



New Mexico HIPAA Conference, September 22, 23, 2001

Session Results

Session Name: Transactions and Code Sets

Session Number: 202

Well received presentation. Some participants wanted more specific details for their own particular organization and specific use. The presentation followed the 38-slide PowerPoint presentation very closely. Please refer to handout for this presentation for more details.

TOPIC	DISCUSSION	SUGGESTED ACTION
1. Slides 1-8	<ul style="list-style-type: none"> • The US Health and Human Services Department are the ones establishing the standards • Health Insurance Portability and Accountability Act of 1996 was introduced during the first President Bush’s term; passed during President Clinton’s term; and reaffirmed recently during current George W. Bush’s term • October 16, 2002 is the first compliance date for Transactions and Code Sets for organizations with \$5 million in receipts • Transactions and Code Sets are unique identifiers 	Because of interactions with larger organizations, smaller ones should also be prepared by October 16, 2002.
2. Slides 9-16	<ul style="list-style-type: none"> • Discussed covered transactions 834; 835; 837; 820; 270; 271; 276; & 277 • Good discussion regarding the flow of the transaction process between provider and payer-- using the transaction code numbers • Discussion regarding the flow of the transaction process between employer and Health Plan using 834 and 830 	Start preparing now.
3. Slides 17-21 IMPACT	<ul style="list-style-type: none"> • Discussed impact on systems; personnel, including IT personnel; administration; and clinical (everyone). • There will be unique identifiers for Providers; Health Plans; Employers and possibly individuals 	Start preparing now

4. Slides 22-24—Code Sets	<ul style="list-style-type: none"> • Some software packages allow searching by key words • ICD-9 CM will be used for behavioral health, also • DSM-4 will NOT be used for behavioral health codes • It is still under consideration whether National Drug Codes will be used as they are. 	
5. Slides 25-28—Impact of Standard Code Sets	<ul style="list-style-type: none"> • Elimination of local codes is a problem----problem for NM DOH & Medicaid, especially • It is a lengthy process to get a new code into the standardized code set. • During the transition there may be dual sets of codes • New sets of codes will be added on an ongoing basis • At first will be extra work at clinic/patient care site 	<ul style="list-style-type: none"> • Keep Administration informed of progress and changes as soon as they happen. • Anticipate how you are going to train everyone who must use new codes • Develop training plans
6. Slides 29-32-Compliance	<ul style="list-style-type: none"> • Gap Analysis-look at existing codes and systems first—where do you meet the standards and where not? • There are software “tools” that can help you with a gap analysis. • Mapping of system data to appropriate codes and transaction must be completed. Much of it may have to be done manually. • Remediation means to modify existing forms. • If you don’t comply your claims could be denied and it could cost many \$\$\$\$. 	<ul style="list-style-type: none"> • Start preparing now. • Because of interactions with larger organizations, smaller ones should also be prepared by October 16, 2002. Do not wait until October 16, 2003.
7.Slides 33-38-Testing and Training	<ul style="list-style-type: none"> • There is in-house training • and business to business training that includes situation testing • Everyone must be trained, not only on their specific part, but on how they fit in the process • If you don’t train , it could cost the organization \$\$\$ in audits & fines. 	<ul style="list-style-type: none"> • Develop training plans now