

Beyond clinical messaging: Integrating HIPAA transactions in real-time with HITSP T85

See how Ingenix is using T85 messaging standards for conventional transactions such as 270/271, 276/277, and 278 as well as new exchanges including Quality Reporting Document Architecture

Related “Meaningful Use” Objective:

- Engage Patients and Families

Featured Ingenix solution:

- Connectivity Director

<http://www.ingenix.com/Products/Payers/EDI/ConnectivityDirector/>

Related Interoperability Specs:

- HITSP T85
- IHE Profile 7-2 “Front office staff checks insurance eligibility”



Beyond clinical messaging: Integrating HIPAA transactions in real-time with HITSP T85



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Improving real-time communication with the HITSP T85

- Value
 - Real-time communication between health care entities improves care and administration
- Current problems
 - Loose communication standards have prevented real-time communication from becoming pervasive
- Improvements made possible by the HITSP T85 specification
 - The HITSP T85 specification adopts the tighter real-time communication rules advocated by CAQH CORE's Phase II Connectivity Rule v2.0.0
 - It will help real-time communication become more pervasive
 - It will enable the expanded real-time communication of:
 - HIPAA-mandated administrative transactions, like the eligibility (270/271), claims status (276/277) and referral/authorization (278) transactions
 - Other valuable messages, like the Quality Reporting Data Architecture (QRDA)
- In our Showcase demonstration, we show:
 - Interoperability with other Showcase participants in accordance with the T85 and IHE "Patient Encounter with Eligibility Verification" profile/scenario
 - Exchange of a variety of messages, potentially including 270/271, 276/277, 278, QRDA, and any others Showcase participants are able to send us

Applications of real-time communication

Real-time communication is most commonly used for:

- Eligibility verification (270/271)
- Claims status inquiries (276/277)
- Referrals and authorizations (278)

While current uses are based on the HIPAA-mandated administrative transactions, there are potentially many other applications—both administrative and clinical—for real-time communication. One such application is the exchange of the Quality Reporting Data Architecture (QRDA) files.

Current real-time communication problems

- A variety of factors have prevented real-time communication from becoming pervasive, including:
 - Absence of communication specifications
 - Loose transaction format standards
 - Loose transaction syntax standards
 - Failure of trading partners to comply with defined specs and standards

CAQH CORE is helping solve these real-time communication problems

The Center for Affordable and Quality Healthcare (CAQH) Committee on Operating Rules for Information Exchange (CORE) recognized these problems and is advocating tighter real-time communication standards.

In their Phase II Connectivity Rule, CAQH CORE has defined standards for real-time communication. They include:

- scope definition
- rationale
- policy guidelines
- message envelope metadata and envelope standards
- submitter authentication standards
- schemas and examples of use
- error handling

HITSP has incorporated CAQH CORE's work into its T85 specification

The Healthcare Information Technology Standards Panel (HITSP) has incorporated CAQH CORE's Phase II Connectivity Rule into its "T85 Administrative Transport to Health Plan" specification.

To summarize, the HITSP T85 specification enables the real-time transport of data using:

- Hypertext Transfer Protocol Secure (https)
- Simple Object Access Protocol (SOAP) interfaces

IHE has incorporated T85 into an IHE Profile

Integrating the Healthcare Enterprise (IHE) recognized the value of T85 real-time communication of eligibility (270/271) information by creating an IHE Profile that features it.

- Care Theme: Care Administration Efficiency
- Scenario (ACT): 7. Patient Encounter with Eligibility Verification
- Scenario Steps:
 - 7-1. Patient presents for ambulatory encounter with previous Medical Summary. HITSP C32
 - 7-2. Front office staff checks insurance eligibility. HITSP T40, HITSP T85
 - 7-3. Physician treats patient and updates Medical Summary for Patient's PHR. TP13, T31, T33, (SC112)
- Scenario Primary Goal: To demonstrate the ability for patients to actively manage their own health information and pro-actively validate insurance coverage
- ARRA Meaningful Use Priorities/Objectives: Engage Patients and Families

Together, HITSP T85, CAQH CORE Phase II Connectivity Rule & IHE Profile Promote Real-Time Data Exchange

With the HITSP T85 and CAQH CORE Phase II Connectivity Rule, health care vendors and health care organizations will be able to streamline the implementation of real-time communications with each other.

