

### Electronic Submission of Medical Documentation (esMD) to Medicare

2011 Government Health IT Conference & Exhibition



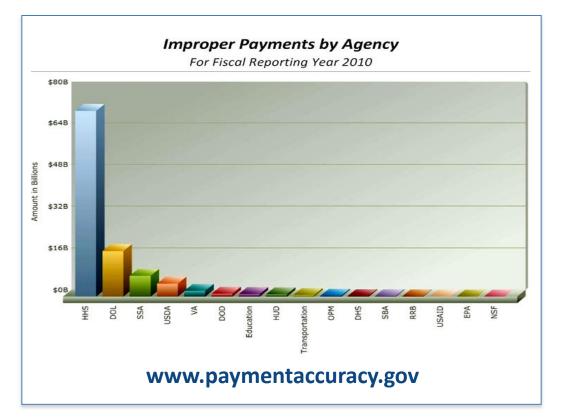
PRESENTED BY: Melanie Combs-Dyer, RN Health Insurance Specialist, CMS / OFM / Provider Compliance Group



### **Improper Payments**



- Medicare receives 4.8 M claims per day.
- CMS' Office of Financial Management estimates that <u>each year</u>
  - the Medicare FFS program issues more than \$34.3 B in improper payments.
  - the Medicaid FFS program issues more than \$22.5 B in improper payments.
- Most improper payments can only be detected by a human comparing:
  - a **claim** to
  - the medical documentation.







# Veasurement Contractor

- Claim review contractors issue over 2 million requests for medical documentation each year.
- Claim review contractors currently receive most medical documentation in paper form or via fax.
- Claim review contractors currently receive a tiny number of imaged documents in CD/DVD form.



### Background Facts about Medical Documentation Requests:

#### Medical Documentation Requests are sent by:

- Medicare Administrative Contractors (MACs)
- Comprehensive Error Rate Testing Contractor (CERT)
- Payment Error Rate Measurement Contractor (PERM)
- Medicare Recovery Auditors





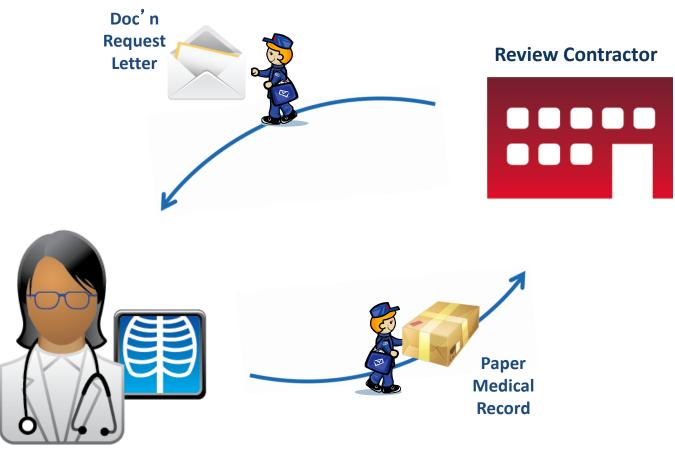
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### Today's Medical Documentation Process





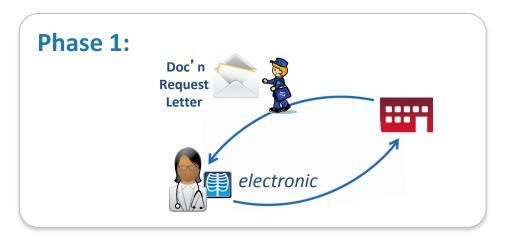


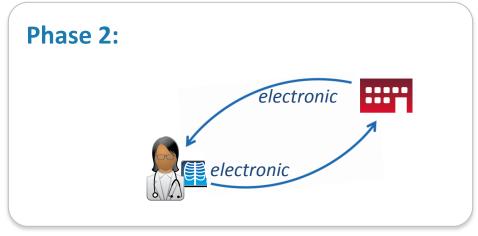




The Solution: Electronic Submission of Medical Documentation (esMD)













# CMS recognizes that not all providers are adopting HIT solutions at the same pace.

# **HIT Adoption Rate**

#### Late Adopter

- Still using paper records
- Intends to rely on fax machines, USPS, FedEx, etc for the for the next 10 years

#### **Average Adopter**

- Using imaged & electronic records
- Will wait to see which esMD Service Providers emerge in their area (and at what price)

#### **Early Adopter**

- Has used EHRs for years
- Ready for esMD now!





