

Health Plan ID Number

July 31, 2014



Health Plan ID Number

- Welcome! We will begin at 3 p.m. Eastern
- There will be no sound until we begin the webinar. When we begin, you can listen to the audio portion through your computer speakers or by calling into the phone conference number provided in your confirmation email.
- You will be able to submit questions during the webinar by using the “questions” box located on your webinar control panel.



Health Plan ID Number

July 31, 2014

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- LMC Insurance & Risk Management, Inc.
- Lipscomb & Pitts Insurance, LLC
- Lyons Companies
- The Mahoney Group
- MJ Insurance, Inc.
- Parker, Smith & Feek, Inc.
- Paynewest Insurance, Inc.
- R&R Insurance Services, Inc.
- RCM&D
- The Rowley Agency, Inc.
- Smith Brothers Insurance, LLC
- Starkweather & Shepley Insurance



Health Plan ID Number

- The Big Picture
- HIPAA Basics and a Little History
- HIPAA Electronic Transactions
- Why an HPID?
- Obtaining the HPID
- The Certification Process
- Resources



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The Big Picture



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Health Plan ID Number

- The Big Picture
 - HIPAA Requires Covered Entities (CE) to process certain health plan related electronic transactions according to a specific set of transaction standards
 - Most self-funded health plans must obtain a Health Plan ID Number (HPID) from the Centers for Medicare and Medicaid Services (CMS)
 - Deadline
 - Nov. 5th, 2014 for large health plans
 - Nov. 5th, 2015 for small health plans
 - Self-funded health plans will need to provide a certification to CMS by December 31, 2015 that the plan is correctly processing certain electronic transactions
 - The HPID will need to be used in any HIPAA standard transactions which identify the health plan beginning Nov. 7, 2016



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Health Plan ID Number

- The Big Picture
 - HPID rules do not require covered entities to identify the health plan in HIPAA transactions rather the HPID is only required to be used if the health plan is identified.
 - Employer sponsored health plans typically use another entity to process HIPAA transactions such as a TPA, or a vendor that processes health plan enrollments.
 - These entities can obtain an “Other Entity Identifier” (OEID) for use when processing HIPAA Standard Transactions



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History and HIPAA Basics



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History

- HIPAA Privacy and Security Rules
 - Privacy Rules
 - Effective April 14, 2003, for providers, clearing houses and large health plans
 - Effective April 14, 2004, for small health plans
 - Security Regulations
 - Electronic Protected Health Information (ePHI) only
 - Effective April 20, 2005, for providers, clearing houses and large health plans
 - Effective April 20, 2006, for small health plans
 - American Recovery and Reinvestment Act of 2009 (ARRA) & the Health Information Technology for Economic and Clinical Act (HITECH)
 - Amendments to HIPAA Privacy and Security Requirements



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History

- HIPAA Electronic Transaction Rules
 - Original HIPAA Transaction Final Regulations - August 2000
 - Unique Employer Identifier Number - May 2002
 - HIPAA uses the EIN
 - National Provider Identifier Number (NPI) - January 2004
 - HPID
 - Proposed Regulations - April 2012
 - Final Regulations - September 2012
 - Health Plan Certification of Compliance
 - Proposed Regulations - January 2014
 - Waiting on final regulations



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HIPAA Basics

- Covered Entities
 - Health Care Providers and clearinghouses
 - Health Plans
 - HMOs, Insurance Companies
 - Employer sponsored health plans
 - Health insurance coverage
 - Dental and vision coverage
 - Section 125 medical flexible spending accounts
 - HRAs
- Plans not subject to HIPAA
 - HSAs, Life Insurance, Disability Insurance & Workers' Compensation

