Pilot for End-to-End Testing of Compliance with Administrative Simplification
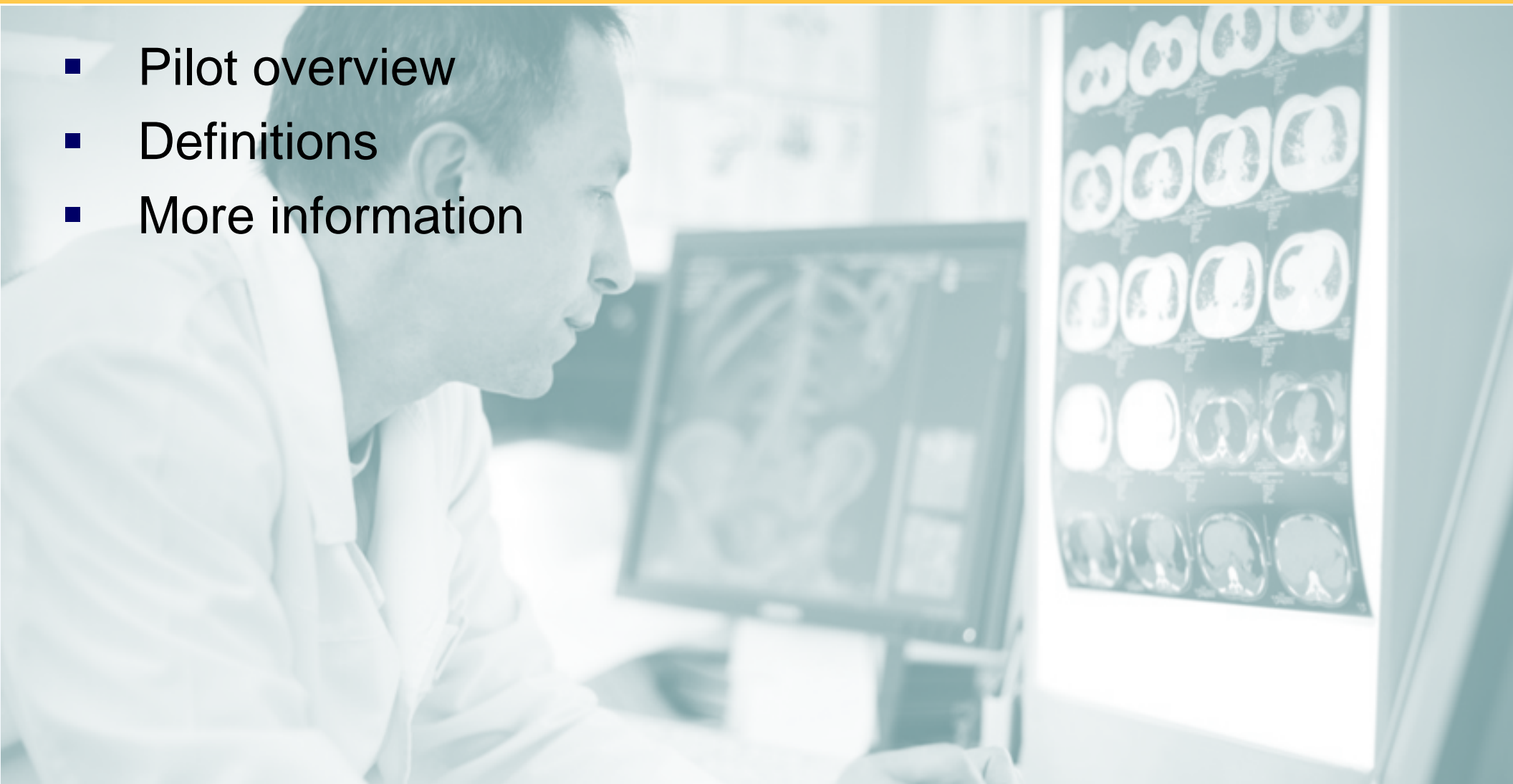
Presented by: **National Government Services, Inc.**

Topics

- Pilot overview
- Definitions
- More information

ngs.compliancetesting@wellpoint.com

Proprietary and Confidential

Pilot overview

ngs.compliancetesting@wellpoint.com

Proprietary and Confidential

National Government Services Team

Dean Cook, National Government Services named Advisor and Subject Matter Expert, has 34 years of health care experience in multiple facets of information technology, including Commercial, Medicare and Medicaid EDI, systems design, systems installation, application and operations.

