

**Medical Quality Initiative
EDI Medical Reporting Payer to Jurisdiction
Executive Summary
March 9, 2007**

Project Background

On June 19, 2006, WCD Executive staff approved a project to develop a transition plan whereby DCBS would replace the current proprietary Bulletin 220 reporting with ANSI 837 EDI medical reporting. A project team consisting of cross-divisional representatives developed a charter and identified eight deliverables (see appendices 1 – 8):

1. Implementation materials, including transaction reporting outline (event table), data elements, and an edit matrix;
2. Analysis and recommendations related to needed resources to successfully implement EDI medical reporting;
3. Analysis and recommendations for a sequencing plan for implementation;
4. Summary of external stakeholder participation and feedback;
5. Recommendations for statutory and rule language revisions;
6. Analysis of current Bulletin 220 data and reporting mechanisms;
7. Analysis of the impact on and benefits for Oregon providers and payers; and
8. Analysis of usability of medical data with and without matching claim data.

The project team first completed an in-depth analysis of statutory and rule revisions, current Bulletin 220 data and reporting mechanisms, impacts and benefits for providers and payers, and usability of medical data with and without matching claims data (see appendices 5, 6, 7, and 8). The team also developed an analysis of resource needs to complete the project in cooperation with IMD staff (see Appendix 2).

In addition, the project team convened four stakeholder meetings and prepared a summary of participation and feedback (see Appendix 4). Prior to the meetings, the project team prepared essential documents, including a listing of “frequently asked questions” and a draft implementation timeline (see appendices 1 and 3). The stakeholder meetings were well-attended, and the project team prepared written responses to submitted questions. As reflected in the meeting notes, the stakeholders had very few concerns, and the concerns they expressed were easily addressed by the project team (see Appendix 4).

Team Recommendations

The MQI EDI project team recommends that WCD Executive Staff approve and adopt the following recommendations:

1. Implement ANSI 837 medical reporting according to the below recommended implementation plan:

Plan components:

- Charter a co-sponsored WCD/IMD project, commencing April 2007
- Prioritize the project on the DCBS two-year plan
- Adopt implementation timeline

- Publish Industry Notice April 2007
 - Phase 1: July 2008 commence testing of group 1 (Bulletin 220 reporters that are currently submitting medical data via ANSI 837 in other jurisdictions)
 - Phase 2: April 2009 commence testing of group 2 (SAIF)
 - Phase 3: October 2009 commence testing of group 3 (remaining Bulletin 220 reporters)
- Approve the Recommended Request for Information and distribute by March 15, 2007
- Determine budget parameters for consulting services by April 30, 2007
- Authorize necessary WCD resources, including a managerial and operational data steward
- Develop a communication and outreach plan with implementation date of September 2007

2. Develop an implementation and sequencing plan to collect data for all claims, including accepted nondisabling claims.

- Analysis will include proprietary, EDI, and other methodologies
- Sequencing plan will be in association with Regulatory Redesign projects
- Deliverables will be similar to EDI Medical Reporting

Conclusion

The team strongly feels that this project is uniquely positioned to take advantage of reporters' willingness and ability to report data via the EDI standard, due to the recent California mandate for this data. At the same time, Oregon regulators and stakeholders are facing the need for more, and better, medical data in the workers' compensation arena. The adoption of this reporting standard as quickly as possible will give Oregon a "head start" on developing a data-rich analysis environment for answering critical questions about medical costs in workers' compensation. An early announcement of the suggested July 2008 implementation date will allow Oregon to reserve its "slot" in reporters' implementation plans for medical data reporting, and will provide benefits to all participants in the workers' compensation system in Oregon.

The MQI EDI Medical project team believes that adoption and implementation of these recommendations will allow the timely and efficient implementation of the ANSI 837 medical bill reporting plan. The new, expanded data that will be reported to DCBS under this format will significantly improve medical data quality. In addition, expanding data collection to include nondisabling claim information will give WCD the capability to better analyze data and provide more accurate information on utilization trends for medical and pharmacy services, claim costs, and other vital indicators.