

ALTCS RFP YH12-0001

PROSPECTIVE OFFERORS' CONFERENCE

TECHNICAL OVERVIEW

Arizona Health Care Cost Containment System

CYE '12 Prospective Offeror Technical Overview

INTRODUCTION

Provide all potential Offerors with an overview of AHCCCS technical environment and data interface and standards.

AHCCCS

CYE '12 Prospective Offeror Technical Overview

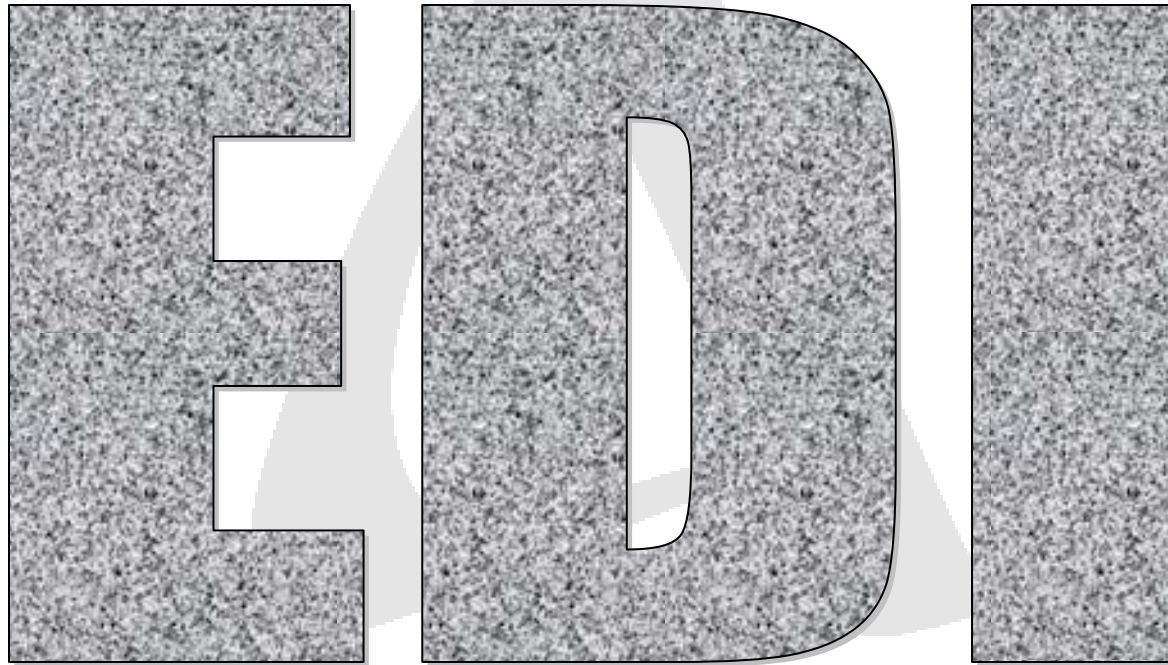
AGENDA

•Interfaces

- EDI** - Dennis Koch, Project Manager
- Recipient/Health Plan** - Kelly Gerard, Project Lead
- Encounters** - Mike Upchurch, Project Manager
- Reinsurance** - Mike Upchurch, Project Manager
- Provider** - Lynn Hopkins, Project Manager
- Provider Affiliation** - Lynn Hopkins, Project Manager
- Reference** - Lynn Hopkins, Project Manager
- Web Interfaces** - Marna Richmond, Project Manager

•Questions

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EDI – ELECTRONIC DATA INTERCHANGE

- **Community Manager**
- **Transaction Insight (TI)**
- **Validation and Translation**

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COMMUNITY MANAGER

- **TIBCO® Foresight Community Manager® is a secure online self-testing web portal**
- **Ensure compliance with 5010 X12 transactions**
- **Comprehensive testing regimen**
- **Uses AHCCCS developed guidelines**
- **Designed for small files**
- **Real-time results**
- **<https://tradingpartnertesting.azahcccs.gov>**

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TRANSACTION INSIGHT (TI)

- **TIBCO® Foresight Transaction Insight® secure web portal**
- **Performance reporting and error correction capabilities**
- **Form-based error correction facilities for encounters**
- **Search for specific documents from the TI database with a powerful search function**

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VALIDATION and TRANSLATION

- **TIBCO® Foresight Instream® transaction validation**
- **High-speed validation of transactions using standards and custom business rules (guidelines)**
- **Automatically creates, validates and distributes TA1, 277CA, 824 and 999 acknowledgements**
- **Translator IBM ® Websphere Transformation Extender ® (WTX)**

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RESOURCES

- **AHCCCS General Website**

<http://www.azahcccs.gov/>

- **EDI Resources**

<http://www.azahcccs.gov/commercial/EDIresources/EDIresources.aspx>

- **AHCCCS Encounter Technical Documents**

<http://www.azahcccs.gov/commercial/ContractorResources/encounters/companiontechnical.aspx>

