

HealthLink completed the conversion to X12 Version HIPAA 5010 by January 1, 2012, as mandated. In order to make the process for our providers as seamless and transparent as possible, we communicated updates to our 5010 activities, timelines and current updates.

## **Transactions Impacted by Errata Changes**

In October 2010, U.S Department of Health and Human Services (HHS) adopted changes to the X12 Version HIPAA 5010 for certain transactions. Additionally, HHS adopted the term Errata (meaning "changes") that impacted the implementation of HIPAA 5010. Effective **January 1**, **2012**, HealthLink complies with using <u>only</u> the latest approved X12 Version 5010 for HIPAA transactions. Please note the replacement of the original base versions by the Errata in the chart below:

| Transactions Affected by the Errata                             | Base Version<br>Compliance<br>January 1, 2012 | Errata Version<br>Compliance<br>January 1, 2012 |
|---|---|---|
| 820 Premium Payment   | 005010X218                                    | Not applicable                                  |
| 834 Benefit Enrollment and Maintenance                          | 005010X220                                    | 005010X220A1                                    |
| 835 Health Care Claim Payment/Advice                            | 005010X221                                    | 005010X221A1                                    |
| 837 Health Care Claim: Professional                             | 005010X222                                    | 005010X222A1                                    |
| 837 Health Care Claim: Institutional                            | 005010X223                                    | 005010X223A2                                    |
| 837 Health Care Claim: Dental                                   | 005010X224                                    | 005010X224A2                                    |
| 270/271 Health Care Eligibility Benefit Inquiry and Response    | 005010X279                                    | 005010X279A1                                    |
| 276/277 Status Inquiry and Response                             | 005010X212                                    | Not applicable                                  |
| 278 Health Care Claim Services Requests for Review and Response | 005010X217                                    | Not applicable                                  |
| 999 Implementation Acknowledgment For Health Care Insurance     | 005010X231                                    | 005010X231A1                                    |
| 277CA Claim Acknowledgement                                     | 005010X214                                    | Not applicable                                  |

## **Testing and Implementation Timelines Impacted by Errata**

HealthLink is committed to having our systems, supporting business processes, policies and procedures successfully meet the implementation standards and deadlines mandated by HHS without interruption to day-to-day business practices:

- By May 2011, HealthLink began external testing for conversion to X12 Version 5010. *NOTE: new date allows trading partners more time to prepare for the Errata.*
- Successful testing criteria was passed prior to using 5010 transactions in production. As a result, HealthLink *test-to-production began in May 2011*.
- Until **December 31, 2011**, HealthLink accepted and transmitted both standards 4010A1 and 5010 based upon individual Trading Partner readiness as permitted by the final rule.