David Carrier, National Government Services named Lead Business Analyst, with 30 years of health care experience in Institutional and Professional claims processing, Quality Assurance, Commercial claims clearinghouse transactions, EDI Help Desk Support, EDI testing, EDI Marketing and Installation and Training.

Julie McBee, National Government Services named Provider Outreach and Education Lead, has 13 years of health care experience in Professional claims processing for Medicare Durable Medical Equipment, Quality Assurance, CEDI Help Desk, CEDI Testing, Education and Training.

ngs.compliancetesting@wellpoint.com

Industry Collaborative Partners (ICPs)

- Aetna*
- American Health Insurance Plans (AHIP)*
- American Hospital Association (AHA)
- American Medical Association (AMA)
- CMS Medicaid
- CMS Medicare Fee For Service
- Emdeon
- Healthcare Billing & Management Association (HBMA)
- IVANS
- Medicaid – CSG Government Solutions
- Medical Group Management Association (MGMA)
- Nachimson Advisors, LLC
- Providence Health and Services
- TIBCO Foresight
- TRICARE
- UNC Health Care
- Veteran's Affairs
- Walgreens
- WellPoint

One partner; two divisions

ngs.compliancetesting@wellpoint.com

Goals

The goals of the pilot are:

- To develop and implement a process and methodology for end-to-end testing of the transaction standards, operating rules, code sets, identifiers, and other Administrative Simplification requirements based on industry feedback and participation.

- To develop an industry-wide "Best Practice" for end-to-end testing that lays the ground work for a more efficient and less time consuming method for health care industry testing of future standards, leading to more rapid adoption of the future standards.

ngs.compliancetesting@wellpoint.com

Intended outcomes

The intended outcome of the pilot is:

- To provide documents and artifacts to all industry segments outlining the critical check-points needed to ensure compliance with the current and future mandates

- To provide a universal testing process and methodology that can be adopted by all industry segments

- To provide a framework and common understanding around the end-to-end testing process and definitions

ngs.compliancetesting@wellpoint.com

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

National Government Services℠

Pilot phases

- **Phase I** – Business and Gap Analysis started on September 24, 2012, and ran through December 21, 2012. *Complete.*

- **Phase II** - Development of Pilot Testing started on December 10, 2012, and will run through June 27, 2013. *Complete.*

- **Phase III** - The planned start date for Phase III, Implementation and Quality Assurance, is July 1, 2013, and will run through September 23, 2013 (approximately three months)*

Actual dates are subject to change during detailed schedule development.

ngs.compliancetesting@wellpoint.com

Proprietary and Confidential

Definitions

ngs.compliancetesting@wellpoint.com

Proprietary and Confidential

Pilot definitions

These were submitted to CMS and have been approved for this pilot project.

Term	Definition
End-to-end testing	End-to-end testing is a focused process within a defined area, using new or revised applicable products, operating rules or transactions, throughout the entire business and/or clinical exchange cycle, for the purpose of measuring operational predictability and readiness. The end-to-end testing process should be performed in an environment which mirrors actual production as closely as possible, confirming the validation of performance metrics and analytics (reporting).
Readiness	Readiness is a state of preparedness in which an entity has completed verification and validation of applicable policies, procedures, guidelines, laws, regulations, and contractual arrangements with expected results. Additionally, entities will demonstrate readiness by completing internal documentation, establishing communication mechanisms and validation with external trading partners, training of appropriate personnel , scheduled deployments, and software migration for each regulatory requirements.
Compliance	Demonstrated adherence to those policies, procedures, guidelines, laws, regulations to which the business process is subject in advance of, by or after the regulatory implementation date.

