**MCCF EDI TAS US976**

System Design Document

IB\*2.0\*577



Department of Veterans Affairs

**March 2017**

Version 1.0

**User Story Number:** TSEB-02

**User Story Name:** Payer ID Report- (TSEB-2)

**Product Backlog ID:**

**Rally ID:** US976

# Design/Resolution:

# The system processes a 277STAT message from Health Care Clearing House (HCCH) and evaluates the Payer ID to determine if it is an updated or attempted update for the Payer ID. This data is captured in fields and a cross reference for reporting purposes. The Payer ID report to be created needs to go against the cross reference file and have the data extracted from there and the insurance file. To produce this report the following needs to be accomplished:

* Create a new report using the cross reference file named “AEDIX” located in the Insurance file.
* Ask the user for date range in which to run the report.
* Ask the user for a device to print report.
* Gather the data elements needed for the report: Insurance company name, address, EDI type, date, and old vs. new EDI number.
* Print the report as indicated in the sample report format.
* Put the report on the Billing Supervisor menu options as indicated in the sample menu.

| **FILE** | **Activities** | | | | |
| --- | --- | --- | --- | --- | --- |
| **File Name** | Insurance file ^DIC(36 | | | | |
| **Enhancement Category** | New | Modify | Delete | | No Change |
| **RTM** |  | | | | |
| **Related Options** |  | | | | |
| **Related Routines** | **Routines “Called By”** | | | **Routines “Called”** | |
|  |  | | |  | |
| **Data Dictionary (DD) References** | **Use the following highlighted data elements for the report:**  STORED IN: ^DIC(36,  --------------------------------------------------------------------------------  FILE SECURITY  DD SECURITY : # DELETE SECURITY: d  READ SECURITY : LAYGO SECURITY : d  WRITE SECURITY : D  CROSS REFERENCED BY:  ALTERNATE INST PAYER ID TYPE(AB) PAYER(AC) ALTERNATE PROF PAYER ID TYPE(  AD) SCHEDULED FOR DELETION(ADEL) EDI ID NUMBER - INST(AEI)  EDI ID NUMBER - PROF(AEP) HPID/OEID(AHOD) NIF ID(ANIF)  INS COMPANY LINK PARENT(APC) NAME(B) SYNONYM(C)  FILE STRUCTURE  FIELD FIELD  NUMBER NAME  .01 NAME (RFXa), [0;1]  .05 INACTIVE (SXa), [0;5]  .06 ALLOW MULTIPLE BEDSECTIONS (S), [0;6]  .07 DIFFERENT REVENUE CODES TO USE (FX), [0;7]  .08 ONE OPT. VISIT ON BILL ONLY (S), [0;8]  .09 AMBULATORY SURG. REV. CODE (\*P399.2'), [0;9]  .1 ATTENDING PHYSICIAN ID. (F), [0;10]  .11 \*HOSPITAL PROVIDER NUMBER (F), [0;11]  .111 STREET ADDRESS [LINE 1] (RFXa), [.11;1]  .112 STREET ADDRESS [LINE 2] (FXa), [.11;2]  .113 STREET ADDRESS [LINE 3] (FX), [.11;3]  .114 CITY (FX), [.11;4]  .115 STATE (P5'X), [.11;5]  **Cross reference file:**  Select OPTION: 8 DATA DICTIONARY UTILITIES  Select DATA DICTIONARY UTILITY OPTION: 1 LIST FILE ATTRIBUTES  START WITH What File: INSURANCE COMPANY// (1558 entries)  GO TO What File: INSURANCE COMPANY// (1558 entries)  Select SUB-FILE:  Select LISTING FORMAT: STANDARD// INDEXES ONLY  What type of cross-reference (Traditional or New)? Both// NEW  Which field: ALL//  DEVICE: ;;99999 HOME (CRT) Right Margin: 80//  NEW-STYLE INDEX LIST -- FILE #36INDEX AND CROSS-REFERENCE LIST  Subfile #36.017  New-Style Indexes:  AEDIX (#1454) RECORD MUMPS IR SORTING ONLY WHOLE FILE (#36)  Short Descr: 277STAT TRANSACTION PAYER STORAGE US129  Description:  This cross reference allows for reporting of 277STAT  Set Logic: S ^DIC(36,"AEDIX",X(1),DA(1),X(2),X(3))=X(4)  Set Cond: S X=(X(1)]""&(X(2)]"")&(X(3)]""))  Kill Logic: Q  X(1): 277DATE EDI ID NUMBER (36.017,.02) (Len 10) (forwards)  X(2): 277EDI ID NUMBER (36.017,.01) (Len 30) (forwards)  X(3): 277EDI TYPE (36.017,.03) (Len 1) (forwards)  X(4): 277EDI ID NUMBER ON FILE (36.017,.04) (Len 30)  (forwards)  **Structure:**  ^DIC(36,”  AEDIX”,DATE,INSURANCE IEN,EDI ID NUMBER,TYPE “P” OR “I”)=EDI ID NUMBER ON FILE (If null considered updated, not attempted)  **Sample data:**  Global ^DIC(36,"AEDIX"  ^DIC(36,"AEDIX",3030617,3,"EDI12345","I")="4EDIONFILE"  "P")="" *Note: For more information on how the data is captured reference US129, ^IBCEST.* | | | | |
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| **FILE** | **Activities** | | | | |
| --- | --- | --- | --- | --- | --- |
| **File Name** | New Entry in Option (#19) file | | | | |
| **Enhancement Category** | New | Modify  \*adding new report option to menu | Delete | | No Change |
| **RTM** |  | | | | |
| **Related Options** |  | | | | |
| **Related Routines** | **Routines “Called By”** | | | **Routines “Called”** | |
|  |  | | |  | |
| **Data Dictionary (DD) References** | **Add new report option:**  Put the new report option under the following menu options:  Select OPTION NAME: BILLING SUPERVISOR MENU IB BILLING SUPERVISOR MENU  AAM Reimbursable Insurance Claims Report  BI Claims Tracking Menu for Billing ...  BILL Enter/Edit Billing Information  CATC Automated Means Test Billing Menu ...  EDI EDI Menu For Electronic Bills ...  LTC LTC Billing Menu ...  OUTP Patient Billing Reports Menu ...  REPT Management Reports (Billing) Menu ...  RXEX Medication Copay Income Exemption Menu ...  SYST MCCR System Definition Menu ...  TPB Third Party Billing Menu ...  TPJI Third Party Joint Inquiry  NON-VA Facility Data  Select Billing Supervisor Menu <TEST ACCOUNT> Option: SYST MCCR System Definiti  on Menu  AUTO Enter/Edit Automated Billing Parameters  CHGM Charge Master Menu ...  EM EDIT E&M CODE QUANTITY FLAG  ENTR Enter/Edit Billing Rates  EPR Insurance Company EDI Parameter Report  FLAG Flag Stop Codes/Dispositions/Clinics  FLTP Flag Stop Codes/Clinics for Third Party  HID    HCCH Payer ID Report-----New option  INSU Insurance Company Entry/Edit  LISF List Flagged Stop Codes/Dispositions/Clinics  LISP List Flagged Stop Codes/Clinics for Third Party  LIST Billing Rates List  NVA NON-VA Facility Data  PBUF Purge Insurance Buffer  PROV Provider ID Maintenance  SITE MCCR Site Parameter Display/Edit  USI Update Subscriber Info   1. Add the option to the options #19 file to add the report option, as TYPE: Run Routine 2. Add the option as an ITEM to the Menu (include display order) 3. Add the option to the Build as SEND TO SITE 4. Add the menu to the build as USE AS LINK FOR MENU/ITEM/SUBSCRIBERS | | | | |
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**Routine NEW**

