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Session 2.11 Transactions – Claims and Prior Authorization Attachments: Interactive Session Presented by Penny Sanchez and Gayle Lowery

The History of Attachments

Question: What organization's 1994 study and report prompted the industry to begin exploration into developing electronic claims attachments?

Answer: WEDi – The Workgroup for Electronic Data Interchange

- 1994 WEDi attachment workgroup report recommendations:
 - Develop attachment standard
 - Coordinate with affected entities
 - Work with Medicaid to standardize/eliminate attachments
 - Create a way to link data across transaction sets

Question: Who funded the Proof of Concept team that consisted of 5 Medicare contractors to develop the methodology behind electronic claims attachments?

Answer: The Centers for Medicare and Medicaid Services (CMS), formerly known as HCFA

Question: In addition to the Medicare contractors, name one of the other entities involved with the original claims attachment development process.

Answer: X12N – Task Group 2/Workgroup 9 (Patient Information)
Health Level Seven
CMS
CDC

Question: Name two palindromes with four or more letters.

Answer: You tell me!!

Question: Name one of the two Standards Development Organizations involved in the final process for developing electronic attachment standards.

Answer: Health Level Seven (HL7)
X12

The Standards Development Organizations (SDO's)

Question: Health Level Seven develops electronic standards primarily for what kind of health care data?

Answer: Clinical data – used in the exchange of data among health care computer to computer applications

Question: What is the name of the standard and implementation guide that will be used by health plans to ask providers for additional supporting information?

Answer: X12N 277 Request for Additional Information to Support a Healthcare Claim or Encounter

Question: What is the name of the standard and implementation guide that will be used by a provider to send in additional support information?

Answer: X12N 275 Additional Information to Support a Healthcare Claim or Encounter

Question: The actual attachment data will reside in a standard developed by which Standards Development Organization?

Answer: Health Level Seven (HL7)

- HL7 is a non-profit standards development organization that specializes in developing primarily clinical data standards. Their standards are used by approximately 80% of all hospitals and laboratory system infrastructures
- The 275 transaction will “house” the Health Level Seven “message” in the BIN segment. This is where the attachment data will reside
- The Observation Result Unsolicited message is used as the basis the for claims attachment standard

Question: What coding system is going to be used in the claim attachment standard?

Answer: LOINC - Logical Observation Identifier Names and Codes

- LOINC are unique codes intended to identify a test or observation result for various medical related procedures or services
- LOINC is developed and maintained by the Regenstrief Institute and LOINC Committee the Regenstrief LOINC Consortium
- Database of LOINC codes is available at the Regenstrief website
- A free utility (RELMA) is available that assists with navigation through the LOINC database

Claims Attachments

Question: What is a claims attachment?

Answer: A set of supporting documentation or information that is associated with a health care claim or encounter

Today claims attachment information is found in remarks or notes fields of the claim or on paper and electronic forms

Claims attachments may be used for:

- Medical evaluation for payment
- Past payment audit or review
- Quality control to ensure access to care and quality of care

Question: Under HIPAA, must providers submit attachments electronically?

Answer: NO

It is the provider’s choice...these are their options: (per HHS white paper)

- Electronic claim with electronic attachment
- Electronic claim with paper attachment
- Paper claim with paper attachment
- Paper claim with electronic attachment

If a provider chooses to submit attachments electronically they must use the standard format

Question: What segment will be used in the X12 837 claim to link the attachment to the claim?

Answer: Paperwork segment (PWK) – see diagram at end of hand-out

Question: Name 2 of the six attachment types already developed by HL7 that are expected to be in the first attachment NPRM.

Answer: The six attachment types are:

- Medications – administered, discharge and self-declared
- Rehabilitation Services – nine disciplines
- Clinical Reports
- Emergency Department – based on DEEDS
- Ambulance
- Laboratory Results

Other attachments being worked on by HL7 are:

- Durable Medical Equipment
- Home Health

Question: Name the attachments that have been identified as being needed by all state Medicaid agencies.

Answer: Sterilization, Hysterectomy and Abortion

The draft data elements for this attachment have been developed by NMEH and approved for industry outreach by HL7. The industry outreach should begin within the next couple of months

Other attachments being worked on by NMEH (ready for outreach)

- Periodontal (Dental workgroup)
- Children's Preventive Health Services (Claims Attachment Workgroup)

Attachments in process by NMEH:

- Non-emergency transportation
- Vision

Prior Authorization Attachments

Question: Are Prior Authorization or pre-certification attachments mandated for use in a standard format by HIPAA?

