



September 28, 2022

Jacki Monson, Chair
National Committee on Vital and Health Statistics Subcommittee on Standards
CDC/National Center for Health Statistics
3311 Toledo Road
Hyattsville, MD 20782-2002

Dear Ms. Monson,

On behalf of the members of the National Uniform Billing Committee (NUBC), we are writing to provide comments in response to the July 28, 2022 National Committee on Vital and Health Statistics (NCVHS) letter titled "Recommendations to Modernize Adoption of HIPAA Transaction Standards." The NUBC appreciates NCVHS's efforts to support the transformative changes occurring in health care systems and for the opportunity to provide comments on the recommendations in this letter.

The NUBC is a Data Content Committee named in the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The NUBC is composed of a diverse group of health care stakeholders representing providers, health plans, designated standards maintenance organizations, public health organizations, and vendors. Our goal is to promote the development of the data needs reported within a uniform claim for use by institutional health care communities and transmitted to all third-party payers.

In its July letter, the NCVHS identified four recommendations intended to bring related health information data flows and HIPAA transaction standards into optimal configuration to regain the efficiencies envisioned in the original HIPAA legislation. Overall, we commend the Committee for recognizing the significant opportunities to improve the current process for identifying, developing, and adopting new and revised health care standards. However, when reviewing NCVHS's letter, we believed there are several areas warranting additional clarity for the industry to sufficiently understand and evaluate the first and second recommendations.

We have several questions regarding NCVHS's recommendation that HHS update relevant HIPAA policies to allow the adoption and use of more than one standard per business function. Though the letter notes that any changes must be compatible with HIPAA transaction and code set legislation and regulations, the NUBC believes it is critical to understand whether the ability to adopt the first recommendation currently is allowed under HIPAA or if adoption would require an act of Congress. We believe answering this question is critical to assessing the recommendation. Additionally, we are unclear if NCVHS's recommendation is calling for the allowance of multiple standards for the same business function and if more than one standard is allowable or rather if the first recommendation is calling for a requirement that more than one standard be adopted and supported. Furthermore, recognizing that the adoption of standards is resource intensive and cost-prohibitive for some health care stakeholders, the NUBC is interested if this recommendation is intended to mitigate the concern that not all stakeholders will be ready to move to a new standard at the same time.

Moreover, the NUBC would appreciate clarification regarding NCVHS's second recommendation that HHS enable HIPAA Covered Entities to support one or more versions of adopted standards for business

functions. We are interested to learn if NCVHS envisions multiple versions for multiple standards to be allowable at once, and whether a single stakeholder can utilize varied transaction set versions for different transactions (e.g. utilize the X12 005010 837 for the claim, but the X12 008020 for eligibility). Also, we would appreciate if NCVHS expounded upon how it envisions version transitions taking place. The NUBC believes that some transactions may warrant version updates while others may not due to implementation burden and limited additional functionality.

There are substantial opportunities to improve the current process for identifying, developing, and adopting new and revised health care standards. We look forward to continuing to work with the Committee to identify opportunities to streamline the flow of electronic health data between patients, providers, payers, public health organizations, and all other stakeholders. The NUBC continues to stand ready to work with NCVHS on proposals that will move the industry towards a more efficient data sharing environment that prioritizes uniformity and predictability across the industry.

Thank you for your consideration of these comments. Please let me know if you have any questions or feel free to have a member of your staff contact me at tcunningham@aha.org.

Sincerely,

/s/

Terrence Cunningham, Chair
National Uniform Billing Committee

CC:

Richard Landen, Co-Chair of the NCVHS Subcommittee on Standards
Denise Love, Co-Chair of the NCVHS Subcommittee on Standards