

Minutes

Iowa State Association of Counties

ICTS Advisory Committee Meeting on Tuesday January 17, 2017

ISAC Offices, 5500 Westown Parkway, Suite 190, West Des Moines, Iowa 50266

Phone 515.244.7181

Name	Present	Term Ends
Carl Mattes	Y	07/01/2017
Deborah Seymour-Guard	Y	07/01/2018
Jill Eaton	Y	07/01/2017
Melvyn Houser	Y	07/01/2018
Justin Schieffer	Y	07/01/2018
Michelle Fields	N	07/01/2017
Sarah Berndt	Y	07/01/2018
Suzanne Watson	Y	07/01/2019
Marjorie Pitts	N	07/01/2018

Staff Present: Bill Peterson, Jeanine Scott, Brad Holtan, Andrea Jansen, Beth Manley, and Laz Schreck

Carl called the meeting to order at 10:31 am.

Review and Approve Agenda

Moved by Melvyn, seconded by Jill to approve the agenda as written. Motion passed unanimously.

Review and Approve Minutes from Previous Meeting

Moved by Melvyn, seconded by Justin to approve the November 21, 2016 Advisory Committee meeting minutes as written. Motion passed unanimously.

Compliance Report – Beth

Beth briefly recapped on the standard transaction topic (a more in depth background can be derived from the supplemental information at the conclusion of the minutes). She informed the committee that movements are being made to comply with the standard transaction requirements. Due to this movement, Beth created a draft document that can be sent to Providers and CEOs to essentially give them a ‘heads up’ in case the decision is to fully comply. From the June 23, 2016 Advisory Committee meeting, it was decided upon to draft a letter of communication to the CEOs and Regions.

Beth pointed out that because many claims paid are not claims that are required to comply as a standard transaction, then complying could be waived. Requiring all counties, regions, and Providers to comply with standard transactions would be costly.

Next Steps: Members review the draft document and discuss feedback at the next Advisory meeting. **Sample letter included at end of minutes*

Operations Sub-Committee Report – Justin

Justin provided an overview on the many discussions the Operations Subcommittee has been holding in regards to CSN 3.0’s functionality and design. One of the larger items that Operations has accomplished is to expand the number of voting members to the same number of regions, this has been passed by the ICTS Board at the December 14, 2016 meeting. Also, during the Polk County Health Services Board January 2017 meeting Polk County has been approved to join CSN.

QSDA Report – Jeanine

An additional position for the QSDA (Quality Service Delivery and Assessment) initiative was proposed for the FY18 budget. This staff person would work with statistical information as well as complete regular audits on the information providers enter to ensure it is accurate and meets the intent of the outcome being measured.

In response to committee questions, Jeanine gave some background on how Polk County completes their quality assurance process on Provider Outcomes data. Polk County contracts with the University of Iowa to review the data, then Polk County staff meets annually with their Providers to discuss the results of the audit.

In the end, the decision on which direction the QSDA project is heading is subject to the CEOs and other committees. So when the position will be filled will be based on the determination of the CEOs and committees.

3.0 Update – Laz

Laz gave an update on the CSN 3.0 project.

A demo of CSN 3.0 was shown to the committee members – the main aspects shown were the instant messaging, CSN Release process and functionality, exclusions, and level 2 data.

Financials Update – Brad

Brad explained the different sections of the budget he organized. Some of the main areas covered were the increase in data center charges which is due to upgrading the firewall and increasing bandwidth. A Service Organization Control (SOC) audit was budgeted for but not utilized this fiscal year. Staff salaries are over budget for the current fiscal year due to a senior developer being contracted for the CSN 3.0 project. This was planned for and covered by the 2015 special assessment paid by the regions. The work for others amount is projected to increase because the main portion of CSN 3.0 is scheduled to be completed July 1, 2017 so staff may allocate time to other non CSN related work.

The budget proposed all regions and counties receive a 3% increase in dues with Polk County Health Services (PCHS) paying the same per capita as other regions. PCHS asked to delay this change until they fully begin using CSN. Polk County IT has offered development resources to migrate PCHS data into CSN and help with development. The group discussed the proposed budget and request from Polk County Health Services and agreed on the following solution:

1:21pm Suzanne moved and Melvyn seconded that Polk County will be expected to pay a 3% increase in their current dues (which is the same increase for all the other regions) and their current dues structure will continue until the first of the fiscal year they begin using CSN as their primary system. At which time the PCHS per capita rate will be raised. Any work that Polk County's IT staff completes towards the system, which must be approved by the Operations Subcommittee and the CEOs, will be credited as part of PCHS's dues the first year they are paying the full capita amount. Motion passed.

1:27pm Suzanne moved to remove the QSDA position from the proposed budget, Jill seconded. Motion passed.

1:28pm Melvyn moved to approve the budget as the Advisory Committee has amended it, Suzanne seconded. Motion passed.

1:30pm Jeanine brought up a point that the members' terms are on the Advisory Committee agenda for today's meeting and members should review and come to the next meeting with recommendations for FY18 membership. The terms are three years with no limits on the number of terms a member can serve.

Next steps: Provide the approved budget to the ICTS Board for approval. Review committee members' terms and prepare recommendations for the next Advisory Committee meeting.

Wrap up and Action Steps (Jeanine)

- Advisory Committee Terms: Review the members that have terms ending in FY18 and come with recommendations for the ISAC Board at the next meeting.
- Standard Transaction: Review the draft documents Beth created for the CEOs and Providers and come to a decision of what the letter should withhold at the next meeting.

1:33pm Carl adjourned the meeting.

**Sample letter*

Sample – Standard Transaction Letter for Iowa County and Region Providers

Insert name of county/region provider,

You are receiving this notice because you are provider of services for an Iowa county and/or region.

As you may know, the Health Insurance Portability and Accountability Act (HIPAA) requires covered entities to use a standard transaction when sending a transaction using electronic media to another covered entity if there is an adopted standard. 45 C.F.R. § 162.923. Iowa counties and regions do not currently comply with this standard when paying claims for services provided to clients. Iowa counties and regions use e-claims to submit electronic transactions for various mental health and disability, substance abuse, and other types of services provided to clients. The e-claim is then uploaded into the Community Services Network (CSN). An e-claim is not an adopted standard transaction.

We will soon switch to using standard transactions and you will be required to submit claims using an 837 form. An 837 form is an approved standard transaction. You may already be familiar with this form as many other payers are required to use it. Payers such as Medicaid and private insurers are also required to comply with the standard transaction rule. There are various ways to submit an 837 form. A clearinghouse may be used to convert health care claims into the correct form if you are unable to directly submit a claim in an 837 form.

We have not yet switched to requiring you to submit claims on an 837 form. This is just to make you aware of a future change. In the mean time we will continue to use the current e-claims. You will receive another notice when we have switched to using the 837 form.

Thank you for understanding. Please contact (insert county/region contact information) if you have any questions.