



33 West Monroe St, Suite 1700  
Chicago, IL 60603-5616  
Tel 312 664 4467  
Fax 312 664 6143  
[www.himss.org](http://www.himss.org)

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28  
29  
30  
31  
32  
33  
34  
35  
36  
37  
38  
39

September 6, 2011

The Honorable Kathleen Sebelius  
Secretary  
Department of Health and Human Services  
Washington, DC 20201

Donald M. Berwick, M.D., M.P.P.  
Administrator  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Secretary Sebelius and Dr. Berwick:

On behalf of HIMSS, I am pleased to submit written comments to the Department of Health and Human Services and the Centers for Medicare and Medicaid Services regarding the Interim Final Rule published in the *Federal Register* on July 8th, entitled, “Administrative Simplification: Adoption of Operating Rules for Eligibility for a Health Plan and Health Care Claim Status Transactions” [CMS-0032-IFC RIN 0938-AQ12 July 8, 2011]. HIMSS appreciates the Department’s efforts to meet the administrative simplification tenets in the Patient Protection and Affordable Care Act of 2010 (PPACA) to establish common operating rules for insurance eligibility verification.

HIMSS is a cause-based, not-for-profit organization exclusively focused on providing global leadership for the optimal use of information technology (IT) and management systems for the betterment of healthcare. Founded 50 years ago, HIMSS and its related organizations are headquartered in Chicago with additional offices in the United States, Europe and Asia. HIMSS represents more than 38,000 individual members, of which more than two thirds work in healthcare provider, governmental and not-for-profit organizations. HIMSS also includes over 540 corporate members and more than 120 not-for-profit organizations that share our mission of transforming healthcare through the effective use of information technology and management systems. HIMSS frames and leads healthcare practices and public policy through its content expertise, professional development, research initiatives, and media vehicles designed to promote information and management systems' contributions to improving the quality, safety, access, and cost-effectiveness of patient care.

40 HIMSS has long been identified with the need to create a program that addresses standardized  
41 eligibility requests and response in healthcare. Since 2005, HIMSS has served on the advisory  
42 board of the CORE initiative that was established by CAQH, and became a “CORE Participating  
43 Organization and Endorser” in 2006.

44 Earlier this year, the CORE initiative was selected by the Department of Health and Human  
45 Services for the creation of the operating rules on eligibility. Prior to the selection of the CORE  
46 initiative as the operating rules author for claim status and eligibility, HIMSS coordinated with  
47 CAQH CORE and NACHA to establish a collaborative effort to educate the healthcare  
48 community on the potential benefits of common operating rules, as well as the Electronic Funds  
49 Transfer (EFT) and Electronic Remittance Advice (ERA) transactions that are to come under the  
50 Section 1104 of PPACA.

51 Electronic business transformation using eligibility rules, EFT, and ERA transactions have been  
52 the subject of deep study by HIMSS Medical Banking Project. Since 2001, we have convened  
53 banking and healthcare groups together to review the convergence of technology between  
54 banking and healthcare systems, resulting policy issues and regulatory frameworks, and the  
55 creation of best practices. In 2001, and again in 2004 and 2010, we have provided testimony to  
56 the National Committee on Vital and Health Statistics. Our testimony focused around the  
57 technological nexus between banking and healthcare and the vital policy issues that have  
58 surfaced. Through this time, HIMSS has convened policy roundtables, annual educational  
59 sessions, leadership forums and other specialized meetings convening banking, healthcare,  
60 policy, government, and technology firms to assess best practices in and administrative  
61 simplification. We believe that the development of this cross-industry community is required to  
62 advance electronic business transformation in healthcare.

63 As the healthcare community moves forward on implementing the regulatory requirements  
64 identified in the Interim Final Rule, HIMSS provides the following observations:

- 65 • *Existing Operating Rules.* The rules are the result of the collaborative work within the  
66 CORE community since 2005 to create Phase 1 and Phase 2 operating rules for  
67 eligibility, and have been advanced within the industry for some time. This IFR will place  
68 in regulation what is already occurring in the marketplace (albeit in a limited way) and,  
69 hopefully, speed adoption across healthcare stakeholders. We believe there is  
70 considerable value in standardizing this transaction and, at a very minimum, getting the  
71 stakeholders onto the Phase 1 and then Phase 2 track. The acknowledgement transaction  
72 provides critical value to the stakeholders and helps to create the necessary ROI, and  
73 therefore should be incorporated into this important effort.

