

# TABLE OF CONTENTS

## Newsletters

### Tab 100: Introduction and Overview

	<i>Section</i>	<i>Page</i>
<b>Introduction to the Health Insurance Portability and Accountability Act</b> .....	¶100	3
<b>Types of Plans and Benefits Subject to HIPAA</b> .....	¶110	25
<b>Effective Dates</b> .....	¶120	45
<b>Penalties and Enforcement</b> .....	¶130	67
Enforcement by the U.S. Department of Labor.....	¶131	71
<b>Regulatory History</b> .....	¶140	87
Overview of the Portability Regulations .....	¶141	88
Overview of the Mental Health Parity Regulations.....	¶142	89
Overview of the Administrative Simplification Regulations .....	¶143	89
Overview of the Minimum Maternity Stay Regulations.....	¶144	91
Overview of the Fraud and Abuse Regulations.....	¶145	91
Overview of the Nondiscrimination Regulations .....	¶146	92

### Tab 200: Limits on Pre-existing Condition Exclusions

<b>Introduction</b> .....	¶200	3
<b>Definition of a Pre-existing Condition</b> .....	¶210	25
‘Prudent Person’ Standard Prohibited .....	¶211	31
Pregnancy and Genetic Information Excluded .....	¶212	37
Duration of Maximum Exclusionary Period.....	¶213	39
Six-Month ‘Look Back’ Period.....	¶214	39
HMO Affiliation Period .....	¶215	41
<b>Creditable Coverage</b> .....	¶220	51
Creditable Coverage Defined .....	¶221	51
Calculating Creditable Coverage.....	¶222	63
Breaks in Coverage.....	¶223	68
Waiting Periods.....	¶224	72
Actively-at-Work Rules.....	¶225	73
Newborns and Newly Adopted Children.....	¶226	74
COBRA and FMLA Implications of the Pre-existing Condition Rules .....	¶227	77
Establishing Creditable Coverage .....	¶228	80
<b>State Laws</b> .....	¶230	85
ERISA Preemption Issues .....	¶231	92
States’ Discretion to Set Their Own Standards .....	¶232	93
State and Local Government Opt-Out.....	¶233	102
HIPAA/COBRA Interaction Regarding State and Local Plans .....	¶234	107
<b>Health Reform Amendments to HIPAA</b> .....	¶240	119
Phaseout of Pre-existing Condition Exclusions.....	¶241	123
Lifetime and Annual Limits .....	¶242	123
Extension of Dependent Coverage .....	¶243	127
Rescission .....	¶244	129
Other Provisions .....	¶245	130

**Tab 300: Providing Certification of Prior Coverage**

<b>Introduction</b> .....	¶300	3
<b>What Must Be Included in Certificates</b> .....	¶310	25
Model Certification Notices.....	¶311	26
<b>Who Must Provide Certificates</b> .....	¶320	51
Dual Liability.....	¶321	53
Shifting Liability.....	¶322	53
<b>When Certificates Must Be Provided</b> .....	¶330	75
Providing Certificates Upon Request.....	¶331	76
Automatic Certificates.....	¶332	77
Notifying New Employees.....	¶333	79
Special Rules for Dependents' Certificates.....	¶334	80
<b>Coordinating HIPAA Certificates and COBRA Notices</b> .....	¶340	99
Content of Certificate.....	¶341	100
Timing of Certification.....	¶342	102
Combining HIPAA Certificates and COBRA Notices.....	¶343	104
<b>Responsibilities of the Receiving Plan or Insurer</b> .....	¶350	125
<b>Creditable Coverage Notices Under Medicare Part D</b> .....	¶360	149

