

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid



www.mass.gov/masshealth

MassHealth All Provider Bulletin 219a November 2011

TO: All Providers Participating in MassHealth

FROM: Julian J. Harris, M.D., Medicaid Director

RE: 5010 Implementation Readiness - Corrected

Background

The Centers for Medicare & Medicaid Services (CMS) has mandated that on January 1, 2012, the standards for electronic health care transactions must change from version 4010/4010A1 to version 5010. MassHealth is actively working toward this January 1, 2012, implementation date. All electronic health care transactions currently submitted to, or returned from, MassHealth in the 4010A1 version are affected. Please refer to All Provider Bulletin 205 for a list of the affected transactions.

Are you Ready to Implement 5010?

Over the past year, MassHealth has conducted a series of provider information sessions, issued provider bulletins, updated job aids, and communicated with you through provider associations and other standard MassHealth media to inform you of the impending 5010 January 1, 2012, implementation date. Additionally, MassHealth has updated the HIPAA companion guides, billing guides, and other relevant instructions (for example, third-party liability (TPL) instructions). MassHealth has also provided a number of key educational materials required to prepare you for the transition to the new HIPAA standard.

Please consider the following questions to determine if you are ready for the January 1, 2012, implementation date

- Have you completed trading partner testing with MassHealth?
 If you have not completed trading partner testing, do not wait. Contact MassHealth immediately at 1-855 253 7717 or at edi@mahealth.net to arrange for testing.
- Have you validated that your software vendor or billing intermediary has been approved to submit 5010 transactions to MassHealth by contacting your vendor directly or confirming their testing status at www.mass.gov/masshealth/5010?

If your vendor is not approved, or is not actively testing with MassHealth, please contact them to confirm that they will be ready to support your organization on January 1, 2012.

Are you Ready to Implement 5010? (cont.)

 Have you modified your internal practice management systems, trained staff, and updated affected policies and procedures as required?

If not, please do so immediately to ensure that your organization is ready to operationally support 5010 implementation.

 Have you identified a contingency plan in case your organization is not ready by January 1, 2012?

Please Note: When defining your contingency plan, remember that MassHealth is eliminating paper claims submissions, except in certain circumstances, as of January 1, 2012. Refer to <u>All Provider Bulletin 217</u> for further details. As previously noted, MassHealth **will not** process any 4010 claims after the cutover to the 5010 mandate effective January 1, 2012.

If you can answer yes to all of these questions, your organization should be ready for a successful implementation.

Trading Partner Testing Timelines

MassHealth began the trading partner testing phase with trading partners on October 3, 2011. This testing phase will end on December 23, 2011. This means that all trading partners must successfully test with MassHealth by that date to ensure that they can submit 5010 transactions in production on January 1, 2012. In order to ensure that all transactions are tested before implementation in a timely and efficient manner, MassHealth has developed the following implementation testing timeline.

Date	First/Last Days of Testing Activity	
08/16/2011	This was the first day that MassHealth began testing with software vendors and billing Intermediary trading partners.	
10/03/2011	This was the first day that MassHealth began testing with all other trading partners.	
11/23/2011	This is the last day that MassHealth will accept an initial test file from any trading partner.	
12/12/2011	This is the last day that MassHealth will accept any 5010 HIPAA test file from any trading partner before implementation.	
12/23/2011	This is the last day that MassHealth will approve a test file for 5010.	
01/03/2011	Trading partner testing resumes.	

It is imperative that you adhere to these testing timelines. If you do not submit your test files in accordance with the above testing timeline, there is no guarantee that you will be approved in time to submit production files to MassHealth on January 1, 2012. Additionally, if you do not complete trading partner testing before the deadline, it may affect your cash flow as MassHealth will not accept any 4010 transactions after it cuts over to 5010 transaction processing on January 1, 2012.

MCO Testing Timelines

MassHealth has completed internal testing of the 5010 820 transaction set and is currently in the second cycle of user acceptance testing (UAT) with the managed care entities. We are continuing with internal testing of the 5010 834 transaction set and are currently in beta testing with one managed care entity.

The 5010 cutover plans are still in the planning stage and, once the dates are finalized, they will be communicated to the managed care entities through the 5010 biweekly meetings.

4010 Transactions

Currently, MassHealth conducts trading partner testing for 4010 HIPAA batch transactions in production with new and existing providers. In order to prepare for the upcoming transition to 5010, and the natural decline in requests to convert to 4010 transaction processing, MassHealth will stop 4010 trading partner testing according to the following schedule.

