EAPG SCHEDULE SETUP OPTIONS
For Version 3.9

October 2014

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Disclaimer

o The information in this presentation is derived from **Version 3.9** of the **3M EAPG Desktop Software**. The screen shots in this presentation may look different if you are using a different version or installation of EAPG.

o ForwardHealth can only provide guidance on settings if the HMO is using the <u>same</u> version of the **3M EAPG Software** as described above.

o ForwardHealth will upgrade to Version 3.9 for Rate Year 2015 (starting 1/1/2015).

o This presentation will be modified and redistributed to reflect any future version upgrades.

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Differences Between EAPG V3.7 and EAPG V3.9

o The upgrade from EAPG V3.7 to EAPG V3.9 provides several changes to the EAPG software, such as which codes group to which EAPGs.

o Most of these changes, however, do not directly impact the schedule setup options that a payer must configure in the software.

o This presentation focuses exclusively on EAPG schedule generation, and so only a limited number of items have changed in this presentation since the version that described EAPG 3.7.

o The changes to this presentation since the version that described EAPG 3.7 are:

– Slide 30: Replaced the Agency Other Tab screenshot to show the new v3.9 schedule options; Note - The new options are not being used by Forward Health.

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EAPG Schedules

o A schedule is a collection of settings that provide processing details for a specific set of records (claims), including:

- Grouper and Reimbursement schemes to use

- Date range when the schedule applies

- Values to use for calculating reimbursement

- Settings specific to the grouper or reimbursement scheme

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EAPG Schedules (Continued)

o A schedule exists for each hospital.

- Most schedule settings will be the same for each hospital.

- Some settings could be different for some hospitals, e.g. Base Rate.

- ForwardHealth creates schedules through a batch process.

- Contact 3M if assistance is needed in setting up a batch process.

- This presentation shows schedule setting tabs so HMOs can align their settings with ForwardHealth.

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EAPG Schedule Setup Tab Titles

- Grouping - General
- Grouping - Visits
- Grouping - EAPG Type Processing
- Grouping - Modifiers
- Grouping - Per Diem
- Grouping - Inpatient Only / Never Pay
- Grouping - Packaging

- Grouping - Consolidation / Acuity
- Grouping - Conditional
- Grouping - Procedure / Device Codes
- Facility Values
- Agency Values
- Agency Other
- Statistics

Grouping – General Tab

Grouping – General Tab

o Direct Admit Observation Logic; ForwardHealth Setting = **YES**

– Option permits a user to recognize Observation visits as a separately processed service.

o Bilateral Discounting; ForwardHealth Setting = **YES**

– Determines whether discounting is applied for a service reported as a bilateral procedure with modifier 50.

– ForwardHealth will pay **150%** if modifier **50** is present (100% for the first and 50% for the second). Percentages are set on the Agency Values Tab.

– The Bilateral Discounting setting applies to the Bilateral Discounting Percent (Slide 26) **and** the Non-Surgical/Independent Bilateral Procedure Discounting Percent (Slide 31).

  • The discounting percent that is applied is determined by the EAPG Bilateral Discounting flag value returned from the grouper (return values = 2 or 3).

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Grouping – General Tab (Continued)

o Repeat Ancillary Procedure Discounting; ForwardHealth Setting = **YES**

   – Determines whether discounting is applied for repeated ancillary items.

   – ForwardHealth has set the first repeat ancillary (which is the second occurrence of the ancillary services identified on the claim) to pay at **50%**, the second repeat to pay at **25%**, and any subsequent repeat to pay at **25%**. Percentages are set on the Agency Values Tab (Slide 28 and 29).

o Remaining settings on the Grouping – General Tab are set to **NO** or **NONE** because the settings are not currently being used by ForwardHealth.

Grouping – Visits Tab

Grouping – Visits Tab

o Visits Per Claim; ForwardHealth Setting = **Multiple**

– Option determines how claims with multiple dates are handled.

