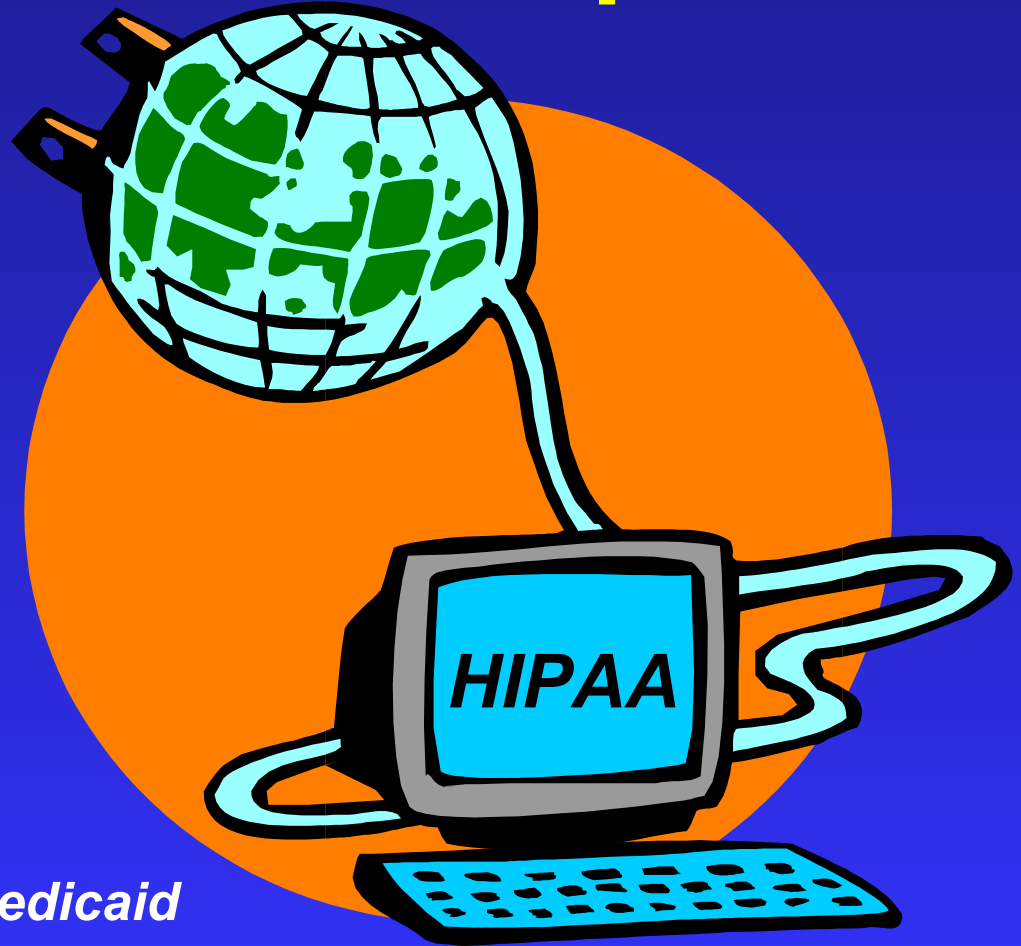
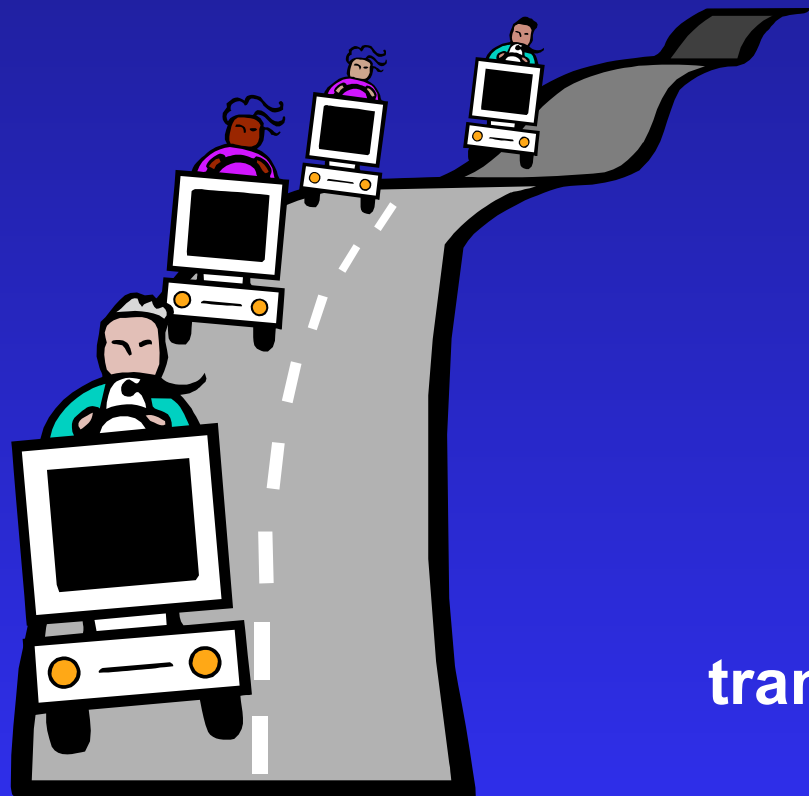


