

## New Emergency Department (ED) and Ambulatory Surgery (AS) Edits Beginning with the January 1, 2008 – March 31, 2008 Reports

New edits will be applied to the ED and AS data beginning with the January 1, 2008 through March 31, 2008 report period. Below is a description of these edits.

The Standard Edit Program edits the data reported within each record. There are two (2) types of Standard Edits: Field Edits and Relational Edits. Field edits identify data elements that are blank, incomplete or invalid. Relational edits identify illogical relationships between two or more data elements within the same record. The following standard edits will be applied:

| <u>Edit Flag</u> | <u>Description</u>   |
|------------------|--|
| S021             | Age is illogical with Principal Diagnosis Code   |
| S105             | Age is illogical with Other Diagnosis Code   |
| S108             | Age is illogical with Principal E-Code   |
| S109             | Age is illogical with Other E-Code   |
| S011             | Sex is illogical with Male Principal Diagnosis Code  |
| S086             | Sex is illogical with Female Principal Diagnosis Code  |
| S087             | Sex is illogical with Male Other Diagnosis Code  |
| S088             | Sex is illogical with Female Other Diagnosis Code  |
| S128             | An Evaluation and Management (E/M) code should not be reported as Principal Procedure when there are other surgical procedures reported on the record. |

The Comparative Edit Program evaluates data for "reasonable" distribution of data within each data element category for the current report period. If the percentage reported is greater than expected, then the data element category will fail the Comparative Edit.

| <u>Edit Flag</u> | <u>Description</u>   |
|------------------|--|
| C001             | All records (100%) are reported in one Sex category: Male or Female.   |
| C003             | Records reported as Sex-Unknown are more than 0.1% of total records reported.  |
| C004             | All records (100%) are reported in one Ethnicity category.   |
| C006             | All records (100%) are reported in one Race category.  |
| C009             | Unknown ZIP Code (99999): Percentage of records reported is greater than 2%.   |
| C015             | All records (100%) are reported in one Disposition of Patient category. Excludes "Home" and "Self Care" (routine discharge). |
| C016             | Patient Disposition-Other: Percentage of records reported is greater than 1%.  |
| C017             | All records (100%) are reported in one Expected Source of Payment category.  |
| C021             | No Principal Procedure reported on any records.  |
| C031             | Principal Diagnosis – 799.9 (Unspecified/unknown). Percentage of records reported is greater than 0.1%.                      |
| C033             | Expected Source of Payment-Other: Percentage of records reported is greater than 2%.   |

The updated ED and AS Edit Flag Description Guide will be available on the MIRCa website soon. If you have any questions, please contact your OSHPD analyst.

**How to Report Expected Source of Payment for Section 1011 Funds for Discharge (Inpatient), ED and AS Data** (Federal Reimbursement for Emergency Health Services Furnished to Undocumented Aliens).

CMS, as a result of the Medicare Prescription Drug Improvement and Modernization Act (MMA) (Section 1011), is providing \$250 million each year for Fiscal Years 2005-2008 for payments to eligible providers for emergency health services given to undocumented and other specified aliens.

For **IP**, please report Section 1011 funds as Other Government (06) with Type of Coverage Traditional (3).

For **ED and AS**, please report Section 1011 funds as (OF) Other Federal Program. (CMS is involved, but this funding source should not be reported as Medicare.)

**Clarification to article in Quick Notes – Issue 16 “Reporting the Expected Source of Payment (ESOP) for California Children’s Services”**

**California Children’s Services (CCS)** program funding comes from Title V Federal funding allocated for “children with special health care needs (CSHCN) or who are suffering from conditions leading to such status”.

For **inpatient discharges** report CCS, if it is expected to pay, or did pay, the greatest share of the patient’s bill, as 06, Other Government, not 05, County Indigent Programs as previously mentioned in Quick Notes – Issue 16.



**How to Report Inpatient Expected Source of Payment for Health Plan of San Mateo/ CareAdvantage**

An interesting Expected Source of Payment (ESOP) issue has surfaced. It concerns the reporting of ESOP for inpatients with Health Plan of San Mateo/CareAdvantage.

CareAdvantage is a Medicare HMO. It is a Federal Plan. It is reported as Medicare and Managed Care–Other because it is not a Knox Keene HMO.

Health Plan of San Mateo (HPSM) is a Medi-Cal County Organized Health Plan (MCOHS) that has a Knox-Keene license with a plan code of 0358. It is reported as Medi-Cal, Managed Care–Knox Keene.

So far so good, nothing new. However, there’s more:

Health Plan of San Mateo CareAdvantage is a new program that combines Medicare and Medi-Cal benefits, including prescription drugs, into a single plan.

HPSM (historically the Medi-Cal provider for San Mateo County) has contracted with CMS (Medicare) and is now offering combined Medicare/Medi-Cal coverage. This is wonderful for patients needing healthcare but it poses a dilemma for those of us trying to use OSHPD’s Inpatient regulations as they are currently written. So, until we can get our regulations re-written, do we report this coverage as Medicare, Managed Care-Other? Or do we report, as Medi-Cal, Managed Care-Knox Keene?

