

# NCVHS Hearing on the New and Updated CAQH CORE Operating Rules



---

**Nora Iluri, PhD**  
Vice President of Revenue Cycle  
athenahealth

January 19<sup>th</sup>, 2023

# We are athenahealth

---

## Healthcare as it could be

Our Vision is to create a thriving ecosystem that delivers accessible, high-quality, and sustainable healthcare for all.

We are pursuing this through our medical record, revenue cycle, patient engagement, and care coordination service offerings.

We are highly aligned with CAQH CORE's vision to bring the healthcare industry together to make sharing business information more automated, predictable and consistent.

**Nora Iluri, PhD** - VP of Product Management Collector, athena's Revenue Cycle Solution

**Paul Brient, MBA** - EVP and Chief Product Officer. Member of the CAQH CORE Board.

**athenahealth is CAQH CORE certified-**  
we participate in operating rule development as a member of CAQH CORE work groups, straw poll and ballot input.

# athenahealth provides a leading platform for ambulatory practices

Solutions integrated in the physician workflow and optimized for impact

## athenaCollector

### Revenue Cycle Management

Integrated technology-enabled revenue cycle solutions to manage all of the administrative and financial interactions with payers and patients, including eligibility, claims submission, denials, appeals, posting, a robust set of patient payment tools, and practice management

## Marketplace & ecosystem

### Integrated Partner Solutions

Growing set of partners integrated into the athenaOne ecosystem



## athenaClinicals

### Clinician Experience & Support

Comprehensive clinical solutions including encounter workflow, quality management, longitudinal patient records, care management, and telehealth

## athenaCommunicator

### Patient Engagement

Patient engagement tools including patient outreach, scheduling, check-in, results delivery, and medication adherence

