

HIPAA NEWS

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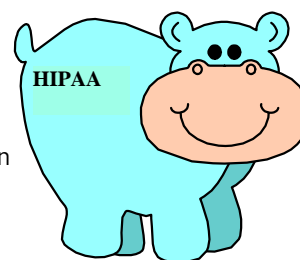
Special points of interest:

- HHS Privacy Rule Conferences
- Checklist for Transaction Rules
- Guidance on Privacy Rule
- "Question of the Week"
- Important HIPAA Websites, Links and training

HIPAA NEW YEAR! FINAL RULE MODIFICATIONS ON THEIR WAY

It looks like the end of the regulatory road for two key sets of HIPAA rules. The Final Rules on the "HIPAA Security Standards" and "Modification to Standards for Electronic Transactions and Code Sets" were received on January 13, 2003, by the White House Office of Management & Budget, Office of Information and Regulatory Affairs (OMB/

OIRA) for review. Final clearance takes between two weeks and 90 days, at which point, the final version of the regulations are placed on display at the Government Printing Office (GPO) in Washington, DC, and then published in the Federal Register. Providers should breathe a collective sigh of relief to have the rules in a stable format. No more guessing at what the Rules say, just what they mean.



Health Insurance Portability & Accountability Act (HIPAA)

HHS TO HOLD CONFERENCES ON PRIVACY RULE

The Department of Health and Human Services will bring privacy into the open by holding four one-day conferences, in February and March, on the HIPAA Privacy Rule. The conferences are designed to provide an opportunity to hear from officials who developed the Privacy Rule and will be responsible for interpreting and enforcing it.

The HHS Office for Civil Rights (OCR) will provide an expert faculty who will answer questions from attendees during question-and-answer sessions following their presentations.

Conference topics include:

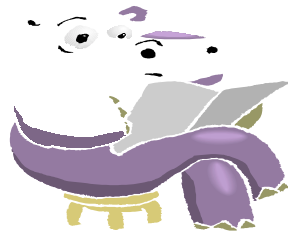
- The principles underlying the Privacy Rule.
- How the preemption rules create a national floor of privacy protections.

- Who is a covered health care provider.
- The implications of being an affiliated covered entity, a hybrid, or in an organized health care arrangement.
- "Business associate" issues.
- What type of information is protected under the HIPAA Privacy Rule and what is meant by the terms "use," "disclosure," "minimum necessary," and "incidental disclosures."
- The Notice of Privacy Practices requirement.
- When it is necessary to obtain an authorization to use or disclose PHI and what constitutes a valid authorization.
- The right of a patient to access, amend, and obtain an accounting of disclosures of their protected health information.
- When to use an authorization for research and when research may be conducted without an authorization.
- How research authorizations pre-dating the compliance date are treated.
- Appropriate administrative, technical and physical safeguards.
- The requirements to train the workforce on covered entity policies and procedures.
- The OCR complaint investigation and compliance review authority.

CMS PUBLISHES A CHECKLIST FOR TRANSACTIONS RULE

As we get down to the wire for HIPAA compliance, the Centers for Medicare and Medicaid Services have published a HIPAA readiness checklist for providers, which walks them through the process of determining what needs to be done to comply with the transactions and code sets rule.

The checklist contains the following steps to help you prepare for electronic transactions and code sets requirements.



HIPAA TROUBLE?

1. Determine, as a health care provider, if you are covered by HIPAA.
2. Assign a HIPAA Point Person to handle the remaining checklist items.
3. Familiarize yourself with the key HIPAA deadlines. April 16, 2003 is the deadline for testing software and computer systems internally. October 16, 2003 is the deadline to be ready to conduct transactions electronically in the standard HIPAA format with your health plans/payers.
4. How HIPAA Affects What You Do. Determine if your software is ready for HIPAA. Plan to make necessary changes. Start testing no later than April 16, 2003.
5. Talk to the health plans and payers you bill (especially

the ones you bill most frequently.) Ask what they are doing and what they expect you to do. Ask if they will have a HIPAA companion guide that specifies their coding and transaction requirements that are not specifically determined by HIPAA. Ask whether they will have Trading Partner Agreements that specify transmission methods, volumes, and timelines as well as coding and transaction requirements that are not specifically determined by HIPAA. Ask about testing your software to make sure they will be able to receive a claim you submit.

The entire checklist is available at <http://cms.hhs.gov/hipaa/hipaa2/readinesschkfst.pdf>.

MAKE A DATE!

AVAILABLE MEDICAID TRAINING

The Office of Medicaid has scheduled the HIPAA telebroadcast dates for providers who bill Medicaid. The first one will be held on **March 12, 2003** and the second one is scheduled for **September 4, 2003**. The "billing workshops" will be held at various colleges throughout the State and will give providers information on the changes that are necessary in order to bill Medicaid.

Trainings will be held twice daily: Once in the morning from 9:00 AM until Noon and in the afternoon from 1:00 PM until 4:00 PM. You will only need to attend one session.

