5010 Instructions regarding Open Testing and response to notice on CMS 90-Day Discretionary Period

In January 2009, the Modifications to HIPPA Electronic Transaction Standards Final Rule were published as part of the Health Insurance Reform. The Final Rule replaces current Version 4010A1 standards with Version 5010 standards and takes effect January 1, 2012.

Many of you receiving this communication have inquired about sending ValueOptions test files to ensure you are prepared to submit electronic claims with the 5010 format beginning January 1, 2012. Our initial testing phase has taken place over the past several months with a predetermined group of Providers and Trading Partners. ValueOptions will move toward the second phase of testing, our "open" test phase; which will include all Providers and Trading Partners who wish to submit 5010 test files. The open test phase will start on November 28th, 2011.

Instructions for Open Testing are as follows:

File Submission Requirements

- Create the file using recent claims – our testing environment is current as of claims submitted prior to 9/1/11.
- Limit your first batch to 5 claims. If you do not receive any compliance errors your next submission can be 10 – 25 claims.
- You will receive an e-mail notifying you the file was received.   The e-mail will include your submission ID. If your file fails, you will receive an e-mail indicating the file failed.
- You can have both rejected files and rejected claims. Only claims that fail need to be resubmitted. <u>Do not</u> resubmit the same batch after making the claim level corrections as this will cause any claims that have passed validation from the previous submission to duplicate in the system. If the entire file fails, the entire file will need to be resubmitted.
- After the initial file has been submitted successfully without any compliance errors; additional files should contain a typical variety of claims including COB; replacements; voids etc.

ProviderConnect Instructions

- Login to ProviderConnect using your User ID and password. There is no new user ID and password for open testing. The system will recognize that your submission is a 5010 file and will route the file to the development area.
- To submit a batch file you will access ProviderConnect and select the dropdown indicating the type of test file you are submitting (an I or P). You will access the same screens you do today. Upload your file.

For your convenience, these instructions along with screenshots from the ProviderConnect application can be found under the "Spotlight" portion of the ValueOptions website at
http://www.valueoptions.com/providers/Files/pdfs/5010_Open_Testing_Instructions.pdf

In order to submit successful files, Providers and trading partners will need to follow the ValueOptions test instructions and companion guide. The most recent version of the ValueOptions 5010 Companion Guide can be found at:
http://www.valueoptions.com/providers/Compliance/ValueOptions_5010_Companion_Guide-Draft.pdf

Please note that CMS has announced a 90-day discretionary period for compliance with the new HIPPA Transaction standards. Please read the CMS announcement using the following link:
https://www.cms.gov/ICD10/Downloads/CMSStatement5010EnforcementDiscretion111711.pdf

ValueOptions will accept 4010 and 5010 production files until the conclusion of the 90-day grace period.

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