

Title of Meeting: AUC Medical Code TAG
Date and Time of Meeting – Thursday, April 9, 2015, 9 a.m. to 12 a.m.
Location of Meeting – HealthPartners
Meeting Minutes

Minutes By: Dave Haugen and Faith Bauer

Agenda Item	Discussion	Action/Follow-up:
1. Welcome and Introductions <ul style="list-style-type: none"> • Attendance tracking 	<p>Faith called meeting to order. Introductions completed by members in attendance and those participants on the telephone.</p> <p>Deb Sorg tracks attendance. If calling into the meeting, please send an email to Deb Sorg at deb.a.sorg@healthpartners.com. Include your name, organization and if you are calling in for another person within your organization. Members should provide Deb Sorg with email address changes and new members contact information.</p>	Completed.
2. Antitrust Statement	Reviewed – available on AUC website.	No discussion.
3. Review of last meeting’s Minutes	<p>Minutes approved with two corrections:</p> <p>Agenda item #4, Autism, second sentence: “not” corrected to “now “...”SBAR is now not at AUC...”</p> <p>Agenda item #8, Behavior Health Home (HHS), Andrea Agerlie changed to Kathy Sijan.</p>	Minutes will be posted on AUC MCT website
4. Final Changes to the Claims Companion Guides	<p>Dave Haugen of MDH presented a brief summary update of the status of the 837P and 837I claims companion guide annual maintenance. Several relatively minor revisions as part of the annual maintenance process had been approved by both the MCT and AUC Operations in previous email votes. However, before publishing the revisions as adopted rules, a few clarifying changes and corrections were brought to MDH’s attention for possible inclusion in the rules this time. MDH was now bringing these changes forward for discussion with the TAG at the meeting. MDH’s goal was to identify noncontroversial, technical corrections and clarifications to include in the current round of annual maintenance, and to complete the maintenance process as soon as practicable.</p> <p>A list of the possible changes brought to the TAG by MDH and discussed at the meeting is attached following the body of these minutes. The TAG approved all revisions except those proposed for Table A.5.4.a -- PUBLIC HEALTH NURSE CLINIC SERVICES, as the TAG did not agree that the proposed changes were limited to only technical changes, and required additional review and discussion with the affected groups.</p> <p>Those changes that were approved by the TAG will be forwarded by MDH to the AUC Operations Committee for its vote. If also approved by AUC Operations, the guide revisions will be forwarded to the MDH Commissioner’s office for review to post as adopted rules. MDH will be working to complete the annual maintenance process, including an announcement of revisions to the claims companion guides being adopted into rule, by approximately late May – early June of this year.</p> <p>Addendum to meeting notes above. Below are the changes discussed in agenda item 4 above.</p> <p>As described in the meeting notes for agenda item #4, with the exception of the proposed changes to “837P, Table A.5.4.a (Maternal and child health billing...),” the other proposed</p>	CLOSED

