



## Frequently Asked Questions

### FAQs about HealthSmart HIPAA 5010 Implementation

**Q** Why do I have to change my file format?

**A** The Centers for Medicare and Medicaid (CMS) require conversion from HIPAA Accredited Standards Committee (ASC) X12 version 4010A1 to ASC X12 version 5010 for all HIPAA covered entities. The Secretary of the Department of Health and Human Services (HHS) has adopted ASC X12 version 5010 as the new HIPAA standard for HIPAA covered transactions to be effective no later than January 1, 2012.

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 on October 1, 2013. Version 5010 has the ability to tell your practice management or other system that you are using an ICD-10 versus an ICD-9 code.

**Q** What Transactions are being affected by 5010?

**A 5010 Transaction Types Being Affected**

835	Health Care Claim Payment/Advice	HS to support by 1/1/2012
837	Health Care Claim: Professional, Institutional, and Dental, including coordination of benefits (COB) and subrogation claims	HS to support by 1/1/2012
270/271	Health Care Eligibility Benefit Inquiry and Response	HS to support as time permits and by Trading Partner request
276/277	Health Care Claim Status Request and Response	HS to support as time permits and by Trading Partner request
278	Health Care Services - Request for Review and Response; Health Care Services Notification and Acknowledgment	HS to support as time permits and by Trading Partner request

**Q** Who is a HIPAA covered entity?

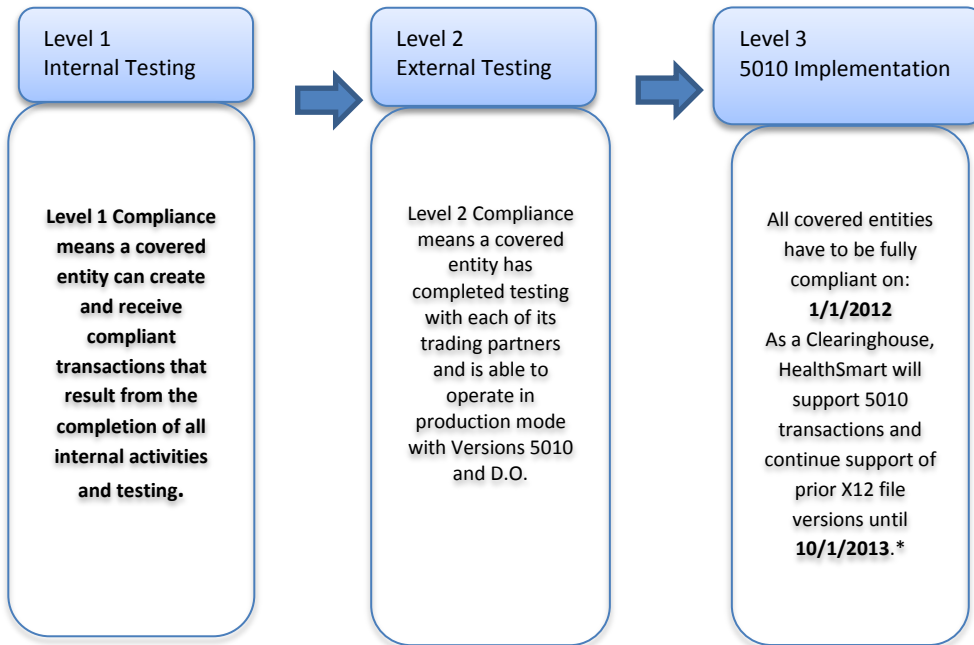
**A** All covered entities, listed below, are required to upgrade to HIPAA 5010 standards; covered entities may use a clearinghouse assist them with complying with the rules.

- Physicians
- Hospitals
- Payers
- Clearinghouses
- Pharmacies
- Dentists

Additionally, even though software vendors are not included in the list of covered entities, they will need to upgrade their products to support HIPAA 5010 and NCDPD D.0 as a business imperative in order to support their customers.

Q What is HealthSmart's 5010 Timeline?