| * **Routines** | **Activities** | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Routine Name** | IBCERP7 | | | | | | | | |
| **Enhancement Category** | New | | Modify | Delete | | | No Change | | |
| **RTM** |  | | | | | | | | |
| **Related Options** | None | | | | | | | | |
| **Related Routines** | **Routines “Called By”** | | | | | **Routines “Called”** | | | |
|  |  | | | | |  | | | |
| **Data Dictionary (DD) References** | ^DIC(19, ^DIC(36 | | | | | | | | |
| **Related Protocols** | None | | | | | | | | |
| **Related Integration Control Registrations (ICRs)** | None | | | | | | | | |
| **Data Passing** | Input | Output Reference | | | Both | | | Global Reference | Local |
| **Routine Name** | IBCERP7 | | | | | | | | |
| Set up a new routine: IBCERP7  Ask the user for a date range- Earliest Date : (set default T-30)  Latest Date: (set default T)  Use the DIR API.  Make sure the earliest and latest dates are not in the future.  Make sure the latest date is greater than the earliest date.  For Example:  ; this uses a begin date no earlier than 01/01/2000  START W ! S DIR(0)="DA^3000101:NOW:EX",DIR("A")="Enter Earliest Date: "   D ^DIR K DIR S IBABEG=+Y Q:'Y  ; END W ! S DIR(0)="DA^"\_+Y\_":NOW:EX",DIR("A")="Enter Latest Date: ",DIR("B")=$$DAT2^IBOUTL(DT)   D ^DIR K DIR S IBAEND=+Y Q:'Y   W !,"DONE"\_" BEGIN="\_IBABEG\_" END="\_IBAEND  Ask the user for a device:  Let the user know that this Report requires 132 columns.  Allow for queuing of the report  For example:  W !,"You will need a 132 column printer for this report",!  S %ZIS="QM" D ^%ZIS I POP S IBQUIT=1 Q  I $D(IO("Q")) D  S IBQUIT=1 Q  . S ZTRTN="IBCERP7"    . S ZTDESC="HCCH Payer ID Report"  . D ^%ZTLOAD  . W !!,$S($D(ZTSK):"Your task number "\_ZTSK\_" has been queued.",1:"Unable to queue this job.")  . K ZTSK,IO("Q") D HOME^%ZIS  Set up Tag called Gather to do the following:  $Order through cross reference file:  ^DIC(36,”AEDIX”,DATE,INSURANCE IEN,) to get data within date range.  If data is within date range  $ Order through rest of cross reference subscripts to set up ^TMP($J file with all data needed for the report.  ^DIC(36,”  AEDIX”,DATE, INSURANCE IEN ,EDI ID NUMBER,TYPE “P” OR “I”)=EDI ID NUMBER ON FILE  (If EDI NUMBER ON FILE is null- it is considered updated, not attempted)  Use the insurance ien from Cross ref to extract the name, address, city, and state from the ^DIC(36,IEN  Use GETS^DIQ to retrieve data IE: D GETS^DIQ(FILE,IENS,FIELD,FLAG,"TARGET")    Use the Type from cross ref as the EDI PayerID for the report. For printing the I=”Inst”;P=”Prof”  Use the EDI ID NUMBER from Cross ref to be the NewValue on report.  Use the EDI ID NUMBER ON FILE from cross ref to be the OldValue on report  If the EDI ID NUMBER ON FILE from cross ref is null- set the “updated” value for report to be “Yes”, otherwise “No”  Set up a tag called Header – to be called when printing the report with the heading information as follows:  Line1: “Clearing House Payer ID Report “ Todays date and time of running  Line2: “Page:” # of #  Line3: “Timeframe:” Earliest Date user entered “thru” Latest Date user entered  Line4: Blank  Line5: “Insurance Co” “Address’ “Date” “EDI-PayerID” “OldValue” “NewValue” “Updated”  Line6: Print Line underscoring line 5  Set up a tag called Print- to be called after gather tag is finished created the ^TMP file. Data needs to be sorted by insurance name and date.  Loop the ^TMP file to print the following information:    Insurance Name, Address, city, State, Date of change/attempted change, payer type, old and new EDI values,    Convert the internal date to external date print format.  Match up data printing with the header printing.  This information is to be printed on the device specified from the user, in the format listed in the  sample provided.    If there is no data to print- call the header tag- print the header information and print  “\*\*\*\*\* NO DATA TO PRINT \*\*\*\*\*”  Use the pausing- when device selected is the screen- hit return to continue prompt- when data returned is more than one page. | | | | | | | | | |
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**Sample report:**

Earliest Date: T-30

Latest Date: T

Clearinghouse Payer ID Report Jan 11, 2017@09:53:18 Page: 1 of 1

Timeframe: 12/17/16 thru 01/11/17

Insurance Co Address Date EDI-PayerID OldValue NewValue Updated

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AETNA PO BOX 2295 FT. WAYNE INDIANA 12/28/16 Prof 60054 Yes

AETNA HEALTH PLANS PO BOX 12340 FRESNO CALIFORNIA 01/02/16 Prof 60054 Yes

BANKERS FIDELITY PO BOX 105652 ATLANTA GEORGIA 12/19/16 Prof XYZ123 123456 No

MEDICARE (WNR) PO BOX 660159 DALLAS TX 01/01/17 Inst XXXXX1 XXXXX2 No