

# VA Recovery Audit - Contract Implementation Conference Call Summary

Date: 2/25/2002  
Time: 1:00 – 2:30 PM (EST)

## Attendees **Veteran Affairs**

Thomas Wayburn, COTR, VA Recovery Audit, HAC  
Jerry Simpson, for Chief Healthcare Information Systems, AAC  
Ryan Lilly, Chief Fiscal Officer, HAC  
Rex Gilmore, Program Specialist, VACO/HAS  
Al Brese, Chief Financial Officer, VISN 6  
Gail Graham, Director Health Information, VACO  
Elliott Vanderstek, Chief Accounting Officer, HAC  
Brendan McNamara, Programmer, HAC  
Robert Zier, Accounting Technician, HAC  
Buzz Gray, Director, Little Rock VAMC  
Steve Gorfain, Business Operations Liaison, VACO

## **Contractor**

Walt Jordan, President, Abacus Technology  
John Pieters, Program Manager, HealthNet  
Sharon Lopez, DRG Manager, HealthNet  
Padra Randall, DRG Quality Coordinator, Health Net  
Kelly Foydl, Reports Specialist, Health Net

## **Conference Call Summary**

1. Attendee Identification: Participants identified themselves.
2. Review of action items:
  - a) Item 1: No Payments Indicated for selected VAMC  
Joy Wilkie clarified that the following data for station 537 and 580 represented totals for all six fiscal years (1995-2000). There was a total of 2,076 unique payments on the AAC data file provided to Abacus Technology for station 537. Of these 2,076 payments 149 payments were made to institutional entities for inpatient episodes of care. The AAC data file for station 580 contained 21 payments to an institutional entity for inpatient episodes of care out of a total of 383 unique payments. HAS advised that North Chicago is doing a manual count and that prior to 1999, Chicago West Side processed many of their invoices; Houston is also doing a manual count of payments. These count numbers will be provided upon completion for comparison.(OPEN)
  - b) Item 2: Response to White Paper on VA DRG pricer calculation  
The DRG Pricer Issue has been referred to OGC. (OPEN)
  - c) Item 3: Outpatient Surgical Services payment methodology in Fee Program  
Rex Gilmore advised that the VISTA outpatient fee schedule should be used. VA does not use Medicare APG rate. (CLOSED)

- d) Item 4: Clarification of method used to verify Non-VA PPS exempt status  
HealthNet present the methods used to verify Non-VA PPS exempt status at the January 29, 2002 meeting. HAC and HAS are researching availability of obtaining the “OSCAR” report but without success. Tom Wayburn asked Padra Randall for the name and telephone number of a CMS contact to facilitate in obtaining the report for VA. (OPEN)
- e) Item 5: Written procedures for exchanging data files between HealthNet and HAC  
HealthNet and HAC agreed to use the SOP- Data File Transfer protocol that was distributed at the January 29, 2002 meeting. (CLOSED)
- f) Item 6: DRG reassignment – Top 5  
Gail Graham advised that HIM and HAS would be issuing a joint message to the field. HealthNet advised that the top 5 DRG reassignment presented at the January 29, 2002 meeting was preliminary but similar to OIG findings. (CLOSED)
- g) Item 7: Invoicing and Payment  
James Davis to issue modification to contract to change the invoicing process. (OPEN)

### 3. New Business:

- a) Item 1: HAS guidance regarding HealthNet questions on cases involving Research Non-VA hospitalization  
Case involved a patient admitted to a Non-VA facility related to research. It was undetermined if the case was VA research related. Rex Gilmore advised that VA usually does not pay for research care out of Fee funds, but sometimes fee will process the payment and the VA research activity will reimburse the station’s fee account. Rex advised that VA fee payment depends on the individual circumstances of each case. (CLOSED)
- b) Item 2: HAS guidance regarding HealthNet questions on cases involving Non-VA hospitalization from a VA Domiciliary.  
Case involved a patient admitted to a Non-VA hospital from a VA Domiciliary and discharged back to the VA Domiciliary. Rex Gilmore advised that referrals from a VA Domiciliary to a Non-VA hospital were considered VA transfers. (CLOSED)
- c) Item 3: Blood & Blood Products Listing  
Tom Wayburn advised that he would be sending the station compilation to HealthNet of which stations add the payment for blood and blood products to the DRG pricer amount and which stations process the payment separately as an ancillary payment. Cases that have the payment for blood/blood products added to the DRG pricer amount should be reviewed carefully as the payment for blood/blood products is not an overpayment. (CLOSED)
- d) Item 4: Notification and Collection Letters to debtor  
HealthNet and HAC concluded that there are three letters to be sent to

debtors before offset action may be taken: (1) the initial letter (debt discovery), (2) the first follow-up letter at Day 30 following establishment of debt, and (3) the final collection demand letter at Day 60 following establishment of debt.

e) Item 5: Treasury Offset Program

Tom Wayburn reported that field guidance regarding offset procedures was being issued by CFO and that following release of the guidance memorandum the referrals to TOPS would begin. (OPEN)

4. Next Call: March 18, 2002.

Tom Wayburn  
COTR, Recorder