- **AHCCCS Online Website**

<https://azweb.statemedicaid.us/Home.asp>

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RESOURCES

- **Community Manager**

<https://tradingpartnertesting.azahcccs.gov>

- **Transaction Insight (Test)**

<https://tiwebtst.statemedicaid.us>

- **Transaction Insight (Production)**

<https://tiwebprd.statemedicaid.us>

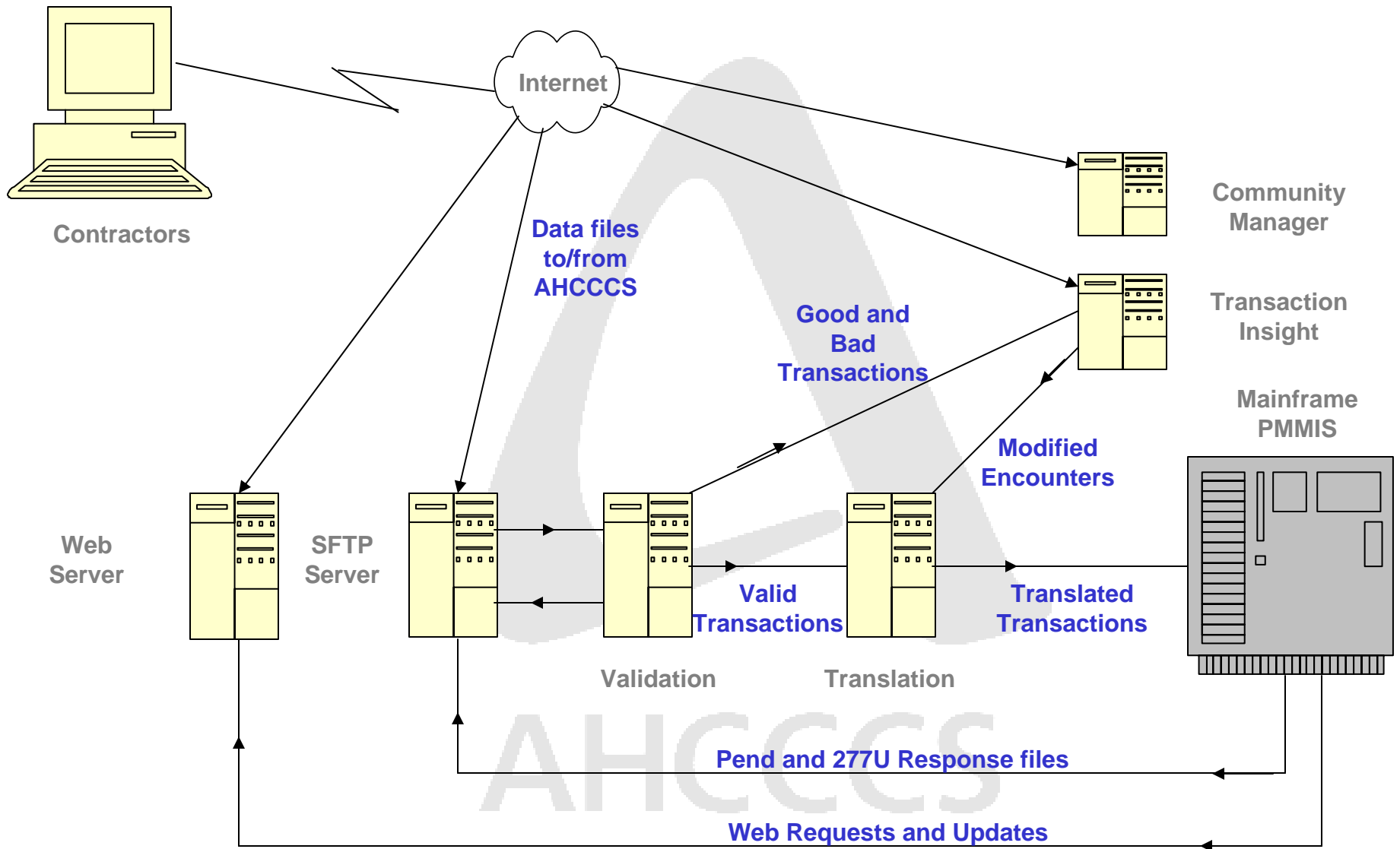
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SET UP for NEW CONTRACTOR

- **Health Plan ID assigned**
- **User Affirmation and Data Exchange Agreements**
- **Access to Community Manager**
- **Access to Transaction Insight Test**
- **Access to Transaction Insight Production**
- **Access to Secured Folder on SFTP Server**
- **Initial testing with Community Manager**
- **Test with TI and SFTP Server**
- **Once testing is complete move to production on 10/01/2011**

