CHAPTER 5

MISCELLANEOUS

5.1 MISCELLANEOUS

This section contains extracts of newsletters, hints, and potential changes of the MSP Claims Teleplan system.

5.1.1   History of Changes

- The original Teleplan record specifications were issued in March of 1988 and were officially called 'Version 1.00 SPECIFICATIONS July 1988'.   They included the distribution of Teleplan/PC v1.00 (aka SIMPC) communication software from the family of SIMWARE products to access an IBM mainframe electronically from a DOS PC using a modem.

- The Patient Demographic Record specifications were issued February, 1989.

- The MSP Registration Number specifications for the Personal Health Number version were issued July, 1989. The first plastic BC CareCards followed.

- The ICBC number activation was effective October, 1990.

- Revised Batch Eligibility Records (B02/B12) specifications were issued October, 1990 to replace the original records (B01/B11) of 1988. The system was available in December, 1990 and—effective March, 1991—all vendors were to required to complete the changeover.

- The new Teleplan/PC software Version 2.00 (441C200P) was distributed commencing April 30, 1991.

- CareCards were distributed only with the patients' PHN starting April, 1991.

- A replacement Teleplan specification document Version 2.0 for June, 1991 was distributed July, 1991.

- The claims Outbound Record 'R00/R02/R03' field called 'P60 Filler' was renamed 'PREVIOUS-PAID-DATE' effective October, 1991.

- The claims Inbound Record 'C01' field called 'P28 PRE-AUTHORIZED-CODE' was renamed to 'P28 FILLER-PRE'. The default is zero and old values are accepted but not actioned after the date of implementation. Vendors were required to change over to default.

- Old Batch Eligibility records B01/B11 were discontinued.

- The Debit Request Record system was announced in 1993.

- MSP and ICBC developed a system to allow BCMA physicians to submit their claims for BC patients only via Teleplan, 1994.

- BC Pay Patient Claims for Opted Out Teleplan Submitters was added.

- Allowed electronic claims submissions for Physicians Opted Out in July, 1994.

- Allowed electronic claims submissions for Chiropractors Opted Out in January, 1996.

- Allowed electronic claims submissions for Naturopaths Opted Out in Spring, 1996.

- MSP and ICBC improve the system to allow Therapy Claims to have prior approval for BC patients only via Teleplan in 1996.

- Functionality for Work Safe BC (WSBC), previously known as Workers' Compensation Board of BC (WCB) claims for Teleplan submitters added

- Physicians allowed to submit claims beginning May 8, 1996.

- Supplementary Benefit practitioners were added the following year.

- MSP submission policy for claims revised from 180 to 90 days

- Effective October 1, 1996, all claims must be submitted within 90 days of service. Exceptions are specific and considered to be Overage, needing prior approval from MSP.

- BC Systems became the Information Technology Services Division of the Ministry of Finance in April, 1996.

    - All references in this document changed

- A new version of Teleplan/PC (3.2) was released in September, 1995, replacing all previous versions. It provided use of high-speed modems and access to the BC Provincial Network that replaced the Teleplan private network. It also provided direct control to the modem by a user and many other technical features requested by users and vendors.

    - Minor updates were incorporated including Simwares latest 711C code.

    - Distribution to the province was completed in December, 1996.

- A replacement Teleplan Record Specification document, Version 2.5, was made available in October, 1996, The replacement document incorporated announcements and changes since 1992.

- MSP and WSBC began to allow physicians to submit WSBC Form Fees directly to WSBC via Teleplan effective October 4, 1996.

- Effective October 1, 1996, claim field P22 Billed -Fee-Prefix was activated and renamed SERVICE-CLARIFICATION-CODE.

- Effective October 1, 1996, MSP commenced usage of full 5-character Fee Items.

- Effective October 1, 1996, the Personal Health Number is mandatory for claims.

- Effective April 1, 1997, MSP and WSBC allow EFORMS to be sent via Teleplan.

- Effective June 1, 1997, Opted-Out Physiotherapists are allowed to submit via Teleplan.

- Effective April 2, 1997, the Teleplan original DNET Network was retired. All sites moved to SPANDial.

- Effective January, 1998, minor modification of Documentation Issued (V2.6).

- Effective April 1, 1998, added new Location Codes.

- Effective April, 1998, opted-out specialties are allowed to submit via Teleplan.

- Effective June, 1998, Year 2000 specs (V3.0) issued. Record codes C01/C11/B02/X01/R_ series replaced by new series. New Vendor Control Submission and Control record series ('V__') introduced.

- Effective September, 1999, Primary Health Care Services and Encounters by authorized PHC sites, now called Population Based Funding (PBF), commenced submissions to MSP.

- Effective October, 2001, Teleplan Web V4.0 developed as the replacement for Teleplan DOS (v3.2). Vendors can have their clients access Teleplan Web using a Web Browser or a vendor-developed program (API). Internet access can be made via private ISP's modem, ADSL, or cable including limited service via SPANDial.

- Effective January, 2002, Teleplan Web v4.0 moved from pilot mode to full production access by all sites with a plan to migrate Teleplan DOS sites to Teleplan Web with vendors' cooperation.

- Effective February, 2004, volume claims limit per submission raised from 6,000 to 9,001 claims

- Effective October, 2004, revised specifications issued (V4.0)—modified for Teleplan4 Web and wording changes noted by vendors and staff.

- Effective October, 2004, the Title 'Teleplan' replaced all references except for prior medium software distribution to 'Teleplan/PC' or 'Teleplan-PC'. This was to acknowledge that only one medium exists for Teleplan so by default no distinction is required. (Original Teleplan had media of /PC or /Tape or /Remote Job Entry and separate unique specifications.)

