

MSMS Overview: 5010

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Overview

- ▶ HIPAA established rules and standards for electronic transactions in the health care industry
- ▶ Current version (4010A1) is being replaced by an updated version 5010
- ▶ Supports conversion to ICD-10
- ▶ Expected improvements include:
 - Enhanced business functionality
 - Clarifies and reduces ambiguities
 - Better defines situational and required data elements
 - Elimination of redundant and unnecessary data elements

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Who is Affected?

- ▶ All health care providers, billing agents, and clearinghouses submitting (or planning to submit) electronic transactions such as:
 - Patient eligibility checks
 - Filing a claim
 - Receiving remittance advice
- ▶ Engage staff in transition
 - Practice leadership
 - Office and Practice Managers
 - IT and systems staff
- ▶ Failure to convert to 5010 by deadline may result in claims being rejected

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Deadlines

- ▶ January 1, 2012 compliance date
 - Compliant if using 5010 to send and receive claims and all other HIPAA adopted electronic transactions
- ▶ March 31, 2012 enforcement date
 - CMS will use its enforcement discretion with respect to any HIPAA covered entity that a complaint is filed against for noncompliance

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Key Changes

- ▶ Billing provider address must be the street address or physical location of billing provider – PO Box or lockbox address no longer allowed
- ▶ Pay-to-provider address required when different than the billing provider
- ▶ Requires 9-digit zip code at billing and service provider loops
- ▶ Claim balance required at the line level
- ▶ Anesthesia services – only actual minutes may be reported

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Ready, Set, Go

- ▶ Get familiar with basic requirements–understand what you need to do
- ▶ Talk to your practice management or software vendor –
- ▶ Contact your clearinghouse or billing service vendor and know where they stand
- ▶ Contact WPS and other payers to inquire about their testing protocols
- ▶ Identify staff training needs
- ▶ Start testing NOW
- ▶ Do not assume that someone else is taking care of this for you

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Resources

- ▶ MSMS Lead Staff – Stacie J. Saylor (517-336-5722 or ssaylor@msms.org)
- ▶ MSMS Reimbursement Advocate Alerts – <http://www.msms.org> (select Your Practice, Reimbursement Advocacy)
- ▶ CMS Version 5010 and D.0 webpage(s) – <http://www.cms.gov/Versions5010andD0/>
- ▶ Medicare FFS provider list serves – http://www.cms.gov/prospmedicarefeesvcpmtgen/downloads/Provider_Listservs.pdfand
- ▶ WPS Medicare 5010 Readiness Web site – <http://www.wpsic.com/edi/5010-Readiness.shtml>
- ▶ Michigan Medicaid – <http://www.michigan.gov/5010ICD10>
- ▶ AMA Toolkit and other resources – <http://www.ama-assn.org/ama/pub/physician-resources/solutions-managing-your-practice/coding-billing-insurance/hipaahealth-insurance-portability-accountability-act/transaction-code-set-standards/version-5010-electronic.page>