

## **EDI Transactions & Code Sets Implementation Project Plan**

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The charts below are a “work breakdown structure” (WBS) and timeline for one approach to implementing the HIPAA mandated EDI Transactions & Code Sets standards. This is based primarily on the needs of one healthcare provider organization with an integrated information system and applications currently in place. Some of the specifics referring to vendor names have been made more generic for this presentation, as each organization’s needs and situation is going to be different.

The intent here is to share the high-level view of what major phases and activities the project will likely include. This WBS does not include the detail level tasks necessary to complete each activity shown. Those are left to the project team to fill in as they move forward, and have better knowledge at that point as to what is needed.

*Each organization’s final plan will look different, depending on their needs. The approach used here was:*

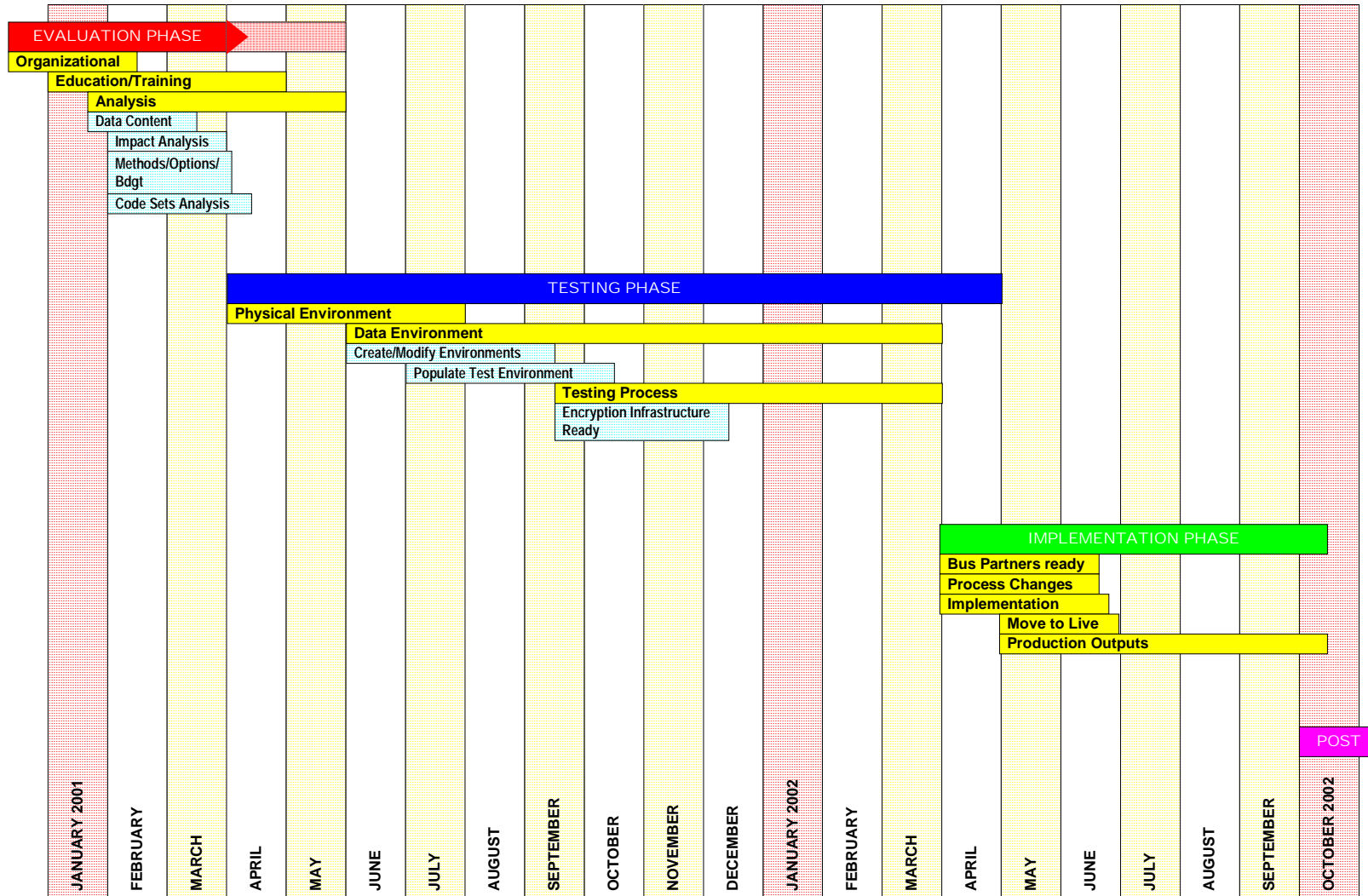
1. First identify the major phases of such a project, and within those to identify the major and minor activities and deliverables needed. These were drawn in hierarchical outline fashion – i.e., some items are “sub-activities” of other major activities.
2. Once done, the next step was to identify approximate relationships between major and minor activities – which must be started first, which are dependent upon others being finished or at least 50% complete before the next could begin. These dependencies are represented by the yellow arrows from one activity to the next. Those not shown as dependent upon another activity may potentially be started at any time, and completed separately.
3. Milestones were next to be established by determining (approximate) dates by which certain key activities must be completed in order to facilitate the project finishing on time (no later than October 2002). Those milestones dates are the major dates which will be tracked to ensure the project is always on time and on track. Additional dates will be added in once the detail project plan is built.
4. Resources for major activities are also identified, to ensure the project team is soliciting and reserving the time of people needed to work on parts of this project. As this project will touch many areas within the hospital (IS, application vendors, billing, clinical, medical records and coding, etc.) it is essential to identify those early and begin including them.
5. Placeholders were inserted in certain places so the project team would remember to include those during development. These areas however are separate projects (such as developing an encryption plan) which are not the direct responsibility of the EDI project team, but of another project team. Separation of projects was seen as critical as anyone team needed to be focused on their area of expertise. This also makes overall management easier, both of individual projects, and of the overall HIPAA program.
6. While this plan does not specifically include the implementation sequencing of the transaction standards (837, 835, etc.), it is assumed that this sequencing will be patterned after a) the WEDI and SNIP recommendations and b) what our regional and trading partner alliances will be doing.

