

Uniform Business Office Newsletter

Helping frontline users perform their day-to-day jobs

IMPORTANT NOTICE

Due to Privacy concerns, all personal identifiers, such as names and personal e-mail addresses, were removed from this newsletter. We apologize for this inconvenience. If you have questions about an article, please do not hesitate to contact the UBO Help Desk (UBO.helpdesk@altarum.org/703-575-5385).



CONGRATULATIONS



This Fiscal Year, the Third Party Collection Program had the best collections in its 21 year history.

Army – \$60.4 million

Navy – \$28.7 million

Air Force – \$70.7 million



TOTAL – \$159.8 million collected!



Thank you for all your hard work.

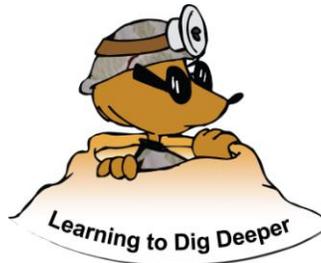
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1. 2008 UBO/UBU Conference Update



The 2008 educational conference for the Uniform Business Office (UBO) and Unified Biostatistical Utility (UBU) will be held 1-3 April 2008 at the National Conference Center

(NCC), in Lansdowne, Virginia. Pre- and post-conference sessions will be on 31 March and 4 April.

This year's theme, "Learning to Dig Deeper: From Registration to Resolution," reflects continuing efforts to capture revenue and improve coding.

As in past years, there will be seven tracks:

- Two tracks focusing on billing and reimbursement;
- Two tracks focusing on coding and data quality;
- One track dedicated to Medical Services Account (MSA); and
- Two tracks of hands-on system training: one for Third Party Outpatient Collection System (TPOCS) and one for Coding Compliance Editor (CCE).

Continuously updated official information can be found

at the TMA UBO Web site:

<http://www.tricare.mil/ocfo/mcfs/ubo/index.cfm>.

You must obtain registration number from your Service UBO Manager to sign up for the conference. All conference attendees must also register with the NCC as either a Day

NOTE

You must register directly with your Service Manager to attend the MSA classes held on Monday and Friday and all TPOCS classes held throughout the week.

Guest or Overnight Guest. Use the conference link on the TMA UBO Web site. You will not be allowed onto the NCC Campus unless you are a registered guest.

As in previous years, this year's conference will afford everyone another excellent opportunity to learn, network with others in the field, and take information home that will help make your job easier. The more attendees, the more networking and information-sharing. We encourage everyone to join us 31 March – 4 April.

2. Outpatient MAC Rates Released

Updated billing rates for outpatient Medical Affirmative Claims (MAC) became effective on their publication in the 21 November 2007 issue of the *Federal Register*. The outpatient MAC rates are now the same as the outpatient rates that became effective for all other outpatient claims on 30 June 2007. All rates – including pharmacy rates, which are updated more frequently – are posted on the UBO Web site.

Medical Affirmative Claims are claims for medical treatment furnished by military treatment facilities (MTFs) to patients who are injured by a third party. The MAC reimbursement rate must be approved by the Office of Management and Budget (OMB). Billing rates for inpatient MAC will be submitted for OMB approval soon. In the interim, MTFs must use the 2002 inpatient rates to bill inpatient MAC.

Teleconferences explaining the new outpatient MAC rates were held in early December. Slides are available on the UBO Web site.

3. Newborn Billing Policy

Newborns of family member daughters, and newborns of former Service Members who were pregnant at time of separation from the military, are not DoD beneficiaries. Therefore, unless other arrangements have been made (e.g., Service Secretarial Designation for the newborn), MTFs should bill for any care furnished to these newborns from the time of birth to the time of discharge at the full reimbursement rate. Generate multiple bills for multiple births (e.g., twins, triplets).

Each Service may use its Secretarial Designee authority for newborns as appropriate. If the newborn is a Service Secretarial Designee, use the appropriate K82/83/84 Patient Category (PATCAT).

In many cases, the Secretarial Designation is only for the time the mother remains hospitalized. In these cases, if the newborn remains hospitalized after the mother's discharge, the Secretarial Designation would end and the PATCAT would become to A/F/N/M 28/29 or K92a as appropriate, for the remainder of the hospitalization. Care under these PATCATs is billed at the full reimbursement rate.

TMA UBO is aware that this policy, while not new, is inconsistent with the PATCAT Table for A/F/N/M 28/29. The PATCAT Table will be changed to reflect that newborns of family member daughters and of former Service Members should be charged the full reimbursement rate versus the family member rate.

