NCVHS Presentation

January 18th, 2023

CHIAPAS

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Who are we? How are we connected with X12?

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- We are a “boutique” healthcare integration software firm founded in 2010
- Our clients license our software to create in-house EDI solutions with a minimal learning curve
- We are an X12 licensing partner, and X12 invited us to participate in the 8020 Proof-of-concept Program
- We have successfully incorporated the X12 technical materials on 8020, and would like to share some conclusions based on that effort

5010 vs. 8020 – How hard is it?

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- For a common, simple provider claim scenario, what would an 8020 file look like, and how hard would it be to implement?

5010 vs. 8020 – How hard is it?

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```
ISA*00*..........*01*..........*ZZ*SAMPL_SENDRID..*ZZ*SAMPL_RECVRID..*231220*1454*^*00501*100000054*0*P*:~
GS*HC*SENDR_ID*RECVR_ID*20231220*1454*1*X*005010X222A1~
ST*837*100000001*005010X222A1~
BHT*0019*00*BAT1000000*20231220*1454*CH~
NM1*41*2*SAMPLE HMO*****46*150001342~
PER*IC*SAMPLE*TE*4155551212~
NM1*40*2*SAMPLE BILLING PROVIDER*****46*150001009~
HL*1**20*1~
NM1*85*2*SAMPLE HMO*****XX*1234568917~
N3*400 FICTION ST~
N4*SAN FRANCISCO*CA*941170001~
REF*EI*150001342~
HL*2*1*22*0~
SBR*P*18**GRP0001*****HM~
NM1*IL*1*HASHBROWNS*ZACHARY****MI*SUB000000003~
N3*1003 FICTION ST~
N4*SAN FRANCISCO*CA*941170001~
DMG*D8*19690424*M~
NM1*PR*2*SAMPLE HMO*****XV*1234568917~
N4*SAN FRANCISCO*CA*941170001~
CLM*PAT00001503*140***11:B:1*Y*A*Y*Y~
REF*D9*CLM0000000048~
HI*ABK:Z0000~
NM1*82*1*GRANITE*GARY****XX*2343678910~
LX*1~
SV1*HC:99215*140*UN*1***1~
DTP*472*D8*20231217~
REF*6R*CLM0000000048-01~
SE*27*100000001~
GE*1*1~
IEA*1*100000054~
```

CURRENT STATE – 837 Prof 5010

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```
ISA*00*..........*01*..........*ZZ*SAMPL_SENDRID..*ZZ*SAMPL_RECVRID..*231220*1454*^*00802*100000054*0*P*:~
GS*HC*SENDR_ID*RECVR_ID*20231220*1454*1*X*008020X323~
ST*837*100000001*008020X323~
BHT*0019*00*BAT1000000*20231220*1454*CH~
NM1*41*2*SAMPLE HMO*****46*150001342~
PER*IC*SAMPLE*TE*4155551212~
NM1*40*2*SAMPLE BILLING PROVIDER*****46*150001009~
HL*1**20*1~
NM1*85*2*SAMPLE HMO*****XX*1234568917~
N3*400 FICTION ST~
N4*SAN FRANCISCO*CA*941170001~
REF*EI*150001342~
HL*2*1*22*0~
SBR*P*18**GRP0001*****HM~
NM1*IL*1*HASHBROWNS*ZACHARY****MI*SUB000000003~
N3*1003 FICTION ST~
N4*SAN FRANCISCO*CA*941170001~
DMG*D8*19690424*M~
NM1*PR*2*SAMPLE HMO*****XV*1234568917~
N4*SAN FRANCISCO*CA*941170001~
CLM*PAT00001503*140***11:B:1*Y*A*Y*Y~
DTP*523*D8*20231220~
REF*D9*CLM0000000048~
HI*ABF:Z0000~
NM1*82*1*GRANITE*GARY****XX*2343678910~
LX*1~
SV1*HC:99215*140*UN*1***1**Y**N*N~
DTP*472*D8*20231217~
REF*6R*CLM0000000048-01~
SE*28*100000001~
GE*1*1~
IEA*1*100000054~
```

FUTURE STATE – 837 Prof
8020

5010 vs. 8020 – How hard is it?

