

OUR COMMITMENT TO YOU

The U.S. healthcare industry is governed by regulations established by the U.S. Department of Health & Human Services (HHS) and Office of Civil Rights (OCR), resulting principally from the Health Insurance Portability and Accountability Act (HIPAA) and the administrative simplification provisions of the Affordable Care Act (ACA).

Regulations in effect include:

Transaction and Code Sets Standards

X12 VERSION 5010:

- Health Care Eligibility Benefit Inquiry and Response (270/271)
- Health Care Claims: Professional (837P), Institutional (837I), Dental (837D)
- ➤ Health Care Claim Status Request and Response (276/277)
- ➤ Health Care Claim Payment/Advice (835)
- Health Care Services Review Request for Review and Response (278)
- > Benefit Enrollment and Maintenance (834)
- Payroll Deducted and Other Group Premium Payment for Insurance Products (820)

NCPDP:

- Telecommunication Standard version D.0/Batch Standard version 1.2
- Medicaid Pharmacy Subrogation Standard version 3.0

CODE SETS:

- HCPCS (ancillary services/procedures)
- CPT-4 (physician procedures)
- CDT (dental terminology)



- ➤ ICD-10-CM (diagnosis) and ICD-10-PCS (hospital inpatient procedures)
- NDC (drug codes)
- Transaction and Code Sets Standards
 - National Provider Identifier (NPI)
 - Employer Identification Number (EIN)
- Privacy and Security Standards
- Operating Rules:
 - Eligibility and Claim Status
 - Electronic Funds Transfer and Electronic Remittance Advice
- ACA administrative simplification outlined, but no regulatory action at this time:
 - Standards and Operating Rules for Health Claims Attachments
 - Operating rules for claims/encounters, health plan enrollment, premium payments, and referral certification and Authorization

Change Healthcare recognizes the challenges of federal and state mandates. As an industry leader, we are committed to helping our healthcare partners seamlessly navigate the path to compliance.

On October 4, 2018, The U.S. Department of Health and Human Services (HHS), Division of National Standards (DNS) within the Centers for Medicare & Medicaid Services (CMS), recognized Change Healthcare for successfully completing the HHS Optimization Program Pilot of Administrative Simplification transaction standards, code sets, unique identifiers, and operating rules.

See Change Healthcare Certifications for details.