NOTE

HA Policy 07-026 – Policy for Billing Non-Department of Defense Beneficiary Newborns, is not a new policy. It combines two older policies, 95-007 – Newborn Billing Policy, released 19 June 1995, and 96-041 – Policy for Newborn Billing, released 19 April 1996.

4. FY 2008 ASA Inpatient Billing Rates

Contact your Service UBO Manager immediately if your MTF furnishes inpatient care and you have not loaded the FY 2008 Adjusted Standardized Amounts (ASAs). The policy letter explaining the rates is posted on the TMA UBO Web site under "MHS Rates – Inpatient."

5. Pharmacy Rate Table Update Planned for January 2008

Over-the-counter (OTC) diabetic supplies will be the *only* OTCs added back into the pharmacy rate package when the package is released 22 January 2008. The OTCs were removed from the July 2007 Pharmacy Rate Table because OTC medications are not TRICARE covered benefits. However, OTC diabetic supplies are a TRICARE covered benefit and are covered by many insurance carriers. The table will also incorporate new National Drug Codes (NDCs) added to the Managed Care Pricing File (MCPF) over the past year.

NOTE:
MTF dispensing policies are not related to, and are not impacted by, rates.

The current UBO pharmacy rate-setting methodology – based on median Average Wholesale Price (AWP) for all NDCs with the same active ingredient, strength, and dose form and comparability – is unchanged. A comparison of UBO pharmacy billing rates with prices charged by major online pharmacies indicates that MHS rates are comparable to those of commercial sources.

The Pharmacy Pricing Estimator Tool (PPET) will be updated and re-issued soon. Please work with your pharmacies to ensure pay patients are aware that prices will change 22 January 2008.

Teleconferences for the Pharmacy Rate Table Update are scheduled for 15 January 0800, 1400, and 2100, and 17 January at 0800 and 1400. All times are Eastern Standard. Dial-in information and slides will be sent Service UBO Managers and posted on the TMA UBO Web site.

6. CY 2007 Medical & Dental Rates Update

Problems billing for immunization codes 90760 – 90779 for outpatient claims can be fixed by downloading a 5 November 2007 TPOCS software patch. These codes were not mapping correctly. The patch, available from the Resources Information Technology Program Office ([RITPO](#)) Web Site, will correct the problems. There is not a similar patch for the Composite Health Care System (CHCS) and MSA billing. It will be corrected in next year's update.

The TMA UBO staff continues to research why some laboratory codes for Class 4 (technician) providers do not have rates. Unfortunately, this correction cannot be made until the calendar year (CY) 2008 rate package update, which is scheduled for June/July 2008.

7. Helping OCONUS Sites Access Prior Year Rates

OCONUS sites now have a software patch to correct the problems associated with changing OCONUS locality codes from year to year. Contact your TPOCS Administrator to download the patch from the TPOCS Web site if the patch has not already been downloaded. If you have downloaded the patch successfully and the problems continue, contact the TPOCS [helpdesk](#) for assistance.

All CHAMPUS Maximum Allowable Charge (CMAC) rates from 2001 to present are located on the TMA UBO Web site and can be accessed to create a manual bill for a prior year.

8. Keeping Your Local CHCS Standard Insurance Table (SIT) Up to Date

The local CHCS SIT will not receive routine, hourly updates if it loses its connection to the Defense Enrollment Eligibility Reporting System (DEERS). To have a current SIT, each CHCS host should download from DEERS at least once a week.

The SIT/OHI (Other Health Insurance) Conversion did not take care of updating the local table!

9. Discounted Cosmetic Surgery?

Not exactly; however, TMA UBO is considering a discounted rate for Botox® injections when the procedure is performed by a dermatology resident. The current Cosmetic Surgery Estimator Tool (CSET) does not differentiate between residents and nonresidents. Dermatology Residency Programs require specific experience with cosmetic Botox injections. The proposed change will ensure dermatology residents receive the appropriate amount of training to meet specific residency requirements. Contact the UBO [Helpdesk](#) if you are aware of other residency programs with similar requirements.

Special thanks to the cosmetic surgeons who took the time to help us understand the residency issues and make practical suggestions.

10. Uniformed Services Family Health Plan (USFHP) Billing Procedures

The USFHP is similar to a health maintenance organization. DoD beneficiaries who choose to enroll in the USFHP are not eligible to receive routine care at an MTF. All care, including prescriptions, laboratory, radiology and office visits, must be furnished through the USFHP facility. If the DoD beneficiary is not in the USFHP's area and requires emergency health care, the beneficiary may obtain the emergency care, but he or she must notify their USFHP within 24 hours.

