

The 28th National HIPAA Summit

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DAY 3--HIPAA Administrative Transactions: Background and Speaker Introductions

Robert Tennant
HIPAA Summit Co-Chair
Director, HIT Policy
Medical Group Management Association

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Outline of the Day Three Program

- Overview of the Administrative Simplification Provisions of HIPAA and the ACA and Identification of Key Issues
- Introduction of Today's Speakers
- Speaker Presentations
- Closing Plenary Session with Faculty Q&A
- Live and Internet Audience Q&A

Admin Simp: A Brief History

- ❑ Dr. Louis Sullivan, WEDI, and Dr. William Braithwaite
- ❑ **The Health Insurance Portability Act (1996)** Title II Sub F
- ❑ Purpose was to: *“improve...the efficiency and effectiveness of the health care system ... through the establishment of standards and requirements for the electronic transmission of certain health information”*
- ❑ By creating standards for:
 - Key administrative transactions and code sets
 - Identifiers for employers, providers, HPs, and patients
- ❑ Input required from industry stakeholders, standards groups, NCVHS
- ❑ Covered entities: Health Plans, Clearinghouses, Providers (not vendors)

Admin Simp: A Brief History

- ❑ The Affordable Care Act (2010) sections 1104 and 10109 included additional admin simp provisions with the goal of furthering simplifying the business of health care
- ❑ The ACA required HHS to adopt:
 - Standards for electronic funds transfer (by Jan. 2012)
 - Electronic claims attachments (by Jan. 2012)
 - A standard unique identifier for health plans
 - Operating rules for each of the existing transactions
 - A process to certify health plan compliance with the adopted standards and operating rules (with significant new penalties for non-compliance)
 - And explore standardizing provider enrollment, and other admin simp opportunities

HIPAA/ACA Requirements

Completed Requirements

- National Identifiers for Employers, Providers
- National Code Sets
- Electronic Transactions (270/271-Eligibility, 837-Claim, 276-Claim Status, 278-Preauth and Referral, 835-Remittance, 820-Premium Payment and Advice, 834-Enrollment)
- ePayments Standards (EFT)
- Operating Rules (270/271, 276 EFT/ERA)

Not Yet Completed

- National Identifiers for Patients (Congressional Hold), Health Plans (Proposed to be Rescinded)
- Health Plan Certification
- Electronic Attachments
- Electronic Acknowledgements (part of the CORE ORs)
- Additional Operating Rules

NCVHS
Recommendations
to HHS

- ❑ National Committee on Vital and Health Statistics Feb. 13 letter to HHS:
 1. Remove the regulatory mandate for modifications to adopted standards and move towards industry-driven upgrades.
 2. Promote and facilitate voluntary testing and use of new standards or emerging versions of transactions or operating rules.
 3. Improve the visibility and impact of the administrative simplification enforcement program.
 4. Provide policy-related guidance from HHS regarding administrative standards adoption and enforcement.
 5. Re-evaluate the function and purpose of the Designated Standards Maintenance Organizations.

Challenges and Opportunities

- ❑ Not yet achieved full EDI Adoption
- ❑ EHR certification, but not yet for PM
- ❑ Missing standards
- ❑ Non-Compliance and enforcement
- ❑ Huge increase in provider EHR use
- ❑ Move to value-based payment accelerating data movement
- ❑ Look to the future: point of care standards (HL7 FHIR)

Today's Faculty

- ❑ **Madhusudhan Annadata:** Director, Division of National Standards, Centers for Medicare & Medicaid Services
- ❑ **Erin Weber:** Director, Committee on Operating Rules for Information Exchange (CORE), CAQH
- ❑ **Gail Kocher:** Director National Standards, Blue Cross Blue Shield Association
- ❑ **Suzanne Lestina:** Director, Administrative Simplification, American Hospital Association
- ❑ **Heather McComas:** Director, Administrative Simplification Initiatives, American Medical Association
- ❑ **John Kelly:** Principle Business Advisor, Edifecs
- ❑ Followed by a Full Panel Q&A