

HIPAA Summit 10

HIPAA Transactions and Code Sets Implementation Roundtable

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WEDI Activities

- Acknowledgements Task Group
- Claim Attachments Pilot
- Other WEDI Activity
 - E-prescribing PAG
 - Clinical/Business Integration Task Group
 - Standards Convergence Project
 - Collaborating, Educating, Consensus-building



- Generally paper or print images of paper reports.
- Current acknowledgements vary greatly in detail and format.
- Lack of acknowledgement information creates a "black hole" perception.



- Changes to acknowledgement reports hinder automation.
- Acknowledgement reports are typically a one-sided flow of information.
- Some trading partners do not implement a complete acknowledgment methodology.



- Standard electronic acknowledgement transactions exist today.
- Need industry-wide voluntary adoption.
- Comprehensive acknowledgement usage between all trading partners.



- Expedited communication or transaction error detection, correction and resubmission.
- Comprehensive and standardized acknowledgements allow for automated processing.
- Eases the implementation of the primary transactions.
- Reduction in inquiries from trading partners.



- Created in collaboration with payers, providers, vendors, X12, and CMS
- Senders and Receivers
- Acknowledgement and Error Reporting Mechanisms
- Recommended Stages of Acknowledgement Reporting or Response
- Business Transaction Flows
- Timeline for Implementation



Status:

- Presented concepts at the WEDI National
 Conference in November, 2004 in Atlanta.
- Held a WEDI Members Council conference call to further vet the concepts.
- Held an Acknowledgements PAG to finalize the recommendations.
- Currently in the beginning stages of the implementation timeline.



- WEDI is working in collaboration with many others including:
 - Centers for Medicare and Medicaid Services
 - NY Empire
 - $-\overline{X12}$
 - HL7
 - Montefiore
 - Sloan-Kettering
 - NextGen
 - Claredi
 - Others



Purpose: "The purpose of the project is to demonstrate the use of the electronic claim attachments between Empire Medicare Services (EMS) and several selected providers using version 4050 of the X12 277 and 275 transactions; and the HL7 CDA-based Additional Information Specifications (AIS) and LOINC codes."



Eventual Goal: To generate the requests for additional claim information via the X12 277 version 4050. Participating providers will translate the 277 request and return the X12 275/CDA version 4050. The 275 will contain either codified answers to the 277 questions or imaged/text data placed in the BIN segment. EMS will translate the 275/CDA and display the response via a client/server application to the medical review examiners.



Last Status:

- Design was nearly completed
- X12 and HL7 are working through their issues lists

Next Steps:

- Complete design phase
- Proceed with unit testing
- Obtain information security verification



E-prescribing PAG

- Held several sessions with the E-prescribing
 Workgroup to develop the initial draft of
 WEDI's response to the E-prescribing NPRM.
- Held a PAG session on March 15th to vet the recommendations with WEDI members.
- Final recommendations approved by the WEDI
 Board of Directors and presented to HHS



- Clinical/Business Integration Task Group
 - Assessing clinical and business or administrative workflows to determine where there are gaps and overlaps.
 - Stakeholder meeting in late April.
 - Establish work product resulting in closer alignment between clinical and administrative systems.



- Standards Convergence Project
 - Several meetings have been held with this task group to date.
 - Looking to obtain industry feedback regarding this critical topic during a pre-conference session at the WEDI National Conference in May in Baltimore.



 Continue collaborating, educating, and consensus-building.