– **Multiple** allows claims with more than one date of service to be treated as separate visits, as long as those dates of service are billed on different details, i.e. not range dates.

o Single Visit Per Claim Revenue Codes; ForwardHealth Setting = **Emergency Revenue Codes 450, 451, 452, 456, 459 and Observation Visit Revenue Code 762**

– Claim billed with any of the above revenue codes is treated as a single visit/episode.

– The presence of one of these codes on any paid detail will override the setting of **Multiple**.

Grouping – EAPG Type Processing Tab

Grouping – EAPG Type Processing Tab

o Multiple Procedure Discounting For Significant Procedure; ForwardHealth Setting = **YES**

- Determines whether discounting is applied when there are multiple significant procedures present.

- Discounting is applied to the highest weighted EAPG first, then the second highest weighted and then the same on down the line.

- First significant procedure paid at **100%**, second at **50%** and subsequent at **25%**. Percentages are set on the Agency Values Tab (Slide 28).

o Additional settings on the Grouping – EAPG Type Processing Tab **are not checked** because the settings are not currently being used by ForwardHealth.

Grouping – Modifiers Tab

Grouping – Modifiers Tab

o Use Modifier 25; ForwardHealth Setting = **YES**

– Allows for separate payment of the medical visit when a significant procedure is billed for the same visit and modifier 25 is present with the medical visit.

o Use Modifier 27; ForwardHealth Setting = **YES**

– Allows the use of modifier 27 for reporting additional medical visits for the same visit.

– ForwardHealth also added EAPG 449 to the EAPG deletes list under the Grouping–Packaging options so that the medical visits billed with modifier 27 would not automatically package and would instead be allowed to pay. See Slide 19 for the EAPG packaging delete list setting.

o Additional settings on the Grouping – Modifiers Tab are set to **NO** because the settings are not currently being used by ForwardHealth.

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Grouping – Per Diem Tab

o Settings on the Grouping – Per Diem Tab are set to **0** (Zero) or **NO** because the settings are not currently being used by ForwardHealth.

Grouping – Inpatient Only / Never Pay Tab

o Settings on the Grouping – Inpatient Only / Never Pay Tab are left **BLANK** because the settings are not currently being used by ForwardHealth.

Grouping – Packaging Tab

Grouping – Packaging Tab

o Delete EAPG; ForwardHealth Setting = **449**

– User enterable list of EAPGs to exclude from packaging.

– ForwardHealth added EAPG 449 to the EAPG deletes list so the medical visits billed with modifier 27 would not automatically package and would instead be allowed to pay (Slide 15).

o The option to add EAPGs to the default list of packaged services is **not** currently being used by ForwardHealth.

Grouping – Consolidation / Acuity Tab

o Settings on the Grouping – Consolidation / Acuity Pay Tab are left **BLANK** because the settings are not currently being used by ForwardHealth.

Grouping – Conditional Tab

o   Settings on the Grouping – Conditional Tab are left **BLANK** because the settings are not currently being used by ForwardHealth.

Grouping – Procedure / Device Codes Tab

o Settings on the Grouping – Procedure / Device Codes Tab are left **BLANK** because the settings are not currently being used by ForwardHealth.

Facility Values Tab

Grouping - Per Diem	Grouping - Inpatient Only / Never Pay	Grouping - Packaging	Grouping - Consolidation / Acuity
Grouping - General	Grouping - Visits	Grouping - EAPG Type Processing	Grouping - Modifiers
Grouping - Conditional	Grouping - Procedure/Device Codes	Facility Values	Agency Values	Agency Other	Statistics

This field is provider specific

Base rate: xxxxxxxxxx Non-EAPG rate: [   ]

Add-on rate 1: [   ] Add-on rate 2: [   ]

Add-on rate 3: [   ] Add-on rate 4: [   ]

Cost to charge ratio: [   ] Wage index: [   ]

Facility specific percent of charge: [   ] Mental health full day per diem: [   ]

Mental health half day per diem: [   ] Substance abuse full day per diem: [   ]

Substance abuse half day per diem: [   ]

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Facility Values Tab

o Base Rate; ForwardHealth Setting = **FIELD IS PROVIDER SPECIFIC**

– The provider's base rate used for standard EAPG payment.

