



**HIPAA 5010 Transactions Standards & Code Sets (HIPAA 5010)  
Readiness Statement  
Revised December 1, 2011**

On November 17, 2011, CMS announced a 90-day period in which no enforcement of 5010 compliance would occur until March 31, 2012. **This announcement does not change plans for HealthLink to still support the January 1, 2012 effective date.**

- Migration to 5010 requires successful testing with your vendors (practice management systems, clinical systems and billing systems)
- **Any Trading Partner (provider employer group, vendor or clearinghouse) concerned in their ability to migrate to 5010 by the January 1, 2012 mandate should contact HealthLink immediately** to discuss contingency planning options to ensure continuity of processing claims.

On January 16, 2009, the U.S. Department of Health and Human Services (HHS) released the final rule under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regarding updated standards for electronic health care transactions: X12 Version 5010 HIPAA Transactions Standards & Code Sets.

The HIPAA 5010 final rule adopts X12 Version 5010 for HIPAA transactions.

- Modifications were introduced as a result of the current 4010A1 electronic transaction standards being outdated and including rules that no longer align with business practices in the health care industry.
- **Compliance date for all covered entities is January 1, 2012.** (There is only a small exception for small health plan implementation of the Medicaid Pharmacy Subrogation Version 3.0 which will have a January 1, 2013 compliance deadline.)

Scope of impact to the X12 standard electronic transactions:

- Claim/Encounter – Institutional, Professional, and Dental (837I,P,D)
- Enrollment (834)
- Authorization/Referral Request and Response (278)
- Payment/Remittance Advice (835)
- Premium Payment (820)
- Eligibility Request and Response (270/271)
- Claims Status Inquiry and Response (276/277)

The HIPAA 5010 final rule applies to all HIPAA covered entities, including health plans, health care clearinghouses, and certain health care providers, and are designed to bring greater consistency in electronic health care transactions. Version 5010 is designed to bring a more consistent use of health care transactions to the industry, ultimately making it easier for health care providers to submit the same information to all insurance carriers.

### **HealthLink Readiness**

HealthLink has been following the evolution of the Administrative Simplification provisions of HIPAA since its inception in 1996; committed to delivering excellent service and to adopting



administrative simplifications for HIPAA transactions and code sets; including compliance with and support of the HIPAA 5010.

- Our implementation strategy to integrate the X12 version 5010 is underway as we support the improved data content and transactions consistency offered by this standard.
- We have proactively established cross-functional teams throughout the organization, dedicated to researching issues, assessing systems, reviewing business processes, and educating the Empire organization and its affiliates about implementation procedures.

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 **December 31, 2010**, HealthLink plans to begin external testing of the X12 Version 5010 transactions with current 4010A1 trading partners.
- Until **December 31, 2011**, HealthLink accepts and transmits both standards – 4010A1 and 5010 based upon individual Trading Partner readiness – as permitted by the final rule.
- Effective **January 1, 2012**, HealthLink plans to comply with using only X12 Version 5010 for HIPAA transactions.

Organizations with which HealthLink is actively participating include WEDI (Workgroup for Electronic Data Interchange), CAQH-CORE (Council for Affordable Quality Healthcare – Committee on Operating Rules for information Exchange), AHIP (American’s Health Insurance Plans), AMA (American Medical Association), AHA (American Hospital Association), and X12 and NCPDP (National Council of Prescription Drug Programs).

### **What You Can Do**

As we continue to advance our implementation strategies for HIPAA 5010, HealthLink is committed to keeping impacted parties advised of our progress. Please visit our web site at [www.HealthLink.com](http://www.HealthLink.com)

Recommendations for HIPAA 5010 compliance:

- Educate yourself and your office staff on the HIPAA 5010 compliance requirements by visiting the [CMS website](#).
- Contact your Clearinghouse and begin conversations about requirements, changes, and impacts of HIPAA 5010.
- Ask your vendors such as practice management systems, clinical systems, and billing systems for their plan on converting to a HIPAA 5010 compliant version of your software, and any associated costs, if applicable.
- Don’t wait until the last minute to identify your organization needs for HIPAA 5010!

### **For Answers to Your HIPAA 5010 Questions:**

- **For Missouri, Madison, Monroe and St. Clair Counties in Illinois** please contact your Healthlink Network Consultant at 866-561-7780.
- **For all other Illinois Counties, Arkansas, Indiana, Kentucky or Tennessee** please contact your HealthLink Network Consultant at 877-284-0101 ext 7074.
- **Or visit our website at** [www.HealthLink.com](http://www.HealthLink.com)