya	Shaik	Medica
Mesa	Lieser	PrimeWest
Mary	Winter	PrimeWest
Laurie	Darst	Mayo
Jerry	Sobolik	Mayo

Revised Uniform Rx ePA form



redline ufepaform
10-21-15.pdf



PA-form.pdf