



Texas Health Care Information Council

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January 12, 2001

Hospital Numbered Letter Volume 4 Number 1

Basic Training on Data Submission, Corrections and Certification

Operational

On February 2, 2001, THCIC will host a basic data submission, correction and certification training session in Austin at 333 Guadalupe (Hobby Building), Room 100. The training session will begin at 9 a.m. and is anticipated to finish around 4 p.m.

The session is designed for hospital staff new to THCIC's hospital discharge data collection project and will cover the following topics: data submission requirements specific to THCIC, data acceptance or rejection responses by THCIC contractors (THIN and CCS), the certification of data process, and use of THCIC's data correction software. Register with Sandra Martin at 512-482-3312.

Conversion to the UB-92 Version 6.0 and Continued Use of Version 5.0

Operational

HCFA released a transmittal memo (A-00-100) on December 22, 2000 that allows providers to continue to use HCFA UB92 Electronic Format Version 5.0 until March 31, 2001. The Council will permit hospitals to submit data in Version 5.0 to the Council for discharges that occur on or before March 31, 2001. The HCFA transmittal memo can be obtained from the HCFA website: http://www.hcfa.gov/pubforms/transmit/memos/comm_date_dsc.htm

Physician audits

Operational

Beginning with 1st quarter 2000 data, the THCIC system began validating the physician license numbers and names. The certification files for this quarter, to be distributed the first of February, will include a new report that documents the physician identifiers that are not found on the CCS reference files.

A fax regarding these audits, the error report and suggestions for addressing the report will be distributed mid January.

Payor source audit (927 warning code)

Operational/Policy

Beginning with processing of 3rd quarter 2000 data, an audit (927) was implemented to assist hospitals by checking for possible duplication of payor source data. The audit was implemented as a result of reviewing errors encountered in the first two quarters of data. The audit, while working as developed, was producing more warning messages than desired. Staff felt that the audit was counterproductive and that it should be restructured to better uncover possible duplicates.

Thus THCIC suspended the 927 audit. The effective date of the suspension was 12/11/2000.

THCIC intends to change the logic of the audit to better sift through the possible duplicates. Hospitals will be notified at least

90 days prior to implementation of the revised logic.

County and Public Health Region Codes To Be Released

Communication

Starting with release of the third quarter 1999 hospital discharge data, both county code and Texas public health region will be included in the public use data file (PUDF). The county code will be assigned to each discharge record based on valid 5-digit patient ZIP code. If a ZIP code covers multiple counties, the ZIP code will be assigned to the county with the larger share of the population. The council staff will also provide a crosswalk table for county name on THCIC web site. The eleven public health regions are determined by the Texas Department of Health.

State Code Audit

Operational

The audit to validate the two digit state code was implemented effective with 3rd quarter 1999 data. During certification of the 3rd quarter data, a hospital found that the state code table being used for validation did not contain all codes recognized by the US Postal Service, in particular, the American territories.

Effective December 20, 2000, the table was expanded to include all codes recognized by the USPS, including the codes for the Canadian provinces. For Canadian provinces, the ZIP code should be set to "00000" or "XXXXX". Any other value will result in an error.

For all other countries, including Mexico, use either "FC" or "XX" in the state code.

PUDF Software License

Communication

This is a reminder to hospitals that they must purchase the PUDF license in order to contract with a vendor for processing the data if they receive a copy of the data in original or processed form from the vendor. Vendors that purchase the PUDF are permitted to create reports for hospitals, however, a hospital cannot legally obtain any part of the PUDF data file through the vendor without purchasing the PUDF license through THCIC and signing a data use agreement.

Correction to Vol3Num17 Newsletter

Operational/Communication

Hospital Timelines

We erroneously reported that comments on the quarterly data could be emailed to Commonwealth. This is incorrect.

Send certification comments to Commonwealth via the mailbox or mail comments on a diskette in ACSII text format to:

Commonwealth Clinical Systems
1650 State Farm Blvd
Charlottesville, VA 22911

1Q00 PUDF Comments

Operational

THCIC would like to remind hospitals that comments for the Public Use Data File should not contain confidential information that could lead to the identity of physicians or patients. In previous quarters several hospitals submitted comments that contained patient specific age and admit and discharge date. Beginning with 1Q00 comments, THCIC will not be responsible for identifying confidential information that has been inadvertently included in the hospital's

comments. Please review your comments before submitting them to Commonwealth.

