

X12N TGB WG3 Payment Information Work Group January 26 – 30, 2020 Portland, OR

Group Leadership			
Chair Name	Company	Term End Date	Email
Pam Grosze	PNC Bank	Summer 2021	pamela.grosze@pnc.com
Pat Wijtyk	Cognizant	Winter 2020	Patricia.wijtyk@cognizant.com
Meg Kutz	Anthem	Fall 2020	Margaret.kutz@anthem.com
Secretary Name	Company	Term End Date	Email
Jameelah Richardson	Medical Mutual	Appointed	Jameelah.Richardson@medmutual.c
		(Thru 2021)	om

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

Scheduled Meetin	ıgs			
Type of	Date	Location/Conference	Contact	Agenda
Meeting		Call		
Current	Jan. 26-30,	Hilton Portland &	Co-chairs	 Posted to iMeet
Meeting	2020	Executive Tower		
		921 SW 6th Ave.		
		Portland, OR 97204		
		(503) 226-1611		
Next Standing	May 31-June	Hyatt Regency	Co-chairs	
Meeting	4, 2020	Jacksonville Riverfront		
		225 E Coastline Dr.		
		Jacksonville, FL 32202		
		(904) 588-1234		
Interim	Every Wed	2:00 Ct / 3:00 ET	Co-chairs	
Meeting				
Management				
Meeting				

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Co-chair Election	Term End		Election Date: 1/28	/2020		
	Candidate(s)	Candidate(s)				
Nomination						
	Motion					
	Motion made to close	nominations for TGB Wo	rkgroup 3 Co-Chair			
Vote	Motion Made by	2 nd By	Approve	Disapprove	Abstain	
	Pam Grosze	Dave Collins	11	0	0	
Election			·			
Vote	Motion Made by	2 nd By	Approve	Disapprove	Abstain	

Co-chair Election	Term End		Election Date: 1	L/28/2	020	
	Candidate(s)	Candidate(s)				
Nomination	Pat Wijtyk					
	Motion	Motion				
	Motion made to elect	by unanimous consent Pa	nt Wijtyk as co-c	hair fo	r TGB Workgro	oup 3
Vote	Motion Made by	2 nd By	Approv	ve	Disapprove	Abstain
	Pam Grosze	Dave Collins	11		0	0
Election						•
Vote	Motion Made by	2 nd By	Approv	ve	Disapprove	Abstain

Voting Item:		V	ote Date: 1/28	3/2020			
Туре	Issue Description	Issue Description					
Other							
	Motion						
	Motion to change our Kutz	Motion to change our alternate voting representation for CMG03 from Pam Grosze to Meg Kutz					
Vote	Motion Made by	2 nd By		Approve	Disapprove	Abstain	
	Pam Grosze	Pam Cottrell		16	0	0	
Discussion	Pam Grosze was voted to TGB co-chair due to her promotion she will not be able to be the						
	alternate voting repre	sentative for CMG0)3				
Result	Motion carried unanin	nously					

Voting Item:	Vote Date: 1/29/2020				
Туре	Issue Description				
Other					
	Motion				
	Motion to remove the third co-chair position for TGB Workgroup 3 and remain at two				
Vote	Motion Made by	2 nd By	Approve	Disapprove	Abstain

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	Judith Passick	Jessica Chapagain	8	0	0
Discussion	position after the stan	co-chair due to her promotion solding meeting. Currently Pam's rethe workgroup. This can be revisi	sponsibility ca	n be handled w	
Result	Motion carried unanin	nously			

Key Discussion Items

Discussion

Examples

- Our examples have been published- 835 Health Care Claim Payment/Advice Examples
 - o http://www.x12.org/examples/005010X221/
 - They also have Coordination of Benefits

Decisions

N/A

Discussion

835 related RFIs

- RFI 2354- SVC Procedure Info Requirement
 - Open to the end of the week, but passes
- RFI 2367- <Original Claim> (document: RFIs012220
 - Need to review the wording
 - What exactly is the *original* claim when claims are reversed, voided, replaced?
 - 'The original claim is the most recent adjudicated version of the claim.'
 - We may need to get rid of the word 'original', it is not in 7030
- RFI 2372- In Hold folder
 - Sent to requester asking for additional information
- RFI 2410- 835 MS-DRG Reporting CLP11
 - Out for vote
 - Reviewed recommendation for them to make a business decision for the validator to relax the edit
- RFI 2415- Additional Payee Identifier
 - They want to use ref PQ to communicate information as ERA destination, payment type, payment destination and grouping info
 - Could possibly be saying that this payee is a part of that group
 - Reviewed what payee means/is and looked at the TR3 notes
- RFI 2418- 835 svc code
- RFI 2401- Estimated
 - Heather came and talked to group about the situation being when the patient chooses not to take
 Medicare
 - O Discussion around:
 - what should be used is CLP02
 - What is the best CARC/RARC combination?
 - In some communities the business decision was to act as the secondary payer

