



## Operational Status Report *Kentucky MMIS Project*

*Cabinet for Health and Family Services  
Department for Medicaid Services*

Status Week Ending February 22, 2013

### Cabinet for Health and Family Services Department for Medicaid Services

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## 1 Executive Summary

Claims Processed	178,588
Total Dollars Paid	\$31,529,508.55
Paper Claims Paid	3,329
Paper Claims Denied	4,037
Electronic Claims Paid	115,012
Electronic Claims Denied	56,210
Paper Claims % of Total Adjudicated Claims	4.12%
Electronic Claims % of Total Adjudicated Claims	95.87%
% Denied Paper Claims	54.80%
Denied Electronic Claims	32.83%
Claims Held in Cash Management	144,690
Dollars Held in Cash Management	\$24,822,874.77
Capitation Financial Transactions	1,678,156
Capitation Financial Payments	\$284,481,037.75
Suspended Claims	9,978
Total Suspended Claims > 90 Days	445
Encounter Load	
Dental	December 2012
Institutional	December 2012
Professional	December 2012
Pharmacy	December 2012
Pharmacy Claim Load	February 2013
Transportation Claim Load	April 2012
Provider Services Calls Received	2,257
Provider Services Current Service Level %	99%

### NOTE:

- Decrease in inventories during week ending January 25, 2013 due to holiday on January 21<sup>st</sup>.

**Executive Summary – Continued**

Description	Change Order	Defect	Total
Total Open Change Orders / Defects as of 02/22/2013:	277	67	344
Total Emergency Change Orders/ Defects:	12	2	14
Total Priority Change Orders/ Defects:	102	36	138
Total Non – Priority Change Orders / Defects:	163	29	192
<b>Change Orders / Defects:</b>			
Completed During Week Ending 02/22/2013	5	0	5
Scheduled For February Release	16	3	19
Release projects marked as emergency by DMS	0	0	0
<b>Emergency Change Orders:</b>			
Completed	0	0	0
In Work	3	1	4
To Be Worked	9	1	10
Total	12	2	14
<b>Priority Change Orders:</b>			
Completed	0	0	0
In Work	61	4	65
To Be Worked	41	32	73
Total	102	36	138
<b>Completed Non-Priority List:</b>			
(Config., Suspense Reduction, Prod issues, etc.)	5	2	7
Completed Fast Track items	0	0	0

- 1 of the 344 open CO/Defects are related to the HIPAA II/5010-Extra project.
- 108 of the 344 open CO/Defects are child CO/Defects.

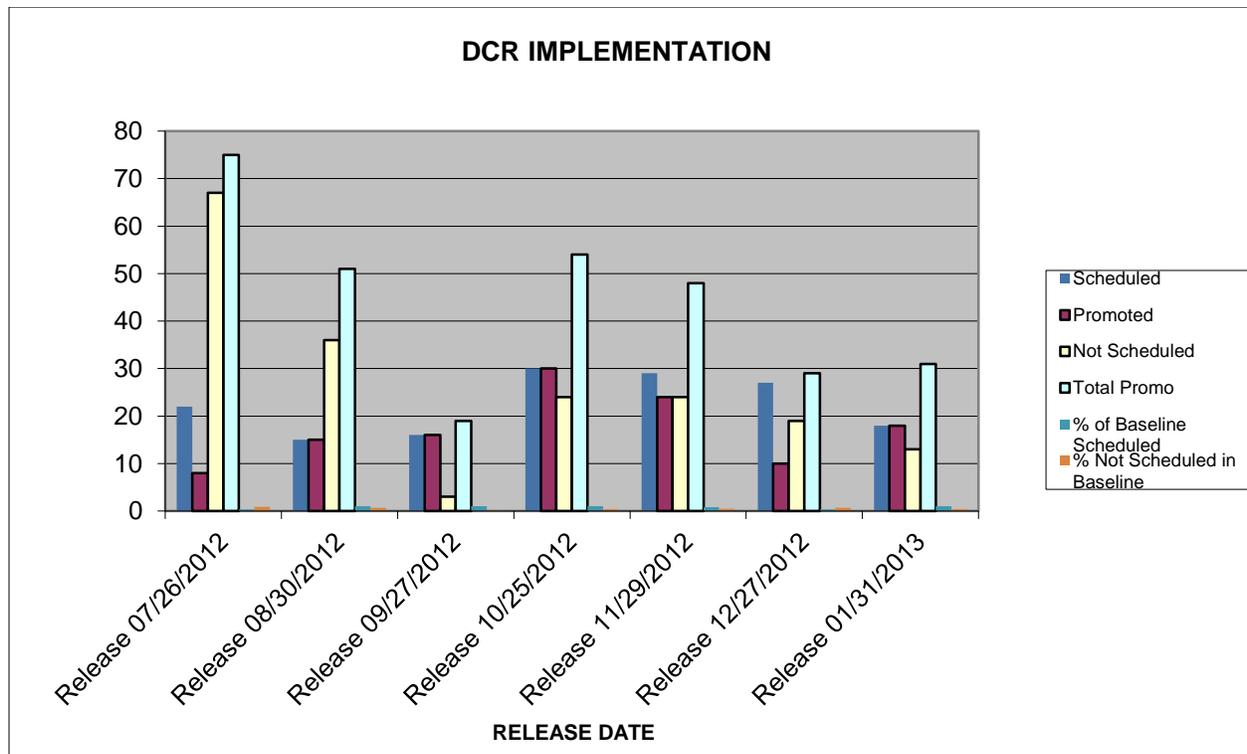
## 2 Kentucky MSIS Data Status

	<b>ELIGIBLE</b>	<b>CLAIMIP</b>	<b>CLAIMLT</b>	<b>CLAIMOT</b>	<b>CLAIMRX</b>
<b>Q1 2012</b> <b>Oct - Dec</b>	Approved by CMS/MPR 10/31/12	Approved by CMS/MPR 7/10/12	Approved by CMS/MPR 7/10/12	Approved by CMS/MPR 7/10/12	Approved by CMS/MPR 7/10/12
<b>Q2 2012</b> <b>Jan - Mar</b>	Approved by CMS/MPR 10/31/12	Approved by CMS/MPR 10/10/12	Approved by CMS/MPR 10/10/12	Approved by CMS/MPR 10/10/12	Approved by CMS/MPR 10/10/12
<b>Q3 2012</b> <b>Apr - Jun</b>	Approved by CMS/MPR 10/31/12	Approved by CMS/MPR 10/10/12	Approved by CMS/MPR 10/10/12	Approved by CMS/MPR 10/10/12	Approved by CMS/MPR 10/10/12
<b>Q4 2012</b> <b>Jul - Sep</b>	Approved by CMS/MPR 1/24/13	Approved by CMS/MPR 12/13/12	Approved by CMS/MPR 12/13/12	Approved by CMS/MPR 12/13/12	Approved by CMS/MPR 12/13/12

### 3 New KY MMIS Status

#### 3.1 DCR Release Implementation Dashboard

Release	Scheduled	Promoted	Not Scheduled	Total Promo	% of Scheduled	% Not Scheduled
Release 07/26/2012	22	8	67	75	36.36%	89.33%
Release 08/30/2012	15	15	36	51	100.00%	70.59%
Release 09/27/2012	16	16	3	19	100.00%	15.79%
Release 10/25/2012	30	30	24	54	100.00%	44.44%
Release 11/29/2012	29	24	24	48	82.76%	50.00%
Release 12/27/2012	27	10	19	29	37.04%	65.52%
Release 01/31/2013	18	18	13	31	100%	41.94%



**3.2 Analysis of DCR's Pulled from Release (As of 01-31-2013)**

CO#	Business Area	Description	Current Status	Comments
17568	Managed Care	New Panel for 834 Transactions	Requirements Approved	Removed 1/31/13 commit date since all of the children are on hold. HP will provide commit date once children are ready to be worked.
18450	Data Warehouse	UNV - Add MCO tables to DSS	Define/Analyze In Progress	Updated to Feb release per email from Marilynn
18451	Managed Care	Not splitting PMP assign segs for county code NEMT	Testing Sent - DMS	Della granted extension. Commit date was chg'd to Feb release.

