

HIPAA 5010 - FAQ

Acronyms/ Definitions	
DHHS	Department of Health and Human Services
CMS	Centers for Medicare & Medicaid Services
EDI	Electronic Data Interchange
HIPAA	Health Insurance Portability and Accountability Act of 1996 One part of this legislation requires health plans and providers to use a common format when electronically communicating health information.
Covered Entity	<ul style="list-style-type: none"> - health care provider that conducts certain transactions in electronic form - a health care clearinghouse - a health plan https://www.cms.gov/HIPAA&GenInfo/Downloads/CoveredEntitycharts.pdf
ACS X12	Accredited Standards Committee (aka X12 committee). They develop EDI standards. http://www.x12.org/x12org/about/facts.cfm
X12 Transactions aka Documents	There are over 300 individual transactions types for 16 industries. HealthLink utilizes nine of the 28 Insurance/Health Series transactions. http://en.wikipedia.org/wiki/X12_Document_List
837I Transaction	Institutional Health Care Claim (inbound and outbound)
837P Transaction	Professional Health Care Claim (inbound and outbound)
834 Transaction	Benefit Enrollment and Maintenance (inbound)
835 Transaction	Health Care Claim Payment/Advice (outbound)
270/271 Transaction	Eligibility Inquiry (outbound) and Response (inbound)
275/276 Transaction	Claim Status Inquiry (outbound) and Response (inbound)
997 Transaction	Claim/File Level Acknowledgment (inbound and outbound)
999 Transaction	Transaction Level Acknowledgment (inbound and outbound)
Version 4010	The Secretary of the Department of Health and Human Services (HHS) was put in charge of determining a standard that could accommodate the HIPAA requirement. Version 4010 was the format chosen. This version was considered to contain the latest in innovations and updates to the available standards at that point in time. HIPAA legislation required mandatory compliance by October 16, 2003.
Version/Release	Different releases are NOT compatible. Transaction sets, segments, and data elements must all be used at the same version/release level. Releases are designated by a six-digit code that represents a version and release level. For example, Version 4, Release 01 is designated 4010. The last digit is reserved for any sub-releases. (Additional two digits are for Addenda)
Errata	"Errata" is the term used by ASC X12 for any corrections to the original version of the transaction. Several errors were identified in 5010 HIPAA standard transactions that were adopted by the Department of Health and Human Services (HHS) in January 2009.
Addenda	Addenda are the approved Errata changes, identified with a letter A in the errata document identifier. All of the current mandated 5010 versions HealthLink utilizes have at least one Addenda (5010A1). The Institutional Claim has a second Addenda (5010A2).
Version 5010	HIPAA standard transaction effective 1/1/2012. All current 5010 versions HealthLink utilizes have at least one Addenda ie: 5010A1. The institutional claim (837I) has a second Addenda 5010A2.
HealthLink 5010 contact information	<u>HealthLink 5010 Implementation Team</u> Help Line (314)-925-6004 HL_5010@Healthlink.com Mike Fuller from Axiom Systems Inc. is leading the TP Migration effort for HL.

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Nursing Informatics for the Advanced Practice Nurse, Second Edition Susan McBride, Mari Tietze, 2018-09-28 A must have text for all healthcare professionals practicing in the digital age of healthcare Nursing Informatics for the Advanced Practice Nurse Second Edition delivers a practical array of tools and information to show how advanced practice nurses can maximize patient safety quality of care and cost savings through the use of technology Since the first edition of this text health information technology has only expanded With increased capability and complexity the current technology landscape presents new challenges and opportunities for interprofessional teams Nurses who are already trained to use the analytic process to assess analyze and intervene are in a unique position to use this same process to lead teams in addressing healthcare delivery challenges with data The only informatics text written specifically for advanced practice nurses Nursing Informatics for the Advanced Practice Nurse Second Edition takes an expansive open and innovative approach to thinking about technology Every chapter is highly practical filled with case studies and exercises that demonstrate how the content presented relates to the contemporary healthcare environment Where applicable concepts are aligned with the six domains within the Quality and Safety Education in Nursing QSEN approach and are tied to national goals and initiatives Featuring chapters written by physicians epidemiologists engineers dieticians and health services researchers the format of this text reflects its core principle that it takes a team to fully realize the benefit of technology for patients and healthcare consumers What s New Several chapters present new material to support teams optimization of electronic health records Updated national standards and initiatives Increased focus and new information on usability interoperability and workflow redesign throughout based on latest evidence Explores challenges and solutions of electronic clinical quality measures eCQMs a major initiative in healthcare informatics Medicare and Medicaid Services use eCQMs to judge quality of care and how dynamics change rapidly in today s environment Key Features Presents national standards and healthcare initiatives Provides in depth case studies for better understanding of informatics in practice Addresses the DNP Essentials including II Organization and system leadership for quality improvement and systems thinking IV Core Competency for Informatics and Interprofessional Collaboration for Improving Patient and Population health outcomes Includes end of chapter exercises and questions for students Instructor s Guide and PowerPoint slides for instructors Aligned with QSEN graduate level competencies HIPAA Transactions Edward Douglass Jones, Ed Jones (III.), Carolyn P. Hartley, 2004 This resource begins with a synopsis of administrative simplification and a quick overview of the HIPAA transactions standards It examines the eight types of transactions standards defines electronic terms and explores the pros and cons of alternative electronic transactions methods Also included is information on code sets and implementation guides plus return on investment analyses that build a statutory business and regulatory case for adopting the transaction standards It also addresses the future of transaction standards including claims attachments electronic medical records and electronic prescriptions and future trends in

