

HIM/CHA Advisory Group

Meeting Summary: November 18, 2011, 2:30 to 4 PM

website: <http://www.cohima.org>, then click on "HIM/CHA Advisory Group"

Present:

Sue Malone, co-chair, Clinical Information Consulting
Linda Schwab Messmer, co-chair, Haugen Consulting Group
Dana Batey, Colorado Medicaid
Renee Howbert, HCA Continental Division
Chris Martinez, Denver Health
Sue Ann Pumphrey, Children's Hospital
Eric Ryland, Denver Health
Jill Roberson, Denver Health

Via webinar:

Grace Atufunwa, IT Denver Health
Terry Bates, Exempla
Nancy Dietz, Estes Park Medical
Lyndee Graham
Karen Hatch
Julie Hughes, Parkview Medical Center
Marie Johnston
Sherry Kristmann
Terri Owensby
Alice Robinson
Jeannette Walls

CHA Staff:

Jim Carr, Web Developer
Bob Finn, Director of Information Services
Trish Hamon-Lynch, Tech Support
Curtis Sandlin, Software Engineer

[1] **ED Data from the new CHA database.** Bob Finn distributed a document "ER Discharge Claims, Period: 2011 2nd Qtr YTD." This document lists the state's hospitals and the gross numbers of ED accounts for each month from January through July of 2011. Collecting ED data is new for CHA and the state, and so the HIM/CHA Advisory Group plans to focus on ED data in coming months to help evaluate the data and provide input for potentially problematic issues. Right now, Bob only wants for us to address evaluating gross numbers, after which we can move on to demographic data and then to coded data. Bob solicited information from the group as to who in their organizations would be the best ones to help evaluate whether the gross numbers on the report are accurate or not.

[2] **Proposal for new fields to collect CPT codes and Condition Codes.** Bob Finn presented information on a proposal for collecting both CPT procedure codes and condition codes. The new record type "D" will become effective 10/1/2013. The purpose of record type "D" is to enable hospitals to report either ICD-10-PCS or CPT procedure codes for outpatient services beginning 10/1/2013. The addition of condition codes would provide CHA further information related to claims (inpatient admitted from ER, DNR, etc). We discussed the impact on hospital planning for the ICD-10 transition, because this change in the CHA database means that hospitals can make internal decisions about whether or not to additionally code outpatient services procedures to ICD-10-PCS (CPT is required per HIPAA), knowing that CHA will be able to accommodate whatever they decide. We also discussed the iCHART claims export changes required of the hospitals vendor or IT department. The proposed timetable is as follows:

- Hospitals will continue to submit ICD-9-CM procedure codes for outpatient services the same as always prior to 10/1/2013.
- CHA will add new optional record type "D" to the iCHART submission file. This optional records type "D" will contain 15 CPT codes and 10 Condition Codes. Record type "D" will enable hospitals to submit CPT and Condition Codes to CHA as of 10/1/2013. The decision to add the optional record would be up to

the hospital. Hospital vendors and/or hospital IT departments would need time to add this optional record to the iCHART submission file.

- If the record type "D" is accepted, CHA will need to make changes to the iCHART program. Once the iCHART changes have been made, hospitals that plan on submitting CPT codes and condition codes will need to conduct testing with CHA prior to 10/1/2013.
- After 10/1/2013, CHA will accept EITHER ICD-10-PCS procedure codes OR CPT procedure codes OR both for outpatient services.

The group discussion responded favorably to CHA's proposal.

[3] Patient Discharge Status Codes: re-open the discussion about code 05 for Children's Hospitals.

At the September meeting, questions were raised about whether the Children's Hospital in Denver is really the only children's hospital for which a patient status code of 05 should be used. Additional research was done, indicating that there is no other hospital in the state that is designated on the CDPHE website as "State Licensed General Hospital - Medicare Certification Children." Comments were heard from Sue Ann Pumphrey (from Children's Hospital) and Chris Martinez (from Denver Health, and formerly from CFMC) and from others in the group. No one could find evidence that any other hospital in the state fell under the definition for code 05. In the absence of any other evidence to the contrary, we agreed to leave the patient discharge status code reference sheet as is for now, indicating that Children's Hospital is the only hospital in the state for which patient discharge status code 05 is to be used.

[4] Revised Point of Origin Codes. Sue Malone presented the newest revisions to the point of origin codes. The "Reference Sheet for Point of Origin Codes, Form Locator 15 on the UB-04" was presented and is posted on the website. This set of revisions reflects changes from the 2012 NUBC Manual that was released on July 1, 2011. Several important changes have been made, notably that a point of origin from an assisted-living facility is to be coded to code 5 effective 8/12/10. Code 4 (transfer from an acute care facility) includes LTACs/LTCHs, which are acute care facilities even though the patients stay long-term. This includes LTAC/LTCH facilities such as Craig, Triumph, Vibra, Kindred and the Select hospitals. Two significant FAQs from the NUBC Manual were included on the reference sheet, under code 2 and code 8.

An additional handout "Information Concerning Point of Origin Codes for Newborns, Form Locator 15 on the UB-04" was presented and is available on the website. This was in response to questions directed earlier to Sue and also in response to known error rates for these scenarios in the past.

[5] Other issues. Chris Martinez was present and explained to the group that CFMC has lost the Medicaid contract, which has instead been awarded to APS.

Linda Schwab Messmer presented announcements on recent news topics that impact Colorado hospitals:

- CMS recently reiterated that there is no change in the implementation date of October 1, 2013 for ICD-10-CM and ICD-10-PCS.
- CMS has awarded the new contract for Colorado's MAC (Medicare Administrative Contractor) to Highmark Medicare Services. No date has been set for the transition from Trailblazers to Highmark.
- CMS announced a 90-day period of "enforcement discretion" for compliance with HIPAA 5010 standards, extending enforcement until March 31, 2012.