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ISA*00*..........*01*..........*ZZ*SAMPL_SENDRID..*ZZ*SAMPL_RECVRID..*231220*1454*^*00802*100000054*0*P*:~
GS*HC*SENDR_ID*RECVR_ID*20231220*1454*1*X*008020X323~
ST*837*100000001*008020X323~
BHT*0019*00*BAT1000000*20231220*1454*CH~
NM1*41*2*SAMPLE HMO*****46*150001342~
PER*IC*SAMPLE*TE*4155551212~
NM1*40*2*SAMPLE BILLING PROVIDER*****46*150001009~
HL*1**20*1~
NM1*85*2*SAMPLE HMO*****XX*1234568917~
N3*400 FICTION ST~
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HL*2*1*22*0~
SBR*P*18**GRP0001*****HM~
NM1*IL*1*HASHBROWNS*ZACHARY****MI*SUB000000003~
N3*1003 FICTION ST~
N4*SAN FRANCISCO*CA*941170001~
DMG*D8*19690424*M~
NM1*PR*2*SAMPLE HMO*****XV*1234568917~
N4*SAN FRANCISCO*CA*941170001~
CLM*PAT00001503*140***11:B:1*Y*A*Y*Y~
DTP*523*D8*20231220~
REF*D9*CLM0000000048~
HI*ABF:Z0000~
NM1*82*1*GRANITE*GARY****XX*2343678910~
LX*1~
SV1*HC:99215*140*UN*1***1**Y**N*N~
DTP*472*D8*20231217~
REF*6R*CLM0000000048-01~
SE*28*100000001~
GE*1*1~
IEA*1*100000054~
```

FUTURE STATE – 837 Prof 8020
(CHANGES HIGHLIGHTED)

5010 vs. 8020 – How hard is it?

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- The *outbound* Claims can be implemented fairly easily for the most common situations, but changes to the *inbound* remittance file means that additional work is required for claim reconciliation
- From the perspective of a Provider, these changes are not too complex and tie remittance advice remark codes directly to the adjustment, giving more detail about why the adjustment was made

