

*** IF YOU BILL CLAIMS ELECTRONICALLY,
PLEASE FORWARD THIS INFORMATION TO
YOUR SOFTWARE VENDOR, CLEARINGHOUSE
AND BILLING AGENCY**

5010 KY Medicaid News Splash!

Standards for Electronic Transactions-New Versions, New Standard and New Code Set - Final Rules

Systems that submit claims, receive remittances, and exchange claim status or eligibility inquiries and responses must be analyzed to identify systems, software and business process changes.

Business processes may need to be changed to capture additional information required by the new HIPAA Standards.

On January 16, 2009, Health and Human Services (HHS) published two final rules to adopt updated HIPAA standards; these rules are available at the Federal Register.

HHS has adopted the Accredited Standards Committee (ASC) X12 Version 5010. The compliance date for all covered entities is January 1, 2012. This gives the industry enough time to test the standards internally, to ensure that systems have been appropriately updated, and to test between trading partners before the compliance date.

Who is Affected by the Transition to Version 5010?

HIPAA covered entities affected by the transition to Version 5010 include the following:

- Providers, such as physicians, alternate site providers, rehabilitation clinics, and hospitals
- Health plans
- Health care clearinghouses
- Business associates that use the affected transactions, such as billing/service agents and vendors

What Changes Must Occur with Version 5010?

- The formats currently used must be upgraded from X12 Version 4010A1 to Version 5010. For Medicaid, the HIPAA-mandated formats include the following: Claims 837-I, 837-P, 837-D
- Remittance Advice 835
- Claim Status Inquiry/Response 276/277
- Eligibility Inquiry/Response 270/271
- Prior Authorization 278

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Splash Version 1

Two additional formats, not mandated by HIPAA, will also be adopted by Medicaid Fee-for-Service (FFS). These acknowledgement transactions include the following:

- Transaction Acknowledgement (TA1)
- Functional Acknowledgement (999)

Over the next year Kentucky Medicaid along with the fiscal agent HP will update the following websites with 5010 information to keep providers, vendors and clearinghouses informed of resources and instructions.

KY Medicaid Management Information System (KYMMIS) is a resource for providers, vendors and clearinghouses www.kymmisis.com

KY Health Net is a free web-based application for providers to submit claims, claim status and verify member eligibility <https://home.kymmisis.com>

Department for Medicaid Services website is a resource for providers, vendors and clearinghouses <http://chfs.ky.gov/dms/>

Additional resources

Centers for Medicare and Medicaid Services <http://www.cms.gov/>

5010 HIPAA Implementation Guides are known as 5010 TR3s (Technical Report Type 3).

These guides can be purchased at Washington Publishing Company <http://www.wpc-edi.com/>

Edifecs <http://www.edifecs.com/hc-5010-resources.jsp>

Federal Register <http://www.gpoaccess.gov/fr/>