Indian Health Service

Business Office Coordinators, HPAA Coordinators,

Information System Coordinators and Headquarters

Minutes for October 9, 2003

HIPAA Business Transactions Awareness Conference Call

Present:

ITSC	Susan Bowman, Sandra Lahi, Carl Gervais, and Karen Wade
Headquarters	Frank Martin
Aberdeen	Robert Douville, DON, Compliance Ofcr; Sherry Lulf, Managed Care Nurse, Supvr; Colleen Lavendure, Acting MR Supvr and HIPAA Coord; Tony Isburg, MIS; Jackie Spier, BO Mgr; Nancy Miller, CEO;
	Tony Isburg, MIS; Jackie Spier, BO Mgr; Nancy Miller, CEO;
	Ray Grandbois, HIPAA Coord, Thad Banley, IS Security Ofcr
	Rosebud Service Unit: Joan Azure, BOC; Judith Yellow, Med Suppt Supvr; Betty Zimmerman, BOC; Irene Bordeaux, Med Rec Supvr
	Belcourt SU, ND: Jody Morrow, BOC; Duane Marcellais; ISC & HIPAA Security Coord; Dale Buckles, Compli. Ofcr; Carol Hunt, Med. Rec. Dir. & HIPAA Coord.
	Wagner Service Unit: Sandy Patterson, MR, HIPAA Coord.; Marilyn RedLightning, Bus Ofc; Stacy McBride, Bus Ofc; Carol Slaba, IOP; Darlene Williamson, CEO; Stephanie Goulette, CHS
Alaska	Lue Rae Erickson, BOC, ANTHC
Albuquerque	Maria Rickert, Acting Chief Exec Ofcr; Carol Shields, Sandra Winfrey, Executive Officer; Carol Hunt; Judy Townsend, IT; Ross Leatham, IT; Joe Lucero, IT Dir; Maureen Cordova, HIPAA Coord
Bemidji	*Red Lake Service Unit:* Jan Thunder, BOC; Margo Bahr, IT; Chuck , Steve, Brian, ChuckTudor, MIS
	Peter Christensen Health Center: Brian Schafer, Christine Polzin, and Pam Ahlborn (billing and HIPAA Coords)
Billings	Terri Hall, MR Consultant; Carole Good, Med Rec Supvr, Crow SU
California	*Could not connect to call-in number*
Nashville	*Could not connect to call-in number*
Navajo	*No response*

Oklahoma	*No response*
Portland	Cheryl A. Bittle, HIPAA Coord; David Battese, John Hubbard
Phoenix	Anne Fugatt, IRM, Pat Gowan MR Consultant
Tacoma	*Could not connect to call-in number*

Call-ins Who Were Not Able to Connect:

Arizona	Charolett Melcher, Managed Care; Patricia Gowan
Nashville	Deborah Burkybile, BOC and HIPAA Coordinator
Phoenix	Charolett Melcher, Hlth Sys Splst
Tucson	Bernard DeAsis, HIPAA Coord; Kurt Priessman *(on leave status*
California	Toni Johnson, BOC

Absent

ITSC	Tom Fisher, Telecom Dir.; Bruce Parker, Sr Self-Gov Team Lead
Alaska	Dawn Carman, HIPAA Coord; ISC
Bemidji	Barbara Fairbanks, HIPAA Coord
Billings	Cynthia Larsen, BOC; Susan Fredericks, HIPAA Coord
California	Steve Lopez, HIPAA Coord; ISC
Navajo	Tony Davis, HIPAA Coord; Sharon Sorrell, Acting BOC
Oklahoma	Mary Beaver, BOC; Angela Kihega, HIPAA Coord
Phoenix	Barney Ahgoon, BOC; DeAlva Honahnie, HIPAA Coord *(on leave status)*
Portland	Leah Tom, BOC
Tucson	Mary Lingruen, BOC

Add to the Distribution List:

Headquarters	Elmer Brewster, Health Service Admin

ND	Linus Everling, Chief Exec Ofcr; Tod Bercier, Admin Ofcr;
	Diane Peach, Contr Hlth Splst
Phoenix	Pat Gowan, Hlth Info Mgmt Cnslt

Meeting Began at 10:00 AM

Roll call was taken from each area. Several participants could not call-in on the numbers published. It was reported that the lines were busy.

