



# Connect Care

## Billing Software Vendor FAQ

AHS wants to provide physicians with options that decrease the risk of privacy breaches due to their use of protected health information for purposes of payment collection.

This document answers questions we've been asked by software vendors who are also accredited to submit physicians claims electronically to Alberta Health. As Alberta publicly-funded facilities transition from existing electronic medical records to the single system of Connect Care, it is now feasible for billing software accredited by Alberta Health to develop functionality that allows their customers to take data stored in Connect Care and directly import it into their billing software.

### Table of Contents

- What is the opportunity for billing software vendors?..... 1*
- What data specifications and fields are available to be extracted?..... 2*
- How frequently will AHS send billing data for its Medical Staff to a vendor? ..... 2*
- What help can a vendor get from AHS to develop the import and establish the sFTP needed? ..... 2*
- How do billing providers let you know they want their data sent to a vendor?..... 2*
- When is Service Code Capture data visible to AHS? .....3*
- What will the data extract look like if a billing provider uses SCC to update or change the billing information for an encounter previously exported to the vendor? ..... 3*
- Physicians document in ICD-10, but billing occurs via ICD-9 in Alberta. How is this handled? ..... 3*
- What types of claims are supported? ..... 3*
- Can this service work without the sFTP connection?..... 3*
- Can we suggest enhancements to the process, such as additional data fields to be included, or a more frequent batch process? ..... 4*
- How do we get started?..... 4*

#### **What is the opportunity for billing software vendors?**

Physicians working in offices and clinics outside of publicly-funded facilities of AHS, Covenant Health, Lamont Health Centre, Alberta Precision Labs, Carewest and Capital Care Group will continue to use the EMRs they have purchased to store health information of patients treated in those locations. Most of these physicians working from their offices have transitioned to systems that integrate billing software with the EMR to eliminate unnecessary duplicate data entry.

According to the CPSA there are 10,959 independently practicing physicians in Alberta. As of June 2021, 82% (n=9004) of these physicians do at least some of their work in publically funded facilities. At the end of 2023 when transition to Connect Care is complete, most of 82% physicians will be using an EMR without the benefit of an integrated, accredited claim submission function. Physicians' time spent on preparing paperwork necessary to get paid ranges from 5 to 60 minutes for a patient encounter, according to an American study. Most of the claims that take the most time because of manual claim entry and preparing required documentation done in hospitals.

#### **What data specifications and fields are available to be extracted?**

Vendors can build both appointment scheduling sets of data and data and is collated when a billing provider uses what is called the Service Code Capture (SCC). The fields outlined in the Specifications posted on this [webpage](#) are the only fields AHS will currently provide to physicians for them to use for billing purposes.

AHS will not adapt any fields to meet specific vendors' requests unless we do a Specifications Review after Connect Care is fully launched and the changes benefit the majority of its Medical Staff.

If there are fields in the AHS extract that software does not need because it is stored already in the billing software, such as Business Arrangement Numbers, Alberta Health Practitioner IDs or patient insurance coverage – it is the vendor's responsibility to parse data and discard fields not imported in accordance with the HIA and their software's privacy impact assessment for Government.

Note that AHS does not archive data sent via the sFTP interface. It is recommended that the vendor do so in the event that an import fails. If archiving, please be mindful of the relevant data retention legislation, and privacy impact assessments.

#### **How frequently will AHS send billing data for its Medical Staff to a vendor?**

If vendors have established the secure file transmission, physicians only need to tell us which vendor they will use and to initiate nightly data feeds to that vendor.

**What help can a vendor get from AHS to develop the import and establish the sFTP needed?** In addition to the data specifications posted in this [webpage](#), we have also included a guide to setting up the sFTP. Vendors will need to fill out an application and submit it as instructed.

In order to test the sFTP and import functionality vendors build, AHS will provide a test data batch to the vendor prior to initiating the nightly batch sending. Please contact us at [servicecodecapture@ahs.ca](mailto:servicecodecapture@ahs.ca) to start the process.

#### **How do billing providers let you know they want their data sent to a vendor?**



Medical Staff who want AHS to provide their Service Code Capture data to a software vendor for import need to submit a request to Medical Affairs. This is because some configuration is required to enable the SCC data to follow to the data extract that will be sent nightly.

This request form is on the same webpage as where we will list the vendors who have notified us their software can import data for their customers.

#### **When is Service Code Capture data visible to AHS?**

AHS decided that only a billing provider would be able to access charging data for an encounter and if so, what they charges are applicable. To review the data that was pushed/will be pushed overnight, they need to run the reports named “My Billing Codes” and “My WCB Codes” from within Connect Care or use the reporting available in their billing software to see what was imported by the vendor.

#### **What will the data extract look like if a billing provider uses SCC to update or change the billing information for an encounter previously exported to the vendor?**

The data extract that includes the corrected SCC data will be listed along side the previous claim line which will identify the first claim line as deleted.

Any changes that occur on the date of entry (i.e. before midnight) haven’t yet been sent to the vendor, and can be corrected in SCC with no impact on what the billing vendor receives.

#### **Physician will document in ICD-10, but billing occurs via ICD-9 in Alberta. How is this handled?**

Connect Care has a clinical terminologies translation engine that converts from ICD-10-CA to ICD-9. Greater than 99% of billing information can be successfully converted, but some ICD-10-CA codes do not have a clear ICD-9 counterpart. If that occurs, Connect Care will pass the ICD-10-CA code with a flag to indicate that it is not an ICD-9 code. The billing service will then following their routine process for confirming the appropriate code to be billed – typically by confirming with the physician.

#### **What types of claims are supported?**

- Alberta Healthcare Insurance Plan (fee-for-service and shadow billing)
- Out of Province claims
- Alberta Blue Cross
- Medavie Blue Cross (federal)
- Out of Country (self pay)
- Uninsured Services (such as a driver’s medical)
- Third-party insurance

#### **Can this service work without the sFTP connection?**

Yes, a flat file of billing information can be downloaded by the physician or delegate (such as an MOA) and sent securely to the billing company. At that point, it can be

- a) Manually keyed into the billing system, or



b) Imported into the billing system, if such functionality exists

This method relies on users to send the billing information securely, and regularly (recommend once per month or more), and avoids privacy implications related with lost or misplaced paper billing chits.

**Can we suggest enhancements to the process, such as additional data fields to be included, or a more frequent batch process?**

Although suggestions are always welcome, the relevant AHS teams are focused on deployment of the Connect Care system across Alberta. No changes will be made to the process or data spec until at least 2023/24 timeframe, to accommodate work associated with the system deployment.

**How do we get started?**

This service is open to any billing company that is a HLink Accredited Submitter with Alberta Health.

- 1) Review the Physician Service Code Extract Specifications document located on the [AHS website](#).
- 2) To obtain test data, or to start the sFTP connection process, please email [servicecodecapture@ahs.ca](mailto:servicecodecapture@ahs.ca).

