*CMS, WEDI and CAQH CORE Webinar Series: Part 1*

CMS Complaint Management Reports

Logistics
Presentation Slides and How to Participate in Today's Session

- **You can download the presentation slides at www.caqh.org/core/events or at www.wedi.org after the webinar.**

- A copy of the slides and the webinar recording will be emailed to all attendees and registrants in the next 1-2 business days.

- Questions can be submitted *at any time* using the **Questions panel on the GoToWebinar dashboard.**
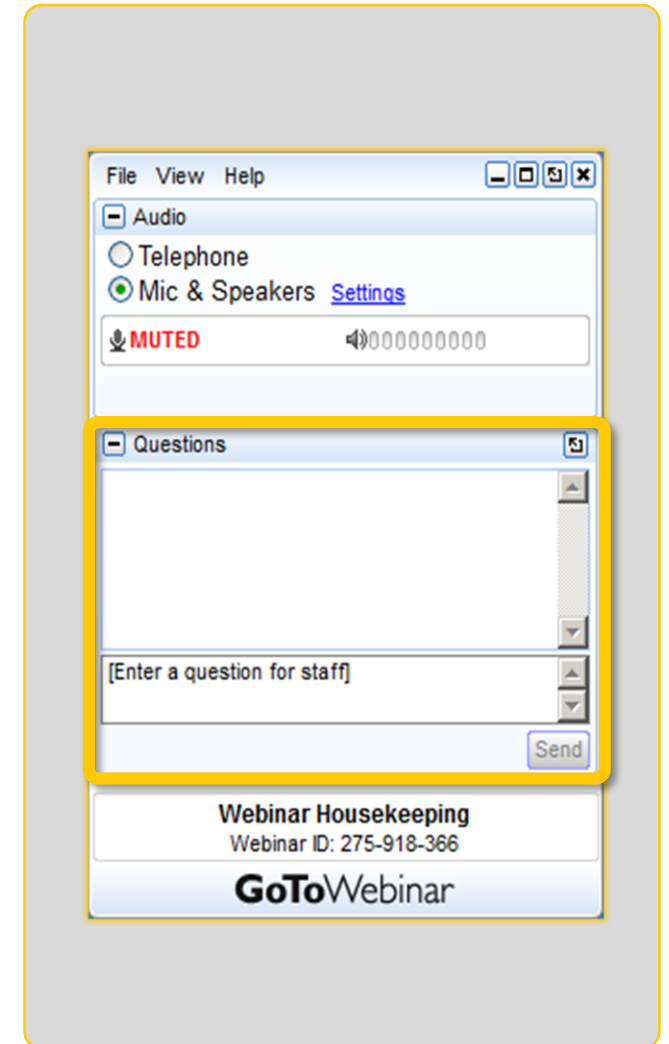
Session Outline

- Speaker Introduction
- Featured Presentation: CMS Complaint Management Reports
- Q&A
- Closing Comments

Thank You to Our Speakers

Paul Anderson
Health Insurance Specialist
CMS Division of National Standards

Charles Stellar
President and CEO
WEDI

April Todd
Senior Vice President
CAQH CORE

AGENDA

Introduction

Administrative Simplification Basics

HIPAA Enforcement

Complaint Management

ASETT

Questions

Resources & Contacts

CMS Division of National Standards (DNS)

The Department of Health and Human Services (HHS) has delegated enforcement authority to CMS/DNS

o DNS assist with implementation and enforces compliance with HIPAA electronic transactions, code sets, unique identifiers and operating rules

o HHS OCR handles HIPAA privacy, security and enforcement

• Leadership

    o Madhu Annadata, Director

    o Christine Gerhardt, Deputy Director

Administrative Simplification Basics

HIPAA Administrative Simplification provisions:

- Privacy and security ([HHS Office for Civil Rights](#))
- Transaction standards, code sets, unique identifiers, and operating rules for electronic transactions (DNS)
  - o *Goal:* Save time and money by streamlining communication around billing and insurance-related tasks

Who's Covered?

HIPAA-covered entities must comply with Administrative Simplification:

Health care providers that transmits transactions electronically

Health plans

Clearinghouses

What's Covered?

Standards for:

- Codesets
  - ICD-10, CPT, HCPCS, CDT, NDC

- Unique identifiers
  - NPI for providers, EIN for employers

- Operating rules (business rules, like requiring real-time response to inquiry)

- Transactions related to billing and insurance

What's Covered?