Bill the USFHP using PATCAT K92b when an MTF furnishes emergency care to a USFHP enrollee. Bill the USFHP enrollee using PATCAT K92a for nonemergency care.

There are currently six USFHP facilities:

- Martin's Point Health Care (Portland, Maine)
- Johns Hopkins Medicine (Baltimore, Maryland)
- Brighton Marine Health Center (Boston, Massachusetts)
- St Vincent Catholic Medical Centers (New York, New York)
- CHRISTUS Health (Galveston, Texas)
- Pacific Medical Centers (PacMed Clinics) (Seattle, Washington)

TRICARE pays the USFHP a capitated fee for each enrolled patient.

11. Helpdesk Update

Additional TMA UBO support staff members are available to resolve trouble tickets related to billing problems. We continue to work with the Clinical Information Technology Program Office (CITPO) and RITPO to determine the correct community (CHCS – hardware, TPOCS – software, or TMA UBO – guidance/policy) through which each ticket should be researched. Thanks to suggestions by MTF staff, many upgrades and changes have been implemented.

Report functional – e.g., policy-related – billing problems through proper channels to your service UBO managers. Report technical problems to the MHS Helpdesk, the TMA UBO [helpdesk](#), or to the TMA UBO [Web site](#). Reporting problems helps us fix them more quickly which, in turn, helps you do your job more effectively.

12. New Telephone Call CPT® Codes!

It is good that telephone call billing is on hold! Otherwise we would have confused payors when we suddenly stopped billing since we cannot use the new codes in the January 2008 CPT release. The existing codes for telephone calls will be inactivated with the January 2008 CPT release. The new codes are specifically for providers (99441/2/3) and non-providers (98966/7/8), such as nurses and technicians. There will be changes to AHLTA and the Ambulatory Data Module released at the beginning of January. If the coders at your MTF have not already trained your providers on these new codes, we recommend you encourage them to attend one of short teleconferences beginning 27 December. Check the TMA UBO Web site for the schedule and dial-in information.

13. Training Update

Watch for announcements for teleconferences focusing on Accounts Receivable; Data Collection; Claims Adjustments; and the Pharmacy Rate Update.

2008 ICD-9 and CPT Coding Update

Check the UBO Web site for slides from the 2008 ICD-9 and CPT code updates.

Have you taken the Patient Category (PATCAT) Code Course Yet?

Everyone is strongly encouraged to take the PATCAT Code Course, which is available on-line from TRICARE University. The course provides an understanding of PATCATs and their uses, the PATCAT code structure, and the assignment of PATCAT Codes in CHCS. It includes a "PATCAT Finder Tool," which guides users through a decision-tree logic flow that leads to the correct selection of a PATCAT Code for a given patient. Almost 90 people have taken and passed the course. A certificate of course completion is sent to everyone who successfully completes the course.

Abbreviations/Acronyms in This Newsletter

AHLTA	Military electronic health record
ASA	Adjusted Standardized Amount
AWP	Average Wholesale Price
CCE	Coding Compliance Editor
CHAMPUS	Civilian Health and Medical Program of the Uniformed Services
CHCS	Composite Health Care System
CITPO	Clinical Information Technology Program Office
CMAC	CHAMPUS Maximum Allowable Charge
CSET	Cosmetic Surgery Estimator Tool
CY	Calendar Year
DEERS	Defense Enrollment Eligibility Reporting System
DoD	Department of Defense
MC PF	Managed Care Pricing File
MAC	Medical Affirmative Claims
MHS	Military Health System
MSA	Medical Services Account
MTF	Military Medical Treatment Facility
NCC	National Conference Center (Lansdowne, VA)
NDC	National Drug Code
OCONUS	Outside the Continental United States
OHI	Other Health Insurance
OMB	Office of Management and Budget
OTC	Over-the-Counter
PATCAT	Patient Category
PPET	Pharmacy Pricing Estimator Tool
RITPO	Resources Information Technology Program Office
SIT	Standard Insurance Table
TMA	TRICARE Management Activity
TPOCS	Third Party Outpatient Collection System
UBO	Uniform Business Office
UBU	Unified Biostatistical Utility
USFHP	Uniformed Services Family Health Plan



*Learning to Dig Deeper:
From Registration to Resolution*

**2008 UBO/UBU Annual Conference
31 March – 4 April
Lansdowne, Virginia**

Plan now!