### 4 Paper Claim Statistics

A total of 178,588 claims were adjudicated this week for a total claim payment amount of \$31,529,508.55 and a total payment amount of \$319,512,965.39

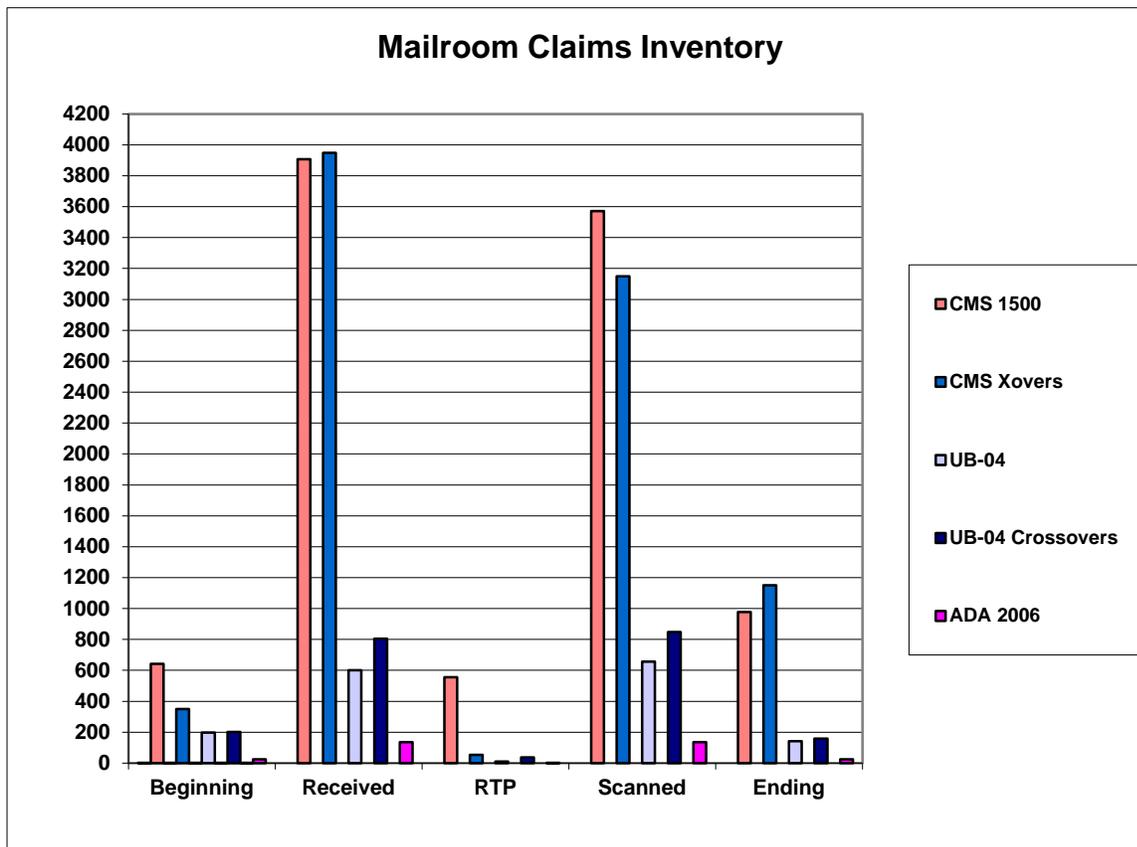
Mailroom	Beginning Inventory	Received	RTP	Scanned	Ending Inventory	Oldest Claim
CMS 1500	643	3,906	555	3,572	977	0 days
CMS Crossovers	350	3,949	54	3,149	1,150	0 days
UB-04	198	600	10	656	142	0 days
UB-04 Crossovers	202	805	37	849	158	0 days
Dental ADA 2006	24	136	2	136	24	0 days
<b>Total</b>	<b>1,417</b>	<b>9,396</b>	<b>658</b>	<b>8,362</b>	<b>2,451</b>	

**Note: CMS crossover receipts and ending inventory totals are estimates. Claim Forms:**

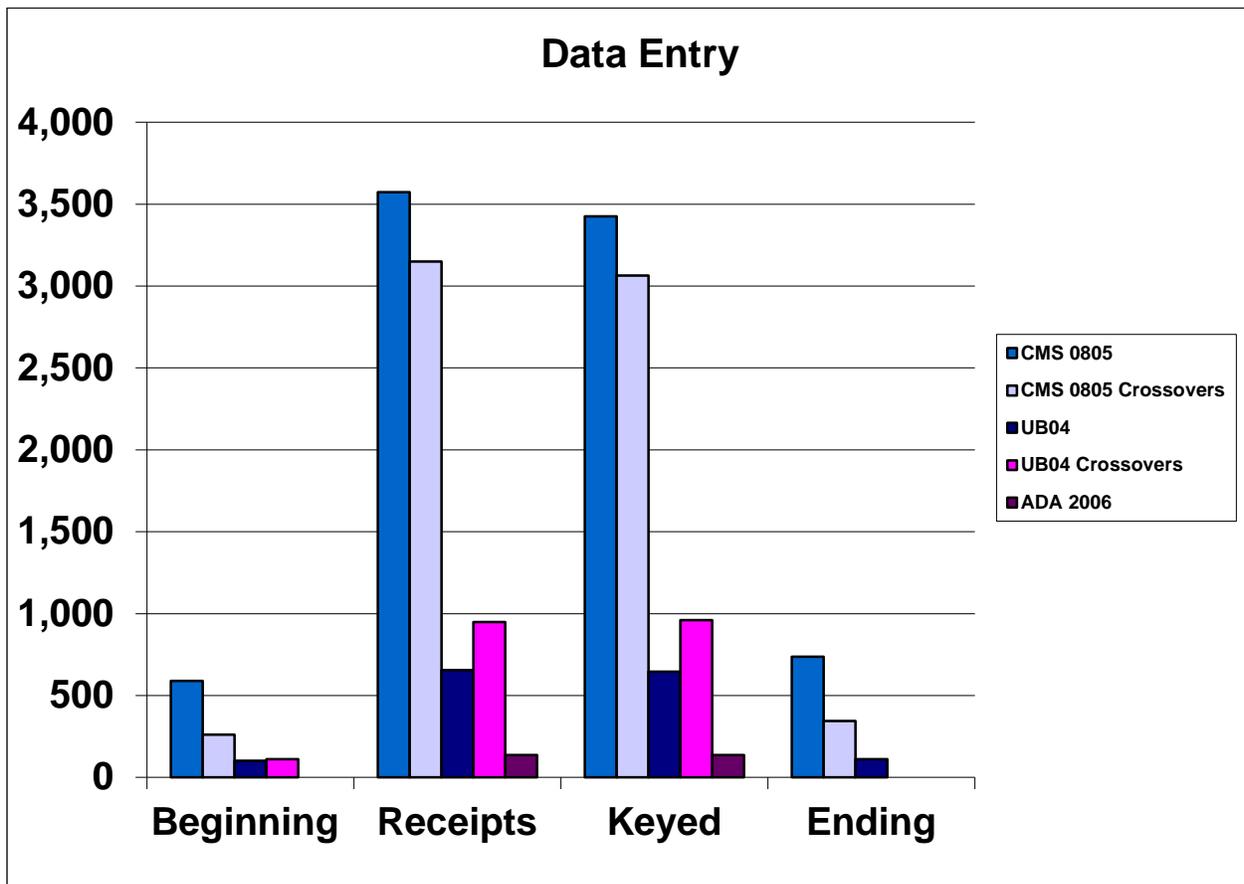
**CMS 08/05** - mandatory 8/20/2007.

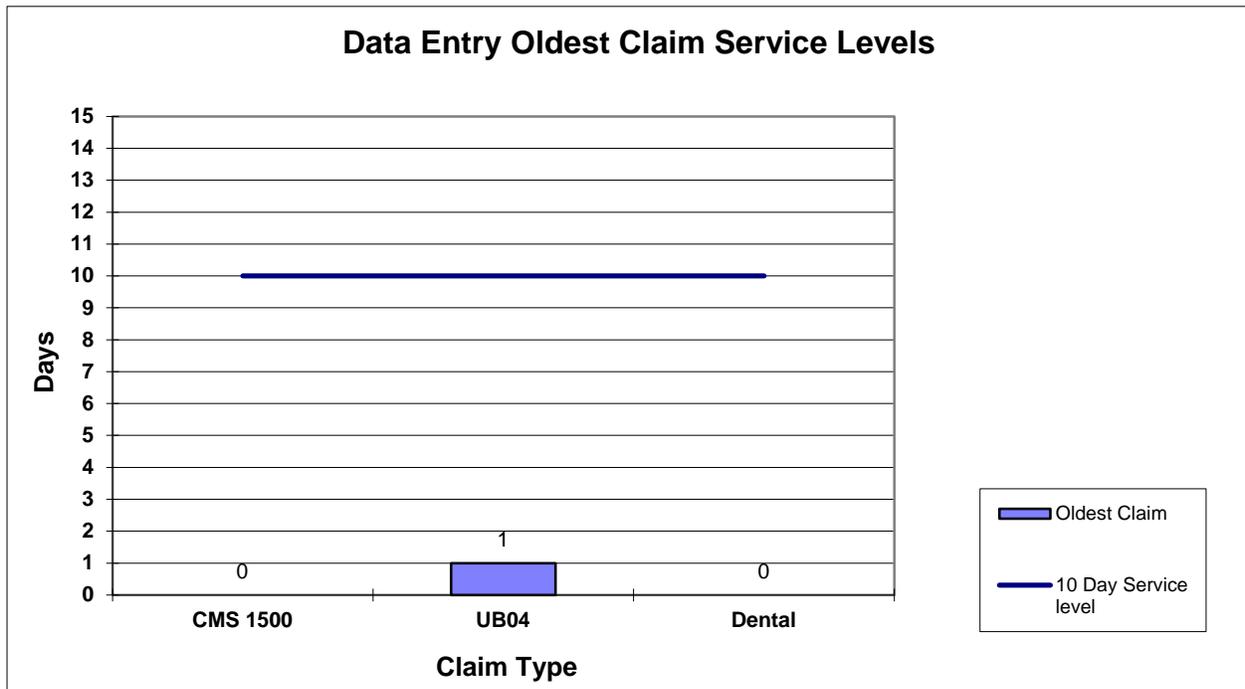
**UB04** – mandatory 5/23/2007.

