



Recondo Readiness for Health Insurance Portability and Accountability Act (HIPAA) Compliance with the Mandated 5010 Transaction Standard, January 1, 2012

- Q: Will Recondo be ready for the mandated HIPAA 5010 compliance by January 1, 2012?
- A: Yes. Recondo has assigned resources to 5010 compliance who are currently testing with various payer and client entities and will be compliant by the deadline.
- Q: What is HIPAA 5010 and what does it mean?
- A: HIPAA 5010 refers to an Electronic Data Interchange (EDI) transaction standard for health care-related EDI transactions. The Secretary of the Department of Human Services adopted 5010 to replace the current version, 4010/4010A1, and the new 5010 standard is mandated to be implemented by January 1, 2012, by all HIPAA “covered entities.”

The 5010 mandate includes new and updated standards for eligibility inquiries and responses, claims, remittance advice, authorizations, referrals, and other health care administrative transactions.

This mandate will affect all electronic health care transactions currently exchanged among providers and payers in the 4010/4010A1

Recondo is testing the following transactions in the 5010 standard format.

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| 270/271 | Health Care Eligibility Benefit Inquiry and Response |
| 276/277 | Health Care Claim Status Request and Response |
| 278 | Health Care Services – Request for Review and Response; Health Care Services Notification and Acknowledgment |
| 835 | Health Care Claim Payment/Advice |
| 837 | Health Care Claim (Professional , Institutional, and Dental), including coordination of benefits (COB) and subrogation claims |



Q: How is Recondo Technology preparing for the 5010 standard?

A: Level II Compliance: Recondo is actively testing and certifying transactions to prepare for the January 1, 2012 deadline. Our 5010 team has modified our systems to accept and send 5010 compliant EDI transactions.

Q: How will Recondo help payers, providers, and business partners move to the 5010 standard?

A: Recondo is actively testing with our clients, their vendors and active payers to ensure a smooth and successful transition to the 5010 standard. Our testing of transactions with the various entities involved allows us to deliver a complete, tested/certified result.

Q: Will Recondo support both 4010 and 5010 transaction standards?

A: Yes. Recondo will be prepared to accept 4010A1 transactions and convert those transactions to the 5010 standard for payers capable of receiving 5010 transactions. Recondo will also continue to send 4010A1 transactions to payers that haven't converted to the new 5010 standard.

In parallel, if a provider sends 5010 transactions to Recondo services, those services will convert 5010 transactions to 4010A1 (assuming no new 5010 functionality is used) for payers not capable of receiving 5010 transactions.

Q: When is 5010 effective?

A: 5010 must be implemented by January 1, 2012. All submitters must send electronic transactions in the new format as of January 1, 2012.

Q: How will the new 5010 standards help US health care?

A: The new 5010 HIPAA standards offer many benefits, including clarifying NPI use and addressing the shortcomings of the 4010 transaction. The new standard also allows for enough flexibility to accommodate the ICD-10 coding standard, especially increasing relevant coding field lengths from three-to-five characters to three-to-seven characters. All HIPAA "covered entities" are mandated to be compliant with ICD-10 by October 1, 2013.



Q: Which 5010 transactions will Recondo support?

A: Recondo will support the necessary 5010 transactions as utilized by our products. At this time, the following 5010 transactions are needed and in process

270/271 Health Care Eligibility Benefit Inquiry and Response

276/277 Health Care Claim Status Request and Response

278 Health Care Services – Request for Review and Response; Health Care Services Notification and Acknowledgment

835 Health Care Claim Payment/Advice

837 Health Care Claim (Professional , Institutional, and Dental), including coordination of benefits (COB) and subrogation claims

Q: Who is required to conform to the new 5010 standard?

A: The federal government has issued a final rule to modify mandated HIPAA transactions. By January 1, 2012, all trading partners must conduct electronic business transactions that conform to the new standard.

Q: Where can I see Recondo's progress on 5010 readiness?

A: Our progress list is updated every other week and is available from this website on the 5010 Payer Status link.

Q: How do I test if I am a current Recondo EDI client?

A: If you have not been contacted to test, please contact your revenue cycle consultant or the help desk at your earliest convenience so that we can work with you on this important initiative.

Q: What about ICD-10?

A: The ICD-10 code set allows more than 14,400 different codes and permits the tracking of many new diagnoses. Using optional sub-classifications, the codes can be expanded to more than 16,000 codes. The extended code set allows more specificity around treatment and coding of primary care, mental illnesses, and external causes of injury. 5010 compliance is required to move to the ICD-10 standard, which is scheduled for adoption on October 1, 2013.

Q: Is Recondo working on ICD-10 compliance?

A: Yes, Recondo has established a task force, identified key performance objectives, and created a target plan to be on track for ICD-10 compliance by October 1, 2013.