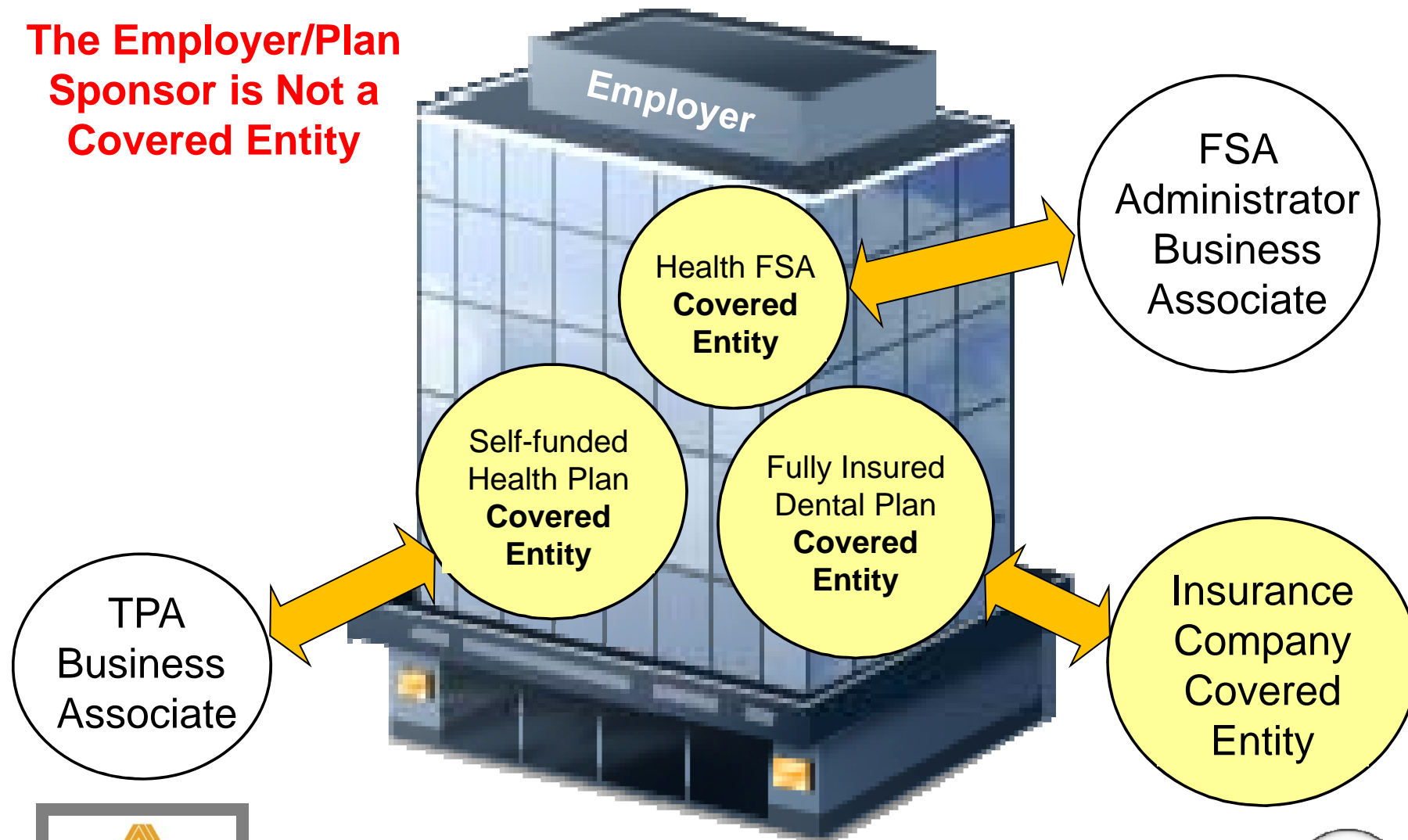


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Employers and HIPAA

The Employer/Plan Sponsor is Not a Covered Entity



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HIPAA Electronic Transactions



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Health Plan ID Number

- HIPAA Standard Transactions
 - Must be between two covered entities or a covered entity and a business associate acting on behalf of a covered entity
 - Health care claims or equivalent encounter information
 - Eligibility for a health plan
 - Referral certification and authorization
 - Health care claim status
 - Health care electronic funds transfers (EFT) and remittance advice
 - Coordination of benefits
 - First report of injury to initiate workers' compensation actions;
 - Health care claims attachments
 - Enrollment and disenrollment in a health plan
 - Health plan premium payments



