



Texas Health Care Information Council

206 East 9th Street • Suite 19.140 • Austin Texas 78701 • Phone 512-482-3312 • Fax 512-453-2757 • www.thcic.state.tx.us

February 9, 2001

Hospital Numbered Letter Volume 4 Number 3

REMINDER ON ERROR CODE 827

Operations

The use of the 30 / 22 record combination to report payor information has been something of a stumbling block for hospitals. The 22 record is a state specific record used to report, among other things, “non-standard” payment sources (if they exist).

Error code 827 identifies the claims where the number of 22 records and the number of 30 records are not the same. There must be the same number of 22 records as 30 records. At a minimum, one 22 record and one 30 record are required.

There has been confusion in situations where there is no non-standard source of payment. Hospitals have assumed that since there is no value, a 22 record is not being created, and the result is the 827 error code. As hospital systems are being changed to accommodate version 6.0 of the UB92, we are seeing an increase in the number of 827 errors caused by the missing 22 record.

A quick refresher --- The 30 record contains the code that identifies what is known as the common or “standard” sources of payment. The 22 record contains the code for what is called the “non-standard” sources of payment. Even if there is not a “non-standard” source of payment, the 22 record must be submitted and the code will have a value of blank. For instance, if two payors are billed for services for a claim, then there should be two sets of records (30 & 22). Each 30 record will contain different codes to identify the “standard” payor source field (field 04). Each 22 record will contain the same data in fields 1 – 8. Field 9 of the 22 records will be different for each 22 record. In some situations, the appropriate code for the field may be a blank.

Questions?

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

Email: THCIChelp@comclin.net

CCS OFFERING A NEW “REMINDER” SERVICE

Policy
Operations

Commonwealth is offering hospitals the opportunity to subscribe to a notification “listserv” to enable quick distribution of key information from Commonwealth. This is in addition to the newsletter, email and fax notifications you receive from THCIC. The only requirement for signing up is that you have an email address.

To subscribe simply send an email to Diana@comclin.net and indicate that you would like to be added to the email notification list.

LEGISLATION

Policy

Hospital liaisons should bring the following Texas legislative bills dealing with privacy to the attention of their director of information services and administrator: SB 11 and HB 1221. Copies can be downloaded from the Texas Legislature's Web site at www.capitol.state.tx.us.

These bills overlap in some respect, and are intended to extend privacy protections beyond those offered by HIPAA. They also carry resource implications for your information systems and legal departments, as well as others.

CORRECTION TO NEWSLETTER VOL 4 NUM 2

A cost item in the table in the last newsletter incorrectly stated that there would not be a charge for submitting corrected claims on physician ID problems.

Research Finding	Action	Cost
<p>Either the license number and / or the physician name are not accurate in the hospital's files (relative to the websites).</p> <p>If the hospital would like assistance with correcting their claims.</p>	<p>Correct claim(s) and return corrected claims to Commonwealth.</p> <p>Email THCIHELP for a work estimate to correct all physician problems and re-generate THCIC Certification Data**</p>	<p>No <u>Yes</u></p> <p>Yes</p>
<p>The license number and the physician last name match those on the websites.</p>	<p>Consider adding a comment at certification similar to: <i>All physician license numbers and names have been validated with the physician and the website(s) as accurate but some remain unidentified in the THCIC Practitioner Reference Files.</i></p>	<p>No</p>

CERTIFICATION PROCESS

Policy
Operations

A paraphrase of Council rules states the following regarding certification in §1301.17(c):

The certification shall represent that a review of hospital records was accomplished, errors and omissions known to the hospital have been corrected, and the data submitted is accurate and complete to the best of their knowledge and belief. The State expects hospitals to review their data for accuracy and completeness prior to returning their certification form.

In addition, the certification shall also represent that the hospital has provided physicians and other health professionals on its medical staff a reasonable opportunity to review the discharge files for which they were the admitting or treating physician or other health professional for the patient prior to certification. This opportunity for review is required by law. The Council expects that this has been completed when the certification form is signed and returned to the Council's office. Electing to not certify the data does not release the hospital from the above requirements.

The Council realizes that the certification process is laborious and requires much time and resources from the hospital to complete. This requirement stems from the 76th Session, Texas Legislature, which added new definitions to the statutes. The Council modified its rules to assure that the data has been reviewed and that the data is as accurate and complete as it can reasonably be.

The statute also states "A person who fails to supply available data under Sections 108.009 and 108.010 is liable for a civil penalty of not less than \$1,000 or more than \$10,000 for each act of violation."

We highly recommend the hospital staff in charge of the data certification process review the statutes and rules affecting your hospital. If you or your hospital disagree with a statute or rule, become involved in the decision making process. Changes to statutes must be made at the legislative level, so you would need to contact your legislative Senator or Representative (<http://www.capitol.state.tx.us/fyi/fyi.htm>). Changes to rules are made at the Council level and much of the discussion of issues occurs at the Technical Advisory Committee (TAC) level (http://www.thcic.state.tx.us/Technical_Advisory_Committees.htm). The schedule for Council and TAC meetings is posted at <http://www.thcic.state.tx.us/Calendar.htm>.

UPCOMING MEETINGS

- **HIS TAC meeting:** February 13, 2001 (**Cancelled**)
- **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

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