transaction processing **HIPAA Plain & Simple** Carolyn P. Hartley, Edward Douglass Jones, 2004 HIPAA Plain and Simple demystifies the complex HIPAA regulations for those in the medical office who have direct patient contact or are responsible for safeguarding patient information. It is written by HIPAA authorities in plain language so that everyone in the office from new employees to the receptionist to the physician's management team will understand what it means to be HIPAA compliant and how to achieve compliance. Features include a description and analysis of HIPAA components including the final security rule charts, graphs, and timelines at a glance; lists easy to understand procedures/scenarios for discussion; a month by month HIPAA training program; and an internal and external HIPAA communications plan. HIPAA@IT Roy Rada, 2001-10 *The HIPAA Handbook* Dennis Melamed, Garry Carneal, 2002 *The HIPAA Program Reference Handbook* Ross A. Leo, 2004-11-29

Management and IT professionals in the healthcare arena face the fear of the unknown; they fear that their massive efforts to comply with HIPAA requirements may not be enough because they still do not know how compliance will be tested and measured. No one has been able to clearly explain to them the ramifications of HIPAA. Until now, *The HIPAA Program Reference Handbook* explains all aspects of HIPAA including system design, implementation, compliance, liability, transactions, security, and privacy, focusing on pragmatic action instead of theoretic approaches. The book is organized into five parts. The first discusses programs and processes covering program design and implementation; a review of legislation; human dynamics; the roles of Chief Privacy and Chief Security Officers; and many other foundational issues. The Handbook continues by analyzing product, policy, technology, and process standards and what entities need to do to reach compliance. It then focuses on HIPAA legal impacts including liability associated with senior management and staff within an organization. A section on transactions and interactions discusses the intricacies of the transaction types, standards, methods, and implementations required by HIPAA, covering the flow of payments and patient information among healthcare and service providers, payers, agencies, and other organizations. The book concludes with a discussion of security and privacy that analyzes human and machine requirements, interface issues, functions, and various aspects of technology required to meet HIPAA mandates.

Managing HIPAA Compliance Scott C. Withrow, 2001 **HIPAA** June M. Sullivan, 2004 This concise practical guide helps the advocate understand the sometimes dense rules in advising patients, physicians, and hospitals and in litigating HIPAA related issues. Guide to HIPAA Security and the Law Stephen S. Wu, 2007 This publication discusses the HIPAA Security Rule's role in the broader context of HIPAA and its other regulations and provides useful guidance for implementing HIPAA security. At the heart of this publication is a detailed section by section analysis of each security topic covered in the Security Rule. This publication also covers the risks of non-compliance by describing the applicable enforcement mechanisms that apply and the prospects for litigation relating to HIPAA security. HIPAA Transactions Made Simple Margret Amatayakul, Michael Ross Cohen, 2003-01-01 For healthcare facilities that have filed compliance plans to receive an extension, their deadline for adopting the new HIPAA transaction standards is October 16, 2003. As healthcare facilities adopt

transactions such as electronic remittance advice eligibility verification and claims status they ll enjoy significant benefits including productivity improvement bad debt reduction and lower costs for processing To capitalize on these potential benefits healthcare facilities need a resource that will help their staff understand the differences between old and new claims processing requirements and the steps to take to ensure capture of all required data both from workflow and technical standpoints The new book and companion CD ROM **HIPAA Transactions Made Simple Achieving the Benefits of EDI** provide a step by step plan to help adopt the new HIPAA transaction standards Regardless of the health care setting HIPAA Transactions Made Simple offers a chapter by chapter process for transactions implementation HIPAA Transactions Made Simple Achieving the Benefits of EDI will help readers Understand HIPAA transactions through simple explanations Prioritize transactions adoption for maximum benefit Know payer and vendor concerns associated with the transactions Coordinate your transactions efforts with vendors and payers Identify the short term and long term effects of transactions adoption Introduce the X12N architecture for electronic transmission into your process Prepare to convert to and test the HIPAA claims and remittances Plan for future additional transactions Customize the checklists and forms on the included CD ROM for your facility **HIPAA Compliance Handbook** Aspen Health Law and Compliance Center,2000-12-31 New York Transaction Guide, with Forms Eric Martin Adams,1974 **Field Guide to HIPAA Implementation** Jan Root,American Medical Association,2002 Faced with federally mandated deadlines increasing patient awareness and concerns and fear over the impact of non compliance privacy officers practice managers physicians and administrators need concise answers and reliable guidance Trust the AMA to bring you this clear comprehensive authoritative and thoroughly updated edition of our best selling Field Guide to HIPAA Implementation Implementation dates compliance standards and tips to scaling HIPAA requirements to individual practice environments keep you organized and focused on achieving full compliance Worksheets timelines template forms and documents sample policies and Web links help you prioritize and move ahead with confidence This new edition of Field Guide to HIPAA Implementation includes new material on transactions and code sets problem solving tips for completing claims inquiries and attachments plus instruction on making your practice run more efficiently using electronic transactions *Midwest Transaction Guide: Personal transactions* ,1980

Reviewing **Hipaa 824 Transaction Guide 5010**: Unlocking the Spellbinding Force of Linguistics

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