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Health Plan ID Number

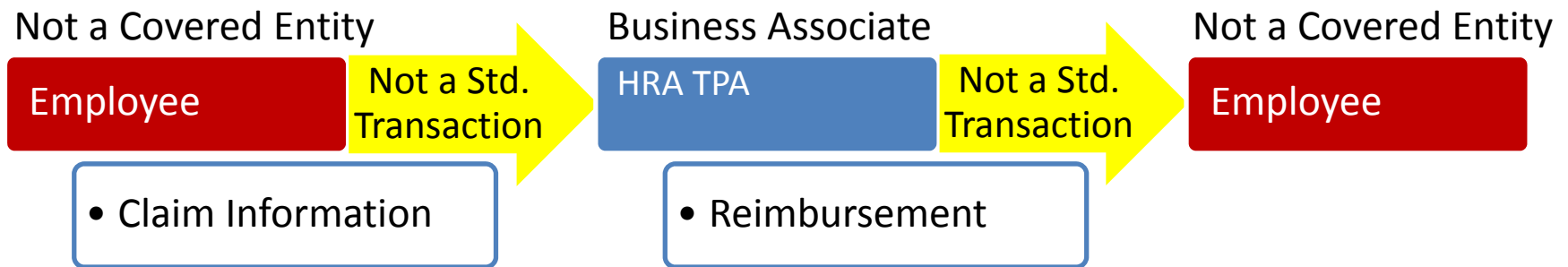
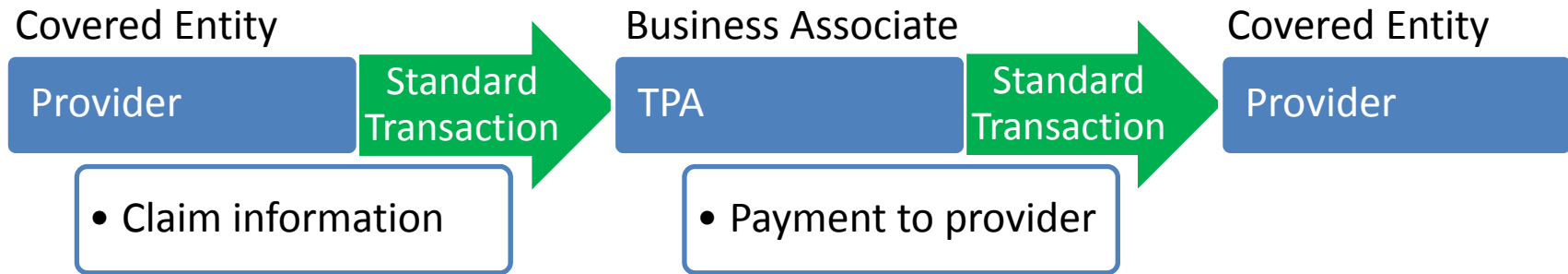
- HIPAA Standard Transactions
 - Some electronic transaction between the employer and the health plan or a provider are not a HIPAA standard transaction because remember the employer is not a covered entity
 - Enrollment and disenrollment in a health plan
 - Health plan premium payments
 - Eligibility for a health plan



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Health Plan ID Number



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Health Plan ID Number

Not a Covered Entity

Employer

Not a Standard Transaction

Business Associate

TPA

- Electronic Employee Information for Enrollment

Not a Covered Entity

Employer

Not a Std. Transaction

Business Associate

Online Enrollment Vendor

Standard Transaction

Covered Entity

Insurance Co.

- Employee Data

- Enrollment Info



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Why the HPID?



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Health Plan ID Number

- The Problem
 - The identification of the relevant health plan in the current transition rules is done using a number of different codes (e.g. EIN, NAIC Identification Number, DOL plan Number, Payer ID Number, etc.)
 - Healthcare providers have expressed frustration that this contributes to a number of transaction problems
 - Improper routing of transactions
 - Rejected transactions due to plan identification errors
 - Difficulty in determining patient eligibility



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Health Plan ID Number

- The Problem
 - The American Association of Health Plans estimates that 14% of all claims are pended and need some level of manual intervention by the provider or the payer
 - Implementation of the HPID is expected to save the health care industry between \$1.3 – 6 billion over 10 years by reducing the administrative time involved in transactions



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Obtaining the HPID Number



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Health Plan ID Number

- Definitions
 - Large Health Plan
 - A plan that has more than \$5 million in “receipts”
 - Limited guidance on definition of receipt
 - Most common interpretation for employer sponsored self-funded plans is \$5 million in claims during last fiscal (i.e. plan) year.
 - Large health plans must acquire HPID by Nov. 5, 2014
 - Small health plans must acquire HPID by No. 5, 2015



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Health Plan ID Number

- Definitions
 - Controlling Health Plan (CHP)
 - A health plan that:
 - Controls its own business activities, actions, or policies; or
 - Is controlled by an entity that is not a health plan
 - Subhealth Plan (SHP)
 - A health plan whose business activities, actions, or policies are directed by a controlling health plan
 - How does this apply to employer health plans?
 - Limited guidance
 - We believe all self-funded employer sponsored health plans should be treated as CHPs
 - Question is if they should be treated as single or multiple CHPs