It was agreed that a conference call would be scheduled for next Thursday, 10/16 (D Day) at the same time. There will be an (800) number set up so that all participants can call-in and connect to the conference call.

Agenda Items Addressed

Susan Bowman	Provided an overview of CMS Contingency Plan Letter and Applicability (item #3):
	The Centers for Medicare & Medicaid Services (CMS) is responsible for enforcement of the HIPAA transactions and code sets rule. CMS announced, September 23, 2003, their intent to implement a contingency plan to accept HIPAA noncompliant electronic transactions after the October 16, 2003 compliance deadline. CMS will focus on obtaining voluntary compliance and use a compliant-driven approach for enforcing HIPAA requirements.
	CMS will not impose penalties on covered entities that have made faithful and diligent efforts to become compliant for developing contingencies. Some clearinghouses indicated they would impose a non-payment action for non-compliance.
	Charlene Finney, CMS, did say that trading partners can ask IHS sites to have a contingency plan in place if they are not compliant by the October 16 deadline. However, CMS is asking that all trading partners work together towards becoming HIPAA compliant.
	"What does HIPAA compliance mean for IHS?" It was communicated that IHS would be HIPAA compliant at the site level. All standard transactions and code sets would be made available at the site level through means of an electronic packet, and the packet will be posted on IHS Intranet and Internet website.
Susan Bowman	Provided an Overview of Good Faith Efforts and Documentation (Item #4):
	At this time, IHS is not currently HIPAA compliant at site level. However, IHS is making daily progress in their testing efforts, in communicating with trading partners, in arranging regularly

Sandra Lahi	Presented an update on Standard Adjustment codes and RPMS (Item #5). A review of the 2004 ICD 9 RPMS files was distributed on 9/24/03. 2003 CPT code file was released in December 24, 2002. The last release was done on September 24, 2003. For a site to be compliant, sites must have them loaded onto their sites. A patch on the CPT file was just sent out on September 24, 2003 to add a couple of new codes identified in July 2003. Each site should show documentation that the various patches were installed.

scheduled meetings and conference calls (such as, the one held today in order to bring HIPAA awareness to all area and site levels), in identifying HIPAA roles and responsibilities, and in identifying key players at the national level, including headquarters, area facilities, and individual sites.

Sandra Lahi   Presented an update on Standard Adjustment codes and RPMS (Item #5). A review of the 2004 ICD 9 RPMS files was distributed on 9/24/03. 2003 CPT code file was released in December 24, 2002. The last release was done on September 24, 2003. For a site to be compliant, sites must have them loaded onto their sites. A patch on the CPT file was just sent out on September 24, 2003 to add a couple of new codes identified in July 2003. Each site should show documentation that the various patches were installed.

NDC (Nat'l Drug Codes) file are distributed quarterly in the Pharmacy AWP patch. One was just distributed last week. The National Drug Codes needs to get updated because they are used for billing.

All of the Standard Code Sets and Business Transactions are available on a one page spreadsheet and will be distributed with the minutes.

Sandra also provided a brief overview of the ITSC concern that there is a need to have increased awareness of HIPAA compliance regarding Business Transactions and Code sets at the area and site level.

Even though ongoing efforts were made to increase awareness, insurance companies are just now getting their software ready and starting the testing process. Is IHS ready to meet the HIPAA compliance deadline next week? Due to the delay in getting responses from our major insurers, ITSC will continue to work diligently with testing of the different transactions and it is understood that it may take up to a year to convert the existing formats into the HIPAA compliant formats.

As for RPMS, ITSC is a software vendor providing services out in the field. We can modify the software but there are items that must be completed at the field level to ensure the testing is completed.

