



Wednesday, October 23, 2019

2:00 pm – 4:00 pm

Teleconference/WebEx ONLY - ([Participant Instructions](#))

## AUC Eligibility TAG

### Meeting Minutes

1. **Call Meeting to Order**
2. **Welcome & Introductions** – Please e-mail your attendance to [Tim.Lopez@bluecrossmn.com](mailto:Tim.Lopez@bluecrossmn.com)
  - [Susan.Lee@allina.com](mailto:Susan.Lee@allina.com)
  - [Fausto.Iglesias@hennepin.us](mailto:Fausto.Iglesias@hennepin.us)
  - [JRathke@umphysicians.umn.edu](mailto:JRathke@umphysicians.umn.edu)
  - [clark.fenske@state.mn.us](mailto:clark.fenske@state.mn.us)
  - [mary.winter@primewest.org](mailto:mary.winter@primewest.org)
  - [adito1@ucare.org](mailto:adito1@ucare.org)
  - [tim.lopez@bluecrossmn.com](mailto:tim.lopez@bluecrossmn.com)
  - [bob.b.johnson@state.mn.us](mailto:bob.b.johnson@state.mn.us)
3. **Anti-trust Statement** – <http://www.health.state.mn.us/auc/pdfs/antitrust.pdf>
4. **Approve Previous Meeting Minutes** – Meeting Minutes Approved
5. **Review MN AUC Operations updates**
  - Any update on the email Vote results for the following BP's? All 3 best practices were approved by AUC Operations and will be posted to the AUC website within the week.
    - Other or Additional Payor Information
    - Multiple Service Types
    - Reporting Funding Type
  - Changes occurring with Chairs and Co-Chairs. Looking for a Payer to step up next. Announcement forthcoming. Any interest in Chairing or Co-Chairing for AUC Operations send to Bob or Dave.
6. **Email Vote results for Reporting primacy information Best Practice**
  - 3 Approve and 4 abstain
    - Does not seem enough for passage
    - Next steps?
  - Susie received 1 more vote for approve
  - BCBS will send approve
  - Hennepin Health will send vote to Approve.
  - UCare will review and send in a Vote
  - Why did people Abstain? DHS abstained as they do not have the information to return but is not against it. No others on the phone.
  - Bob will talk to Dave about what is needed for a quorum.

## **7. Discussion BP Reporting Two Digit Medicaid Program Code**

- Discuss removing the “2 digit” wording piece on the best practice as I am sure its possible it could change even further in the future and maybe end up being more than the current 4 digits?
- Provider wanted 4-digit code MA02 and the Payer was only sending MA.
- Payer wondering if they could return 4 digit “Product Code”.
- DHS sends both the 4-digit Product code and the 2-digit program code. DHS advised EB01 = MC is being used to convey that information. Clark DHS will do further research and advise next meeting.
- Requirements also exist for 835.
- Options
  - Incorporate the 4 digit code into the existing Best Practice
  - Create a new Best Practice
  - OR the 4 digit code is not important enough for a Best Practice
- Think there used to be a Two digit Program code TAG? Bob will ask Dave for contact info. Jackie UMP will send Tim some old email info on the topic.

## **8. Annual maintenance of the MN companion guide**

- Is it serving the intended purpose?
- Is everything correct and up-to-date?
- Are there improvements we should consider?
- Anything we can streamline and simplify?
- Items may have seemed relevant and helpful several years ago, but may no longer be as helpful or relevant as it once was
- Any opportunities where adding to the 270-271 guide is a good idea?
- Are there best practices that are important enough, have enough general applicability, and are likely to not change for some time, that they should be included in the guide (i.e., they should become part of a rule with the force of law, rather than a voluntary best practice)?
- No comments about any changes or suggestions currently. Tim will send email out and ask to everyone review for the next meeting. Plan is to go over section by section super high-level next meeting.
- Should not be an issue if we don't get companion guide review completed before end of year.

## **9. Topics for upcoming meetings**

- Education/Training Topics:
  - Using 6P vs 1L for group/policy
  - Payer feedback of common 270 provider request errors that can be avoided through some sort of education/tips.
- DRAFT BP – Cheat Sheet/Quick Reference Glossary – BJ has DRAFT prepared
- DRAFT BP - Correcting Membership information when a unique member is found (ID, First, Last, DOB)
- DRAFT BP - Requiring Accumulations for Calendar/Plan Year Deductible/Out of Pocket/Limitations
- DRAFT BP - Benefit response Disclaimer
- DRAFT BP - Returning Authorization Indicator EB11
- Update BP template to Reference the HIPAA Implementation Guide and the AUC Companion Guide

## **10. Other Business**

### **11. Meeting Summary & Next Steps**

- Concern with Thanksgiving holiday day after our meeting. Possible will cancel November meeting. Tim and Susan will discuss with Bob. Decision was made to cancel.
- Next meeting we will revisit the 2 vs 4 digit code Best Practice and review the Companion Guide more thoroughly.

### **12. Next Meeting – Teleconference/WebEx ONLY November 27, 2019 (2-4pm)**

2019 Calendar, please mark your calendars accordingly.

Wednesday, November 27, 2019 (2-4pm)

Wednesday, December 18, 2019 (2-4pm)

### **13. Adjourn Meeting**