

## HIPAA 5010 - FAQ

Acronyms/Definitions	
DHHS	Department of Health and Human Services
CMS	Centers for Medicare & Medicaid Services
EDI	Electronic Data Interchange
HIPAA	Health Insurance Portability and Accountability Act of 1996 One part of this legislation requires health plans and providers to use a common format when electronically communication health information.
Covered Entity	- health care provider that conducts certain transactions in electronic form - a health care clearinghouse - a health plan <a href="https://www.cms.gov/HIPAAGenInfo/Downloads/CoveredEntitycharts.pdf">https://www.cms.gov/HIPAAGenInfo/Downloads/CoveredEntitycharts.pdf</a>
ACS X12	Accredited Standards Committee (aka X12 committee). They develop EDI standards. <a href="http://www.x12.org/x12org/about/faqs.cfm">http://www.x12.org/x12org/about/faqs.cfm</a>
X12 Transactions aka Documents	There are over 300 individual transactions types for 16 industries. HealthLink utilizes nine of the 28 Insurance/Health Series transactions. <a href="http://en.wikipedia.org/wiki/X12_Document_List">http://en.wikipedia.org/wiki/X12_Document_List</a>
837I Transaction	Institutional Health Care Claim ( <i>inbound and outbound</i> )
837P Transaction	Professional Health Care Claim ( <i>inbound and outbound</i> )
834 Transaction	Benefit Enrollment and Maintenance ( <i>inbound</i> )
835 Transaction	Health Care Claim Payment/Advice ( <i>outbound</i> )
270/271 Transaction	Eligibility Inquiry ( <i>outbound</i> ) and Response ( <i>inbound</i> )
275/276 Transaction	Claim Status Inquiry ( <i>outbound</i> ) and Response ( <i>inbound</i> )
997 Transaction	Claim/File Level Acknowledgment ( <i>inbound and outbound</i> )
999 Transaction	Transaction Level Acknowledgment ( <i>inbound and outbound</i> )
Version 4010	The Secretary of the Department of Health and Human Services (HHS) was put in charge of determining a standard that could accommodate the HIPAA requirement. Version 4010 was the format chosen. This version was considered to contain the latest in innovations and updates to the available standards at that point in time. HIPAA legislation required mandatory compliance by October 16, 2003
Version/Release	Different releases are NOT compatible. Transaction sets, segments, and data elements must all be used at the same version/release level. Releases are designated by a six-digit code that represents a version and release level. For example, Version 4, Release 01 is designated 4010. The last digit is reserved for any sub-releases. (Additional two digits are for Addenda)
Errata	"Errata" is the term used by ASC X12 for any corrections to the original version of the transaction. Several errors were identified in 5010 HIPAA standard transactions that were adopted by the Department of Health and Human Services (HHS) in January 2009
Addenda	Addenda are the approved Errata changes, identified with a letter A in the errata document identifier. All of the current mandated 5010 versions HealthLink utilizes have at least one Addenda (5010A1). The Institutional Claim has a second Addenda (5010A2)
Version 5010	HIPAA standard transaction effective 1/1/2012. All current 5010 versions HealthLink utilizes have at least one Addenda ie: 5010A1. The institutional claim (837I) has a second Addenda 5010A2.
HealthLink 5010 contact information	<b>HealthLink 5010 Implementation Team</b> Help Line (314)-925-6004 <a href="mailto:HL_5010@HealthLink.com">HL_5010@HealthLink.com</a>  Mike Fuller from Axiom Systems Inc. is leading the TP Migration effort for HL.

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Category	Question	Answer
<b>A. 5010 General Information</b>		
A1	What is 5010 and why is it required?	On January 16, 2009, the Secretary of the Department of Health and Human Services (DHHS) adopted the Accredited Standards Committee X12 Version 5010 as the next Health Insurance Portability and Accountability Act (HIPAA) standard for HIPAA covered transactions. HealthLink, Inc. will support the 4010 transaction standards through December 31, 2011 and the 5010 transactions which are mandated by DHHS as of January 1, 2012.
A2	What are the benefits to migrating 5010?	<ul style="list-style-type: none"> <li>• The Federal Government requires it for all covered entities.</li> <li>• Industry experience with the 4010A1 implementation uncovered some unanticipated issues and requirements.</li> <li>• Precursor to ICD10 - HIPAA 5010 will be able to accommodate the forthcoming and mandatory ICD-10 code sets, which are scheduled to be implemented on Oct. 1, 2013. ICD-10 cannot be implemented without first upgrading to version 5010.</li> </ul>
A3	What are the differences between 4010 and 5010?	<ul style="list-style-type: none"> <li>• The ability to support and correct situations identified by the industry;</li> <li>• Clarification of usage to remove ambiguity;</li> <li>• Consistency across transactions;</li> <li>• Field length extensions to handle longer names and addresses;</li> <li>• Support of the NPI regulation; and</li> <li>• Removal of data content that is no longer used.</li> </ul>
A4	What are some specific examples of the changes?	<ul style="list-style-type: none"> <li>• Drug Identification: Situational rules changed and new code values added to support the submission of Universal Product Numbers.</li> <li>• Provider/Patient/Subscriber First Names: Changed from required to situational. First name is only required when the person has a first name.</li> <li>• Addition of a Property and Casualty Patient Identifier segment for Workers Compensation.</li> <li>• Diagnosis Code and Diagnosis Type Code: New codes added to identify and allow for submission of the new ICD-10 diagnosis codes.</li> </ul>
A5	Can ICD10 be used with the 4010 version?	No. Unlike the current Version 4010/4010A1, Version 5010 accommodates the ICD-10 codes, and must be in place first before the changeover to ICD-10. The Version 5010 change occurs well before the ICD-10 implementation date to allow adequate Version 5010 testing and implementation time.

