HIPAA 5010 Implementation Reminder

HIPAA 5010 is a new set of standards that regulate the electronic submission of healthcare transactions, including claim submissions, remittances and eligibility. Covered entities such as clearinghouse and healthcare providers are required to conform to the HIPAA 5010 standards. Listed below are those covered entities required to upgrade to HIPAA 5010 standards:

- Clearinghouses
- Hospitals
- Physicians
- Payers
- Software Vendors

Listed below are the specific transactions which must upgrade to the HIPAA 5010 standards:

- 837 Health Care Claim (Professional/Institutional)
- 835 Health Care Payment/Advise

Currently, Community Care Behavioral Health Organization is in the final phase of HIPAA 5010 testing of contracted providers, as well as the claim clearinghouses listed below:

- Relay Health/McKesson/Gateway EDI
- Emdeon/WebMD
- Xactimed/MedAssets

This is a reminder that if you have not already conducted 5010 testing with Community Care Behavioral Health Organization, you must do so prior to December 31, 2011. January 1, 2012 is the mandated implementation deadline date for compliance. If you have any questions and/or would like to schedule testing, please contact Bill Simmons at (412)454-8609 or via e-mail at simmonswj@ccbh.com.

For more information on the HIPAA 5010 implementation, please follow the link at Centers for Medicare and Medicaid Services (CMS):

http://www.cms.gov/ElectronicBillingEDITrans/18_5010D0.asp