



**CAQH CORE
Attachments Webinar
Series, Part V**

**Case Study on Vyne's Use of
Electronic Dental Claim
Attachments**

Wednesday, July 25, 2018
2:00 – 3:00 pm ET

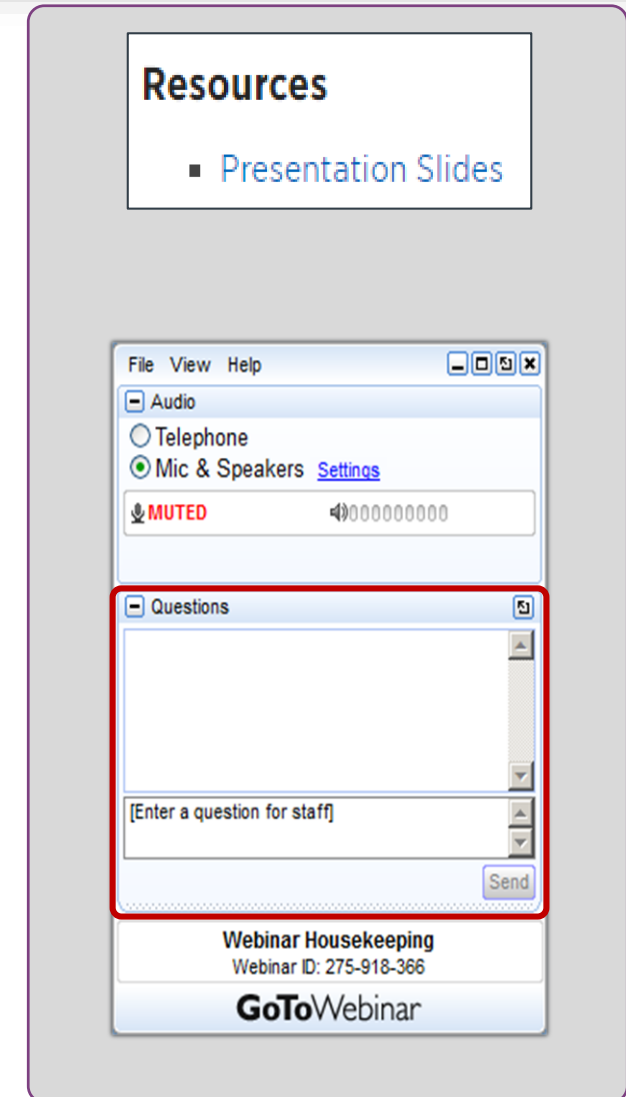
Logistics

Presentation Slides and How to Participate in Today's Session

You can download the presentation slides at www.caqh.org/core/events after the webinar.

- Click on the listing for today's event, then scroll to the bottom to find the Resources section for a PDF version of the presentation slides.
- A copy of the slides and the webinar recording will be emailed to all attendees and registrants in the next 1-2 business days.

Questions can be submitted **at any time** using the **Questions panel on the GoToWebinar dashboard.**



Session Outline

- Background & Overview of CAQH CORE Attachments Work
- Company Profile and FastAttach Description
- Customer/Provider Experience
- Audience Q&A

CAQH CORE thanks the guest presenters for today's webinar.

Nicole Smith

Vice President, Payer & Partner
Services
Vyne Corp.

Philip Socoloff

Vice President for Information
Systems & Technology/Revenue
Cycle Management
VSM Management c/o Southern
Dental Alliance

