



**AUC OPERATIONS COMMITTEE Meeting Notes
Tuesday, March 8, 2016**

Agenda item	Notes/follow-up
1. Meeting to order – Tony Rinkerberg, co-chair	The AUC co-chair, Tony Rinkenberger, called the meeting to order.
2. Anti-trust statement: http://www.health.state.mn.us/auc/pdfs/antitrust.pdf	Tony Rinkenger reminded members to be mindful of the AUC antitrust statement during discussions.
3. Introductions - Please e-mail your attendance to health.auc@state.mn.us	Tony Rinkenberger called for attendance to determine if a quorum was present. A quorum was not present.
4. Recognize immediate past co-chairs	Tony thanked the past AUC co-chairs, Ann Hale and Cherie Nauha, for their leadership during 2015 and accepted plaques from the AUC on their behalf.
5. Review and vote on proposed changes to the Acknowledgment Companion Guides	<p>Dave Haugen of the Minnesota Department of Health (MDH) briefly explained that the AUC Acknowledgment Technical Advisory Group (TAG) had developed and approved changes to companion guides for three acknowledgment transactions, the TA-1, 999, and 277CA, as part of annual maintenance of the guides. The changes approved by the TAG were being presented to the Operations Committee for a vote. Because a quorum was not present at the meeting, the Operations vote would be conducted via email following the meeting.</p> <p>Dave briefly reviewed the changes, and described the changes to the TA-1 and 999 guides as minor. In contrast, the 277CA guide incorporated a number of updates to claims status codes listed in an appendix, as well as updates and clarifications to a crosswalk for combined health care claim status codes and claim status category codes.</p>

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	<p>Note: In a subsequent email vote, the Operations Committee approved the changes described at the March 8 meeting. The changes were also subsequently adopted into state rules.</p>
<p>6. Review and vote on proposed data content and format for ACO attributed member files</p>	<p>Dave Haugen reported that the AUC’s “ACO Data Analytics TAG” had recently completed its charge to recommend a standard, uniform record layout and data content for exchanging enrollment data for patients and providers participating in Accountable Care Organization (ACO) and ACO-like arrangements. He presented the TAG’s work product, a short paper entitled “Recommended ACO-attributed member and provider data elements and data format” for review and a subsequent AUC vote.</p> <p>Note: Due to lack of a quorum at the March 8 meeting, the AUC Operations Committee subsequently approved the TAG’s report via email. The report was then forwarded to the Minnesota Department of Human Services (DHS) for further review and consideration.</p>
<p>7. Explore the “state of the art” in health care administrative simplification</p> <ol style="list-style-type: none"> 1. Review and discuss: recent NCVHS findings and testimony; 2015 survey of ambulatory clinics’ use of key administrative transactions; results of recent AUC “customer satisfaction survey;” other continued monitoring and reporting on the state of art. 	<p>NCVHS Findings:</p> <p>Dave Haugen presented highlights of a February 29, 2016 letter by the National Committee on Vital and Health Statistics (NCVHS) to the Secretary of the federal Department of Health and Human Services (HHS) Secretary. The letter provided a summary of NCVHS hearings held June 16-17, 2015 regarding the “Status of Adopted Standards, Code Sets, Identifiers, and Operating Rules” and related recommendations. The letter summarized key themes and messages from over 170 pieces of testimony, as well as made a number of recommendations.</p> <p>The letter emphasized that an “entire ecosystem [is moving] towards administrative simplification” but that “further work is needed to continuously improve the adopted transaction standards and operating rules and increase their level of implementation and the consistency in the way</p>

