

### AHCCCS Update Meeting -System Update

September 2019

#### **Discussion Items**

- DAP, APSI and Alternative Funding Indicator Reminders
- EVV Technical Status and Next Steps
- Initial FQHC-RHC Data Validation Audit Feedback
- DUGless Updates
- New/Improved Webpages
- Next Technical Consortium; Upcoming Workgroups



## DAP, APSI and Alternative Funding Indicator Reminders

- CYE2020 DAP's Provider Flags and Rates (refer to attachment 1)
- CYE2020 APSI/PSI TIN Flags
- Alternative Funding Indicators Reporting (refer to attachment 2 and 2a)



#### **EVV Technical Status and Next Steps**

 Per email sent 9/6 – "Final specs won't be available until we complete Business Rules targeted for the end of this month. As soon as I know more will share information with the MCO's and get a technical work group scheduled."



### EVV Technical Status and Next Steps, cont.

 Refer to the EVV Webpage for key project information and updates –

https://www.azahcccs.gov/AHCCCS/Initiatives/ s/EVV/

https://www.azahcccs.gov/AHCCCS/Downloads/EVV/ProviderMCOEVVSystemModelDesign.pdf



## Initial FQHC-RHC Data Validation Audit Feedback

- Summary of key issues noted
  - T1015 ERRORS: T1015 single with no supporting ancillary codes with zero payment; In some cases ancillary codes found to support T1015 but they are in 43/78 status; Multiple T1015 on same day for same member without supporting ancillary codes for each uniquely supported visit/diagnosis; Multiple T1015's for same diagnosis without distinct visit modifier
  - Incorrect use of Modifier 25
  - T1015 CRN is denied or missing



# Initial FQHC-RHC Data Validation Audit Feedback, cont.

- Incorrect billing of Medicare Primary claims
- Billing Provider should be FQHC (C2) or RHC (29)
- Medicare G codes were not replaced with T1015
- All diagnoses should be reported on T1015 and then the diagnosis pointer should be matched to the specific ancillary services
- Missing Participating Provider Information



# Initial FQHC-RHC Data Validation Audit Feedback, cont.

 Next Steps – Letters sent to all MCO's the last week of August specific to their findings; Look at opportunities for systems/process corrections and Provider Education; AHCCCS will be adding a new edit requiring reporting of minimum ancillary services with a T1015; Repeat audit early in 2020



#### **DUGless Updates**

- Adding "effective date" for all submissions in early 2020
- Incorporating a Consent feature for data related to Part 2 – SUD for applicable submission in early 2020



### New/Improved Webpages

 AHCCCS has implemented a new Medical Coding Webpage which continue to be enhanced ongoing

https://www.azahcccs.gov/PlansProviders/MedicalCodingResources.html

 AHCCCS has also updated (and will continue to update ongoing) the former Demographics Webpage

https://www.azahcccs.gov/PlansProviders/Demographics/



# Next Technical Consortium; Upcoming Workgroups

- Next 1/4ly Technical Consortium currently targeted for late October
- Technical Workgroups specific to EVV and Encounter Timeliness upcoming



### Questions?





### Thank You.