By identifying the many items that the Insurers are asking us to do to modify the standard formats, these items can be forwarded to Mr. Frank Martin. Mr. Frank Martin, Headquarters, will take forward to CMS what some of the insurance companies are requesting at our end.

Ray Grandbois   *Question:* Have we been getting CMS updates? Is there an IHS representative attending the roundtable meetings with CMS and receiving updated HIPAA information?

	IHS should get involved in CMS discussion meetings to know if other entities are sharing the same problems.
Sandra Lahi	*Action Item:* ITSC will follow up on becoming involved in CMS discussions.
Maria	*Question:* How many providers are ready and testing?
Carl Gervais	*Response:* He will provide an update on testing in agenda item #6.
Sandra Winfrey	*Question:* What about 837 transactions?
Sandra Lahi	*Response:* Our guidance has been to focus on Medicare and Medicaid FIs. We have finished with the OK Medicaid. Arizona Medicaid has been testing very diligently; we are very close to completing this testing.
	Trailblazers certified ITSC RPMS software for Part A only. Part B is another testing component and is ongoing now. ITSC is having the RPMS software certified and will assist with deploying the 837 formats to each Area.
	For a site to begin the testing process with the 837, sites must have the appropriate patch loaded onto their RPMS systems.
	For a site to begin the testing process with the 837, sites must have the appropriate patch loaded onto their RPMS systems.
Carl Gervais	Presented an Update on Current RPMS Testing by Transactions and Insurers (item #6):
	ITSC is focusing on testing the following:
	(837) Electronic Claim Submission
	OK Medicaid was ready to test in February and we were able to help them go live in April.
	Flathead SU from Billings Area has tested with UGS and has been live since 7/25.
	Idaho Medicaid went live 9/25.
	ITSC is currently testing the following Medicaid plans. Oregon, New Mexico, AHCCCs, WA, MS, and ND Medicaid.
	ITSC is also coordinating testing with Quovadx who is a clearinghouse who handles numerous payers.
	ITSC is getting new partners daily. Most partners have not come to us until mid September.
	NCPDP v5.1 Pharmacy
	ITSC is live with trading partners tested. IHS will have more trading partners to test with next week, making a total of 34. Pharmacy POS

Patch 7 will accommodate these Insurers.   A spreadsheet identifying these Insurers will be sent out with the minutes.

(835) Electronic Remittance Advice

ITSC has two different test approaches:

- PNC Bank is testing with Cass Lake, Bemidji Area and Parker, Phoenix Area.

- PNC Bank for Web MD sites will be tested with Lawton,, WW Hastings, and Claremore SU.

Three eligibility transactions that are currently in the Queue:

1-2.(270/271) Eligibility Reply -- is being tested with Quovadx, Tuba City as well as GIMC.

3.(834) Enrollment./Disenrollment -- AZ currently provided a 560 format and we will be converting it to the (834).

Ray Grandbois	Not familiar with the transactions and code sets. Does each entity have to do testing? Or, will IHS be approved, then the sites will be testing?
Sandra Lahi	There are two approaches that ITSC is using when working with an identified Insurer. One example is with Trailblazers. We have negotiated with Trailblazers that three sites will be testing the 837 electronic format and once their files have passed through the testing mode, Trailblazers will certify the ITSC RPMS software as HIPAA compliant Software. The same approach was used for Medicare Part B with Trailblazers.
	Another example is NM Medicaid in which the insurance company is telling IHS which way they want the test to occur. NM Medicaid is requesting that each Site test individually. That is why we are suggesting a clearinghouse be used. ITSC is receiving guidance from each Service Unit or Area on how testing will be dealt with. The service units will be responsible for identifying their insurers and notifying ITSC.
	Trailblazers stated that they will accept contingencies for only a limited time. They may come forward and define a date that they will no longer pay for claims that are non HIPAA compliant. That is why it is important for all sites to contact their insurance companies to find out what will be required. Each Insurance company may require a contingency plan or may have decided on a cut off date.
	Even though CMS has stated that there is an extension beyond the October 16, deadline, all sites must continue working towards HIPAA compliance by testing and making good faith efforts.
Ray Grandbois	Where has ITSC made initial contacts?