### ***Definitions:***

1. **Evaluation Phase:** The gathering of relevant and necessary information to build a meaningful plan and strategy.
2. **Organizational:** Primarily the stage of building the high-level project plan.
3. **Data Content Analysis:** A gap analysis between what data elements are required by the Implementation Guides and what our current systems support. This in turn helps identify needed upgrades to both software and hardware to support meeting the X12N standards.
4. **NM-CHILI EDI Workgroup:** A New Mexico based coalition around HIPAA and it's EDI workgroup.
5. **Impact Analysis:** Identifying of issues and needs within the information system which must be modified in some way to support compliance.
6. **Data Volume & Capacity:** Evaluation of changes in storage (disk) capacity needs due to increased volume of data captured, stored, and processed.
7. **Evaluate Methods:** Looking at alternative ways of building both the test and live systems, and ways of generating the required X12N formatting.
8. **Process Changes:** Anticipated and identified business and clinical processes which will be impacted and modified by the need to capture additional data elements to comply with the standards.
9. **Encryption Infrastructure:** A place holder in the project plan to incorporate work done by another project team relative to encryption of transmissions.
10. **Change Control:** An IS/IT department process requiring all changes to existing systems to be reviewed and approved by a management team prior to implementation.
11. **Milestones:** Completion dates for specific and important activities which directly impact the project schedule and are critical to the project's success.

Other items are generally clear within their context. Each organization will have differing needs in terms of both evaluation and control of project implementation. National Identifiers is set as a placeholder, so the project team may take this up once the final rules are released. A decision can then be made as to whether this will be wholly incorporated into the EDI Project or if it should managed separately and linked back to the EDI Project.

