

PIMA Health Systems: Integrating Disparate Data Feeds Into a Unified, Standardized Data Exchange



Problem

Since Congress passed the Health Insurance Portability and Accountability Act in 1996, healthcare stakeholders — from providers to health plans to state agencies — have gradually started to adopt electronic information exchanges, such as claims processing systems, in order to comply with various provisions of the law. But the switch from paper to web-based portals has been piecemeal and scattershot: More often than not, trading partners have implemented disparate technology that render data formats incompatible, and create logistical nightmares in the transmission of key healthcare information among billing services, payers, state health departments and other parties involved in the adjudication process.

The Challenge: PIMA Health Systems

Pima Health System (PHS), part of Pima County Government in Arizona, operates three main programs: an acute/ambulatory managed care organization; a long term care (LTC) managed care program; and a non-medical model of home support programs called Community Services. PHS provides services directly through PHS staff, and also contracts the services of independent healthcare providers, group practices, social services, and community agencies.

PHS receives claims data from several large submitters, such as providers, billing services and clearinghouses (Emdeon, SSI, ENS-Ingenix, etc.). PHS faced the challenge of managing these multiple feeds of claims data that resulted in high technical and support costs, as well as repeated investment of resources each time a new entity began submitting claims. Furthermore, any change in data formats, such as from ANSI 4010 to 5010, would require PHS to test with all its submitters and manage the transition to the new formats, thus incurring additional costs.

In order to reduce costs and streamline administrative functions, PHS aimed to implement a single exchange that would be able to accept electronic claims from multiple submitters and consolidate them into a single batch and send it to PHS. The exchange would also parse the report sent back by PHS, generate a separate report for each submitter, and send it to them.

The exchange would allow county providers to enter information into a web-based direct data entry portal. This feature was particularly critical for small providers who generate a low volume of claims — and either don't require or don't have the resources to employ a third-party billing service. At the onset, the system would be used by over 5,000 county healthcare providers to submit claims.

Solution

Pima Health Systems' selected IGI Health to power a single, unified Electronic Data Exchange that supports medical, hospital and dental claims submission to PHS. This gateway is powered by IGI Health's industry leading ORBIT® platform that allows healthcare stakeholders to exchange financial and clinical data through industry-standard transactions in a secured environment. ORBIT® replaced over 27 different electronic submission systems that were sending claims to PHS, allowing PHS to reduce costs and streamline administrative tasks. Now, all submitters and large clearinghouses will be routed through the new gateway in order to streamline the process.

Using ORBIT®, the claims received from different submitters are consolidated into a single batch file daily which is then transmitted to PHS. PHS processes the claims and sends back a single, consolidated report to ORBIT® exchange, which then parses the report and creates separate reports for each individual submitter. The submitters send claims files and receive reports via ORBIT® portal user-interface.

IGI's solution for PHS also includes a web-based direct data entry portal through which small providers can efficiently submit claims and advice data, needing no prior technical knowledge other than how to use a mouse and a keyboard. The site is secure, and complies with HIPAA security and privacy provisions. Plus, the cost is minimal: Providers pay a one-time fee with no subsequent recurring payments.

The ORBIT® Electronic Data Exchange can also accept non-standardized electronic claims from providers and institutions, and convert them into HIPAA-compliant ANSI ASC X12 837 formats for professional, institutional and dental claim forms. The system can also generate ANSI 997 acknowledgment files, exchange data (including PHS-generated remittance advice files), and allow batch upload for providers who submit large volume of claims.

ORBIT® is a plug-and-play-software platform that is customizable depending on the needs of particular stakeholders. In the case of Pima County, implementation took just six weeks and required no complex system redesign or fabrication. Moreover, ORBIT® is scalable: as PHS expands to serve an increasing number of area providers, ORBIT® can expand to meet the challenge. In fact, ORBIT® has proven to be a one-stop solution in creating a single, unified "EDI Gateway" for Pima County: By streamlining submission through this single gateway, PHS has reduced overhead costs and errors related to managing multiple connections thus freeing its resources to focus on other critical tasks.



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