– The list of base rates is available on the Portal at
https://www.forwardhealth.wi.gov/WIPortal/Tab/42/icscontent/html/EAPG/EAPGHome.htm.spage#

o Additional settings on the Facility Values Tab are left **BLANK** because the settings are not currently being used by ForwardHealth.

Agency Values Tab

Agency Values Tab

o Bilateral Procedure Discount Percent; ForwardHealth Setting = **1.50**

– Adjustment applied to bilateral procedures.

– ForwardHealth will pay **150%** if modifier **50** is present (**100%** for the first and **50%** for the second).

– These are the percentages applied because the Bilateral Discounting setting was set to **YES** (Slide 8). In certain circumstances, Bilateral Procedure Discount Percent is applied while in other cases, the Independent Bilateral Procedure Discount Percent on Slide 31 is applied; since ForwardHealth sets both percentages to the same value, the percentage is always **150%** for when the Bilateral Discount setting on Slide 8 is set to **YES**.

o Transition Percent; ForwardHealth Setting = **1.00**

– Allows for the blending of 2 payment methods.

– Percentage of payment based off of EAPG Payment Methodology as opposed to an old method.

Agency Values Tab (Continued)

o Significant Procedure Discounting Percent (1ˢᵗ Percent); ForwardHealth Setting = **1.00**

- Discounting is applied to the highest weighted EAPG first, then the second highest weighted and then the same on down the line.

- Used to discount the highest weighted Significant Procedure EAPG.

- First significant procedure paid at **100%**.

- See Slide 13 for the Multiple Procedure Discounting For Significant Procedure setting.

o Significant Procedure Discounting Percent (2ⁿᵈ Percent); ForwardHealth Setting = **0.50**

- Discounting is applied to the highest weighted EAPG first, then the second highest weighted and then the same on down the line.

- Used to discount the second highest weighted Significant Procedure EAPG.

- Second significant procedure paid at **50%**.

- See Slide 13 for the Multiple Procedure Discounting For Significant Procedure setting.

Agency Values Tab (Continued)

o Significant Procedure Discounting Percent (3rd Percent); ForwardHealth Setting = **0.25**

– Discounting is applied to the highest weighted EAPG first, then the second highest weighted and then the same on down the line.

– Used to discount the third <u>and subsequent</u> highest weighted Significant Procedure EAPG.

– Third <u>and subsequent</u> significant procedure paid at **25%**.

– See Slide 13 for the Multiple Procedure Discounting For Significant Procedure setting.

o Repeat Ancillary Discounting Percent (1st Percent); ForwardHealth Setting = **0.50**

– ForwardHealth has set the first repeat ancillary (which is the second occurrence of the ancillary services identified on the claim) to pay at **50%**, the second repeat to pay at **25%**, and any subsequent repeat to pay at **25%**.

– Used to discount the first repeat Ancillary EAPG.

– See Slide 9 for the Repeat Ancillary Procedure Discounting setting.

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Agency Values Tab (Continued)

o Repeat Ancillary Discounting Percent (2nd Percent); ForwardHealth Setting = **0.25**

– ForwardHealth has set the first repeat ancillary (which is the second occurrence of the ancillary services identified on the claim) to pay at **50%**, the second repeat to pay at **25%**, and any subsequent repeat to pay at **25%**.

– Used to discount the second repeat Ancillary EAPG.

– See Slide 9 for the Repeat Ancillary Procedure Discounting setting.

o Repeat Ancillary Discounting Percent (3rd Percent); ForwardHealth Setting = **0.25**

– ForwardHealth has set the first repeat ancillary (which is the second occurrence of the ancillary services identified on the claim) to pay at **50%**, the second repeat to pay at **25%**, and any subsequent repeat to pay at **25%**.

– Used to discount the third and subsequent repeat Ancillary EAPG.

