

Speeding Decisions: Social Security's Information Exchange Program

Save to myBoK

By Kitt Winter and Bob Hastings

The Social Security Administration has plenty of reasons to streamline its records request process-more than 15 million reasons each year, in fact. That's why it has been pioneering information exchange projects with the private sector, including use of the Nationwide Health Information Network.

Each year the Social Security Administration (SSA) adjudicates more than three million claims for disability benefits, resulting in more than 15 million authorized requests for the release of medical records.

Recently the distressed economy and aging baby boomers have dramatically increased the volume of claims. The sheer volume, coupled with the cumbersome manual steps involved in requesting and gathering these records, results in lengthy processing times and case backlogs.

In response, SSA is leveraging developments in health IT to accelerate the exchange of medical records. These advances can transform the multiweek process into one that obtains records in minutes and enables decisions within days of submitting a disability claim. A more automated standards-based process leads to administrative cost savings for all organizations involved in the disability determination process and, more importantly, reduces the length of time to provide a decision to people facing difficult times in their lives. Ultimately, the innovations improve service to the public, assist disability determination services, and reduce burden on the industry.

Early Pilots in Public-Private Information Exchange

In August 2008 SSA partnered with Beth Israel Deaconess Medical Center in Boston to build a prototype health IT application to obtain records. With this application, disability claims listing Beth Israel as a healthcare provider trigger an automated request from SSA and response from Beth Israel.

In February 2009, following this success and in support of the Office of the National Coordinator for Health IT's use case "Authorized Release of Information to a Trusted Third Party," the Social Security Administration collaborated with MedVirginia, a regional health information exchange (HIE), to successfully develop the first exchange of electronic health records over the Nationwide Health Information Network (NHIN).

This partnership further demonstrated the enormous potential for collaboration between the public and private sectors. A case study performed by the Kay Center for E-Health Research showed a \$2.1 million net cost recovery by MedVirginia directly related to SSA disability determinations that resulted in Medicare and Medicaid coverage.¹ Through these partnerships, both of which use the Health IT Standards Panel-approved C32 protocol (Continuity of Care Document, or CCD), the Social Security Administration has achieved measurable improvements in the disability determination process:

- Approximately 18 percent reduction in case-processing time when a health IT partner is present (the total time from when a case is received to when it is determined. Social Security can allow a claim as soon as it has supporting evidence but must review records from all sources before denying a claim.)
- Approximately 15 percent of claims concluded with a disability decision when the only source of information was a CCD obtained through the Nationwide Health Information Network.
- Approximately 3 percent of claims with health IT medical evidence were decided within 48 hours-an improvement of 90 days from the average SSA initial case-processing time.

A Link to NHIN

The standards designed to enable secure exchange of medical information have allowed entities to adopt health IT in a meaningful way. In this manner, SSA's model has paved the way for the future use of health IT across the nation.

In February 2010 Social Security awarded an additional \$17.4 million in competitive Recovery Act–funded contracts to healthcare providers and HIEs across 13 states. Designed to help stimulate the adoption of health IT, the contracts stipulate that awardees must receive electronic requests and send back electronic medical records through NHIN, with a target production date of September 2011.²

The health IT-enabled disability determination process still supports claims filed through various channels, including phone, Web, and in-person submission. Upon receiving a claim, the Social Security Administration shares the authorization to release medical records and demographic information with the medical provider listed in the claim. NHIN facilitates the exchange of data between Social Security, state disability determination services, and provider organizations to ensure that necessary and complete information is received.

To establish a link to NHIN, these providers utilize CONNECT, the federally developed, open source software solution that interfaces with Social Security's MEGAHIT application.

MEGAHIT—short for Medical Evidence Gathering and Analysis through Health IT—automates the process of requesting and receiving electronic health records from each of Social Security's partners. MEGAHIT initiates requests for disability claimants' records to associated providers, who generate medical evidence of records in the form of a CCD transmitted via NHIN back through the application.

MEGAHIT then applies business rules to the incoming information to provide preliminary analysis and guidance for disability determinations. MEGAHIT also converts this information into an SSA-standardized, human-readable document and places this information into the claimant's electronic folder for a disability examiner's further evaluation.

The growing number of operational HIEs speaks to the value of SSA's work in health IT. In fact, the benefits of this program carry over to organizations that become future partners with the Social Security Administration.

Specifically, SSA's health IT–enabled process leads to improved patient satisfaction, reduced uncompensated care, and reduced administrative costs associated with medical record submissions. In addition, its partners can replicate successful exchanges via NHIN with other users of that exchange protocol. To that end, SSA continues to reach out to geographically diverse partners and medical providers to raise awareness of health IT capabilities and health information exchange.

This includes SSA's work on a 2009 Congressional mandate, in which the agency is engaged in a joint initiative with the Department of Veterans Affairs and the Department of Defense to exchange electronic health data through NHIN. The project will allow SSA to receive medical information more quickly for service members who may be eligible for Social Security benefits. Furthermore, continued collaboration on the Federal Health Architecture will further contribute to alignment of health IT standards and optimized use of health IT investments.

By maintaining a prominent role in the health IT arena, SSA has made architectural, technological, and strategic decisions that benefit its claimants, disability programs, and partner providers and ensure accurate payments. Additionally, health information managers can expect to benefit from ever-increasing efficiencies in handling requests for information from Social Security.

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Notes

1. Feldman, Sue S., and Thomas A. Horan. "Using the Nationwide Health Information Network to Deliver Value to Disability Claimants." January 26, 2010. Kay Center for E-Health Research, Claremont Graduate University. www.cgu.edu/pdf/files/KayCenter/20100111_medva+case+study.pdf.

2. "Social Security Awards Nearly \$20 Million in Recovery Act Contracts for Electronic Medical Records." February 1, 2010. News release. www.ssa.gov/pressoffice/pr/nhin0210-pr.htm.

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