All covered entities must comply with standards for these [transactions](#):

- Health Care Eligibility Benefit Inquiry and Response (270/271)
- Health Care Claim Status Request and Response (276/277)
- Health Care Claims: Professional (837P), Institutional (837I), Dental (837D)
- Health Care Claim Payment/Advice (835)
- [Payment and remittance advice (EFT/ERA)](#) [NACHA CCD+/835]
- Health Care Services Review – Request for Review and Response (278)
- Benefit Enrollment and Maintenance (834)
- Payroll Deducted and Other Group Premium Payment for Insurance Products (820)
- Health Care Claims for Coordination of Benefits: Professional (837P), Institutional (837I), Dental (837D)
- National Council for Prescription Drug Programs (NCPDP) Medicaid Pharmacy Subrogation

Some providers use clearinghouses to make their transactions compliant.

HIPAA Enforcement

DNS enforces Administrative Simplification standards by:

- Responding to complaints about noncompliance

- Conducting proactive compliance reviews

Goals

- Reduce the burden on compliant entities of needing to conduct transactions with trading partners that aren't compliant

- Improve efficiency across the health care system by streamlining billing and insurance-related functions, allowing providers and health plans to spend less time on these tasks
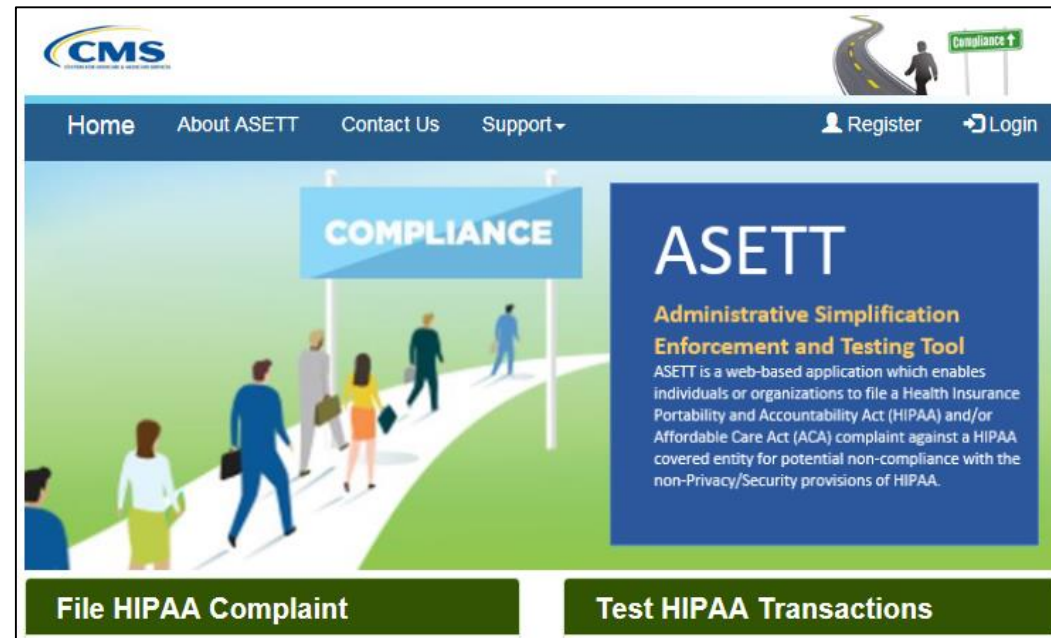
Complaint Management

Complaint-based Enforcement

- Anyone can file a complaint against a health plan, clearinghouse, or provider that doesn't comply with Administrative Simplification.

- Complaints can be filed online using the Administrative Simplification Enforcement and Testing Tool (ASETT) at [asett.cms.gov.](asett.cms.gov)

