# HIPAA Transactions and Code Sets Implementation – More Complex Challenges Than in 2003

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*Strategies for workflow, productivity, quality and patient satisfaction improvement through health care information*

- Business process consultant focusing on electronic health records, and electronic transactions between organizations
- Former positions with MGMA, University of Denver, Dartmouth College
- Active leader in the Workgroup for Electronic Data Interchange (WEDI)
- Speaker and author (two books on HIPAA Security and one on electronic health records)
- Recipient of the HIMSS 2006 Book of the Year Award
- Recipient of Vision and Leadership Award as WEDI Chairman, WEDI Corporate Leadership Award, and WEDI Distinguished Service Awards
- Consultant to CAQH CORE Project
- HIPAA Expert Witness

- Strategic IT business process planning
- ROI/benefits realization
- Project management and oversight
- Workflow redesign
- Education and training
- Vendor selection and enhanced use of vendor products
- Facilitate collaborations among organizations to share/exchange health care information
- EHR and RHIO training and facilitation

# Disclosure

- The opinions expressed in this presentation are those of Steven Lazarus, it should not be attributed to WEDI or other organizations in which he is actively engaged.

- These opinions are based on active leadership participation in WEDI and other forums on these issues since 1992, including being a WEDI Officer from 2000-2003.

- He participated in a pilot study in the late 1970s conducted by HCFA (now CMS) to investigate the feasibility of utilizing standardized nomenclature for submitting claims data to Medicare via computer tape, including the introduction of ICD-9

# Agenda

1. Greater Challenge Than 2001-2003
2. How is 2009-2013 Different?
3. Recommended Strategies
4. TCS Strategy
5. What About Everything Else?
6. Discussion and Q & A

# 1. Greater Challenge Than 2001-2003 Implementation of 4010 and HIPAA Privacy

- In 2001, many organizations kept part of their Y2K project team in place for TCS
- Focus for 4010 implementation was the claim's transaction – keep the cash flowing
  - Simple object:  maintain cash flow
  - Largely ignored all of the other TCS requirements
  - No ROI planned, just minimal compliance to get by
- Health plans provided providers with resources:  handbook, testing services

# 1. Greater Challenge Than 2001-2003 Implementation of 4010 and HIPAA Privacy

- Health plans worried that providers would resort to paper
  - Processing costs would go up
  - Claim payments would be delayed due to staff overload in violation of State clean claim laws
- Some paid attention to the WEDI/SNIP recommended implementation strategy

# 2.How is 2009-2013 Different?

▸ **More to do**
  ◦ TCS:  5010 and NCPDP (2012)
  ◦ Privacy and security from HITECH
  ◦ ICD-10 (2015)
  ◦ Health Information Exchange (HIE)
  ◦ HITSP
  ◦ Medicare Meaningful Use incentives (2011-2015)
  ◦ Personal Health Records (PHR)

▸ Administrative and clinical

# 2. How is 2009–2013 Different?

- The environment of change
  - The Economy
    - Staff reductions
    - Cash flow
    - Limited cash for investment
  - Health Care Reform
    - When?
    - What?
    - Effects on resource investment
    - IT and standards implications
  - Reliance on the Internet

# 2.  How is 2009–2013 Different?

- ◦ Compliance and Enforcement
- ◦ Security
- ◦ Identity Theft
- ◦ State enforcement under HITECH and for Identity Theft

▸ There are several goals

- ◦ Maintain cash flow
- ◦ Compliance – do not get into deep trouble
- ◦ Stay in business (health care reform)

# 3. Recommended Strategies

▸ Consider all of these issues as one infrastructure reinvestment opportunity over the next five years
  ◦ Financing the investment is a challenge
▸ Change the way you do business
  ◦ Workflow
  ◦ Use IT to support integrated operations
  ◦ Create a strategy based:
    • Your enterprise, not each department or individual
    • Prioritize integrated systems, data standards, and communication standards in your strategy

# 3. Recommended Strategies

▸ Use IT as a tool to become a 21$^{st}$ century company

- All applicable HIPAA TCS and acknowledgements are used
- Accountability for security and privacy
- Use CORE Rules
- 24 x 7 electronic authorized access for all employees, customers (patients) and trading partners
- A real-time for most data exchanges (administrative and clinical)

# 4. TCS Strategy

▸ Who goes first?
  ◦ Health plans, of course! (Q1 2011)
  ◦ Vendors and clearinghouses are next (Q2 2011)
  ◦ Providers are last
  ◦ Everyone needs to be fully implemented and testing with external trading partners by 90 days prior to the deadline (e.g., acknowledgements and 835 remittance advices are initiated by health plans and they need providers for testing before the deadline)

# 4. TCS Strategy

- Testing
  - Internal and external
  - Role of independent external services
  - Let everyone know when you are ready to test
  - Value of a free Internet site with certified testing results
    - Will there be one?

# 5. What About Everything Else?

- ICD-10 will be far more complicated than TCS:  attend the HIPAA Summit sessions tomorrow afternoon
- Most provider and health plan organizations would be wise to create a Project Management Office, or increase the resources in their present PMOs to address the following initiatives on a centralized, coordinated basis over the next five years:

# 5. What About Everything Else?

- TCS
- ICD-10
- HIE
- EHR and Meaningful Use
- Personal Health Records
- Health Care Reform

▸ It is too expensive to go through all of this over the next five years just for the sake of compliance!

# 5. What About Everything Else?

▸ ROI will only be found by making significant changes in workflow and business processes, and achieve simplification through data and communication standards

# 5. Discussion and Q & A

# Contact information

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