MLN Matters®
Information for Medicare Fee-for-Service Health Care Professionals

News Flash – The Diabetes-Related Services brochure, which provides an overview of Medicare's coverage of diabetes screening tests, diabetes self-management training, medical nutrition therapy, and supplies and other services for Medicare beneficiaries with diabetes, is now available in print format. To place your order for the print version, select "MLN Product Ordering Page" in the "Related Links Inside CMS" Section on the Medicare Learning Network homepage at *http://www.cms.hhs.gov/MLNGenInfo/01_Overview.asp* on the CMS website.. You can also view the downloadable version at *http://www.cms.hhs.gov/MLNProducts/downloads/DiabetesSvcs.pdf* on the same site. For more products related to Medicare-covered preventive services, please visit our preventive services educational at products *http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp* on that site.

MLN Matters® Number: MM6745 | Related Change Request (CR) #: 6745

Related CR Release Date: January 15, 2010 | Effective Date: March 1, 2010

Related CR Transmittal #: R621OTN | Implementation Date: March 1, 2010

Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Version 5010 Only in Jurisdiction 9 Parts A and B (A/B) Medicare Administrative Contractor (MAC)

Provider Types Affected

All physicians, providers and suppliers who bill the Parts A and B (A/B) Medicare Administrative Contractor (MAC) ONLY in Jurisdiction 9 (Florida, Puerto Rico, and U.S. Virgin Islands) for services provided to Medicare beneficiaries are affected by CR 6745. Providers in other jurisdictions should look for articles concerning their readiness and the readiness of their MACs for Version 5010. Providers in Jurisdictions 10 and 14 were previously informed of this activity in MM6595, released on August 28, 2009, available at *http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6595.pdf* on the Centers for Medicare & Medicaid Services (CMS) website.

Provider Action Needed

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STOP – Impact to You

If you submit claims to the A/B MAC in Jurisdiction 9, you need to be aware that change request (CR) 6745 directs the A/B MAC in this jurisdiction to begin implementing HIPAA Version 5010. Implementation of HIPAA 5010 will require changes to software, systems and perhaps procedures that you use for billing Medicare and other payers. So it is extremely important that you and your staff are aware of this HIPAA change being implemented by your MAC and be alert to future directions for this implementation.

CAUTION – What You Need to Know

Effective January 1, 2012, you must be ready to submit your claims electronically using the X12 Version 5010. CMS will provide additional information to assist you and keep you informed of progress on Medicare's implementation of HIPAA 5010 through a variety of communication vehicles. This article explains what your A/B MAC must do to begin the process of implementing the HIPAA 5010 standard transaction.

GO – What You Need to Do

See the Background and Additional Information Sections of this article for further details regarding these changes.

Background

CMS is now implementing the next version of the HIPAA transactions. The purpose of CR 6745 is to instruct the A/B MAC for Jurisdiction 9 to prepare their systems to process ASC X12 version 005010 transaction. The Secretary of the Department of Health and Human Services (DHHS) adopted Accredited Standards Committee (ASC) X12 version 5010 and National Council for Prescription Drug Programs (NCPDP) version D.0 as the next HIPAA transaction standards for covered entities to exchange HIPAA transactions. The final rule was published on January 16, 2009. All covered entities have to be fully compliant on January 1, 2012.

Additional Information

The official instruction, CR 6745, issued to your Medicare A/B MAC regarding this change, may be viewed at *http://www.cms.hhs.gov/Transmittals/downloads/R621OTN.pdf* on the CMS website.

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You can find more information about HIPAA 5010 by going to *http://www.cms.hhs.gov/ElectronicBillingEDITrans/18_5010D0.asp* on the Electronic Billing & EDI Transactions page on the CMS website. Medicare has prepared a comparison of the current X12 HIPAA EDI standards (Version 4010/4010A1) with Version 5010, and has made the side-by-side comparison available at this website.

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