- DNS keeps the identities of those filing complaints confidential upon request.
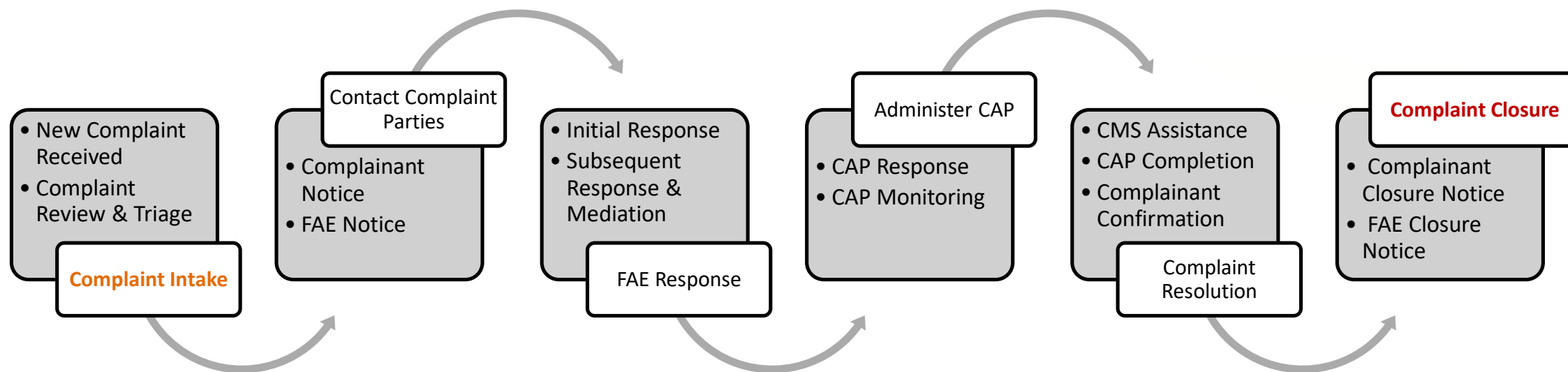
ASETT OVERVIEW

– Individuals or organizations to file a complaint for potential non-compliance

– Individuals or organizations to test health care transactions for compliance

– DNS staff to manage the overall complaint process

– DNS staff to conduct Compliance Reviews
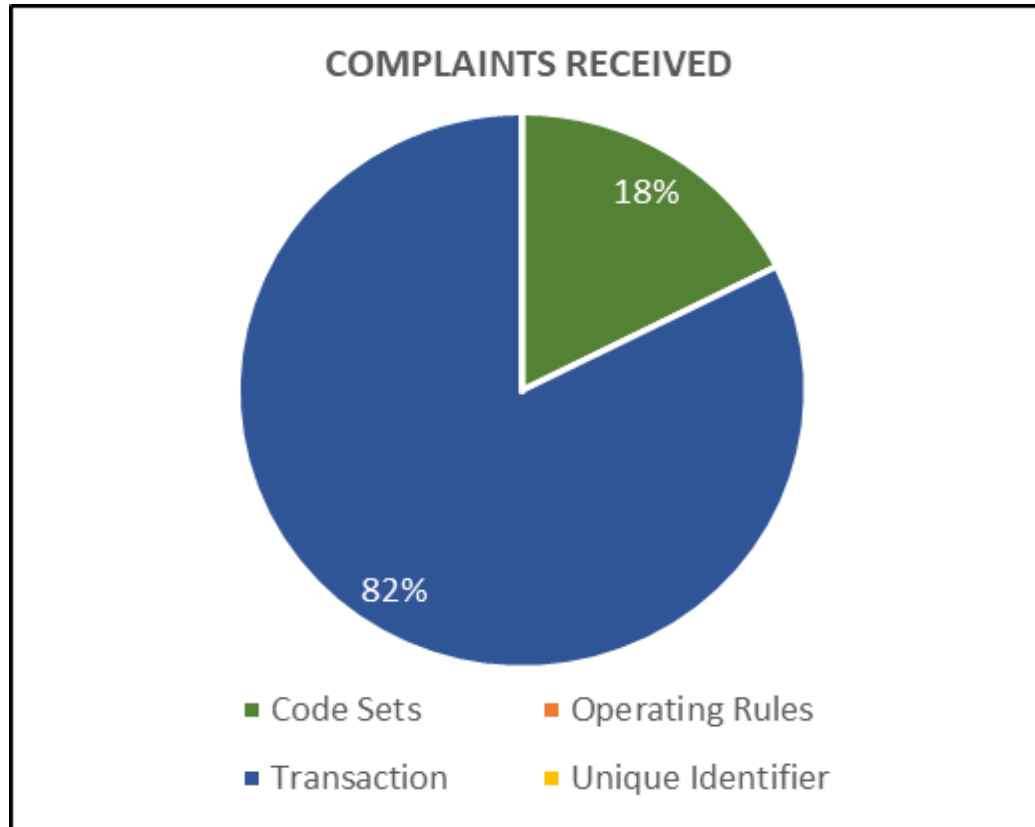
What If an Organization Isn't Compliant?

- DNS will work with noncompliant organizations to resolve issues. Corrective Action Plans— or CAPs—are commonly used to address issues.