– See Slide 9 for the Repeat Ancillary Procedure Discounting setting.

o Additional Settings on the Agency Values Tab are left **BLANK** because the settings are not currently being used by ForwardHealth.

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Agency Other Tab

Agency Other Tab

o Adjustment Percent 2; ForwardHealth Setting = **1.00**

– Percentage applied to a setting not used by ForwardHealth.

– This value needed to be set to **1.00** otherwise no allowed amount would be received.

o Independent Bilateral Procedure Discount Percent; ForwardHealth Setting = **1.50**

– Adjustment applied to non-surgical/independent bilateral procedures.

– ForwardHealth set this option to **1.50** so the first of the bilateral procedures is paid at **100%** and the second is paid at **50%**.

– These are the percentages applied because the Bilateral Discounting setting was set to **YES** (Slide 8). In certain circumstances, the Independent Bilateral Procedure Discount Percent is applied while in other cases, the Bilateral Procedure Discount Percent on Slide 26 is applied; since ForwardHealth sets both percentages to the same value, the percentage is always **150%** for when the Bilateral Discount setting on Slide 8 is set to **YES**.

o Additional settings on the Agency Other Tab are left **BLANK** or are **PRE-POPULATED** because the settings are not currently being used by ForwardHealth (e.g. Lesser of Charge vs. EAPG Payment).

Statistics Tab

Statistics Tab

o Statistics; ForwardHealth Setting = **Shouldn't be "none"; File name dependent on fiscal year**

- EAPG weights file containing Transition and Standalone flags. The only fields populated in the weights file for ForwardHealth are the EAPG and the weight. All other fields have been zero filled.

- EAPG weights can be found on the Portal at https://www.forwardhealth.wi.gov/WIPortal/Tab/42/icscontent/html/EAPG/EAPGHome.htm.spage#

- Contact 3M if assistance is needed on formatting your weights file.

o Additional Settings on the Statistics Tab are left **PRE-POPULATED** with **None** because the settings are not currently being used by ForwardHealth.

ForwardHealth Batch Process

o ForwardHealth uses a custom batch process to build schedules that are used in EAPG grouping and pricing.   The process consists of building an EAPG schedule template or templates using 3Ms Schedule Setup Module (SSM), exporting the template(s) to be used in a batch job to create provider schedules, and then importing the schedules using SSM. This process was chosen for the creation of the EAPG schedules based on the number of schedules that need to be built and the consistency of the data.

o NOTE: This is a custom process created and used by Wisconsin ForwardHealth. Please consult 3M for assistance on creating your own batch process.

o ForwardHealth uses the SSM available in the 3M Core Grouping Software (CGS) or Grouper Plus Software (GPS) to create schedule templates. Creating a schedule template using SSM is a manual process as described on the next slide.

ForwardHealth Batch Process (continued)

– Within SSM, select the **Schedules** tab and then click on the **Schedules** menu (in the upper left hand corner of the page), then **New**, then **Outpatient (including Professional)**. After building a schedule, hit **Save** or **Save as...** to save the schedule.

– A unique set of keys is needed for each schedule built. As an example, a ForwardHealth schedule template would contain TEMPLATE is the first key field and ALL in the second key field.   ALL in the second user key is used in the batch process to indicate that the template is applicable to all providers.   If we ever have a need to build a provider specific template, the specific provider Medicaid ID will be placed in the second user key field instead of ALL.

– The begin and end dates entered will depend on factors such as the effective date of the provider rate, change in schedule options, or changing to a new version of EAPG. The schedules ForwardHealth is building typically have a begin date of January 1st of each year, and an end date of December 31st of each year. This correlates to the effective and end date of the EAPG provider rates and weights.   If a provider was added mid-year, say July 1st, their rate would have an effective date of July 1st and so would their schedule.   The end date would be December 31st of that same year.

– The schedule settings for ForwardHealth are defined in the Wisconsin Specific EAPG Configuration training located at https://www.forwardhealth.wi.gov/wiportal/tab/42/icscontent/html/EAPG/EAPGhome.htm.spage#

  • The training information provides the Grouper/Pricer settings used for all providers for a set time frame.

