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HIPAA 5010 FAQ's

What is HIPAA 5010?

The Health Insurance Portability and Accountability Act (HIPAA) is the federal regulation that requires the use of standard X12 transactions to report and inquire about healthcare services. If you use electronic transactions, the current version is 4010A1. The new version of the standards is called 5010.

How is 5010 different from 4010A1?

The new 5010 version is superior to 4010A1. The documentation explaining how to report your claims and inquiries is easier to understand in the new version. 5010 fully supports the reporting of National Provider Identifiers (NPI) and the new ICD-10 codes. Additionally, the version is more streamlined because content that wasn't used in 4010A1 has been removed in the 5010 version.

Does 5010 apply to me?

HIPAA 5010 applies to you if you currently use version 4010A1 of the standard electronic transactions or if you want to begin electronically reporting or (inquiring about) healthcare transactions.

When must version 5010 be place?

HIPAA 5010 must be implemented by January 1, 2012, but given the complexities of the conversion, you must begin preparing for the transition now. After January 1, 2012, version 4010A1 will no longer be valid.

Can I still use your Web portal to file claims after January 1, 2012?

Yes, the federal mandate allows us to continue making BCBSND's Web portal available to you even after the compliance date. But, you will only be able to send electronic transactions or inquires to BCBSND if you are using version 5010.

How do I begin?

Consider opening a dialogue with your facility or practice management vendor and clearinghouse. Prepare for the discussion by reviewing your contracts to determine what terms apply when major, federally mandated data set changes must be made. Then, ask your vendors what preparations they are making to support your 5010 business requirements in time for the January 1, 2012, compliance date. Ask for details such as a project plan and timeline.

What if my vendor hasn't started to plan for 5010?

One approach would be to express your concern and follow up with them periodically until they are able to offer assurances that you find acceptable. You also may need to develop a backup plan for meeting the compliance date.

Currently, I file claims on paper. Will I need to start sending 5010 electronic transactions on January 1, 2012?

Electronic transactions are a very efficient way to file claims and make inquires. BCBSND encourages you to consider this approach. However, BCBSND will not require that you switch to electronic transactions if you use paper today.

Will there be changes to the paper claims (i.e., UB-04, 1500) because of 5010?

No, the most recent versions of the paper claims accommodate the relevant data reported in 5010.

Can we continue to use 1500 paper claims after the compliance date for 5010?

Yes, you may use 1500 paper claims after January 1, 2012. The 1500 claim form was updated in 2007 and the changes made were consistent with the changes in HIPAA version 5010.

I am currently submitting paper claims, but would like to begin submitting them electronically prior to January 1, 2012. In which version should I invest?

BCBSND is planning to be able to receive all 5010 transactions by July 1, 2011. If you use PC-ACE, the free claims submission solution available from BCBSND, you will be able to submit using 4010 today and 5010 when appropriate.

What will happen if my vendor is not ready to send 5010 transactions by January 1, 2012?

Non-compliant transactions received after January 1, 2012 will be rejected as directed by CMS.

Where can I find additional information about 5010?

The Centers for Medicare and Medicaid Services (CMS) has posted an *MLN Matters* article entitled "[An Introductory Overview of the HIPAA 5010](#)" that you might find useful. This article offers a helpful summary, especially for those who are not involved directly in HIPAA 5010 projects.