CAQH
CORE

Background & Overview of CAQH CORE Attachments Work

Taha Anjarwalla
CAQH CORE Manager

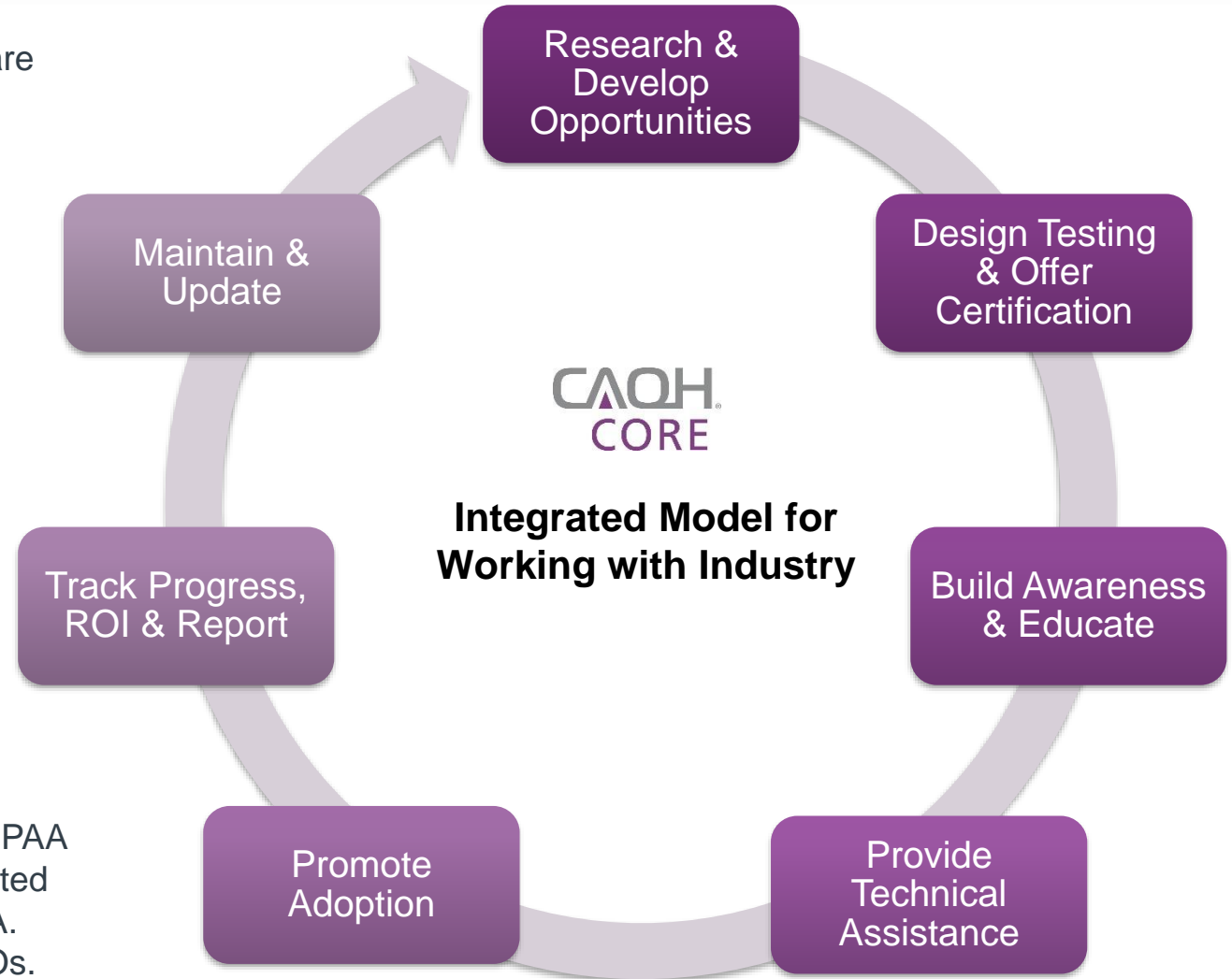
CAQH CORE Mission & Vision

MISSION Drive the creation and adoption of healthcare operating rules that **support standards, accelerate interoperability** and align administrative and clinical activities among providers, payers and consumers.

VISION An **industry-wide facilitator** of a trusted, simple and sustainable healthcare data exchange that evolves and aligns with market needs.

DESIGNATION Named by **Secretary of HHS** to be **national author for three sets of operating rules** mandated by Section 1104 of the Affordable Care Act.

BOARD **Multi-stakeholder.** Voting members are HIPAA covered entities, some of which are appointed by associations such as AHA, AMA, MGMA. Advisors are non-HIPAA covered, e.g. SDOs.



CAQH CORE Operating Rule Overview

CAQH CORE is the [HHS-designated Operating Rule Author](#) for all HIPAA-covered transactions, including Claims Attachments.
HIPAA covered entities conduct these transactions using the CAQH CORE Operating Rules.