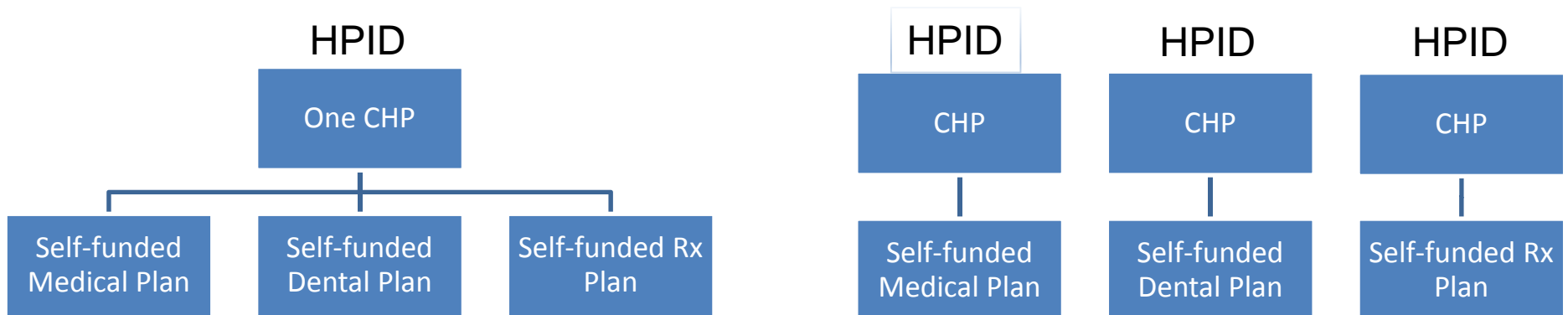


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Health Plan ID Number

- Number of HPIDs Required
 - If employer has “wrapped” all health plans into a single ERISA plan it appears that only one HPID would be required for that plan
 - If employer treats each self-funded plan as a separate health plan employers may need to acquire an HPID for each self-funded plan
 - Unanswered question – Beginning in 2016, will TPA require separate HPIDs for different self-funded plans even if employer has a single ERISA plan??