ngs.compliancetesting@wellpoint.com

Level definitions

Level	Explanation of purpose
1	The period during which entities perform all of their internal readiness activities in preparation for testing the new versions of the standards with their Trading Partners. When an entity has attained Level 1 compliance, it has completed all internal readiness activities and is fully prepared to initiate testing of the new versions in a test or production environment, pursuant to its standard protocols for testing and implementing new software or data exchanges.
2	The period during which entities are preparing to reach full production readiness with Trading Partners. When an entity is in compliance with Level 2, it has completed some end-to-end testing with external Trading Partners. *Key difference between Level 1 and Level 2: Level 2 is done in a "production-like" environment that may not be exactly a replicate of the production system.*
3	The period during which end-to-end testing is performed with external Trading Partners and the Trading Partner is able to operate in production/production-like mode with the new versions of the standards by the end of that period. By "production/production-like mode", we mean that entities can successfully exchange (accept and/or send) standard transactions and, as appropriate, be able to process them successfully. *Key difference between Level 2 and Level 3: Level 3 is conducted in the same environment that is used when going "live" and into production.*

National Government Services' levels were created by and derived from verbiage found in the January 2009 Federal Register, Volume 74, Section 11, Pg. 3302.

ngs.compliancetesting@wellpoint.com

Audience for checklists

| Industry Segment	Definition
Small Providers	Includes organizations comprised of 1-5 physicians and 20 or fewer staff, independent practices, dentists, durable medical suppliers, pharmacies, home health agencies/hospices, and specialty practices.
Medium Providers	Includes medium-sized organizations comprised of 6-24 physicians and 21-50 staff, independent practices, dentists, durable medical suppliers, pharmacies, home health agencies/hospices, and specialty practices. *Consider reviewing both the Small/Medium and Large Provider checklists to find the most appropriate vehicle for the organization.*
Large Providers	Includes organizations comprised of 25 or more physicians and 51 or greater staff, clinical laboratories, hospitals (small, large, and chain), critical access hospitals, nursing homes, rehabilitation centers, skilled nursing facilities, ambulatory surgical centers, pharmacies, and Federally Qualified Health Centers (FQHC).
Payers	Includes organizations that are commercial, Medicaid, Medicare, Pharmacy Benefit Management (PBM), Indian Health Services, Veteran's Administration (VA), Military (TRICARE), other government provider, and voluntarily compliant entities (Workers Compensation government contractors, Coordination of Benefits Contractors [COBC]).
Vendors Vendor-to-Payer Vendor-to-Provider	Includes organizations comprised of billing services, clearinghouses, electronic health record (EHR) systems, electronic medical record (EMR) systems, network service vendors, practice management systems, and value added networks. *This includes vendor-to-payer and vendor-to-provider checklists to best address each organization's needs.*

ngs.compliancetesting@wellpoint.com

More information

ngs.compliancetesting@wellpoint.com

Proprietary and Confidential

More information

- **Listening Sessions** - To register for upcoming Listening Sessions, send your contact information to the following link ngs.compliancetesting@wellpoint.com.

- **CMS ICD-10** web page located at http://www.cms.gov/Medicare/Coding/ICD10

- **CMS End-to-End Testing** web page located at http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/End-to-End-Testing.html has links to all the checklists.

- **CMS Email Updates** (CMS ListServ) feature is available on **all CMS web pages**. Submitting your email address ensures notification of CMS updates including End-to-End Testing checklists and other related documents.

- **Medscape Education** modules link is available from the CMS ICD-10 web page (https://login.medscape.com/login/sso/getlogin?urlCache=aHR0cDovL3d3dy5tZWRzY2FwZS5jmcvdmlld2FydGljbGUvNzY1NzU0&ac=401). Note that "Continuing medical education (CME) credits are available to physicians who complete the modules, but anyone can take them and receive a certificate of completion."
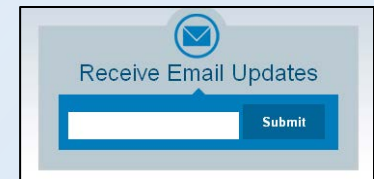
Contact us

- Send questions, comments, and requests to ngs.compliancetesting@wellpoint.com
  - Our goal is to acknowledge all emails within one business day
- Additional contact resources . . .

Resource name	Role	Email addresses	Work phone	Cell phone
David Carrier	Lead BA	David.Carrier@WellPoint.com	(207) 253-1203	(207) 210-2340
Dean Cook	Advisor/SME	Dean.Cook@WellPoint.com	(502) 889-4762	(502) 376-6510
Julie McBee	BA/POE	Julie.McBee@WellPoint.com	(317) 595-4908	(317) 586-0021

ngs.compliancetesting@wellpoint.com