



Standards Subcommittee of the National Committee on Vital and Health Statistics (NCVHS) Preparations for Implementing the Updated HIPAA and Code Sets Standards

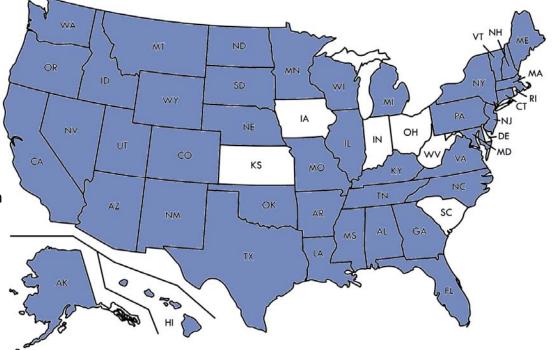


Sunny Singh, CEO Edifecs, Inc.

Edifecs NCVHS Subcommittee on Standards Testimony December 2009 Edifecs Customer Base

Medicaids, Blue Plans and Providers

- 23 State Medicaids out of 50
 - Manage 34.6 million beneficiaries (60%) from 58.5 million citizens across the United States
- 23 Blue Plans out of total 39 from 29 States
 - Manage 70 million members (70% of Blue Customers)
 - 13 Blue Plan Customers among Top 100 Health Plans
- T1 Healthcare Providers located in 23 states
- Products fully 5010, NCPDP standards and ICD-10 code set ready

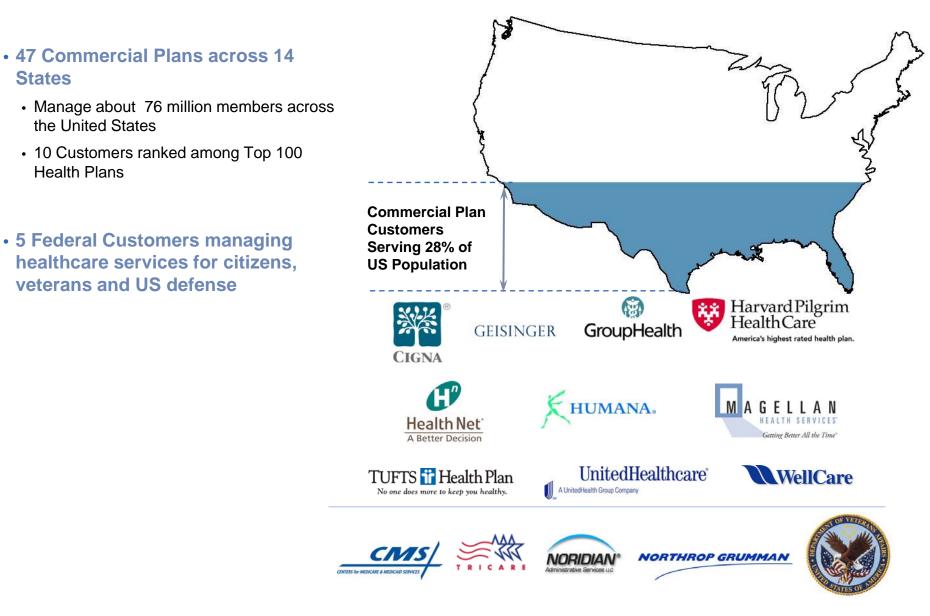


Edifecs Customers 2009

- Medicaids/State Plans
- Blue Plans
- Providers

Edifecs Customer Base

Commercial Plans and Federal Customers



EDIFECS

Edifecs Partnerships

- 9 Partners in Business Week's Top 100 IT Companies Worldwide
 - \$235 Billion in Combined Revenues
 - 7 partners ranked among Top 10 System Integrators by IDC Research
 - 7 partners ranked best-of-breed on Gartner's Magic Quadrant for Application Integration Products
- 4 Top Market Leaders in Healthcare Transaction Processing
- Serving Key Industry Organizations
 - Blue Cross Blue Shield Association Improving visibility and trading partner management
 - CAQH CORE Testing (certified vendor)
- Strong partnerships with and memberships in healthcare standards organizations





