

The Twenty-Fourth National HIPAA Summit Welcome and Introductions



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Health IT Certification



The First National HIPAA Summit

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- October 15-17, 2000, Washington, DC
- Final rules
 - Transactions and code set standards, August 17, 2000
 - Privacy rule, December 28, 2000 (after the HIPAA Summit)
- Proposed rules
 - Security rule
 - ✦ NPRM August 12, 1998
 - Standard healthcare provider identifier
 - ✦ NPRM May 7, 1998
 - Standard employer identifier
 - ✦ NPRM June 16, 1998

Current HIPAA, ARRA, and ACA “IT” Initiatives

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- 1. Implement and utilize the Health Plan Identifier (HPID) and Other Entity Identifier (OEID) by November 5, 2014, effective November 5, 2015.
 - Small health plans had until November 5, 2015 for HPID
 - October 31, 2014, CMS announced a **delay**, until further notice, in enforcement of regulations pertaining to health plan enumeration and use of the Health Plan Identifier (HPID) in HIPAA transactions.

Current HIPAA, ARRA, and ACA “IT” Initiatives

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- 2. Health Plans prepare for and file ACA health plan certification for eligibility, claim status, ERA and EFT operating rules and standards.
 - NPRM published on January 2, 2014.
 - Health plan Certification proposed filing deadline was December 31, 2015.
 - (HIPAA fines and penalties already apply as of January 1, 2013 and January 1, 2014).
- 3. Implement and utilize CAQH CORE third set of operating rules, final rule with comment is expected to be published in 2016 or 2017.

The Clock is Ticking

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- Health plans must Certify for the first four operating rules and standards by December 31, 2015 (actual date uncertain).
 - NPRM published on January 2, 2014. Final rule expected in 2016.
 - This could be a lot of work for health plans who do not currently support some of the four standard transactions and operating rules.
 - It may be difficult to find 25 testing partners for HIPAA Certification.
 - Self insured health plans are included.



Challenges

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- The US healthcare industry is still burdened with legacy systems, a flat file approach to standard transactions, and a goal of minimizing investment cost rather than trying to maximize savings, but this is changing due to cost savings and product availability.
- The concept of operating rules that will improve efficiency and interoperability is not well understood by many who are familiar with the “culture” of the HIPAA SDO standards and associated processes to develop them, **but this is changing.**

Challenges

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- Developing effective operating rules takes time and requires:
 - leadership and thinking “outside the box”,
 - research to determine the underlying causes of the inefficiencies and barriers to change, and
 - a willingness to investigate feasible options to overcome the barriers and achieve interoperability and efficiency gains throughout the Health Care industry.
- The participants have to be open to disclosing the barriers and accepting reasonable compromises to achieve the overall goal.

Challenges

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- HHS priorities have been focused on the efforts to successfully implement the health insurance exchanges and meaningful use, shifting resources and priorities from other programs to this initiative for 2013-2016.
- Health Plan Certification by an Act of Congress was supposed to be implemented with required compliance by December 31, 2015.
 - NPRM was published on January 2, 2014, but still no final rule 2 years later!

Bending the Medicare Cost Curve and Lowering Rate of Increase of Health Care Costs in the United States

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- Rapid action essential – every month of delay adds significantly to Medicare cost, delays the full economic recovery in the United States, and delays the US improving its position in a global economy.
- Time is money!



Today's Speakers

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- Denesecia Green, Acting Director, Administrative Simplification Group, Office of E-Health Standards and Services, CMS
- Gwendolyn Lohse, Deputy Director, CAQH
- Alix Goss, Executive Director, Pennsylvania eHealth Partnering Authority, Co-Chair, NCVHS Standards Sub-Committee
- George Arges, Senior Director, Health Data Management Group, American Hospital Association,
- Robert Tennant, Senior Policy Advisor, Medical Group Management Association
- Patrick Gordon, Associate Vice President, Rocky Mountain Health Plans
- Steven S. Lazarus, President, Boundary Information Group, Moderator
- Bill Braithwaite, Acting Moderator

Contact Slide

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