

**Indian Health Service
HIPAA Readiness Survey
Third Party Payers**

Health care plans, health care clearinghouses and health care providers who utilize electronic transactions will be required to use these standards beginning October 16, 2003.

Indian Health Service is preparing to meet the October 16, 2003, deadline to have its electronic systems prepared to submit HIPAA compliant transaction codes.

Indian Health Service has identified your company as one that we have sent electronic transactions to in the past. To provide us with guidance on your company's readiness, please fill out the following questionnaire and return the completed document to our office.

Please complete the attached questionnaire and return it by fax or email attachment to the attention of:

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Information Technology Support Center
Indian Health Service
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**Indian Health Service
HIPAA EDI Notification**

ONE: Trading Partner/Insurer Information

This notification is: A NEW NOTIFICATION A REVISED NOTIFICATION DATE: _____

Name of Insurer:			
Address Line 1:			
Address Line 2:			
City, State & Zip:			
Phone Number:		Fax Number:	

Authorized Contact Person

Primary Contact:		Title:				
Phone Number:		Fax Number:		Email Address		
Secondary Contact:				Title:		
Phone Number:		Fax Number:		Email Address		

TWO: EDI Subscriber-I/T/U Facility Information

Company Name:						
Address Line 1:						
Address Line 2:						
City, State & Zip:						
Bus Ofc Contact:		Fax Number:		Email Address		
IT Suppt Contact:		Fax Number:		Email Address		
Submitter Type:		BILLING PROVIDER MANAGED CARE		SELF TPA		CLEARINGHOUSE/BILLING SERVICE OTHER: _____ <i>(Specify)</i>

THREE: Authorized Transactions

(Was your company prepared to implement the following transactions & code sets by 10/16/03?)

HIPAA format	Yes	No	N/A	If not, what date do you expect to start testing?	Software Version?	Do you have a Contingency Plan in Place?
270 Health Care Eligibility Inquiry						
271 Health Care Benefit Response						
276 Health Care Claims Status Request						
277 Health Care Claims Status Response						
278 Health Care Referral Certification and Authorization						
834 Health Care Enrollment/Disenrollment						
835 Health Care Claim Payment/Remittance						
837 Health Care Claims – <i>Institutional</i>						
837 Health Care Claims – <i>Dental</i>						
837 Health Care Claims – <i>Professional</i>						
NCPDP v5.1 Pharmacy Claim						