Systems, Data and HIPAA from a Medicaid Perspective



*Rick Friedman, Director
Division of State Systems
Center for Medicare and Medicaid
US Dept Health & Human Services*

HIPAA Overview



What -- National standards to be adopted by Secretary of HHS

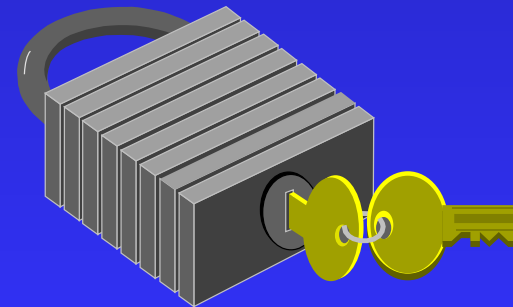
Who -- All health plans, all clearinghouses, and those providers who choose to conduct these transactions electronically, are *required* to implement

When – Oct 2003 for transactions requirements; April 2003 for privacy

Note -- does **NOT** require providers to use EDI

HIPAA's Purpose

- Improve the efficiency and effectiveness of the health care system by standardizing the electronic data interchange of certain administrative and financial transactions.
- Protect the security and privacy of transmitted healthcare information.



HIPAA's Scope

- **Administrative transactions**
- **Code Sets**
- **Identifiers**
- **Security**
- **Electronic signature**
- **Privacy of individually identifiable health data**



Additional Provisions

- **Penalties**
 - \$100 per violation of standards (up to \$25K total per year).
 - \$50K to \$250K and 1 to 10 years in jail for wrongful disclosure of individually identifiable health information.
- **Expanded HIPAA responsibilities for NCVHS**
 - HHS to “rely” on NCVHS recommendations
 - Track implementation for Congress
 - Identify issues/barriers and advise HHS on mitigating strategies

Key HIPAA Committees

Designated Standards Maintenance Organizations (DSMO)

- ANSI X-12
- Health Level Seven (HL7)
- Natl. Council for Prescription Drug Plans (NCPDP)
- National Uniform Claims Committee (NUCC)
- National Uniform Billing Committee (NUBC)
- American Dental Assoc. (DeCC)

