



Interface Functional Specification

Third Party Administrator Project

Claims Auditing Information (TPA-SCO)



Interface Functional Specification

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1 General Information

Title: (40 Character MAX)	Claims Auditing Information (TPA-SCO)
Short description:	Audit file to be sent to SCO to allow SCO to audit payment schedules sent by BIS
Business Team:	TPA Implementation
Priority:	<input checked="" type="checkbox"/> High/mandatory <input type="checkbox"/> Medium/recommended <input type="checkbox"/> Low/optional
Complexity:	<input type="checkbox"/> High <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Low
Is there an alternative in the standard system?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Description of alternative:	Paper copies of claims can be printed for manual transmission to SCO
Reasons why alternative is not acceptable:	<input checked="" type="checkbox"/> Performance problems <input type="checkbox"/> Complexity <input type="checkbox"/> Other (Specify) :
SAP Transaction code:	N/A
Interface Type	<input type="checkbox"/> Batch (<i>one-way transfer of accumulated data</i>) <input type="checkbox"/> Near Real-Time (<i>one-way message-based transfer of data</i>) <input type="checkbox"/> Real Time (<i>Immediate transfer of small data set</i>) <input type="checkbox"/> Excel Upload (<i>manually invoked from SAP session</i>) <input checked="" type="checkbox"/> Other (Specify) : Data exchange – BIS-TPA triggers TPA extraction process the completion of which triggers the transfer from TPA to SCO.
Interface Frequency	<input type="checkbox"/> Hourly <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> On-demand <input type="checkbox"/> Other (Specify) :
Type of Records Sent	<input checked="" type="checkbox"/> Full record load (<i>sends all records every time interface is executed</i>) <input type="checkbox"/> Delta full records (<i>Only sends records that have changed since previous execution</i>) <input type="checkbox"/> Other (Specify) :
Volume Estimate (per interface frequency)	Average Volume: Less than 5,000 records / day Peak Volume: 10,000 records / day
Source System:	BIS SAP to TPA to SCO
Target System:	SCO
Direction	Inbound to TPA Outbound from TPA



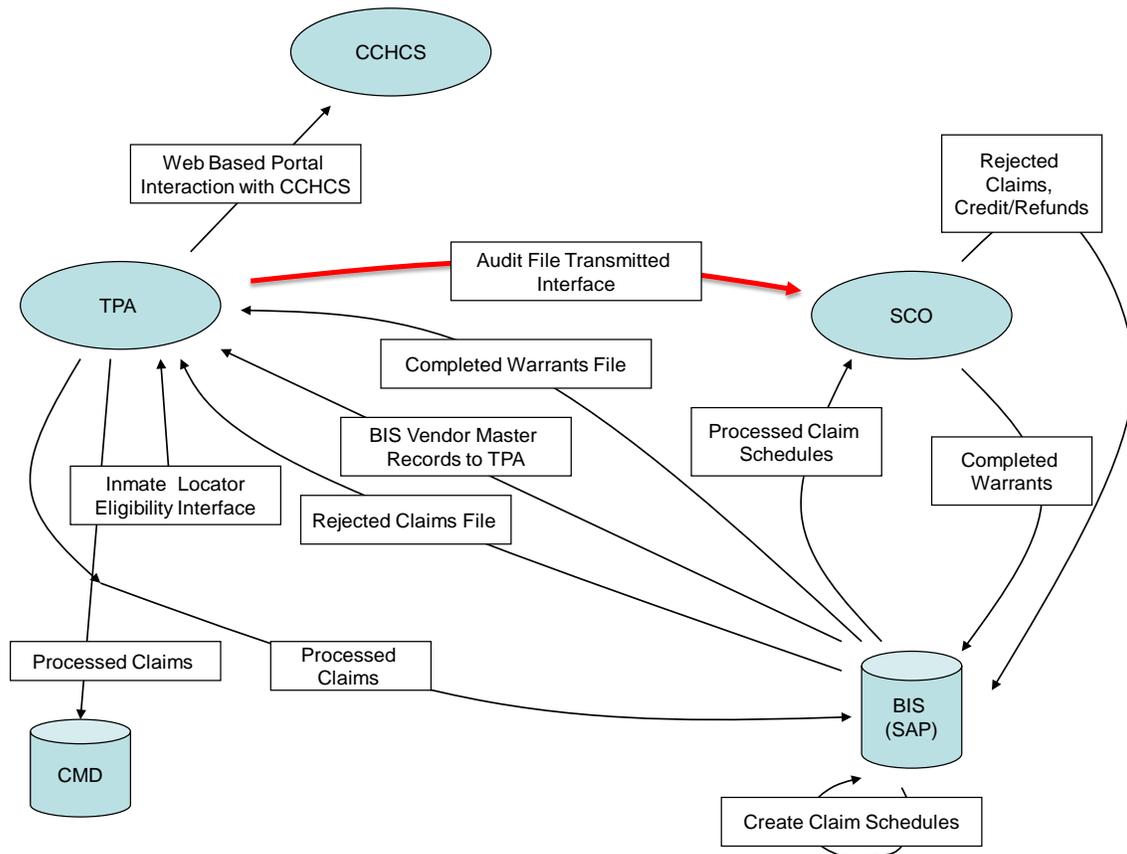
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2 Business Needs & Requirements

