

PARTNERSHIP HEALTHPLAN OF CALIFORNIA
HIPAA EDI 5010 MIGRATION UPDATE



Background

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires the Secretary of the Department of Health and Human Services (HHS) to adopt version 5010 to replace the current version of the X12 standards that covered entities (health plans, health care clearinghouses, and certain health care providers) must use when electronically conducting certain health care administrative transactions, such as claims, remittance, eligibility, and claims status requests and responses.

Purpose

The purpose of this document is to clearly communicate the approach that Partnership HealthPlan of California (“PHC”) is taking to ensure compliance with the Health Insurance Portability and Accountability Act’s (HIPAA’s) new versions of the Accredited Standards Committee (ASC) X12 Electronic Data Interchange (EDI) transactions.

It is also noted that the Standards Development Organizations have made corrections to the 5010 versions of certain transactions. The Errata versions replace the base versions for HIPAA compliance. Per the Federal Register (Vol. 75, No. 197, October 13, 2010, 62684–62686 [2010–25684] found at http://www.access.gpo.gov/su_docs/aces/fr-cont.html), HIPAA compliance will require the implementation of the Errata versions and the Base versions for those transactions not affected by the Errata, as listed below. Compliance with the Errata must be achieved by the original regulation compliance date of January, 2012.

List of Base and Errata versions that PHC will be implementing:

Transactions	Base Version	Errata Version
271 Health Care Eligibility Benefit Response	005010X279	005010X279A1
834 Enrollment and Disenrollment	005010X220	005010X220A1
837 Health Care Claim: Institutional	005010X223	005010X223A2
837 Health Care Claim: Professional	005010X222	005010X222A1
277CA Claim Acknowledgement	005010X214	N/A
999 Implementation Acknowledgment For Health Care Insurance	005010X231	005010X231A1
835 Health Care Claim Payment/Advice	005010X221	005010X221A1

Implementation

PHC will be ready to test the Base versions of all transactions mentioned above in January 2011, and the 5010 Errata versions in April 2011.

- Level I (Base Version) compliance to begin by : **December 31, 2010**
- Level I (Errata Version) compliance to begin by : **April 30, 2011**
- Level II (Base & Errata Versions) compliance by : **December 31, 2011**
- To be fully compliant on : **January 01, 2012**

Level I 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."

PHC expects covered entities to be testing throughout calendar year 2011. Testing could be scheduled as early as possible to ensure sufficient time for corrective actions and re-testing.

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."