DEPARTMENT OF HEALTH & HUMAN SERVICES

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HIPAA Administrative Simplification Information Bulletin

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Administrative Simplification Basics Fact Sheets

The Centers for Medicare & Medicaid Services (CMS) Division of National Standards (DNS) announces the release of a series of fact sheets explaining the basics of HIPAA Administrative Simplification transactions and code sets. These fact sheets focus on the adopted standards and operating rules for Administrative Simplification transactions, which can increase efficiency in operations, improve the quality and accuracy of information, and reduce the overall costs to the health care system.

Fact Sheet Topics

The Administrative Simplification Basics fact sheets are designed to help the health care industry understand the purpose of HIPAA adopted transactions and to explain which standards and operating rules govern each transaction. The fact sheets cover these topics:

- Health care transactions basics provides an overview and background for all adopted transactions
- <u>Electronic funds transfer and electronic remittance advice transactions</u> describes the EFT and ERA transactions and provides information on the adopted standards and operating rules
- <u>Coordination of benefits transactions</u> describes the COB transaction and provides information on the adopted standard
- <u>Claim status transactions</u> describes the claim status inquiry and response transaction and provides information on the adopted standard and operating rules
- <u>Eligibility and benefits transactions</u> describes the eligibility and benefits inquiry and response transaction and provides information on the adopted standard and operating rules
- <u>Code sets</u> describes the purpose of code sets and provides information on Administrative Simplification code sets

Visit the <u>Administrative Simplification website</u> for more information on transactions, standards, operating rules, and code sets. For the latest news about Administrative Simplification, sign up for <u>Email Updates</u>.