

HIPAA Version 5010: Thirteenth National Provider Call – Provider Outreach and Education – Transition Year Activities



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Purpose of Today's Call

1. To provide a general overview of 5010 outreach and education activities planned for the 2011 transition year
2. To set expectations for communications from Medicare FFS
3. To set expectations for 5010 testing in the transition year
4. To communicate important dates for transition year activities and how best to get involved

Today's Agenda

- General overview of Medicare FFS' 5010 communication activities
- Medicare FFS transition specific testing protocols
 - Roles and Responsibilities
 - Requirements
 - Timelines
- Medicare FFS communication, outreach and education strategy for the transition year
 - MAC specific activities
 - Nationally coordinated activities
- Important dates to remember (O&E schedule)
- What you need to do
- Open Discussion

General Overview

Who needs to know about Medicare FFS' implementation of 5010/D.0?

- All Medicare FFS trading partners who are considered to be HIPAA covered entities, their business associates, and anyone expecting to implement ICD-10
 - Medicare FFS uses the term Trading Partner to designate one of two or more participants in an ongoing business relationship (e.g., provider, billing service, software vendor, clearinghouse, etc.)
- All Medicare FFS providers/suppliers should have the following staff engaged in transitioning to 5010
 - Practice leadership
 - Office and Practice Managers
 - IT and systems staff
- Software Vendors, Clearinghouses, Billing Services or any other entity that services Medicare FFS providers

General Overview: Medicare FFS Communications To Date

- Establishment of central Version 5010 and D.0 webpage on the CMS website (<http://www.cms.gov/Versions5010andD0/>)
- Development of resource materials – fact sheets, readiness checklists, resource card, FAQs, 4010 to 5010 side-by-sides, Medicare Learning Network (MLN) articles, and a series of presentations
(http://www.cms.gov/Versions5010andD0/40_Educational_Resources.asp#TopOfPage)
- Delivery of a series of National Provider Calls – presentations, transcripts and audio files available
(<http://www.cms.gov/Versions5010andD0/V50/list.asp#TopOfPage>)
- List serve message(s)
(http://www.cms.gov/Versions5010andD0/30_CMS_Communications.asp#TopOfPage)