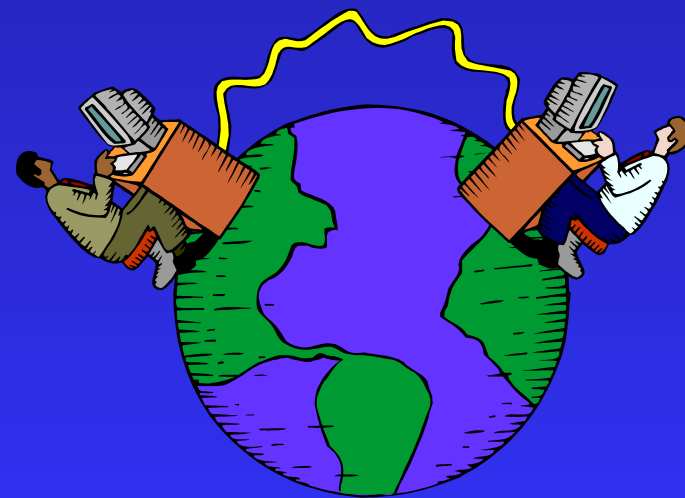


DSMO Role in HIPAA Implementation

- **Collaborative process to evaluate change requests and develop recommendations**
- **Substantive changes reviewed by NCVHS with open hearings and recommendations to HHS**
- **Will be ongoing yearly process (in general Secretary may only make changes yearly)**
- **DSMO Web Site established to accept change request to mandated standards:
www.dsmo.org**

What about the other standards?

- **Employer ID, Provider ID, Security final rules planned for release this year (?)**
 - Security especially will be a major challenge
- **Claims Attachment and Health Plan ID NPRMs this year (?)**
 - Health Plans need to be comfortable with whatever is proposed for the Health Plan ID
 - Claims Attachments: major opportunity and challenge!
 - Opportunity to respond to NPRMs after release
- **Electronic Signature TBD**



A Reminder: What Does HIPAA Mean to YOU?

- HIPAA is the law
- There are deadlines for compliance
- There are civil and criminal penalties
- YOU are a covered entity-- buck stops here
- Affects all partners; requires cooperation
- Could have major impacts on business operations
- It's bigger than Y2K
- Has impact on future business strategies



Key Points

Worth Remembering

When Implementing HIPAA

- 1. Address more than compliance aspects;
i.e. recognize this is not an IT problem**
- 2. Don't rush through the planning phase**
- 3. Remember Y2K lessons on process:**
 - Do your homework -- Plan accordingly**
 - Find a champion -- Build a committed team**
- 4. Recognize HIPAA as a unique
opportunity to improve business
practices... using EDI as the enabler**

Medicaid HIPAA-Compliant Concept Model

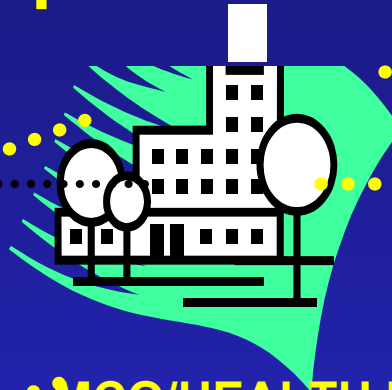
- **Two Views**
 - Enterprise-wide: agency + trading partners
 - Operational from within an agency
- **Interactive CD**
- **Tool Kit – regs, definitions, contacts**
- **Can Be Easily Customized to Meet Your MCO-specific Needs**

**NOTE: Check it out at www.mhccm.org or
request a copy via e -mail to:
kleshko@cms.hhs.gov**

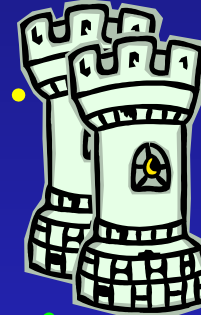
Health Plan Enterprise Data Exchange Partners View