Ultimately, these specifications will promote real-time exchange of both:

- Defined transactions—like the HIPAA-mandated 270/271, 276/277 and 278
- And new transactions/messages—like the Quality Reporting Data Architecture (QRDA) messages

Conventional Use: 270/271 Health Care Eligibility Inquiry/Response

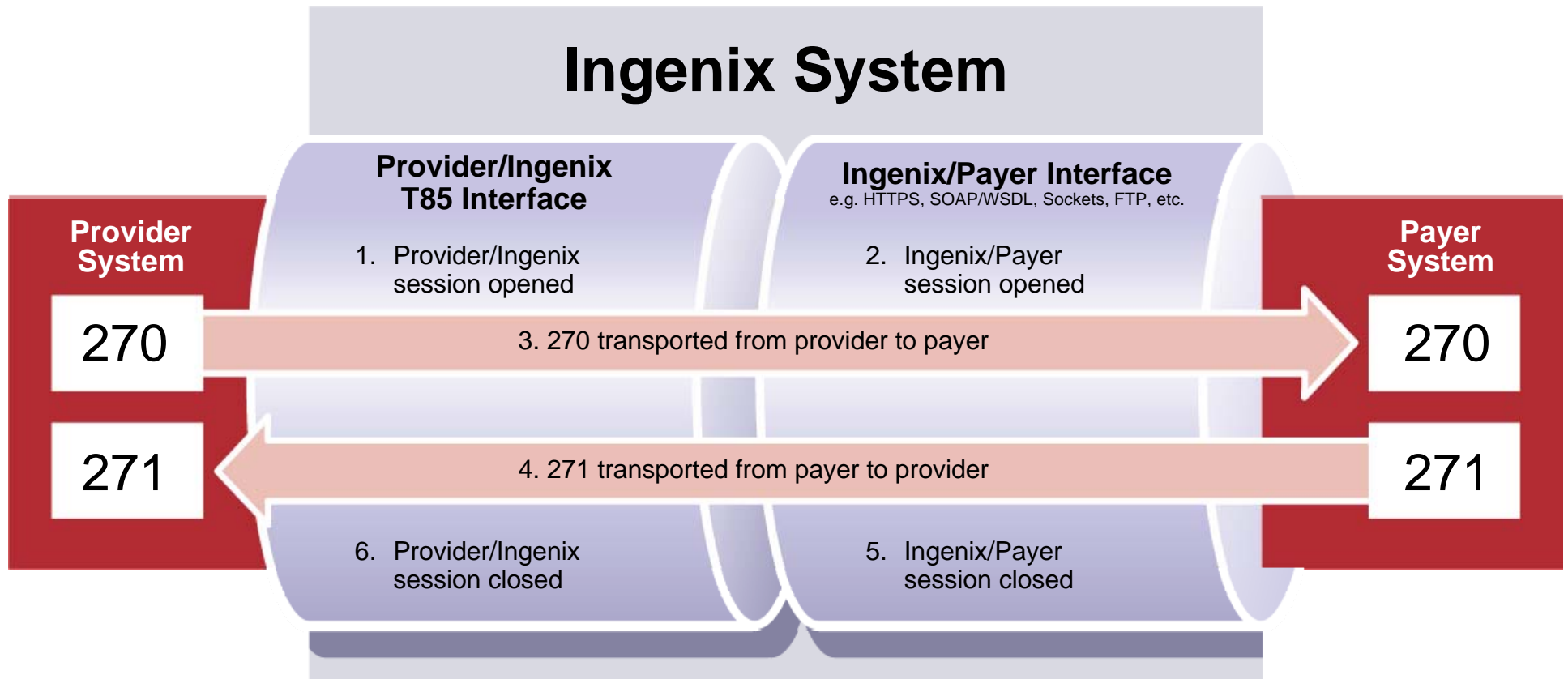
Information such as eligibility status, policy benefits, deductibles, and co-pays helps a provider know if a patient is insured and for what services they're insured. The X12 270/271 eligibility inquiry/response transaction set allows providers to verify a patient's insurance coverage before services and billing.

Ingenix uses the T85 messaging standard to generate open communication and a response in real-time. This use matches IHE Profile/Scenario 7-2 "Front office staff checks insurance eligibility."

Electronic exchange of 270/271 accelerates communication and eliminates the time staff spends gathering this information by phone or through web portals.

The use of T85 by all trading partners will also greatly reduce the work associated with implementing 270/271 eligibility connections.