**Tab 400: Special Enrollment Provisions**

<b>Introduction</b> .....	¶400	3
<b>Enrollment of Late Enrollees</b> .....	¶410	25
Late Enrollees With Other Coverage.....	¶411	26
Late Enrollees Without Other Coverage.....	¶412	36
Late Enrollees Due to Denied Coverage.....	¶413	37
Special Rules on Medicaid and SCHIP Coverage.....	¶414	37
<b>Special Enrollment</b> .....	¶420	49
Protected Individuals.....	¶421	49
Effective Date of Enrollment.....	¶422	54
<b>Individuals With COBRA or Other Coverage</b> .....	¶430	71
<b>Notice of Enrollment Rights</b> .....	¶440	93

**Tab 500: Nondiscrimination in Eligibility**

<b>Introduction</b> .....	¶500	3
Similarly Situated Individuals.....	¶501	9
Favorable Treatment of Individuals With Adverse Health Factors.....	¶502	13
Plans Exempt From the Nondiscrimination Rules.....	¶503	14
Conflict With Other Laws.....	¶504	15
Effective Dates.....	¶505	16
<b>Nondiscrimination in Eligibility Rules</b> .....	¶510	29
Benefits.....	¶511	30
Pre-existing Conditions.....	¶512	37
Eligibility and Actively-at-work Provisions.....	¶513	38
Eligibility and Nonconfinement Clauses.....	¶514	43

**Table of Contents**

	<i>Section</i>	<i>Page</i>
<b>Nondiscrimination in Premiums</b> .....	¶520	49
Premium Rates.....	¶521	50
Actively-at-work and Nonconfinement Provisions.....	¶522	53
<b>Impact on Wellness Programs</b> .....	¶530	71
Wellness Rules.....	¶531	74.4
Program Availability and Alternative Standards.....	¶532	81
Disclosure.....	¶533	85

**Tab 600: Guaranteed Availability and Renewability of Coverage**

<b>Introduction</b> .....	¶600	3
<b>Guaranteed Availability of Coverage</b> .....	¶610	25
Exceptions to the Guaranteed Availability Rules.....	¶611	34
Exceptions to the Guaranteed Issue Rules.....	¶612	36
<b>Guaranteed Renewability of Coverage</b> .....	¶620	49
Exceptions to the Guaranteed Renewability Rules.....	¶621	49
Required Disclosure.....	¶622	53
Multiple Employer Welfare Arrangements and Multi-employer Group Plans.....	¶623	54
Bona Fide Associations.....	¶624	55
<b>Rules Affecting Individual Coverage</b> .....	¶630	73
Guaranteed Availability.....	¶631	74
Guaranteed Renewability.....	¶632	80.2
Exceptions to the Individual Coverage Rules.....	¶633	83
Certification of Coverage.....	¶634	87
Coverage Under College Associations.....	¶635	90
Penalties for Noncompliance.....	¶636	91
<b>Enforcement Authority</b> .....	¶640	107
Alternative Mechanisms.....	¶641	108
‘Federal Fallback’ Rules.....	¶642	113
No State Enforcement.....	¶643	113
CMS Enforcement Guidance.....	¶644	114

**Tab 700: Fraud and Abuse**

<b>HIPAA Revisions to Criminal Law</b> .....	¶700	3
<b>Criminal Sanctions</b> .....	¶710	27
<b>Fraud</b> .....	¶720	51
The Healthcare Integrity and Protection Data Bank.....	¶721	52
Activities That May Be Subject to Enforcement Action.....	¶722	59
<b>Embezzlement</b> .....	¶730	75
<b>Misrepresentation</b> .....	¶740	99
Misrepresentation by Individuals.....	¶741	99
Misrepresentation by Health Care and Service Providers.....	¶742	106