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	<p>they are implemented and used.” The letter noted in particular that there is “variation in the level of implementation of various transaction standards and operating rules” and that there was “inconsistency within the industry in the way transaction standards and operating rules are being implemented.”</p> <p>In discussion, particularly regarding one of NCVHS’s recommendations for additional broad education to reduce the variation and inconsistencies noted above , several Operations members agreed that more education may be needed to increase understanding and to improve use of transactions, and provided examples. The education theme was viewed as important for the AUC as part of its overall work plan.</p> <p>2015 Survey of MN ambulatory clinics:</p> <p>Dave reported that MDH Office of Health Information Technology conducted a survey of 1181 clinics in the spring of 2015 to track implementation of EHRs and other health IT. The survey included four questions to also obtain information regarding use of standard, electronic administrative transactions of four different types of transactions: claims, eligibility, remittance advices and acknowledgments. Key results included: 94% of the clinics reported filing claims electronically for 80-100% of their patients; 77% of clinics checked insurance eligibility electronically for 80-100% of patients; 77% received electronic remittance advices for 80-100% of patients; and 81% received electronic acknowledgments of their claims submissions. Survey questions and responses can be found in the March 8, 2016 meeting materials (PowerPoint presentation).</p> <p>AUC customer satisfaction survey</p> <p>Dave Haugen reported that MDH will be conducting an annual AUC “customer satisfaction survey” to obtain feedback about its work with the AUC to use for improvement purposes. He encouraged all Operations members to respond to provide MDH with broad and accurate feedback.</p>

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<p>8. Technical Advisory Group (TAG) and SBAR (questions/change requests) updates</p>	<p><u>Medical Code TAG, co-chair Faith Bauer</u> Faith reported the MCT is currently reviewing comments received during open comment period for the 837 professional and institution guides. The TAG is working through those and is very near the end. The TAG is also working on a few outstanding SBARs, including teledentistry and updates to the 837 dental companion guide.</p> <p><u>Eligibility TAG, co- chair Theresa Noponen</u> Theresa reported the Eligibility TAG met February 24 and part of their 2016 work plan is to research how to improve the 271 transaction to meet the needs of non-HIPAA entities. The TAG will prepare white papers on Workers Comp, P&C – why we have non-HIPAA exception. Theresa stated Tim Lopez, BCBSMN, did a fabulous job presenting an AAA Errors 101 – education for the group; walking through all different errors, loops and segments.</p> <p><u>EOB/Remit TAG, co-chairs: Lisa Wichterman and Pete Anderson</u> Lisa reported the EOB/Remit TAG met on February 16; overpayments were the focus of the meeting discussion; the TAG developed scenarios and will continue with that discussion at its March 21 meeting.</p> <p><u>Claims DD TAG</u> Mary Myslajek reported the Claims DD TAG did not meet in February; will meet in April.</p> <p><u>WEDI update</u> Laurie Darst announced WEDI distributed a survey seeking industry input on transactions of concern; the survey closes on March 11. She stated it is very important that WEDI get feedback from the industry and encouraged the AUC members to complete the survey. Laurie further stated a second survey was distributed the last couple of days regarding ICD-10 implementation. WEDI</p>

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	<p>will share survey results with CMS of implementation experiences. This second survey will be opened through April 8, 2016.</p> <p>Laurie stated that WEDI will convene a prior authorization work group in May to address challenges in underuse of the 278 prior authorizations transaction. The workgroup will focus on business issues identified in previous surveys (new payment models, workflow and not on transaction itself).</p>
<p>9. Update regarding Department of Labor (DLI) requirements for workers' compensation insurers</p>	<p>Lisa Wichterman of the Minnesota Department of Labor and Industry (DLI) reported that state legislation was enacted in 2014 requiring that attachments for workers' compensation-related medical claims must be sent electronically via the 275 transaction by July 1, 2016. She said that state Workers' Compensation Advisory Committee had approved a legislative proposal to amend the requirement to delay its implementation to January 1, 2017, for consideration during the 2016 legislative session.</p>
<p>10. Other Business</p>	<p>No other business</p>

Next Meeting: 2:00 p.m. – 4:00 p.m., June 14, 2016 (In-person & Teleconference/WebEx)

TIES Event Center, [1644 Larpenteur Avenue West, Falcon Heights, MN 55108](#)