



## HIPAA Readiness Disclosure Statement

Anthem Blue Cross has been following the evolution of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA) since its inception in 1996. Our goal is to help ensure that our systems, supporting business processes, policies, and procedures successfully meet the implementation standards and deadlines mandated by the United States Department of Health and Human Services (DHHS).

### HIPAA Applicability

HIPAA Title II, sometimes called Administrative Simplification, has two primary areas of regulation: (1.) the standardization of certain electronic health care related transactions, and (2.) the implementation of controls to protect an individual's health information.

The HIPAA Administrative Simplification rules and regulations apply to covered entities defined to include health plans, health care clearinghouses, and health care providers who transmit any health information in any electronic form in connection with transactions covered under the rules, and who receive, maintain, or disclose individually identifiable health information in any form or medium. All covered entities must comply with the standards adopted by HIPAA by the applicable compliance dates.

- HIPAA Transaction Standards

#### **Compliance Required and Achieved October 16, 2003 for 4010A1 Standard**

Anthem Blue Cross is capable of accepting, processing, and creating the electronic transaction 4010A1 formats with trading partners as mandated by HIPAA. The following transactions are required for use under the HIPAA standards, including:

<u>Transaction Name</u>	<u>ASC X12 Transaction</u>	<u>NCPDP Transaction</u>
Health Claims and Equivalent Encounter Information	837	NCPDP 5.1/Batch 1.1
Enrollment and Disenrollment in a Health Plan	834	
Eligibility Inquiry/Response for a Health Plan	270/271	NCPDP 5.1/Batch 1.1
Health Care Payment/Remittance Advice (ERA)	835	
Health Plan Premium Payments	820	
Health Claim Status Inquiry/Response	276/277	
Referral Certification and Authorization	278	NCPDP 5.1
Coordination of Benefits	837	NCPDP 5.1/Batch 1.1

#### **Compliance Required by January 1, 2012 for 5010 Standard**

Anthem implementation strategy to integrate the 5010 standard is underway as we support the improved data content and transactions consistency this standard offers as published on January 16, 2009. Anthem proactively established cross-functional teams located throughout the corporation. These cross-functional teams are dedicated to researching issues, assessing systems, reviewing business processes, and educating the Anthem organization and its affiliates about implementation procedures. We are committed to keeping impacted parties advised of our progress.

- [HIPAA Code Sets](#)

### **Compliance Required and Achieved October 16, 2003**

Under HIPAA, a “code set” is any set of codes used for encoding data elements, such as tables of terms, medical concepts, medical diagnosis codes, or medical procedure codes. Code sets for medical data are required for data elements in the administrative and financial health care transaction standards adopted under HIPAA for diagnoses, procedures, and medications.

- [HIPAA Claims Attachment Notice of Proposed Rule Making](#)

On September 23, 2005, the Department of Health and Human Services published a Notice of Proposed Rule Making (NPRM) for Electronic Claims Attachments in the Federal Register. The purpose of the electronic claims attachments rule is to provide structure and standards for the process of requesting and supplying additional health care information to support submitted health care claims data. Anthem Blue Cross participated in developing responses in conjunction with the 60-day public comment period associated with this NPRM.

- Final Rule Expected in 2010

- [HIPAA Identifiers](#)

Following are the current HIPAA-defined identifiers:

- [Employer Identification Number \(EIN\)](#): The nine-digit Tax Identification Number assigned by the IRS - **Compliance required and achieved July 30, 2004.**

[National Provider Identifier \(NPI\)](#): The NPI is a 10-digit single provider identifier assigned by Centers for Medicaid and Medicare Services (CMS) through the National Plan and Provider Enumerator System (NPES) - **Compliance has been achieved.**

- [Health Plan Identifier \(PAYERID\)](#): not yet announced but likely to be a ten-digit number assigned to health plans for the routing of electronic transactions\*

\* **This item has been placed on hold by CMS for an indefinite period of time.**

### **[HIPAA Privacy and Security Rules](#)**

- [Privacy](#)

#### **Compliance Required and Achieved April 14, 2003**

Anthem Blue Cross was in compliance with the provisions of the HIPAA Privacy Rule by the required date of April 14, 2003. Compliance efforts included, but were not limited to, the appointment of a Privacy and Security Officer, establishment of a Privacy Office, and creation of an infrastructure designed to support ongoing compliance requirements throughout the company, the adoption and communication of policies, standards, and procedures, and the annual training of all associates.

