

**Timeline for Administrative Simplification Provisions**

	2011	2012	2013	2014	2015	2016
Eligibility and Claim Status	July 1: Adopt Operating Rules		Jan 1: Effective Date			
EFT and Claim Payment / Remittance Advice		July 1: Adopt Operating Rules		Jan 1: Effective Date		
Health claim / encounter; plan enrollment / disenrollment; plan premium payment; referral cert / authorization				July 1: Adopt Operating Rules		Jan 1: Effective Date
Health Plan Certification for EFT, Eligibility, Claim Status and Claim Payment / Remittance Advice			Dec 31: File Statement			
Health Plan Certification for health claim / encounter, plan enrollment / disenrollment; plan premium payment; referral cert / authorization AND health claim attachments					Dec 31: File Statement	
Review Committee (can be NCVHS)				Jan 1: Establish April 1: hearings (biennially) July 1: Report (biennially)		
Unique Health Plan Identifier	TBD: NPRM/IFR / Final Rule	Oct 1: Effective Date				
EFT Standard		Jan 1: Final Rule		Jan 1: Effective Date		
Claim Attachment Standard AND Operating Rules				Jan 1: Final Rule		Jan 1: Effective Date
Input from NCVHS, HIT Policy and Standards Committees, SDOs		Jan 1: Solicit Input on additional transaction standards, operating rules, other items				
ICD-9 – ICD-10 Crosswalk	Jan 1: ICD-9 Coord. & Maint. Committee convenes hearing					