74

- 75 • *New Operating Rules.* HIMSS supports the healthcare community call for the continued  
76 development of operating rules, and encourages the government to set the groundwork by  
77 identifying a timeline for a Phase 3 in the Final Rule.

- 78  
79 • *Education on Optimizing Business Value.* Creating operating rules for eligibility is a vital  
80 first step toward achieving more efficiency in the healthcare system. Unfortunately,  
81 many providers are hesitant to make the necessary additional investments in business-  
82 centered technologies as part of their health IT adoption strategy. Maximizing the value  
83 of eligibility rules and other transactions requires electronic integration into the workflow  
84 environment. We all need to make the case to providers that optimizing the business  
85 value of the health IT investment will result in a compelling ROI for them. Without  
86 proper education on the ROI, providers will not adopt the common operating rules, and  
87 some of the administrative benefits in Section 1104 of PPACA may not be realized.

88  
89 Education is a vital requirement across the stakeholders, especially among smaller  
90 providers. Electronic business transformation requires an understanding of the  
91 transactions, operating rules and electronic integration technologies that drive business  
92 value. Identification and dissemination of best practices, the exploration of new ways to  
93 drive value as a result of electronic integration, workforce training issues (including  
94 privacy and security), and other areas, are part of the overall process of electronic  
95 business transformation in healthcare that will result in moving past paper/phone-intense  
96 processes that are laden with inefficiency, error and waste. Therefore, HIMSS strongly  
97 recommends education around the ROI mechanisms needed to accelerate the adoption of  
98 the Operating Rules. We would be glad to engage with HHS on how to best leverage  
99 HIMSS' vast reach into the provider community to increase providers' understanding of  
100 the IFR.

101 Given the importance of developing a national strategy to implement national standards that  
102 drive optimum outcomes for healthcare, HIMSS is dedicated to the highest standards of  
103 educational excellence in the areas of administrative simplification, new technological  
104 convergence between the healthcare and banking industries that improves operational efficiency,  
105 privacy and security within the business of healthcare, and other areas. In addition to being an  
106 endorser of the CORE initiative, examples of our collaborative efforts include:

- 107 a) Working with ANSI X12 on version 5010 migration and ICD10 transformation;  
108 b) Developing educational programming with the American Association of Healthcare  
109 Administrative Management (AAHAM);  
110 c) Leading an healthcare-wide collaborative program called the "ICD-10 PlayBook" that  
111 builds educational and messaging consensus around ICD-10 transformation. The ICD-10  
112 PlayBook receives over 1,000 visitors each week;



- 113 d) Educating more than 1,800 healthcare executives to-date through HIMSS' ICD-10  
114 Executive Briefings.; and,  
115 e) Co-leading a cross-organizational collaborative called the "GetReady5010.org" effort  
116 (CMS, AHIMA, Health Billing Management Association, WEDI, AMA, and HIMSS)  
117 resulting in webinars with registrations of over 26,000 executives across healthcare.  
118 f) Collaborating with the World Bank to convene seven key healthcare stakeholder groups  
119 through HIMSS' thought leadership platform to design the healthcare financial network  
120 of the future.

121 As you may know, the HIMSS Interoperability Showcase™ is one of the most heavily trafficked  
122 areas at the HIMSS Annual Conference and Exhibition that annually draws over 28,000  
123 healthcare leaders. Over 5,000 attendees visited the Showcase at HIMSS11. For HIMSS12, the  
124 Interoperability Showcase™ will launch a "Healthcare Business Community" demonstrating use  
125 cases around the convergence of banking and financial technologies, operating rules, 5010  
126 migration and ICD10 transformation.

127 We support the efforts that have been established in the Common Operating Rules Interim Final  
128 Rule. HIMSS will continue to offer our resources and programs to the Department and CMS in  
129 order to support effective, continuing and transformational education both onsite and online to  
130 move the operating rules from regulation to reality. If you have any questions, please feel free to  
131 contact [Mr. John Casillas](#), Senior Vice President for Business Centered Systems, or [Mr. Thomas](#)  
132 [M. Leary](#), Senior Director of Federal Affairs at 703.562.8814.

133

134 Sincerely,



135  
136 H. Stephen Lieber, CAE  
137 President and CEO