**Dental ADA 2006** - mandatory 6/4/2007.



Data Entry	Beginning Inventory	Receipts	Keyed	Ending Inventory	Oldest Julian	Date	Oldest Claim
CMS 1500 08/05	589	3,572	3,425	736	053	02/22/13	0
CMS 1500 Crossovers	260	3,149	3,064	345	053	02/22/13	0
UB04	101	656	645	112	052	02/21/13	1
UB04 Crossovers	112	849	961	0	053	02/22/13	0
Dental ADA 2006	0	136	136	0	053	02/22/13	0
<b>Total</b>	<b>1,062</b>	<b>8,362</b>	<b>8,231</b>	<b>1,193</b>			





**Note: CMS Crossover and UB04 Crossover excluded from 10 day standard**

## 5 System Changes and Corrections

### 5.1 HP Enterprise Services Initiated DCRs for Week Ending 2/22/2013

ID	Defect Description	CSR Type	Subsystem	Grouping	Sub Grouping	Add Date
18620	Modify Portal for ACA Connectivity - Phase I	Change Order	Internet	UI	EVS	2/20/2013
18624	Changes to Portal for data content ACA - Phase II	Change Order	Internet	UI	EVS	2/20/2013
18729	Standard Classification -Drugs- Update with FDB	Change Order	Benefit Administration	ALL		2/21/2013
19177	TPL Questionnaire Not On OnBase	Defect	Third Party Liability	ALL	Letters	2/21/2013
19193	Create 3 New tables/modify1 existing Reference tbl	Change Order	Reference Data Maintenance	Data Model	Data Model Changes	2/19/2013
19467	Member Letter History Panel	Defect	Third Party Liability	UI		2/21/2013

### 5.2 Promoted to Production / Cancelled for Week Ending 02/22/2013

ID	Subsystem	CSR Type	Description	Resolution Date	Release Type	Release
18903	Claims	Defect	Split elig no fund code set/0 fund code	2/18/2013	Non-Priority	13.02.12
19409	Provider Data Maintenance	Change Order	Update cc list on reinstatement welcome letter	2/18/2013	Non-Priority	13.02.12
19325	EDI and Claim Capture	Change Order	EVSElig Change to Add MCO Added Date to KYHnet	2/20/2013	Non-Priority	13.02.13
19437	Managed Care	Change Order	New MCO Risk Adjusted Rates Effective 01-Jan-2013	2/20/2013	Non-Priority	13.02.13
19241	System Wide	Change Order	Add MCO Added Date	2/21/2013	Non-Priority	13.02.14

ID	Subsystem	CSR Type	Description	Resolution Date	Release Type	Release
19321	Internet	Change Order	Add the MCO Added Date to KYHealthNet	2/21/2013	Non-Priority	13.02.14
19443	Internet	Defect	Fix the non leap year code to allow 19	2/21/2013	Non-Priority	13.02.14

### 5.3 Data Fixes Completed for Week Ending 02/22/2013

Data fixes are now done under Defects and Change Orders; they are reported in that section upon completion.

### 5.4 Proposed for HP Release– February 2013 Baseline

CO#	CO/ Defect	Business Area	Description	Current Status	Requested As Emergency	HPES Proposed Baseline
18450	Change Order	Data Warehouse	UNV - Add MCO tables to DSS	Define/Analyze In Progress	N	2/28/2013
18451	Defect	Managed Care	Not splitting PMP assign segs for county code NEMT	PROD Override	N	2/28/2013
18602	Change Order	Reference Data Maintenance	PIDL update	Prod Implemented		2/11/2013
18916	Defect	Managed Care	MGD-0555-D needs to include preproc errors	Testing Approved - DMS		2/28/2013
18993	Defect	Managed Care	Z Members Not Closed in PMP Assign	UAT Implemented		2/28/2013
19084	Change Order	Managed Care	Modify MCAPS_ELIG_INFO_SP Input Parameters	Testing Approved - DMS		2/28/2013
19111	Change Order	Third Party Liability	TPL Carrier Info Panel - Carrier File Data	Testing Approved - DMS		2/28/2013
19118	Change Order	Member Data Maintenance	Add Message to Member Add Panel for County Code	Testing Approved - DMS		2/28/2013
19138	Change Order	Member Data Maintenance	MCO LOC error records for invalid PT	Testing Approved - DMS		2/28/2013

CO#	CO/ Defect	Business Area	Description	Current Status	Requested As Emergency	HPES Proposed Baseline
19139	Change Order	Financial	Exclude CMHC and AAA CDO claims from prudent pay	Prod Implemented		2/8/2013
19218	Change Order	Financial	Batch - Modify Prudent Pay prgm for PRV contract	Prod Implemented		2/8/2013
19219	Change Order	Financial	New sub panel for PROVIDER CONTRACT on Pay Hold	Prod Implemented		2/8/2013
19268	Change Order	Provider Data Maintenance	MCO Provider file changes for PCP enhanced rate	Testing Sent - DMS		2/28/2013
19272	Change Order	Provider Data Maintenance	PCP enhanced rate create MMIS panel for 19263	Testing Sent - DMS		2/28/2013
19273	Change Order	EPSDT	Revise CMS 416 5500A and KCHIP 5550A	Testing Sent - DMS		2/28/2013
19280	Change Order	Internet	KYHealth - New Attestation Form	Testing Sent - DMS		2/28/2013
19281	Change Order	Internet	KYH - New attestation Form DataBase	Testing Sent - DMS		2/28/2013
19314	Change Order	Claims	2013 CPT codes effec. 1/1/13	Prod Implemented		2/28/2013
19348	Change Order	Reference Data Maintenance	2013 fee schedule add codes	Prod Implemented		2/28/2013

**5.5 Maintenance and Modification Hours – Per DMS Request HP is revising this chart to reflect a more accurate track Modification hours.**

2009/2010	Hours Available	Hours Used	Rate	Cost	Approved Hours	Cost of Approved Hours	Remaining Hours	Remaining Dollar Pool
Tier I - Maintenance	NA	Under Review	NA	NA	NA	NA	NA	NA
Tier II – Modification	12,000	Under Review		Under Review	0.00	\$0.00	Under Review	Under Review
Tier III – Modification	10,000	0		\$0.00	0.00	\$0.00	10,000.00	\$674,000.00
Tier IV – Modification	Above 22,000		TBD		0			

Tier I – Maintenance may result from a determination that a deficiency exists within the operational KY MMIS, including deficiencies found after takeover of modifications incorporated into the operational KY MMIS, or that continued efficiency can be maintained or achieved through the proposed activity. Included in the base rate.

Tier II – Modification hours may result from a determination that an additional requirement needs to be met or that a modification to existing file structures or current processing is needed. Initial 12,000 hours/operational year included in the base rate.

Tier III - Modification hours may result from a determination that an additional requirement needs to be met or that a modification to existing file structures or current processing is needed. Additional 10,000 hours/operational year at a defined rate.

Tier IV - Modification hours may result from a determination that an additional requirement needs to be met or that a modification to existing file structures or current processing is needed. Additional hours at a negotiated rate.

