

**Health Plan Identifier**

**Comments from**

**Veterans Health Administration as Health Care Provider**

**Department of Veterans Affairs**

**July 19, 2010**

**Hearing on National Health Plan Identifier**

**NATIONAL COMMITTEE ON VITAL AND HEALTH STATISTICS**

**Subcommittee on Standards**

**Administrative Simplification under the Patient Protection and Affordable Care Act**

**National Health Plan Identifier**

**IDENTIFIER**

- The National Health Plan Identifier (NHPI) will need to provide all of the information necessary to route the claim to the appropriate receiver.
- The NHPI needs to eliminate separate payer identifiers for primary versus secondary claims processing.

**ENUMERATION STRATEGY**

- There should be a standard enumeration strategy for the industry.
- Enumeration should occur at the health plan (payer) level. ***If enumeration occurs at the benefit plan level, it will increase the amount of administrative effort required to maintain the association of the patient to their respective plan.***

**ADMINISTRATION**

- There should be a single administrator of the NHPI who is responsible for the maintenance and source of the data.
- The NHPI information should be readily available to all registered participants to obtain the source data to route transactions.
- A notification system is needed to communicate health plan ID changes to registered users.

## **ENFORCEMENT**

- An enforcement strategy is needed if health plans do not apply or publish their ID number.
- All IDs should be available to all who register on the enumeration site.

## **ID CARDS**

- Health Plan ID cards will need to display the NHPI.
  - This requirement will result in additional timing for remediation of systems, testing, generating and the distribution of new ID cards.

## **COVERED ENTITIES**

- This regulation will need to consider covering entities outside of HIPAA including Workers Compensation and Property and Casualty plans.
  - If the regulation is not applied to non-covered entities, an impact assessment will be needed.

## **TIMEFRAME**

- A two year implementation timeline to 10/1/2012 may not be realistic given the HIPAA 5010/D.0 and ICD-10 implementation efforts currently underway.
- There are Covered Entities (CEs) today who have not fully implemented NPI. CEs remediate systems at various times which impact ability to test & validate systems with trading partners. Indirect trading partners need to be able to test end-to-end.
- Suggest a cut-off period for health plan to obtain NHPI well before compliance date. To allow period of use for testing & validation across industry.
- Level 1 implementation – test (1 year)
- Level 2 implementation – use only health plan identifiers