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- Will providers have problems with processing in their systems if it comes in with CLP02 and never received a CLP01?
 - Responses that it will cause manual review
- Add a note that some could pay as primary, it's a business decision

Decisions

RFI 2367: Group consensus with response

• The word 'original' is confusing; this will be looked at with a C5 hat. Pat will take this and look at this across all the guides

RFI 2415: Group consensus with response; will have it posted

RFI 2372: Unable to draft a response, a question was sent back to sender to clarify payer id

RFI 2401: CARC 96 is good, possible RARC N6 and N12

Consensus to close it out

Discussion

PLB-TR1

Continued the creation of our TR1 for PLB TR1. Reviewed all PLB codes that have been created on the X12 website

- Reviewed each one to see if additional information or a change to our information was needed. Additional information given or information changed to the following PLBs:
 - O1, 02, 04, 05, 06, 72, 90, AM, AP, B2, B3, BD, CR, CS, CT, E3, FB, FC, FR, IP, J1, L3, L6, OB, PI, RA TL, WO
 - Updates made with additional questions:
 - **0**3
- What is the difference between this and AH? 03 may be related to a specific claim
- AH
- Same description as 03, because it is a new code, we had to have requested it
 Do we know what our intention was?
- This is the exact explanation or note that what we had in 5010; it did say Claim transmission origination fee
- WU
 - The description is different. We need to ask questions to see if this was transposed during submission. Is this LE?
- Added guidance on Reference ID usage and what should be placed in the Reference ID (PLB13-02) for each code
 - We grouped the four IRS codes together to look at what the reference ID should be. Reference
 ID must identify the reason for the withholding
 - 07, IR, LE, WU
- Lost and reissued payments- 5010 and 6020 just used a generic code 'CS'
 - Should we put in a request for a more specific code to get away from the using the generic code CS?

Decisions

Updates and changes to PLB codes can be found in document 'PLB TR1'

PLB Code CS- Decision made to request a new code

Reference ID for PLB 50

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• CMS liaison will take this back and find out what the Medicare late cost report penalty is and bring the information back to the group

Reference ID for HM

Group will make an internal note outside of this TR1 that as of today (1/27/2020) CMS has noted that
they use it. Will send the list back to the two CMS liaisons that are in our workgroup to help us identify
which ones CMS uses

PLB Codes 03 and AH being possible duplicates

 Pat will research. If it is a true duplicate, we will get rid of 03 because AH is already in everyone's system

Discussion

CARC/RARCs

- The CARC RARC TR2 is a full encyclopedia of every CARC and RARC that the industry can use
- Our 7030 835 names the TR2
- We are going to go back to updating it 3 times a year
- Talked through whether creating and updating this list would give the connotation that the code combinations suggested have to be used (like the rules with the Code Combination list)
 - If it does get adopted, we will figure out the best way to introduce it and the level of education needed to not cause any confusion
- Reviewed the CARC RARC work submissions from the Fall 2019 Standing meeting

Decisions

Updates and changes can be found in document 'Review_CARCRARC_TR2_2018' (in column I 'Jan 28')

Discussion

Accolades to the Workgroup for our 835 moving forward to be published

- Pat presented a pin of Excellence the workgroup and teammates that have been involved in the work and effort over the past couple of years of moving the 835 7030 forward
- Pat personally thanked Pam for all the hard work and behind the scenes work that she did that made it possible for our 835 to move towards being published
- Chair and Vice Chair of X12N was in attendance to congratulate the workgroup

Decisions

N/A

Discussion

Changes to our Guide

 Any additional changes that are done to our guide will go in 8010 and we would start following the new maintenance request process

Decisions

N/A

Discussion

7030 to 8010

• We have finished our 7030 version and it will be published. Standards are like tinker toys; the standards are what is used to build things from

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- We build our 835 TR3 based on the 7030 version of the standards. Today we have available the 8010 version of the standards that we can pull in. It doesn't change anything about the TR3 that we have finished
 - For example, if one of the new standards added a new element in a segment, we can add it, but
 it would show as not used. We could make the decision to move forward and propose that the
 new HIPAA version be 8010 not 7030

Decisions

N/A

Discussion

837 Comments for WG3 review

- Reviewed:
 - 0 1.4.2.1
 - o 1.4.5.1 and 1.4.5.2

Decisions

1.4.2.1

Change will be made in this version to remove the reference of MIA and MOA

1.4.5.1 and 1.4.5.2

• Undecided and will review in future version

Discussion

835 7030 Change Log

We are to create a comprehensive change log from 5010 to 7030 that will allow for us to provide better information to the industry for 7030