```
CAS*CO*45*99.7~
…
MOA***N794~
```

→

```
RAS*99.7*CO*45:HE:N794~
```

8020 X12 XML

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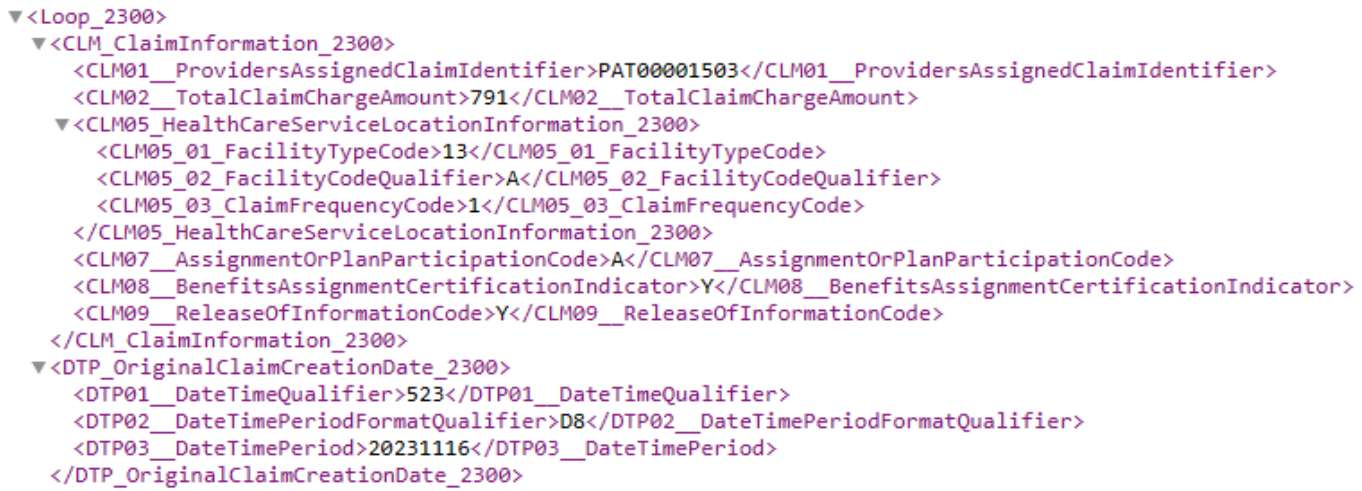
- X12 is also introducing an XML schema as an alternative method to transmit and receive compliant transactions
- The actual contents are the same as a normal 8020 EDI file, but the XML format removes the need to make a custom “8020” parser, smoothing the path to adopting the new standards



8020 Implementation

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- For many basic billing scenarios, Providers can send 8020 bills by making a header change and adding a new segment, and then parsing the new remittance advice that comes back
- For non-basic scenarios, such as implementing Unique Device Identifiers, rebilling, etc., this will require deeper engineering changes on both provider and payer systems
- Finally, X12 is proposing a new way to transmit data in a way that can ease the transition to the new standards

Why make the switch?

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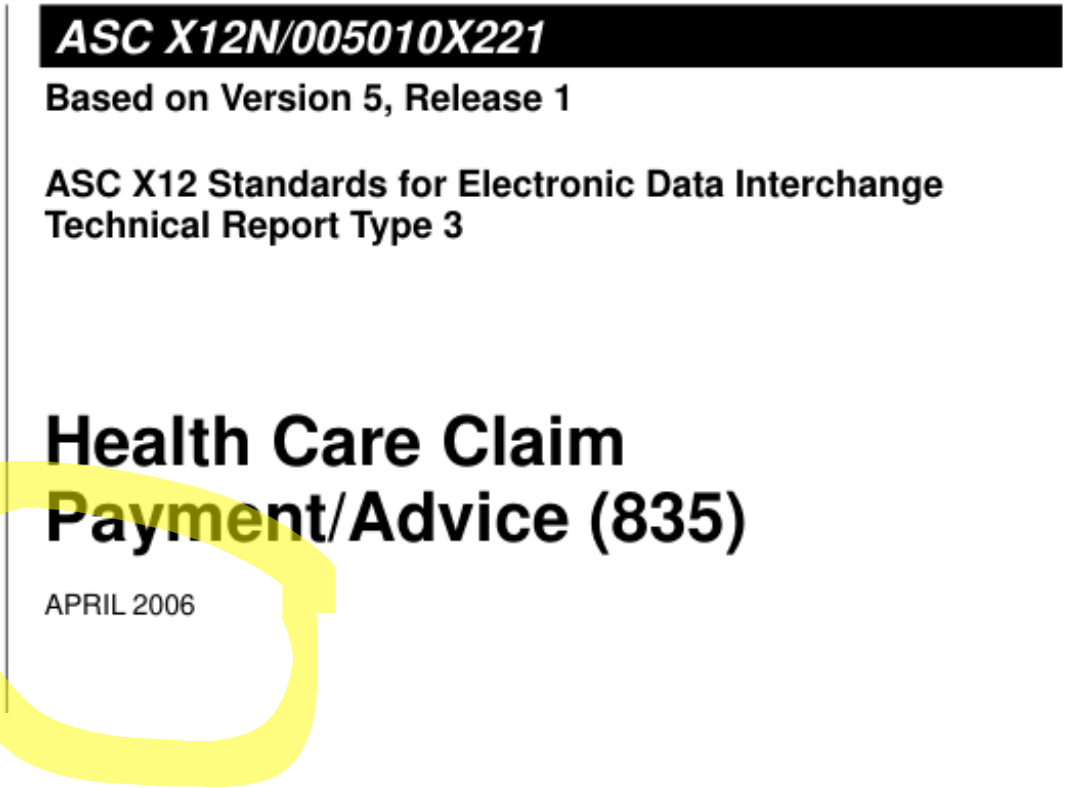

- The original 5010 Implementation Guides were published in 2006 – almost **seventeen years** ago
- Changes have been proposed to the standards to reflect the needs of the *modern healthcare system* as it exists now, not then

Conclusion

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- Our EDI infrastructure is a national super power! It is used not just for financial transactions, but to help generate HEDIS childhood immunization rates, analyze trends in patient outcomes, and much more
- The HIPAA mandate to **improve efficiency** can only be achieved when all trading partners are all on the exact same page.