



## **AUGUST 6, 2024**

Agenda Subject to Change. All Times Central (Chicago)

### **WEDI Welcome**

8:30am – 8:45am

### **Teamwork Makes the PA and Interoperability Dream Work: An Industry Panel**

In this insightful panel discussion, leaders from key industry organizations will explore how they are responding to the CMS Interoperability and Prior Authorization Rule and the steps they are taking to educate their members on these significant changes. Join us for a comprehensive exploration of the collaborative efforts and proactive measures being taken to navigate this pivotal regulatory change and gain valuable knowledge to help your organization thrive in the evolving healthcare landscape.

8:45am – 9:30am

- Andrea Preisler, Senior Associate Director, Administrative Simplification Policy, American Hospital Association
- Heather McComas, Director, Administrative Simplification Initiatives, American Medical Association
- Karuna Relwani, Business Interoperability Lead, Health Information Technology, Blue Cross Blue Shield Association
- Danielle Lloyd, Senior Vice President, Private Market Innovations & Quality Initiatives, America's Health Insurance Plans

### **CMS PA and Interoperability Feedback Session**

9:45am – 10:30am

Receive updates and offer your thoughts to Alexandra (one of the lead authors of CMS-0057-F) on how your organization is addressing the final rule and any questions or issues you have.

- Alexandra Mugge, Chief Health Informatics Officer, Director of the Health Informatics and Interoperability Group, Centers for Medicare & Medicaid Services

### **Morning Networking Break**

10:30am – 10:45am

### **Sponsored Educational Session presented by edifecs**

10:45am – 11:30am

### **Vendor Prior Authorization Panel**

WEDI welcomes solutions experts to discuss what they are hearing from their clients in terms of implementation. How are they interpreting and implementing the final rule with their customer communities and how are they communicating the rule to their clients who are not required to implement the rule?

11:30am – 12:15pm

- Kevin Day, Principal Business Advisor, Edifecs
- Daniel Cawood, Product Manager, Interoperability Solutions, MCG Health

### **Forum Lunch and Small Group Table Discussions**

Enjoy lunch and have in-depth, informal discussions on key HIT issues (Available for Chicago audiences only)

12:15pm – 1:00pm

### **Payer Prior Authorization Panel**

Payer organizations address their current state (including the digitization of their PA policies) and anticipated challenges/considerations as they begin the process of addressing the final rule.

1:00pm- 1:45pm

- BCBS South Carolina
  - Gregg Johnson, FHIR Team Lead and Product Owner
  - Richard Abercrombie, Lead Developer
- Cambia Health Solutions
  - Kirk Anderson, Vice President & Chief Technology Officer, Cambia Health Solutions
- More panelists TBA

### **Provider Prior Authorization Panel**

Challenges connecting to multiple health plans. Development of their PA workflow? What are the thoughts from smaller providers? We invite provider organizations to address these questions while showcasing the value of the final rule.

2:00pm- 2:45pm

- Semira Singh, Director Population Health Informatics, Providence
- Anna Taylor, AVP, Population Health & Value Based Care, MultiCare Connected Care

### **Afternoon Networking Break**

2:45pm – 3:15pm

### **Massachusetts Prior Authorization Spotlight**

3:15pm – 4:00pm

Massachusetts is at the forefront of evolving and revolutionizing the process of prior authorization, an essential aspect of healthcare management that can often be a bottleneck for timely patient care. Here are some of the key initiatives and strategies the state is employing:

From adoption of standardized ePA data and workflows, legislative efforts, collaboration with stakeholders, pilot programs and more, Massachusetts is making significant strides in reforming prior authorization. These efforts are aimed at reducing administrative burdens, improving patient care, and ensuring that the healthcare system is more responsive and equitable.

- Denny Brennan, Executive Director, Massachusetts Health Data Consortium (moderator)

### **Summer Forum Small Group Exercise**

4:00pm – 5:00pm

What priorities, resources and initiatives can WEDI develop and offer through its Strategic National Implementation Process (SNIP)? What will help you in your compliance journey and how can the industry excel in this new API environment?

**WEDI Happy Hour, Gino's East, 162 Superior Street, Chicago, IL**

5:30pm – 7:30pm



## **AUGUST 7, 2024**

### **X12 Updates to New HIPAA Standards**

8:00am – 8:30am

- Cathy Sheppard, CEO, X12  
Description TBA

### **WEDI Claims/ Remittance Survey Findings and Discussion**

8:30am – 9:30am

In June, WEDI conducted a survey gathering input from stakeholders to rate the potential business value and impacts of the features included in the next version of the X12 837 and 835 transactions that were recommended to be updated. This session will review the results of the survey and prepare information to share with CMS on those results.

- Pam Grosze, Co-Chair, WEDI Remittance, Payment & Advice Sub Workgroup. Vice President, Senior Product Manager, PNC Bank
- Patricia Wijtyk, Co-Chair, WEDI Remittance, Payment & Advice Sub Workgroup. Senior Associate, BPO, EDI Team, Cognizant
- Stanley Nachimson, Co-Chair, WEDI Claims Sub Workgroup. Principal, Nachimson Advisors
- Charles Veverka, Co-Chair, WEDI Claims Sub Workgroup. Senior QA Manager, Kunz, Leigh & Associates
- Beth Davis, Co-Chair, WEDI Claims Sub Workgroup. Senior Manager, Payerpath - Veradigm

### **Da Vinci Remittance Updates: Payer Data Exchange and Burden Reduction Overviews**

9:30am – 10:15am

### **Morning Networking Break**

10:15am – 10:30am

### **CMS National Standards Group Small Group Exercise**

10:30am – 12:00pm

The National Standards Group (NSG) will host a listening session to solicit input on feedback garnered from WEDI's survey regarding updates in X12's version 8020 for the claims and ERA transactions. NSG hopes to gain a better understanding of the expected business impact from the updates in this latest version from X12.

- Michael Cimmino, Director, National Standards Group, Office of Burden Reduction & Health Informatics, Centers for Medicare & Medicaid Services

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