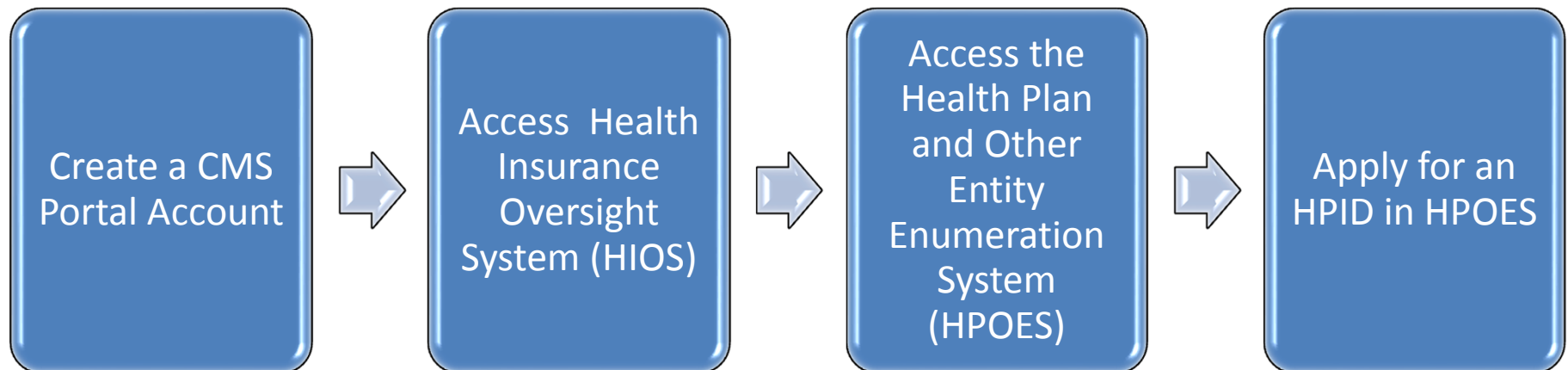


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Health Plan ID Number

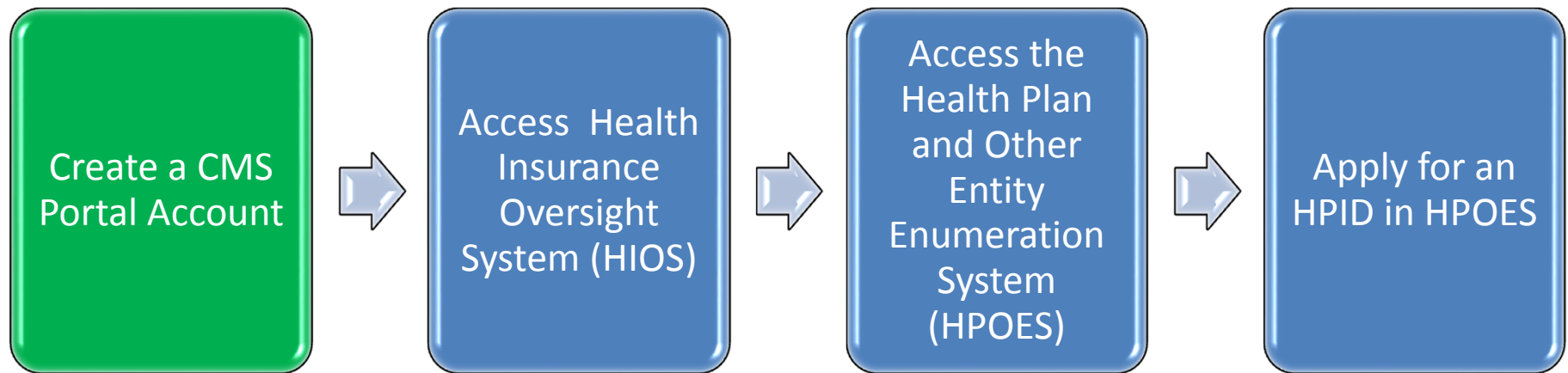
- The Process
 - Must set up access to various CMS systems before obtaining number
 - Name an authorizing official at the plan sponsor who will confirm the application
 - Complete CMS manual available on CMS HPID website



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Obtaining an HPID

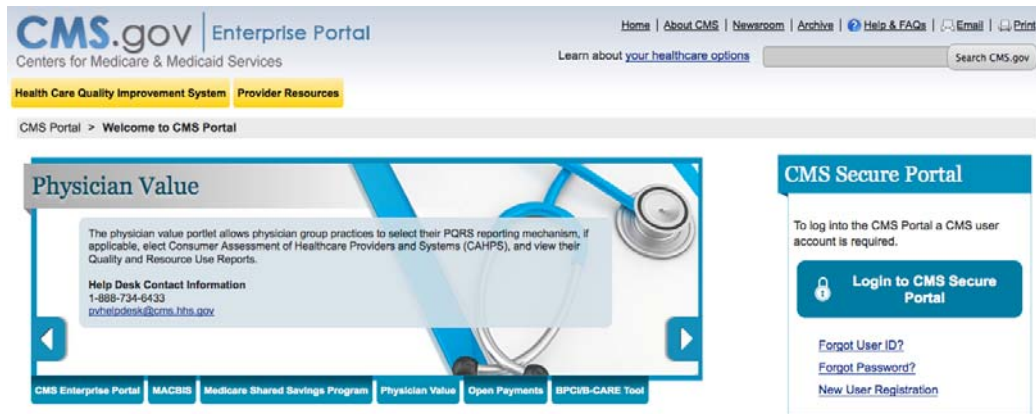


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Obtaining an HPID

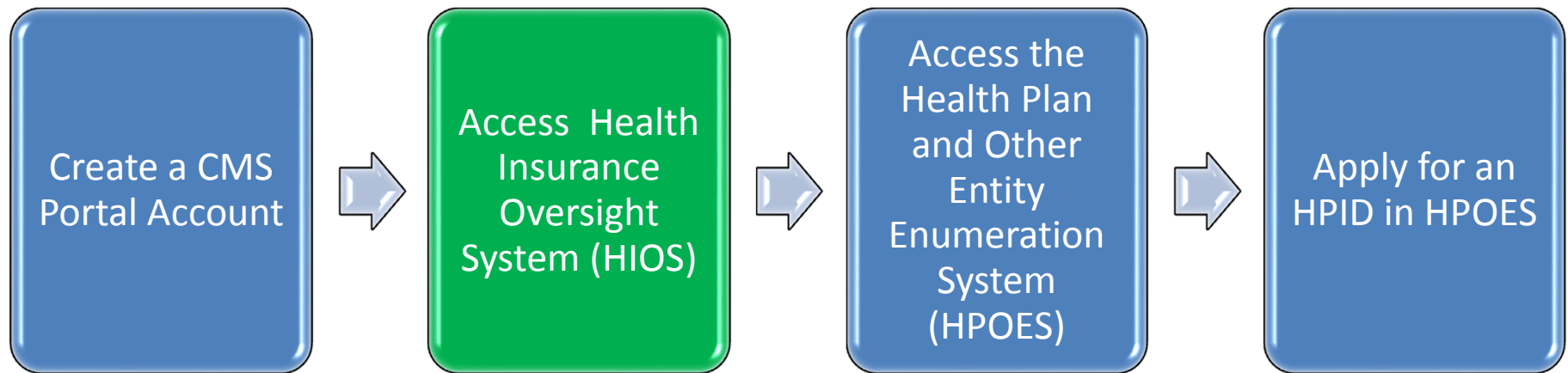
- Creating a CMS Portal Account - go to <https://portal.cms.gov>
 - Click “New User Registration” on the right side of the page
 - Fill out required personal information
 - Select security questions
 - Once your account is created, you must wait five minutes before you can log back in.