Medicare FFS New 5010 Logo



General Overview: Purpose of Transition Year Activities

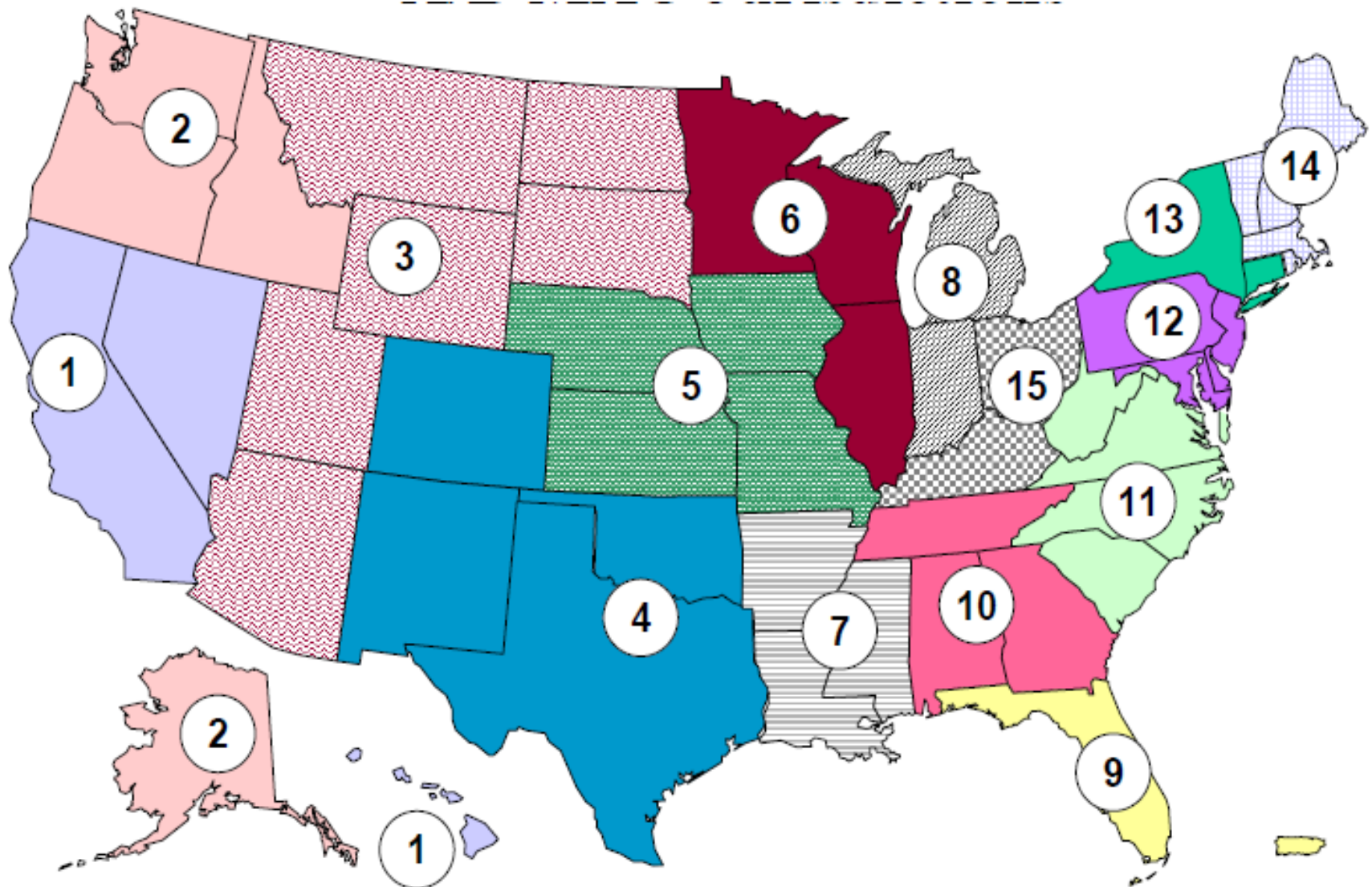
1. To ensure that Medicare FFS providers and their business associates have the information needed to effectively transition to 5010 by December 31, 2011
2. To engage Medicare FFS providers that may be late to initiate 5010 implementation activities
3. To ensure that all Medicare FFS providers and their respective business associates understand testing requirements and protocols established by their MAC so their systems are ready to implement 5010 in production latest by January 1, 2012
4. To encourage timely and accurate communications between Medicare FFS trading partners and their Medicare Contractors (i.e., Medicare Administrative Contractors (MACs), Fiscal Intermediaries (FIs), Carriers, the Common Electronic Data Interchange (CEDI) contractor for Durable Medical Equipment (DME) MACs, and DME MACs

MAC EDI Helpdesks

Who should you contact to find out more about how Medicare FFS will implement 5010?

- Each Medicare FFS trading partner should be registered with an A/B MAC, FI, Carrier, or CEDI for DME. Your first source of Medicare information should come from your Medicare contractor
- The following links provides EDI help desk phone numbers for Part A and B/DME by State
 - Part A -
<http://www.cms.gov/ElectronicBillingEDITrans/Downloads/Medicare%20Part%20A%20EDI%20Helpline3.pdf>
 - Part B/DME -
<http://www.cms.gov/ElectronicBillingEDITrans/Downloads/Medicare%20Part%20B%20EDI%20Helpline3.pdf>

MAC Jurisdictions



MAC Contact Information

Jurisdiction	Operational MACs	EDI Help Desk Phone Number	Website
1	Palmetto GBA	1-866-749-4301	www.palmettogba.com/medicare
3	Noridian Administrative Services, LLC	1-800-967-7902	https://www.noridianmedicare.com/
4	Trailblazer Health Enterprises, LLC	1-866-749-4302	www.trailblazerhealth.com
5	Wisconsin Physician Service Insurance Corporation	1-866-503-9670	www.wpsmedicare.com/
9	First Coast Service Options, Inc.	1-888-670-0940	www.fcso.com/
10	Cahaba GBA	1-866-582-3253	www.cahabagba.com/
11 (Part A – NC & SC Part B – NC, SC, VA, WV)	Palmetto GBA	1-866-749-4301	www.palmettogba.com/medicare
11 (Part A, VA & WV)	National Government Services	1-866-749-4301	www.palmettogba.com/medicare
12	Highmark Medicare Services	1-866-488-0546	https://www.highmarkmedicareservices.com/
13	National Government Services	877-273-4334	www.ngsmedicare.com
14	NHIC Corporation	1-877-386-1056	www.medicarenhic.com/
CEDI for DME	National Government Services	1-866-311-9184	www.ngscedi.com