Date	Last Day of Activity	
11/23/11	This is the last day that MassHealth will accept a 4010 test file for evaluation.	
11/30/11	This is the last day that MassHealth will approve a 4010 test file.	

If you are currently planning to convert to 4010 transaction processing, please ensure that you meet the deadlines noted above. MassHealth recommends that trading partners consider the timeline of the 5010 implementation testing and any efforts that would need to be expended to support 4010 production testing before requesting to convert to 4010.

5010 Cutover

MassHealth will begin to transition its 4010 transaction processing to 5010 in late December 2011. In preparation for this transition, MassHealth will outline when it will officially switch to the 5010 transaction processing. This will include, but not be limited to, the last day that MassHealth will execute a 4010 transaction in the production environment. The cutover schedule will be communicated in a future all-provider bulletin before the implementation.

EVS PC Software Update

MassHealth has updated the Eligibility Verification System PC (EVSpc) software to include HIPAA 5010 requirements for eligibility and claim status inquiries and responses. The EVSpc reports have also been enhanced to accommodate various field-length changes. On December 12, 2011, the EVSpc software and installation instructions will be available to providers for download at www.mass.gov/masshealth/5010.

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EVS PC Software Update (cont.)

To ensure that you can submit 5010 inquires in January, please ensure that you download the product and install the new software before January 1, 2012.

Important: Once you download the new 5010 software, it will override your current 4010 software. This means that you will not be able to send any 4010 transactions to MassHealth. If you plan to download the software before January 1, 2012, MassHealth recommends that you do one of the following:

- download the new software on a separate computer to ensure that your 4010 data is not erased; or
- download the new software only when you are ready to submit 5010 inquiries to MassHealth.

The existing 4010 EVSpc software will not work after the 5010 implementation date, as MassHealth will not support dual transactions with 5010 implementation. If you have specific questions about this process, please e-mail your request to edi@mahealth.net.

Eligibility Verification

EVSpc software installation is supported **only** on Windows XP and Windows Vista. MassHealth strongly discourages providers from using Windows 7 to run EVSpc software. EVSpc software may not function correctly on Windows 7, and MassHealth cannot provide technical support for the product when used with the Windows 7 operating system.

A list of the key changes that have been made to the EVSpc software to support the 5010 mandate is listed in the table below.

Key Changes Eligibility Inquiry and Responses	Key Changes Claim Status Inquiry and Response
The number of characters for the following name fields has been increased.	The number of characters for the following fields has been increased:
 Name field for Provider Organization, TPL Carrier, Managed Care, Behavioral Health, 	Member first and last name; andControl and patient account number fields.
and Long Term Care Name field for member first and last name Patient account number	The member gender value "Unknown" was removed from the dropdown box and member gender.
 Tracking number The Member day,night, and cell phone number 	The date of birth was removed from the claim detail response screen.
has been removed from the Member Information tab of the Eligibility response screen.	A claim reference identifier has been added to the claim status inquiry and response screen.
	A new line item control number has been added to the claim status response screen.

Important Reminders

Paper Reduction

As of January 1, 2012, MassHealth will require all claims to be submitted in an electronic format, unless the provider has received an approved electronic claim submission waiver. If you currently have difficulty submitting claims electronically, and meet the criteria for a waiver as outlined in All Provider Bulletin 217, dated September 2011, please be sure to submit your request for a waiver beginning in November 2011, to ensure that you have the necessary approvals in place before January 1, 2012.

Coordination of Benefits (COB)

In accordance with the paper reduction initiative described in <u>All Provider Bulletin 217</u>, it is imperative that you convert to electronic claim submission before January 1, 2012. You may use any of the following electronic options to submit COB claims to MassHealth.

- 837P and 837I COB
- direct data entry (DDE) of COB through the Provider Online Service Center (POSC)

Do not delay. If you have not yet converted to any of the electronic options noted above, please contact MassHealth immediately to discuss your billing transition. For DDE, call 1-800-841-2900. For batch transaction processing, contact the EDI team at edi@mahealth.net.

Training

In order to effectively support the transition from paper claims to electronic claims, MassHealth has scheduled a number of POSC DDE training sessions between October 2011 and January 2012. MassHealth encourages you to sign up for the DDE training sessions to ensure that you and your staff are trained and prepared to submit claims via DDE in January 2012.

Schedule your training session today by going to www.mass.gov/masshealth and clicking on Provider Training to view the schedule and register. You can also register by contacting MassHealth Customer Service at 1-800-841-2900.

Please visit the 5010 Web page at www.mass.gov/masshealth/5010 to view the POSC DDE job aid, along with other 5010-related job aids and preparation documents.

Questions

If you have any questions about the information in this bulletin, please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.