## The Nationwide Health Information Network



- is a set of standards, protocols, legal agreements, and specifications that a consortium of health information organizations have agreed are necessary for secure and private exchange of health information over the public internet.
- is overseen by the Office of the National Coordinator for Health IT (ONC).
- is comprised of two parts:
  - Direct designed for an individual to individual submission of health information <u>http://wiki.directproject.org/</u>
  - Exchange designed for computer to computer exchange of health information <u>http://healthit.hhs.gov/portal/server.pt?open=512&objID=1407&parent</u> <u>name=CommunityPage&parentid=8&mode=2&in\_hi\_userid=11113&cach</u> <u>ed=true</u>



### **Exchange Gateways**

Like the interstate highway system, on-ramps and off-ramps are critical!

- On the Nationwide Health Information Network, on/off-ramps are called "gateways".
- CMS will use CONNECT software when building its esMD gateway.













- CONNECT is an open source software (gateway) developed by the Federal Health Architecture that enables electronic health information exchange using Nationwide Health Information Network specifications and standards.
- Any Nationwide Health Information Network-compliant gateway may be used to join the Exchange.
  - CONNECT
  - Modified CONNECT
  - Home-grown gateway







A Health Information Handler (HIH) is any company that handles health information on behalf of a provider. Examples include:

# **1.** Health Information Exchange (HIE)/Regional Health Information Organization (RHIO)

#### 2. Release of Information (ROI) Vendor

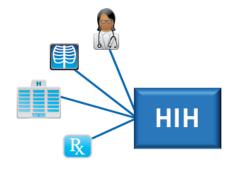
a company that manages the release of information for providers. Their services may include: logging and tracking the request, retrieving the patient record from multiple locations in multiple formats, Identifying the information needed to fulfill the request, requesting additional authorization, if needed, copying, packaging and mailing, and invoicing

#### **3.** Electronic Health Record (EHR) Vendor

#### 4. Claim Clearinghouse

#### 5. Health Internet Service Provider (HISP)

An entity that provides services that enable providers or health organizations to exchange health information using the internet.





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### HIHs that <u>plan</u> to offer esMD services (starting in August 2011)



R | S A R C http://www.risarc.com



http://www.ehrdoctors.com/



http://www.healthitplus.com



http://www.healthport.com



http://www.ivans.com



http://www.navinet.net/



http://www.mrocorp.com





### HIHs that may offer esMD services (starting October 2011)





http://www.akira-tech.com

BACTES **PEOPLE • PROCESS • TECHNOLOGY** 

http://www.bactes.com/



http://www.cobius.com



GREENWAY

http://www.greenwaymedical.com/



http://www.iodinc.com

**IVERTEX** INTERNET SOLUTIONS

http://www.ivertex.com







http://www.proficienthealth.com





# Subcontractors used by some esMD HIHs





http://www.cerner.com/

Contendo The Business Process Solutions Comp

http://www.coriendo.com/



http://www.apenimed.com/



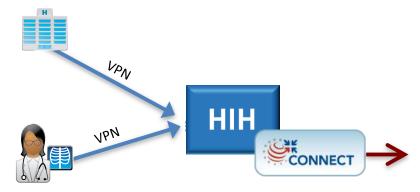




## CMS Does Not Dictate How an HIH Communicates with Providers



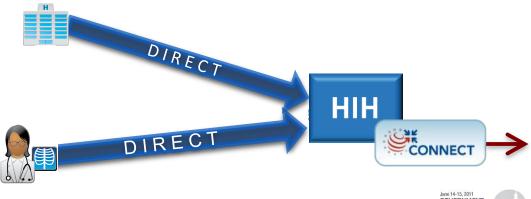
- Some esMD HIHs plan to ingest a provider's medical records and metadata by:
  - going onsite to the provider's facility
  - using a Virtual Private Network (VPN)
  - using a secure web portal



