

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

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HIPAA Administrative Simplification Information Bulletin

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New HIPAA Administrative Simplification Fundamentals Fact Sheet

The Centers for Medicare & Medicaid Services' (CMS) National Standards Group (NSG), on behalf of the Department of Health and Human Services (HHS), would like to highlight its new [HIPAA Administrative Simplification Fundamentals Fact Sheet \(PDF\)](#), located on the [HIPAA and Administrative Simplification webpage](#) of the [Administrative Simplification website](#). The new resource provides an overview of Administrative Simplification, its purpose, goals, and how the health care industry benefits from it.

Administrative Simplification requirements, which were authorized by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and subsequent legislation, govern how providers, health plans, and clearinghouses—otherwise known as [HIPAA covered entities](#)—handle electronic administrative transactions and set standards for transmitting health information.

When electronic administrative tasks between players in the health care industry are conducted the same way across all covered entities, the industry can automate many of its billing and payment processes, which reduces time spent on administrative tasks and saves health care dollars.

Stay Up to Date

Visit the [Administrative Simplification website](#) for more information on transactions, standards, operating rules, and code sets. For the latest news about Administrative Simplification, sign up for [Email Updates](#).