

# HIPAA Contingency Plan



Simply, the right choice.

COMMUNITY HEALTH PLAN

Effective October 16, 2003, Community Health Plan will be accepting all HIPAA compliant transactions in accordance with the HIPAA Electronic Transactions and Code Sets ruling which include:

- 837 – Healthcare Claims (Institutional and Professional)
- 835 – Healthcare Payment & Remittance Advice
- 834 – Enrollment & Disenrollment
- 820 – Payroll Deduction & Group Premium Payments
- 278 – Referral Certification & Authorization
- 276/277 – Healthcare Claims Status
- 270/271 – Eligibility

Community Health Plan has made exceptional strides in implementing the HIPAA standards for electronic healthcare interchange. However, due to the extensive effort required to transition the healthcare industry and the fact that many will not be prepared to fully adopt the HIPAA standards, the government agency charged with enforcement – the Centers for Medicare and Medicaid Services (CMS) – has urged the adoption of “contingency plans” to prevent disruptions in the healthcare payment system.

Under the guidance of The Department of Health and Human Services, CMS recently announced that it will implement its contingency plan and that Medicare will continue to accept both HIPAA standard and legacy formats for a period of time. In its announcement, the agency stated: “Implementing this contingency plan moves us toward the dual goals of achieving HIPAA compliance while not disrupting providers’ cash flow and operations, so that beneficiaries can continue to get the healthcare services they need.”

Community Health Plan is committed to help ensure the migration to the new HIPAA standards does not create unnecessary administrative burdens for our business associates or cause significant disruptions in healthcare payments and services. To that end, on October 16<sup>th</sup>, we will be implementing our contingency plan, which is based on recent CMS guidance. Under our contingency plan, all electronic transactions from WebMD will be processed in the legacy format due to compliance issues. However, any provider wishing to submit HIPAA standard transactions directly to Community Health Plan should contact their Client Services Representative.

As always, thank you for allowing us to serve you.