

News from SIRAS project: Medical data now, claims data later

One focus of the Self-Insurance Risk Analysis System (SIRAS) project has changed: we will be implementing the Medical Electronic Data Interchange (EDI) first, and the Claims EDI later. This refocus is a result of our research about [national data standards](#), including input from current SIEDRS submitters about the challenges of implementing the Claims EDI.

Why do the Medical EDI first?

Our research into the Medical EDI shows high-value data with an anticipated low impact to the business processes of self-insured employers (SIE). In contrast, the Claims EDI will add medium-value data with a high impact on the business processes for the SI community. We can't create both data interchanges within the constraints of this project.

The majority of medical bills are submitted on nationally used forms. This means it will be less challenging to make self-insurers' data consistent with the national data standards than it would be for the Claims EDI, where significant differences exist in processes and data definitions.

Benefits of implementing the Medical EDI

- The Medical EDI includes data that L&I collects to pay bills on State Fund claims, and adding SIEs will improve benchmarking for SIEs with other states as well as medical data for Washington in general.
- Self-insured employers' data will inform policy decisions related to treatment, such as risk of harm, independent medical examinations, and clinical guidelines.
- Self-insurers will be able to collaborate with L&I on key initiatives to improve medical outcomes for injured workers and the overall system.

Claims data later

L&I will add reporting for claims data later, in a separate one-time project. Until we can complete the claims data project, self-insured employers will continue to report claims data using the current Self-Insurance Electronic Data Reporting System (SIEDRS).

Implementation schedule

L&I plans to have SIRAS's Medical EDI ready by June 2017. Our goal is to have the requirements available by June 2016 – so that submitters have one year to prepare their systems for reporting. Our third-party vendor, ISO, will be leading the transition. After July 1, 2017, all of Washington's self-insurers will be required to report through the third-party vendor using the new medical data standards.

Questions?

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