DNS Complaint Management Process

- New Complaint Received
- Complaint Review & Triage

Complaint Intake

Contact Complaint Parties
- Complainant Notice
- FAE Notice

- Initial Response
- Subsequent Response & Mediation

FAE Response

Administer CAP
- CAP Response
- CAP Monitoring

- CMS Assistance
- CAP Completion
- Complainant Confirmation

Complaint Resolution

Complaint Closure
- Complainant Closure Notice
- FAE Closure Notice

Complaint Statistics

Complaints received January 1, 2019-March 31, 2019

COMPLAINTS RECEIVED

18%

82%

- Code Sets
- Operating Rules
- Transaction
- Unique Identifier

ASETT also receives complaints that are not enforceable by HIPAA Administrative Simplification Rules. These are labeled "Invalid" within our system. Typical examples of invalid complaints could be Quality of Care or Quality of Service complaints. The Division of National Standards (DNS) either works with the complainant to locate the appropriate agency to file their complaint or mediates between them and the filed-against entity to achieve a resolution.

Complaints received by type


COMPLAINTS RECEIVED BY COMPLAINT TYPE
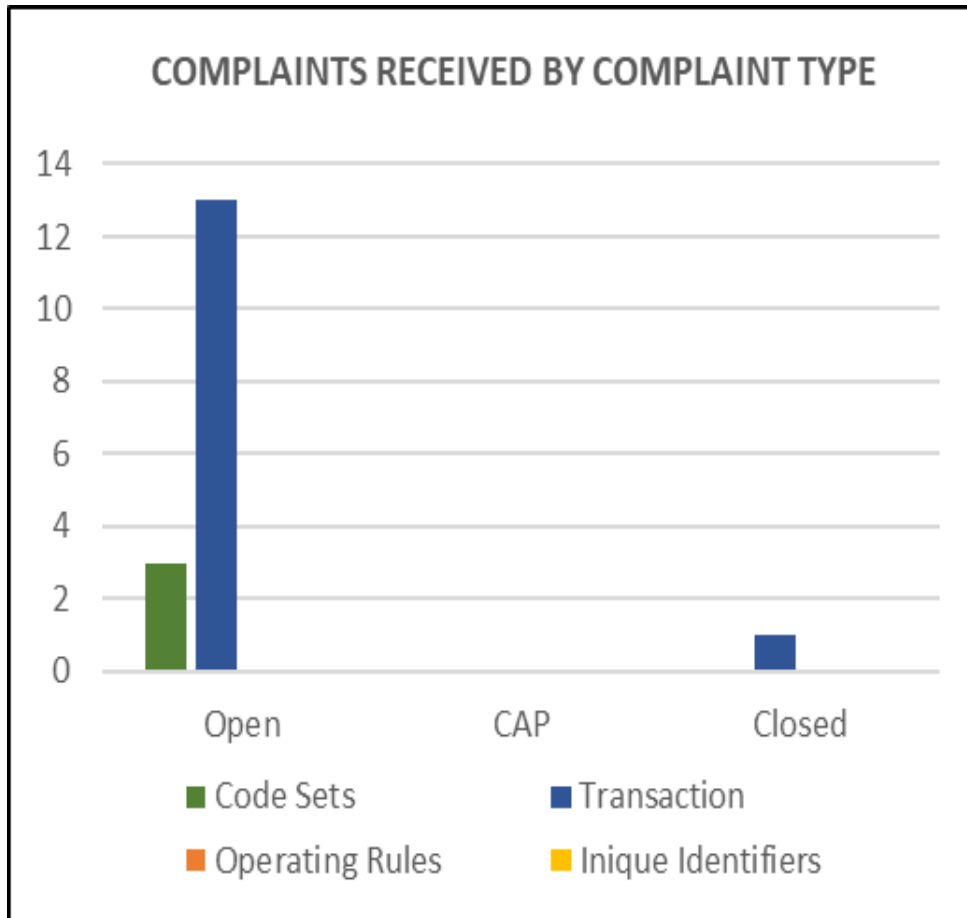
Open – As of the reporting period, this number represents complaints in active status, e.g., outstanding issues remain, additional information is being sought from either the complainant, the filed against entity, or both.
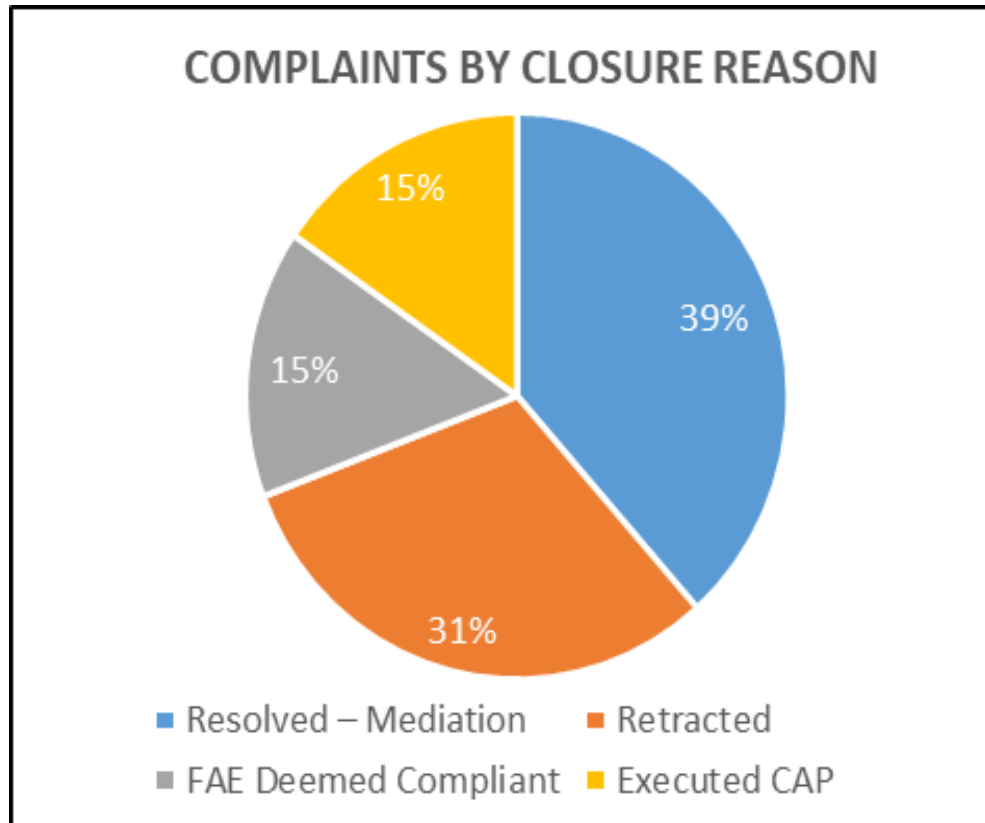
Closed – All issues have been sufficiently resolved.