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RECIPIENT /

HEALTH PLAN

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RECIPIENT DATA SOURCES

DES

SSA

ACE

OTHER

ELIGIBILITY ADDS

DISCONTINUANCE

CHANGES TO DEMOGRAPHICS

NAME

GENDER

DATE OF BIRTH

CHANGE IN ADDRESS

CONTRACTOR CHOICE

THIRD PARTY LIABILITY LEADS

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ENROLLMENT DATES

Usually effective the day AHCCCS updates action

EXCEPTIONS:

Prospective Enrollments

As of the 1st
of the next month
(The Last Daily)

Administrative Actions

Can be any day
in the past

(Any Daily)

System Unavailable at Notification

Can be retroactive

(Month End)

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DISENROLLMENT DATES

Disenrollment is usually effective the day prior to update

EXCEPTIONS:

**Date of
Death**

(Retroactive)

**Incarceration
Institutional**

**(Can be Normal
or Retroactive)**

**Linking /
Duplicate
Enrollment**

**(Can be Normal
or Retroactive)**

Administrative

**(Can be Normal
or Retroactive)**

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ENROLLMENT RULES

- **Less than 30 days of eligibility**
- **90 day re-enrollment**
- **Enrollment choice**
- **Auto assignment**

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ANNUAL ENROLLMENT CHOICE (AEC)

- **Each member case in Maricopa county is assigned an anniversary month**
- **AEC letter generated two months in advance of anniversary month**
- **Members with Choice file generated to Contractor**
 - Identifies all Contractor's members who have opportunity to make a Contractor choice
 - File placed on SFTP server with name of ccyymm.MWC

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ANNUAL ENROLLMENT CHOICE (AEC)

- **Member makes choice**

- **Weekly Reporting**

Weekly files that identifies all members who have made an AEC choice

File placed on SFTP server

yccmdd.AEG – Annual Enrollment Gain

yccmdd.AEL – Annual Enrollment Loss

- **Potential Transitional Listing**

Identifies all members who have made a final AEC choice for transition planning

File placed on SFTP server with name of mmddy.PTL

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CAPITATION

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CAPITATION

- **Capitation activity based on enrollment actions**
- **Capitation calculated on**
 - Contractor
 - GSA
 - Contract Type
 - Rate Code
- **Capitation calculated on per diem basis**
 - $\text{Rate} \div \text{Days in the month} \times \text{days of enrollment thru end of month}$

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CAPITATION

- **Recoupments are subtracted from Contractor's weekly payments**
- **Recoupment calculated on per diem basis**
 - **Rate ÷ Days in the month × days of disenrollment thru end of month**
- **Contractors receive weekly capitation payments and payment notification via the weekly 820 files**

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MASS ADJUSTMENTS

- Ability to change capitation payment for a population (Risk Group)
- Payments which were paid in the past
- Contractors receives notification via 820 file
- No enrollment activity
- Only reflect changes of payment due to change in payment rate

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MANUAL PAYMENTS

- **Error in record prevents enrollment/disenrollment action from appearing on daily 834 file**
- **Manual capitation correction on an individual record**
- **Payments will appear on the weekly 820 file**
- **Activity will also appear on Manual Payment file**

File placed on SFTP server with name of ccyymm.MPR

- **When there is an error but no capitation is involved**

Manual notification to Contractor

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UPDATES

- **Online eligibility and enrollment updates to PMMIS occur between 6 am and 6 pm daily**
- **Eligibility data received by AHCCCS by 5 pm will be processed the same day**
- **In the event a member needs services and the Contractor has not received the daily 834 file, enrollment for the member can be verified using one of the automated verification processes**

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DAILY BATCH PROCESSING CYCLE

- **Start at 6pm every evening**
- **834 files available to Contractors no later than 7am**
 - **Email notification via Listserv participation if files will be delayed**
- **Enrollment activity includes**
 - **Enrollments**
 - **Retroactive enrollment blocks**
 - **Disenrollments**
 - **Disenrollment blocks**
 - **Demographic changes**

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'LAST DAILY' PROCESSING CYCLE

- **Third to last day before the 1st of the next month**

9/28/11, 10/29/11, 11/28/11, 12/29/11, etc

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| OCTOBER 2011 | | | | | | |
|--------------|-----|------|-----|------|-----|---------------|
| SUN | MON | TUES | WED | THUR | FRI | SAT |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 LAST DAILY |
| 30 | 31 | | | | | |

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'LAST DAILY' PROCESSING CYCLE

- **Third to last day before the 1st of the next month**

9/28/11, 10/29/11, 11/28/11, 12/29/11, etc

- **Starts at noon**

No online update after that time

- **Monthly process file availability schedule on AHCCCS Web site**

<http://www.azahcccs.gov/commercial/ISD/monthend.aspx>

- **Activity includes**

Enrollments, Retroactive enrollment blocks

Disenrollments, Disenrollment blocks

Demographic changes

Rate Code Changes

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MONTHLY PROCESSING CYCLE

- **Occurs immediately after Last Daily Cycle**
- **Monthly Enrollment Notification**
 - Full file of all members enrolled with Contractor as of the 1st of the month
- **Basis for prospective capitation payment**
- **File used to validate Contractor's data**
 - Discrepancies in Contractor's data to be reported to DHCM
- **Management Reports**

