

HIPAA 5010/D.0 - Overview

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March 24th, 2011

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Background



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- Health plans, clearinghouses and most healthcare providers use HIPAA mandated standards to electronically exchange healthcare transactions
 - Eligibility checks, treatment authorization, referrals, claim status requests, claims and remittance advice data
- Current X12 Version 4010 standard was adopted in August 2000 which is now considered as outdated
- On January 6th, 2009 HIPAA mandated the upgrade and adoption of ANSI ASCx12 5010 and NCPDP D.0
- Adoption will enable organizations to exchange standardized patient -care clinical and financial data.
 - Essentially, the “speaker” and the “listener” will be able to understand each others language irrespective of their backgrounds
 - Will allow enhanced usability and streamlined communication

ANSI: American National Standards Institute
ASCx12: Accredited Standards Committee

NCPDP: National Council for Prescription Drug Programs
EDI: Electronic Data Interchange

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What is 5010/D.0



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- Upgrade of existing standards and a prerequisite to support transition to ICD-10
- Addresses many business and technical issues that are anticipated as a part of ICD-10 adoption
- Includes more than 850 changes and approximately 1000 updates
- Accommodate enhanced specificity and granularity to differentiate between primary and admitting diagnosis, laterality, reason for visit, etc
- D.0 upgrade will allow for improved utility of the NCPDP standards and compliance with Part D requirements

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What is 5010/D.0 (Contd.)



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- Addresses need for specificity required in data collection and transmission
 - Enhancements to transaction related purpose and business information
 - Accommodates for collection and transmittal of incremental data (identified due to upgrade from 4010) and reduce ambiguities
 - Includes addition, modification and removal of data elements
 - Includes industry required new information, consistent guidelines for definitions and data use

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Why do we Need to Upgrade



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- The Final Rule published by the US Department of Health and Human Services on 1/16/2009. It is available at <http://edocket.access.gpo.gov/2009/pdf/E9-740.pdf>
- Primary objective is to address gaps that have evolved over the years due to unique requirements and specifications created by organizations
- 'Gaps' are further compounded by the fact that data / information are getting lost in translation between the speaker and the listener as interpretations between organizations differ
- 5010 is the Enabler!

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Why do we Need to Upgrade (Contd.)  KAISER PERMANENTE


- Addresses ICD-10 code specific requirements by expanding code length fields and by accommodating for additional instances of diagnoses codes
- Adopting 5010/D.0 provides:
 - Support for standardization of companion guides and increased use of EDI between covered entities
 - Support for e-health initiatives, both current and future
 - Support for NCPDP D.0 transactions for retail pharmacies and adapts NCPDP version 3.0 for subrogation of Medicaid pharmacy payments
 - Improved eligibility responses and more search options

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Which Transactions are Impacted  KAISER PERMANENTE


Transaction	Detail and Updates
270	Eligibility Inquiry <ul style="list-style-type: none"> ▪ Identifies primary and secondary insurance to support correct billing to the appropriate payer ▪ Additional service type codes
271	Eligibility Response
276	Claim Status Request <ul style="list-style-type: none"> ▪ Does away with unnecessary sensitive patient information ▪ Includes Pharmacy related data segments and use of NCPDP payment reject codes
277	Claim Status Response
278	Authorizations <ul style="list-style-type: none"> ▪ Adds segments to report key patient conditions


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Which Transactions are Impacted (Contd.)  KAISER PERMANENTE

Transaction	Detail and Updates
820	Health Plan premium payment
834	Health plan enrollment and disenrollment
837	Claims (Inpatient, Professional and Dental) <ul style="list-style-type: none"> ▪Accommodates ICD-10 format ▪Enables use of Present on Admission (POA) indicator ▪Separate diagnosis code reporting ▪Clarifies use of National Provider Identifier (NPI)
835	Remittance <ul style="list-style-type: none"> ▪Improves balancing ▪Includes medical policy segment
D.0	Pharmacy Transactions

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- Who will Need to Upgrade**  KAISER PERMANENTE
- All Covered entities are required to upgrade
 - Physicians
 - Pharmacies
 - Hospitals
 - Payers
 - Clearinghouses
 - Dentists
 - Software vendors will have to upgrade/remediate their products that support EDI transactions impacted by 5010/D.0
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Timeline (Suggested and Mandated)

Level	Date <small>(Suggested and Mandated)</small>	Milestone
Level 1	Jan, 2010	Begin internal testing for HIPAA 5010 and NCPDP D.0
	Dec, 2010	Achieve Level 1 compliance
<p>CMS guideline suggests <i>“Level 1 Compliance means that a covered entity can demonstrably create and receive compliant transactions, resulting from the compliance of all design/build activities and internal testing”</i></p>		
Level 2	Jan 2011	Begin Level 2 testing (Includes external testing with trading partners and move into production; dual 4010A/5010 processing mode)
	Jan 1 st , 2012	5010/D.0 compliance date for all covered entities
<p>CMS guideline suggests <i>“Level II compliance means that a covered entity has completed end-to-end testing with each of its trading partners, and is able to operate in production mode with the new versions of the standards.”</i></p>		

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Additional Resources

- Additional Information available at:

 - Centers for Medicare and Medicaid Services (CMS)
https://www.cms.gov/ElectronicBillingEDITrans/18_5010D0.asp
 - National Council for Prescription Drug Programs (NCPDP)
<http://www.ncpdp.org/>
 - Workgroup for Electronic Data Interchange (WEDI)
<http://www.wedi.org/>
 - The Accredited Standards Committee (ASCX12)
<http://www.x12.org/x12org/index.cfm>
 - American Medical Association (Physician Resources / Solutions Managing Your Practice)
<http://www.ama-assn.org/ama/pub/physician-resources.shtml>


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Questions

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