Corrective Action Plan (CAP) – The written corrective action plan indicates alternative solutions with specific steps to correct the issue(s) and timeframes. Each affected entity under a corrective action plan is in the process of supporting or refuting allegations and/or implementing system updates.

Complaints received by Transaction Type
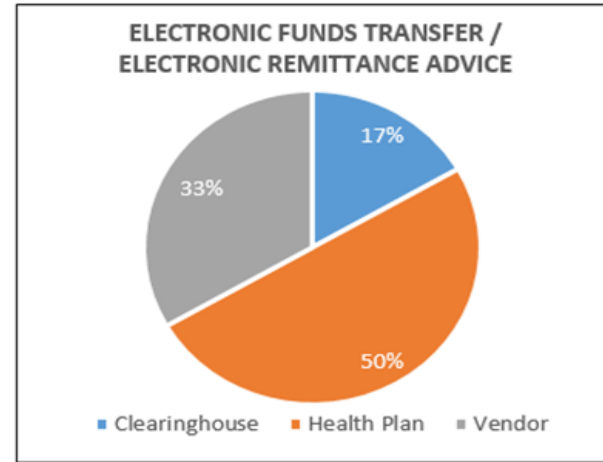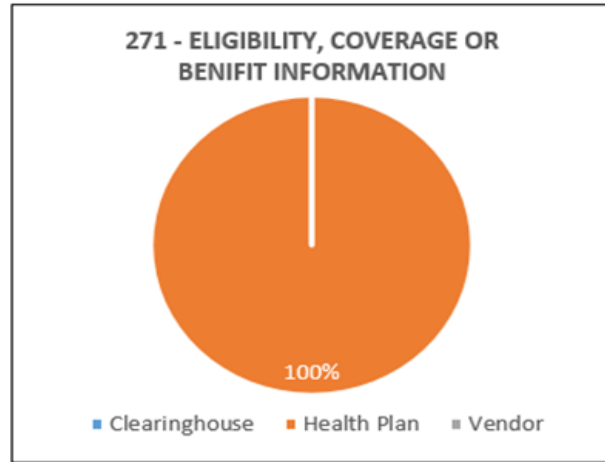
Complaint Closure by Reason

COMPLAINTS BY CLOSURE REASON

- Resolved – Mediation: 39%
- Retracted: 31%
- FAE Deemed Compliant: 15%
- Executed CAP: 15%

Resolved by Mediation – Either the complaint parties resolved the issue on their own or DNS served as an intermediary to resolve the issue.