> Some esMD HIHs are considering using DIRECT.

http://directproject.org

http://wiki.directproject.org





### esMD HIHs:



- Get no funding from CMS or ONC
- Attend calls with CMS (bi-weekly)
- Build a CONNECT-Compatible Gateway
- Obtain a certificate, IP address, and share key with CMS Gateway Contractor
- Test with CMS Gateway Contractor
- Recruit providers to join
- "On-Board" to the Nationwide Health Information Network (April 2013)
  - Sign Legal agreements (DURSAs)
  - Test with ONC Gateway Team





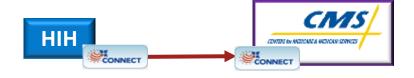
## What is an Nationwide Health Information Network Participant?

#### **ONC'** s Definition Today

A Nationwide Health Information Network Participant is

#### a federal agency or federal contractor

that has successfully completed the "on-boarding" process.



#### **ONC's Definition Starting April 2013**

A Nationwide Health Information Network Participant is

#### any organization

that has successfully completed the "on-boarding" process.



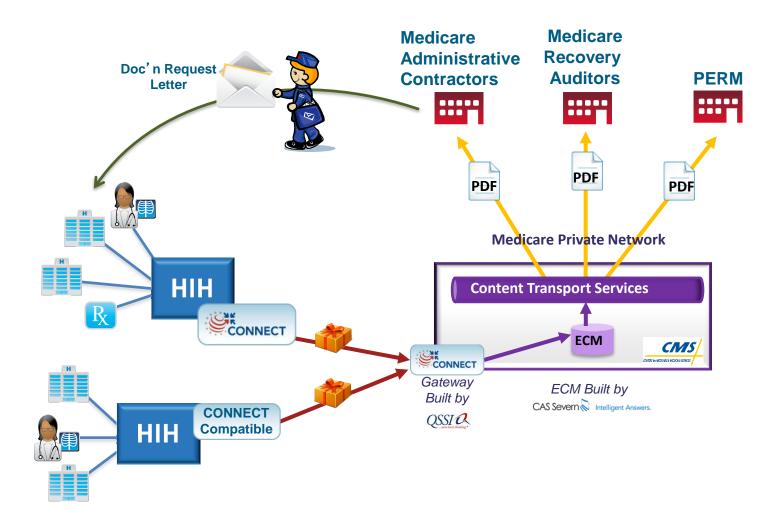


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### esMD Phase 1 (pre NHIN)









### Definition of an esMD Package



A portion of a patient' s medical record in esMD format which will contain:

Imaged documents (PDF)

Important Metadata Fields:

- Intended Recipient Required Field
- Claim ID Required Field
- NPI Required Field
- Case ID Required If Known

#### Detailed description for each field can be found in:

- the esMD XDR Profile (<u>http://www.connectopensource.org/product/connect-NHIN-specs</u>)
- the esMD Implementation Guide (<u>www.cms.gov/esMD</u>)