- Effective October, 2004, the remaining Teleplan DOS sites (1,583 of 4,041) were to complete their migration to Teleplan4 Web by March 1, 2005. At that time, the family of NetManage (SIMPC) products was shut down. This closed the chapter of Teleplan DOS operation from June 1988–March 2005.

- Added new P40 SERVICE-LOCATION-CD values to C02 record specifications in October, 2007.

- Opened published "future use" fields INSURER-CODE-RESPONS and ICBC/WSBC-NUM to valid entry. Added valid codes to remittance record specifications in October, 2007.

- January 24, 2013 Teleplan Vendor Data Specification Change Summary. Please note the following:

  - Check Eligibility on the Teleplan Web Browser Screen and equivalent functions in the API is to be used for real-time Point of Service check only, not batch checks.

  - B04 batch eligibility: For multiple eligibility checks, use the Teleplan Batch Eligibility (B04) as part of the Claims Submission. This is the only approved method to determine eligibility for repeat clients and planned visits (e.g. physician or practice roster checks) and the preferred method for returning eligibility.

  - Submit claims daily instead of waiting to submit on close-off dates. This will eliminate the risk of not getting paid on the payment due date due to unforeseen system problems at the user's site and/or backend applications.

  - Review Expansion of Vendor Test Procedures for details regarding the kind of tests required for new vendors.

  - Check Eligibility is effective for Date of Eligibility up to the end of the month. It is not necessary to request again for the rest of the month once the Date of Eligibility is returned to the requestor.

  - Acceptable Use Policy: The Teleplan Check Eligibility function and equivalent function in the API is intended for real-time Point-of-Service checks only for unknown or previously unseen clients that have not scheduled visits in advance. Automated calls and batching of patients to check eligibility are NOT ALLOWED. Transaction utilization is continuously monitored. Automated, repeated or high volume jobs will not be processed (i.e. refused) and the transaction will be disabled for data centres and practices that do not conform to the Acceptable Use Policy.

  - Scheduled Service Outage has been revised

  - Recommendation on Teleplan Web logs not to be parsed for positional of return log messages. MSP can change return message text as required.

- April 1st, 2013 ICBC introduced second ICBC Claims Number format, and validation rules were updated (section 1.14.4 and 1.14.5)

- August 10, 2016 Teleplan Vendor Data Specification Change Summary for Change Specs Version 4.3 to 4.4. The following changes will be made:

  - Teleplan has been upgraded to OCIO compliance; therefore Teleplan user software may or may not require changes to access Teleplan as of September, 2016.

  - The Teleplan Application Program Interface (API) kit contains the new requirement. This can be requested from the Teleplan support centre.

  - A single Teleplan data centre must not submit more than 200,000 claims per payment cycle. This is to prevent problems in picking up remittances and incorrect calculation of payment for practitioners due to the large volume of data.

- September 30, 2020 Teleplan Vendor Data Specification Change Summary for Change Specs Version 4.4 to 4.5. The following changes will be made:

  - Teleplan has been upgraded to OCIO compliance; therefore Teleplan user software may or may not require changes to access Teleplan as of November, 2020.

  - The Teleplan Application Program Interface (API) kit has updates to document 06 Teleplan SSL and Protocol Information. This can be requested from the Teleplan support centre.

  - Added new P40 SERVICE-LOCATION-CD values – B, K, J, L, N, Q, U and W to Chapter 2 record specifications.

  - Added P24 PBF-PATIENT-REGISTRATION-STATUS-INDICATOR field – Y, N, O, R, D to Chapter 3, APPENDIX A and APPENDIX C1 specifications.

  - Switched the positions of the elements DATE-OF-REQUEST and SERVICE-VALID-DATE on pages 71 and 73 of Chapter 3 and on page 132 of Appendix A.

  - Changed the BC institution number to 0010000008 on page 52 of Chapter 2.

- November 10, 2020 Teleplan Vendor Data Specification Change Summary for Change Specs Version 4.5 to 4.6. The following changes will be made:

  - Added new P40 SERVICE-LOCATION-CD value – 'V' to Chapter 2 record specifications and a note to indicate that Service Location 'A' (Practitioner's Office – In Community) will be available until September 30, 2021.

  - Reverted back the positions of the elements DATE-OF-REQUEST and SERVICE-VALID-DATE on pages 71 and 73 of Chapter 3 and on page 132 of Appendix A.

- April 16, 2021 Teleplan Vendor Data Specifications Change Summary for Change Specs Version 4.6 to 4.7.

  The following changes will be made:

  - Per the changes in the Practitioner Payee Number Shortage (PPNS) project: Payee and Practitioner number descriptions changed in chapters 1, 2, 3 and Appendix C2 to reflect the change from only numeric to numeric or alphanumeric.

  - An overall review was completed and minor changes made to Chapter 1, 2, 3, 4 and Appendix C2 to update diagrams, screen captures, alphabetize lists and clarify wording.

- April 2022, Teleplan Vendor Data Specifications Change Summary for Change Specs Version 4.7 to 4.8. The following changes will be made:

Miscellaneous (spec v4.8)

- Since April 2019, HIBC discontinued processing of ICBC supplementary services (insurer code IC); reference to this code has been removed in Chapters 1 and 3.

- Added new Batch Registration Indicator 'G' and additional description for the pending registration and pending de-registration indicators to include payees registered via reporting group number in Chapter 3.

- Added new Override Reason Codes 'O' and 'P' in Appendix C2.

- P28 updated in Chapter 3 to include practitioner number – This field is only populated for PBF (payee status F) sites, when the patient is registered, pending registration / de-registration to the submitting payee on the B14 record.

- Removal of reference to specific Data Centre Numbers (ie. Tnnnn) to allow for any alpha character to be used in the first position (ie. Annnn).

5.2 NOTES