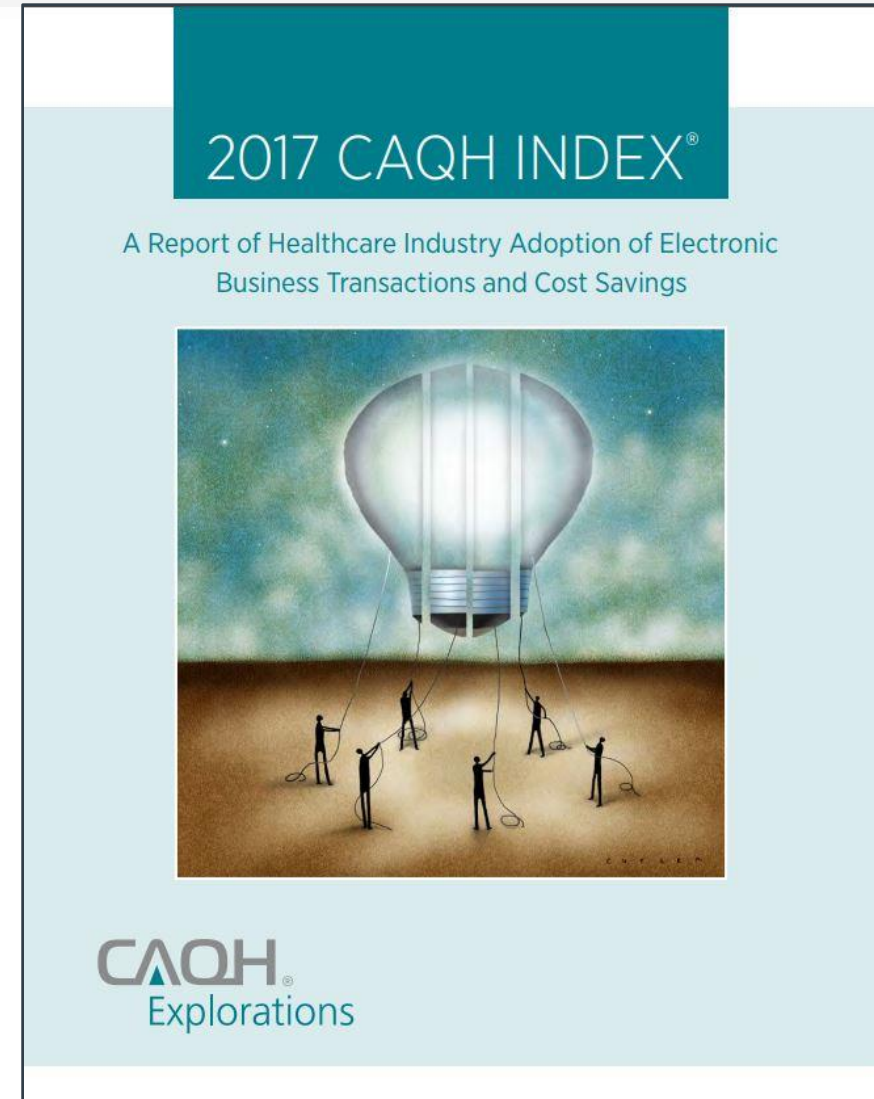
	Phase I	Phase II	Phase III	Phase IV
Transactions	<ul style="list-style-type: none"> Health Plan Eligibility — X12 270/271 	<ul style="list-style-type: none"> Health Plan Eligibility Claim Status — X12 276/277 	<ul style="list-style-type: none"> Electronic Funds Transfer (EFT) Health Care Payment and Remittance Advice (ERA) — X12 835 	<ul style="list-style-type: none"> Health Claims (or equivalent encounter information) — X12 837 Referral, Certification and Authorization — X12 278 Enrollment/ Disenrollment in Health Plan — X12 834 Health Plan Premium Payments — X12 820
Manual to Electronic Savings per Transaction (2017 CAQH Index)	Eligibility: \$6.46	Eligibility: \$6.46 Claim Status: \$7.98	Claim Payment: \$0.88 ERA: \$4.14	Claim Submission: \$2.35 Prior Authorization: \$6.84
	Mandatory			Voluntary

Reminder: There is no formal HIPAA Health Claims Attachments standard(s).