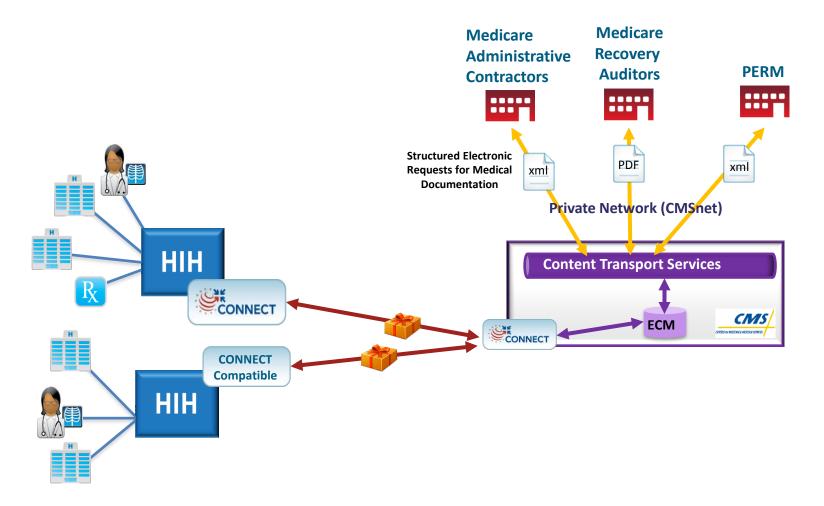


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### esMD Phase 2 (pre NHIN)









# Current and Future Use Cases for esMD



- Group 1 Documents
  - Medical Documentation in XDR format (PDF)
  - Medical Documentation in X12 format (PDF)
- Group 2 Documents
  - Structured Practitioner Orders
  - Structured Progress Notes
  - ADMC (prior authorization)
- Group 3 Documents
  - EDI enrollment
  - esMD 2 enrollment
- Group 4 Documents
  - ADRs (additional documentation requests)
- Group 5 Documents
  - Request\Receive Documentation Status Feed
  - Request\Receive Claim Status
  - Request\Receive Appeals Status Check
- Group 6 Documents
  - All Administrative Transactions (i.e. Claims Submission, Claim Status, Eligibility lookup, etc)
  - Coordination of benefits (Payer Pre & Post-Payment)
  - Refund Request
  - Medicare Bad Debt Reports (MCBD)
  - Other







### esMD Review Contractors:



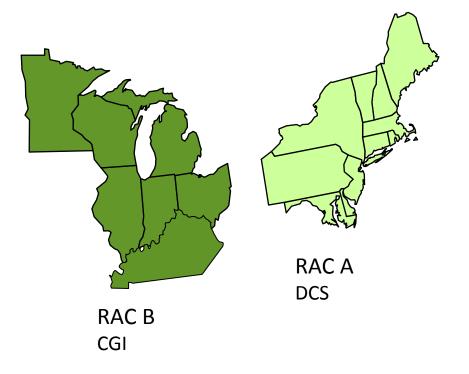
- Participate voluntarily
- Are not funded by CMS or ONC
- Must have MDCN/MPLS connectivity
- Must obtain an OID and Authentication Token from CMS to connect to CTS
- Attend bi-monthly calls with CMS and the ECM Team
- Successfully test with the CMS ECM Team
- Required to fund an initial on-boarding fee of approximately \$55,000 \$100,000 and an annual support fee of approximately \$35,000 \$60,000