**Technical Advisory Committee (TAC)
Vacancies**

Communication

THCIC is currently accepting applications for TAC membership. The Health Information Systems TAC (HIS) and Consumer Education (CE) TAC have one vacancy each and the Health Maintenance Organization TAC (HMO) and the Quality Methods (QM) TAC have two vacancies each. Of the two vacancies on the Quality Methods TAC, one must be filled by a practicing physician. THCIC is also accepting applications for the Provider Quality (PQ) TAC.

TAC applications may be found on the THCIC web site www.thcic.state.tx.us at <http://www.thcic.state.tx.us/application.htm> along with instructions on how to submit the application.

TAC Descriptions:

HIS TAC (8 members)

Individuals who have expertise in hospital information systems, health information management, quality management, and security of confidential data for the development of methods for data collection and warehousing, and the development of methods for linking existing and future databases.

HMO TAC (9 members)

Individuals representing consumers and each type of health plan to assist in the development of data collection requirements for health benefit plans and the development of methods, standards, and formats for the public reporting of data pertaining to health maintenance organizations.

QM TAC (9 members)

Individuals that must include at least 5 practicing physicians to assist and advise the Council concerning: (1) the research design and the development of objective scientific data analyses, and (2) the production of meaningful statistical reports that address the public's need for information on health care quality.

CE TAC (7 members)

Individuals that will act as a public relations/marketing/advertising advisor to the Council and its Technical Advisory Committees.

PQ TAC (9 members)

Individuals that must include at least 5 practicing physicians to develop and interpret data elements necessary to determine the quality of inpatient care and develop and format reports and information relating to provider quality.

Questions?

Phone: (888) 308-4953 Fax (804) 979-1047

Email: THCIChelp@comclin.net

HIPAA Update *Communication*

Final rule on Standards for Privacy published

The final rule for Standards on Privacy of Individually Identifiable Health Information was released on December 28, 2000. This is the second of the “package” of interlocking regulations to improve the efficiency and effectiveness of the health care system. The final rule (all 1500+ pages) can be found at <http://aspe.hhs.gov/admsimp/>.

Three more rules are expected in the early part of 2001. These rules will address

1. a unique employer identifier,
2. a unique provider identifier, and
3. security of electronic information systems.

In the wings and yet unpublished, are rules establishing

1. a unique identifier for health plans,
2. transfer of standard data elements between health plans,
3. claims attachments, and
4. enforcement.

These four rules are targeted for the second half of 2001.

Privacy rule synopsis

The privacy standards affect all providers and their business associates. The focus of the standards are

- **protection of patient data by restricting data exchange,**
- **de-identification of data, and**
- **requiring patient consent and authorization prior to sharing of data.**

The requirements have the potential for a greater effect on hospital’s information systems, hospital operations (administrative and service delivery) as well as staff education.

Key provisions of the Privacy final rule include:

- All paper records and oral communications as well as electronic records are covered.
- Patients must receive a clear written notice of their rights, explaining how their medical information will be stored, used and disclosed.
- Patients have the right to obtain, within 60 days of their request, a disclosure history listing entities that obtained information unrelated to treatment, payment or healthcare operations.
- Providers must appoint a “privacy officer” to develop, implement and monitor privacy policies within the organization and to help patients with privacy questions and concerns.
- Employees must receive training on the organization’s privacy policies.

- Written consent must be obtained in advance from the patient for routine transfer of information. A single signature would cover the disclosure of information for treatment and billing, but additional signatures would be needed for other uses, such as disclosure of medical information to an employer. [Permission to release medical information cannot be required as a condition of treatment].
- Patients will have the right to inspect, copy and amend information in their record. If such requests are denied, the rule permits patients to file a complaint with the health care provider or the federal government.
- For most disclosures of information, such as billing, providers may send only the minimum information necessary.
- For purposes of treatment, providers have full discretion in determining what information to send to other providers.
- Providers must ensure compliance with these standards by their business associates. Providers can be held responsible if they know of a violation by a business associate and take no steps to correct that situation.
- Providers are expected to write business associate agreements that ensure each party complies with the law.
- The regulation establishes different levels of penalty for non-compliance, ranging from a \$100 per person fine per incident of unintentional disclosure up to a \$250,000 fine and 10 years in jail for selling medical information.

THCIC will be assessing the impact of both the Rule on Standards for Electronic Transactions and Privacy of Individually Identifiable Health Information on its Hospital Discharge Data Collection effort and notify hospitals as timely as possible of any changes required due to the new regulations.

