Overview

This document gives an overview of the steps needed for the Batch and On-line Claims Adjudication programs to interface with the PEGA system and for the PEGA System to find and retrieve the Provider Contract record for a claim.

The Batch Claims Adjudication process is much simpler than the On-line Claims Adjudication process. The On-line process is designed to handle claims that the Batch process could not auto-adjudicate. Therefore, the PEGA System may need to have logic that handles the Batch claims differently from the On-line claims.

There are three stages in the process of connecting to the PEGA System:

- 1. Parameter preparation
- 2. Calling the PEGA System
- 3. Post-PEGA Processing

Parameter Preparation

This stage the calling programs will prepare the data that is required by the PEGA System to find the Provider Contract record for a claim. In this phase, the following tasks will be done:

- Determine if need to look for a Provider Contract. Currently there are some conditions in which the Provider Contract is not required.
- Setup parameter flags to be passed to the PEGA System.
- Load data into the PEGA input parameter workspace.

Call the PEGA System

This stage the On-line or Batch program will call the PEGA System interface program. This subprogram will call the PEGA System using the parameters setup in the Parameter Preparation phase.

Post-PEGA Processing

This stage will check the status returned from the PEGA System. If the status is success then the calling program will use the Provider Contract record returned. Otherwise, the program will process the claim as if no Provider Contract was found.

Override Status for Certain Conditions

In the On-line Adjudication process, there are certain circumstances where the Provider Contract record will not be valid even if a contract record was found. When the PEGA system returns back to the On-line program, it will set the return Status to FALSE for the following conditions:

- If the return Status is TRUE and Product Line is 'POS' and Contract Network Tier is 'MCP' and Provider Profile Category is <u>not</u> 'HOSP' and Provider Contract Eligibility Plan is 'ZZZZ.
- If the return Status is TRUE and Product Line is 'POS' and RMC is 'EV' OR 'EM' and Auth Type is 'R' and Provider Profile Category is <u>not</u> 'HOSP' and Provider Contract Eligibility Plan is 'ZZZZ.
- If the return Status is TRUE and Product Line is 'POS' and Provider Contract Eligibility Plan = 'POS1'.

Note: This condition could be handled in the Contract Selection rules in PEGA System.

Determine Tier Process

The Batch and On-line Claim Adjudication programs will retain the Tier Determination logic for this phase of the project.

Parameters Passed to PEGA System

The following parameters will be passed from the Claims Adjudication programs to the PEGA System:

Parameter	Comments		
Calling Program	Name of the program calling the PEGA system.		
RMC			
Claim Form	I = Institutional P = Professional		
Product Line	HMO, IND, CSP, POS		
Claim Category			
Region	CA, OR or blank		
Initial Tier	1, 2, 3 or blank		
Group Id			
Auth Type			
Auth Indicator	Y or N		
Claim From Date	CCYYMMDD format		
Claim Thru Date	CCYYMMDD format		
Provider Id			
PPG			
Emergency Flag	Y or N		
BAQ Code	Y or N		
Bill Type			
Valid Provider Flag	Y or N		
PPO Flag	Y or N (batch only)		
Existing Contract Flag	Y or N (whether a claim has an existing Provider		
	Contract)		
Attending Physician	Y or N (for on-line program only)		
Selected Flag			
Referring Physician	Y or N (for on-line program only)		
Selected Flag			
Direct Network PPG Flag	Y or N		
HMO Type Plan Flag	Y or N		

Note: Not all the parameters are required or populated by both batch and on-line programs. Some only pertain to on-line claim adjudication, while others relate only to the batch process. The default value of all flag parameters should be set to 'N.'

Parameters Returned From PEGA System

The following parameters will be returned from the PEGA System to the Batch or On-line program:

Parameter	Comments
Status	TRUE or FALSE
Provider Contract record	blank of Status is FALSE
Primary Contract Found flag	Y or N (on-line only)
Primary Contract Required flag	Y or N (on-line only)

Contract Network Tier vs Plan

The contract network tier parameter passed to the PEGA system is the same field as the Provider Contract Eligibility Plan field. In this document, the terms 'contract network tier' and 'plan' are interchangeable.