2017 CAQH Index Report

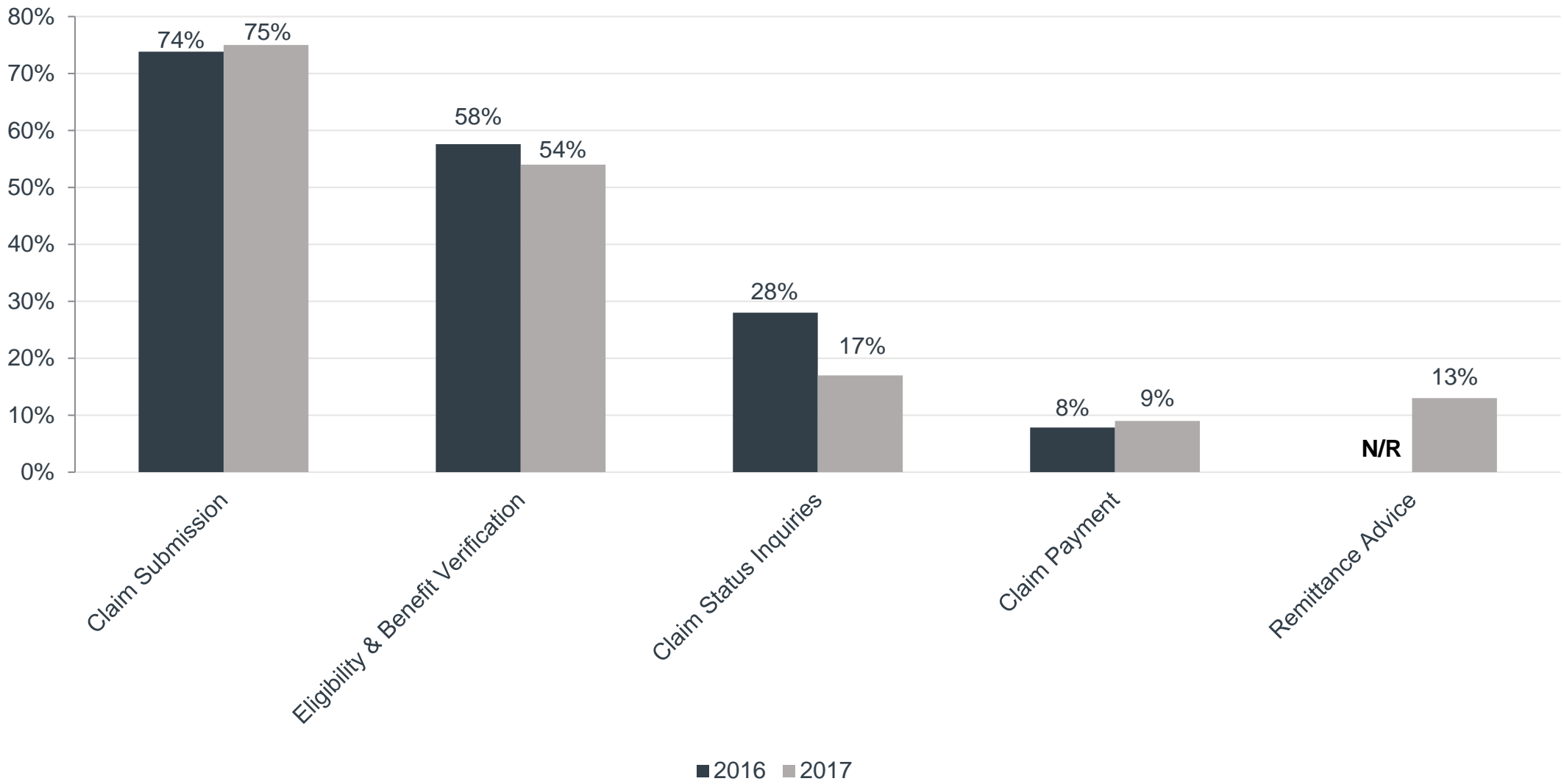
The [2017 CAQH Index report](#) – which is based on data from over 5.4B transactions – reported on adoption and cost of electronic claim transactions for the first time. Key findings:

- Only **six percent** of healthcare claim attachments are submitted to medical health plans electronically, with the remaining sent either via fax or mail.
- The adoption of electronic claim attachments is isolated, as most medical health plans report **100% of claim attachments are submitted manually**.
- Only use of the **X12 standard** for claim attachments was reported by participating health plans; no use of **the HL7 standard** for claim attachments was reported.



