

Countdown to HIPAA Claims Attachments

Save to myBoK

by Kathy Giannangelo, RHIA, CCS

With the clock ticking down to the HIPAA national provider identifier compliance deadline, HIM professionals should start thinking about the next HIPAA standard on the horizon, claims attachments. While not one of the original eight administrative transactions approved for use in the healthcare industry by the secretary of the Department of Health and Human Services (HHS), the standards for claims attachments are nonetheless required under HIPAA.

The Office of Management and Budget (OMB) received the HIPAA claims attachment standard notice of proposed rule making (NPRM) on June 2, 2005, according to the Association for Electronic Health Care Transactions.¹ While OMB is still reviewing some data provided by the Department of Health and Human Services, the NPRM is expected to be published in the Federal Register this month.

Two groups that have been working diligently on the standards and their companion documents are the Accredited Standards Committee X12N (ASC X12N) and Health Level Seven (HL7). Both standards development organizations have worked with the Centers for Medicare and Medicaid Services (CMS) and HHS in the development of these products.

In addition, the National Committee on Vital and Health Statistics standards and security subcommittee heard testimony on the claims attachment standard and subsequently submitted a letter to the HHS secretary in March 2004 recommending claims attachment demonstration projects and pilots. Shortly thereafter, the Workgroup for Electronic Data Interchange, ASC X12, HL7, and CMS coordinated a pilot conducted by a Medicare contractor and several providers.

The Claims Attachment Standards

The premise of HIPAA is electronic exchange of health information. Therefore, the intent behind the attachment standards is to find a way to automate today's process of submitting paper documents to provide the additional information not contained on a claim. According to a survey conducted by Forrester Research, 61 percent of physician offices submit claims attachments by regular mail (see "The Mail Majority," below).

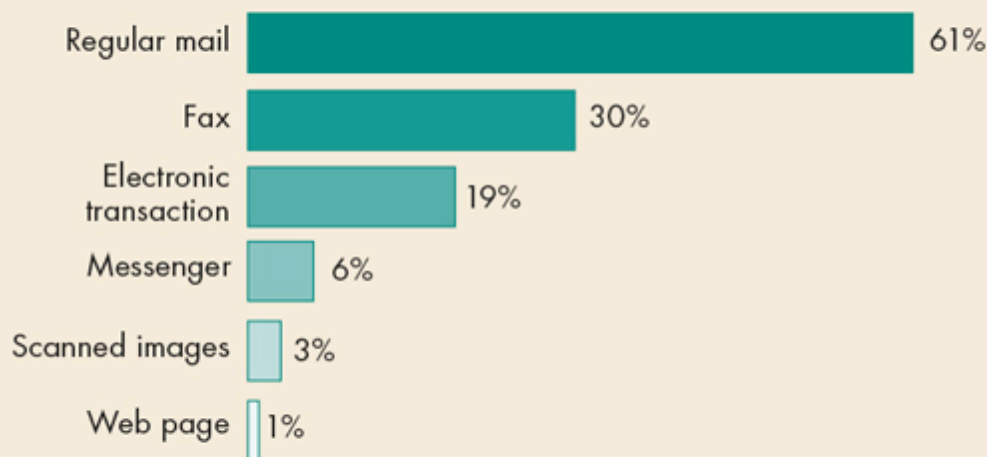
The NPRM will name standards for selected claims attachments that will automate this process. They are the ASC X12N 275 Additional Information to Support a Health Claim or Encounter and the ASC X12N 277 Health Care Claim Request for Additional Information. A white paper published by HL7 indicates that in addition to the 275 and 277 Implementation Guides (IGs), the NPRM will also include an Additional Information Specification IG, six additional information specification documents, and Logical Observation Identifiers Names and Codes (LOINC) modifier codes.² HL7's attachments special interest group and ASC X12N attachments work group created these documents for the electronic attachment to provide the additional information required to support an electronic claim or attachment.

Included in the Additional Information Specification IG are instructions on how to create attachment information using the XML-based clinical document architecture. Additional information specification documents define the maximum set of data that can be communicated for a specific attachment type and list the LOINC codes and all the specifics of how answers must be formatted in the HL7 message. The six claims attachment types are:

- Rehabilitation services
- Emergency department
- Clinical reports
- Laboratory results
- Ambulance
- Medications

The Mail Majority

"How does your practice typically submit claims attachments?"



Base: 290 physician practice decision makers (multiple responses accepted)

Source: American Medical Association/Forrester Research 2005 Physicians and Technology Study

Linking Clinical and Administrative Data

If the proposed standards are implemented, requests and attachments will be sent using X12N 277 and X12N 275 transactions. In doing so, claims attachments electronically link specific clinical data to administrative data. But this may not be as simple as it sounds. First, the information needs to be in electronic format. This includes scanned images at one end of the spectrum to an EHR system that automatically creates attachments from the clinical data for transmission to the payer for autoadjudication at the other end.

Second, those providers with systems already in place may find their administrative system that gathers the data needed for claim creation has limited integration with the clinical systems used in patient care. Middleware applications may be necessary to associate clinical data with specific service lines on the claim.

Finally, the use of LOINC, the code system being proposed for the predefined questions and answers in a HIPAA claims attachment, may have its own challenges. Once again software is key to its use. Rather than assigning codes manually, most coding and all interpretation of the codes are expected to be completed with billing, claims adjudication, or medical records systems software.³

The release of the NPRM means the industry is a step closer to allowing providers to send electronic attachments with claims or by sending electronic attachments in response to requests. Considering that the HIPAA claims attachment standards translate into potential greater efficiencies and quicker claim payment, providers should take the opportunity to comment on the feasibility of the proposal and identify any issues with its implementation.

Notes

1. Association for Electronic Health Care Transactions. "News and Events." Available online at www.afehct.org/newsevents.

2. Health Level Seven Attachments Special Interest Group. "HIPAA and Claims Attachments: Preparing for Regulation." May 2004. Available online at www.hl7.org/memonly/downloads/Attachment_Specifications/HIPAA_and_Claims_Attachments_White_Paper_20040518.pdf.
3. Rishel, Wes, and Maria Ward. "HIPAA's Proposal for Claims Attachments." *Healthcare Informatics* (September 2002). Available online at www.healthcare-informatics.com/issues/2002/09_02/hipaa_rishel.htm.

Kathy Giannangelo (kathy.giannangelo@ahima.org) is a practice manager at AHIMA.

Article citation:

Giannangelo, Kathy. "Countdown to HIPAA Claims Attachments." *Journal of AHIMA* 76, no.9 (October 2005): 92-93.

Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.