**BENEFICIARY
(SUBSCRIBER)**



MCO/HEALTH PLAN



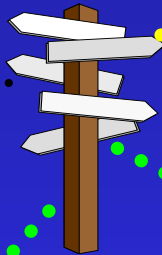
**OTHER STATE
AGENCY**



BANK



**OTHER PAYER
(HEALTH PLAN)**



**CLEARING-
HOUSE**



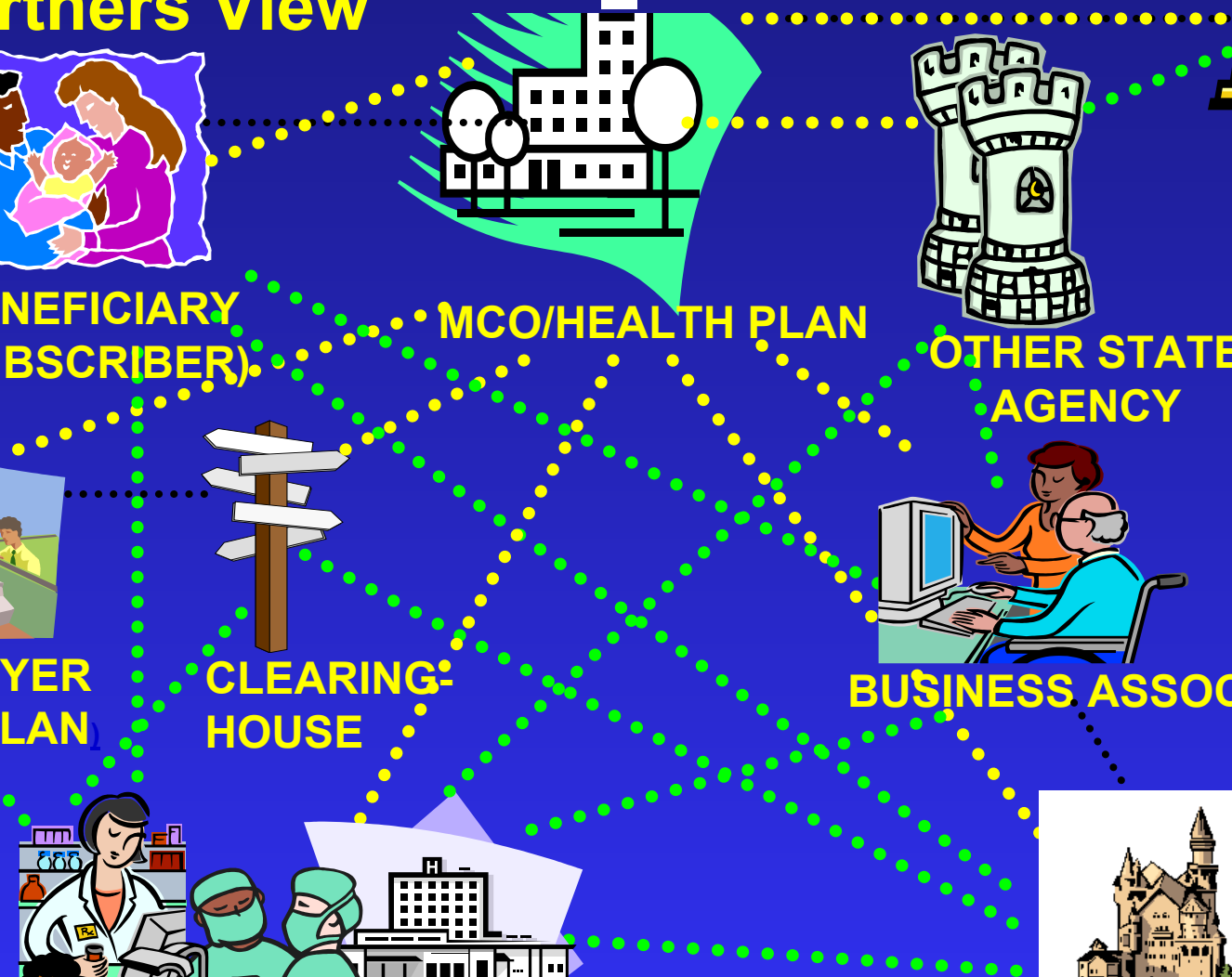
BUSINESS ASSOCIATE



PROVIDERS



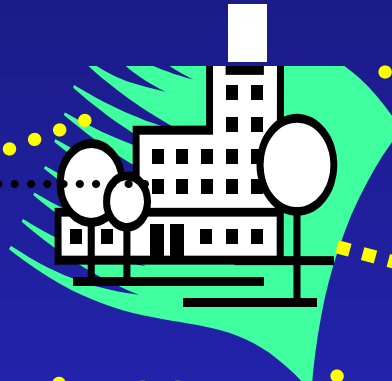
**MEDICAID AGENCY
(HEALTH PLAN)**



Health Plan Business Process View



ENROLLMENT & MEMBER SERVICES)



MCO/HEALTH PLAN



UTILIZATION MGMT



FINANCIAL ADMINISTRATION



VENDOR CONTRACT ADMINISTRATION



PROVIDER SERVICES



PAYER CONTRACT ADMINISTRATION