270/271 Eligibility Exchange



HTTPS: Hypertext Transfer Protocol Secure | SOAP: Simple Object Access Protocol
WSDL: Web Services Description Language | FTP: File Transfer Protocol

Conventional Use: 276/277 Health Care Claim Status Request and Response

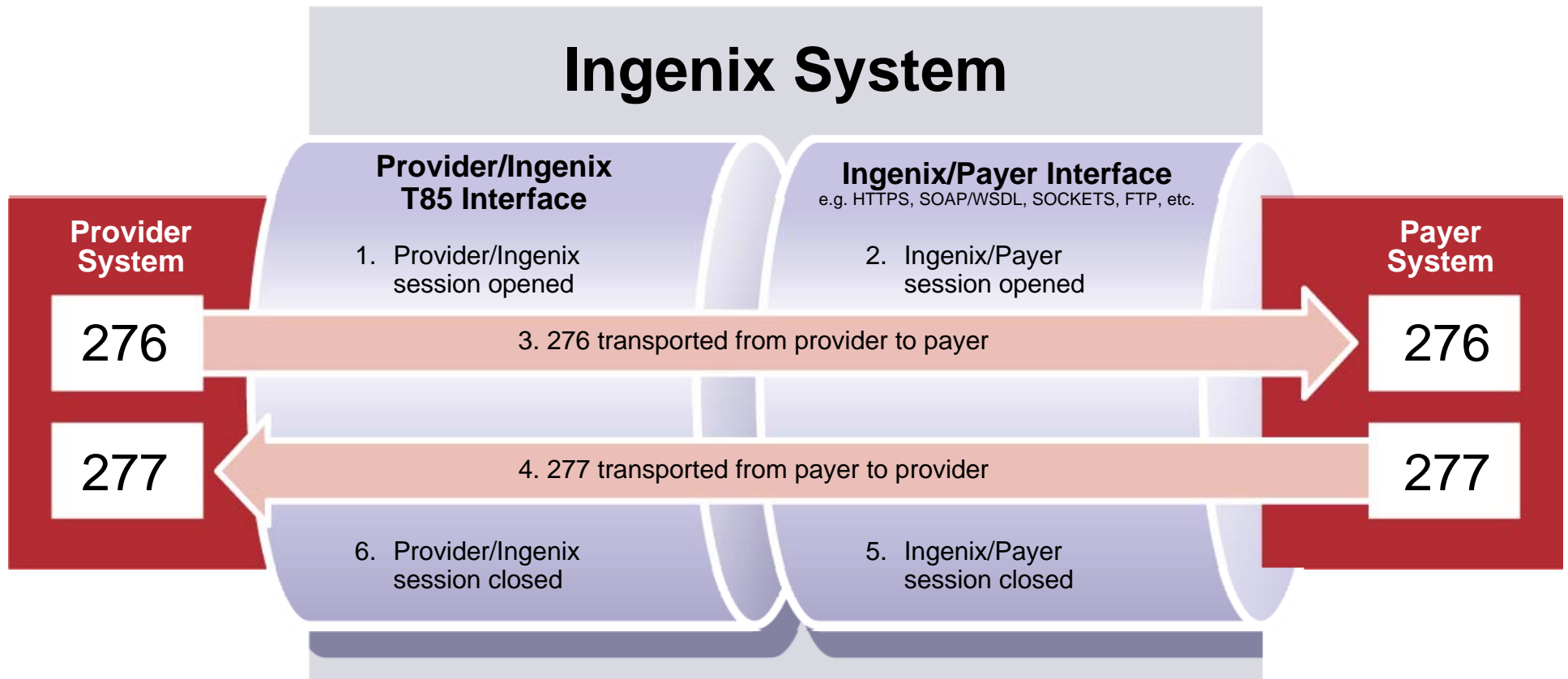
Once they've submitted a claim to a payer, a provider wants to know the status of unpaid claims. The X12 276/277 claims status inquiry/response transaction enables the electronic exchange of claim status information.

Ingenix uses the T85 messaging standard to generate open communication and a response in real-time.

Exchanging 276/277 claim status information electronically helps both providers and payers reduce the costs of tracking unpaid claims.

The use of T85 by all trading partners will also greatly reduce the work associated with implementing 276/277 claim status connections.

276/277 Claim Status Exchange



HTTPS: Hypertext Transfer Protocol Secure | SOAP: Simple Object Access Protocol
WSDL: Web Services Description Language | FTP: File Transfer Protocol