### Medicare Recovery Auditors Accepting esMD in August 2011



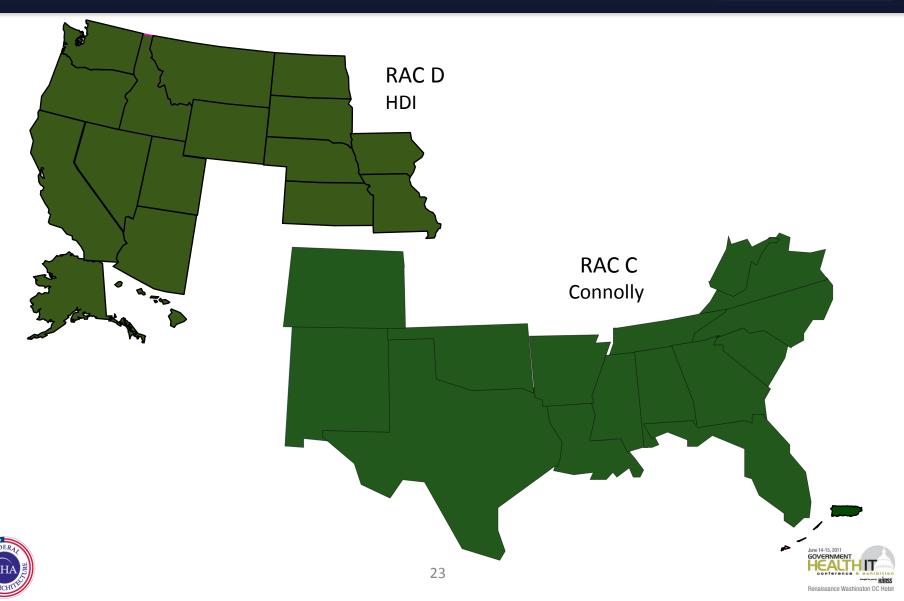




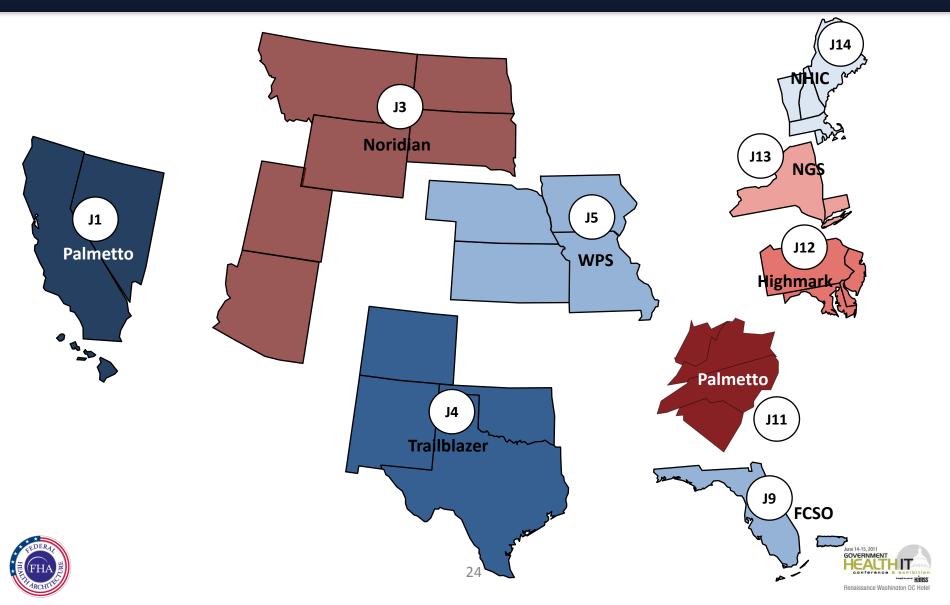


### Medicare Recovery Auditors that May Accept esMD in October 2011





### A/B MAC MR Units Accepting esMD in August 2011



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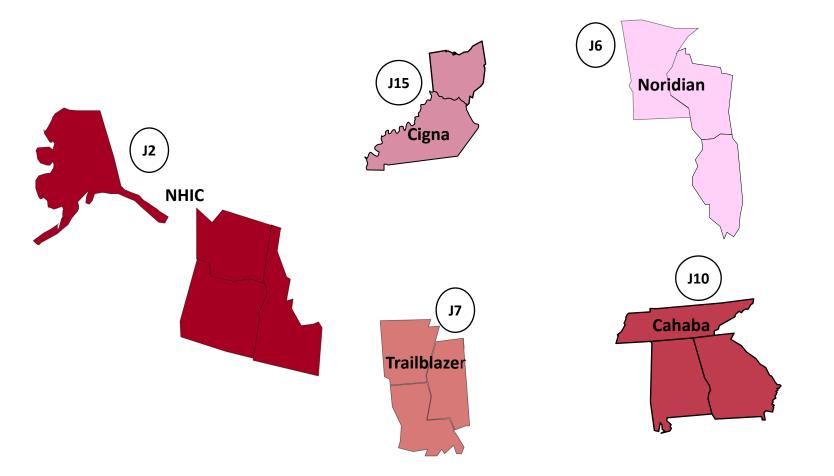
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## A/B MAC MR Units Could Begin Accepting esMD in October 2011