**Tab 800: Administrative Simplification**

<b>Introduction</b> .....	¶800	3
<b>Standards for Electronic Data Interchange</b> .....	¶810	25
Technical Standards for Code Sets.....	¶811	30.1
Health Plan Requirements.....	¶812	31
Electronic Transaction Standards.....	¶813	32
National Provider Identifier.....	¶814	43
National Standard Employer Identifier.....	¶815	46.4
National Standard Individual Identifier.....	¶816	46.9
Security and Electronic Signature Standards.....	¶817	51
<b>Privacy Safeguards</b> .....	¶820	101
Privacy Standards.....	¶821	103
Uses and Disclosures.....	¶822	110.1
Business Associates.....	¶823	120.6
Consent and Authorization Requirements.....	¶824	129
Administrative Requirements.....	¶825	138.2
Notice of Information Practices.....	¶826	138.7
Documentation and Recordkeeping Requirements.....	¶827	139
Relationship to Other Laws.....	¶828	146.1
Coordination With the Gramm-Leach-Bliley Act.....	¶829	157
<b>Penalties for Noncompliance</b> .....	¶830	161
Complaint Process.....	¶831	162
Civil Monetary Penalties.....	¶832	164
Security Audits.....	¶833	169
Criminal Enforcement.....	¶834	170
Status of Enforcement.....	¶835	171
State Laws.....	¶836	174
<b>Breach Notification</b> .....	¶840	201
Defining a ‘Breach’.....	¶841	201
When and How to Provide Notice.....	¶842	204
PHR Related Entities.....	¶843	208
A Practical Approach to Compliance.....	¶844	210

**Tab 900: Other HIPAA Provisions**

<b>Introduction</b> .....	¶900	3
<b>ERISA Disclosure and Reporting Requirements</b> .....	¶910	5
Content of SPDs and SMMs.....	¶911	6
Electronic Distribution.....	¶912	9
HIPAA Compliance Reporting by MEWAs.....	¶913	14
Summary of Benefits and Coverage.....	¶914	16
<b>Mental Health ‘Parity’</b> .....	¶920	35
Overview.....	¶921	38
Meeting the MHPA Requirements.....	¶922	42
Exemption for Cost Reasons.....	¶923	45

## Table of Contents

	<i>Section</i>	<i>Page</i>
Implications for Plan Administration .....	¶924	46
Mental Health Parity Notices .....	¶925	47
<b>Maternity Stay Minimum</b> .....	<b>¶930</b>	<b>59</b>
Certain Plan Provisions Prohibited .....	¶931	61
Authorization and Precertification Restrictions .....	¶932	63
Interaction of State and Federal Maternity Stay Laws .....	¶933	64
Notice Requirements Under the Public Health Service Act .....	¶934	65
Implications for Plan Administration .....	¶935	68
<b>Medical Savings Accounts</b> .....	<b>¶940</b>	<b>81</b>
Eligibility .....	¶941	82
Limitations on Coverage .....	¶942	83
Definition of a High-Deductible Plan .....	¶943	84
MSA Contributions .....	¶944	85
Comparability Rule .....	¶945	86
MSA Distributions .....	¶946	87
Employment Tax Treatment .....	¶947	87
Reporting Requirements .....	¶948	88
Health Savings Accounts .....	¶949	88
<b>Long-Term Care Insurance</b> .....	<b>¶950</b>	<b>105</b>
Pre-1997 Insurance Contracts .....	¶951	107
LTC Exclusions for Employer-sponsored Health Plans .....	¶952	112
Deduction Limitations .....	¶953	114
Discrimination Not Prohibited .....	¶954	114
Coordination With Medicare .....	¶955	114
Employment Tax Treatment .....	¶956	115
Reporting Requirements .....	¶957	115
<b>Miscellaneous Provisions</b> .....	<b>¶960</b>	<b>129</b>
COBRA Provisions .....	¶961	129
IRA Withdrawals for Health Insurance Coverage .....	¶962	132
Taxpayer-Related Provisions .....	¶963	133
<b>Women’s Health and Cancer Rights Act</b> .....	<b>¶970</b>	<b>153</b>
WHCRA Notices .....	¶971	156

## Appendixes

- Appendix A:** Federal Statutes
- Appendix B:** Federal Regulations
- Appendix C:** Administrative Rulings

## Glossary of Terms

## Index