- We have not been given the format, but we have control over the context and language
- Need to know change, location, action, detail, benefits/impact (carryover from Impact List created in Fall 2019 Standing meeting)
- There are different ways that we can present and format this information; by Segment, by Subject, create a Project Manager view, and/or create an IT implementation view
- Reviewed:
 - o BPR04
 - o BPR03
 - o 2100 and 2110 RAS
 - o 1.10.2.17 and 1.10.2.12
 - 0 1.10.2.13
 - 0 1.10.2.22
 - 0 1.10.2.24
 - o 1000B REF
 - o 2100 CLP CLP02
 - o 2100 CLP, CLP11
 - o 2100 CLP, CLP16
 - o 2100 RAS, 2110 RAS, RAS02
 - o 2100 RAS, 2110 RAS, RAS03
 - o 2105 N1 and 2105 NM1
 - o 2100 Ref Original Claim Submission
 - o 2110 SVC

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- o 2100 PER
- 0 1.10.19-1.10.24
- 2100 CAS and 2110 CAS
- 2100 REF Rendering Provider Information
- Table 1 REF Version ID
- Table 1 Version ID
- o Table 1 Ref Card Security Verification code
- o Table 1 Ref Class of Contract Code
- Table 1 Payment Determination Methodology
- 2100 DTM Corrected Accident Date
- o 2100 DTM Corrected onset of illness
- o 2100 AMT, 2110 AMT Allowed Amount
- o 2110 TOO

Decisions

Updates and changes can be found in document 'X322 835 7030- Change Log v2'

- Decided to review what to put in the change log
- Pam will continue to work to pull everything in and get more guidance from N. We will get into more robust discussion on what we want to include.

Discussion

Dental CARC/RARC review

Workgroup 3 was asked to review a few questions regarding Dental CARCs and RARCs

- Background information given: The dental ERA adoption rate is at 22% The best practices document is being created to communicate to the Dental community the proper wat to use the CARCs and RARCs
- The request is for Workgroup 3 to confirm that the CARCs and RARCs that they have mapped to the description they have in the document is appropriate
- Workgroup 3 co-chairs explained that Workgroup 3 doesn't have the authority to review the document and make suggested changes to the document itself, but can review the combinations of the Dental CARC/RARC and give feedback and suggestions based on how it is used within the group

Decisions

If CARC or RARC on their list is not mentioned, then there was no suggested change

- Additional Provider Information Required
 - o CARCs 226 or 252
 - o PI- and allow the provider to decide where it goes
- Dual Insurance/COB- Requesting Other EOB
 - o CARC 252 RARC N479
- Duplicate Claim/Previously Paid
 - o RARC not needed, GC OA
- Frequency Limitation
 - o Look at the Remark codes that may spell out the specific time frames
- Missing Tooth Clause
 - CARC 16 RARC N384; although there was discussion with the CARC also being 96 based on the intent
- Need not evident
 - o CARC 150 or from the 150-154 series, RARC N661
- No preauthorization on file

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- o CARC 197
- Non par provider
 - o CARC 242
- Periodontal History/Charting Requested
 - o CARC 252
- XRAYS Requested
 - o CARC 252

Discussion

X322 Next Version Change Log

- We need to review the second version from the second public comment period
- Reviewed the following (complete responses found in document 'X322 Next Version Changes Log':
 - o Title: 1.10.2.25
 - o Title: 2100 CLP- APR-DRG Support
 - o Title: 1.10.1.2.6 ERA with Payment by Card, 4th paragraph
 - Title: 1000A, PER- Payer Business Contact Information PER02
 - o Title: 1000B, N3 Example
 - o Title: 1000B, RDM Segment Situational Rule
 - o Title: 2100 Crossover Carrier Name NM108 Qualifiers

Decisions

Updates and changes to X322 Change Log can be found in document 'X322 Next Version Changes Log'

Title: 1.10.2.25

Undecided

Title: 2100 CLP- APR-DRG Support

• Do not see the need to call it out separately. fourth digit denotes the SOI

Title: 1.10.1.2.6 ERA with Payment by Card, 4th paragraph

Undecided

Title: 1000A, PER- Payer Business Contact Information PER02

Undecided

Title: 1000B, N3 Example

Agree to make change

Title: 1000B, RDM Segment Situational Rule

Agree to update 1000B N3 and N4

Title: 2100 Crossover Carrier Name NM108 Qualifiers

Decision to leave it as is

Discussion

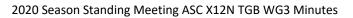
Pam Grosze voted to TGB co-chair

- Pam was voted to TGB co-chair
 - Due to her promotion she will have to vacate the B3 co-chair position after the standing meeting
- Only two co-chairs will remain
 - o If later the group feels that a third co-chair is needed, a third co-chair can be reevaluated and voted upon at that time

Decisions

The Group will vote on keeping the co-chairs to two

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Informational Forum or Joint Meeting Notes:	
Topic	Date: Click or tap to enter a date.

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