Anthem Blue Cross has adopted policies and procedures that meet compliance with the HIPAA Privacy regulation including the granting of the following individual rights:

- The right to have access to designated records that contain protected health information (PHI).
- The right to request an amendment to PHI contained in designated records.
- The right to place restrictions on the use and disclosure of PHI for treatment, payment, and health care operations.
- The right to “opt-in” prior to receiving certain marketing materials.

- The right to receive confidential communications at an alternate address or location.
- The right to request a disclosure accounting.
- The right to voice a complaint pertaining to Anthem Blue Cross' privacy policies and procedures.

Privacy notices are distributed to all fully insured subscribers describing the company's use and disclosure of PHI. These notices are available on the Anthem Blue Cross' website at [www.anthem.com/ca](http://www.anthem.com/ca).

Anthem Blue Cross and its affiliates are committed to delivering excellent service. Part of that commitment includes compliance with and support of the HIPAA Privacy mandate. Most importantly, we are committed to protecting member and patient privacy and safeguarding related health information.

- **Security**

- **Compliance Required and Achieved April 20, 2005**

Anthem Blue Cross achieved compliance with the provisions of the HIPAA Security Rule by the required date of April 20, 2005. Compliance efforts included, but were not limited to, the appointment of a Corporate Information Security Officer, establishment of an Information Security Compliance Office, and the creation of an infrastructure designed to support ongoing compliance requirements throughout the company including the adoption and communication of policies, standards, and procedures, and the training of all associates.

Anthem Blue Cross is compliant with the HIPAA Security regulation through its corporate Information Assurance program designed to:

- Maintain an information assurance risk management program
- Protect the confidentiality, integrity, and availability of electronic PHI
- Utilize administrative, physical, and technical safeguards to address reasonably anticipated threats and hazards to electronic PHI
- Continually evaluate the effectiveness and adequacy of the program

Anthem Blue Cross is committed to delivering excellent service. Part of that commitment includes compliance with and support of the HIPAA Security mandate. Most importantly, we are committed to protecting member and patient privacy and safeguarding related health information.

Anthem is aware of and will comply with the changes made to the HIPAA Privacy and Security laws and regulations as part of the American Recovery and Reinvestment Act.

- **ICD-10**

- **Compliance Required by October 1, 2013**

Anthem clearly recognized that the issues presented by the ICD-10 mandate constituted a business challenge that would affect every part of our organization as well as our business affiliates and policyholders. As a result, we proactively established a workgroup in 2008. This workgroup is comprised of cross-functional teams located throughout the corporation which are dedicated to researching issues, assessing systems, reviewing business processes, and educating the Anthem organization and its affiliates about implementation procedures while ensuring understanding of the expected end-result. As we continue to finalize our implementation strategy, we are committed to keeping impacted parties advised of our progress.

## Collaborative Partnerships

Anthem Blue Cross has established collaborative partnerships with industry-focused organizations throughout the country to share knowledge and expertise on HIPAA related matters. Anthem Blue Cross and its affiliated companies are actively participating with the following organizations:

- WEDI (Workgroup for Electronic Data Interchange)
- WEDI SNIP (WEDI's Strategic National Implementation Process)
- AHIP (American's Health Insurance Plans)
- AMA (American Medical Association)
- AHA (American Hospital Association)
- ADA (American Dental Association)
- ANSI (American National Standards Institute)
- ASC X12 (Accredited Standards Committee)
- CAQH (Council for Affordable Quality Healthcare)
- CAQH – CORE (Council for Affordable Quality Healthcare; Committee on Operating Rules for Information Exchange)
- EHNAC (Electronic Healthcare Network Accreditation Commission)
- HIMSS (Healthcare Information Management System Society)
- ICE (Industry Collaboration Effort)
- NCPDP (National Council of Prescription Drug Programs)