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<b>B. 5010 Migration Plan</b>		
B1	Describe your plan for the migration to 5010 transaction standards.	HealthLink has readied its systems to send and receive 5010 transactions and has achieved Level I Compliance. We are ready to conduct external partner testing as of January 2011. We will accept both 4010 and 5010 transactions during 2011. Once a trading partner has successfully tested with HealthLink, we will move them into 5010 production, subject to the agreement of both parties.
B2	Will you have 5010 Trading Partner Companion Guides?	HealthLink's 5010 Companion Guides are available on our website <a href="http://www.healthlink.com">www.healthlink.com</a> (search for 837).
B3	Do you have a timeline of key dates for the 5010 Implementation?	HealthLink is following the timelines recommended for the healthcare industry for the 5010 transition. HealthLink is ready to test with its trading partners.
B4	Once a trading partner is approved for 5010, could we still submit and receive transactions in a 4010 format?	Yes. Once a trading partner has successfully completed 5010 testing with HealthLink, they can immediately be placed into production for 5010 or remain on 4010 for the remainder of 2011.
B5	If I am a provider who submits claims on paper, does 5010 apply to my practice?	No. The 5010 requirement for electronic transactions apply to the electronic transmission of claims and not to claims processed on paper.
B6	If I am a trading partner who receives part or all of my claims on paper does 5010 impact my setup?	No. Your current setup will not change. Claims that are sent via paper today will continue after 5010.
B7	What are the risks of not converting?	<ul style="list-style-type: none"> <li>Not compliant with government mandate;</li> <li>Claims could drop to paper, depending on potential contingency plan; and</li> <li>Will not be ready for ICD10.</li> </ul>
B8	Do you have a contingency plan for those trading partners who aren't 5010 ready by 1/1/12?	No. There are meetings scheduled in September to discuss internally.
<b>C. EDI Exchange Process</b>		
C1	What types of connections do you currently support?	<ul style="list-style-type: none"> <li>Clearinghouse connections</li> <li>Direct submittal in limited situations</li> <li>Direct outbound connections</li> </ul>
<b>D. Trading Partner Setup</b>		
D1	Will a new submitter ID be required?	No.
D2	Will a new Trading Partner Agreement be required?	No.
D3	Will a trading partner's current EDI agreement be affected by 5010?	No.

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<b>E. 5010 Migration Plan</b>		
E1	Will you be expecting to receive and send test files? For which transaction set/s? When will you start accepting and sending test files?	We would expect a trading partner to send us test files for any transactions we process directly. We will also be sending test files for all transaction we process directly. The start date for testing will begin in January 2011.
E2	What resources will you require from a testing partner throughout the migration?	A primary contact point familiar with the 5010 process, your data formats and testing process. Conference calls are conducted with partners as required to resolve testing issues.
E3	Will the 5010 upgrade include a functional transaction 999 to indicate that the claim was accepted?	Yes.
E4	Will there be testing for these acknowledgement transactions?	Yes.
E5	Will you require Errata testing?	Yes.
E6	If so, are you testing errata changes separately?	No. Testing is done with Errata and Addenda incorporated.
E7	Will the transmission process for 5010 test files be the same as it is currently for 4010 test files?	Yes.
E8	Do you have plans to move anyone to production for 5010 (once testing is completed) prior to the 1/1/2012 compliance date?	Yes. Once testing is completed with a given trading partner, HealthLink is prepared to place this trading partner into 5010 production given the consent of both parties.
E9	What are your criteria for implementing/testing an 837 submission? Example, certain number of test files, one successful test file, certain date.	Two to Three test cycles with the volume increasing with each iteration.
E10	What action should I take if I submit claims through a clearinghouse?	Contact your clearinghouse account representative to make arrangements for 5010 testing with them. The clearinghouse will make the necessary conversions from proprietary data formats to the 5010 format.
E11	If I am a direct submitter or receiver of HIPAA X12 transactions with HealthLink, how do I contact HealthLink to initiate 5010 testing?	To contact HealthLink with 5010 testing questions, please use the following contact information:  <b><u>HealthLink 5010 Implementation Team</u></b> Help Line (314)-925-6004 <a href="mailto:HL_5010@HealthLink.com">HL_5010@HealthLink.com</a>
E12	What if I am not ready to test until 4 <sup>th</sup> quarter of 2011?	By waiting until 4 <sup>th</sup> quarter to test you run the risk of testing not being completed and/or being out of compliance effective 1/1/12. Time and resources may become limited as we approach the 1/1/12 compliance date.