Sandra Lahi	Initially, awareness was provided to the Business Office Coordinators. The intent of this call was to invite the Area HIPAA Coordinators as well as IT staff as this also relates to their RPMS systems. It is better for the Areas to define an approach of how they will assist their sites in becoming HIPAA compliant.
	
	There will be a HIPAA compliance packet available to all areas and sites. The packet will be distributed by next Thursday, 10/16, and it will be posted on the IHS websites. Some information that will be included:
	
	    1. RPMS version to start the testing process with the most recent update.
	
	    2. Set up process on what your sites will have to do.
	
	Sites will need to update their provider taxonomy file for all providers before the sites can test and go live. (Note: 837 testing -- it is the number one error code of why test files are being rejected by the insurers.)

David Battese	The sites need a better provider taxonomy file. A lot of the testing matched providers to taxonomy but some codes must have been switched with modifications made to 3P Patch 4.
Sandra Lahi	There is a HIPAA table that ITSC has been trying to implement. ITSC needs to provide a standard mechanism of updating this file to provide additional support to the field staff when testing for the 837 begins. *Action Item:* Provide information back to group regarding the Provider Taxonomy file.
Cheryl Bittle	Because there are errors, it stops a lot of testing. The provider taxonomy is not working. The tables are not the same at the sites.
Sandra Lahi	We will probably have a status update for you by tomorrow. It is critical to address this issue, as it is becoming a bigger issue. Provider Taxonomy: There is a HIPAA compliant table and states all providers will be identified as a specific classification. This was designed in the AUT file and needs to get distributed to everyone in coordinate with Patch 4 so all will have the updates. Some issues that have been identified with current 837 testing include: Each site needs to set up table maintenance. Identify I, P, or D. Patch 4, 3rd party is where the additional modifications to the standard format is to be released in. It will include the Trailblazers and AHCCCs testing formats in addition to current testing that has been completed up to this date.
Sandra Lahi &	Presented an overview on the Proposed HIPAA Compliance Packet

Susan Bowman	(item #7):
	There will be a HIPAA Compliance Packet prepared and sent electronically to all BOCs, HIPAA Coords, ISCs, and Headquarters on or before October 16th HIPAA Compliance deadline.
	The packet will consist of:

       1. Cover letter providing RPMS software guidance

       2. RPMS Data Sheet

       3. Questionnaire for Trading Partners

       4. List of Resources (Contact names)

       5. Check List with all transactions and code sets

       6. Sample of BA Agreement

	The packet will also be posted on IHS websites.
Sandra Lahi	An overview of the Business Associate Agreement (BA) or Trading Partner Agreement (TPA) (items #8):
	Each site will need to sign a BA or TPA before you test with your insurance companies. There have been different approaches. Some Areas are signing these documents for the entire Area, some Service Units are signing for their individual sites. Some are having their legal divisions review the documents before signature.
Ray Granbois	Headquarters sent out an example BA on the current HIPAA website and that is what Aberdeen will be using.
Sandra Lahi	It is up to the Insurance Company if they will accept the current BA. It is recommended that coordination and clearance must be done with them.
CONCLUSION	Please email Sandra Lahi and Susan Bowman if you have any questions.
	Next Thursday is October 16, "D Day" deadline for HIPAA compliance.
	ITSC will setup a new (800) call-in number for next Thursday's conference call. The meeting will be at the same time, 10-11:30 AM (MST).
	A copy of minutes will be posted onto the website.
	FYI – (278) Electronic Referral Transaction. This transaction relates to Contract Health Services and the CHS RPMS application. ITSC has not been able to find any testing partners, so if there are any testing sites, please let us know.

Meeting Adjourned