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	<p>clarifications/corrections below were approved by the Medical Code TAG. The changes approved by the TAG will be forwarded to the AUC Operations Committee for final approval.</p> <table border="1" data-bbox="527 272 1583 737"> <thead> <tr> <th data-bbox="527 272 726 305">Which guide(s)</th> <th data-bbox="726 272 1100 305">Where in guide(s)</th> <th data-bbox="1100 272 1583 305">What change(s)</th> </tr> </thead> <tbody> <tr> <td data-bbox="527 305 726 396">837P</td> <td data-bbox="726 305 1100 396"><i>Table A.5.1 Medicare Chapt. 16</i></td> <td data-bbox="1100 305 1583 396">Delete “Laboratory Services – Repeat Services” per MCT vote reported out on 3/20/15</td> </tr> <tr> <td data-bbox="527 396 726 461">837P</td> <td data-bbox="726 396 1100 461"><i>Medicare Chapt. 18, C&TC</i></td> <td data-bbox="1100 396 1583 461">Correction: 96110 UC to 96127 (this was missed in v10 the TAG voted on)</td> </tr> <tr> <td data-bbox="527 461 726 552">837P</td> <td data-bbox="726 461 1100 552"><i>Table A.5.4 a (Maternal and child health billing...)</i></td> <td data-bbox="1100 461 1583 552">Clarifications and corrections needed per SBAR submitted to MCT</td> </tr> <tr> <td data-bbox="527 552 726 675">837P, 837I</td> <td data-bbox="726 552 1100 675"><i>Table A.5.2 Children’s Mental Health Residential Tx Svcs; Intensive Residential Tx Svcs</i></td> <td data-bbox="1100 552 1583 675">Separate the bullets to distinguish DHS FFS vs. all other</td> </tr> <tr> <td data-bbox="527 675 726 737">837P, 837I</td> <td data-bbox="726 675 1100 737"><i>Front matter</i></td> <td data-bbox="1100 675 1583 737">Add reference that ICD-10 is required when required per federal regulations</td> </tr> </tbody> </table>	Which guide(s)	Where in guide(s)	What change(s)	837P	<i>Table A.5.1 Medicare Chapt. 16</i>	Delete “Laboratory Services – Repeat Services” per MCT vote reported out on 3/20/15	837P	<i>Medicare Chapt. 18, C&TC</i>	Correction: 96110 UC to 96127 (this was missed in v10 the TAG voted on)	837P	<i>Table A.5.4 a (Maternal and child health billing...)</i>	Clarifications and corrections needed per SBAR submitted to MCT	837P, 837I	<i>Table A.5.2 Children’s Mental Health Residential Tx Svcs; Intensive Residential Tx Svcs</i>	Separate the bullets to distinguish DHS FFS vs. all other	837P, 837I	<i>Front matter</i>	Add reference that ICD-10 is required when required per federal regulations	
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5. Autism – Andrea Agerlie, DHS	Andrea Agerlie of DHS reviewed the Autism Early Intensive Developmental and Behavioral Intervention benefit (EIDBI) approved recently by the TAG and AUC Operations. She noted that place of service for the benefit will be POS 11 or 12 and that the new EIDBI benefit modifier will be UB. Even if services are performed in the community, the place where originated would be reported. Faith Bauer said she would update the SBAR response document to include the clarifications. With these updates, the TAG agreed that the SBAR topic could be closed.	CLOSED																		
6. Mental Health Service Plan Development – DHS	Kathy Sijan reported DHS is waiting for federal approval of program and coding recommendations. The issue remains open.	OPEN																		
7. Gambling Addiction Program - Richard Scherer, Club Recovery, LLC	<p>DHS presented a worksheet with proposed gambling addiction treatment coding. ‘Since 1999, treatment for compulsive gambling for DHS recipients has been a statewide program, mandated that the funds for the program must be administered on an individual client, fee for service basis. The eligible vendor would bill every 30 days [based on the beginning date of treatment]. This currently is based on an invoice system, not a health care claim transaction. DHS currently covers these services as professional and facility based treatment services. Codes that indicate alcohol or drug abuse treatment are not appropriate to describe this treatment. In addition, gambling addiction treatment is funded by the state lottery and CD treatment is funded by CCDTF.</p> <p>DHS plans to move this type of service to be billed as a claim for processing through the claims system and approved codes for billing will be necessary. Richard Scherer, Club Recovery LLC submitted an SBAR in Oct, asking for a consistent coding solution. There are three parts to this proposal: assessment, treatment and ongoing treatment.’</p> <p>See proposed coding is on the Worksheet in - Compulsive Gambling - DHS Proposal worksheet. In addition, DHS has prepared a gambling addiction treatment handbook with additional more detailed information that will be forwarded to the TAG.</p>	OPEN All payers are asked to review proposed coding																		

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	In discussion, concerns were raised about possible double billing for both professional and facility services. It was agreed to continue discussion of the proposed coding at a subsequent TAG meeting, and to request that DHS program staff (Helen Ghebre) and Mr. Scherer attend the meeting.	
8.PH Nurse Updates - DHS	Joanne Wolf reported that variations in coding for Maternal and Child Health services as part of Child and Teen Check-ups (C&TC) continues, as documented recently by the Metro Action Group. The TAG agreed that members would research their coding practices for these services and report back at the next TAG meeting.	OPEN All payers are asked to review proposed changes
9. Behavior Health Home (BHH) – Kathy Sijan, DHS	Andrea Agerlie of DHS presented a summary of coding recommendations for Behavior Health Home (BHH). She clarified that the program will become effective January 1, 2016 7 , and that the codes could be incorporated with the TAG's coding clarification grid. However, federal approval of the codes is needed the codes could be considered for inclusion in the claims companion guides.	OPEN
10. Children's Residential and IRTS Corrections - DHS	These corrections were incorporated in the discussion of agenda item no. 4 above.	CLOSED
11. Miscellaneous discussion	Asthma Education SBAR, HCMC, June 10, 2014 – what was outcome of issue? The issue was withdrawn with no action.	CLOSED
12. MN Community Coding Practice/Recommendation Table	Faith Bauer will update grid.	OPEN
13. Next meeting	<ul style="list-style-type: none"> • The next scheduled meeting is May 14, 9:00-12:00, St. Croix Room – 1st floor, HealthPartners, 8170 Building, Bloomington. • The July 9 MCT meeting will be cancelled; but will meet on the second scheduled meeting of the month – July 28. 	CLOSED