

**NAS comments re: Claims Attachment NPRM**  
 Submitted by Holly Meyer on behalf of Noridian Administrative Services  
 701-277-2053, holly.meyer@noridian.com

Comment Number	Page Number	Section	Comment
1.	55997	5. Electronic Claims Attachment Types	<p>Comments were invited re: the appropriateness of the attachment types selected so far and the types that would be most beneficial to the industry for future regulation.</p> <ol style="list-style-type: none"> <li>1. Skilled Nursing Facility (SNF) - We understand that there are some SNF related questions allowed in the rehabilitation booklet; however, there are additional SNF services for which additional documentation is requested that should be covered in upcoming attachment regulations.</li> <li>2. Durable Medical Equipment (DME) certification of medical necessity</li> <li>3. Hysterectomy Consent – is always reviewed for Medicaid</li> <li>4. Sterilization Consent Form – is always reviewed for Medicaid</li> <li>5. Home Health Plan of Care - is always reviewed for Medicaid</li> <li>6. Hearing Aid Evaluation/Selection Report - is always reviewed for Medicaid</li> <li>7. Report of Examination for a Hearing Aid - is always reviewed for Medicaid</li> </ol>
2.	56014	5. Electronic Claims Attachment Types	<p>There needs to be a streamlined process to adopt new attachment types as they are developed by HL7. For new Additional Information Specifications (AIS), we recommend that the DSMO be authorized to adopt approved published HL7 AIS documents through the DSMO process without going through full federal regulatory process. This would include provisions for outreach and comments during the HL7 ballot process and appropriate notification and roll-out time between adoption and the required implementation date.</p>
3.	55996	5. Electronic Claims Attachment Types	<p>We recommend the current federal rulemaking process not be required to change claims attachments LOINC code definitions or cardinality.</p>
4.	55997	5. Electronic Claims Attachment Types	<p>This section names CDA Release 1. If CDA Release 2 were to not require the MIME packaging with non-XML images, we would recommend moving to CDA Release 2. We recommend moving to CDA Release 2. There are several benefits with moving to CDA Release 2. One of the benefits is that CDA Release 2 does not require the use of MIME packaging with non-XML images. We anticipate MIME packaging may be a challenge for provider and/or vendors to implement as covered entities have limited expertise in using MIME and encoding.</p>
5.	33	HL7 IG	<p>We support the inclusion of all referenced permissible file types. Additionally, we suggest guidance be provided to assist providers in determining the appropriate file type to use for various types of attachment documentation.</p> <p>For example, the appropriate file type for a black/white image is likely different than a color picture or photograph. We believe the industry would benefit from some parameters being offered so that images can be stored and transferred as efficiently as possible.</p>
6.	12	HL7 IG	<p>Use of URLs – Referencing a URL instead of inserting an image or text is likely to make automation of receipt and processing of attachments more difficult.</p> <ul style="list-style-type: none"> <li>• The payer will have to go out to a provider's web site to retrieve the attachment; this is not as easily automated as processing of an image or text sent in the transaction.</li> <li>• The payer will have to get to the provider's web site before the provider removes the attachment. Timing this may be difficult.</li> </ul>

**NAS comments re: Claims Attachment NPRM**

Submitted by Holly Meyer on behalf of Noridian Administrative Services

701-277-2053, holly.meyer@noridian.com

7.	12	HL7 IG	Use of URLs – Referencing a URL instead of inserting an image or text is likely to create difficulty. The payer will need to get information from the provider to be able to login to a web site and be properly authenticated to access PHI. Managing multiple login/password combinations for access to multiple provider web sites will become cumbersome and potentially make it difficult for payers to access attachment information.
8.	12	HL7 IG	Use of URLs – Connectivity issues could significantly delay a payer’s ability to retrieve necessary attachments.
9.	All	Attachment AIS booklets	We believe there may be a need for “dump” LOINC codes, or codes that can be used when there is not a more specific code available. One specific example would allow for providers to respond regarding chemo drug response codes. There could be a specific LOINC for asking reason for giving med while certain meds may not yet be assigned a specific LOINC.
10.		Federal Register SIGNATURES	There are currently attachments in development at HL7 that require signatures; therefore, an appropriate way to capture these signatures must be accommodated within the standard.
11.	56024	Federal Register REG TEXT	In general, we would like to see a clarification in the final rule stating that covered entities must only support these standard transactions for electronic claims attachments if they currently conduct the business function using claims attachments.