The answer depends on the specific patient and their specific coverage. Is the largest part of their bill paid by, or expected to be paid by CareAdvantage (the Medicare HMO, Managed Care-Other) or is the largest part of their bill paid by, or expected to be paid by Medi-Cal? If a patient has both Medicare and Medi-Cal coverage then report the coverage that paid, or is expected to pay, the largest share of the bill. When you know the largest payer then you will know how to report the ESOP for a given patient.

Questions? Call Irene Ogbonna (916) 326-3937



## Reminder - OSHPD Will Accept Present on Admission Reporting Interim Changes

As mentioned in our last *Quick Notes*, OSHPD is currently in the process of preparing regulation changes to accommodate the new Present on Admission (POA) criteria. OSHPD is adopting the reporting requirements and guidelines described in the UB-04 Data Specifications Manual and the *ICD-9-CM Official Guidelines for Coding and Reporting*. If approved, those regulations will become effective for discharges on or after July 1, 2008.

In the meantime, due to the October 1, 2007 implementation of POA reporting to the Centers for Medicare and Medicaid Services (CMS) and other reimbursement sources, starting with the July 1, 2007 through December 31, 2007 report period:

- OSHPD will accept the current Condition Present at Admission codes: Y, N, and U, as well as the new POA value codes: W and 1.

Exempted diagnosis codes will need to be reported with a POA indicator of 1. Blank POA will be flagged as blank.

- OSHPD will not accept the POA indicators on the E-codes.

Facilities that have been identified as exempt from reporting POA requirements for CMS will still need to report those indicators to OSHPD.



### We Have Moved!

If you have not already heard, OSHPD has a new home. What does that mean? MIRCal also has a new home. Our email is the same but our address and telephone numbers have been changed.

Address: 400 R Street, Suite 270  
Sacramento, CA 95811-6213

|                 |          |
|-----------------|----------|
| PDS Main Number | 326-3935 |
| MIRCal Hotline  | 326-3920 |
| FAX             | 327-1262 |

|                             |          |
|-----------------------------|----------|
| Candace L. Diamond, Manager | 326-3930 |
| Rob Fox, Assistant Manager  | 326-3943 |
| Ben Russell                 | 326-3929 |
| Cathy Sarantis              | 326-3931 |
| Cindy Jensen                | 326-3914 |
| Diane Gerber                | 326-3934 |
| Eric De La Cruz             | 326-3936 |
| Irene Ogbonna               | 326-3937 |
| Joyce Makimoto              | 326-3938 |
| Kim Gustafson               | 326-3939 |
| Krista Todd                 | 326-3940 |
| Lorraine Sady               | 326-3942 |
| Robyn Strong                | 326-3944 |
| Susan Olsen                 | 326-3945 |
| Teresa Dedmon               | 326-3946 |
| Tonie Trotter               | 326-3948 |
| Tony Massara                | 326-3949 |



## Update Your Bookmarks

The OSHPD web site has a new look:

[www.oshpd.ca.gov/](http://www.oshpd.ca.gov/)

The MIRCal web site address has changed and also has a new look:

[oshpd.ca.gov/hid/mircal](http://oshpd.ca.gov/hid/mircal)

2008 Report Period & Due Dates Calendar for Inpatient, ED & AS:

[oshpd.ca.gov/hid/MIRCal/Calendar.html](http://oshpd.ca.gov/hid/MIRCal/Calendar.html)

Updated ICD-9-CM Coding Edit Manual:

[oshpd.ca.gov/hid/MIRCal/ICD9CodingManual.html](http://oshpd.ca.gov/hid/MIRCal/ICD9CodingManual.html)

Updated MIRCal Quick Reference Guide:

[oshpd.ca.gov/MIRCal/training/CBT/MIRCal\\_QRG.pdf](http://oshpd.ca.gov/MIRCal/training/CBT/MIRCal_QRG.pdf)

Updated Manuals and Guides for Inpatient, ED & AS:

[oshpd.ca.gov/HID/MIRCal/ManualsGuides.html](http://oshpd.ca.gov/HID/MIRCal/ManualsGuides.html)

## **\*\* IMPORTANT DATES \*\***

### **IP Due Dates:**

|                             |                        |
|-----------------------------|------------------------|
| July 1, 2007 – Dec 31, 2007 | Due March 31, 2008     |
| Jan 1, 2008 – June 30, 2008 | Due September 30, 2008 |

### **ED & AS Due Dates:**

|                              |                     |
|------------------------------|---------------------|
| Jan 1, 2008 – Mar 31, 2008   | Due May 15, 2008    |
| Apr 1, 2008 – June 30, 2008  | Due August 14, 2008 |
| July 1, 2008 – Sept 30, 2008 | Due Nov 14, 2008    |
| Oct 1, 2008 – Dec 31, 2008   | Due Feb 14, 2009    |

### **CHIA Audio-Seminar: OSHPD Presents: “Whats New in 2008”**

March 25, 2008 (11:00am pst)

### **California Health Information Association (CHIA) Annual Convention:**

June 15-18, 2008 – San Jose, CA

### **California Ambulatory Surgery Association (CASA) Annual Convention:**

September 3-5, 2008 – San Francisco, CA