



**X12N TGB/WG1
Benefit Information Workgroup
September 15-19, 2019
Pittsburgh, PA**

Group Leadership			
Chair Name	Company	Term End Date	Email
Donna Campbell	Health Care Service Corporation	Summer 2021	donna_campbell@bcbsil.com
Aggie Dorio	Aetna	Summer 2020	dorioa@aetna.com
Secretary Name	Company	Term End Date	Email
Peggy Billhartz	Cognosante, LLC	Appointed (Thru Fall 2020)	Peggy.Bilhartz@cognosante.com

Quorum Requirement Statement	
<i>This group enforces quorum requirements for group voting items.</i>	
<i>This group does not enforce quorum requirements for group voting items.</i>	X

Scheduled Meetings				
Type of Meeting	Date	Location/Conference Call	Contact	Agenda
Current Meeting	09/15/2019-09/19/2019	Westin Convention Center 100 Penn Avenue Pittsburgh, PA 15222 412-281-3700	Donna Campbell	<ul style="list-style-type: none"> 7030 Informational Forum, BRTSs, 7030 second PCP work
Next Standing Meeting	01/26/2020-01/30/2020	Hilton Portland & Executive Tower 921 SW 6th Ave. Portland, OR 97204 (503) 226-1611	Donna Campbell	<ul style="list-style-type: none"> 7030 Publication, 7030 second PCP work
Interim Meeting	Every Monday from 1:00-4:00 CT Every Tuesday from 2:00-4:00 CT	877-249-5777 code 434-874-95 (or link on CD)	Donna Campbell	<ul style="list-style-type: none"> Work on CRs and BRTSs for 7030 public comments
Management Meeting	N/A			



Co-chair Election	Term End	Election Date: Click or tap to enter a date.			
N/A	Candidate(s)				
Nomination					
Motion					
Vote	Motion Made by	2nd By	Approve	Disapprove	Abstain
Election					
Vote	Motion Made by	2nd By	Approve	Disapprove	Abstain

Voting Item: Summer Minutes		Vote Date: 9/16/2019			
Type	Issue Description				
Meeting Minutes	Need approval of Standing Meeting Minutes for Summer 2019				
Motion					
To approve the Summer 2019 Meeting Minutes					
Vote	Motion Made by	2nd By	Approve	Disapprove	Abstain
	Diane Rude	Amanda Sibley		0	7
Discussion					
Result Motion passed - Minutes approved					

Voting Item: DM 018319		Vote Date: 9/17/2019			
Type	Issue Description				
DM 018319	Would like to identify clinical information in the 270/271				
Motion					
To approve the maintenance request as we discussed, so we can move forward					
Vote	Motion Made by	2nd By	Approve	Disapprove	Abstain
	Merri-Lee Stine	Deb McCachern		0	0
Discussion					
<p>LuAnn - Would like, in the standard, to add STC segment after the EB segment to the 271</p> <p>Donna – Would prefer not to use the STC, since it states Claim in the element and since the 271 uses Service Type Codes, which are called STC</p> <p>Donna - brought up the EB segment to look at it – EB16 tells you a Prior Auth is required</p> <p>Could ask for a new composite – new element EB17 – that would be repeating</p> <p>WG1 needs to approve the concept</p> <p>EB17 – will look like composite 43, but will only have 2 elements</p> <p>Industry Code – 2 of the 1271, with repeat of 99 – it will have a new name</p>					
Result Motion passed					