Overall Logic in PEGA System

The PEGA System will replace the Provider Contract selection logic in the on-line and batch Claims Adjudication programs. The following lists the overall steps the PEGA System will need to take to find the Provider Contract record for a claim:

- 1. Determine the contract selection rules for an RMC.
- 2. Determine if a claim should use the Provider Withhold logic.
- 3. Determine if the plan requires a Primary Contract.
- 4. Determine if a plan is special and requires a contract specific to that plan.
- 5. Determine if the plan code should be switched for 'SP1 ' plans.
- 6. Determine if a plan can have multiple primary contract records.
- 7. Convert the Claim From and Thru date parameters into ICIDATE format.
- 8. Read through the Provider Contract file (forwards and backwards) using the contract selection rules to determine the best contract.
- 9. Use Provider Withhold logic on claims that it applies to.
- 10. Use Special Plan logic when retrieving the Provider Contract records.
- 11. Return the Status, Provider Contract record (if found), Primary Contract Required flag and the Primary Contract Found flag to the calling program.

Contract Selection Rules Logic

The PEGA System will need to look at the parameters passed from the On-line and Batch Claims Adjudication programs to determine the contract selection rules for an RMC. Some RMCs will only have one rule while others may have multiple rules. See *RMC Contract Selection Rules* spreadsheet for more details.

Note: There are some rules that will check if a field is NOT equal to a certain value. For example, if the PPG is not equal to '3037'. These will need to be handled by the PEGA System.

Determine If Provider Withhold Logic is Used

The Provider Withhold logic is used for the following conditions:

- RMC is an out-of-state RMC (Region)
- Professional claims

Determine if Primary Contract is Required

There are two types of Provider Contract records:

- Primary contract
- General contract

The primary Provider Contract records are identified by 'Y' in the Primary Contract Flag field. There are certain plans that will only use the Primary Contract record for a claim. This means that if a Primary Contract record is not found then the PEGA System should not look for a general Provider Contract record for that plan.

The following plans are those that require a Primary Contract record:

BBC	BIZ	SAC	SUU	
SUX	SUZ	SUQ	SUR	
UHC	UCD			

The PEGA system will set the Primary Contract Required flag based on the plan and will be pass the flag back to the calling program in the output workspace. If the plan requires a Primary Contract then the PEGA system will also populate the Primary Contract Found flag in the output workspace.

The On-line Claims Adjudication program will use these two fields to determine if the "No Primary Contract. Assuming no contract" warning message will be displayed on the Get Diagnosis screen.

Note: Primary Contract plans do not use Primary Contract records with 'ZZZZ' as the eligibility plan code.

Determine Special Plans

Some plans are deemed as 'special' and will only use Provider Contract records specific to that plan.

Note: Special plans do not use Provider Contract records with 'ZZZZ' as the eligibility plan code.

Retrieving Provider Contract Records

The On-line Get Provider Contract logic is much more complicated than that of the batch process. For the sake of simplicity the batch logic will be used for the PEGA System.