A list of the locations for the telebroadcasts follows:

- Buffalo, Johnson County

Schools

- Casper, UW Outreach Building Room 106
- Cheyenne, Laramie County Community College
- Cody, WY National Guard Armory
- Douglas, Eastern Wyoming Community College
- Evanston, Life Long Learning Center
- Gillette, UW NE Regional Office
- Green River-WWCC Outreach
- Jackson, CWC Outreach Center
- Lander-State Training School
- Laramie, UW College of Education
- Lusk, Lusk High School
- Newcastle, Newcastle High School
- Powell, Northwest College

- Rawlins, Carbon County Higher Education Center
- Riverton, Central Wyoming Community College
- Rock Springs, Western Wyoming Community College Campus
- Sheridan, Sheridan College Campus
- Sundance, Crook County Courthouse
- Torrington, Eastern Wyoming Community College
- Worland

To Register, please complete the attached registration form and return by March 1, 2003.

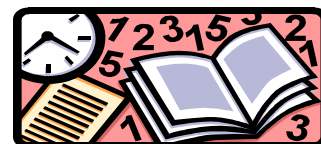
OCR RELEASES GUIDANCE ON FINAL MODIFIED PRIVACY RULE

With the Privacy Rule compliance deadline right around the corner, the HHS Office of Civil Rights (OCR) released guidance on the final modified Privacy Rule that explains key elements of HIPAA Privacy Rule requirements. HHS published the Privacy Rule on December 28, 2000, and adopted modifications of the Rule on August 14, 2002. The guidance is meant to communicate as clearly as

possible the privacy policies contained in the Privacy Rule.

For a particular segment in the Privacy Rule, the guidance will provide a brief explanation of the segment and how the Rule works, followed by "Frequently Asked Questions" (FAQ) about that provision. The guidance does not address all of the relevant provisions in the Rule, although OCR anticipates adding segments in the future

as it develops guidance on more Privacy Rule standards. OCR will also be adding to the FAQs on an ongoing basis as new questions arise. See www.hhs.gov/ocr/hipaa/privacy.html.



HIPAA "QUESTIONS OF THE WEEK"

Q: How does the HIPAA Privacy Rule change the laws concerning consent for treatment?

A: The Privacy Rule relates to uses and disclosures of protected health information, not to whether a patient consents to the health care itself. As such, the Privacy Rule does not affect informed consent for treatment, which is addressed by State law.

Q: What is the difference between "consent" and "authorization" under the HIPAA Privacy Rule?

A. The Privacy Rule permits, but does not require, a covered entity to voluntarily obtain patient consent for uses and disclosures of protected

health information for treatment, payment, and health care operations. Covered entities that do so have complete discretion to design a process that best suits their needs. By contrast, an "authorization" is required by the Privacy Rule for uses and disclosures of protected health information not otherwise allowed by the Rule. Where the Privacy Rule requires patient authorization, voluntary consent is not sufficient to permit a use or disclosure of protected health information unless it also satisfies the requirements of a valid authorization. An authorization is a detailed document that gives covered entities permission to use protected health information for specified purposes, which are generally other than

treatment, payment, or health care operations, or to disclose protected health information to a third party specified by the individual. A valid authorization must contain a number of specific elements, including a description of the protected health information to be used and disclosed, the person authorized to make the use or disclosure, the person to whom the covered entity may make the disclosure, an expiration date, and, in some cases, the purpose for which the information may be used or disclosed. With limited exceptions, covered entities may not condition treatment or coverage on the basis of an individual providing an authorization.

"Yeah, I'm HIP-AA"

HIPAA WEBSITES AND LINKS

A HIPAA website dedicated to Medicaid is located at: www.cms.hhs.gov/medicaid/hipaa/admsim/.

The Department of HHS website includes information on the administrative simplification provision of HIPAA, general information about the law, explanation of rule making process, updates when standards may

be implemented, etc., and can be found at <http://aspe.os.dhhs.gov/admsimp>.

Another website dedicated to HIPAA was developed by Phoenix Health Systems - the HIPAAAdvisory - can be found at www.hipaadvisory.com.

The WEDI HIPAA SNIP Task-Group has been established to meet the immediate need to

assess industry-wide HIPAA Administrative Simplification implementation readiness and to bring about the national coordination necessary for successful compliance. Information on the WEDI/SNIP group can be found at their website: <http://snip.wedi.org>.

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YOUR HIPAA NEWSLETTER

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Cheyenne, WY 82002

Email: hipaa@state.wy.us

With this publication, Wyoming's Office of Medicaid and the Department of Health will provide members with the latest information on HIPAA regulations and compliance, including detailed overviews of specific requirements for providers and implementation tips and Web site resources. If you would like to receive a copy of the HIPAA *NEWS*, please e-mail us at hipaa@state.wy.us and ask that your name be added to the mailing list. Copies can also be downloaded from the ACS Wyoming Medicaid website: <http://wyequalitycare.acs-inc.com/>.



HIPAA AND YOU!

The Wyoming Department of Health is the primary State agency for providing health and human services. It administers programs maintaining the health and safety of all citizens of Wyoming.

Mission

We envision a Wyoming in which all citizens are able to achieve their maximum health potential; a Wyoming in which early intervention, wellness, health promotion, and health maintenance programs are the primary approach for solving health problems; a Wyoming in which all citizens have regular access to basic health care; a Wyoming in which at-risk citizens receive culturally appropriate and sensitive services; a Wyoming in which we and future generations are healthy, vital, and productive so as to seize the opportunity to live our individual dreams and enjoy the benefits of our bountiful resources and natural beauty.

*We're on the
web. Visit us at
www.state.wy.us*



Wyoming Office of
Medicaid
Department of Health

Our mission is to promote,
protect and enhance the
health of all Wyoming
citizens.