

Operating Rules: Medicaid Impacts

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Business needs of the health care industry the operating rules intend to address

- Operating rules can be speculative
 - Difficult to justify budget if business need has not been identified (demand low, outcome uncertain, initial cost high) or if business need already addressed



Efficiency improvement opportunities for administrative and/or clinical processes in health care, and strategies to measure impact

 Standards and operating rules apply to EDI, which can become a separate processing stream when compliance is the goal



Potential impact of the operating rules on the daily workflow/transaction process; administrative costs, required capabilities and agility to implement the operating rules changes

- Medicaid is not a business
 - Not in control of revenue
 - Often don't control processes
 - dependent on another legislative layer, delaying ability to respond
- Data content rules require process changes outside of EDI
- Efforts to ensure compliance can have unintended impacts on innovation/efficiencies



Potential emerging or evolving clinical, technical and/or business advances the operating rules intend to address or facilitate

- Currently, the EHR incentive program, the Medicaid Information Technology Architecture, quality improvement initiatives seek the same goals but are on separate tracks
- The complexity of the regulatory environment puts many SMAs in a reactive mode



Potential impact and/or improvement to health care related data and/or data infrastructure?

- Aligning infrastructure rules should promote more uniform development, but not necessarily use
- State Medicaid Agencies may not house all the elements of the required data infrastructure