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| OCTOBER 2011 | | | | | | |
|--------------|-----|------|-----|------|-----|----------------------------------|
| SUN | MON | TUES | WED | THUR | FRI | SAT |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 LAST DAILY & MONTHLY |
| 30 | 31 | | | | | |

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'NEXT DAILY' PROCESSING CYCLE

- **Starts at 6pm after completion of Monthly Cycle**
- **Output files available to Contractors by 7 am**
- **Includes all enrollment activity since last daily**
 - **Enrollments & Retroactive enrollment blocks**
 - **Disenrollments**
 - Will recoups prospective capitation already paid**
 - **Disenrollment blocks**
 - **Demographic changes**
- **These two files must be processed after Last Daily and Monthly Enrollment notifications**

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| OCTOBER 2011 | | | | | | |
|---------------|---------------|------|-----|------|-----|-------------------------|
| SUN | MON | TUES | WED | THUR | FRI | SAT |
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 LAST DAILY & MONTHLY |
| 30 NEXT DAILY | 31 NEXT DAILY | | | | | |

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RECIPIENT/HEALTH PLAN

DATA EXCHANGE

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DATA EXCHANGE

- **From AHCCCS to Contractors**

- **Daily Files**

- **HIPAA 834 (Daily Enrollment Notification)**

- Available on SFTP server in the EDI-OUT folder named AZD834-999999-yymmdd.TXT
- Intended to update Contractor's database

- **Rate Code Summary**

- Available on the SFTP server in the OUT folder named yymmdd.DRC
- Intended as a summary of capitation activity as a result of the daily processing

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DATA EXCHANGE

- **From AHCCCS to Contractors**

- **Daily Files**

- **Manual Payment file**

- Available on SFTP server in the OUT folder named yymmdd.MPR
 - Intended to notify Contractor of addition updates that include capitation that were prevented from appearing on the 834

- **Active Care File**

- Available on SFTP server in the OUT folder named yymmdd.ACR
 - Intended to notify Contractor of members with an identified medical condition such as pregnancy or sick newborn

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DATA EXCHANGE

- **From AHCCCS to Contractors**
 - **Daily Files**
 - **Prior Plan File**
 - Available on SFTP server in the OUT folder named yymmdd.PPL
 - Intended to provide current enrollment Contractor for a member who was previously enrolled with contractor in last 90 days for transition activities

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DATA EXCHANGE

- **From AHCCCS to Contractors**

- **Daily Files**

- **TPL Notification File**

- Available on SFTP server in the OUT folder named yymmdd.NOT
 - Intended to provide information of TPL referrals that were invalid according to our TPL contractor
 - Verified TPL data is provided on the 834

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DATA EXCHANGE

- **From AHCCCS to Contractors**
 - **Weekly Files**
 - **Capitation Notification (820)**
 - Available on the SFTP server in the EDI-OUT folder named AZW820-999999-yymmdd.TXT
 - Provided to Contractors to validate payment received to the payment activity reported on the daily 834 files
 - **Annual Enrollment Gain & Loss**
 - Two files available on the SFTP server in the OUT folder named yymmdd.AEG & yymmdd.AEL
 - Provided to Contractors to identify members who have chosen to move to or from the another contractor as of 1st of month after next

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DATA EXCHANGE

- **From AHCCCS to Contractors**
 - **Monthly Files**
 - **HIPAA 834 (Monthly Enrollment Recon)**
 - Available on SFTP server in the EDI-OUT folder named AZM834-999999-yymmdd.TXT
 - Provides a complete listing and details of contractor's membership as of the first of the next month
 - Contractor should reconcile their records to this monthly file and identify/update any discrepancies
 - **Rate Code Summary**
 - Available on the SFTP server in the OUT folder named yymmdd.MRC
 - Intended as a summary of prospective monthly capitation processing

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DATA EXCHANGE

- **From AHCCCS to Contractors**
 - **Monthly Files**
 - **Members with Choice file**
 - Available on SFTP server in the OUT folder named ccyymm.MWC
 - Provide a listing of all members who will be receiving notification that they can participate in the AEC
 - **Potential Transition Listing**
 - Available on the SFTP server in the OUT folder named yymmdd.PTL
 - Provide a listing of all members who made an AEC that will be effective the 1st of the following month and the Contractor they are transferring from - used for transition activities

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DATA EXCHANGE

- **From Contractors to AHCCCS**
 - **Third Party Leads**
 - Electronic file
 - Submit new potential other TPL data to be verified by TPL contractor
 - Update existing verified TPL data with new information for verification with TPL contractor
 - Should not include:
 - Medicare Part D enrolled plan
 - Medicare HMO coverage