Medicare FFS 5010 Testing Protocols

- To be HIPAA compliant, Medicare FFS and its contractors must be ready to conduct testing with external trading partners by January 2011
- Each Medicare contractor will develop their own testing schedule and protocol, however, they will all have the following in common **as of January 2011:**
 - MACs and CEDI will support:
 - 837 – provider submitted 5010 base version testing (Errata version not until April)
 - 835 – MAC generated 5010 compliant transactions to test providers' ability to receive the new transaction format (syntax and structure), additionally,
 - The Part A Shared System (FISS) will set you up one time and then continuously sends you the 5010 835 test file that matches your 4010A1 835 production files
 - The Part B Shared System (MCS) will only send you a set of 5010 835 test files that match your 4010A1 835 production files upon your request, each new set of test files will require a new request
 - CEDI will set you up one time and then continuously send you the test 5010 835 files that match your 4010A1 production 835 files

Medicare FFS 5010 Testing Protocols

MACs and CEDI will support (continued):

- 276/277 – MAC generated generic 5010 compliant transactions to test providers' ability to receive the new transaction format (syntax and structure)
- CEDI will only accept small production files from trading partners of 5010 276 transactions and deliver them to the DME MAC(s) to produce a 5010 277 transaction that will be returned to the trading partner – this only applies to production, not test files
- MACs and CEDI will support the submission of 4010A1 and 5010 835 and 276/277 transactions in production throughout the transition

MACs and CEDI will support the submission of 4010A1 and 5010 837 claim transactions in production starting April 5, 2011 and going through December 31, 2011

For HETS 270/271 beneficiary eligibility inquiries, trading partners must be able to submit a 5010 270 beneficiary eligibility inquiry that passes the syntax compliance edits and to receive a complete 5010 271 eligibility and benefit response.

Medicare FFS 5010 Testing Protocols

As of January 2011:

- Part A providers can expect to:
 - Test 837 Institutional Claims at the translator level
 - Receive a 5010 compliant TA1 error response for enveloping problems, a 999 R for syntax errors or a 999 E indicating that the claim has passed initial screening and has been forwarded for additional validation
- Part B and DME providers can expect to:
 - Test 837 Professional Claims at the translator level
 - Receive a 5010 compliant TA1 error response for enveloping problems, a 999 R for syntax errors or a 999 E indicating that the claim has passed initial screening and has been forwarded for additional validation
- Providers using the NCPDP D.0 standard can expect to:
 - Test and move to production starting in January 2011
- HETS 270/271 trading partners can expect to:
 - Test 5010 270 beneficiary eligibility inquiries and receive 5010-compliant responses (271, 999, TA1, or proprietary error)

Roles and Responsibilities for Testing:

MACs must provide the following to their trading partners:

1. Testing instructions
2. Technical specifications for test files, parameters for successful testing, and troubleshooting support
3. Accommodation of all requests for testing within a reasonable time frame
4. An approved vendor list with all successfully tested vendors
5. Access to the Medicare companion document

CEDI will conduct the majority of testing for DME providers, as well as provide the needed technical support, however, DME MACs will provide support to CEDI in the overall testing and transition process

HETS 270/271 beneficiary eligibility transactions will be tested independently of the MAC and CEDI testing activities. For HETS 270/271 testing instructions, trading partners should refer to the CMS HIPAA Eligibility Transaction System (HETS) Help website (<http://www.cms.gov/HETSHelp/>)

Roles and Responsibilities

Providers and direct submitters (e.g., billing service vendors) are recommended to*:

1. Identify a representative sample of business specific transaction/scenarios for testing
2. Ensure that they understand their MAC(s) testing requirements. At a minimum, Medicare recommends testing connectivity with each Medicare contractor to whom a provider submits transactions
3. Contact their vendors and be aware of their testing status with their MAC(s) – can also confirm whether their vendor has been approved by checking the approved 5010 vendor list provided by their MAC(s)
4. Consider serving as a test subject for their vendor should their vendor not have completed successful testing with their MAC(s)
5. Update their vendor software product and test transactions with their MAC(s)
6. Ensure requisite testing of their billing service, software vendor, or clearinghouse has occurred with their MAC(s) – for billing services, providers may have to act as sponsors for them to test with the MAC
7. Confirm that the 1000A PER submitter contact information loop contains accurate contact information

*CEDI will not test with individual submitters/trading partners, thus, items #1, 2, 4, and 6 do not apply to DME providers

Medicare FFS 5010 Testing Protocols

Roles and Responsibilities for Testing (con't):

Software Vendors are recommended to:

1. Test with each MAC separately – with a representative sample of business specific transaction/scenarios
2. Deploy their 5010/D.0 product to each of their customers
3. Ensure inclusion of their product on the approved 5010 vendor list maintained by the MAC once successful testing is completed
4. Support providers with human readable formats of the acknowledgements transactions (999 and 277CA)

Clearinghouses are recommended to*:

1. Test with each MAC separately – with a representative sample of business specific transaction/scenarios
2. Support 4010A1 and 5010 production formats throughout the transition year starting in April 2011
3. Ensure inclusion of their product on the approved 5010 vendor list maintained by the MAC once successful testing is completed
4. Support providers with human readable formats of the acknowledgements transactions (999 and 277CA)

* Does not apply to CEDI for DME

Medicare FFS 5010 Testing Protocols

Roles and Responsibilities for Testing (con't):

Billing Services are recommended to:

1. Contact their vendor and clearinghouse (if any) and be aware of their testing status with their provider customer's MAC – can also confirm whether their vendor has been approved by checking the approved 5010 vendor list provided by their provider customer's MAC
2. Enquire whether their provider customer will need to facilitate testing with MAC(s) (i.e., the providers may have to act as sponsors for billing service vendors to test with MAC(s))

* Does not apply to CEDI for DME

Relevant time frames and MAC expectations for 5010 transition

(reference: CR 7240)*

- 5010 EDI trading partners will be migrated to production no sooner than April 5, 2011 and those moved to production must have successfully passed errata testing – an exception to this is for transactions that do not have an errata (i.e., 276/277, 835, NCPDP)
- Any EDI submitter that requests testing by October 1, 2011, will be given sufficient test opportunities to transition by December 31, 2011.
- All new EDI trading partners not using a current, Medicare approved billing service, clearinghouse, or software, who request to begin sending inbound EDI claim transactions use the applicable 5010/D.0 transactions (including the errata changes) as of April 5, 2011.
- After April 4, 2011, new EDI trading partners who wish to use the Medicare free billing software will only be provided 5010 compliant free billing software
- After April 4, 2011, new EDI trading partners may submit only NCPDP version D.0.

HETS 270/271 errata changes will be implemented in April 2011. The exact date will be communicated to HETS trading partners at a later time

Relevant time frames and expectations for 5010 transition (con't):

HETS 270/271

- From January 3, 2011 through April 2011 – HETS 4010A1 beneficiary eligibility inquiries will be supported in production, and HETS 5010 beneficiary eligibility inquiries will be supported for testing purposes only
- From April 2011 through December 31, 2011 – HETS beneficiary eligibility inquiries in either 4010A1 and 5010A1 format will be supported in production. HETS will no longer accept 270 transactions in the 5010 format once the 5010A1 changes have been implemented in April 2011

All EDI trading partners must achieve the following levels of testing success:

- Level 1 – Transmission/Transaction Integrity – translators test for high-level accuracy of the transmission and transactions and validate the syntax compliance at the standard level.
 - Test files must pass 100 percent of the standard syntax edits before production is approved
- Level 2 – Data Integrity – translators test for the edits relating to required data elements, edits relating to relational data (for example, numeric data in numeric-defined elements), and edits relating to valid code values, such as qualifiers specific to a particular implementation guide.
 - At a minimum, a 95 percent accuracy rate in data testing must be achieved before production is approved

Medicare FFS 5010 Testing Protocols

The following provide MAC specific testing support*:

Jurisdiction	Operational MACs	Testing Support
1	Palmetto GBA	www.palmettogba.com/medicare (under general EDI)
3	Noridian Administrative Services, LLC	http://www.edissweb.com/cgp/news/hipaa5010.html
4	Trailblazer Health Enterprises, LLC	www.trailblazerhealth.com (under EDI technical specifications)
5	Wisconsin Physician Service Insurance Corporation	http://www.wpsic.com/edi/5010-Readiness.shtml
9	First Coast Service Options, Inc.	http://medicare.fcso.com/Companion_documents/index.asp
10	Cahaba GBA	https://www.cahabagba.com/hipaa_5010.htm
11 (Part A – NC & SC Part B – NC, SC, VA, WV)	Palmetto GBA	www.palmettogba.com/medicare (under general EDI)
11 (Part A, VA & WV)	National Government Services	www.ngsmedicare.com
12	Highmark Medicare Services	https://www.highmarkmedicare.com/edi/5010/index.html
13	National Government Services	www.ngsmedicare.com
14	NHIC Corporation	Part A http://www.medicarenhic.com/PA/parta_education_home.shtml Part B http://www.medicarenhic.com/ne_prov/edi_index.shtml
CEDI for DME	National Government Services	http://www.ngscedi.com/5010/5010.htm

