

HMS/TPL Kick Off Meeting
June 10, 2014; 2:30 PM-4:30 PM
AHCCCS, 701 E Jefferson, Phoenix - Gold Salmon Rooms, 3rd Floor

Attendees (Based upon sign-in Sheets & Roll Call)

ADHS

Ruth Zona

Aetna

Kevin Padula, Maurice Hill*

AHCCCS

Jacqueline Solomon, Dwanna Epps, Kelly Gerard, Jim Cockerham, Mary Kaehler, Mark Heck, Cheryl Kelly, Lori Petre, Gina Aker

Bridgeway

Jeff Adams

Care1st

Brent Ratterree

CMDP

Lazaro Torres, Susan Blackledge, Wayne Binnicker

DDD

Bryon Winston, Donna Schneider

Health Net

Bruce James, Michelle Block*, Erika Holden*, Richard Ker*,

HCA

Mia Villa, Kim Lenzi, Alice Mayfield,

HMS

Cristhian Bermudez, Anna Annon*

Mercy/Mercy Maricopa

Wendy Lytle, John Monte, Maurice Hill*, Rhonda Smith*

PHP

Gina Bode, Ruth Garcia McCaw

UAHP

Alex Alvarez, Maria Sanchez

UHCCP

Deb Alix, Helen Bronski, Sylvia Esparza, Sandy Jones

*Attended via GoTo Meeting/Conference Call

Welcome

Gina welcomed everyone and did roll call.

Goals/Structure of Meeting

Lori mentioned this was first of what would likely be many workgroup meetings to come and reminded everyone to take this information back to your workplace for discussion and that as workgroup intent is share information and formulation next steps and solutions.

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HMS Scope of Work Daily Lead File

Cristhian Bermudez from HMS welcomed everyone and said the main goal was to improve the process. The TPL contact at AHCCCS is Mark Heck. Cristhian said HMS wants to know what the issues are so they can fix them. HMS has about 99.5% of the market share in Arizona.

The information they are verifying are: Date of Birth, Policy Information, Policy Type, and Dates of Policy.

Once HMS does this verifying, they are doing daily submissions to the state system. The benefit of having daily submissions is if we do run into some critical issues, they can update information if it is an urgent matter. In regards to the daily process which are coming from the plans and member services, they go through a daily verification process. HMS picks up file from us daily.

You can submit batches but they are having issues is bad carrier.

HMS built a comprehensive crosswalk. If there are errors, it gets reviewed individually.

- *Question: Is there a preferred list of carrier names that can be used when doing submission?*
- *Answer: State has master carrier file available to all plans. HMS maintains it and does all updates.*

ACTION ITEM: HMS will make their list available once they update so please use this list once you receive it. Cristhian will send to Gina. Master Carrier List was emailed to meeting participants on 6/17.

If HMS can get the correct carrier ID from the plans, he can assure the verification process will be much easier with fewer errors.

ACTION ITEM: HMS will follow-up on adding an additional field.

- *Question: Which file because we submit a TPL file to AHCCCS and that file doesn't have a place for carrier ID just the carrier name.*

- *Answer: In meantime, use carrier name and in the future we can talk about adding the carrier code.*
- *Question: Are you referring to the leads or discrepancy file?*
- *Answer: Kelly answered the master carrier file is the file of all of our carrier names associated with the carrier number. Once a week we extract this information and put it out in the shared info folder.*
- *Question: A question was asked about the lead submission file*
- *Answer: The lead submission is the one you submit to AHCCCS to get TPL verified.*
- *Question: If we don't submit with the carrier number will there be a problem with HMS going forward if we don't have the carrier ID.*
- *Answer: HMS is still accepting them now. If we have the carrier code, it makes it easier. There are still a lot of front end edits that can be made to our daily lead process.*
- *Question: The name format that we get on the AHCCCS reference file is what we should leverage and it will match?*
- *Answer: Correct. HMS will go through the large master carrier file and give you the one we are using.*

Medicare Information – We do sometimes get Medicare information that comes through. Please remind reps we don't do Medicare policies.

We also see duplicate information where the record already exists in the system. If a record matches, then it says this record needs to be re-verified. If it doesn't match, then it generates a new record. Now HMS has to take time to re-verification and also wipe out the duplicated record submission. This is why it's important to use a carrier name.