Edifecs Supports the Healthcare Community

- Free software donated to various workgroups for standards development and publication
- Free web-based compliance testing and certification services HIPAA compliance testing and standards conformance certification
- Free comparison guides comparison guides for 4010 v 5010 downloadable from our website
- Free CORE certification testing
- www.hipaapedia.com

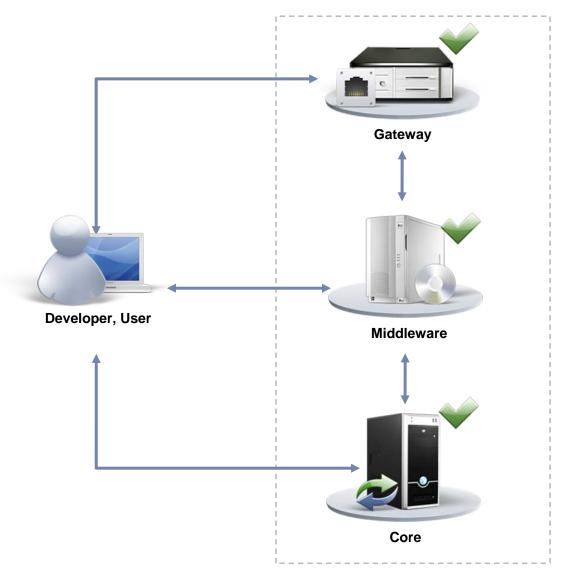
Today's Testimony

- Edifecs's experience in implementing HIPAA standards
- Edifecs's testing leadership in the healthcare industry
- Strong customer relationships and partnerships "Real World" experience
- Delivered limited survey to leading stakeholder entities
- Defining types of testing:
 - Internal Testing
 - External Testing
 - End to End Testing
 - Collaborative Testing



Internal Testing

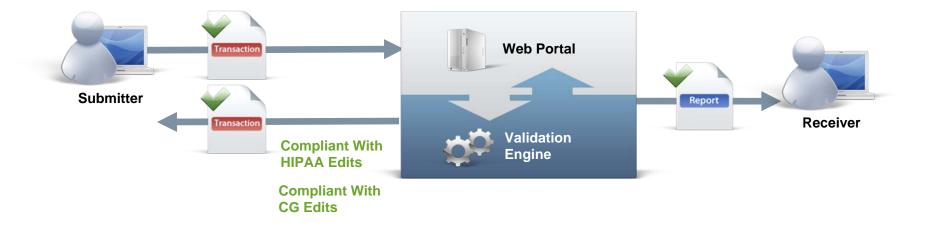
Each Component Developed and Tested Individually, then Together as a System: Unit, Systems Integration, and User Acceptance Testing





External Testing – Basic, Between Individual Partners

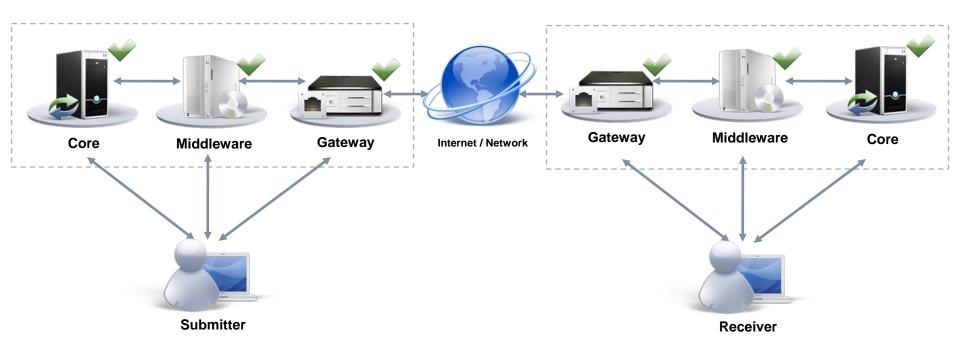
"Transaction Testing": Is the Submitter Compliant with HIPAA, Companion Guides?





