

STRATFORD

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Healthcare EDI and Management Software

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stratford notes

In previous newsletters we have had many articles about the changes HCFA is making in the Medicare program. Here is another one. If you think there have been more changes than any time in the past, you are correct.

The Medicare program was thirty years old in 1996. During most of those thirty years, HCFA let various insurance carriers contract to handle the administration duties. As you can imagine, each payer had a different way to do things. All of them did a good job but there was too much duplication and inefficiency.

If we had a different software package for each different specialty, we would need to charge many times as much. Our support would be much more expensive because of the increased number of support people and programmers that would be needed. That is exactly where Medicare has been until the past year. Some states like California and New York have more than one Medicare contractor. Until recently, we maintained at least forty different versions of our EDI software for the different payers.

HCFA is in the process of standardizing the processing for every payer, provider and beneficiary in the United States. This will affect Stratford. It will affect you and all of your patients. Change is almost always painful but this will surely improve the processing of claims eventually.

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Stratford has nearly 3,100 licensed users

You can find Stratford's Internet server at this address:

Imagine if you always knew exactly how much you would be paid for any given service. Imagine if you were always paid in exactly the same number of days. This may be possible soon.

In previous newsletters we have discussed HCFA's MTS (Medicare Transaction System). With this system, all providers should be able to transmit their Medicare claims in the same format. Every provider will be paid by direct, electronic deposit to his/her bank account.

Now the patient gets a different form for the inpatient (Part A) and the outpatient (Part B) fees. By the end of 1997, your patients will get a Medicare Summary Notice (MSN). This single form replaces all the old variations of the EOMB. •

Training Classes
SHS Software Basic Training

In the Stratford Classroom:

Every Friday	9:30 AM -12:00 PM	\$165
	1:30 PM - 4:00 PM	\$165
By Appointment		\$165

Call for class availability at least three days in advance.
On-site training with a certified Stratford trainer may be available (*by appointment only*). The cost is \$250.
Telephone training is available (*by appointment only*).

FROM THE EDI CORNER.....

National Heritage Insurance Company (NHIC) was selected to be the new Medicare Part B carrier for Massachusetts, Vermont, New Hampshire and Maine on March 4, 1997. Blue Cross and Blue Shield of Massachusetts is ending its Medicare contracts. NHIC also has contracts for Northern California Medicare Part B and the Medicaid contract for Texas. Stratford customers should have a smooth transition since our software is already approved by NHIC. Our users transmit a very heavy volume of all types of claims to NHIC. •

MEDICARE MTS SYSTEM

The Medicare Transaction System (MTS) is due to be operational by 1999. Medicare will have three (or maybe four) processing centers in the US. All Medicare claims from all sources will be processed at those centers. For awhile, you may be sending your claims the same way that you now send them. Most people transmit directly to their local Medicare payer. With MTS, the Medicare payer will forward the claims to a processing center possibly using the Internet. IBM was

given the contract to set up a Medicare web site on the Internet. It will have more than 55,000 pages of information available.

**YEAR 2000 ACCOUNTING
DATE**

In the past few months we have had several users question whether the Stratford program can handle dates after the year 2000 correctly. This is a reasonable question since the Internal Revenue Service has spent more than three billion taxpayer dollars on computers recently and supposedly they cannot handle dates after the year 2000. This means that if you enter a date of 03/24/00 their computer may recognize this as 03/24/1900. This will make a difference to a lot of people. Of course, all Stratford programs can handle the dates correctly. The Stratford program that we used in the late 1970's could handle the dates correctly. The present Stratford program handles dates correctly through 12/31/9999. When that time comes, if it does, we should have the next version ready to go. Maybe the IRS should have contracted with us to do their program design.

Handling dates correctly is much more complicated than just recognizing the difference between the year 1900 and the year 2000. Are you aware that the year 1900 was not a leap year even though it is divisible by 4? The year 2000 will be a leap year. After that, the next century that is a leap year (leap century) is 2400. •

EDI "per-claim" charges

Stratford does not have any "per-claim" or other charges related to transmitting claims to Medicare or any other carrier. We only charge (optional) for supporting

GUARDIAN ANGEL

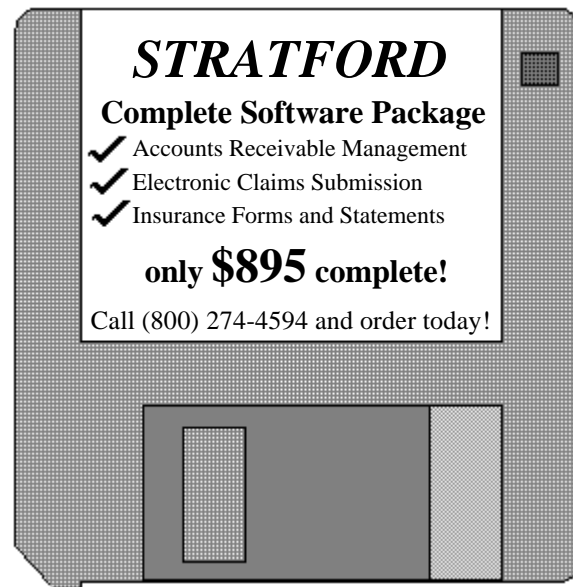
At this Internet address:

<http://www.medg.lcs.mit.edu/projects/ga/>
there is information about one of many projects which are funded by DARPA (Defense Advanced Research Projects Agency). This is about a device (the Guardian Angel) that attaches to a person and constantly monitors his/her condition. The device "is aware of" blood sugar levels, blood pressure, heart rate and many other statistics. It has "software agents" that constantly manage the data as it is being collected. The agents automatically backup the data onto a larger computer in the home. There, in the larger computer, the data is automatically compared with all of the past data that is available. It is programmed to analyze the data. It can ask the "guardian angel" for confirmation. It can query a database on the Internet. The computer can send the data to a doctor attached to an email along with its assessment of the possible problem.

Currently a person's medically relevant lifelong information is stored for the convenience of health care providers. The information is often incomplete, incorrect, or inaccessible.

The Guardian Angel project is all part of a "lifetime patient-centered health information system". Guardian Angel (GA) refers to a database and software that will integrate an individual's health-related concerns. This is a personal system that will help track, manage, and interpret the health history and offer advice to both the person and the healthcare provider.

Stratford will run your Stratford software related classified ad in our monthly newsletter *free*, upon SHS approval!



GA will collect data, of course, but GA is not just a repository but rather it is an active process that will interpret facts. GA will be able to interface with information systems used by care providers, insurers, researchers, etc. to provide access to personal medical history information as authorized by the individual.

Having a lifelong medical history available will improve the quality of medical decision making for that person.

There will be a dramatic improvement in the effectiveness and efficiency of healthcare if the individual is empowered to take a much more active role in monitoring his/her own health status and care.

The benefit to the healthcare provider is access to accurate, comprehensive data about the individual.

Initially GA will be used in chronic diseases where the payoff will make it cost effective such as diabetes.

Eventually, maybe all children will have a personal software program watching out for them. •

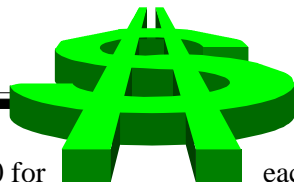
SOFTWARE SUPPORT NOTES

1. **Faxed requests for support get Priority Service.**
2. **If you send a fax with a description of the problem, your call is given priority over other faxes.**
3. **Do not call more than one time. The second call places your first call at the bottom of our callback list.**

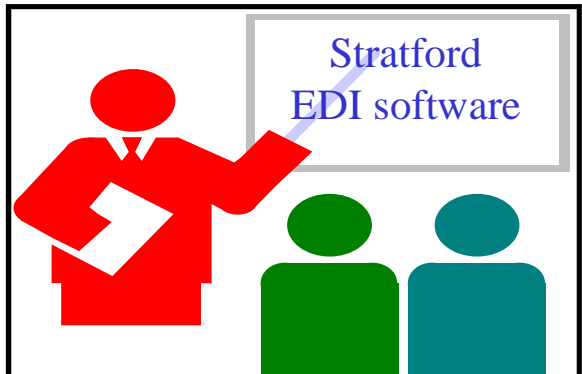
We can receive hundreds of calls in the first few hours each day. It usually is not possible for us to have a technical support person waiting to take your call. If you just call and leave the message "please call", your call is placed at the bottom of the callback list. We must do everything we can to avoid "phone-tag" so that we may help the maximum number of people in the minimum amount of time.

At this time we can deliver support by email. If you check your email each day, you may find this to be easier than the fax. This is not very good support if you need a quick answer. We do not get very many support email messages so we only check the mail two or three times each day. As the volume increases, we will put more resources into email.

We are interested in hearing from people who would like to receive support by email. •



Stratford will pay you \$100 for each person* you refer who purchases Stratford Software at full price (\$895). Simply fax or write to give us your referral. **We must receive the referral notice in advance of the sale. We cannot pay for a referral if you notify us after the sale.** *Subject to



ADVANCED TIP OF THE MONTH

Internet resources:

If you are interested in researching a healthcare related subject on the Internet, the problem you will have is knowing where to start.

The Stratford Internet server has a page that has many links for you to use. We update the page periodically. See the address at the bottom of this page of the newsletter.

We recently received a copy of a publication called: *Medicine on the Net*. We like it because it has a description of many Internet resources along with the address. You can visit their site at: <http://www.mednet-i.com/> They might send you a complementary copy if you request it by email. Their Internet site has many links. •

Stratford Newsletter

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