Do You Have A Health Plan Identifier?

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Do You Even Know What It Is?

With great focus on healthcare reform, you may have missed a current requirement for health plans to apply for and obtain a Health Plan Identifier (HPID). This requirement does not come from the Affordable Care Act, but rather the Health Insurance Portability and Accountability Act of 1996 (HIPAA). That's right, HIPAA is something that continues to need your company's attention.

In September 2012, the Department of Health and Human Services published its final rule regarding unique Health Plan Identifiers for health plans. Over the next year, health plans must obtain an HPID for purposes of allowing the health plan to interact with other health providers, payment entities, and other plan providers.

Health plans are divided into controlling health plans and sub health plans. Controlling health plans are health plans that 1) control their own business activities, actions, or policies, or 2) are controlled by entities that are not health plans. Other health plans are sub health plans. Controlling health plans must obtain HPIDs by November 5, 2014. Small controlling health plans, which are controlling health plans with $5 million or less in annual receipts, are required to obtain HPIDs by November 5, 2015.

Controlling health plans must obtain an HPID through a process called enumeration. If a controlling health plan uses a third party administrator (TPA), the TPA may submit an HPID request on behalf of the controlling health plan. For companies that will be submitting for an HPID for their own group health plan, such HPID can be obtained through the CMS Enterprise portal. This website is available at https://portal.cms.gov/wps/portal/unauthportal/home/. For more information about setting up an HPID, there is a user manual available from the Center for Medicare/Medicaid Services.

What Should You Do Now?

If you are unsure whether the HPID requirement applies to your company's group health plan, you should contact your health plan advisors to determine whether the plan is a controlling health plan, and whether it meets the applicable size requirements to apply for an HPID by November 5, 2014.

Note: as we went to press, on Oct. 31, the CMS Office of e-Health Standards and Services announced a delay, until further notice, of enforcement of the HPID use in HIPAA transactions. This delay, which

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applies to all HIPAA covered entities, will allow HHS to review recent recommendations for use of HPID in HIPAA transactions.

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