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TESTING

- **Testing must be completed prior to:**
 - **Implementation of a new Contractor**
 - **Change in software vendor or version upgrade**
 - **Change by AHCCCS resulting in an impact to any data exchange**
- **Must be completed prior to any implementation**

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ENGINEERS

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AHCCCS ENCOUNTERS

The contents of an encounter record must meet the requirements prescribed by the CMS and accepted by AHCCCS. Record validation is handled by the Validation Tool prior to shipping record to Mainframe

These requirements are presented in the *AHCCCS Encounter Manual*

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ENCOUNTER SUBMISSION

- **837 FILES**

- **Submitted by Contractor**

- **HIPAA 837P (Professional)**

- **HIPAA 837I (Institutional)**

- **HIPAA 837D (Dental)**

- **NCPDP PAH - Post Adjudicated History (Pharmacy)**

- **Further details can be found in the TR3 Documents and AHCCCS Companion Documents**

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SUBMISSIONS

- **Submission standards are defined in the [AHCCCS Encounter Manual](#)**
- **AHCCCS defines the receipt date for encounters as the date the encounter is received on the AHCCCS FTP server**

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SUBMISSIONS

- **Encounter data is loaded daily to a mainframe staging area where the encounter is held until loaded for processing**
- **A copy of the encounter in its received form is maintained in a staging area**
- **Contractors may submit as often as they deem necessary as each file is date and time stamped on the server**

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TECHNICAL ASSISTANCE

- AHCCCS Encounter Unit staff are available via phone or email Monday through Friday to assist Contractors in the submission of encounters as well as the resolution and research of encounter pends and denials
- Contractors are notified of the name and telephone number of their assigned Technical Assistant, who is their main point of contact for encounter related issues
- Encounter Operations Unit offers training on how to correctly submit encounters
 - This training is mandatory for new Contractors and is available to existing Contractors as requested

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SET UP

Before a Contractor may submit encounter data, AHCCCS requires the completion of certain agreements, authorizations and control documents including,

Form 1:

Contractor Encounter Submission Notification and Transmission Submitter Number (TSN) Application

Form 2:

Electronic Data Interchange Agreement Form

Refer to the AHCCCS Encounter Manual for forms and instructions

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PROCESSING CYCLE

- Encounters now process twice monthly beginning at 5:00 P.M. on the 1st Friday after the 1st Wednesday of the month and on the 3rd Friday of the month [Schedule](#)
- The 1st cycle of the month is a complete process to include Reinsurance Case Creation and processing
- The 2nd cycle processing is equal to the 1st cycle except it does not include Reinsurance Case Creation and processing, and only includes Voids/ Replacements not associated with RI Cases

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PROCESSING CYCLE

- **Both Cycles include:**

- **AHCCCS CRN Assignment**

- **A CRN is derived from the following information:**

- **Julian Date (digits 1 - 5)** This date reflects the date of receipt of the New Day encounter file in Julian date format.
- **Batch Number (digits 6-10)** This number groups encounters into manageable groups of 999 documents.
- **Document Number (digits 11-12)** This number pertains to one facility or 1-50 related medical/drug/dental encounters.
- **Line Number (digits 13-14)** This number applies to detail lines only

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PROCESSING CYCLE

- **Both Cycles include:**

- **Edits and Audits**

- **Edits** involve data quality checks of fields such as member and provider ID numbers, dates of service, service and diagnosis codes, and payment data
- **Audits** check the encounter for duplicate or potential duplicate status

- **File and Report generation**

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PROCESSING CYCLE

- Encounters are processed through Validation
- Submitted data can be viewed / modified in Transaction Insight
- Acknowledgements (999,277CA,TA1) are returned
- Data is translated for the adjudication system
- Pend/Denied Files, 277CA and 277U transactions returned after cycle

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TESTING

- **New Contractors must go through a testing phase before submitting official encounter data to AHCCCS**
- **A training session for the Contractor and/or designated subcontractor is scheduled during which the testing process will be reviewed**
- **Technical assistance is available from Encounter Operations Unit staff during the testing period**

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TESTING (cont'd)

- **Next set of testing involves submitting encounters to the FTP server for processing**
- **When AHCCCS verifies that a Contractor has successfully completed the testing process, the Contractor will be allowed to begin submitting encounters in production**

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REINSURANCE

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WHAT IS REINSURANCE?

