

**State of Ohio  
MACSIS System Implementation  
Project and Operations Planning Meeting  
June 4, 2009**

***MINUTES***

**Present:** D. Day, K. Cluggish, J. Fraser, B. Cluggish, M. Declouet, J. Hink, K. Fells, L. Xin, J. May, and A. Bergeferd

**Call In:** J. Averill, S. Baker, R. Beegan, H. Bruce, M. Campbell, T. Chambers, P. Coates, L. Cruz, P. Dehner, D. Downs, C. Fratalone, K. Glass, A. Gray, G. Hall, K. Kiesel, K. Lafferty, A. Loftin, J. Mausser, S. McEldowney, K. McFann, J. McIntosh, S. McNaught, B. Miller, C. Muth, D. Pinciario, P. Quinn, S. Robinson, D. Staysniak, D. Vargas, B. Williams, V. Williams, and R. Yeley

***Project Updates***

**e-FMap ~ D. Day & K. Cluggish**

The American Recovery & Reinvestment Act of 2009 is Federal legislation that increases FFP reimbursement for Medicaid claims and is retro-active to 10/01/08 through 12/31/10.

The decision was made that Diamond should reflect the actual FFP% and reimbursement amount that you will eventually get from JFS for retro-active claims back to October, 2008.

In order to do this we are taking each pay/reject file we have received from JFS and are excluding all claims for CHIPS and BCCP (cervical & breast cancer) as those have already been paid at an enhanced rate. We also are excluding claims that were paid and then later manually reversed. We do not want to ask for the enhanced money and then turn around and have to pay it back. Denied claims will also be excluded.

New OBREV files will then be created which will then be processed into Diamond. When the new OBREV files are run back into Diamond changes will only be made to those claims we are requesting the enhanced FFP dollars. Only two fields will be overwritten; FFP% and HSREIMB (reimbursed amount). All claims will carry the original extract date, adjudication date, paid date, etc.

The ARA program and voucher program in Diamond are hard coded and cannot be changed to total that ARRA (enhanced e-FMAP) amount separately. Once the new OBREV files are created, the ARA program in Diamond will be run using the same pay dates as the original ARA files. We will then take the Diamond created ARA files (which will include everything in the original ARAs) and create new ARAs and vouchers using the programs created by Hubert Bruce (ODADAS).

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The new vouchers will have a regular Medicaid column (amount reimbursed at 62.14%), an ARRA column (the enhanced amount at 8.11%), BCCP & CHIPS columns. If a claim was paid at the enhanced amount and the net amount is \$100.00 then \$62.14 appears in the regular Medicaid column, \$8.11 appears in ARRA column and \$70.25 appears in the net reimbursed column.

While everyone is off the system today, and before we begin the e-FMAP process, we are going to create both member and claims extracts. We will then keep an archived copy of the claims extract so that we will have an audit trail of the original FFP% and reimbursed amount. This is the extract file that will be FTP'd to the boards this week. This will be the extract that you can use as base and will not reflect the additional FFP; that won't be until next week's claims extract.

This process will have to be done at least one more time to process the 3<sup>rd</sup> quarter (part of the third quarter); another archive of the extract will be done at that time. This week we have implemented the new FFP percentage of 71.29% into the production system and any claims from this day forward will be extracted to JFS and paid at the new rate. Any claims paid add the enhanced rate and later reversed will be reversed at the enhanced rate.

- S. Baker ~ It is her understanding that the additional fields will always show up on the ARA report/file for all claims that have already been paid? **Yes.**

In other words our claims extract will always show the current dollar amount that was paid in multiple aid and we will have to match with the ARA to find the claims that were paid with the enhanced amount? **Right. The extract is actually pulling the information from Diamond. Someone requested that we add additional fields to the extract. The extract does not contain calculated fields. It would no longer be an extract if we started adding fields that contained calculations. The only way to get new fields in the extract is by adding new fields to Diamond and we do not have that capability.**

- B. Miller ~ In terms of the ARA file, will there be just one field added to that? **We are trying to minimize changes to the ARA. The only added field will be at the provider and board summary lines. There will be the regular Medicaid total which will be the 62.14% of the reimbursement and then we are adding an ARRA field which will reflect the enhanced portion (8.11%). The totals of regular Medicaid, ARRA, CHIPS and BCCP will total to the net reimbursed amount.**
- B. Williams ~ The extract that we see on Monday (6/08/09) will not reflect the additional FFP, but on the 14<sup>th</sup>, that extract will? **Yes, the extract you see on Monday will be before we run the new OBREV files into Diamond which will update the HSREIMB and FFP% fields. Those updates will not be reflected until we create the next week's extract.**

Before someone says, "Could we not run another extract" it takes 17 hours to do the whole extract process! We have to create the input file, member extract, claims extract and short claims extract and it takes 17 hours. When you are talking about 100 hrs. of work starting today at 12 noon, we will not have time to create that 2<sup>nd</sup> extract. What we are saying is the extract you get this week is what it was before we began this process. Next week's claims extract will be reflective of all the changes that were made over the weekend.