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Obtaining an HPID

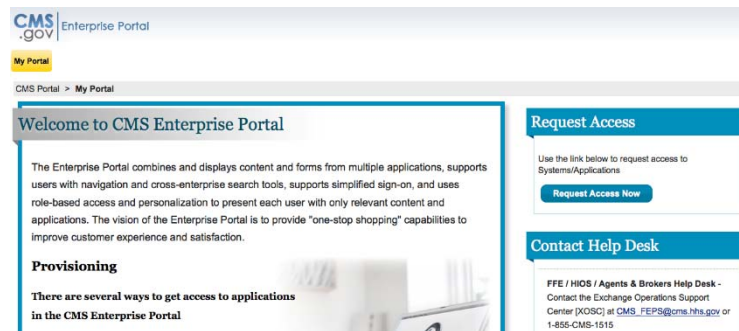


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Obtaining an HPID

- Accessing Health Insurance Oversight System (HIOS)
 - Log into CMS Portal
 - Select “Request Access Now”
 - From the “System Description” drop down menu select “HIOS – HIOS Application”
 - From the “Role” drop down menu select “HIOS Issuer”
 - Fill out the information form
 - Within 24 hours you will receive an e-mail confirming your registration within HIOS.



Request HIOS Account

Please note that you are applying for access to the Health Insurance Oversight System (HIOS). For more information or questions, please contact the Exchange Operations Support Center
Email: CMS_FEPS@cms.hhs.gov.

(*) Indicates a required field

| | |
|------------------------------------|----------------------|
| Title (Name): | <input type="text"/> |
| *First Name: | <input type="text"/> |
| Middle Name: | <input type="text"/> |
| *Last Name: | <input type="text"/> |
| Suffix: | <input type="text"/> |
| *Job Title: | <input type="text"/> |
| *Organization Name: | <input type="text"/> |
| *Email Address: | <input type="text"/> |
| Phone Type: | <input type="text"/> |
| *Phone: (Format: 123-456-7890): | <input type="text"/> |
| Phone Ext: | <input type="text"/> |
| Address Type: | <input type="text"/> |
| Address Line 1: | <input type="text"/> |
| Address Line 2: | <input type="text"/> |
| City: | <input type="text"/> |
| State: | <input type="text"/> |
| ZIP code: | <input type="text"/> |



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Obtaining an HPID

- Go back to CMS portal to fill out application
 - Once you have received the email, log back into CMS Portal and click on “request access now”
 - From the “System Description” drop down menu select “HIOS Application”
 - From the “Role” drop down menu select “HIOS Issuer”
 - Enter the HIOS Authorization code provided in the e-mail.
 - Log out of the CMS Server - When you log back on, you will see a yellow HIOS tab in the upper left corner. Click on the tab, then click the link that reads “Access HIOS”.

Please enter a valid HIOS Authorization Code (i.e. HIOS Issuer ID or Company FEIN) to continue with the role request. If you are an existing HIOS user and do not have access to a valid HIOS Authorization Code, please contact the HIOS helpdesk:

Phone: 855-267-1515
Email: CMS_FEPS@CMS.HHS.GOV
Hours of Operation: 9am-6pm

If you are not an existing HIOS user, please select the hyperlink below to register for access to HIOS:
<https://rbis.cms.gov/HIOS-MAIN-UI/FrontController?op=requestHIOAccount>

* HIOS Authorization Code:

Cancel

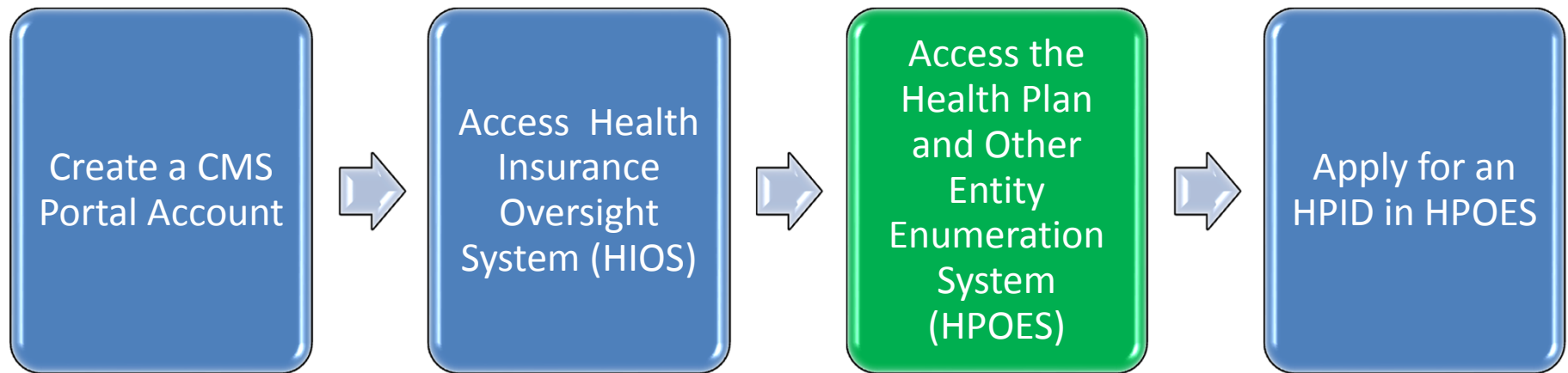
Submit



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Obtaining an HPID



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Obtaining an HPID

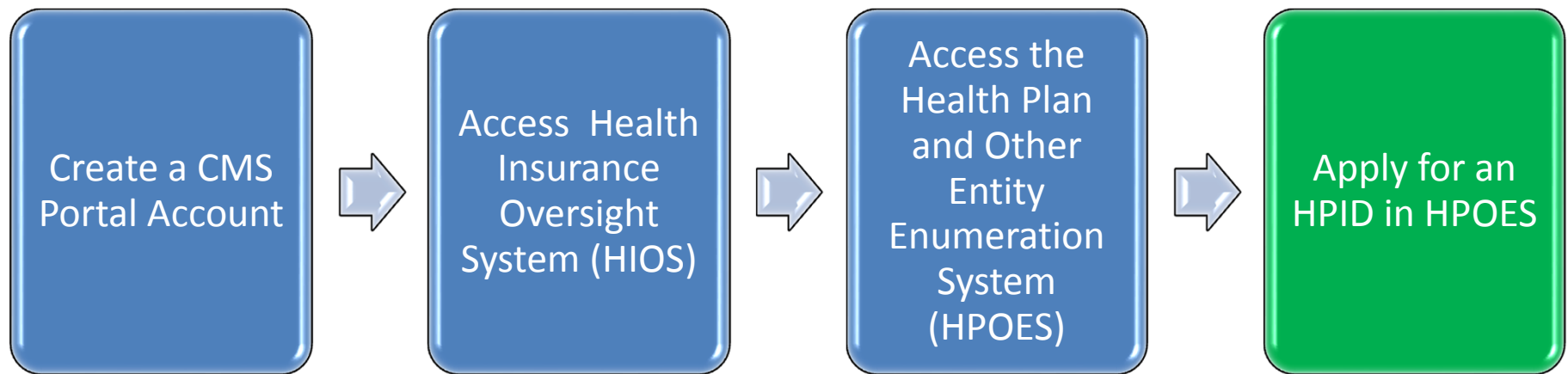
- Accessing Health Plan and Other Entity Enumeration System (HPOES) and applying for HPOES as a Submitter
 - Access HIOS - Select “Manage Organization”
 - Enter your organization’s Federal EIN or TIN number - Select the company type and other required information. If the information is correct select “submit” and return to the home screen
 - Select “Role Management” and choose “Request Role” tab
 - Select “Health Plan and Other Entity Enumeration System (HPOES)” from the drop down menu - select “Submitter” as the option for requested role – enter required information



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Obtaining an HPID



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Obtaining an HPID

- Applying for an HPID in HPOES as Submitter
 - After logging back into HIOS, click on the new tab that reads “Health Plan and Other Entity Enumeration System (HPOES)”
 - Click the “Create Profile and Apply for the HPID” tab on the left
 - Select your organization from the drop down menu.
 - Enter your NAIC number or Payer Identification Number
 - If you do not have either of these, enter “none” in the spot for Payer Identification Number then click “Continue”
 - Fill out the information for the authorizing official of the company. This must be someone able to make legally binding decisions such as a CEO or CFO.
 - An email will be sent to the authorizing official who must log into HIOS and HPOES to approve the application.