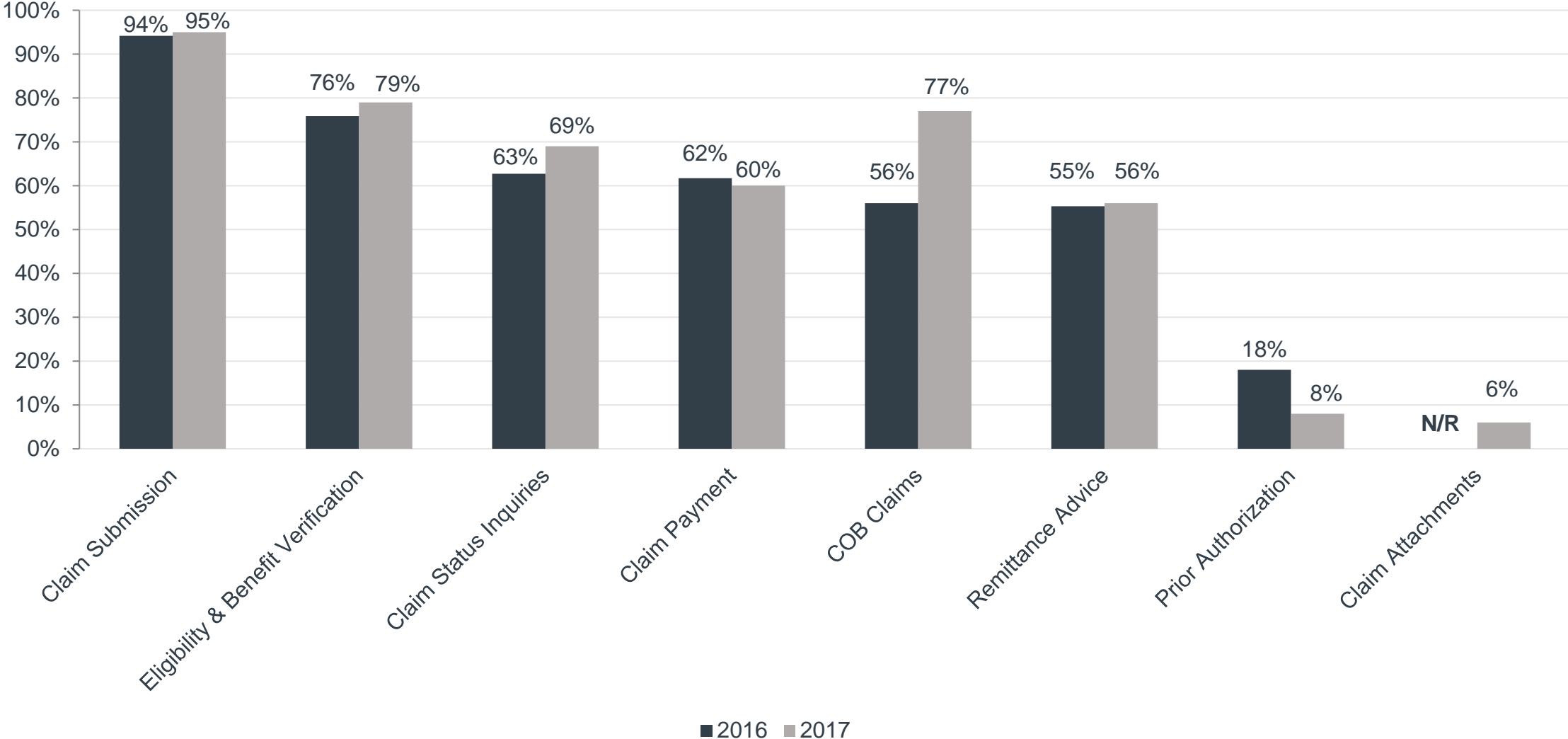
2017 CAQH Index Report

Dental Industry Adoption



2017 CAQH Index Report

Medical Industry Adoption



Attachment Standards & Operating Rules

Moving the Industry Forward

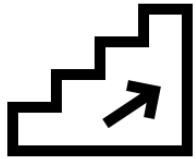
Upcoming HHS Activity

HHS published their [Spring Unified Agenda](#) in May 2018 and included an expansion of the scope of the proposed rule for an attachment standard to adopt:

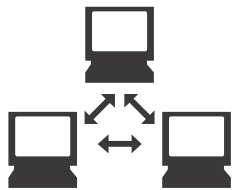
- **Standards for health care attachments transactions and electronic signatures** to be used in conjunction with health care attachments transactions.
- **Operating rules that require acknowledgments** to be used for the eligibility for a health plan, health care claim status and health care electronic funds transfers (EFT) and remittance advice transactions.
- **Acknowledgments transactions standards** for the health care claim status, enrollment and disenrollment in a health plan, health plan premium payments, coordination of benefits, referral certification and authorization and health care attachments transactions.
- **The ASC X12 version 6020 standard for the referral certification and authorization transaction** (from ASC X12 version 5010).

Attachments Project Goal

CAQH CORE Goal: Ensure electronic attachments are a work-flow friendly feature in our healthcare system.



Opportunity areas for operating rules related to attachments are significant. CAQH CORE would not only develop operating rules to automate the Attachments process, but also drive adoption to realize meaningful change.



Electronic attachments should ease healthcare system workflow. The lack of an electronic attachment standard is a challenge for providers and health plans.

- Work is moving forward by HL7, a standards development organization, on a standard for claims attachments.
- There is a wide range of opinions on what standards would best serve the industry.

CAQH CORE Efforts on Attachments

Scope of Work

Completed

Research

CAQH CORE surveyed attachments initiatives occurring across the industry including pilot projects, work groups, conferences, publications and regulatory activities.

Planning

CAQH identified a target list of key stakeholders for an environmental scan and developed an interview guide to facilitate data collection efforts.

In Progress

Environmental Scan

Evaluate trends in transition to electronic attachments, estimate cost savings of automation and identify opportunity areas to support provider adoption. Publish key findings.

Industry Education Series

CAQH CORE will continue to host education events about attachments.