## 6 Ad hoc Reports

	Beginning	Received	Closed	On Hold	Ending Inventory	Oldest Request Overdue
Type A	0	1	1	0	0	0
Type B	1	2	2	0	1	0
Type C	6	2	4	1	4	0
Type D	2	0	0	0	2	0
Type E	0	0	0	0	0	0
HP Enterprise Services	0	3	3	0	0	0
<b>Total</b>	9	8	10	1	7	0

\*On Hold may be cumulative across multiple weeks

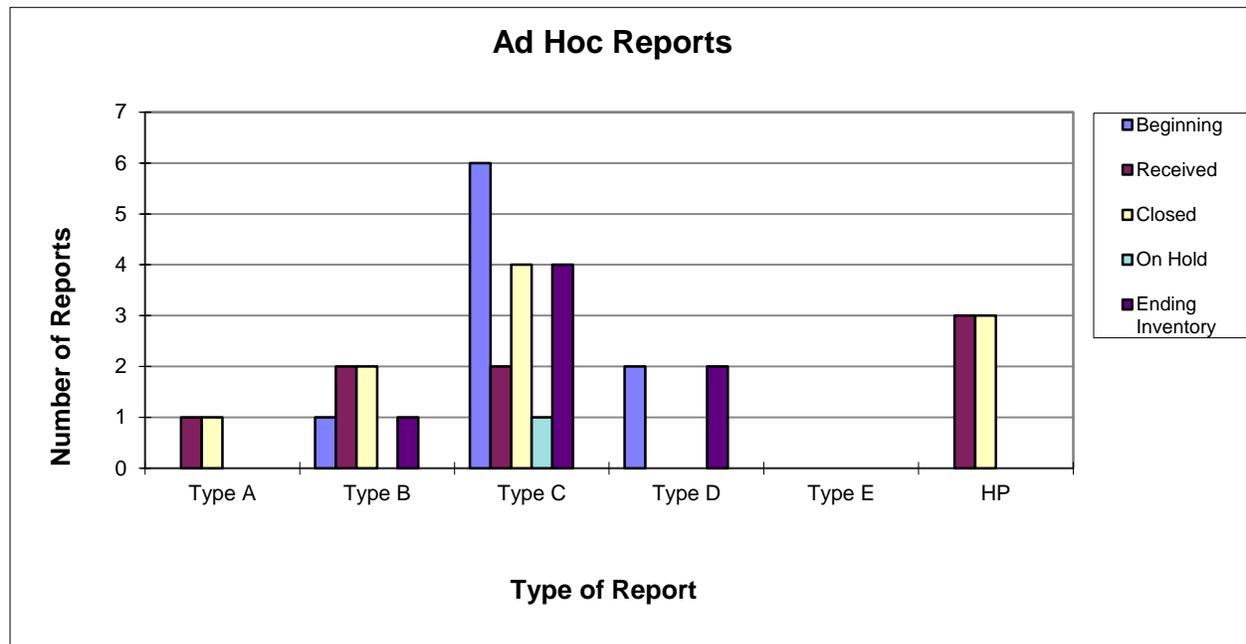
Type A – completed correctly within twenty-four (24) hours of receipt

Type B – completed correctly and delivered within forty-eight (48) hours of request

Type C – completed correctly and delivered within seven (7) business days of request

Type D – completed correctly and delivered within time frame established by DMS (greater than seven (7) business days)

Type E – Emergency reports completed correctly within two (2) hours of submitted request.



## 7 Weekly Claims Operations

### 7.1 Final Payment Summary

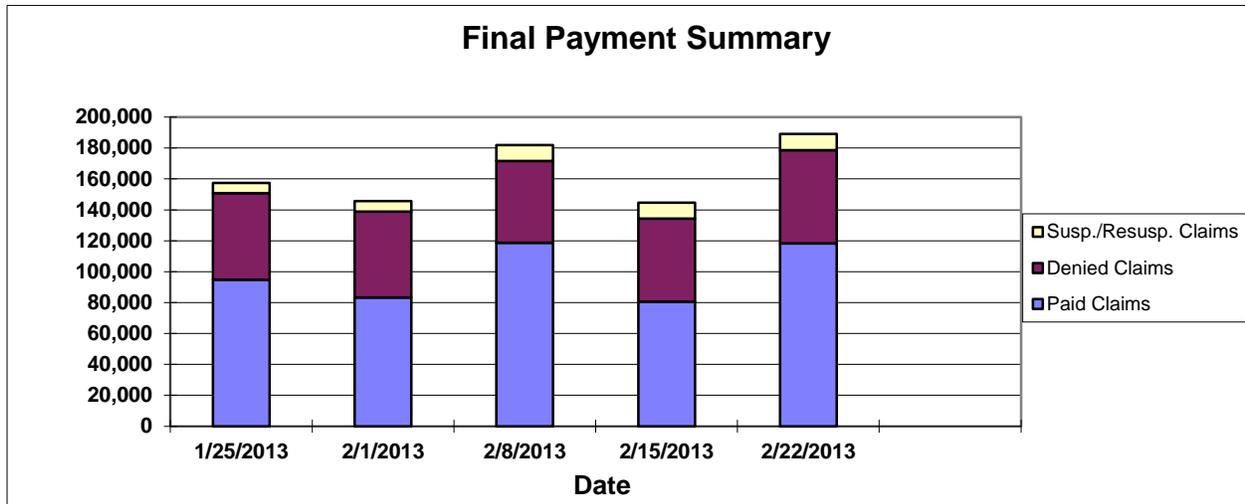
Category	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13
Paid Claims	94,737	83,384	118,705	80,622	118,341
Denied Claims	56,139	55,486	52,853	53,624	60,247
<b>Total Adjudicated Claims</b>	<b>150,876</b>	<b>138,870</b>	<b>171,558</b>	<b>134,246</b>	<b>178,588</b>
Adjustments	4,714	3,267	3,525	2,952	3,789
<b>Total Claims</b>	<b>155,590</b>	<b>142,137</b>	<b>175,083</b>	<b>137,198</b>	<b>182,377</b>
Suspended/Resuspended Claims	6,591	6,716	10,392	10,490	9,978
Claim Payment Amount	\$24,597,544.06	\$49,261,346.80	\$56,697,725.06	\$29,408,045.62	\$31,529,508.55
(+) Payouts	\$14,611.72	\$60,671.38	\$43,565.77	\$42,530.32	\$4,324,141.01
(-) Recoupments	-\$867,213.67	-\$1,034,021.58	-\$1,116,491.64	-\$795,068.41	-\$821,721.92
<b>Check Issue</b>	<b>\$23,744,942.11</b>	<b>\$48,287,996.60</b>	<b>\$55,624,799.19</b>	<b>\$28,655,507.53</b>	<b>\$35,031,927.64</b>
Capitation Payment	\$271,407,135.79	\$5,260,472.41	\$0.00	\$0.00	\$284,481,037.75
<b>Total Paid</b>	<b>\$295,152,077.90</b>	<b>\$53,548,469.01</b>	<b>\$55,624,799.19</b>	<b>\$28,655,507.53</b>	<b>\$319,512,965.39</b>

Five week average payment equals \$150,649,271.42

Recoupments - The amount withheld from provider payments because of outstanding accounts receivable (money owed to the Medicaid program by providers)

Category	01/27/12	02/03/12	02/10/12	02/17/12	02/24/12
Paid Claims	111,267	142,217	116,486	89,631	144,857
Denied Claims	67,708	72,630	58,577	35,668	98,575
<b>Total Adjudicated Claims</b>	<b>178,975</b>	<b>214,847</b>	<b>175,063</b>	<b>125,299</b>	<b>243,432</b>
Adjustments/Claim Credits	8,175	2,486	3,238	4,299	3,263
<b>Total Claims</b>	<b>187,150</b>	<b>217,333</b>	<b>178,301</b>	<b>129,598</b>	<b>246,695</b>
Suspended/Resuspended Claims	5,017	5,534	6,242	5,714	6,123
Claim Payment Amount	\$32,445,752.53	\$82,154,968.30	\$52,451,725.36	\$38,484,727.69	\$29,200,044.21
(+) Payouts	\$379.01	\$10,924.23	\$2,304,858.78	\$10,187,499.66	\$15,036.02
(-) Recoupments	-\$1,188,354.90	-\$1,293,640.11	-\$1,752,400.58	-\$1,458,563.56	-\$2,444,135.31
<b>Check Issue</b>	<b>\$31,257,776.64</b>	<b>\$80,872,252.42</b>	<b>\$53,004,183.56</b>	<b>\$47,213,663.79</b>	<b>\$26,770,944.92</b>
Capitation Payment	\$251,579,230.89	\$80.00	\$0.00	\$0.00	\$252,720,019.90
<b>Total Paid</b>	<b>\$282,837,007.53</b>	<b>\$80,872,332.42</b>	<b>\$53,004,183.56</b>	<b>\$47,213,663.79</b>	<b>\$279,490,964.82</b>