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Obtaining an HPID

- Confirming the Request as Authorizing Official
 - Authorizing official needs to log into HIOS
 - Click the “Role Management” tab
 - Select “Health Plan and Other Entity Enumeration System (HPOES)” from the drop down menu
 - Select “Authorizing Official” for Requested Role
 - Enter the organizations Federal EIN/TIN

The screenshot shows a web interface for requesting a role. At the top, there are two tabs: 'View Existing Role' and 'Request Role', with the latter being active. Below the tabs is the heading 'Request Role'. A paragraph of instructions follows: 'Please select a Module from the drop-down list below and follow the prompts to submit a role request. For a description of each module, select [Module Descriptions \(PDF\)](#)'. The 'Module:' field is a dropdown menu with 'Health Plan and Other Entity Enumeration System (HPOES)' selected. Below this is a note: 'Note: For this module, you can have only one user role at a time. Requesting a different user role will deactivate your current user role and any company associations. For instance, you cannot be both an authorizing official and a submitter for a company.' The 'Requested Role:' field is a dropdown menu with 'Authorizing Official' selected. Below this is the 'Association' section, which starts with 'Please select your Organization Identifier type:' and has a radio button selected for 'Federal EIN/TIN'. The final part of the form asks the user to 'Please enter the Organization Federal EIN/TIN below' and provides a text input field for the 'Federal EIN/TIN' and a 'Search' button.



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Obtaining an HPID

- Confirming the Request as Authorizing Official (cont.)
 - Authorizing official and submitter will receive an email once your application has been approved.
 - Log back into HIOS and click the “Health Plan and Other Entity Enumeration System (HIOS)” Tab.
 - Review the information given and click to approve.
 - You will be given an HPID number shortly after you approve the application. You will be notified by e-mail when the process is complete.



The screenshot shows the HIOS Home Page interface. At the top, it displays the date "Monday, July 28, 2014" and navigation links for "HOME", "FAQ", "CONTACT US", and "SIGN OUT". A welcome message reads "Welcome Benjamin Radecki". The main content area is titled "HIOS Home Page" and is divided into two columns. The left column, "Organization Management & Administrative Functions:", contains buttons for "Manage Account", "Manage an Organization", and "Role Management". Below this is the "HIOS Functions" section, which includes a button for "Health Plan and Other Entity Enumeration System (HPOES)". The right column, "HIOS Main Page Announcements:", contains a welcome message and a list of modules available in HIOS, including the HIOS Portal, Plan Finder and Product Data Collection Module (PF), Rates and Benefits Information System (RBIS), Consumer Assistance Program (CAP), Medical Loss Ratio Data Collection System (MLR), Rate Review System (RRJ), Rate Review Grants Reporting System (RRG), Health Plan and Other Entity Enumeration System (HPOES), Document Collection Module- Form Filing Module (DCM- FFM), Document Collection Module- Market Conduct Module (DCM-MCM), and Minimum Essential Coverage (MEC).



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The Certification Process



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Health Plan ID Number

- The Certification Process
 - All health plans that perform standard transactions will need to certify to CMS compliance with 3 specific transaction by December 31, 2015
 - Health care claim status
 - Health care electronic funds transfer
 - Remittance advice
 - Two different methods to certify compliance with transaction standards
 - CAQH CORE Certification
 - HIPAA Credential Process
 - Employers typically do not process the actual transactions
 - HIPAA Requires BAs to comply with HIPAA transaction rules when processing a transaction for a Covered Entity



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Health Plan ID Number

- The Certification Process
 - Employer/Plan Sponsor Responsibility
 - Identify BAs and Vendors who process HIPAA standard transactions on behalf of the employers plan
 - TPA
 - Online enrollment vendors
 - PBM
 - Require BAs and vendors to provide proof of certification by third quarter 2015
 - Certify compliance on CMS website (still to be developed)
 - Provide total members as of certification date
 - Provide BA list and appropriate certification information
 - Additional guidance expected in 2015



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Resources



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Health Plan ID Number

- CMS.gov HPID Website

<http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/Health-Plan-Identifier.html>

- HPID User Manual
- HPID System Overview Presentations
- Updated guidance and FAQs



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