HIPAA implementation planning

An industry consensus organization, SNIP (Strategic National Implementation Process) is leading the effort toward a industry wide implementation plan. SNIP is working under the charter of the Workgroup for Electronic Data Interchange (WEDI).

SNIPs purpose is to develop an industry voluntary solution to practical issues of interpretation and workflow inconsistencies surrounding implementation of HIPAA. SNIP has the support of not only the provider and payor communities but also HCFA.

This organization has progress fast and far in the nine months that it has been in existence. SNIP convenes quarterly progress meetings as a means of sharing information and obtaining feedback. The next conference is scheduled for January 15 – 16 in Chicago.

Information on SNIP and the conference can be found at <http://www.wedi.org/SNIP/>.

Review Prior Quarter Certification Files

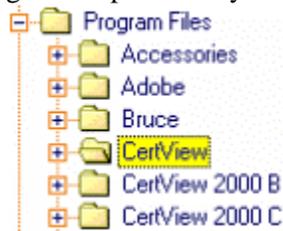
Operational

Question: I want to review data from all of the quarters submitted to THCIC? How do I do that?

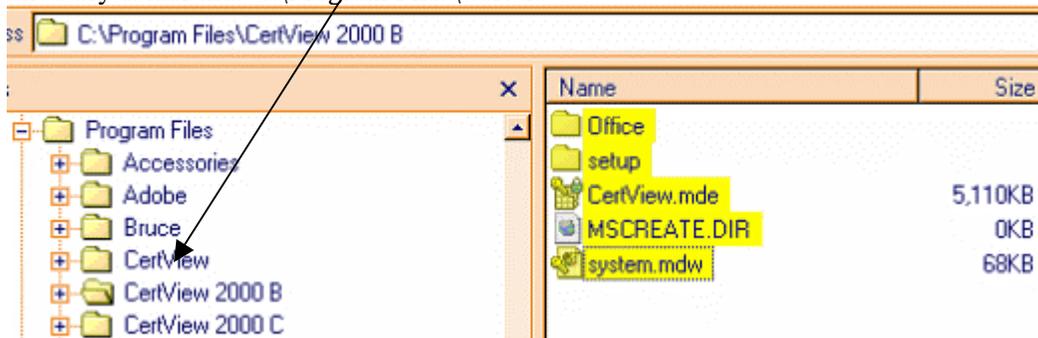
If you desire to look at data 1Q99 or 2Q99 and you have already loaded the new certification software to review and certify 3Q99, you will find that you cannot import the old data files into the new software. The certification software database was updated between 2Q99 data certification release and the release of 3Q99 data for certification. Both software programs are run from the directory C:\Program Files\CertView and you cannot have both ACCESS “.mde” database program files located in the same directory/folder. So in order to view any of the quarters of data you will need to follow the steps below.

The suggested method of creating the option to look at the prior certification files is to locate copies of CertView 2000B, (the old certification program) and CertView 2000C, (the newer certification program). If you do not have sufficient hard drive space you will only be able to install the appropriate software each time you want to change to different quarters of data 1Q99/2Q99 or 3Q99/4Q99. Below are steps to install both versions of Certview