Five week average payment equals \$148,683,630.42



## 7.2 Adjudicated Original Claims (By Claim)

Paper Claims	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13	Average
Paid	2,473	2,782	1,793	2,542	3,329	2,584
Denied	2,522	3,425	4,766	4,452	4,037	3,840
Total	4,995	6,207	6,559	6,994	7,366	6,424
% of Total Adjudicated Claims	3.31%	4.47%	3.82%	5.21%	4.12%	4.17%
% of Paper Denied Claims	50.49%	55.18%	72.66%	63.65%	54.80%	59.78%

Electronic Claims	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13	Average
Paid	92,264	80,602	116,912	78,080	115,012	96,574
Denied	53,617	52,061	48,087	49,172	56,210	51,029
Total	145,881	132,663	164,999	127,252	171,222	147,603
% of Total Adjudicated Claims	96.69%	95.53%	96.18%	94.79%	95.87%	95.83%
% of Electronic Denied Claims	36.75%	39.24%	29.14%	38.64%	32.83%	34.57%

**Total % Denied Claims – 33.7%**

### 7.3 Flush Report Claim Statistics

	UB04	CMS	Dental	Pharm	Total
Paid Claims in Error	57	306	3	0	<b>366</b>
Denied Claims in Error	34	146	2	0	<b>182</b>
Suspended Claims in Error	0	0	0	0	<b>0</b>
<b>Total Claims in Error</b>	<b>91</b>	<b>452</b>	<b>5</b>	<b>0</b>	<b>548</b>

### 7.4 Flush Report Error Occurrences Statistics

Error Number	Total Failures
1010 – Provider Name Not Found	7
2010 – Pay to Provider needs to Swap	1
3003 – No Recip Base Not Found	5
4030 – Paid Code Claim Status not P or D	7
5030 – Proc Fund Codes <> Hdr Paid Amt	43
5040 – Invalid Fund Code	1
5081 – Cash + Adj <> Orig. Claim	4
9991 – Adj Mother Info Not Found	458
9997 – Daughter Claim Prov <> Mom Claim Prov	28
<b>Total # of Occurrences</b>	<b>554</b>

### 7.5 Bad File Claim Statistics

	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13
CLAIMS	3	3	3	3	0
PHARMACY	0	0	0	0	0
<b>TOTAL</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>0</b>

Oldest Claim (Receipt Date) – N/A

### 7.6 Bad File Defects

Defect #	Description	Status	Claim Count
16785	Hospice Assignment Plan	Cancelled 07/9/12	0
18833	Memory Issue	DMS Analyst Review Complete 10/29/12	0

### 7.7 Top Denial Reasons (By Detail Line)

Error	Description	Number of Denials
2017	Services Covered Under Member's MCO Plan	22,089
1010	Rendering Provider Not A Mem Of Billing Grp	19,068
4021	No Coverage for Billed Procedure	17,154
5001	Exact Duplicate	11,998
3317	This Service Was Not Approved by Medicare	9,687
1955	Cannot Determine Medicaid NBR for Billing Prov	9,566
4407	Bnft Plan/Aid Categ Restriction for Cov Rev Code	8,255
4804	No Contract for Billed Rev Code	8,106
2003	Member Ineligible on Detail Date of Service	7,399
1032	Billing Provider not Eligible to Bill This Clm Typ	6,386

### 7.8 Mailroom

Imaging	Beginning Inventory	Receipts	Scanned	Ending Inventory	Oldest Item
Adjustment	0	316	316	0	0 days
Checks	0	403	403	0	0 days
RTP'S	0	658	658	0	0 days
Provider Enrollment	0	1,792	1,792	0	0 days

### 7.9 Top Suspense Reasons (By Detail Line)

Error	Description	Failures
2001	Member ID Number not on File Recycle	4,704
3305	Member Requires Valid PT Liability for DOS	1,683
4405	Unable to Assign Provider Contract	1,648
3001	PA Not Found on Database	1,176
2505	Member Covered by Private Insurance (w/attach)	657
1046	Facility Provider is Not Eligible	410
1047	Billing Provider is Not Eligible	357
4014	No Pricing Segment on File	328
5001	Exact Duplicate	226
3003	Procedure Code Requires PA	194

### 7.10 Suspended Original Claims by Age (By Claim)

Category	02/01/13		02/08/13		02/15/13		02/22/13	
	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.
0-30 days	6,100	90.83	9,794	94.25	9,888	94.26	9,376	93.97
31-60 days	124	1.85	93	.89	93	.89	61	.61
61-90 days	50	.74	64	.61	67	.64	96	.96
91+ days	442	6.58	441	4.25	442	4.21	445	4.46
<b>Total</b>	<b>6,716</b>		<b>10,392</b>		<b>10,490</b>		<b>9,978</b>	

### 7.11 Total Suspended Claims by Location (By Claim)

Category	02/01/13		02/08/13		02/15/13		02/22/13	
	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.
Resolutions	894	13.31	1,272	12.24	797	7.60	618	6.19
Med. Review	883	13.15	2,348	22.59	2,083	19.86	1,490	14.93
TPL	833	12.40	1,140	10.97	1,047	9.98	607	6.08
Adjustments	374	5.57	456	4.39	312	2.97	207	2.08
DMS	692	10.30	711	6.84	705	6.72	699	7.01
Recycle**	3,040	45.27	4,465	42.97	5,546	52.87	6,357	63.71
<b>Total</b>	<b>6,716</b>		<b>10,392</b>		<b>10,490</b>		<b>9,978</b>	

\*\*"Recycle" suspense consists of claims failing edits that must recycle for 8, 9, or 10 days before adjudicating.

**Note: Region 52 (Mass Adjustments) = 95.6% of suspense volume**

**Region 58 (SE Mass Adjustments) = 1.5% of suspense volume**

**Region 80 (SE Reprocessed Claims) = 0.0% of suspense volume**

**Region 90 (Special Batched Claims) = 0.0% of suspense volume**

### 7.12 Claims Suspense Over 30 Days by Responsible Unit (By Claim)

Category	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13
Resolutions	11	6	1	1	1
Med. Review	40	29	10	14	19
TPL	1	0	0	0	0
Adjustments	3	3	1	1	0
Recycle	0	0	0	0	1
DMS	568	578	586	586	581
<b>Total</b>	<b>623</b>	<b>616</b>	<b>598</b>	<b>602</b>	<b>602</b>

### 7.13 Claims Suspense Over 90 Days

Suspense Inventory	Beginning Inventory	Received	Worked	Ending Inventory
	442	9	6	445

## 8 Third-Party Liability

### 8.1 Third-Party Liability Weekly Activity

Third Party Liability	Begin Inv	Received	Worked	To DMS	Ending Inventory	# Checks Exempt from 10 Day Requirement
PA40-Kames/Eligibles with Other Ins.	0	18	18	0	0	0
CS40-Child Support	0	0	0	0	0	0
SSI-Local Offices	0	0	0	0	0	0
TPL Edits	1,047	627	1,067	0	607	0
Accident/Trauma Leads	0	1	1	0	0	0
DMS Attorney	0	0	0	0	0	0
RUSH Attorney	0	2	2	0	0	0
HP Attorney	30	53	55	0	28	0
KY Assigned	0	0	0	0	0	0
Paternity	0	0	0	0	0	0
TPL Checks	279	126	99	0	306	0
HMS Checks	0	0	0	0	0	0
L P Mail-(Carriers)	2,478	993	2,027	0	1,444	0
Purged Data Research	0	0	0	0	0	0
Sus/Indicator	0	0	0	0	0	0
KHIPPS	0	77	77	0	0	0
<b>Total</b>	<b>3,834</b>	<b>1,897</b>	<b>3,346</b>	<b>0</b>	<b>2,385</b>	<b>0</b>

#### 8.1.1.1 Comments # Checks Exempt from 10 Day Requirement:

All checks in an exempt status can be viewed in Onbase under report FIN-2752. These checks are either awaiting documentation or are too large to complete in 10 days

Application of refunds to claim history is at 05 days

Online Interchange Updates are at 30 days

## 9 Finance/Adjustments

### 9.1 Financial - Cash

Category	Beginning Inventory	Received	Keyed	Return to Provider	To DMS	On Hold	Ending Inventory
Accounts Receivable Set-up	0	13	9	0	0	0	4
Payouts	0	228	228	0	0	0	0
Accounts Receivable Updates	0	2	2	0	0	0	0
Accounts Receivable Transfers	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>243</b>	<b>239</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>