- *Question: A big issue is we will resubmit COB records over and over again if we aren't seeing the term date getting added. So then it becomes an encounter issue so we are trying to get these through and updated so we resubmit the record on our leads file to get the term date added.*
- *Answer: HMS will have to dig deeper. For example, if you submit a record 5x, then where is the record getting lost? Maybe HMS never received the record or it got lost in the system.*
- *Question: Batches are sent to AHCCCS then it goes to HMS? The issue is we don't get a response file back. Is there a process of access to these error reports?*
- *Answer: An error report comes back from AHCCCS but not from HMS. Kelly clarified saying we do produce a report from processing your TPL leads file, when we process the file, we produce a report that get placed out in your FTP server. When we submit it to HMS for processing and get a response back, you even get a response on your 834 transaction with verified information or you get a notification record (.not file) saying the records were not verified, they were invalid.*

- *Question: We do get the accepted file and the .not file and there is an issue but we send terminations and the termination is supposed to have a "T" in it and when we get that record back saying it was accepted. It comes on the 834 as not terminated. So is it not taking the termination and you are just matching the actual record? How do we get them terminated sending the file over?*
- *Answer: If we accept a leads record, it just means it passed AHCCCS edits and we take that record and then it goes to HMS for verification.*

- *Question: Can we talk about the edits? Is the file acceptable or individual records?*
- *Answer: It is individual records which are accepted or the reason why we didn't accept it.*

- *Question: So when you accept the termination we should not expect that it will actually be terminated?*
- *Answer: No, it has not been verified yet. We accept the lead from you. We accept it to send o HMS.*

- *Question: Is the issue with that file which tells you if it is accepted or rejected?*
- *Answer: We have not changed the edits on it yet. There is a work request once we get it prioritized to make some tweaks to the edits but that has not change.*

- *Question: Not the edits part but we weren't getting the same records back.*
- *Answer: This is part of the tweaks.*

- *Question: So flow is that it's accepted or the .not file then it gets sent to HMS.*
- *Answer: Kelly replied no. We accept the leads file, and then we take the accepted records, package them up (from health plans and eligibility sources) and send that to HMS nightly. Then when they respond with a record, they will tell us they verified it or didn't verify it. The verified records then show up on your nightly 834. If it is not verified, it shows up on the nightly date.not file in your folder. The reason why it was not verified it's also on that record. For example, if you send 10 records, you may not get all ten back the same or next day. This depends on whether you get the manual or auto verification.*

- *Question: When you send the file to HMS, how long does it take HMS to return it to you?*
- *Answer: It can take up to 90 days depending what information you put.*

- *Question: How would it get to HMS if it hasn't passed through AHCCCS yet?*
- *Answer: Kelly said if you send a leads file and they do not accept one of your records, it's on that daily report.*

- *Question: So we can submit the TPL, the lead file and get something on the accepted file for termination and then months later we could get something on the .not file saying it's not accepted.*
- *Answer: Yes*

- *Question: What do we do when we have things on the accepted file and 5 or 6 months later, they don't appear on the .not file and they still are not terminated? What are we supposed to do with these? How long do we wait?*
- *Answer: Cristhian replied this is why we are meeting. We need feedback to fix the issues from all the different types of scenarios. HMS is required to respond to AHCCCS so you should be getting response back in a timely manner.*
- *Question: It would be helpful to know how long you will hold on to something before you determine that it isn't acceptable to you.*
- *Answer: HMS should not be holding it for more than 90 days.*
- *Question: Are the paper form is still being accepted by AHCCCS.*
- *Answer: No*

ACTION ITEM: Send issue with Medicare data to Lori Petre and/or Gina regarding issues. They will work with DMS to get these resolved.

- *Question: Asked about a dual verification going on here with what AHCCCS is considering a valid record which goes to HMS. Is it possible to share that data validation criteria from both levels with us so we can take it back to our staff?*
- *Answer: HMS can give you the required fields they have to verify.*

ACTION ITEM: Follow up on with discussion internally with ISD and Cristhian for disclosing what the data validation elements are to both the file reports coming to AHCCCS and HMS.

TURN AROUND TIMES

- REF DB TAT 2-7 days
- Daily Lead File TAT 30-90 days, longer if data entered requires research

REFERRAL DATABASE

- It was difficult to track what was being submitted.
- No more free form. It will be drop down.
- It links to the state's resource data.

This is a new process so please provide feedback.

- *Question: We do use this and pull a report monthly from the search file of the accepted but how long once it's been accepted, are we supposed to wait?*
- *Answer: 7 days*

Please get specific examples to Lori and/or Gina who will get to Cristhian.

