What to Expect for Providers: Q&A

Administrative Simplification Provider Pilot Program

April 2019

In 2019 HHS launched a Provider Pilot Program to test the process for reviewing compliance with HIPAA Administrative Simplification rules among providers. This follows a successful pilot program for health plans and clearinghouses completed in 2018.

How will the pilot program work?

Selected provider volunteers will submit electronic transaction files for review and testing by HHS, as well as attest to compliance with operating rules. Files will be reviewed for compliance with Administrative Simplification rules for:

- Transaction formats
- Code sets
- Unique identifiers

Upon completion, HHS will provide volunteers with a report that flags any issues that need to be addressed for full compliance. During the pilot, HHS will identify compliance issues and areas for optimization, and volunteers will develop a corrective action plan to remedy areas of noncompliance. Volunteers that achieve successful reviews will receive a dated certificate to that effect from HHS. Volunteers may choose to share their certificate with potential business associates, the public, and other stakeholders.

Providers that take part in the pilot project won't be subject to random selection for an assessment for one year following HHS's launch of the optimization program.

How do I know if my organization can participate in the pilot?

Any providers who conduct electronic health care transactions can volunteer for the pilot program. HHS is recruiting volunteers now. To volunteer, contact AdministrativeSimplification@cms.hhs.gov.

How does the selection process work?

HHS will randomly select 3 providers/provider organizations from the pool of eligible volunteers.

How much time is required to participate in the Provider Pilot Program?

Volunteers will submit electronic [transaction](#) files for review, as well as attest to compliance with [operating rules](#). Transaction submission should take less than 10 hours total. Participants will receive a compliance review package with step-by-step details.

Based on our experience with the pilot program with health plans and clearinghouses, it could take 4 to 6 months to complete the Provider Pilot Program, depending on findings. This includes our Compliance Review team reviewing [transactions](#), as well as any corrective actions required of your organization.

The size of your organization and review results may also factor into the amount of time needed.

What happens if HHS finds my organization's transactions aren't compliant?

HHS will work with you to resolve any issues. Corrective Action Plans are commonly used to address noncompliance.

Will HHS keep any findings about my organization confidential?

Yes. Organizations will be de-identified in our communications about pilot results.

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