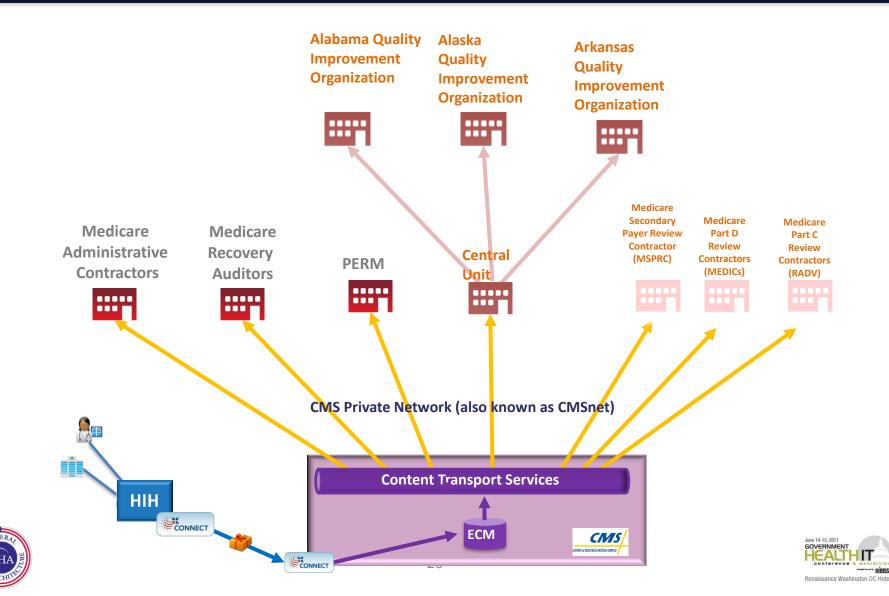






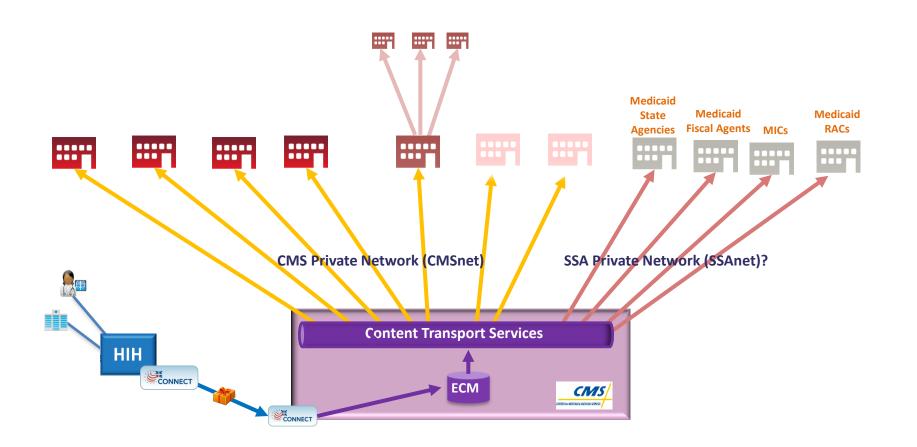
## Expanding esMD to other Review Entities