## Sample EDI Transactions & Code Sets Project Major Milestones



**1.0 Evaluation Phase (current - 4/15/2000)**

**1.1 Organizational (1/30/2000)**

- ♦ Gather-Summarize rules
- ♦ Activities & Sequencing
- ♦ Timelines for major/minor activities
- ♦ Milestones & Deliverables - identify
- ♦ Resources - identify
- ♦ Team edit & adopt

**1.2 Education/Training**

- ♦ General staff & team
- ♦ Technical for EDI standards (protocol, encryption, HW)
- ♦ Outside?
- ♦ Team Education (code sets & rules)
- ♦ Interface engine
- ♦ Implementation Guides
- ♦ EDI information or standards
- ♦ NM-CHILI EDI workgroup
- ♦ Communications Plan (general for updates)

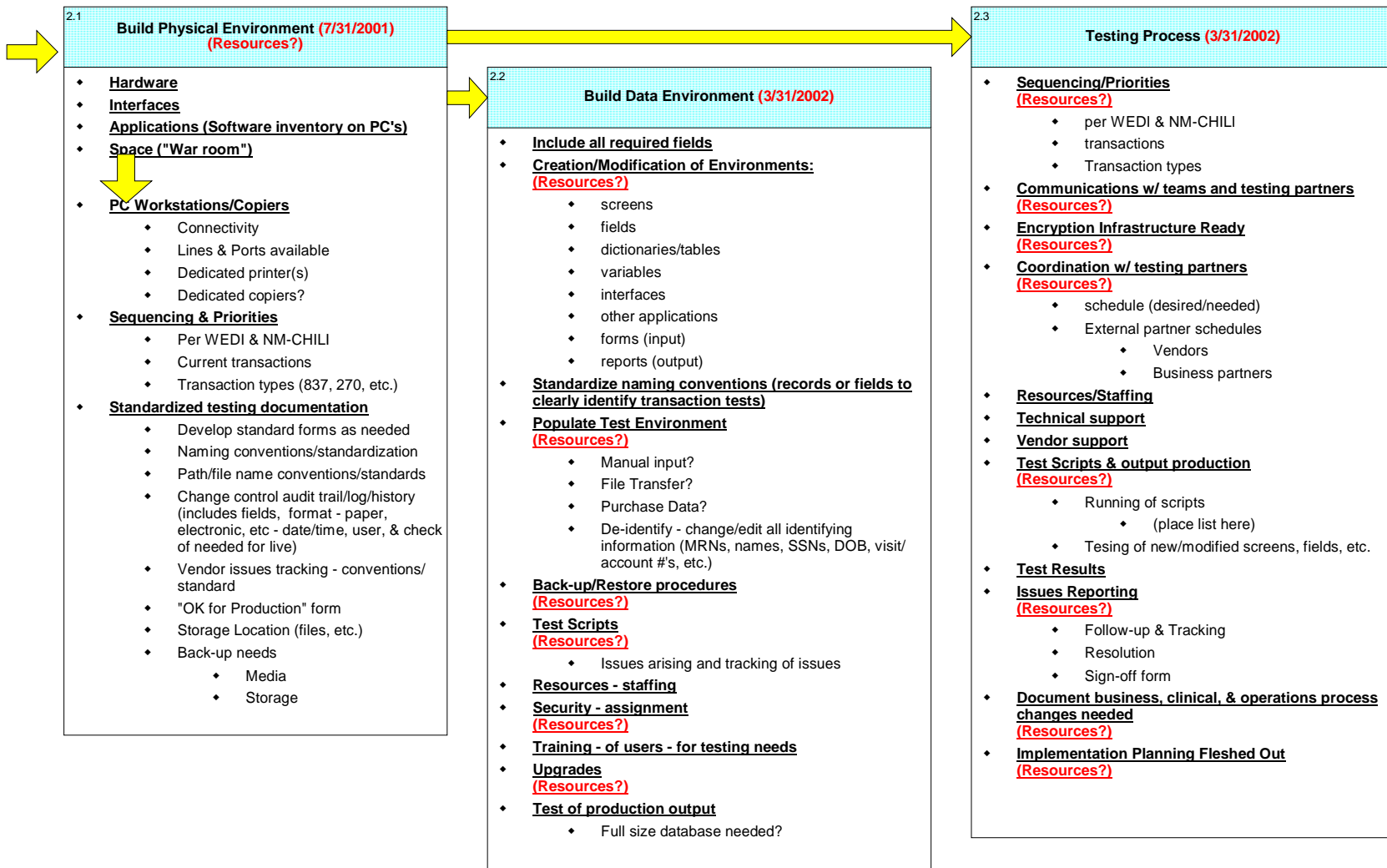
**1.3 Analysis (4/15/2000)**

- ♦ Data Content (3/15/2000) (Resources?)
  - ♦ Inventory of content required (into database)
  - ♦ Current processes content capture (identify content currently captured & not captured; log into database)
    - ♦ Initial list of process changes anticipated
  - ♦ Applications content analysis (identify current content fields & gap)
  - ♦ Review & identify covered transactions
    - ♦ List all covered transactions (current)
    - ♦ Trading partners involved
    - ♦ Vendor readiness
  - ♦ Identify new modifications (screens, fields, tables, variables, interfaces, etc.)
  - ♦ List potential cost items

- ♦ Impact Analysis (3/31/2000) (Resources?)
  - ♦ Data volume (bytes) projection analysis
  - ♦ Capacity & storage (disk & memory)
  - ♦ Potential Organizational processes impacts
  - ♦ Identify business partner, vendor, contracted resources needed
  - ♦ List potential cost items
  - ♦ Legacy systems issues
    - ♦ "combined" fields such as name (last, first mi) breaking into separate fields
    - ♦ field length issues - any requirements which app does not support?
  - ♦ Approval For Needed Upgrades

- ♦ Evaluate Methods/Options/Budget (4/1/2000) (Resources?)
  - ♦ Capabilities (to meet X12N formats) - interface engine
  - ♦ Internal compliance translator vs. external clearinghouse