Answer: NO, The HIPAA legislation only named claims attachments for standardization

Question: Why are attachments needed for Prior Authorization or Pre-certification?

Answer: The 278 Health Care Services Review transactions lacks the necessary data needed to make medical decision for approval or denial of Prior Authorization or Pre-certification requests

Question: What segment in the X12 278 transaction will be used to link the attachment to the prior authorization request?

Answer: Paperwork (PWK)

The paperwork segment in the 278 also allows the provider to submit attachment data in a variety of media such as paper, phone, electronic (275), mail, or e-mail

Question: Can additional information be tied to both the service level and the request level?

Answer: Yes, additional information can be linked at the service level if you are requesting data for a specific service on a prior authorization that contains multiple service lines

Question: What is the first attachment type within HL7 that will be developed for Prior Authorization?

Answer: Home Health

Potpourri

Question: Name one of the two LOINC modifier types?

Answer: LOINC Modifiers allow the health plan to narrow the focus of the request for additional information

- Time Window – defines a specific time frame such as “lab tests performed 15 days prior to a surgical service”
- Item Selection – defines specific criteria such as “abnormal results from a lab test”

Question: What’s the difference between clinical data and administrative data as it applies to the HIPAA standards?

Answer: Administrative data is submitted within the X12N 837 claim
Clinical data is submitted within the HL7 electronic attachment message

Clinical data needed for adjudication of all claims is contained within the 837 claim. This includes data such as the diagnosis code, service codes and modifiers. Clinical data not needed on all claims, but needed to validate the service, post payment review, reporting, or quality control will reside on the attachment

Question: How does a claim attachment developed in HL7 become a HIPAA standard?

Answer: The Designated Standards Maintenance Organization process

Question: Name one benefit to using the HL7 standard electronic claim attachment?

Answer: Some of the benefits for using the HL7 standard electronic claim attachment are:

- Standardization of attachment data (ability to share data more effectively)
- Key opportunity to take inventory of “real” attachment needs
- Ability to auto adjudicate claims without manual intervention

Question: What is the purpose of the NMEH Claims Attachment sub workgroup?

Answer: The purpose of the claim attachment sub workgroup is:

- Identify common Medicaid attachments
- Facilitate and prioritize the development of Medicaid attachments
- Represent Medicaid at HL7 ASIG, X12 and within the industry

The Challenges

Question: What was the biggest challenge the NMEH encountered when developing the Hysterectomy, Sterilization and Abortion attachments?

Answer: How to capture the signature(s) requirements on the federal mandated consent or authorization forms

Question: The biggest challenge HL7 has encountered is ensuring all attachment needs are met throughout the health care industry. How are they resolving this issue?

Answer: Industry wide outreach – A letter is distributed to all industry stakeholders inviting them to participate in the development of the attachment via conference calls

Question: What is the biggest challenge the NMEH faces in completing its mission to develop attachments to meet Medicaid’s needs?

Answer: State participation

Question: Name one of the primary impacts to internal Medicaid operations as a result of standardizing claims attachments?

Answer: Some of the impacts to our internal Medicaid systems are:

- Educating internal staff on the use of the LOINC coding structure
- Re-tooling MMIS to utilize electronic claim attachments effectively
- Recognizing Return on Investment
- Educating your provider community on the use of the attachments and the LOINC system
- Updating documentation such as provider manuals and billing procedures
- Possible policy or legislative changes

Question: When is the Notice of Proposed Rule Making (NPRM) for the first round of HIPAA mandated attachments expected to be released?

Answer: You tell me....anyone know???

FINAL JEOPARDY

Question: What is the catch phrase that gives a culinary description of the benefits of attachments?

Answer: Attachments are the dessert !!

Resources

- Workgroup for Electronic Data Interchange (WEDI)
 - <http://www.wedi.org>
- General X12 Information:
 - <http://www.x12.org/>
- ASC X12 277/275 Attachment Standards:
 - http://www.wpc-edi.com/hipaa/HIPAA_40.asp
- General HL7 Information:
 - <http://www.hl7.org/>
- HL7 Implementation Guides and LOINC Booklets:
 - http://www.hl7.org/Special/committees/claims/claims_attachments.htm

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**837 Claim +
275/HL7 Attachment**



**P
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**277 Request for
Additional**



275/HL7 Attachment

