

HIPAA Compliance in the
Medicaid Setting:

What's Happening
in the States?

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Medicaid Administration: History 101

- Federal program, state administration
- Medicaid billing requirements vary
- Providers' maze
- Unique programs without billing formats

Along came HIPAA

- No longer an island
- Too much to do
- Collaboration
- Formation of NMEH

NMEH

- National Medicaid Electronic Data Interchange (EDI) Health Insurance Portability and Accountability Act (HIPAA)
- 50 States, 700 participants
- CMS representation
- State fiscal intermediaries

Legislation Based Workgroups

- Security/Privacy
- TPL/COB
- Attachments
- Dental
- Prior Authorization
- Encounter Data Reporting
- Eligibility

Code Based Workgroups

- Local Codes
- DME Codes
- Provider Taxonomy
- Explanation of Benefits (EOB)

Outreach Based Workgroup

- HIPAA Integration and Transition (HIT)
 - Web awareness
 - Companion guide clarification
 - Provider education
 - Communication is key

Standard Setting Organizations

- National Uniform Billing Committee (NUBC)
- National Uniform Claim Committee (NUCC)
- X12
- National Council for Prescription Drug Programs (NCPDP)
- Health Level Seven (HL7)
- National Committee on Vital and Health Statistics (NCVHS)

Proactive vs. Reactive

- Addenda
- X12 Participation
- Attachments
- Vision industry input
- Comments to NPRMs
- Comments to X12 draft guides

Administrative Simplification

- Standardized coding
- Similar companion guide formats
- Standardized formats
- Implementation guide selection
- National Provider ID's
- “Progress, not perfection.”

Additional Information

- NMEH:
<http://www.cms.hhs.gov/medicaid/hipaa/adminsim/nmehintr.asp>
- X12: <http://www.x12.org/>
- NCVHS: <http://www.ncvhs.hhs.gov/>
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