  - ♦ Identify need for new test environment
    - ♦ Hardware
    - ♦ Interfaces
    - ♦ Applications
  - ♦ Encryption issues (placeholder)
    - ♦ Identify where it is needed
    - ♦ Synch to this project & include for testing & implementation
  - ♦ List potential cost items
- ♦ Data communications (Resources?)
  - ♦ Transmission protocols
  - ♦ File retention & reconciliation needs
  - ♦ List potential cost items
- ♦ Project & team communications issues
- ♦ Code Sets analysis (4/15/2000) (Resources?)
  - ♦ Identify affected codes (local, regional, mental health, rehab, SNF, HHC, etc.)
  - ♦ Input from state or regional groups
- ♦ National Identifiers (placeholder)
  - ♦ Providers
  - ♦ Employer
  - ♦ Health plan

➔ Indicates Dependency  
Milestone dates in Red



**3.0 Implementation Phase (10/16/2002)**

**3.1 Business Partners (not vendors) Process Documentation**  
(Resources?)

- Transmit Direct?
- Transmit to BP's clearinghouse?
- BP contacts & problems resolution process

**3.2 Process Changes (business, clinical, operations)**  
(Resources?)

- Documents/manuals for new or changed processes
- Training of staff in new/changed processes
- Implementation of new/changed processes

(NOTE: "operations" = nightly, batch, production & similar processes for on-going business operations)

**3.3 Implementation**  
(Resources?)

- Coordination with other entities
- Change Control process
  - Scheduling downtime
  - Back-up & Restore processes
  - Vendor resources available
  - Staff resources available

**3.4 Move tested components to live (7/01/2002)**  
(Resources?)

- Test in Live (staffing)
  - Issues List
  - Sign-offs

**3.5 Production Outputs**  
(Resources?)

- Check-off list as production goes live
- Documentation maintained of each live transaction for certification/auditing purposes

**3.6 Certification and Audits**

- Internal
- Other?

**3.6 Compliance Deadline**

- October 16, 2002

**4.0 Post-Implementation Phase**

- On-going Issues Resolution
- New transaction standards as announced