- 1. Read through the Provider Contract file to find the last Provider Contract that best fits the claim. Therefore, the Provider Contract file is read until the PEGA system has gone through all Provider Contract records for the Provider ID.
- 2. A Provider Contract is considered 'found', if one of the conditions is met:
 - The Provider Contract ID is equal to the Provider ID and the Provider Contract PMG is equal to the Claim PPG passed to PEGA and the Provider Contract is effective during the claim date.
 - The Provider Contract ID is equal to the Provider ID and the Provider Contract PMG is equal to 'ZZZZ' and the plan is not a special plan and the Provider Contract is effective during the claim date.
 - The Provider Contract ID is equal to the Provider ID and the Provider Contract PMG is equal to 'ZZZZ' and the plan is a special plan and Provider Contract is a primary contract and the Provider Contract is effective during the claim date.
 - The Provider Contract ID is equal to the Provider ID passed to PEGA and the contract network tier is not a special plan and (the plan is not 'POS1' or 'MCH' and the claim is an Institutional claim and the RMC is not an Oregon RMC) and the Provider Contract PMG is equal to 'ZZZZ' and the Provider Contract is effective during the claim date.
- 3. When a Provider Contract record is found move the record to the outgoing workspace and set the Status to TRUE.
- Warning: Since the On-line and Batch Claims adjudication programs will be using the same logic in the PEGA system, some claims may not be able to find the correct Provider Contract record that had in the past. There needs to be a work around to fix those on-line claims that would have normally found a Provider Contract record because the on-line logic has been simplified. Otherwise, the company may be out of compliance with their agreements with their customers.

Differences Between On-line and Batch Selection Rules

There are a number of differences in the way the On-line and Batch Claims Adjudication programs process the contract selection rules. The differences listed below are described in general terms. For more details see the Combined Contract Select Rules spreadsheet.

Contract Selection Rule	On-line	Batch	Comments
ASO Rules	Y	N	Logic may be obsolete.
Latino HMO rules	Ý	N	9L, 9S, 9X, DL, DX, IX RMCs
Latino EPOPPO rules	Y	N	GH, GL, JL, PH, PL, PS RMCs
SIM rules	Y	N	
HMO Type Plan determination	Y	N	On-line calls CLM_URS_FUN_10.
MS BAQ determination	Calls program	Uses CLMS_MSD_10 Tables Master	On-line calls CLMS_MSD_SUB_09 program to read ACME_DB.
Provider Contract Class	CLMS01U prompts the user for class	Determines class based on claim info	When a Provider Contract is found.
Find Provider Contract logic	Calls CLMS_235 program	Uses simpler logic within the program	CLMS_235 uses more complicated logic. It loads 2 arrays and may read through the both arrays to find the right contract. It also backwards through one of the arrays as a last resort.
1M RMC	N	Y	On-line does not look for Provider Contracts for this RMC.
4, B, E, ES, EX, IE, L, LS, LX, V RMCs	POS2	POS2, PPO	
6 RMC	ZZZZ, MCH	ZZZZ	
9L, 9X RMCs	SIM, HLA, blank	ZZZZ	
9S RMC	SIM, blank	ZZZZ	
A RMC	AIM, blank	AIM	
DL, DX RMCs	SIM, SLA, HLA, blank	ZZZZ	
EM, EV, PV RMCs	STV, PPO, POS2	STV, PPO	
EP RMC	EPR, PPO, POS2	EPR, POS2	
G, JH RMCs	PPO, POS2	PPO	
GH, GL, JL, PH, PL RMCs	SIM, PLA, PPO, POS2, PPO	POS2, PPO	
GN, PN RMCs	PPO	POS2, PPO	
GP, PP RMCs	PNP, PNS, POS2	POS2, PPO	
IX RMC	SIM, ILA, HLA,	ZZZZ	

Contract Selection Rule	On-line	Batch	Comments
	blank		
KJ, KP RMCs	OS1, OS2	OS2	
ML RMC	MLA	CSP	
N RMC	SP1	CSP	
O2, OA, OB RMCs	OS1, OS2	OS1, OS2	Online looks for OS2 when a contract is found for OS1. Maybe invalid logic.
OC, OG, OJ, ON, OP, OQ, OS, OT RMCs	OS1, OS2	OS2	
PS RMCs	SIM, PPO	PPO	
Q, R RMCs	PPO, POS2	POS2, PPO	The sequence of the rules.
T, W RMCs	POS2, MCP	MCP, POS2, PPO	
Y RMC	In CLMS_EPO	Not In CLM_EPO	Has opposite logic for EPO contract network tier.
YK RMCs	HKN, ZZZZ	HKN	
YL RMCs	EHK, ZZZZ	EHK	