- Have you guys set a date yet as to when you'll start paying the enhanced rate that you are not doing the back? **Yes, we put it in effect yesterday.**
- K. Kiesel ~ Have you guys talked to the state auditors about this yet? **We are not overwriting the paid dates! The two fields that we are updating are the FFP% and the HS Reimbursed Amount and everything else stays the same.**

**And you would have already paid the provider the 100% ~ so it should line up. This money doesn't go back to the provider ~ it goes back to the board. For previously paid claims and if you keep the original ARA and vouchers. Keep that and the original claims file ~ you will be able to show them what happened.**

- K. Glass ~ The RA that we get produced on Monday/Tuesday of next week ~ we're to start calculating our percentage at the higher rate at that time. And then when we certify it thru the public expenditure process for the RA process on Monday? **The RAs are reflective of claims that were finalized this week ~ so there is going to be no claims that have been extracted that have come back yet. You are paying the providers at 100%.**

I know ~ here in our county we calculate how much is the FFP and how much is the match? So, the point I am trying to make, when I pay the RA on Monday, that RA it's safe to calculate at the higher rate? **Yes. Production Control did actually run an extract this morning. It will affect the claims that we process back in next week.**

- P. Coates ~ I had thought that if FFP% increased and it would be based on unemployment and that it would be computed at the end of the quarter for claims during that quarter. That must not be correct if we are able to get the percentage now? **Things continue to fall ~ we have received direction from JFS on how we could draw the additional FFP real time for April, May and June. Once we got that we went back to the original thought, and then we went ahead and put it in place.**

**We have prepared an executive level communication that we are hoping to get out there shortly that we have a couple of things with it ~ going to the executive directors, CFOs including the inter-agencies w/JFS and the little bit of guidance letters that we do have. Within that letter it has a table that shows what we have been currently able to calculate**

those at. And they do change that the reason is one of these changes ~ in October 01, 09 there is a new base Fmap that increases everything. You will see it in the table laid what the % is currently being able to be calculated at.

Will we get that before Monday when we start working on the RA? **We are trying to. Should you start making calculations, the 1<sup>st</sup> two quarters the enhanced rate was 70.25% ~ and what was put into production yesterday is actually 71.29%. The 3<sup>rd</sup> quarter (April-June) is going to be paid at 71.29%. Already there is a change, the first 2 quarters we are working on this weekend is 70.25%; next quarter it is 71.29% and the reason that happened was because of tier 1 and tier 2 unemployment. There are a few variables in there.**

The new rate to be used should be is 71.29% for the FFP, is that correct? **Yes, in effect from April 1 thru June 30, 09 and we believe to get thru first 2 quarters for both departments (Oct'08-Mar'09). We put this into effect and when this going to hit us the claims that we will get back JFS next week. We are going have to pick up these first two months of this quarter at some point. Meaning that we will have to go back and put the 71.29% there, too.**

- M. Campbell ~ We normally receive written notification when the FFP percentages from the state dept. in order to change those percentages for our RA? **Attached to the part of the executive communication we have drafted right now that would coming from Director Dawson and Stephenson ~ there is a table in there that will show you by quarter, state fiscal year, federal fiscal year, calendar dates and what those are to be calculated to be right now.**

Would that mean that will be the same as be run in October, they usually change and we have to change according to that table? **Yes, the October information is equivalent.**

EEI ~ J. May

- We have been experiencing steady outages w/transactions and we have traced down with what we have believed to be to the cost. The State Computer Center has changed a minor environment library which should not have impacted anything according to their notes. But it has invalidated the older programs that have not been touched in the past 10 years and one of those programs is the transaction that returns information to the EEI transaction. We have a systems programmer working out @ SOCC w/OIT trying to isolate the abend giving us the problem. What we have determined is restarting relatively is a simple procedure once it does get stuck and we haven't it figured out a way from getting stuck ~ hoping to get it fixed by the end of the week. Took a little bit a time to find what happened in the environment.