End-to-End testing

"Beta" - Systems Tested as "Mirror" of Actual Production Flow Between Partners, Then Against Actual Production Systems



Collaborative Testing

Consortium-Endorsed Guidelines, Methodologies, with Due Diligence, Certification



Observations: Current Phase of Work for 5010 and ICD-10

Many indications that the industry is not where it needs to be

• 5010 implementation appears to be running the same course as 4010

- Many are just beginning their internal development
- Many are planning major upgrades or migrations, as well
- Dependencies on vendor applications being deployed timely
- · Concerns around trading partners readiness

• ICD-10 work for many appears to be either in the pre-planning or very beginning of analysis phase

- Many are not even sure where to start
- Very complicated crosswalks need to be implemented
- Testing of these crosswalks will need a lot of time due to the analytical nature



Industry Recommendation: Begin external testing by January 1, 2011

- Assumption: Those dependent upon vendor solutions for 5010 compliance will be ready to begin January 1, 2010
- Assumption: Most organizations are already 4010 compliant making the move to 5010 more about testing than development

Compliance Date: January 1, 2012

• Will the industry be ready?





Based on other countries ICD-10 implementation, it takes anywhere from 2-5 years

- Australia : 2 years
- Germany: 3 years
- Canada: 5 years
- Industry seems to be stuck in "Where do I begin?" mode
- While crosswalks are not the ideal solution, they will become the necessary evil for implementation
 - There will be more than one crosswalk
 - · No two crosswalks will be the same
 - Testing will become critical to understanding differences in reimbursements, underwriting and quality measures based on ICD-10

Additional Summary Observations

- Experience from 4010 testing and implementation supports the need for strong test scenarios and cases and allowing enough time for testing
- Value of contributions or guidance offered by organizations such as WEDI, NCHICA and NMEH are perceived to be of high value
- Most stakeholders feel there is value in 3rd party certification as means to reduce end
 to end external testing timeframes
- In spite of value of 3rd party certification benefits perceived, most will not require 3rd party certification – will employ existing tools



Edifecs Recommendations to NCVHS – 5010 Testing

- Vendors must be held accountable to dates to support comprehensive and end to end testing many organizations are very dependent on these vendors
- CMS should take a very pro-active stance with regard to expectations for Compliance Levels 1 and 2 milestones for both vendors and stakeholders, and communicate those expectations vigorously
- CMS needs to explore how to resolve differences in 3rd party certification results and due diligence – CAQH/CORE model may provide methodology. If certifier differences and due diligence questions can be resolved, we strongly recommend certification as a required step for vendors and stakeholders
- Government Agencies, SDOs /DSMOs and Industry Associations should set standards for, BUT NOT exclusively endorse any certification entity or product – there should be a choice
- Publicly acknowledge organizations achieving Compliance Levels in advance of the deadline – such acknowledgement will be a prime motivator for executive buy-in and oversight

Edifecs Recommendations to NCVHS – ICD-10 Testing

- Ideally there should be one industry ICD-9 to ICD-10 and ICD-10 to ICD-9 crosswalk
- Industry Associations (MGMA, AHA, etc.) work with constituents on testing strategies that validate "RESULTS" and not "TRANSACTIONS"
- Providers should document scenario-based test cases that reflect their business and revenue patterns in ICD-9 to establish a baseline for comparison with ICD-10 end to end transaction testing results
- Providers and their vendors should test the same scenarios with all payers that represent the largest portion of existing revenue base to determine impacts and inconsistencies
- Act soon the time is short and the stakes are high
- Explore engaging industry groups WEDI, CAQH/CORE, NCHICA, NMEH and expanded role in fleshing out/ rolling out meaningful ICD-10 testing strategies



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Thank you



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