### Could We Expand esMD to State Review Entities?



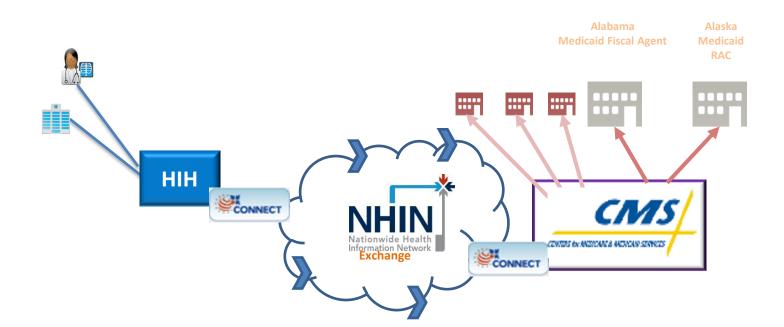






### Option 1 for Medicaid Review Entities to Use the NHIN: Join esMD



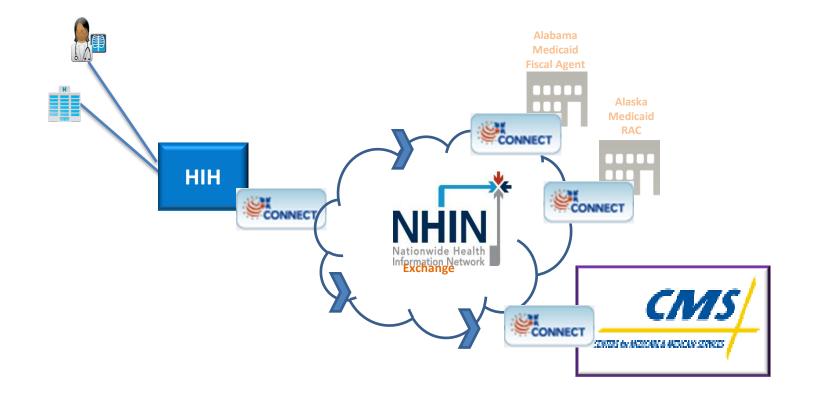






### Option 2 for Medicaid Review Entities to Use the NHIN: Build their own Gateway



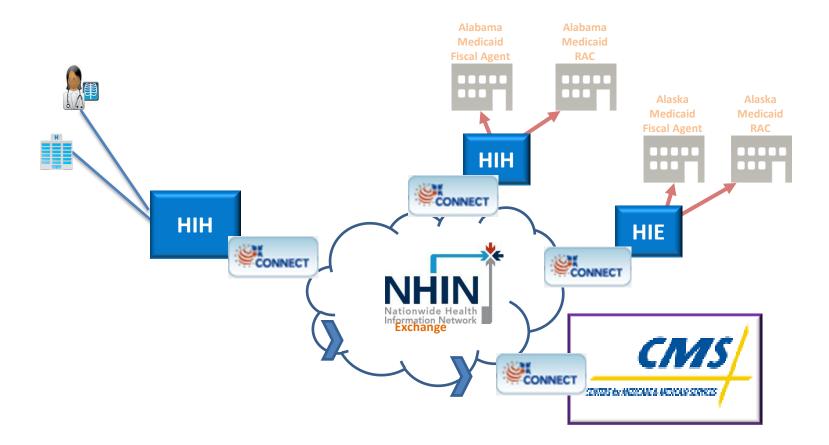






# Option 3 for Medicaid Review Entities to Use the NHIN: Hire an HIH or Join an HIE









### Providers Submitting Via esMD



### In August 2011, we estimate:

- 336 Part A providers
- 749 Part B providers



### In December 2011, we estimate:

- 2396 Part A providers
- 25475 Part B providers









# Visit <u>http://www.qssinc.com/esmd/index.html</u>

# Visit <u>http://www.cms.gov/esMD</u>





Want to be an esMD HIH but don't know how to build a gateway?



- Consider contacting the esMD HIHs
- Consider contacting one of the esMD HIH subcontractors
- Consider contacting one of the IT vendors listed on <u>http://www.connectopensource.org/partners</u>







#### To contact anyone on the esMD Team (CMS, QSSI, CAS Severn):

esMDTeam@qssinc.com

CMS esMD Website:

www.cms.gov/esMD

**CONNECT** Website:

http://www.connectopensource.org

Follow Us on Twitter: @CMSGov (Look for #CMS\_esMD)





### **Questions From the Audience**







