

Statement of Jordan Firfer

Florida Blue

To the

National Committee on Vital and Health Statistics'

Subcommittee on Standards

Regarding the X12 HIPAA 5010 Implementation and Lessons Learned

June 17, 2013

Overview and Introduction

Good afternoon, my name is Jordan Firfer and I am the Senior Director of Information Management with Florida Blue with primary responsibility for leading the Florida Blue's master data management strategy. During the majority of the 5010 migration, I was the Senior Director of Provider Connectivity Solutions, managing and monitoring the efficient and effective processing of compliant electronic transactions to ensure business continuity. Florida Blue is the largest health Plan in the state of Florida with over 4 million members and covering over 15.5 million lives across 16 states through its affiliated companies.

Florida Blue began planning for the 5010 implementation along with the rest of the industry early and understood the need to implement successful 5010 by the January 1, 2012 original mandate date. This required that certain steps had to be through heavy collaboration with both internal and external stakeholders. These included a controlled migration, communication plan and a focus on continuity. Additionally, Florida Blue and plan nationally, had to adapt 'on the fly' to two 90 day extensions leading to a final implementation date of June 30, 2012.

The primary theme across all providers was that initial cross industry, cross stakeholder collaboration was low, but the primary driver for overall success was the rapid increase in collaboration leading to greater transparency, leveraging of root cause analysis and resolution and a more unified level of communication.

Controlled Migration:

Florida Blue implemented a production validation process (PVP) in April 2011 with select vendors and providers. The PVP process by definition was a highly successful controlled migration into the HIPAA 5010 production environment to provide an industry-wide end-to-end test. This was accomplished through:

- Identifying the top submitters (clearinghouses and direct submitters) that provided 80% of our transaction volume
- Scheduled two or more controlled HIPAA 5010 submissions for the identified submitters deemed as "flash cuts"

- Provider submitted a 5010 file with volume of 500 to 1500 5010 transactions; and
 - Provider reverted back to 4010 format
- Florida Blue, the submitters and respective providers monitored and analyzed the process results
- Submitters were moved to a full 5010 production submission following the successful processing of controlled files. Success was defined as limited to no business impact to internal and external parties (“industry-wide”).
- The controlled migration method was highly successful and overcame the limitation of many stakeholders to otherwise perform end to end testing.

Business Continuity Monitoring:

The Production Validation Process allowed Florida Blue to collaborate with submitters/providers to ensure the efficient and effective processing of their 5010 transactions; while providing reasonable assurance of business continuity (including revenue management, operational efficiency, reporting effectiveness and compliance). Florida Blue implemented a Business Continuity Monitoring Program by first establishing a cross functional team that monitored the 5010 submissions and results.

The cross-functional team:

- Identified systemic and operational issues caused by the 5010 transactions;
- Assessed the business disruption rating of identified issues using a consistent risk methodology;
- Worked collaboratively with internal and external partners to plan remediation;
- Monitored and managed the issue remediation; and,
- Communicated significant issues and remediation efforts to all impacted parties (internal and external) as well as non-impacted parties where collaboration would be beneficial to their efforts

Collaboration:

Florida Blue understood the need to engage and collaborate with both internal and external stakeholders to experience a successful HIPAA 5010 implementation. We conducted provider and vendor outreach on the implementation through various channels:

- Hosted weekly “Open Line Friday” calls with external participants including large and small practices and vendors to communicate our implementation status as well as a resource of information sharing on emerging issues.
- Hosted “internal 5010 Thursday” calls to keep the front line staff and provider advocates up to date on the implementation status.
- Established a public mailbox for all questions and comments related to Florida Blue and HIPAA 5010.
- Continuous submitter and provider outreach to determine their HIPAA 5010 readiness.

As a result of the high levels of collaboration stakeholders were able to address and mitigate the concerns. As we all recall, a few of the concerns included:

- P.O Box issue for billing and rendering provider;
- Impact of Errata in the midst of the implementation ;
- Data redundancy
- Automated Business Rule challenges
Florida Blue processing challenges due to automated business rule.

Primary Challenges:

- Providers and vendors were slow to accept the production testing concept due to operational risk.
- Limited ability to test a sufficient volumes of relevant electronic transactions in a “production-like” test environment from End to End
- Vendors and payers were out of sync for testing efforts and timing due to the issuance of the Errata and individual competing projects
- After the first extension, many providers lost momentum or further delayed implementation.
 - The additional time applied compression to the ICD10 project implementation
 - Applied compression to other mandates
 - Reduced available funding for other mandates due to the increased cost of continued 4010 maintenance and support
 - Had limited impact to 5010 readiness due to clearinghouse up-coding and ‘moving target’ syndrome (assuming more time is available as the date will continue to move)

Results:

By April 1st, most providers were submitting in 5010 and FL Blue discontinued its 4010 processing, relying on its clearinghouse to up-code the remaining 4010 submissions.

As of today, Florida Blue receives 5010 for:

- 99.98% of the 837 claims;
- 99.98% of 270/271 eligibility and benefits;
- 99.40% of 276/277

Lessons Learned:

From the Florida Blue (a payer) subjective perspective with a level of industry validation through continued collaboration and attendance at industry conferences, the key elements for a successful industry mandate implementation are:

- Industry stakeholder collaboration (including but not limited to providers, practice management and billing systems, clearinghouses and payers);
- Continuous proactive monitoring and management of business continuity;
- Ability to operate in dual mode both pre- and post-implementation where applicable;
- Continuous transparency between all industry stakeholders;

- Adherence to mandate timelines;
 - Timelines should be set by a process that is based on industry benchmarking and a collaborative understanding that identifies the ‘ability to be ready’;
 - Allows stakeholders to have reliable plans, budgets and resources available, which is even more critical as we approach compressed waves of compliance and mandates;
 - *This statement about timeline adherence is not a commentary on the dates currently chosen, only that once dates are set, that adherence be maintained to avoid the impacts previously mentioned. It is also not a commentary on the process leading to dates that may have shifted during 5010 or prior mandates, rather it is only focused on the impact and the potential application of these lessons learned to future mandates, where applicable, including ICD10.*

Closing

I want to thank the subcommittee, stakeholders and other attendees for the opportunity to provide one Payer’s perspective on the lessons learned throughout the implementation of HIPAA 5010.