- Reinsurance is a method of partially reimbursing Contractors when the cost of care for a member for reinsurance covered services exceeds a deductible amount within a Contract Year
- Only available for members who have had an inpatient stay during the contract year
- The deductible is based on the number of statewide members enrolled with a Contractor at the beginning of a Contract Year
- Services covered under reinsurance are detailed in contract and in the [Reinsurance Processing Manual](#). Not all AHCCCS covered services are covered under reinsurance

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WHAT IS REINSURANCE? (cont)

- **AHCCCS also provides for reconciliation and adjustment of RI payments as needed in which encounters used in RI payment calculation are replaced or voided**
- **AHCCCS establishes RI cases using a monthly process that scans the encounters database for approved, historical encounters for each Contractor's members**
- **The monthly RI Case Creation cycle runs after the 1st monthly encounter cycle**
- **Upon the creation of a RI case the encounters are processed through the RI edits/audits**

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WHAT IS REINSURANCE? (cont)

- **The RI system generates the following monthly reports:**
 - **Reinsurance Case Initiation**
 - **Reinsurance Reconciliation**
 - **Reinsurance Case Summary**
 - **Reinsurance Remittance Advice**

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PROCESSING

- **RI cases are generated automatically by AHCCCS based on encounter data (with limited exceptions). An on-line interface allows the Contractor to view RI data**
- **After an RI encounter passes edits/audits and is approved, the RI payment process calculates the amount due the Contractor**
- **The Reinsurance Remittance Advice is then processed by the Finance system for payment to the Contractor**
- **Contractors are required to notify AHCCCS of any third party coverage identified in a Reinsurance case**

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CATASTROPHIC REINSURANCE

- **Provided to partially reimburse Contractor for the cost of care for a member who meet the criteria and requirements for Catastrophic Reinsurance**
- **Contractor is responsible for identifying members and submitting written notification to the Division of Health Care Management (DHCM), Medical Management Unit**
- **Supporting medical documentation must accompany request. Details are include in the Reinsurance Processing Manual**

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TRANSPLANT REINSURANCE

- **Provided to partially reimburse Contractor for the cost of care for a member who meets the criteria and requirements for Transplant Reinsurance**
- **Covers members eligible to received AHCCCS covered solid organ or tissue transplants**
- **Contractor is responsible for identifying members and submitting written notification to the Division of Health Care Management (DHCM), Medical Management Unit**

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REPORTING

REINSURANCE CASE INITIATION

- Recipient's Name, AHCCCS ID and Case Type
- Case Initiation Date
- Associated encounters in case by CRN

REINSURANCE CASE RECONCILIATION

- Shows encounters that could be associated to an existing Reinsurance case when the encounter Pend is cleared
 - Case Type, Recipient AHCCCS ID and Reinsurance Case Number
 - CRN number of pended encounter

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REPORTING (cont)

REINSURANCE CASE SUMMARY

- **Shows members by Contractor with RI cases**
 - **Recipient's Name, AHCCCS ID and Case Type**
 - **CRN (Claim Reference Number)**
 - **Coinsurance percentage and status**
 - **Total Case Value**
 - **Deductible**
 - **Total Paid**

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PROVIDER

AHCCCS

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PROVIDER INTERFACE

AHCCCS requires that all providers utilized by Contractors be registered with AHCCCS

•Consists of two files found in the SFTP ShareINFO folder

•Provider Profile

•Profile Includes all provider types, service codes, and categories of service

•Name: PROFILE.ZIP

PR090 – (P1) Provider Type Profile

RF607 – (P2) Provider Type COS to Licensing Agency

RF618 – (P3) Provider Type Rate Schedule

RF603 – (P4) Category of Service Code

RF612 – (P5) Provider Type Description

RF639 – (P6) Provider Type code

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PROVIDER INTERFACE

•Provider Record

- Includes all AHCCCS registered providers
- Includes active, terminated and suspended providers

- Name: PROVIDER.ZIP

- PR010 – (P1) Demographic

- PR070 – (P2) Provider Enrollment Status

- PR035 – (P3) Category of Service

- PR050 – (P4) Payment Rate

- PR020 – (P5) License

- PR030 – (P6) Specialty

- PR055 – (P7) Exception

- PR082 – (R1) Alternate ID

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PROVIDER INTERFACE

- **Produced weekly**
- **Created every Wednesday**
- **Available to Contractors Thursday**

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DEFERRED

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REFERENCE

- **Recipient produces one reference file**
 - **Master Carrier ID file**
 - **Complete file of TPL Carrier ID number**
 - **Produced every Friday**
 - **Placed in the ShareINFO folder as 'RFCARIDmmddy.TXT'**

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REFERENCE

- **Three encounter Reference files produced**
 - **Internal Field Information**
 - Provides mapping of field name on a specific form to an Internal table and Field name/number
 - Found in ShareINFO folder on SFTP with name of ECFLD.TXT
 - **Error to Internal Field relationship**
 - Provides mapping for each Error Code on a specific form and which fields are used
 - Found in ShareINFO folder on SFTP with name of ECERRFLD.TXT
 - **Error Codes and Descriptions**
 - Provides each Error Code and description
 - Found in ShareINFO folder on SFTP with name of ECERR.TXT