### 9.2 Financial - Checks

Category	Beginning	Received	Completed	Ending	Age Oldest Check	Julian date
Warrant	21	0	0	21	--	---
Financial	572	256	109	719	3	051
DMS	377	21	22	376	3	051
<b>Total</b>	<b>970</b>	<b>277</b>	<b>131</b>	<b>1,116</b>		

### 9.3 Financial – Adjustments

Category	Beginning Inventory	Received	Completed	Returns	Ending Inventory
Professional	0	137	69	15	53
Institutional	0	41	16	2	23
Voids	0	138	74	5	59
System Req Adj	0	0	0	0	0
Systems Req voids	0	0	0	0	0
EMC Adjustments	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>316</b>	<b>159</b>	<b>22</b>	<b>135</b>

**9.4 Financial - Age of Adjustments**

Category	Oldest Claim	Oldest Julian
Professional Straight	1 day	053
Professional Crossovers	1 day	053
Dental	1 day	053
Claim Credits	1 day	053
Institutional Straight	1 day	053
Institutional Crossovers	1 day	053

**9.5 Financial - Mass Adjustments**

Category	Beginning Inventory	Received	Entered	On Hold	Ending
Mass Adjustment (region 52)	0	5	5	0	0
Adjustments-Processed by HP SE (region 58)	0	0	0	0	0
Mass Credit	0	0	0	0	0
<b>Total</b>	0	5	5	0	0

Category	In Process	Released	Deleted
Mass Adjustment (region 52)	53	1	1
Adjustments-Processed by HP SE (region 58)	0	0	0
Mass Credit	0	0	0
<b>Total</b>	53	1	1

## **10 Provider Relations**

### **10.1 Provider Communications**

#### **10.1.1 Most Common Provider Calls**

1. Claim Status
2. Eligibility
3. 5010 Inquiries
4. Prior Authorization
5. Managed Care Inquiries
6. Member Calls/Member Services
7. Provider NPI/Taxonomy Inquiries
8. Check Amount
9. KY Health Net Inquiries
10. Service Limitations

### **10.2 Provider Visits, Mini-Workshops, Teleconferences, Special Meetings, Training**

#### **10.2.1 Provider Visits**

**February 21, 2013**

Vicky Hicks, HP Provider Representative, conducted a provider visit with Therapeutic Intervention Services in Crestwood, Kentucky. The provider was shown how to use the KY Health Net to process claims. Two claims paid. There was also discussion regarding how claims pay. There were three provider staff members in attendance.

#### **10.2.2 Teleconferences**

There are no teleconferences to report.

#### **10.2.3 Representative Training**

There is no representative training to report.

#### **10.2.4 Association Meetings**

There are no association meetings to report.

#### **10.2.5 Research**

#### **DMS**

There is no DMS research to report.

**Provider**

There is no Provider research to report.

**10.2.6 Workshops**

There are no provider workshops to report.

**10.2.7 Accomplishments**

There are no operational activities to report.

**10.3 Training****10.3.1 Current Activities****February 21, 2013**

HP offered training to the Commonwealth staff on the interChange Reference Subsystem.

**10.4 Looking Ahead**

The First Quarter 2013 training schedule has been distributed to Commonwealth users.

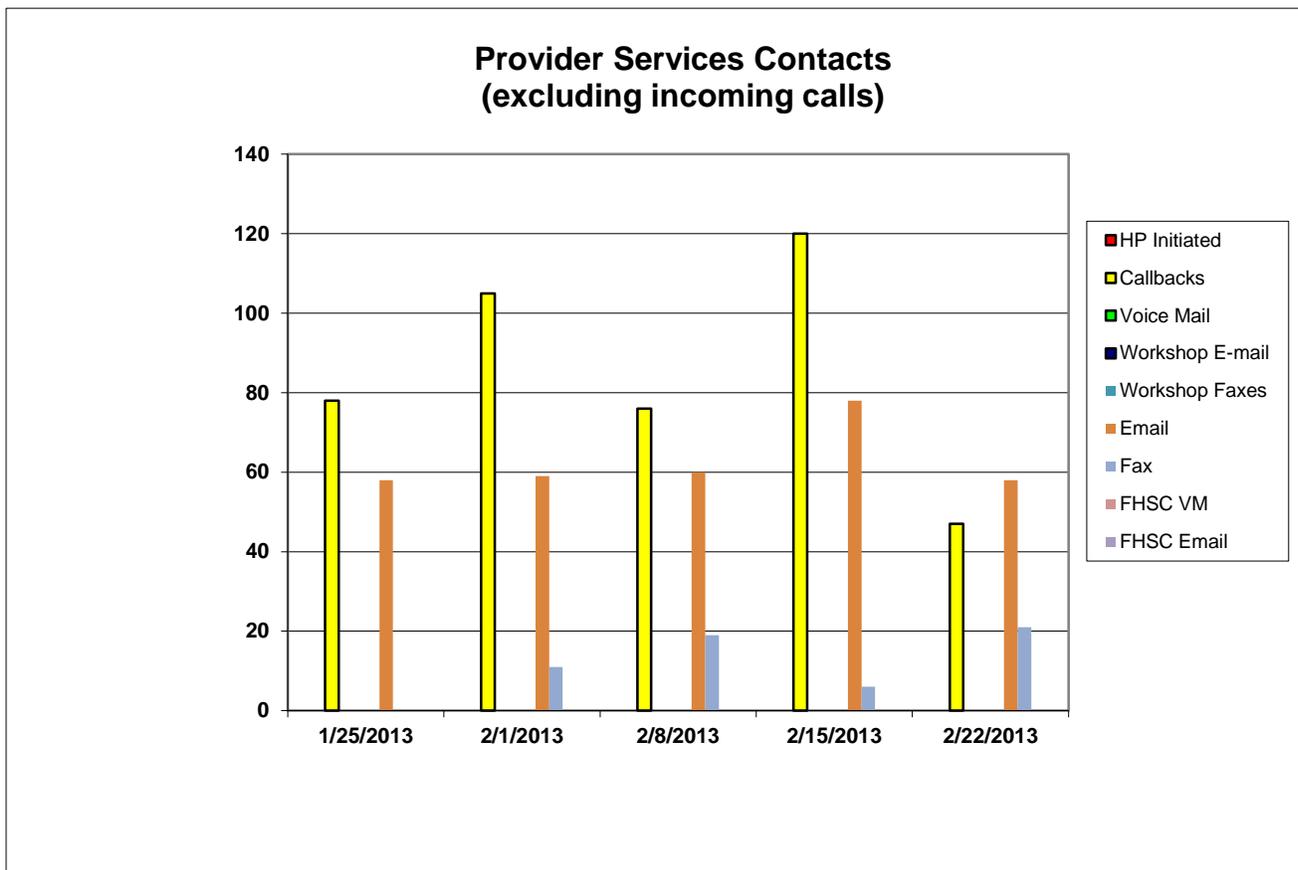
**10.4.1 Training Summary**

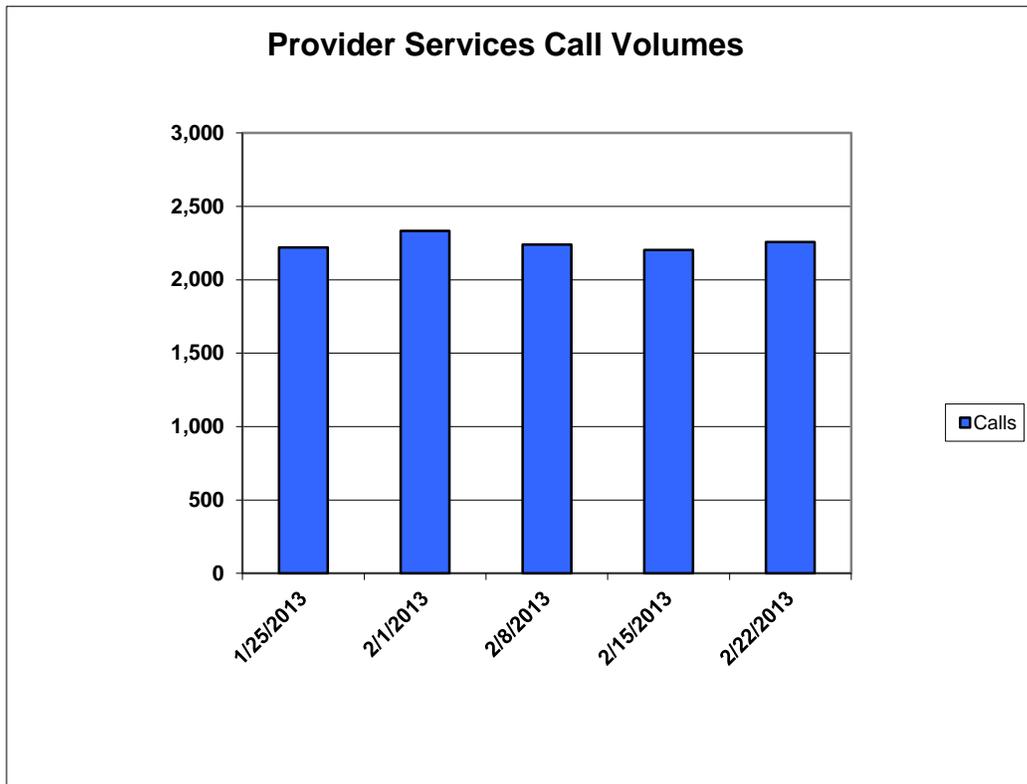
Category	Conducted
Provider Workshops	0
COMMONWEALTH	0
HP Enterprise Services	0