Activities in 2018 and Beyond

Advisory Group

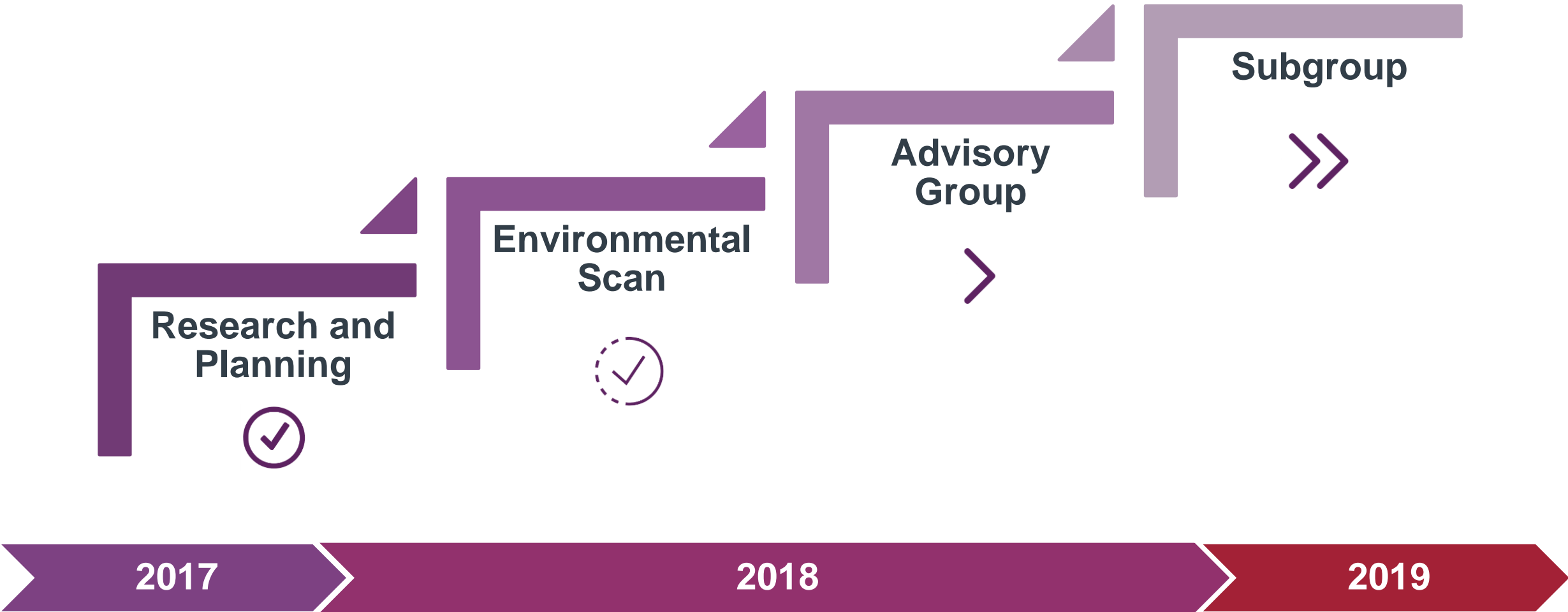
Review environmental scan findings to develop list of high priority opportunity areas to recommend to an Attachments Subgroup.

Subgroup

Review Advisory Group recommendations to identify areas to be addressed in attachment rule writing.





CAQH CORE Efforts on Attachments

Key Milestones & Timeline



Attachments Environmental Scan

Stakeholder Engagement & Participation

	Outreach Engagement	Interviews Pending	Interviews Completed
 Health Plans	35	3	6
 Providers	28	-	10
 Vendors	59	4	12
 Other	3	-	1

Interviews Pending

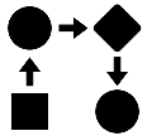
7

Interviews Completed

29

Environmental Scan Overview

Attachment Profiles



Volumes/Resources



Business Needs



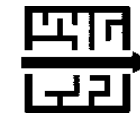
Data Content



Infrastructure



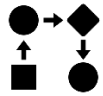
Adoption Barriers



Attachments Environmental Scan

Early Findings

Attachment Profiles



Mail and Fax: Health Plans are primarily receiving additional documentation to support claims, prior authorization and appeals via mail and fax; followed by web portal. There is minimal support and adoption for the submission of attachments through EDI by health plans and PMS vendors.

Trending Markets: Dental and Workers Compensation markets have increased adoption and support for the submission of attachments in an electronic format.

Time/ Resources



Staff Resources: A regional health plan reported approximately 792 hours are spent each week processing attachments received via mail, fax and web. A regional health system reported that 19 FTEs are dedicated to managing and processing attachments.

Claim Adjudication: Providers report on average it takes 55 days via mail, 22.5 days via fax and seven days via portal for a health plan to adjudicate a claim with an attachment.

Business Needs



Solicited Attachment: A majority of stakeholders report that a real-time solicited attachment scenario would be the preferred method for sending additional documentation during submission of a claim or a prior authorization request.

Clear, Unambiguous Requirements: Providers are concerned that they may revert to manual processes or send over-documented unsolicited attachments without specific criteria that define additional documentation requirements from payers.

Attachments Environmental Scan

Early Findings

Data Content



Common Formats: Stakeholders report that PDF's and image files (.png, .jpeg, gif.) are the most common data file types that are electronically sent/received today.

Structured Data: Health plans and vendors report that a standard for structured data should be mandated for adoption such as HL7 CDA as this will help IT systems to move to an auto-adjudication environment.