The SCO requires auditing information associated with all claims submitted for payment requests by BIS. TPA is to provide information to the SCO for all claims submitted by BIS in a manner that allows sufficient time for auditing by the SCO.

In order to synchronize the BIS payment data with the TPA auditing data the BIS Payment Schedule needs to be received prior to creation.

CCHCS TPA Medical Invoice Process Diagram



TPA Interface Descriptions:

- **Inmate Locator Eligibility Interface**
Interface with CDCR Inmate Locator for automated claim eligibility determinations.
- **Processed Claims Interface**



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Interface with CDCR Accounting for transmission of adjudicated claims to be processed for payment.

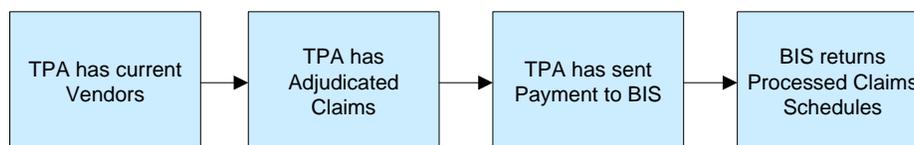
- **Audit File Interface**
TPA interfaces with California State Controller's Office (SCO) transmitting specific claim file information for SCO pre-payment auditing purposes.
- **BIS Vendor Master Records to TPA**
File transmission of CDCR's medical vendor demographic information from the Accounting office.
- **Claim Schedule Creation**
Accounting office generates the electronic claim schedules and paper Std218 for claims received by TPA to be transmitted to SCO for payment.
- **Rejected Claims File**
Submitted claims which are rejected by the Accounting office are transmitted to TPA for research, correction and resubmission.
- **Processed Claim Schedules**
Processed Claim Schedules transmitted in paper with "wet signatures" to SCO for processing.
- **SCO Completed Warrants Transmission**
SCO transmits paid claim information with Warrant/payment information to CDCR Accounting.
- **Accounting Completed Warrants Transmission**
Accounting transmits Warrant/payment information to TPA.
- **Web Based Portal Interaction with CCHCS**
Web based portals with CDCR for claim reviews, credit/refund requests, and suspended claims.
- **Rejected Claims, Credit/Refunds**
SCO communicates to CDCR's Accounting rejected claim batches, questions and/or corrections needed.
- **Completed/Processed Claims Data Transfer**
TPA transmits finalized processed claims information to CCHCS.

3 Starting Condition / Dependencies

Processed Claims Schedules must have been sent to both SCO and TPA.

The following Conditions and Dependencies must be satisfied:

1. File naming conventions have been approved.
2. SCO FTP Protocols have been specified.
3. Access to the SCO FTP site has been granted to TPA
4. File formats obtain final approval





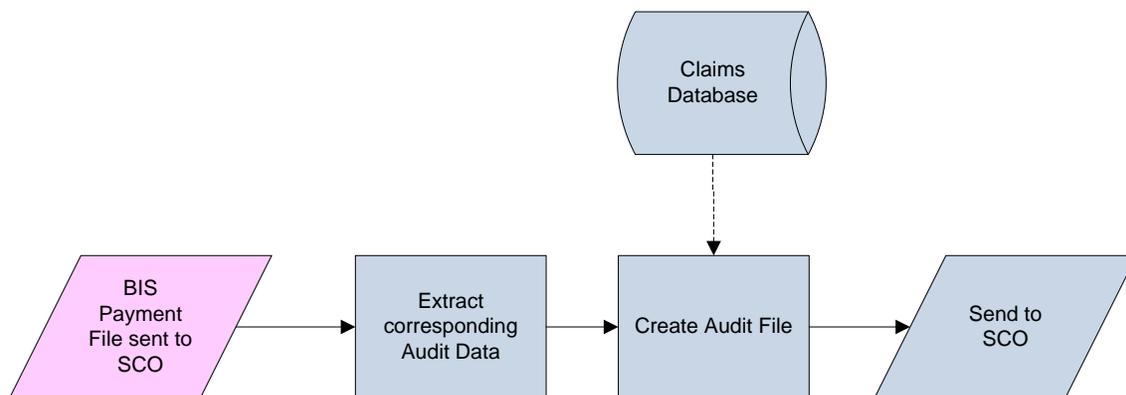
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4 Assumptions

