

Part B Insider (Multispecialty) Coding Alert

Electronic Claims: Don't Get Too Attached To Paper Attachments

When new electronic standards finally arrive, they'll be more opportunity than compliance burden

Tired of sending paper attachments to follow up on electronic claims? There is hope on the horizon for a more efficient process.

Problem: The hassle of submitting paper attachments can lead to delays and even losses when the carriers fail to match up claims with the correct attachments, providers complain. But Medicare carriers haven't been set up to receive attachments electronically.

Positive signs: The Centers for Medicare & Medicaid Services is putting out a proposed rule on accepting electronic attachments. The rule is expected to be published in the Sept. 23 Federal Register, attorney **Bill Finerfrock** with **Capitol Associates** told the **Healthcare Billing & Management Association's** annual meeting in Chicago on Sept. 10.

Don't hold your breath: After the 60-day comment period on the proposed rule, CMS will take anywhere from 13 to 15 months to review the comments, Finerfrock predicted. And the effective date for the standards will be at least two years after that. In other words, providers have only 60 days to comment, but then CMS has three and a half years to finalize the proposal.

CMS has held two "vendor forums" recently to work out standards, most recently on Aug. 23, says **Tom Gilligan**, executive director of the **Association for Electronic Health Care Transactions (AFEHCT).** You can already download guidelines on attaching documents to electronic claims from the **Washington Publishing Company** at www.wpc-edi.com/content/view/393/1/.

Once Medicare carriers accept electronic attachments, it will be up to providers to start sending them. But Gilligan worries that too many providers will view the change as yet another compliance problem instead of an opportunity to save time and money.

Specs for electronic attachments: Attachments to electronic claims can be common file formats such as Adobe PDF or Microsoft Word, or scanned paper documents, according to **Donald Bechtel**, chair of the **X12** standards group and chief privacy officer with **Siemens Medical Solutions**.

You would send those documents inside the "bin" (for binary file) segment of a claim, using the X12-275 standard. You'd need to include a "qualifier" to say what type of file the document was. The HL7 standard includes a type of message known as "clinical document architecture" (CDA), and this lets you send specific clinical documents as part of a larger transaction, Bechtel explains.

Separately, AFEHCT submitted comments to CMS on its rule on electronic data interchange (EDI) enrollment, published in the July 8 Federal Register. AFEHCT says CMS is imposing an undue burden by requiring providers to apply on paper for EDI, and requiring too much information on the application.