Key Discussion Item
Discussion
7030 Public Comment
<ul style="list-style-type: none">◆ Worked on multiple CRs and BRTSs
Decisions
<ul style="list-style-type: none">◆ The following CRs were created:◆ CR 2023◆ CR 2024◆ CR 2025◆ CR 2026◆ CR 2027◆ CR 2028◆ CR 2029◆ CR 2030◆ CR 2031◆ CR 2032◆ CR 2033◆ CR 2034◆ CR 2035◆ CR 2036◆ CR 2037◆ CR 2038
Summary of Discussion
Meeting with TGC/WG2 – RFI
<ul style="list-style-type: none">◆ The RFI workgroup was also meeting Monday afternoon and asked a couple of WG1 representatives to attend, to discuss a couple of RFIs◆ Donna attended their meeting to provided WG1 responses
Decisions
<ul style="list-style-type: none">◆ RFI 2351◆ We do not feel there is a clear business reason for this scenario. If you believe there is a valid business reason to accommodate this scenario, please submit a maintenance request to http://changerequest.x12.org.◆ RFI 2350◆ Our response from March is correct – the RFI WG needs to post◆ RFI 2382 – MBI required on HIPAA transactions◆ This RFI is outside of the purview of X12. Should have been doing it as soon as the card was received.◆ RFI 2356 – Multiple TRN◆ Per 1.4.7.1, item number 6, where it states "6. Other payers or plans if known in 2120C/D. (Note: Do not return details of coverage or benefits associated with other payers or plans, the Information Receiver should initiate a separate 270 request to the other payer or plan to determine the level of coverage). Therefore, if the subscriber ID is the same for each policy, the policies should be listed via multiple 2110C/D loops. If the subscriber ID is different for each policy, the indication the subscriber has multiple coverages should be returned, the 2120C/D loop identifying the information to have the provider submit the 270 to the payer with the information returned



on the first 271.

- ◆ RFI 2359 – 2000A Loop AAA error
- ◆ You are correct, returning the AAA 42 for this situation is inappropriate. The correct way to return the 271 to identify a provider is not on file is through the 2100B AAA. The AAA03 value of ‘51’ Provider Not on File should be returned.

Summary of Discussion

Meeting with TGC/WG5

- ◆ Discussed section 1.5 Business Terminology, the Wordbook terms and definitions, and other common content issues on Wednesday

Decisions

- ◆ Agreed on verbiage for spend down and other financial amounts to not be definitions – WG1 will make changes
- ◆ Agreed on definition of Information Receiver
- ◆ Agreed on term Benefit and/or Coverage Information Owner (BCIO)
 - Name changed to BCIE on Thursday - Benefit and/or Coverage Information Entity
- ◆ Agreed on definition of BCIO – changed on Thursday
 - ◆ Entity that has ownership and responsibility for maintaining the member’s coverage and/or benefit details and is not the Information Source
 - ◆ Definition modified on Thursday
 - ◆ Entity that has responsibility for maintaining some or all of the member’s coverage and/or benefit details and is not the information source
 - ◆ WG developed a Situational Rule
 - ◆ Required when the information Source identified in loop 2000A may not have the correct eligibility, coverage, or benefit information, and the Information Receiver must contact an entity other than the one identified in Loop 2000A, when information returned in this response required further action
- ◆ Pat and LuAnn said we do not need to do a CR to update section 1.5 – they do that through the publisher
- ◆ Add Terms and Definitions to TR3
 - ◆ Copay
 - ◆ Deductible
 - ◆ Coinsurance
- ◆ Add to Wordbook
 - ◆ Out of pocket (maximum or limit)/stop loss
 - ◆ Cost containment
 - ◆ Spend down
 - ◆ Tiered benefit

Summary of Discussion

Decisions

Informational Forum or Joint Meeting Notes:

Topic	Date: 9/16/2019 2:00-3:00
TGB/WG1 270/271 Informational Forum	
Notes	
<ul style="list-style-type: none"> ◆ Diane Rude reviewed the slides ◆ Donna Campbell presented 13 comments 	



- ◆ Some for TGB/WG1
- ◆ Some for TGB/WG6
- ◆ Some for TGC/WG5
- ◆ James Mosteller asked 2 questions
 - ◆ A second public comment period was implied – will there be one?
 - ◆ Yes, there will be a second public comment period for the 270/271
 - ◆ What was the decision to remove ICD9? TGB/WG2 could not remove it for 7030, due to a Property and Casualty scenario
 - ◆ He recommended X12 be consistent across TR3s
 - ◆ TGB/WG1 did not know about the P&C scenario and will discuss