

CMS Administrative Simplification: Adoption of Standards for Health Care Claims Attachments Transactions and Electronic Signatures Final Rule Fact Sheet

The Centers for Medicare and Medicaid Services (CMS) published the Administrative Simplification: Adoption of Standards for Health Care Claims Attachments Transactions and Electronic Signatures [Final Rule](#) on March 24, 2026. The effective date is May 26, 2026 with a compliance date of May 26, 2028. CMS published a [fact sheet](#) reviewing major components of the final rule.

The final rule establishes Health Insurance Portability and Accountability Act (HIPAA)-adopted standards for healthcare claims attachments, as well as requirements for electronic signatures. CMS notes these updates aim to reduce manual processes like faxing and mailing, saving time and resources for healthcare providers and payers while improving administrative efficiency and supporting improvements in patient care.

Background

Both HIPAA and the Affordable Care Act required the implementation of standards for healthcare attachments transactions to support the electronic transmission of information, rather than the use of manual processes. The Administrative Simplification: Adoption of Standards for Health Care Attachments Transactions and Electronic Signatures, and Modification to Referral Certification and Authorization Transaction Standard [proposed rule](#) was published in December 2022 and sought feedback on those policies.

Differences between the 2022 proposed rule and the final rule include the adoption of the March 2022 Health Level Seven (HL7®) Attachments Implementation Guide (IG). Additionally, while the proposed rule included standards for both healthcare claims and prior authorization attachments, the final rule only focuses on healthcare claims attachments and does not include standards for prior authorization attachments.

Key Provisions of the Final Rule

Adopted key definitions, including:

- **“Attachment information”** defined as documentation that enables a health plan to make a decision about healthcare that is not included in a healthcare claims or equivalent encounter information transaction;
- **“Electronic signature”** defined as any number of types or marks or data that indicate a signatory’s intent to sign; and
 - Examples include an online check box indicating acceptance, a name entered by the signer in an online form, a signing device at a commercial checkout line on which a customer

writes his or her signature, and an image of a signature that was written by hand and then scanned into an electronic image format.

- **“Health care claims attachments transaction”** defined as the transmission of either of the following:
 - Attachment information from a healthcare provider to a health plan in support of a healthcare claim or equivalent encounter information transaction; or
 - A request from a health plan to a healthcare provider for attachment information.

Adopted X12N standards and HL7 IGs for healthcare claims attachments, including:

- X12N 275 Additional Information to Support a Health Care Claim or Encounter standard Version 6020;
- X12N 277 Health Care Claim Request for Additional Information standard, Version 6020;
- HL7® Clinical Document Architecture (CDA) Release 2: Consolidated CDA (C-CDA) Templates for Clinical Notes (US Realm) Draft Standard for Trial Use Release 2.1, Volume One – Introductory Material, June 2019 with Errata (HL7 C-CDA IG Volume One);
- HL7® CDA Release 2: C-CDA Templates for Clinical Notes (US Realm) Draft Standard for Trial Use Release 2.1, Volume Two – Templates and Supporting Material, June 2019 with Errata (HL7 C-CDA IG Volume Two);
- HL7® CDA Release 2 Attachment IG: Exchange of C-CDA Based Documents, Release 2, March 2022 (HL7 Attachments IG); and
- HL7® IG for CDA Release 2: Digital Signatures and Delegation of Rights, Release 1 (Digital Signatures Guide).