TPA will transmit auditing data to the SCO following that time at which BIS notifies TPA of a request for payment being sent from SCO to BIS. TPA will not send auditing data to SCO unless triggered to do so by the receipt of copy of a payment file.

5 Process Flow Diagram

The process flow diagram represents, at a high level, how the process will be performed after Go-Live. A description of the process is included below the process flow. The audit extract file for SCO will match exactly the BIS payment file for easy SCO reconciliation; i.e., there will be claims data for every entry, and only those entries, in the corresponding BIS payment file.



6 Detailed Processing Logic & Business Rules

Retrieve BIS Payment file from FTP
For each claim in BIS Payment File
 Get TPA Claim data for BIS.claim_number¹
 For each claim line
 Populate Fields
 Write Detail Line

Save file with name as defined in section 7.2

¹ The final SCO audit requirements have not been established – this may alter this process by requiring a header claim line before the creation of the detail lines.



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7 File/Process Specifications

7.1 Inputs

The inputs to the process are the payment schedule files sent from BIS to TPA and SCO. The files are named D<MMDDYY>.<*>.INPUT. The parts inside the angle brackets are variable. The first variable section is the prior day's date and the second variable is a four character code. Details of the file format is found in section 7.4

7.2 Outputs

Payment file as described in 7.4. Each file will be named: *.*.AUDITS.INPUT, where; *.* is determined by the first two sections of the file name as received from BIS

7.3 File Types

All file will be ASCII encoded flat files. Lengths to be added to the document when file formats are finalized.

7.4 Data File Specifications

The BIS-to-SCO file layout is defined in Section 5A DEV-I-Electronic Claim Schedule to SCO. The key field to link the BIS Electronic claim schedule and TPA Audit file is **RA-Audit-Info Field** which will be populated with the TPA Claim ID in the electronic claim schedule files.



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Audit File Format

Field	Length	Start	End	Field Type	Format	Comment
Claim #	19	1	19	AN	X(19)	This value to be included in the audit field of the warrant file. Can be used to match to warrant files. Will be in 19-character format of yyyy-nnnnnnnnn-eeee, where yyyy = 4-digit year, nnnnnnnnn = TPA claim number, and eeee = 4-digit extension
Claim Line #	5	20	24	N	9(5)	Detail line number of the claim or the adjustment.
Claim Schedule Number	8	25	32	AN	X(8)	Obtained from BIS payment file sent to TPA
Vendor ID	6	33	38	N	9(6)	This is the "master" vendor ID from BIS (not the 'remit to' vendor record ID).
Warrant Sequence Number	5	39	43	N	9(5)	Received from BIS, this identifies which warrant within the claim schedule this claim belongs to. Warrants are identified by the sequence in which they appear in the claim schedule file.
Warrant Amount	11	44	54	N	9(9)V99 ²	Total amount of the warrant this claim is part of; obtained from BIS payment file sent to TPA
Payee Name*	35	55	89	AN	X(35)	If claim is from a group of doctors, this will be the name of the group.
Address 1*	35	90	124	AN	X(35)	First line of street or mailbox address DBA Info Name 2 (Name 2) if exist. Otherwise Blank Fill
Address 2*	35	125	159	AN	X(35)	Second line of street or mailbox address if needed C/O Info Name 3 if exist. Otherwise Blank Fill
Address 3*	35	160	194	AN	X(35)	Third line of street or mailbox address if needed Vendor Street Address or P.O. Box
Address 4*	35	195	229	AN	X(35)	Concatenation of City and State
Zip Code	10	230	239	AN	X(10)	
Invoice Date	8	240	247	N	9(8)	Date invoice was generated by the vendor (year, month, day – YYYYMMDD)
Insured's ID#	6	248	253	AN	X(6)	Inmate ID (A99999)
Patient's Name	35	254	288	AN	X(35)	
Patient's Address	5	289	293	AN	X(5)	Institution acronym (e.g., SQ, PVSP, VSP, ASP)
Date of Service From	8	294	301	N	9(8)	Claim Line level date of service
Date of Service To	8	302	309	N	9(8)	Claim Line level date of service
Place of Service	5	310	314	N	9(5)	
Primary Diagnosis Code (ICD-9)	6	315	320	AN	X(6)	Needed to re-price a claim
ICD-9 Procedure Code	5	321	325	AN	X(5)	Not always supplied but use for reporting when present
Procedure Code	6	326	331	AN	X(6)	Industry standard CPT Code
Procedure Modifier	5	332	336	N	9(5)	Needed to re-price procedures
UB (Revenue) Code	5	337	341	N	9(5)	