Infrastructure



Acknowledgements: Stakeholders report the use of acknowledgments for when an attachment is successfully received is minimal. As result, providers revert to re-sending attachments or incur higher cost by sending documentation via certified-mail.

Operating Rules: Stakeholders report that infrastructure rules such as connectivity & security, response time, system availability, acknowledgments and companion guides should be considered and evaluated alongside an attachments standard.

Adoption



Adoption Challenges: Stakeholders report that implementation of electronic attachment standard would reduce administrative burden to their organizations, but many stakeholders do not want to make the investment until an attachments standard is mandated.

Pilot Programs: Most health plans and vendors have launched attachment pilot programs working with the following attachment protocols: X12 275, DIRECT Messaging, HL7 FHIR, Clinical Data Repositories.

[Use and Adoption of Attachments in Healthcare Administration – Part I](#)

[Use and Adoption of Attachments in Healthcare Administration – Part II](#)

[Use and Adoption of Attachments in Healthcare Administration, Part III: Clinical Document Metadata for Attachments](#)

[Use and Adoption of Attachments in Healthcare Administration, Part IV: Clinical Document Architecture \(CDA\) Basics – Clinical Content \(Body\)](#)

You can download the presentation slides and view the recording at www.caqh.org/core/events.

Engage with CAQH CORE

Healthcare administration is rapidly changing. Be a part of CAQH CORE's mission to drive the creation of Attachment operating rules via the following current and future work efforts:

- **CAQH CORE Attachments Environmental Scan**
 - Provide insight into how your organization processes attachments today; which will inform potential opportunity areas for potential operating rules.
- **CAQH CORE Attachments Advisory Group**
 - Review key components of CAQH CORE Attachments Environmental Scan, discuss potential Attachments NPRM, review and provide feedback on an Attachment operating rule opportunity list.
- **CAQH CORE Attachments Subgroup**
 - Review Advisory Group recommendations; identify areas to address and write potential Attachment operating rules.



Represent your organization.



Work with others around the industry.



Present on CAQH CORE education sessions.

Polling Question 1

Is your organization interested in participating in the CAQH CORE Attachments environmental scan?

- Yes.
- No.
- Unsure/Need More Information.

Secure electronic claim attachment solutions



Vyne™ By the Numbers 2017

Years in Business

More than 20 years

Number of Practices / Offices

Medical = over 600 hospitals / health systems

NEA = over 55,000 dental practice offices / over 100,000 dental providers

Number of Plans & Payers

Medical = 50+ Payers

NEA = 750+ Dental Plans & Payers

Number of Images Transmitted

Medical = Over 4M images per month

NEA = Over 3M images per month



Encourage and promote the electronic submission of claims:

Paper claims & attachments are **eliminated**.

Mail room costs are **reduced**.

- As a secure platform for the electronic exchange of PHI and medical records, NEA eliminates the risk associated with paper records sitting unsecured on fax machines.
- We also enable electronic mailing of newsletters, plan updates, and credentialing documents.



Manual claim processing **workflows are automated** and the hassles of managing paper documentation are **eliminated**.

- Voice recording, fax, voicemail, call center monitoring.

Solutions can be **easily implemented** and cause **no provider disruption**.

- Providers can continue to use their existing Practice Management Systems and Clearinghouse for claims and revenue cycle management.

NEA works with Providers and Payers/ Health Plans to:

Produce better financial outcomes

- Significantly reduce print & mail/mail room expenses
- Eliminate paper based workflow
- Provide secure electronic communications for point-to-point and broad-based messaging
- Reduce number of pended and denied claims
- Increase auto-adjudication rates
- Provide access to the largest network of dental providers and payers
- Enable third party sharing and review
- Improve acceptance rates for claims requiring supporting documentation



Paper attachment cost breakdown

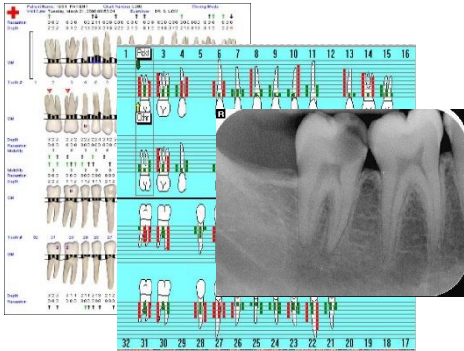
Breakdown of What Paper Attachments are Costing your Practice	
Claim Averages	
Number of claims per year	4480
% of claims requiring an attachment	50%
Cost of claim processing	\$0.45
Hourly wage (including benefits)	\$20.00
Per Paper Attachment	
Minutes locating paper attachment	4
Minutes copying paper attachments	4
Minutes mailing or faxing	4
Minutes re-filing denials	4
Monthly Paper Hassles	
Hours on the phone with payers	25
# of denials that must be re-sent	10
Hours tracking attachments	15
Wasted Office Supplies	
Copier cost per page	\$0.03
Cost of paper per page	\$0.01
Cost of postage per attachment	\$0.78
Cash Flow	
Annual interest rate (outstanding A/R)	6%
Days attachments spend in transit	6

