

HIPAA Overview

How Did We Get Here?

In 1996, Congress passed the **Health Insurance Portability and Accountability Act**, otherwise known as HIPAA. HIPAA originally was conceived to improve fraud and abuse protections and provide protections for workers insured under group health plans when they leave their jobs and join a different group health plan.

However, HIPAA does much more than that. It sets forth provisions designed to ensure administrative simplification across the health care industry by reducing paperwork, and ensure the confidentiality and privacy of health information about our members. Sound simple? It can be, but not without your help can we meet all standards and implementation specifications of HIPAA.

The Secretary of the Department of Health and Human Services (DHHS) was charged with the release of regulations pursuant to the HIPAA law, and has released most of the regulations in *final* form, while others are still *proposed*. Here is the current status of all HIPAA regulations:

TITLE	DESCRIPTION	STATUS
PRIVACY- enforced by HHS Office for Civil Rights (OCR)		
Standards for Privacy & Individually Identifiable Health Information	The final rule adopted standards for the privacy of personal health information.	Compliance date 4/14/03 Final rule published 12/28/00 and 8/14/02.
SECURITY - enforced by Centers for Medicare & Medicaid Services (CMS)		
Security Standards	This final rule adopts standards for the security of electronic identifiable health information of health plans, health care clearinghouses, and certain health care providers. It implements administrative simplification initiatives that have a national scope beyond the Medicare and Medicaid programs.	Compliance date 4/21/05 Final rule published 2/20/03.
TRANSACTIONS, CODE SETS and IDENTIFIERS - enforced by Centers for Medicare & Medicaid Services (CMS)		
Standards for Transactions and Code Sets	The final rule adopted the initial standards for transactions and code sets	Compliance date: 10/16/03 Final Rule published 8/17/00 and 2/20/03 NPRM estimated publication dates upcoming: 3/05 & 2/05
Standard Unique Health Care Provider Identifier	This final rule establishes a standard unique identifier for all health care providers under HIPAA. The rule implements administrative	Compliance date 5/23/07

	simplification initiatives that have a national scope beyond Medicare and Medicaid.	Final rule published 1/23/04. Healthcare providers may apply for National Provider Identifiers (NPI) beginning on, but no earlier than, May 23, 2005.
Standard Unique Identifier for Employers	This final rule was jointly developed by CMS, Treasury, Labor, and Defense. The regulation adopts an employer's tax ID number or Employer Identification Number (EIN) as the standard for electronic transactions, implementing an administrative simplification initiative that has a national scope beyond the Medicare and Medicaid programs.	Compliance date 7/30/04 Final rule published 5/31/02.
Standard Unique National Health Plan (Payer) Identifier	This proposed rule would implement a standard identifier to identify health plans that process and pay certain electronic health care transactions. It would implement one of the requirements for administrative simplification that have a national scope beyond Medicare and Medicaid.	NPRM estimated publication date 11/04.
Claims Attachments Standards	This rule proposes an electronic standard for claims attachments as required by HIPAA. It would be used to transmit clinical data, in addition to those data contained in the claims standard, to help establish medical necessity for coverage.	NPRM estimated publication date 11/04.
HIPAA Enforcement	This rulemaking would seek to establish a framework for enforcing compliance with the "administrative simplification" provisions of HIPAA.	NPRM estimated publication date to be determined.