² 9(n)V99 – n digits with zero-left fill followed by an "assumed" decimal point followed by 2 digits. The field format should appear as 9999999999 and will represent \$099,999,999.99



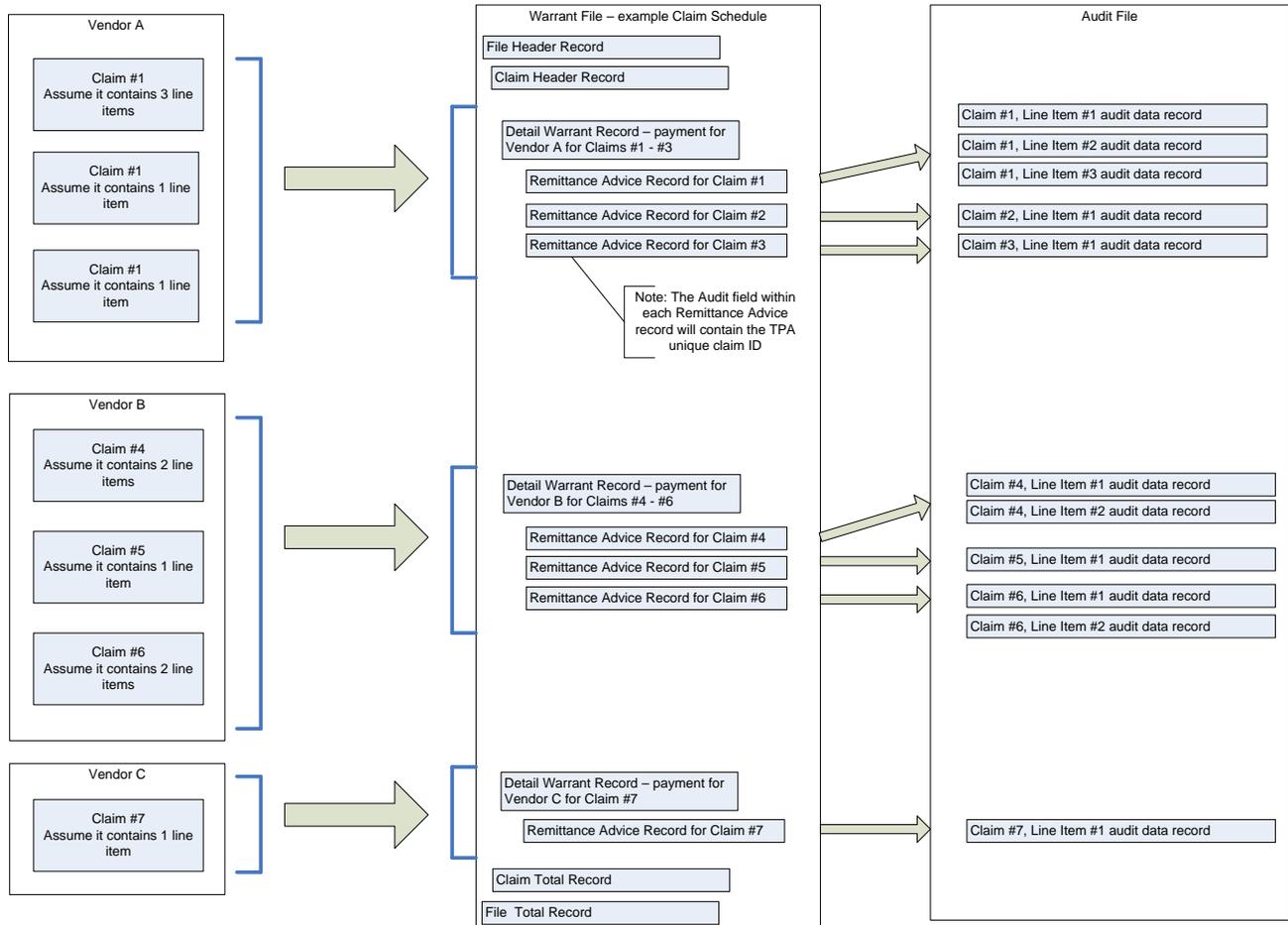
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Field	Length	Start	End	Field Type	Format	Comment
UB Type	4	342	345	AN	X(4)	
Coverage Code	4	346	349	AN	X(4)	
Coverage Code Description	24	350	373	AN	X(24)	Expanded description of coverage
Units of Service	5	374	378	N	9(5)	For inpatient stays, units of services = number of days stayed
Provider Fed Tax ID*	9	379	387	N	9(9)	This is the Vendor's tax ID, not the Provider's tax ID
CCHCS Contract #	20	388	407	AN	X(20)	CCHCS Contract #. This is the contract number that authorizes payments to a vendor.
Charges	11	408	418	N	9(9)V99 ³	Vendor's individual claim line item detail charges
Total Charge	11	419	429	N	9(9)V99 ³	Total vendor charges for the whole claim.
Adjudicated Amount	11	430	440	N	9(9)V99 ³	Amount paid per line item after adjudication
Total Adjudicated Amount	11	441	451	N	9(9)V99 ³	Total claim amount due
TPA Resolution Code	5	452	456	N	9(5)	TPA's code describing why the line item charge was adjusted.
TPA Resolution Code Description	98	457	554	AN	X(98)	Textual description of the adjudication code