Conventional Use: 278 Referral/Authorization

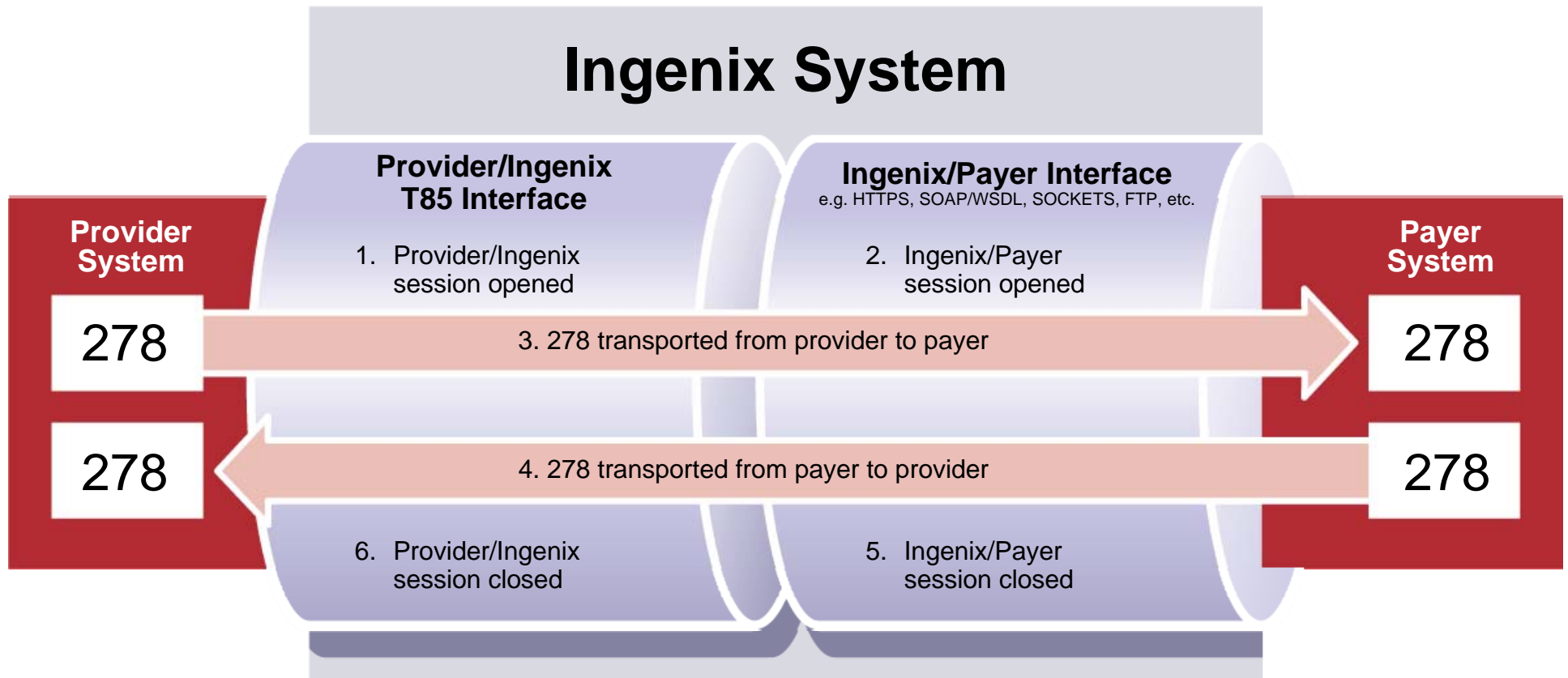
Providers often need to get prior-authorization from an insurance company before they can refer a patient to another physician/specialist. This process consumes staff time with phone calls and web portal requests. The X12 278 referral/authorization transaction enables the electronic request and receipt of a referral prior-authorization. There are other applications of the 278 as well, including inpatient admission notification.

Ingenix uses the T85 messaging standard to generate open communication and a response in real-time.

Exchanging 278 referral/authorization information electronically helps both providers and payers reduce the costs of requesting and receiving authorization for referrals.

The use of T85 by all trading partners will greatly reduce the work associated with implementing 278 referral/authorization connections.

