

5010 Primer for NCVHS

Presented by: Karen Trudel/Harry Reynolds

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HIPAA 5010

- Affects nine HIPAA transactions
- Pre-requisite for ICD-10
- Near-term large industry HIPAA implementation
- Primer today, not testimony

HIPAA Transactions

834: Health Plan Enrollment

820: Premium Payments

270/271: Eligibility Inquiry and Response

278: Health Care Services – Request Authorization

837 (I, P D): Health Care Claims/Encounters

276/277: Health Care Claim Inquiry and Response

835: Health Care Claim Payment/Remittance Advise

Implementation Guides Changes

- Each transaction has Implementation Guides (200-600 pages each)
 - Most pages contain changes for 5010
 - Examples of types of changes include:
 - Logic
 - Clarify wording/Fix problems
 - Add new content/functions
 - Eliminate content/functions
- Note: Overall business impact not yet defined

What Will Industry Have To Do?

Each entity:

- Review Implementation Guides
- Decide impact
 - Payers, Providers, CMS, Clearinghouses, Vendors
- Change systems/processes
- Test systems/processes
- Work with business partners to implement

Standards & Security Subcommittee

- Will begin hearings on 5010
- Understand impacts/consider recommendations
- First hearing late July 2007
- Letter to Full Committee September 2007