¹ 9(n)V99 – n digits with zero-left fill followed by an “assumed” decimal point followed by 2 digits. The field format should appear as 99999999999 and will represent \$099,999,999.99



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8 Security / Authorization Requirements

The following requirements need to be met to allow TPA access to the FTP server designated to receive TPA-to-SCO payment files:

1. Login (userid & password) for server.
2. Navigation rights to the repository directory if not the login node.
3. Minimal write access to the repository
 - a. Directory read access would be helpful to allow TPA to validate the transfer.
4. Appropriate HIPAA transmission protocol (assumed to be SSL – version to be determined))



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9 Testing Scenarios

Normal Functionality - test cases that ensure the conversion requirement, as it should.	
ID	Description
1	Create an audit file and run an editing program to test that each data element in the audit file is an exact match for the corresponding entries in the TPA claims database.
2	Remove claims from the TPA claims database and test that the omission is detected as audit data is extracted.
3	Add a bogus claim to the BIS payment file and test that the addition is detected as audit data is extracted.
4	Remove a payment from the BIS schedule file and test that the omission is detected as audit data is extracted.
5	Omit claims from the audit file to be sent to SCO and test that the omission is detected as audit data is extracted.
6	Add bogus audit entries to the SCO audit file and test that the addition is detected as audit data is extracted.
Exception - special logic or exceptions	
1	Note: As the file contains the latest changes, If we require to know the changes done on specific time and specific vendor, we can use SAP standard reports to find the changes
2	In case of batch job failure, TPA can provide a file from manual execution of the program

10 Error Handling, Monitoring, Reconciliation

The error handling, monitoring, reconciliation section identifies a step by step list of instructions to mitigate errors encountered during the processing.

Error Handling:

- FTP will handle errors at the transmission layer.
- SCO and TPA edits will validate individual claim details.
- Inability to transmit in a timely manner

Monitoring:

- TPA will log all data transmissions (time sent, file name, length, etc.)

Reconciliation

TPA is to receive conformation when BIS requests payment by SCO. If this does not occur within 5 business days TPA will notify CCHCS to determine the cause of the delay.

11 External System Considerations

BIS, EIS SFTP site, SCO FTPS site



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12 Data Retention Requirements

TPA will retain all payment files transmitted to CCHCS for 6 months. In addition, TPA will retain data used to create the payment files in perpetuity and can recreate source data as needed.

13 Interface Trigger / Scheduling Requirements

The TPA extraction and transmission process will be triggered by the receipt of the file from BIS.

14 Expected Performance and Service Level Agreement Requirements

Transmission within one working day of receipt of the BIS file is the expectation. We plan to automate this task in the future to reduce this delay significantly.