Annual Costs of Paper Attachments	
Labor	\$22,186.67
Operating supplies	\$2,029.60
Total Annual Cost	\$24,216.27
Cost per paper attachment	\$10.81

Annual Cost of Attachments using FastAttach	
Hours submitting via <i>FastAttach</i> (2 mins per attachment)	74.7
Labor	\$1,493.33
<i>FastAttach</i> annual subscription & annual fee	\$443.00
Total Annual Cost	\$1,936.33
Cost Per Electronic Attachment	\$0.86

\$24,216.27
annual costs for paper attachments

What is *FastAttach*®?



Images and Other Supporting Documents



FastAttach is a compliant, HITRUST CSF Certified electronic claim attachment software that enables providers to create a single, uniquely numbered, electronic envelope containing all required images to support the coding on a single claim for adjudication.



Multiple documents and images can be placed into a single electronic attachment file for delivery to the payer.



DEMO

Customer/Provider Experience

Philip Socoloff

Vice President for Information
Systems & Technology/Revenue
Cycle Management
VSM Management c/o Southern
Dental Alliance

Key Challenges – (Single Direction Path Communication)

- Prior-Authorizations
- Imaging Evidence
- Clinical Necessity Narratives
- Coordination of Benefits (COB)
- Correspondence / Remittance
- Credentialing Documentation

DSO (Days Sales Outstanding) Improvements (15 – 30 days)

1. Expedited Authorized Patient Treatment
2. Clean Claim Adjudication (Denial Improvement)
3. Resubmission Turnaround
4. Improved Workflow
5. Reduced Mailing Costs
6. Documentation Transport Assurance (Skip Tracing)

Polling Question 2

If you are waiting to implement electronic claims attachments, what is the main reason? (Check all that apply)

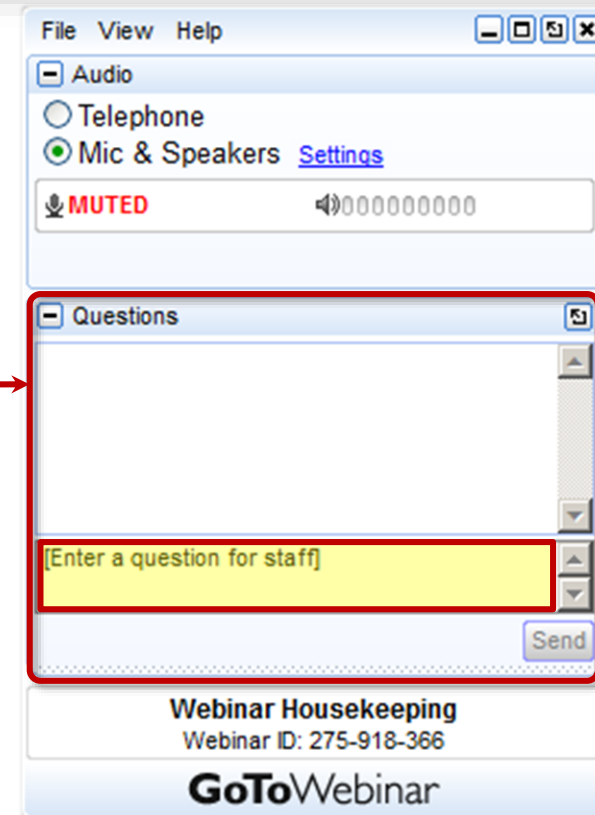
- Waiting on regulatory direction.
- Waiting on industry direction.
- Waiting due to budgetary constraints.
- Other (write answer in comments).

Audience Q&A

Please submit your questions

Enter your question into the “Questions” pane in the lower right hand corner of your screen.

You can also submit questions at any time to CORE@caqh.org



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Resources

- [Presentation Slides](#)

Upcoming CAQH CORE Education Sessions



CAQH CORE Attachments Update

Robert Bowman, CAQH CORE

Taha Anjarwalla, CAQH CORE

CAQH CORE Prior Authorization Update

Rachel Goldstein, CAQH CORE

Joe Holtschlag, AthenaHealth

Value-based Payment: Quality Measures

TUESDAY, AUGUST 23TH, 2018 – 2 PM ET

To register for this, and all CAQH CORE events, please go to www.caqh.org/core/events.

Thank you for joining us!



@CAQH

Website: www.CAQH.org/CORE

Email: CORE@CAQH.org

The CAQH CORE Mission

Drive the creation and adoption of healthcare operating rules that support standards, accelerate interoperability and align administrative and clinical activities among providers, payers and consumers.