



Texas Health Care Information Council

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THCIC and HIPAA Compliance

Operations

The new HIPAA electronic standards rule requires adherence by "covered" entities to new transaction standards requirements. THCIC is not a covered entity; however, THCIC will comply with the requirements laid out in the transaction standards rule in order to facilitate submission by hospitals in the 837 format.

THCIC is beginning a "gap" analysis to identify the variances between the current THCIC UB92 submission format and the 837 submission requirements. A schedule for implementation will be forthcoming no later than the summer of 2001. At that time, THCIC will also address the state specific data elements currently being collected.

THCIC has and will continue to take necessary measures to safeguard confidential data. THCIC intends to also meet the requirements of the federal security and privacy rules as adopted by the Department of Health and Human Services. THCIC is currently investigating the requirements proposed in the preliminary release of the security rules.

Data Elements Not Available in First PUDF

Communications

Several data elements will not be available in the first release of the Public Use Data File (PUDF). These elements will be

released as processes are put in place to assure the quality of the data. Data elements that will be made available in future releases are as follows:

- Physician identifiers will be released beginning with first quarter 2000 data.
- Hospital charge data will be released beginning with third quarter 2000 data.
- Secondary source of payment data will be released beginning with third quarter 2000 data.
- County of residence will be calculated from the patient's address and will be available beginning with first quarter 2000 data.
- Admission source will be suppressed only if admission type is 'newborn', "4". Data users can use ICD-9-CM codes to correctly identify the clinical status of newborns.

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The following data elements are suppressed to protect patient confidentiality:

- The last two digits of the ZIP code are suppressed if there are fewer than thirty patients in the ZIP code.
- The entire ZIP code and gender code are suppressed if the ICD-9-CM code indicates alcohol or drug use or an HIV diagnosis.
- Age is represented by 21 age group codes for the general patient population and 5 age group codes for the HIV and alcohol and drug use patient populations.

Workgroup Established for Implementation of HIPAA Operations

In June of this year, health industry members of the Workgroup for Electronic Data Interchange (WEDI) established a new workgroup to address the implementation aspects of the HIPAA administrative simplification. This new workgroup, aptly named the Strategic National Implementation Process (SNIP), is an industry-based voluntary solution to practical issues of interpretation and workflow consistencies surrounding implementation of HIPAA. More succinctly stated, the purpose of the group is to “SNIP cost and to SNIP chaos in the administrative simplification”.

SNIPs goals are as follows:

- Learn from others’ experiences
- Coordinate schedules
- Consistently implement standards and codes
- Document best practices
- Serve as a resource
- Identify next steps for ambiguous situations.

SNIP expects to provide the following deliverables to the health care industry:

- A schedule for addressing transactions to the new standards
- Issues, decision and rationale recommendations for the health care industry
- Education opportunities.

SNIP hit the ground running and has made good progress toward an implementation strategy that can be followed on a national level. It has released several white papers, including one on security and privacy. Their plan to address transactions is as follows:

- Define a deployment plan,
- Get industry consensus,
- Consider inter-transaction dependencies, code sets / business implications (i.e., implement claim and remittance at the same time),
- Address inconsistencies between transactions,
- Address ambiguities in data requirements,
- Identify gaps between the implementation guide and the real world,
- Identify testing method(s)
 - What to test
 - How to avoid unnecessary or redundant testing
 - Standardized test plan,
- Identify beta testers
 - Learn from experiences
 - Capture issues
 - Improve test plan,
- Develop best practices.

Currently SNIP is working on a schedule for implementation of the transactions that all of the health industry can follow. This would allow for sequencing of transaction development, testing and implementation. Unlike Y2K implementation where each

entity could implement when ready, an entity cannot implement compliant transactions unless their trading partners are ready to accept the new transactions.

THCIC is looking to follow the SNIP guidelines and will track SNIPs progress toward an industry usable implementation plan. SNIP can be found at the WEDI website, www.wedi.org and can be reached via email at snip@wedi.org.

Training Texas Wide *Communications*

THCIC will be hosting a training on Submission, Correction, and Certification of hospital data in January 2001. More information will follow once the meeting arrangements have been made.

Hospitals have requested regional trainings outside of the Austin area. All THCIC sponsored training is held in Austin. THCIC staff are able to travel throughout the state to conduct trainings if the hospitals absorb

their travel expenses. Commonwealth representatives can also be available on a contract basis. At the last training, it was suggested that hospitals from a particular region pool together and charge attendees a fee in order to pay for related expenses.

The Council is also looking into the availability to provide net meetings, which would eliminate the need to travel for training sessions. The requirements for net meetings would be access to the Internet.

Public Use Data File Release *Communications*

As noted in the last Numbered Letter, the Council's Public Use Data File (PUDF), including data from approximately 400 hospitals, will be available in December. Purchasing instructions and other information about the data is available as links from page one of the THCIC web site. If you do not have access to the web, staff will fax it to you upon request.

Upcoming Meetings or Training

Data Submission, Correction, and Certification training: January 2001. See page 3 of this newsletter.

THCIC Board: December 1, 2000. 1100 West 49th Street, Austin. Room M-739

Agendas for all Technical Advisory Committee, Committee, and Council meetings are posted on the THCIC web site and the Texas Register seven days prior to the meeting date.

Upcoming Deadlines

3rd quarter 1999 changes on certification files cut-off – November 9, 2000

3rd quarter 1999 certification letters due – December 1, 2000

3rd quarter 2000 submission due – December 1, 2000

4th quarter 1999 certification files distributed – December 1, 2000

Questions?

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