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REFERENCE

- **Seven service code related Reference files are produced**
- **Procedure Tables**
 - Found in ShareINFO folder on SFTP with name of
REF01.ZIP
 - RF113 – (H1) Demographic
 - RF112 – (H2) Maximum Allowable Charges
 - RF123 – (H3) AHCCCS Coverage
 - RF769 – (H4) AHCCCS Medical Category of Service
 - RF774 – (H5) AHCCCS Revenue Codes to Bill Types
 - RF773 – (H6) AHCCCS Revenue Codes to Procedure Code

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REFERENCE

•Procedure Modifiers

- These are code tables to further define procedures
- Found in ShareINFO folder on SFTP with name of REFER02.ZIP

RF113 – (M2) Procedures

RF122 – (M3) FFS and CMDP Modifier

(M4) NDC with Family Planning = 'Y'

(M5) ICD9 with Family Planning = 'Y'

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REFERENCE

•Outpatient Fee Schedules

- Found in ShareINFO folder on SFTP with name of REFER03.ZIP
 - RF127 – (N1) OPFS Indicators
 - RF126 – (N2) OPFS Price
 - RF797 – (N3) OPFS Bundled Driver
 - RF796 – (N4) OPFS Bundled Revenue Codes
 - RF128 – (N5) CCI Codes
 - RF798 – (N6) Multiple Surgery Exemptions
 - RF723 – (N7) Limit Override Modifiers
 - RF725 – (N8) Override Modifier Action Codes
 - RF121 – (N9) OPFS Procedure Modifiers
 - RF739 – (P1) Limit Override Procedures

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REFERENCE

•ASC Group Reference

- Found in ShareINFO folder on SFTP with name of REFER04.ZIP
 - RF771 – (T2) Link Multiple Service Types
 - RF729 – (T3) VFC Procedure Codes
 - RF799 – (T4) Medicare Primary Payer Error Bypass
 - RF347 – (T5) Medicaid Covered Therapeutic Classes
 - RFC23 – (T6) ASC Rate Schedule
 - RF103 – (T7) Dental Procedures
 - RF115 – (T8) Procedure Place of Service

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CYE '12 Prospective Offeror Technical Overview

REFERENCE

•LTC Procedure Fee Schedules

- Found in ShareINFO folder on SFTP with name of REFER05.ZIP
 - RF142 – (M1) LTC MCO Max Allowed Charge
 - RF132 – (M2) LTC MCO Modifier

•Acute Procedure Fee Schedules

- Found in ShareINFO folder on SFTP with name of REFER06.ZIP
 - RF142 – (M1) Acute MCO Max Allowed Charge
 - RF132 – (M2) Acute MCO Modifier

•Co-Pays

- Found in ShareINFO folder on SFTP with name of REFER07.ZIP
 - RF7A7 – (M1) Co-Pay to Service

CYE '12 Prospective Offeror Technical Overview

VERIFICATION

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CYE '12 Prospective Offeror Technical Overview

MEMBER VERIFICATION

- **Obtain Eligibility, Enrollment, Medicare, TPL Coverage and other information**
- **Automated processes available to AHCCCS registered providers**
 - **270/271 (BATCH)**
 - **AHCCCS ONLINE (WEB)**
 - **Medicaid Eligibility Verification system (MEVS)**
- **Contractors are encouraged to have their providers use the automated verification processes**
- **Communications Center available to AHCCCS member and providers**

CYE '12 Prospective Offeror Technical Overview

MEMBER VERIFICATION

Medicaid Eligibility Verification System (MEVS)

- **PC or POS based verifications**
- **Available 24/7**
- **Hardware/software provided by contracted vendor**
- **Contracted vendor charge providers**
- **Ability to print information**
- **Requires input of demographic information**
- **Real Time inquiry**
- **Single or batch request**

CYE '12 Prospective Offeror Technical Overview

MEMBER VERIFICATION

AHCCCS ONLINE Verification

- **Internet based verifications**
- **Available 24/7**
- **No cost to providers**
- **Requires advance registration**
- **Ability to print information**
- **Requires input of demographic information**
- **Real Time inquiry**

CYE '12 Prospective Offeror Technical Overview

MEMBER VERIFICATION

EDI 270/271 TRANSACTION

- **Ability to check on multiple members**
- **24 hour turnaround**
- **No cost to providers**
- **Requires advance registration**
- **Ability to process information**
- **Requires input of demographic information**
- **Real Time inquiry**

CYE '12 Prospective Offeror Technical Overview

MEMBER VERIFICATION

Communications Center

- **Limited staffing by Customer Service Representatives**
- **Limited to business hours availability**
 - **Not available weekends or holidays**
- **No cost to providers**
- **Provides service to members and providers**
- **Problem research and resolution**
- **Real Time inquiry**

CYE '12 Prospective Offeror Technical Overview

WEB

INTERFACES

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AHCCCS

ONLINE

AHCCCS

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AHCCCS ONLINE

<https://azweb.statemedicaid.us/Home.asp>

- **270/271 (Eligibility and Enrollment)**
- **276/277 (Claims Status)**
- **837 (Claims Submission)**
- **278 (Prior Authorization Submission and Inquiry)**
- **Provider Information and Verification**
- **Health Plan Member Address Update**
- **User Manuals**