A



\*HealthSmart strongly urges all Trading Partners to not delay in moving to a 5010 compliant solution but will be able to support those Trading Partners who are not able to do so by 1/1/2012 until 10/1/2013 by working with each Trading Partner and Stepping Up/Stepping Down these transactions as required.

Q Can we expect any other changes with 5010?

A HealthSmart is focused on working with ALL our Trading Partners so that they will have no impact on their claim processing when 5010 goes into effect on 1/1/2012. To do this we will test with any of our Trading Partners and ensure that their 837 and 835 transactions process through HealthSmart, other transactions (i.e., 270/271, 276/277, 278, 834, TA1, 999, and 277CA) will be supported on an on request basis as time permits and will not be guaranteed a 1/1/2012 implementation.

Also, BBS support will only continue until 10/1/2013, as of this date Trading Partners will have to have secured an alternative method of sending HealthSmart transactions.

Q Does a Trading partner have to wait until 1/1/2012 to adopt the 5010 format?

A No. As Trading Partners successfully test their 5010 transactions with HealthSmart they will agree upon a mutual acceptable "Go Live" date and from that date forward they will send/receive in the 5010 format.

Q What action do I need to take with HealthSmart when I am ready to move to the 5010 formats?

A HealthSmart needs to coordinate with ALL Trading Partners when they are ready to move to the 5010 format. Failure to do so may result in a Trading Partner's files being rejected. Please contact HealthSmart at [support.his@healthsmart.com](mailto:support.his@healthsmart.com) or at 888-744-6638 **PRIOR** to sending 5010 formats to ensure there are no rejections or delays in claims handling.



- Q** What side effects are expected when a client chooses to continue to use an earlier file format and requests HealthSmart to step up / step down their transactions until 10/1/2013?
- A** Although HealthSmart will work with Trading Partners to minimize any loss of data from the step up / step down process, some data degradation will occur. 4010 files require some fields that are no longer supported in the 5010 format and vice versa. For transactions that have fields that cannot be trapped by defaults or edits, these transactions will be either sent back to the sender with an error for correction and resubmission or will be dropped to paper for handling.
- Q** Where can I see what Trading Partners have tested and went Live with 5010 at HealthSmart?
- A** HealthSmart maintains a list of Trading Partners who are now 5010 compliant on our 5010 Updates webpage at: [http://www.healthsmart.com/pdfs/5010/Key\\_trading\\_partners.html](http://www.healthsmart.com/pdfs/5010/Key_trading_partners.html)
- Q** Where can I research errors I am receiving on 5010 claims?
- A** A good source to begin researching new errors being encountered on 5010 claims that were not rejected on 4010A1 claims is the CMS Professional Side by Side 4010A1 to 5010 or CMS Institutional Side by Side 4010A1 to 5010. Links to these documents is provided below.
- Professional  
<http://www.cms.gov/ElectronicBillingEDITrans/Downloads/ProfessionalClaim4010A1to5010.pdf>
- Institutional  
<http://www.cms.gov/ElectronicBillingEDITrans/Downloads/InstitutionalClaim4010A1to5010.pdf>
- Q** Where can I get additional Information on 5010?
- A** For Additional Information on 5010 and access to seminars regarding this mandated format change, please refer to the Centers for Medicare & Medicaid Services website at:  
[http://www.cms.gov/ElectronicBillingEDITrans/18\\_5010D0.asp](http://www.cms.gov/ElectronicBillingEDITrans/18_5010D0.asp)
- Q** How does upgrading to 5010 relate to ICD-10?
- A** ICD-10 is the upgraded version of ICD-9. The ICD-10 codes have a different format and length than the ICD-9 codes. The new format of the ICD-10 codes cannot be reported in the 4010/4010A1 version of the HIPAA transactions. So, the upgrade to 5010 needs to be completed before the ICD-10 codes can be reported in the HIPAA transactions. Additionally, ICD-10 codes cannot be used in HIPAA transactions prior to the October 1, 2013 compliance date. To learn more about using ICD-10 codes in the HIPAA transactions, please visit CMS' ICD-10 resource page at [www.cms.gov/ICD10](http://www.cms.gov/ICD10).