- *Question: You don't verify Medicare A & B?*
- *Answer: No. Lori said if you have a question about Medicare A & B, then send to AHCCCS who will then refer to DMS. Please send to encounter rep or Lori or Gina.*

- *Question: Where is the referral database for HMS found?*
- *Answer: It's on the AHCCCS website. You will be provided with a user ID and password.*

- *Question: Is it a separate security process you have to go through with HMS which is separate from HMS.*
- *Answer: Yes*

Cristhian went through the demo on how to use the page.

- A user manual was emailed to the group earlier today.
- A record in HMS system, it can take 7 days to make it through the process and update the AHCCCS system (PMMIS).
- There are management reports so you know if it does exist.

ACTION ITEM: Lori mentioned we will try to schedule meeting out about 3 weeks and ask for questions to be in one week prior to that. Think about edits associated with TPL and encounters. We want to discuss to see if there is a better way to flow that process in terms of being able to identify those.

- *Question: Is there is a monthly file of all the members and their TPL.*
- *Answer: Yes*

Lori again said to please send specific examples to her and/or Gina so they can research issues and where they are happening.

Gina mentioned we heard the feedback about those encounters that were pending and picking up a pharmacy discount program such as Fry's or Walgreens, and populating it as a pharmacy insurance program.. We did share this example with Cristhian and we were able to clean up a lot of them so you should not have those numbers anymore. If you are, then there is a new discount plan that has to be put in their system. Lori said if you see something that questionable, it's important to report those Lori or Gina.

ACTION ITEM: Lori said to send issues for the next workgroup which we will consolidate them so that we can discuss as a group. Eventually you will get Cristhian's contact information. Also send any other questions to Lori or Gina and they forward those on.

- *Question: On the TPL screen in PMMIS. If the record is being verified, does it show that it is in there and has an indicator that it is being verified.*
- *Answer: Kelly said if it shows an "R" then it is being referred and in the process of being verified. If it shows a "P" then it was updated today and is pending to be pulled tonight to go to HMS. The "V" means it has been verified.*

For any invalids, you have to go the history screen. Make sure you have access to the TPL screens and if you don't, let AHCCCS know.

- *Question: If the member is termed in the AHCCCS program and no longer eligible at all, is there still the ability to verify that TPL information.*
- *Answer: Cristhian said at HMS, they do not verify if the member is Medicaid eligible. So if they term, we do not pick it up for verification.*

- *Question: What if the member was enrolled during the verification date?*
- *Answer: Correct. If at the current time you need the verification and that member is termed, we don't make that verification.*

- *Question: If we identify a period for which we have a claim but at the time we submit the record, the member is no longer Medicaid eligible even though they were eligible during date of service.*
- *Answer: Correct, we will not go through that verification.*

- *Question: Cristhian asked Kelly if a TPL file which is being submitted by the plans and they are not Medicaid eligible at that time, are they still getting through.*
- *Answer: Kelly believes so. Cristhian said we will verify it that way.*

Lori clarified this by saying if it comes through us, then she wants us to verify it.

ACTION ITEM: Cristhian will check the online system.

- *Question: On the TPL lead report we get back, one of the main responses we get back are the TPL not added change, TPL hierarchy rules not met, and from previous discussions how do we drill down on why exactly our records did not get accepted.*
- *Answer: Kelly said this was one of the changes we are looking at making is being a little more informative. In the meantime, look at what you put in. There are 4 basic edits. If you are sending her a TPL record with a term date and we have that carrier with a term date already, you get that message. If you send her a TPL record with no term date and we have that record without a term date, we won't accept it. If we can't find a match with what you are submitting but look at the history file and find that carrier, you will get that back because we already attempted to verify it once. Maybe we need to look at these edits and tweak them some. This is what this workgroup will result in. If you are trying to modify a TPL record that was sent from our LTC ACE then we don't allow that either. ACE maintains that record, not us.*

Cristhian said HMS can run reports to see how many were submitted by the specific plan, HMS can now do that. They were not able to do that before. The management reports are very limited. You can get a status but you have to search by the individual. Lori said this is why the flow is so important.

Lori ended the meeting with some homework for next time:

- Will send a follow-up email either from Gina or Lori.
- You have 2 weeks' time to get your examples to us.

- Another meeting will hopefully be scheduled in about 3 weeks. Think about your specific scenarios and situations.
- We will work on the flow processes (ours and yours).

Since Kelly is retiring shortly, please send issues you would normally send to or cc Kelly on to Cheryl Kelly at cheryl.kelly@azahcccs.gov.

Next Meeting

Gina encouraged everyone to join future workgroup meetings in person. The next meeting will take place in about 3 weeks and an invite will come from Lori.