Integrated Billing Release Notes



IB*2.0*476

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Version 1.3

Department of Veterans Affairs

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Product Development

Revision History

Date	Version	Description	Author
July 2012	1.0	Initial document creation	S. Randolph
November 2012	1.1&1.2	Updated overview	M. Rayford
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1. Introduction

The Chief Business Office (CBO) is requesting an enhancement to the Veterans Health Information Systems and Technology Architecture (VistA) Fee Basis software application that will meet the Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) 5010 mandate.

On January 16, 2009, the Department of Health and Human Services (HHS) published the final rule that will facilitate the United States' ongoing transition to an electronic health care environment through the adoption of updated standards for electronic health care and pharmacy transactions. This portion of the transition involves converting all EDI transactions from HIPAA Accredited Standards Committee (ASC) X12 Version 4010 and 4010A1 to ASC X12 Version 5010. Effective January 1, 2012, VHA must reach Level II compliance, which means "that a covered entity has completed end-to-end testing with each of its trading partners, and is able to operate in production mode with the new versions of the standards." All covered entities must be fully compliant on January 1, 2012. On this date, VHA will cease accepting 4010 and 4010A1 transactions.

2. Overview

This patch begins the process of automating Fee Basis (FB) claims to Integrating Billing (IB) bills (For Future Use). It includes a new API that is called by Fee Basis code to update the IB NON/OTHER VA BILLING PROVIDER (#355.93) file with provider information from Fee Basis files. It also includes modifications to two IB screens where Non-VA Provider information is entered to allow a user to allow/disallow record updates by the Fee Basis Payment to IB [FB PAID TO IB] nightly job which is introduced in FB*3.5*135.

This patch requires IB*2.0*400 and IB*2.0*432.

*** IMPORTANT NOTE***

Associated patch FB*3.5*135 requires IB*2.0*476 to be installed first. Once installed, FB*3.5*135 must be installed immediately after.

FB*3.5*135 and this patch (IB*2.0*476) have enhancements to FB and IB that represent partial automation of Fee vendors and 5010 providers (For Future Use). These enhancements were tested at the test sites and will be rolled out nationally, but not "turned on" (no post install). Future patches will build upon the baseline functionality established in these patches.

3. New Service Request

20090705 VistA Fee HIPAA 5010 Implementation, Discovery and Requirements To meet the expanding needs of Electronic Data Interchange (EDI) processes and address the system and data changes required with the 5010 version, the Fee Basis package will need to collect, store and report additional elements from the claim data. National Provider Identifiers (NPI) and physical service locations are needed to better inform downstream or dependent processes. Much of the additional data collection is needed to support (1) revenue functions, where a third party insurance has a financial obligation surrounding payments made for non-service connected episodes of care and (2) pricing , where the service location impacts the allowed amount for a healthcare service.

4. Modifications for Patch IB*2.0*476

*** All of the below are for future use.***

4.1. Modified input transform routines.

The input transforms on two fields in the IB NON/OTHER VA BILLING PROVIDER FILE (#355.93) file were modified to allow the Fee Basis Payment to IB [FB PAID TO IB] background job make updates to the fields:

PRVFMT^IBCEP8 was modified for the NAME (#.01) field NPIUSED^IBCEP81 was modified for the NPI (#41.01) field

4.2. A new API was created to be used by Fee Basis for automating IB provider edits.

A new routine IBCEP8C contains the API EPFBAPI that is called by the Fee Basis Payment to IB [FB PAID TO IB] background job to add/edit IB providers. Supporting functions include a lookup of existing records in the IB NON/OTHER VA BILLING PROVIDER FILE (#355.93) file using the NPI provided by Fee Basis records. Other functions include the ability to compare and update a matched record when required, and functions to create a new entry. The new field (#50) DATE/TIME LAST FB UPDATE is edited during the automated process to allow tracking and reporting of IB providers edited by Fee Basis.

4.3. Allow IB users to turn off automated edits to specific IB Non-VA Providers.

Routines IBCEP8 and IBCEP8B have been modified to display and update a new multiple valued field, DATE/TIME ALLOW FB UPDATE (#51) in the IB NON/OTHER VA BILLING PROVIDER FILE (#355.93) file. A new routine, IBCEP8C1 provides supporting code for this functionality. The new field allows an IB user to 'allow' or 'disallow' automated updates from Fee Basis. The modified routines are accessed by the IB Non-VA Provider ID Maintenance screens in IB.

4.4. Provide tracking and audit reports for the Fee Basis to IB Provider automation.

A new menu option, IB Provider From FB Reports Menu [IB PROVIDER FROM FB RPTS MENU] has been created that contain two new reporting options that provide tools to locate and display information about records modified or created by the FB PAID TO IB interface for a date range. This menu is not available on any existing IB menus, but could be added to a menu or secondary menu for an IB user or supervisor. The report options available on this menu are:

Non-VA Provider From FB Summary Report [IB PROVIDER FROM FB SUMMARY] Non-VA Provider From FB Detail Report [IB PROVIDER FROM FB DETAIL]