CYE '12 Prospective Offeror Technical Overview

AHCCCS ONLINE

- **Secure Internet based applications**
- **Available 24/7**
- **Quick 4 step account creation process, must have NPI or AHCCCS Provider ID**
- **Ability to create multiple accounts**
- **Consisting of Master and Individual accounts**
- **Master account holders manage and set security for individual accounts**

CYE '12 Prospective Offeror Technical Overview



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Arizona Health Care Cost Containment System

Our first care is your health care

Thank you for visiting AHCCCS Online. In order to use the site, you must have an active account. Please login or create a new account. For questions, please contact our Customer Support Center at **(602) 417-4451**.

**** ATTENTION ****

Please remember that sharing account logins is prohibited and violates the AHCCCS User Acceptance Agreement. You should NOT share your user name and password with any other individuals. Each user must have their own web account. Access to the web site can be terminated if the User Acceptance Agreement is violated.

[AHCCCS Online User Manuals](#)

Sign In

User Name:

Password:

Forgot your Password? [Click Here](#)

Note

- User Names and Passwords are case-sensitive.

New Account

[Click Here](#) to create an AHCCCS Online user account.

To learn more about AHCCCS Online, [Click Here](#)



[Download Internet Explorer](#)

Your web browser must have cookies enabled in order to use AHCCCS Online. To learn how to enable cookies, please [Click Here](#)

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Main Menu

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Support and Manuals

[AHCCCS Online User Manuals](#)

Account Information

User Name: AESAdmin
User ID: 0000000
Type: Master
IP: 170.68.41.245
AHCCCS Provider ID: 000000
Admin

▲For security purposes, your session will be logged out after 15 minutes of inactivity. ▲

Claim Status allows providers to check the status of **Fee-For-Service** claims. If the recipient is enrolled in a capitated Health Plan, please contact the Health Plan for claim inquiries. For a listing of the Health Plan contact information, please click on [Health Plan Listing](#).

Claim Submission allows providers to submit **Fee-For-Service** claims to AHCCCS for nightly processing. Professional, Institutional and Dental claims will be accepted.

Prior Authorization Inquiry will allow providers to verify the status of previously submitted Prior Authorization requests.

Eligibility and Enrollment Status allows providers to verify an AHCCCS recipient's eligibility and their enrollment in a Health Plan. Providers also can obtain Medicare and other third party coverage information for a recipient.

Newborn Notification allows providers to submit newborn information to AHCCCS during the hours when the COM Center is not available.

HealthPlan Address Changes allows health plans to send address changes from members via the web.

Prior Authorization Submission allows providers to submit prior authorizations via the web.

Provider Information allows providers to update their correspondence addresses. Providers may also view (but not update) their Service and Pay-To Addresses, Group Affiliations and Authorized Signatures. For further information, please click on [AHCCCS Provider Registration](#).



The AHCCCS mainframe systems will have scheduled downtimes that occur on a weekly basis. During these downtimes (usually weekends), the web site will be unavailable. During system downtimes, please contact the AHCCCS COM Center at **602-417-7000** for immediate assistance regarding eligibility/enrollment. The Interactive Voice Response (IVR) System is also available for eligibility inquiries at **602-417-7200**. For claim inquiries, please contact the AHCCCS Claims Customer Service at **602-417-7670**. For a full list of contacts, please click on [AHCCCS Contacts](#)



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February 9, 2011

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MEMBER VERIFICATION

270/271

- **Real-time member searches**
- **Can search 24 months in past and 30 days in future**
- **Obtain member's:**
 - **Eligibility**
 - **Medical Enrollment**
 - **Medicare**
 - **Co-pay**
 - **TPL information**
 - **Behavioral Health information**
- **Ability to print information**

CYE '12 Prospective Offeror Technical Overview

CLAIM STATUS & SUBMISSION

276/277 & 837

- **Search for claims**
- **Submit professional claims**
- **Submit institutional claims**
- **Submit dental claims**
- **Ability to edit claims prior to daily processing**
- **Ability to submit replacements or void claims**

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PRIOR AUTHORIZATION

278

- **Submit a new prior authorization case**
- **Update a pending PA case**
- **Update an event**
- **Update an activity**
- **Search for existing prior authorizations**

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CYE '12 Prospective Offeror Technical Overview

MEMBER ADDRESS UPDATES

- **Member's must be enrolled in your HP to update their address**
- **Ability to update member's mailing address**
- **Ability to update member's residential address**

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PROVIDER INFO & VERIFICATION

- **Displays enrollment information**
- **Displays site, payment and correspondence address**
- **Correspondence address can be updated via the web**
- **Displays group affiliations and authorized signatures**

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CYE '12 Prospective Offeror Technical Overview

