

Final Plan for Reporter Cutover from Bulletin 220 to ANSI 837 medical bill reporting

- The initial reporter testing period begins 7/1/2008 and will last at least 3 months (7/1/2008 through 9/30/2008). All reporters currently submitting medical billing data in other states via the IAIABC standard are required to begin testing with Oregon on this date. If a reporter feels that this begin date for testing is not feasible, please see (proposed rule) OAR 436-009-0030(e) for a description of the waiver request requirements.
- Reporters will still be required to submit Bulletin 220 data for quarter 2 of 2008 (April-June, 2008).
- During the testing period, each reporter will send transactions of actual medical bill data once each week. If transactions are rejected due to errors submitted by the reporter, we expect the reporter to resubmit corrected transactions within 30 days.
- At the end of the 3-month testing period, the percentage of total transactions that were accepted will be calculated for each reporter. (accepted transactions / total transactions) This percentage will include rejected transactions that were resubmitted and accepted.
- If 80 percent of a reporter's initial and resubmitted transactions were accepted, that reporter will be approved for cutover to production. The data submitted during the test period will be ~~saved into~~ **removed from** the DCBS database and the reporter will ~~not~~ be required to ~~submit Bulletin 220 data for quarter 3, 2008 or beyond~~ **resubmit in ANSI 837 format all medical bill payments made from July 1, 2008 through the date of approval for production.** The reporter ~~shall continue to~~ **will** submit **all future** medical bill transactions in the ANSI 837 format per the weekly or monthly schedule agreed upon with DCBS.
- If the percentage of accepted transactions for a reporter is below 80 percent, that reporter will continue to submit transactions under an extended testing period **beginning October 1, 2008.** The data submitted during the initial 3-month testing period will be removed from the DCBS database and the reporter will be required to submit Bulletin 220 data for Quarter 3, 2008. We will ~~retain~~ **discard** the EDI transactions submitted during the **extended** test period.
- At the end of each month of the extended testing period, the percentage of total transactions that were accepted will be recalculated. If the percentage meets or exceeds the 80 percent threshold for acceptance, that reporter will be approved for cutover to production with the ANSI 837 format for medical bill reporting. The data submitted during the extended test period will be ~~saved into~~ **removed from** the DCBS database and the reporter will ~~not~~ be required to submit ~~Bulletin 220~~ **all medical payments in ANSI 837 format data from October 2008 on, including those bills previously reported as test data.** ~~for that quarter.~~

If you have questions or comments on this proposed cutover plan, please contact Gayle Parrish, EDI Coordinator, at 503/947-7626, gayle.m.parrish@state.or.us