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- J. McIntosh ~ had a question about the impact to retros ~ about a record that it is not updating as Medicaid that should be Medicaid. When you get everything fixed ~ will we be getting a listing of those are impacted or retro. **It shouldn't impact retros! The retros are based off of the DB2 tables not the whole EEI process. We have had some Medicaid IDs that appeared to be valid that weren't showing up when we looked them up. We look them up again and they show up. We only pull in Medicaid IDs that are eligible for Behavioral Health and Alcohol & Drug Services ~ so whether there is a new flag that they are excluded them. We had 2 recently that we had looked them up, nothing came up, and they were in the file, a week later we look them up and they came up and they were fine. Medicaid retro program looks at the MedElig file.**

**That has nothing to w/EEI and may be a separate issue. Had some w/future dates on Medicaid IDs but it shouldn't affect the retro program at all.**

#### BH Extracts ~ H. Bruce

- Andy Gray ~ the BH extracts that they received on May 21<sup>st</sup> on X extract was fine but the original file BH extract was not in accordance with the usual file specs, it was 429 bytes wide. Was wondering if that issue has been resolved yet. And if not, if it will be resolved in time for the next run of the next BH extract. Unless it was messed by the enhanced FFP process that I am expecting tomorrow? **We are looking into it as soon we get done w/the e-FMap process ~ that is next on our agenda. The regular BH production will be out today and we still have a copy of the extract of the table that we used to do the extracts from before. So we will go ahead & rerun those and then we will verify that they are correct. And the reports will come out as soon as those are completed. The BHs are done locally and shouldn't be affected by the eFMap process.**
- Do we know when we are getting BH extracts for the web base? **No ~ that is an on-going process.**

#### Board FTP Password Change ~ K. Fells

- In light of e-FMap enhancement the board FTP password is going to be changed again ~ June 24<sup>th</sup> Wednesday (am). An announcement will be sent to you ~ if you have any scripts ~ please do not run them until you hear from us that the password was successfully changed.
- T. Clemons ~ Are the encryption passwords changing? **Not sure ~ if they are everyone will be notified. Will not be changed on the same day. FTP board passwords will change because that is a DAS requirement.**
- K. Kiesel ~ Will my secure token password change as well? **Yes ~ your FTP password will change not the token! You will have to go in and modified that ~ not the**

**secured password. Half of it will be changed and half of it will not. Call if Kendall if you have any problems.**

MIS Users Group Fall Meeting ~ J. Fraser and J. McCluggage

- Nov. 5, 09 at the State Library (Board Room) working on getting the video conferencing connection together ~ more information to follow.

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- C. Muth ~ How is this going to affect the claims that we have already certified thru CPE process since we have already certified the matches at a certain amt ~ now it is going to be a different amt ~ how are we going to handle that?

**Isn't the CPE the certified amount that you pay the providers? And you have already paid the providers and this is just effects the money that the boards getting back. They are making changes to the CPE program that will eventually reflect regular Medicaid and was ARA, they're working on that. This doesn't really affect that CPE process other than that eventually the totals will be put back in there. You are certifying that you paid the providers.**

The CPE process does not certify that we pay the providers if it certifies that you use non-federal funds to pay to for the match. So, if I am changing the match amt. that I paid then I would have to change the amt. from. So then all of my funding sources now are not going to be reflecting of what I actually paid?

***How is the eFMap going to affect the CPE process? In the executive communication, right now we have to track the monies separate ~ putting ARRA eFMap pot in for each board ~ so let's just take the first quarter the additional 8.11% will be deposited there. Once it is there and in your acct. and you can begin using like regular FFP reimbursement.***

What about the claims we have already certified that now the FFP match amt. is different ~ we've already used certain funds to certify the match with. And now the match is going to be a different amt. ~ so how's that going to be reflected?

**Updating that is not acceptable in the MCPE application because it was a local decision you made to divide the payment among more than one non-federal fund source.**

The way we normally do it ~ paid the match amt. out of state local funds and paid FFP amt. out the FFP reimbursement. By changing the match amt., we have used so many dollars out HB484 for match ~ the match amt. is different now. And paid more than HB484 should have.

**No ~ you have paid it @ 100% from a non- federal public fund source.**

I paid it out of 100% match amt. out of non-federal.

**And the requirement is payment of 100% from a non-federal funding source. You are not going back and changing the payment, are you?**

No, I am just changing the way I am dividing the payment out.

**That was your choice to divide it, it is not a requirement. The requirement is to pay 100% out of valid non-federal funding source and if you made a decision to chop it into one, two, three, four, etc. pots of money that was your decision.**

So, you are saying that we can't go back, since there was a change in it.

**That's correct ~ you are not going back and redoing the payment.**

What happens if I use all HB484 fund and I actually have more money HB484, because of the changes in the match.

**No, because you originally paid it the way you did. If we go back and change it ~ it will go back and change how you paid it.**

Next Meeting ~

- July 2, 2009 from 9:00a-11:00a in Suite 3362 and call-in number is (614) 644-1098