

AetInfo's Standard Universal Files

May 1, 2007

Purpose: We want to update you about format, content and/or documentation changes in the standard AetInfo® Universal Files. The scope of this communication is global, and the subject matter is generic. It does not include references to individual customers or customized file formats.

This update includes information that may require you to revise your intake/load program. If you have questions about these changes (or about other aspects of U Files), please contact any of the AetInfo contacts listed later in this document.

Additions/Changes to DOCUMENTATION Since Last Update – Medical/Dental File:

1. The Data Dictionary for the Universal Medical/Dental file has been updated to include the new valid values and definitions for **Field #109, Type of Expense COB**, and **Field #110, COB Code**. See additional details under "Data CONTENT Alerts," below.

2. The valid values and definitions for **Field #54, Servicing Provider Type**, and **Field #55, Servicing Provider's Specialty Code**, have been updated in the Appendices section of the Universal Medical/Dental Data Dictionary.

The Data Dictionary for the Universal Pharmacy file has been updated in order to provide the definition of a new data field, **Field #63, Prescriber ID Qualifier Code**.

We have also added the valid values and definitions for this new field to the Appendices section of the Universal Pharmacy file data dictionary.

The field has been added to the updated Universal Pharmacy file record layout as well.

***NOTE:** Please note that that this data element is still in the development process and should **NOT** yet be utilized as a reliable indicator. As the process of developing this code evolves, we will keep you informed.

3. **Field #122, Product Distinction Code** has been added to both the data dictionary and to the record layout for the Universal Medical/Dental File. This indicator is a field that we are developing for future use. It will identify whether a record is associated with the new HNO product (value = 'H') or with a Traditional product (value = 'T'). ***Note:** Please note that that this data element is still in the development process and should not yet be utilized as a reliable indicator. As the process of developing this code evolves, we will keep you informed.

Data CONTENT Alerts - Medical/Dental File:

1. **UPDATE: Fields #109, Type of Expense COB and Field #110, COB Code**

Background

In our November 2006 update bulletin, we reported on the progress of AetInfo Data Warehouse efforts to improve the usefulness and quality of reported COB information for ACAS claims (Field #7, Source System Platform = '27') on the Universal Medical/Dental file.

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This project subsequently evolved into a decision to improve the quality of both the Type of Expense COB and the COB Code data fields by changing the source-data mapping for those two fields in order to utilize upstream sources that have proved to be more reliable than the original source-mappings.

Details

The change to how Fields #109 and #110 are populated (and to the valid values and definitions that apply to them) has been implemented, and that change has been applied retroactively to include all ACAS claims with a Date Processed (Field #62) ***on or after January 1, 2006***.

Please note that if an adjustment to a claim was processed on or after January 1, 2006, but the original claim that the adjustment is being applied to was processed prior to January 1, 2006, then the "old" pre-2006 values and definitions for Fields #109 and #110 will be retained for the adjustment claim.

You will find the detailed values and definitions for both pre-2006 and post-2006 occurrences of Type of Expense COB and COB Code in the Appendices section of our Universal Medical/Dental Data Dictionary, which can always be found at:

http://www.aetna.com/info/aetinfo/uf_docs/UF_Med_Dent_Data_Dictionary.pdf

2. Field #118, Aexcel Provider Designation Code

Background

AetInfo has received notification that for some specific Aetna products, the values found in Field #118, Aexcel Provider Designation Code, are not reliable.

Details

The Aexcel Provider Designation Code is intended to identify whether the servicing provider associated with a given claim record was Aexcel Designated or Aexcel Non-Designated at time of adjudication. The values and definitions for this field are:

201 = Aexcel Designated
202 = Aexcel Non-Designated
NA = Aexcel Not Applicable

The impact is not widespread, as it has been determined that only 14 of Aetna's plan sponsors are affected by this issue.

This is not an issue with the AetInfo Data Warehouse, but is the inevitable result of an issue in the upstream ACAS system processes.

This field should currently be considered unreliable for any records where the value found in **Field #10, General Category of Health Plan**, is any one of the following:

68 Aetna Select
69 Aexcel Aetna Select
70 Aexcel Plus Aetna Select

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75 Aexcel Plus OA Aetna Select
76 Aexcel Plus OA Aetna Sel + AHF

Our AetInfo team is gathering information and monitoring progress on this issue, and will update you with any additional news as it develops. We do not yet have an ETA to report for a fix to this problem.

Additions/Changes to DOCUMENTATION Since Last Update – Pharmacy File:

1. Field #63, Prescriber ID Qualifier Code, has been added to the Universal Pharmacy file record layout, in positions 699 and 700. The definition and the list of valid values for this field have also been added to the Universal Pharmacy File data dictionary. Please note that this addition to the record is merely a placeholder at this point in time, as this data element is still in development. It should not yet be considered a reliable, usable field, even though it is currently being populated.

Background

When a pharmacy submits claims via Aetna's electronic claim interface, the value that pharmacy sends us for Field #32, Prescribing Provider ID is usually the prescribing physician's DEA number. However, there are other possible identifiers that may be sent by the pharmacy in that field, such as the new National Provider Identifier, or a state-issued or Medicare-issued identifier, or a variety of other options.

The purpose of the Prescriber ID Qualifier Code is to have a way for users to determine, with confidence, which type of the many possible prescribing physician identifiers is associated with a given prescription record from the pharmacy.

Aetna is currently working with pharmacies across our networks in order to transition them into remembering to include this new value when sending us their electronic submissions, and to make sure that they know how to determine the correct value to use. Again, we emphasize that this effort is a work in progress, and therefore this field should NOT yet be considered to be reliable, despite the fact that it is currently being populated.

By this notice, we are merely providing users with advance notification so that they can prepare this field to be accommodated by their intake logic.

As new developments occur, we will publish updates on our documentation web site at <http://www.aetna.com/info/aetinfo/>.

2. Field #64, Product Distinction Code has been added to both the record layout and the data dictionary for the Universal Pharmacy File. This indicator is a field that we are developing for future use. It will identify whether a record is associated with the new HNO product (value = 'H') or with a Traditional product (value = 'T'). ***Note:** Please note that that this data element is still in the development process and should not yet be utilized as a reliable indicator. As the process of developing this code evolves, we will keep you informed.

3. Field #65, Expanded RX Claim ID has been added to both the record layout and the data dictionary for the Universal Pharmacy File. This is a placeholder field which will

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eventually (we project sometime in 2008) be required for reporting the Rx Claim ID which is currently found in Field #25, Claim ID, at position 288 on this Universal Pharmacy File record layout.

This expanded-length version of the existing Claim ID field is necessary because the algorithm that creates a unique Claim ID will of necessity increase in length over time, and eventually the current length of 12 bytes will not be adequate. At that point you will need to be prepared to discontinue your use of Field #25, and instead map the Claim ID into your environment from this field. ***Note:** please note that we have added this field for future use. It is in a development phase but should not yet be utilized as a reliable indicator. As the process of developing this code evolves, we will keep users informed

Data CONTENT Alerts - Universal Pharmacy File - since the prior update:

None

Contacts: Below are the primary contacts for U File questions. All work in the Plan Sponsor Information Services group within AetInfo.

Monica Nolan, NolanML@aetna.com, 860-636-2924.

Bob Bopp, BoppIIRE@aetna.com, 860-636-6224.

Al Carmienke, CarmienkeA@aetna.com, 860-636-6249.