## 10.5 Provider Services

### 10.5.1 Provider Services Calls

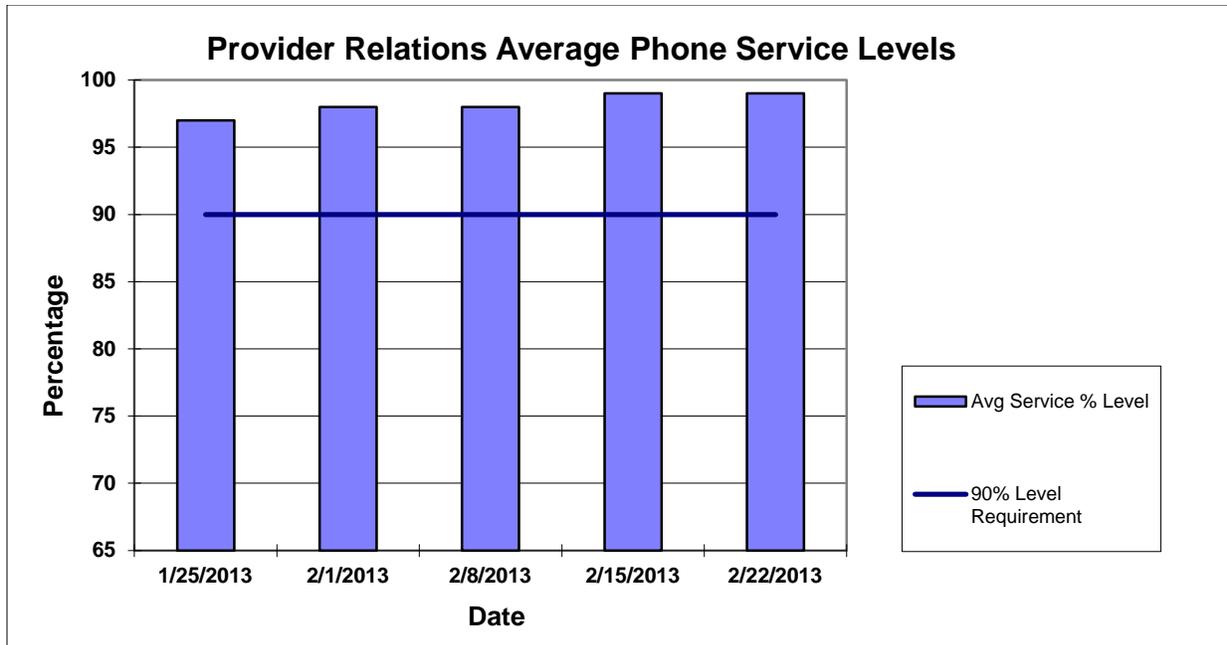
Category	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13
Incoming	2,220	2,333	2,240	2,203	2,257
HP Enterprise Services Initiated Calls	0	0	0	0	0
Callbacks	78	105	76	120	47
Voice Mail	0	0	0	0	0
Workshop E-Mail	0	0	0	0	0
Workshop Faxes/RSVP	0	0	0	0	0
Electronic E-Mail	58	59	60	78	58
Electronic Fax	0	11	19	6	21
FHSC/Voice Mails	0	0	0	0	0
FHSC/E-Mail	0	0	0	0	0
FHSC/Fax	0	0	0	0	0
Total	2,326	2,508	2,395	2,407	2,383





**10.5.2 Phone Services**

Category	01/25/13	02/01/13	02/08/13	02/15/13	02/22/13
Avg Answer Time (min/sec)	.48	.21	.19	.10	.23
Abandoned Calls	62	39	38	9	27
Avg Abandon Time (min/sec)	1:24	1:06	.58	1.10	.38
% Service Level	97.00 %	98.00 %	98.00 %	99.00 %	99.00 %



**10.5.3 Written Correspondence**

	Beginning Inventory	Received	Completed	Ending Inventory	Oldest (Julian Date)
Paper	0	144	144	0	0(000)
Email	1	58	56	3	3(053)
Telephone	0	0	0	0	0
Telephone provider inquiry research	2	9	10	1	1(053)

**10.5.4 Communication Publications**

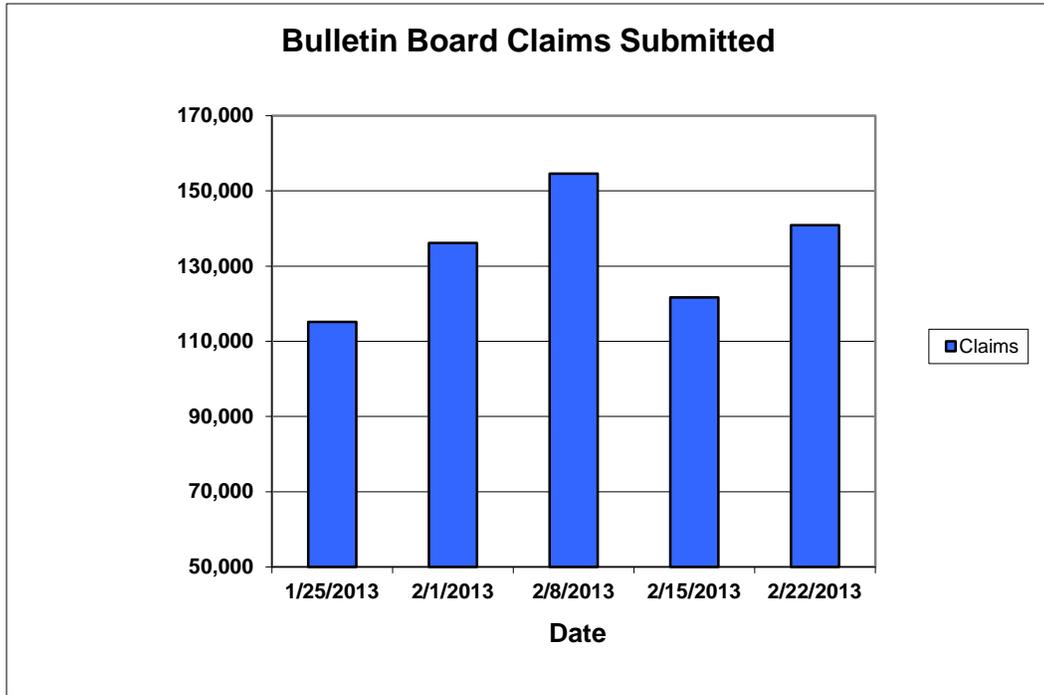
Mailed	Other Distribution	Total
0	0	0

## 11 Unplanned System Outages

A Breakdown Of The Downtime		
Date	Minutes	Reason For Downtime
02/22/2013	0	There were no unplanned outages.

## 12 Bulletin Board System

	01/25/2013	02/01/2013	02/08/2013	02/15/2013	02/22/2013
Number of Claims Submitted	117,165	136,128	154,545	121,652	140,908



## 13 Electronic Data Interchange

### 13.1 Electronic Data Interchange Weekly Activity

This measure reflects the number of providers testing. Multiple tests may be needed before a provider is approved for electronic billing but the provider is counted only once in each category.

\*NPI tests are included in totals, and then broken out in the last stat.

