



State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

August 15, 2013

MHSD INFORMATION NOTICE: 13-16

TO: LOCAL MENTAL HEALTH DIRECTORS
LOCAL MENTAL HEALTH PROGRAM CHIEFS
LOCAL MENTAL HEALTH ADMINISTRATORS
COUNTY ADMINISTRATIVE OFFICERS
CHAIRPERSONS, LOCAL MENTAL HEALTH BOARDS

SUBJECT: DEPARTMENT OF HEALTH CARE SERVICES
SHORT-DOYLE/MEDI-CAL (SDMC) STAGING REGION TESTING

REFERENCE: HEALTH INSURANCE PORTABILITY ACCOUNTABILITY ACT OF 1996

This Department of Health Care Services (DHCS) Information Notice provides instruction to counties on how to test claims processing in the Short-Doyle/Medi-Cal (SDMC) Staging Region.

Background

The “Staging Region” of the DHCS SDMC Claim Adjudication System is where trading partners (counties and direct providers) and DHCS staff submit test claims to verify changes made to county or state systems. Due to Health Insurance Portability Accountability Act of 1996 (HIPAA) privacy requirements, DHCS intends to minimize the Personal Health Information (PHI) data in the Staging Region.

Planned Change

Effective November 1, 2013, SDMC in Staging Region will adjudicate test claims against beneficiary eligibility data that have been copied from the production Medi-Cal Eligibility Determination System (MEDS) into a testing area (called the “MEDS ExITE Region”) with at least the following data masked (i.e. altered) to protect privacy:

1. Client Index Number (CIN)
2. MEDS ID
3. Beneficiary Last Name
4. Beneficiary Street Address

The remaining beneficiary data (such as Date of Birth, Gender, Aid Codes, dates of eligibility etc.) that are relevant to claim adjudication will be available in the Staging Region and will not be altered.

DHCS will purge all currently existing claims from the SDMC Staging Region database because they contain PHI data.

Trading Partners are instructed to put only PHI altered data on their test claims and do **NOT** put identifiable PHI data on their test claims.

Security

Only previously authorized users (county and State staff) have password-protected access to the MEDS ExITE region and only internal, automated SDMC processes will access the MEDS ExITE region to adjudicate test claims.

Any SDMC beneficiary data reported out of the MEDS ExITE Region (via 835 Remittance Advice, Claim Summary File, Monthly MEDS Extract File [MMEF], cross-reference file etc.) will contain only masked PHI data.

The privacy and security protections in this testing environment are the same as those that exist in the live production environment and trading partners are subject to privacy and security requirements contained in agreements they entered into with DHCS.

Capacity

As the MEDS ExITE Region does not have the capacity to contain the entire MEDS database, trading partners are asked to send to DHCS (via ITWS) a list of the CINs that are needed for testing. Trading partners should submit only CINs for which that trading partner intends to submit one or more test claims. Initially, each trading partner may submit up to 5000 CINs. Any trading partner that can demonstrate a business need to test with more than 5000 CINs may request to have its CIN limit raised.

Trading Partner Requests for Eligibility Data in the MEDS ExITE Region

A trading partner will submit its list of CINs via the ITWS Staging interface and assign to each CIN a unique non-PHI request ID. When a requested CIN is already in the MEDS ExITE Region, DHCS will refresh the beneficiary's eligibility data from MEDS. When a requested CIN is not in the MEDS ExITE region, DHCS will mask the beneficiary's PHI and move that beneficiary's data from MEDS into the MEDS ExITE region.

DHCS will send to the trading partner (via ITWS) a cross-reference file containing the unique Request ID and the altered PHI values of all of the CINs ever requested by that trading partner. At no time will the real CIN and the altered CIN appear in the same file.

A trading partner may submit any number of CIN requests and each request's data will be available to Staging in 1 to 3 business days.

Any county that is currently receiving a MMEF from Production MEDS may request a monthly file in the MMEF file format that contains the beneficiaries in the MEDS ExITE Region who reside in that county.

Each month, DHCS will refresh the eligibility data of the beneficiaries in the MEDS ExITE Region with the most current data from MEDS.

Communication between Trading Partners and DHCS

A trading partner will upload each list of CINs via the password-protected DHCS ITWS Staging interface. DHCS will process each request and return the cross-reference file in the Trading Partner's designated ITWS Staging folder. A specific file naming convention and file layout for the CIN Request File and the Cross-reference File will be posted on the ITWS Staging website.

Testing

1. With the SDMC database purged, there will be no historical data against which to submit a Void or Replacement. In order to test the Void or Replacement of a claim in the Staging Region, it will be necessary to first submit a claim, and then to submit a second claim referencing the Payer Claim Control Number (PCCN) of the first claim.
2. A claim submitted with a CIN number that is not found in the MEDS ExITE Region will be denied with a reason code indicating that the beneficiary was not found to be eligible for Medi-Cal.
3. When any of the following beneficiary's data elements on a claim differs from the beneficiary's data in the MEDS ExITE Region, the difference will be noted in Loop 2100, NM1 Corrected Patient/Insured Name segment on the 835 Remittance Advice:
 - a. Beneficiary First Name
 - b. Beneficiary Last Name

A name discrepancy will not affect the adjudication of the claim.

If you have any questions, please contact DMHSDMCII@DHCS.CA.GOV or (916) 440-7000.

Sincerely,

Original signed by

Toby Douglas
Director