  • Settings do not vary from one provider to next at this time.

  • EAPG version number is selected when creating the schedule/template.

ForwardHealth Batch Process (continued)

o Once the schedule template is built and saved it is exported to a .CSV file format using SSM. This is a manual process.

o NOTE: The import/export function within SSM may or may not be available with the software that you have licensed. Check with 3M for any questions related to this function of SSM.

- Select the schedule(s) you want to export by clicking on them to highlight.

- Click on the **Schedules** menu and select **Export**.

- Select the location you want to export the file to.

o The schedule template is then used as input to a batch process that creates the individual provider schedules. The provider schedules will be written out to a .CSV file which is the file format needed for importing the files to SSM. The batch schedule build process consists of the steps on the next slide.

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ForwardHealth Batch Process (continued)

- Table name of weights files and effective and end date of each.

- Locate hospital providers that have an EAPG rate on file. Providers could have multiple EAPG rate entries for different time frames.   Typically providers will have an EAPG rate entry that begins January 1st and ends December 31st of each year.

- Determine the template to be used for each individual provider.

  - If there is a provider specific template on file for the time frame of the rate on file, it will be used to build the provider schedule.

  - If there is NOT a provider specific template on file, the ALL template that fits the time frame of the provider rate will be used to build the provider schedule.

- Build the provider schedule using a copy of the template from step c above.

  - The providers Medicaid ID is inserted into the first user key. The second user key is filled with blanks (not used at this time in processing).

  - If the effective and end date of the provider rate is different than that within the template, the dates within the provider schedule will be modified to match the dates within the provider EAPG rate segment.

- Determine which weights file name should be entered into the provider schedule using the table of weights files from step a above. The weights file selected is based on the effective and end date from the schedule falling within a single weight file effective and end date range.   Once a weights file has been determined the name of that file is entered into the provider schedule.

ForwardHealth Batch Process (continued)

o NOTE: A single schedule is created for all out of state providers for each individual year. The schedule first user key field is set to OUT OF STATE. All out of state providers currently have the same EAPG rate on file. During claims processing the ForwardHealth system determines if the provider is considered out of state and looks for this schedule to process with.

o Also, EAPG has a limit on the number of years worth of data that it will process. To account for this the batch process has built in a purge process for schedules with dates of services that fall outside of the processing window for EAPG.

ForwardHealth Batch Process (continued)

o After the batch process has completed the .CSV file of provider schedules is imported to GPS using SSM.   This is a manual process.

- – Within SSM, select the **Schedules** tab and then click on the **Schedules** menu and select **Import.**

- – Select the location you want to export the file from.

- – The import panel also provides an option to **Overwrite conflicting schedules**. This option must be selected in order to overwrite existing schedules.

o The weights (statistics) file must also be loaded (imported) to SSM.

- – The .txt format of the weights file is needed for importing to CGS or GPS.

- – Within SSM, select the **Statistics** tab and then click on the **Import** menu (in the upper left hand corner of the page), then **Statistics,** then **Outpatient (including Professional).**

- – The **Statistics file** name must be equal to the weights file name used in the provider schedules.

- – To verify the weights file name was entered correctly, open one of the provider schedules. If the weights (statistics) file name was entered incorrectly when importing the file, an error will be received.

Contact/Resource Information

o ForwardHealth Web site — *www.forwardhealth.wi.gov/*.

o Provider Services — for policy and billing questions, call (800) 947-9627.

o Professional Relations Representatives — Select the Find/Contact your Provider Relations Representative link from the Quick Links list on the Providers page of the Portal.

o E-mail for EAPG questions — *vedseapghmo@wisconsin.gov*.

o For non-policy questions, here is the 3M Contact Information:

> Gregg M. Perfetto - Account Manager
> Applied Research
> 3M Health Information Systems
> 100 Barnes Road
> Wallingford, CT 06492
> (203)949-6626 (Office)
> (203)949-6331 (Fax)

Thank You