278 Referral/Authorization Exchange



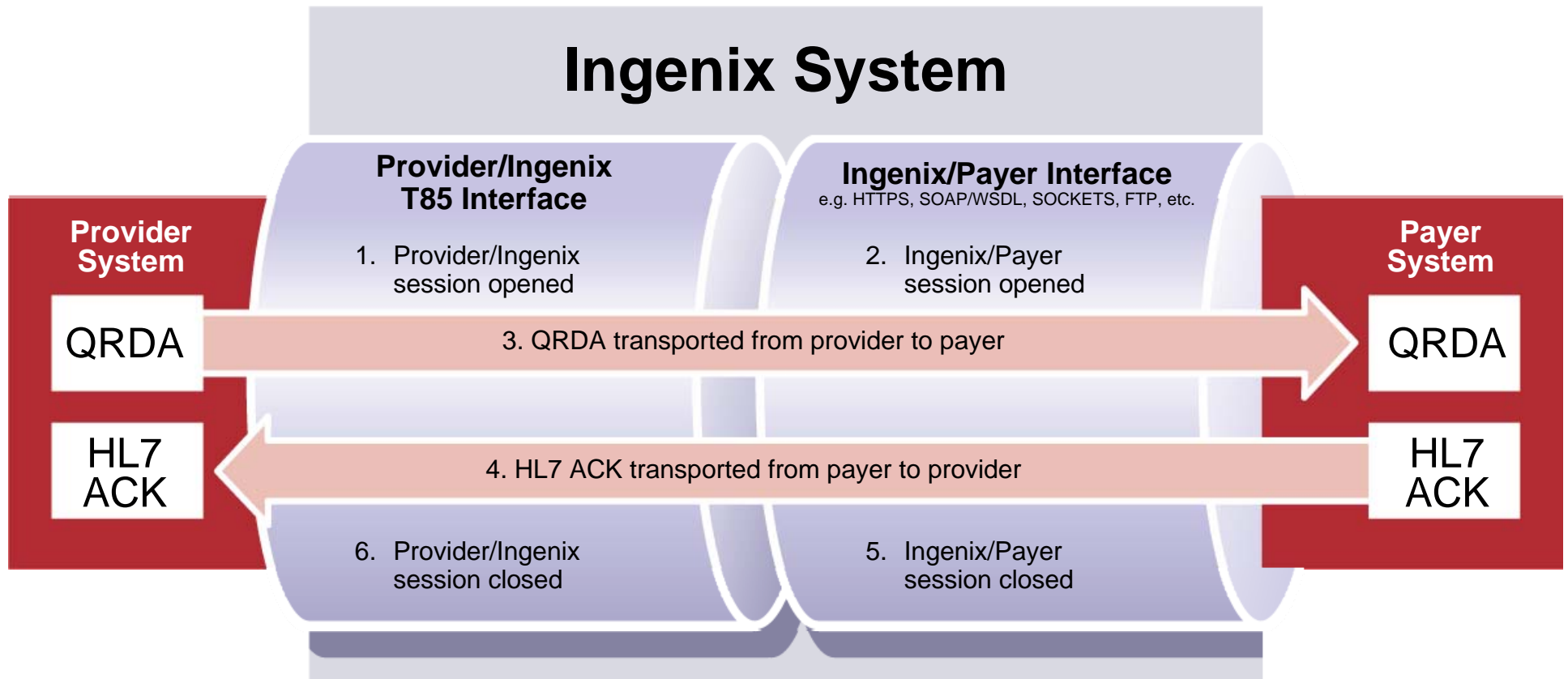
HTTPS: Hypertext Transfer Protocol Secure | SOAP: Simple Object Access Protocol
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New Use: Quality Reporting Document Architecture (QRDA)

In addition to more conventional applications of T85 such as 270/271 eligibility, 276/277 claim status, and 278 referral/authorization, Ingenix can use T85 communication specification to exchange other types of information, including QRDA. QRDA messages contain patient-level quality measurement data. T85 can standardize and simplify interoperability of the QRDA between disparate health care information systems.

Most interesting is the possibility of saving the industry millions—or even billions—of dollars by leveraging existing T85-compliant administrative/EDI networks for exchanging QRDA and other clinical messages.

QRDA Message Exchange (e.g. Ambulatory Quality Message)



HTTPS: Hypertext Transfer Protocol Secure | SOAP: Simple Object Access Protocol
WSDL: Web Services Description Language | FTP: File Transfer Protocol

Ingenix Creates Innovative Approaches to Health Care Information Exchange (HIE)

By implementing T85 in conventional and unconventional ways, Ingenix is helping the industry achieve interoperability. We help organizations:

- Comply with CAQH CORE Phase II, HITSP and IHE
- Send and receive transactions through CAQH CORE Connectivity Rule-compliant https and SOAP interfaces
- Enable real-time communication between payers and providers
- Eliminate administrative cost and waste by simplifying the exchange of information

Ingenix Supports and Promotes Health Care Standards and Interoperability

Ingenix supports and promotes health care standards and interoperability through its participation in and sponsorship of many organizations. These organizations include:

- X12
- WEDI
- HL7
- CAQH CORE
- HITSP
- IHE

Ingenix HIN Solutions Portfolio

- Ingenix Health Information Networks has a number of solutions that can help you enable health care information exchange:
 - Ingenix Claredi® Classic
 - Ingenix Communed
 - Ingenix Connectivity Director
 - Ingenix Faciledi
 - Ingenix Network Director
 - Ingenix Payer Gateways & Portals
 - Ingenix Transaction Exchange: Clearinghouse Services
 - Ingenix TransactionManager™
 - HIPAA Security Solutions
 - Professional and Consulting Services

Questions?

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