Insight to 5010

Andrea Pomazal, Product Manager
Why move to ANSI 5010

• Pre-cursor to ICD-10
• 500 enhancements to ANSI format
• **New standard ANSI responses**
  – ANSI 999 (Acknowledgment )
  – ANSI 277CA (Level 2 Response )
Benefits of ANSI 5010

- Less ambiguity in the implementation guides
- Supports standardization of companion guides across the industry
- Supports increased use of EDI between covered entities
- Supports e-health initiatives now and in the future
- Provides infrastructure on ICD-10 and Present on Admission Indicator

From CMS webinar given 03/24/2010
EDI transactions converting to ANSI 5010

• ANSI 837 (Professional and Institutional Claims)
• ANSI 835 (Electronic Remittance Advice)
• ANSI 270/271 (Eligibility Verification)
• ANSI 276/277 (Real Time Claim Status)
ANSI 5010 Changes - Claims

• Loops and Segments have been removed or changed
  – Responsible Party and Purchased Service Provider Loops deleted
  – DME info moved to FRM segments

• Additional segments added to better report specialized information
  – Ambulance pickup and drop off locations added
  – Electronic Secondary (COB) requirements have been modified
  – Up to 10 Other Insurance Payers can be reported on claim
ANSI 5010 changes continued

- Billing Provider Loop (2010AA)
  - Cannot send P.O. Box in N3 segment (Address Line). P.O. Box moved to Pay-to Address Loop (Loop 2010AB)
  - 9 digit zip code is required in N4 segment (City, State, Zip)
  - Payer Specific REF segments reporting Legacy PIN numbers moved to Payer Loop (Loop 2010BB)

- Facility Loop (2310C)
  - 9 digit zip code required in N4 segment (City, State, Zip)
Loop 2010AA Billing Provider Name
NM1*85*2*MEDICAL CLINIC*****XX*1234567890
N3*PO BOX 1110
N4*HOUSTON*TX*77046
REF*EI*987654321

Loop 2010AA Billing Provider Name
NM1*85*2*MEDICAL CLINIC*****XX*1234567890
N3*1000 MAIN STREET
N4*HOUSTON*TX*770467756
REF*EI*987654321
Loop 2010AB Pay-to Address Name
NM1*87*2*
N3*PO BOX 1110
N4*HOUSTON*TX*77046
5010 Timelines

• Mandatory compliance on January 1, 2012 for all covered entities
  - External testing to begin on or after January 1, 2011

• Small health plans have until January 1, 2013
Customer 5010 Testing

- Practice Insight will only be conducting external testing with ANSI on errata and addendum version
  - Professional-ANSI 5010A1
  - Institutional-ANSI 5010A2
- Practice Insight’s QA environment will be available to select vendors for testing on 02/28
- All vendors are encouraged to submit test files now through Issue Manager
- We will accept production ANSI 5010 claim files after our Spring Release
Payer 5010 Testing

• Every ANSI transaction must be tested and approved with each connection before going to production in 5010

• We will begin testing ANSI 5010 with direct payers and gateway connections in March when 5010 errata and addendum are accepted
Application Migration to 5010A1

- Add 5010 fields to database
- Add 5010 format to all loaders and builders
- Add 5010 Interface in application
  - Edit screens
  - Transaction viewers
- Modify Standard Tester and Custom Rules
- Add 999 and 277CA response splitters
- Modify 835 splitters
How you can prepare for ANSI 5010

• Educate yourself on format changes
  – Purchase the new ANSI guides

• Have a conversation with Practice Management vendor about how they will become compliant
  – Practice Insight will continue to “up convert” and “down convert” current format including: Claim, Responses, Eligibility, and ERA delivery for 5010

• Educate your customers
Awareness tips for the 5010 Migration

• Be aware of gaps with current format and 5010 format
  – This is especially important for customer who will have claims converted to 5010 by Practice Insight

• Once claims for a payer are sent in 5010 pay attention to new response reports and new response messages
Act Now

• Start using 9 digit zip codes
  – Add to Facilities in Practice Management System
  – Add to Practice Information and Providers in Practice Management System

• Do not edit Practice Insight system at this time
  – We will be creating utilities to help with this transition
  – Editing address information could affect where payments are sent
Continuing 5010 Communication from Practice Insight

• Insight to 5010 section on website
• Periodic Webinars and should be attended by all staff members supporting EDI
• Practice Insight will send communication of migrating payers through email notifications
• Pay close attention to Release Notes
• If you have questions ask your support rep
Resources

- CMS 5010 Website
  http://www.cms.hhs.gov/ElectronicBillingEDITrans/18_5010D0.asp

- CMS 5010 National Calls
  http://www.cms.gov/Versions5010andD0/V50/list.asp#TopOfPage

- Washington Publishing Company
  http://www.wpc-edi.com/