

Texas EDI Quarterly Meeting

January 22, 2015

AGENDA

- ▶ Review of Proposed Rule §§134.800 – 134.808
- ▶ Future Meeting Topics
- ▶ Q&A
- ▶ Closing

Proposed Rule

28 TAC § §134.800 – 134.808

- ▶ § 134.802
- ▶ § 134.803
- ▶ § 134.804
- ▶ § 134.805
- ▶ § 134.807
- ▶ § 134.808

§ 134.802 – Definitions

- ▶ Application Acknowledgment Code
- ▶ Claim Adjustment Reason Code
- ▶ Claim Administrator Claim Number
- ▶ Element Requirement Table
- ▶ IAIABC
- ▶ Medical EDI Record
- ▶ W3
- ▶ Effective Date of 9/1/2015

§ 134.803 – Reporting Standards

- ▶ Adopts IAIABC EDI Implementation Guide for Medical Bill Payment Records, Release 1.0, dated July 4, 2002
- ▶ Adopts 3 Tables:
 - Texas EDI Medical Data Element Requirement Table, Version 2.0, dated September 2015
 - Texas EDI Medical Data Element Edit Table, Version 2.0, dated September 2015
 - Texas EDI Medical Difference Table, Version 3.0, dated September 2015

§ 134.803 – Reporting Standards

- ▶ Removes redundant language on obtaining copies of the IAIABC Guides
- ▶ Effective date of 9/1/2015

Texas EDI Medical Difference Table Version 3.0, dated September 2015

- ▶ NM108, Loop 2010CA
 - 34 is the only acceptable value
- ▶ DMG03, DN53
 - Changed from ‘situational’ to “required”
- ▶ CLM16, DN507
 - “Y” is not an acceptable value

Texas EDI Medical Difference Table Version 3.0, dated September 2015

- ▶ CN1
 - Changed from “optional” to “situational”
- ▶ CN101
 - “01” is the only acceptable value
- ▶ CN104, DN518
 - DRG code, if used, is to be reported
- ▶ HI01-2, HI02-2, HI03-2, HI04-2, HI05-2
 - Decimals must be reported

Texas EDI Medical Difference Table Version 3.0, dated September 2015

- ▶ Bill Level Adjustment Data
 - Changed “optional” to “not used”
- ▶ DN559, SV201 & DN576, SVD04
 - Removed 3 digit format limitation
- ▶ Loop 2430: CAS02, CAS05, CAS08, CAS11, CAS14
 - Clarified use of Texas specific code “W3”
 - Amended description – “service” adjustment

Texas EDI Medical Data Element Edit Table Version 2.0, dated September 2015

- ▶ DN05
 - Removal of “001” edit
- ▶ DN152 and DN153
 - Removal of “001” and “030” edit
- ▶ DN507
 - Adding “Y” as an invalid code under “058” edit

Texas EDI Medical Data Element Edit Table Version 2.0, dated September 2015

- ▶ DN 508
 - “063” – Invalid Event Sequence/Relationship added
 - This edit will be in place effective 9/1/15
- ▶ DN515
 - Added “058” edit
- ▶ DN518
 - Added “058” edit
- ▶ DN535
 - Clarified that decimal points are required if reported

Texas EDI Medical Data Element Edit Table Version 2.0, dated September 2015

- ▶ DN559
 - Removed 3 digit requirement
- ▶ DN717
 - Removed “001” edit
 - Added “058” edit
- ▶ DN732
 - Removed “058” edit

Texas EDI Medical Data Element Requirement Table

Version 2.0, dated September 2015

- ▶ DN42
 - Changed to mandatory
- ▶ DN53
 - Changed to Mandatory
- ▶ DN152 & DN153 & DN154 & DN156
 - Changed to Not Applicable

Texas EDI Medical Data Element Requirement Table

Version 2.0, dated September 2015

- ▶ DN515
 - Changed to “conditional”
- ▶ DN518
 - Changed to “conditional”
- ▶ DN543 & DN544 & DN545 & DN546
 - Changed to “Not Applicable”

Texas EDI Medical Data Element Requirement Table

Version 2.0, dated September 2015

- ▶ DN731
 - Amended the mandatory triggers
- ▶ DN732 & DN733 & DN734
 - Amended the mandatory triggers

§ 134.804 – Reporting Requirements

- ▶ Clarifies that actions taken on a medical bill “appeal” are to be reported
- ▶ Removes “payment” to clarify that all medical bill actions must be reported
- ▶ Added language to clarify that “W3” is a Texas specific claim adjustment reason code
- ▶ Requires medical bills to be sequentially reported

§ 134.804 – Reporting Requirements

- ▶ Reiterates requirements to submit accurate medical EDI records by adding phrase “medical EDI data may be obtained from all sources, including”
- ▶ Effective date is 9/1/2015

§ 134.805 – Records Required to be Reported

- ▶ Reiterates requirement to report processing of duplicate medical bills
- ▶ Reiterates requirement to report medical bill reimbursements made by employer or injured employee
- ▶ Effective date is 9/1/2015

§ 134.807 – State Specific Requirements

- ▶ Reiterates requirement to report compound drugs using the same prescription number for each reimbursable component of the compound
- ▶ Reiterates requirement to report unknown SSNs by using the format stated in §102.8
- ▶ Adds requirement to report DN53 on all medical EDI records

§ 134.807 – State Specific Requirements

- ▶ Clarifies acceptable values for DN507 and Texas definitions for acceptable values
- ▶ Adds requirement to report DRG information when applicable
- ▶ Provides that only 4 diagnosis codes be reported from a professional bill
- ▶ Provides that only 4 diagnosis pointers be reported from a professional bill and a default value
- ▶ Effective date is 9/1/2015

§ 134.808 – Insurance Carrier EDI Compliance Coordinator and Trading Partner

- ▶ Removes specific email addresses
- ▶ Effective date is 9/1/2015

Electronic Reporting- Compliance

Compliance is the goal!

Electronic Reporting – Recent Findings

- ▶ NPI
- ▶ Referring Provider Information
- ▶ Rendering Provider Information
- ▶ Diagnosis Codes

Electronic Reporting- Assistance

Assistance

EDI Support Services

edisupport@tdi.texas.gov

Future Topics for EDI Meetings

Q&A

Closing