Retracted – The complainant withdrew the complaint, e.g. decided not to file or resolved the issue with the FAE without assistance from DNS.

FAE Deemed Compliant – FAE found not to have violated HIPAA Administrative Simplification rules.
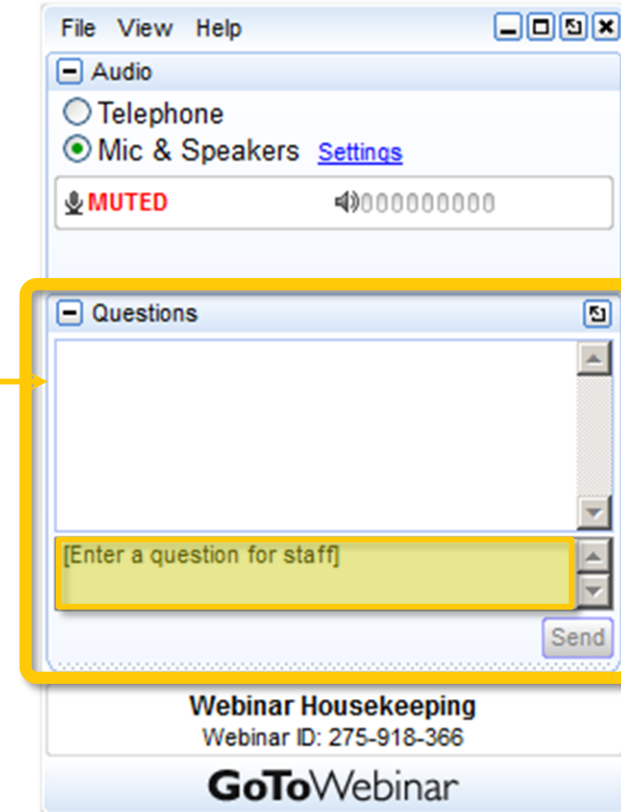
Executed Corrective Action Plan (CAP) – FAE completed all systematic updates to resolve the issue.

Thank you!

Audience Q&A

Please submit your questions

Enter your question into the "Questions" pane in the lower right hand corner of your screen.

- The slides and webinar recording will be emailed to attendees and registrants in the next 1-2 business days.

Thank you for joining us!

@WEDIonline

Website: www.wedi.org

Email: wedi@wedi.org

@CAQH

Website: www.CAQH.org/CORE

Email: CORE@CAQH.org

Additional Resources

Resources

- go.cms.gov/adminsimp website

- Administrative Simplification Email Updates

- Compliance Review video at https://youtu.be/iRF8TvaW4DU

- ASETT to test transactions or file complaints at asett.cms.gov

- AdministrativeSimplification@cms.gov for questions and comments

- CAQH 2017 Index and savings calculator at CAQH.org

- DNS Regional Office Engagement SharePoint site

Contacts – Enforcement Team

Madhu Annadata – Madhusudhan.Annadata@cms.hhs.gov

Chris Gerhardt- Christine.Gerhardt@cms.hhs.gov

Gladys Wheeler – Gladys.Wheeler@cms.hhs.gov

Geanelle Herring – Geanelle.Herring@cms.hhs.gov

Cecily Austin – Cecily.Austin@cms.hhs.gov

Rosali Topper – Rosali.Topper@cms.hhs.gov

Paul Anderson – Paul.Anderson@cms.hhs.gov

Acronym Glossary

ASETT: Administrative Simplification Enforcement and Testing Tool
CDT: Code on Dental Procedures and Nomenclature
CPT: Current Procedural Terminology
DNS: Division of National Standards
EHRs: electronic health records
EIN: Employer Identification Number
HCPCS: Healthcare Common Procedure Coding System
HIPAA: Health Insurance Portability and Accountability Act of 1996
ICD-10: 10th revision of the International Statistical Classification of Diseases and Related Health Problems
NDC: National Drug Code
NPI: National Provider Identifier Standard