* These links are subject to change; if assistance is needed to navigate the links provided please contact the MAC directly

Relevant time frames and expectations for 5010 transition (con't)

References

For further information on testing requirements or MAC protocols please reference 5010 updates to the following after January 3, 2011:

1. Medicare FFS Companion Guide to be posted on individual MAC websites
2. IOM Publication 100-04:
 - Chapter 24 (the main EDI chapter)
<http://www.cms.gov/manuals/downloads/clm104c24.pdf>
 - Chapter 31 (for formats other than claims)
<http://www.cms.gov/manuals/downloads/clm104c31.pdf>
 - Chapter 22 (for remittance advice)
<http://www.cms.gov/manuals/downloads/clm104c22.pdf>
3. HETS 270/271 5010 Companion Guide and transition information
http://www.cms.gov/HETSHelp/03_5010_Information_HETS270271.asp

MAC Outreach and Education Activities

What you can expect in the 2011 transition year from your MAC:

- Teleconferences
- Website Materials
- Webinars/Trainings
- Meetings/conferences
- FAQs
- List Serve Messages

Visit your MAC's website for further details regarding planned events and calendars

Medicare FFS Communication Strategy

To augment MAC Outreach and Education Activities with nationally coordinated communication, outreach and education activities hosted by the MACs as well as those hosted centrally by the Medicare FFS Program

What you can expect in the 2011 transition year:

1. Consistent information across Medicare FFS
2. Use of a variety of media to disseminate information including list serves, websites, presentations, resource documents,
3. Nationally coordinated outreach and education events - MAC hosted outreach and education session for trading partners with a designated themes. Three themed events are planned throughout 2011, they are:
 - Are you ready to Test – April 2011
 - Troubleshooting with your MAC – July 2011
 - Last push for late implementers – October 2011
4. National testing days – Coordinated testing days across all MACs
 - Vendors/Clearinghouses/Billing Agents will be invited to test with their MAC – June 2011
 - Providers will be invited to test with their MAC – August 2011

Important Dates to Remember

January 1	Beginning of Transition Year
January 12	HIMSS 5010 Testing Education Webinar
January 19	5010 National Call – Errata/Companion Guides
January 25-27	4 th WEDI 5010 and ICD10 Implementation Forums - Advancing Down the Implementation Highway: Moving Forward with Testing to Attain Implementation
February 20-24	HIMSS 11 th Annual Conference & Exhibition
March 30	5010 National Call – Provider Testing and Readiness
April <i>TBD</i>	MAC Hosted Outreach and Education Session - Are You Ready to Test?
May 2-5	20 th Annual WEDI National Conference
May 25	5010 National Call – Topic TBD

Important Dates to Remember

June <i>TBD</i>	National MAC Testing Day (for Vendors, Clearinghouses, and Billing Services, etc)
July <i>TBD</i>	MAC Hosted Outreach and Education Session - Troubleshooting with your MAC
August 31	5010 National Call - MAC Panel
August <i>TBD</i>	National MAC Testing Day (For Providers)
October <i>TBD</i>	MAC Hosted Outreach and Education Session (Last push for late implementers)
October 24-27	WEDI 2011 Fall Conference
December 31	Celebration! – Mark the end of the transition year and the beginning of 5010 production environment

What you need to do

1. Get oriented to what needs to be done by compiling and reviewing relevant websites and resources – understand what you need to do
2. Contact your software vendor, clearinghouse, or billing service vendor and know where they stand
3. Contact your MAC(s) and inquire about their testing protocols – test early and test often
4. Plan to get engaged in Outreach and Education activities with your local MAC(s)
5. Seek technical support from your MAC earlier rather than later
6. Do not assume that someone else is taking care of this for you

Wrap Up

A couple of additional considerations:

- Providers are encouraged to take the following additional steps to facilitate their transition to 5010:
 - Employ a validation tool to preliminarily test their files prior to engaging in testing with MACs
 - Consider serving as a test subject for their vendor should their vendor not have completed successful testing with their MAC(s)
- Software Vendors, Clearinghouses, and Billing Service vendors are encouraged to recognize that there will be the potential for movement among business associates in transition year, so those who are early adopters/5010 ready will be better positioned to serve their current and future client base
 - Move to production upon approval to allow time to correct production issues while 4010A1 production is still available

Open Discussion

Now this is your opportunity to ask questions

*Standing by are representatives from the MACs
to help you navigate testing and transition*

Thank You!