#### BBS Test

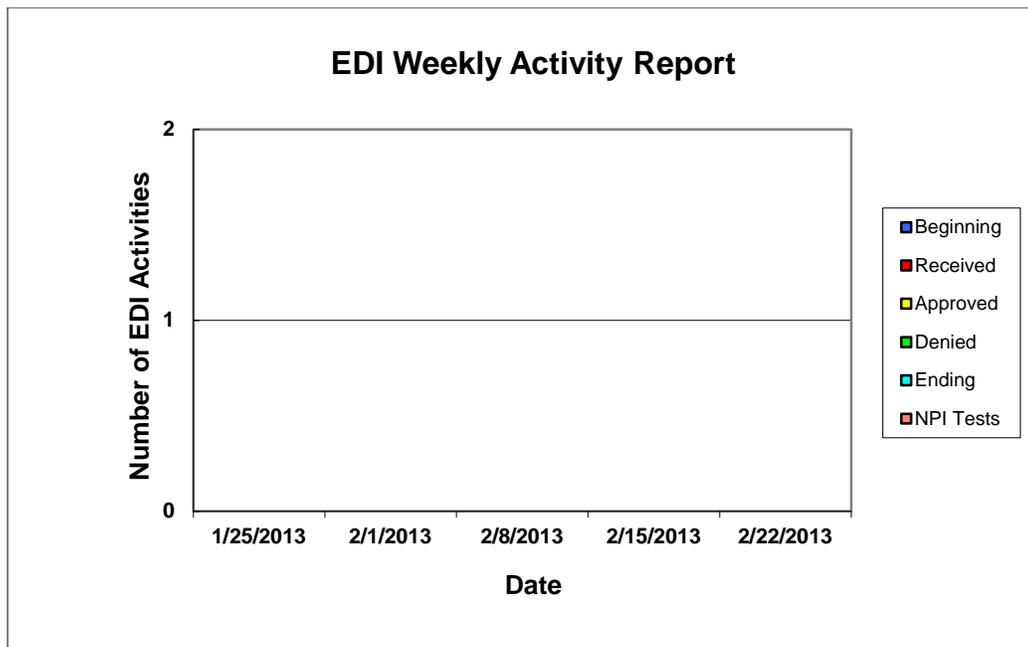
Category	01/25/2013	02/01/2013	02/08/2013	02/15/2013	02/22/2013
Beginning Inventory	0	0	0	0	0
Tests Received	0	0	0	0	0
Tests Approved	0	0	0	0	0
Tests Denied	0	0	0	0	0
New Providers Submitting	0	0	0	0	0
Ending Inventory	0	0	0	0	0
NPI Test*	0	0	0	0	0

#### New Providers Submitting

There were no new providers submitting to report.

#### New Trading Partners Still Testing

No new trading partners still testing to report.

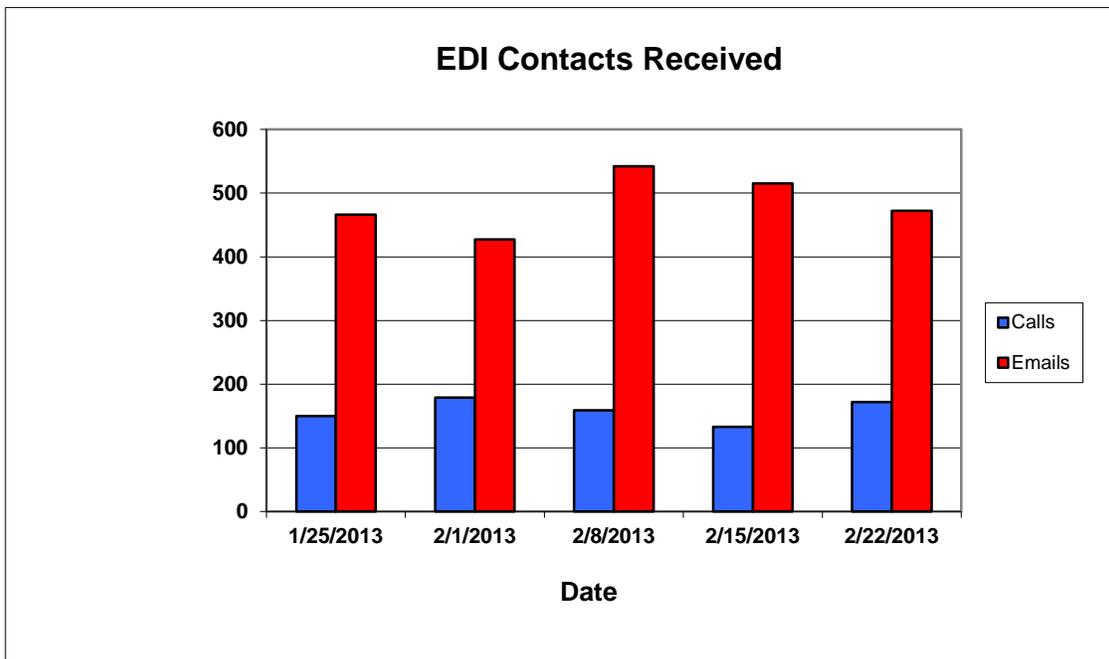


### 13.2 Electronic Data Interchange Calls Received

Category	01/25/2013	02/01/2013	02/08/2013	02/15/2013	02/22/2013
EDI Calls	150	179	159	133	172
Abandoned Calls	2	2	1	2	3
Avg Speed of Answer	:08	:08	:05	:15	:10
Avg Talk Time	2:39	2:45	2:41	3:43	2:29

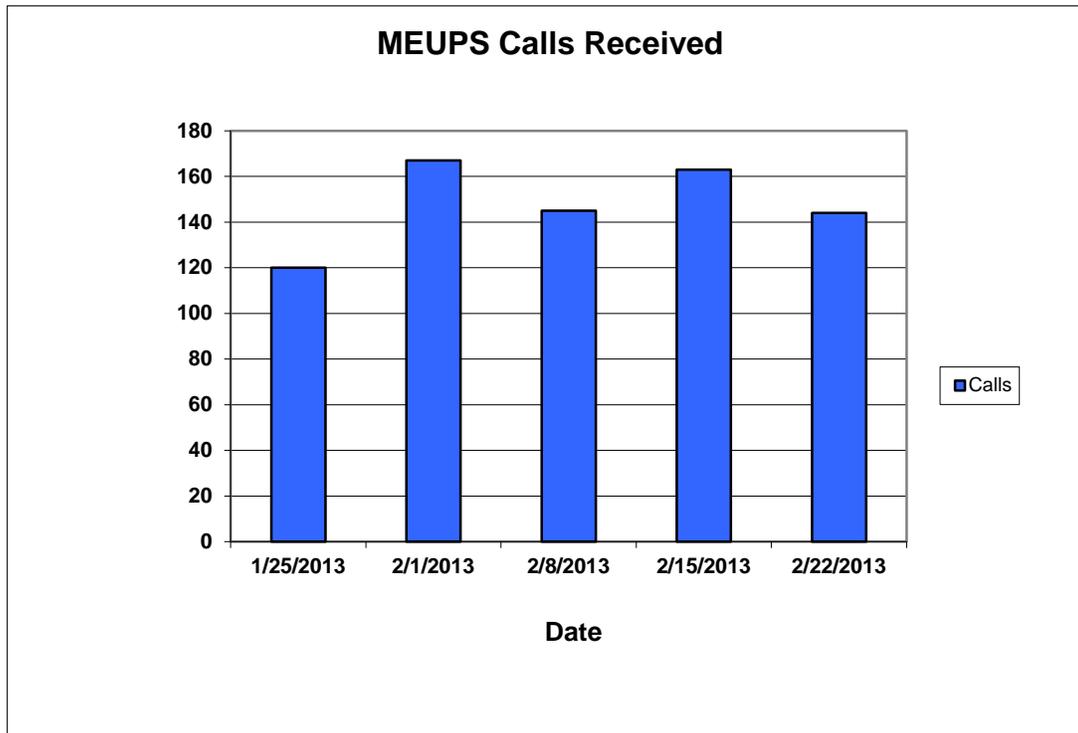
### 13.3 Email Requests

Category	01/25/2013	02/01/2013	02/08/2013	02/15/2013	02/22/2013
Emails Received	466	427	542	515	472
Answered	466	427	542	515	472



### 14 MEUPS Calls Received

Category	01/25/2013	02/01/2013	02/08/2013	02/15/2013	02/22/2013
MEUPS Calls	120	167	145	163	144
Avg Speed of Answer	0:11	0:04	0:07	0:19	0:12
Avg Talk Time	2:18	1:57	1:59	2:23	1:58



## 15 Voice Response

Category	01/25/2013	02/01/2013	02/08/2013	02/15/2013	02/22/2013
Calls Completed	2,306	2,317	2,580	2,491	2,414
Avg. Speed of Answer	:01	:01	:01	:01	:01
Avg. Talk Time	1:32	1:33	1:29	1:29	1:29