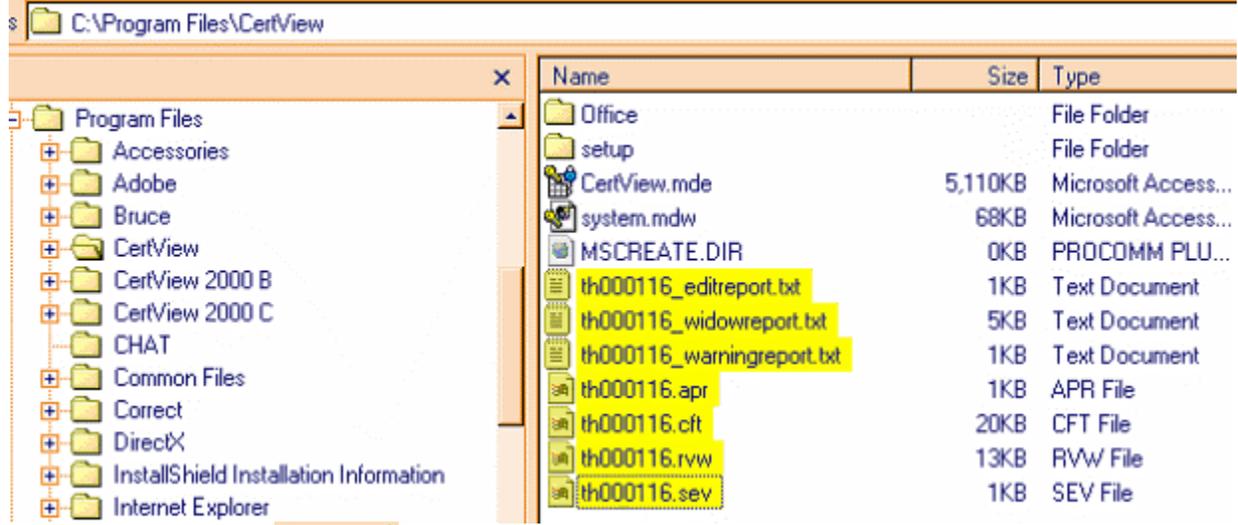
1. If you currently have the CertView 2000C version installed, open Windows Explorer/File Manager and rename the CertView directory/folder to CertView 2000C. If you only have CertView 2000B installed, rename the CertView directory/folder to CertView 2000B.
2. After renaming C:\Program Files\CertView to either CertView 2000B or CertView 2000C. Begin the install process of CertView 2000B or CertView 2000C, whichever you did not have on your computer.
3. After installing rename this newly installed C:\Program Files\CertView directory/folder with the appropriate name, probably CertView 2000B. (Because you want to go back and look at the older data.)
4. Now install CertView 2000C once again.
5. You should now have three copies of the CertView Software on your computer. If you do not have enough disk space then you need to reinstall the appropriate software each time.



6. Identify which data (1Q99 or 2Q99/ 2000B or 3Q99 or newer/2000C) you would like to view and **Copy** the corresponding contents of the appropriate software version directory/folder into C:\Program Files\Certview.



- Once the appropriate software files are located in C:\Program Files\CertView. Retrieve the data files from your data storage location, and copy the data files into the same directory/folder.



- You can press your  Start button in the lower left corner of the computer screen and select “Programs” then select “CertView”. This will bring up your CertView software; look at the top of Certification Data Viewer window for the version of the database.
- After you have both software versions loaded on your computer you can repeat steps 6 through 8. Make sure the data software corresponds with the data otherwise the data will not be imported. **Do not change the filenames of the data files. If you modify the data file names you will import the data into the wrong positions.**
- Look at the file extension or the file types to determine which data goes with which software. 1Q99 and 2Q99 data has the filenames that looks like THnnnnnn.cft (nnnnnn represents your THCIC ID#) or THnnnnnn (this does not show the file extensions), THnnnnnn.rvw, THnnnnnn.apr or THnnnnnn.sev can only be imported into the 2000B version of the CertView software. The filenames for 3Q99 through current day look similar, but are not, THnnnnnn_cft.txt or THnnnnnn_cft, THnnnnnn_rvw.txt or THnnnnnn_rvw, THnnnnnn_apr.txt or THnnnnnn_apr and THnnnnnn_sev.txt or THnnnnnn_sev will only be imported into the 2000C version of the CertView software. If you need to look at the other data, close the Certview program and copy the contents of the other database directory/folder into C:\Program Files\CertView as directed in steps 6 through 8 above.

Advanced Users Option:

If you are more advanced you can create shortcuts to the 2000B.mde and 2000C.mde files and put those shortcuts into “Start Menu”, “CertView” pop-up window. You will only need to copy the data into C:\Program Files\CertView.

Please only put the one quarter of data into the C:\Program Files\CertView directory/folder at a time, otherwise you may confuse the software.

It is best to open the CertView program through the “Start Menu”. You will probably create a program error if you attempt to open the database file from your Microsoft ACCESS program.

Upcoming Meetings or Training

Communication

- **Data Submission, Correction, and Certification training:** February 2, 2001
- **HIS TAC meeting:** February 13, 2001
- **THCIC Board meeting:** February 23, 2001

Agendas for all Technical Advisory Committee, Committee, and Council meetings are posted on the THCIC web site and the Texas Register seven days prior to the meeting date.

Upcoming Deadlines

- 4th quarter 1999 certification letters due – February 1, 2001
- Hospitals receive (retrieve) 1st quarter 2000 certification – February 1, 2001
- Cutoff for submission of 2nd quarter 2000 claims corrections – February 28, 2001
- Submission of 4th quarter 2000 due – March 1, 2001
- Last day to submit changes during certification of 1st quarter 2000 data – March 9, 2001

Questions?

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