

RealMed is Committed to Helping You Prepare for HIPAA 5010

RealMed is here to provide you services, support and information for the transition to the new HIPAA 5010 standards. Please review the following questions and answers to learn more about how RealMed will be here to help. RealMed will continue to provide additional information through the transition period and we encourage you to contact your Customer Account Manager or the Client Service Center with any questions you may have.

What is HIPAA 5010?

Health Insurance Portability and Accountability Act (HIPAA) of 1996 required the Department of Health and Human Services (HHS) to adopt information standards to be used in all HIPAA covered electronic health care transactions. The current standard electronic transaction version is 4010A1; the new updated version is called 5010.

The Centers for Medicare and Medicaid Services (CMS) and HHS have mandated the new 5010 standards to be adopted by all healthcare entities by January 01, 2012.

What transactions will the 5010 changes impact?

The 5010 version of standards covers all of the following types of standard health care transactions:

- 837P – Professional Health Care Claims
- 837I – Institutional Health Care Claims
- 270/271 – Eligibility for a Health Plan
- 276/277 – Health Care Claims Status
- 835 – Health Care Payment and Remittance Advice

For a full list of all transactions and the official HIPAA final rules regarding 5010 please review the [HSS Final Rules and Regulations](#).

Are there deadlines associated with 5010?

Yes, there are several dates which you will want to keep in mind as you evaluate your organizational plans.

- July, 2009* – RealMed 5010 Policy will be released
- November, 2010* – RealMed testing with clients begins
- January, 2011* – RealMed can accept and process 5010 transactions in production
- January, 2011* – CMS can accept and process 5010 transactions in production
- January, 2011 – January, 2012* – RealMed dual submission period (4010 and/or 5010)
- January 1, 2012* – Large Health Plans must be compliant and be able to accept 5010 transactions

How will RealMed help me with the transition?

RealMed will provide information, alerts and training to ensure you are fully informed and prepared for the changes that will be occurring. RealMed will conduct 5010 compliance reviews for all clients and submission types. RealMed will have the capability to submit either 4010 or 5010 versions to any payer for any transaction submitted through our system. RealMed will ensure, through your customized set-up, that you will be able to continue to submit your current format up to and beyond the deadline. For those clients planning on generating and submitting the 5010 format, RealMed will provide the ability to submit this format to all payers, regardless of their readiness to accept 5010 transactions.

Is there something I could be doing now to prepare for the changes?

RealMed encourages you to begin discussing these deadlines with your Practice Management System vendors and other service providers. RealMed also recommends you review documentation CMS has published regarding the changes from 4010 to 5010. The following links will help you understand more about the changes that will be occurring. In addition, please contact RealMed's Client Service Center with any questions you may have and you'll be provided responses from RealMed's 5010 experts.

[CMS June 9th, 2009 Provider National Conference Call Presentation](#)

[CMS Professional Claim 837-P 4010A1 to 5010 Side by Side](#)

The information contained in this publication is considered accurate as of the publication date.
Publication Date: 6/11/2009

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