**One version of code**

**Proprietary  
data lake**

**6T+**

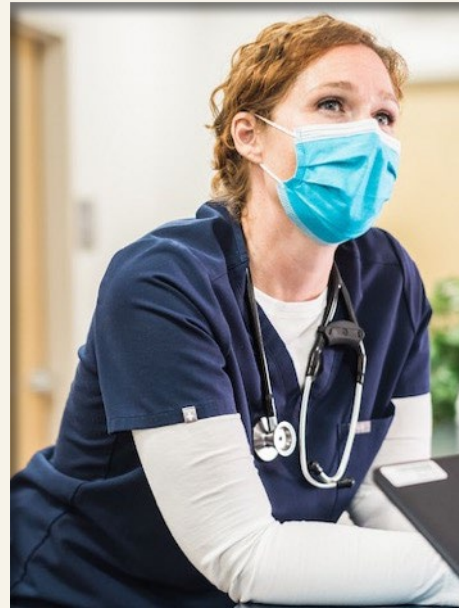
rows of production data

**#1 rated EMR mobile app**

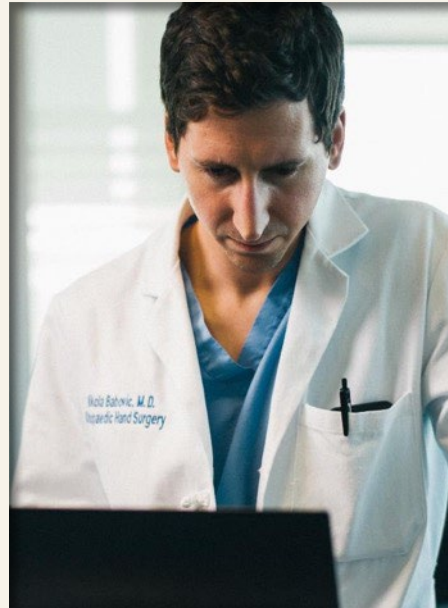


# Today's athenahealth at a glance

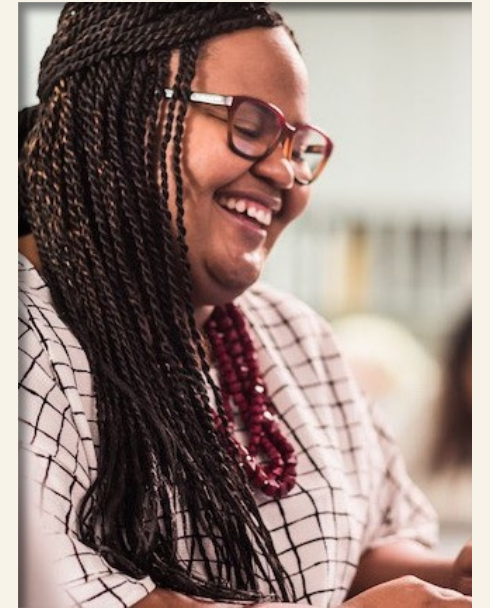
**155K+**  
providers on  
athenaOne



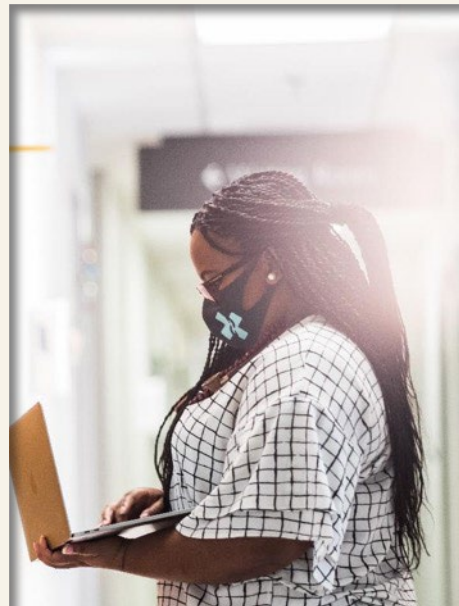
**170M+**  
unique patient  
records



**300M**  
claims billed



**14%**  
bookings CAGR  
since 2019<sup>2</sup>



**95.3%**  
gross revenue  
retention<sup>3</sup>



**108.3%**  
net revenue  
retention<sup>3</sup>

# Proposed Operating Rules address the most impactful asks that help us serve patients better & reduce administrative costs for all

1

Adoption of new and updated Operating Rules improve digital data exchange and transactions, driving the quality and timeliness of care and a reduction of costs

2

Attachment Standards establish a necessary foundation for the electronic exchange of health information; operating rules ensure consistent construction of solutions

3

Operating Rules directly support technology advancements and provide an on-ramp for industry driving adoption

4

Federal adoption of infrastructure and connectivity operating rules help ensure the consistency and fairness of resulting patient care, speed adoption, and reduce the cost to maintain



1

**athenahealth processes 700 Million+ eligibility requests each year through a single system that connects payers & practices across the US**

**300M** Claims processed in 2022

**41B+** Net collections in 2022

**700M+** Eligibility requests in 2022

**5M+** Service Eligible Orders processed by our premium prior auth service

## Our top pain points

### **Insufficient automated means to communicate**

Payers requiring us to use error prone expensive manual portal, and voice work instead of automation

### **Insufficient or missing information**

to give practices and patients a clear view of coverage and costs

### **Lack of sufficient standards**

with data returned in unstructured fields (e.g., MSG segment) or standard fields used differently by each payer requiring custom decoders or manual review

1

# Adoption of new and updated Operating Rules improve digital data exchange and transactions, driving the quality and timeliness of care and a reduction of costs

## We support Data Content Rules

Given that our goal is to better serve our practices and their patients, the recommended data content rules:

- **Eligibility & Benefits** – continues to improve transparency into coverage and cost for our practices and their patients
- **Attachments for Prior Auth and Claims** – helps move the industry towards attachment automation, improving quality and timeliness
- **Single Patient Attribution Data** – supports the expansion of value-based care contracts to help shift incentives from utilization to outcomes

## Most Impactful Requirements

- Requiring the use of specific codes to indicate what service or benefit is available for **telemedicine**
- Expansion of both the discretionary and mandatory **STC codes and addition of procedure codes** to get more accurate responses for coverage & cost
- Indication of whether a **prior authorization** is required or not
- **Requiring specific codes** and reference data to improve data interoperability
- Path to codifying and exchanging **single patient attribution** information to support a growing value-based care population

2

**Attachment Standards establish a necessary foundation for the electronic exchange of health information; operating rules ensure consistent construction of solutions**

**\$828 million**

**estimated savings per year**

from adopting attachments for prior authorization and claims based on the CAQH Index report.

Electronic attachments would not only save administrative burden and costs, but it would also improve claim and prior authorization

**quality and turn around time**

significantly benefiting patients.

**athenahealth would like to ask NCVHS to recommend that HHS include the attachments operating rules in the final rule for the attachment standards.**

Consistent and efficient implementation of the proposed standards would:

- Support faster and higher quality responses for patients
- Reduce administrative costs across the industry estimated at \$828M
- Aid adoption of non-X12 methods, supporting uniform, gradual adoption of new technologies



3

# Operating Rules directly support technology advancements and provide an on-ramp for industry driving adoption



## We use X12 and modern non-X12

athenahealth is a pioneer adopter of newer API technologies, such as HL7 FHIR, and also maintains consistent support for X12 standards.



## Gradual transition necessary

Movement from X12 standards to HL7 standards will not occur overnight and regulations or other guidelines must provide a framework that supports and aligns old and new technologies.



## CAQH CORE is an effective glidepath

The proposed CAQH CORE Operating Rules provide uniformity without being overly prescriptive of the format used, establishing a scenario wherein stakeholders can gradually implement new requirements and move away from outdated modalities

# 4

## Federal adoption of infrastructure and connectivity operating rules help ensure the consistency and fairness of resulting patient care, speed adoption, and reduce the cost to maintain

### We Serve Practices Nation Wide

- We see significant variation state to state in data, connectivity, and business processes.
- This creates significant burden for payers, vendors and practices to build and maintain solutions that serve all stakeholders.
- It also creates unnecessary variation for patients across the US creating potential inconsistencies and inequalities in care.

### Federal Adoption of Infrastructure & Connectivity Rules

- We could build out our solutions once to serve all practices across the US
- Reduces our cost to build and maintain both the systems on our side and the services they support
- A single national build out accelerates availability for all practices and their patients across the US, thus improving quality and timeliness of transactions for all

# Thank you

Contact us at 800-981-5084 or visit [athenahealth.com](https://athenahealth.com) to learn more