

STATE OF NEW JERSEY  
DEPARTMENT OF BANKING AND NEW JERSEY

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| In the Matter of New Jersey Health Insurance Companies;       | ) |       |
| Hospital Service Corporations; Medical Service Corporations;  | ) |       |
| Health Service Corporations; Individual and Group Health      | ) |       |
| Insurers; Group Health Insurers; Health Maintenance           | ) | ORDER |
| Organizations; Dental Service Corporations; Dental Plan       | ) |       |
| Organizations; Prepaid Prescription Service Organizations;    | ) |       |
| Organized Delivery Systems and all other Health care          | ) |       |
| payers subject to the provisions of <u>N.J.S.A.</u> 17B:30-23 | ) |       |

This matter having been opened by the Commissioner of Banking and Insurance (“Commissioner”) pursuant to the authority granted by N.J.S.A. 17:1-15, N.J.S.A. 17B:30-23 and N.J.A.C. 11:22-3 and all powers expressed or implied therein for the purpose of establishing timetables for the implementation of the electronic receipt and transmission of health care claim information by those health care benefit payers subject to these provisions; and

IT APPEARING that the Department of Banking and Insurance (“Department”) requires the supplying of certain information by covered payers regarding their current ability to transmit and receive health care claims electronically using the transaction and code sets adopted by the Department at N.J.A.C. 11:22-3.7 (a); and

IT FURTHER APPEARING that it is necessary for the Commissioner to obtain this information in order to refine the timetables for the use of standard electronic transaction and code sets which would reduce the amount of, or consolidate the paper forms sent by health insurance companies, hospital, medical, health and dental service corporations, group health insurers, health maintenance organizations, dental plan organizations, prepaid prescription

service organizations, Organized Delivery Systems and all other health care payers as required by N.J.S.A. 17B:30-24; and

IT FURTHER APPEARING that the completion of the attached HINT/HIPAA status report survey questionnaire by all covered payers is necessary to adequately promulgate achievable timetables for the use of the standard electronic transaction and code sets.

THEREFORE IT IS on this 13<sup>th</sup> day of August, 2004:

ORDERED that:

A. All payers subject to the provisions of N.J.S.A. 17B:30-23 and N.J.A.C. 11:22-3 complete the attached HINT/HIPAA Status Report Survey with information current as of August 1, 2004; and

B. Payers shall submit the attached survey to the Department on or before August 27, 2004.

C. The completed survey shall be sent to:

New Jersey Department of Banking and Insurance  
Room 931,  
20 West State Street  
P.O. Box 329  
Trenton, New Jersey 08625

Failure to comply with the terms of this Order may result in the imposition of penalties pursuant to N.J.S.A. 17:33-2.

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/s/ Holly C. Bakke

Holly C. Bakke  
Commissioner

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