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Top Ten Questions to Assess Provider Readiness for 5010

By Jeree Gosnell, Product Manager, PNC Healthcare PNC is positioned well for 5010 migration and to meet the U.S. Department of Health and Human Services (HHS) deadlines. More important, are your payers, clearinghouse and other Business Associates ready for 5010? Here are some questions you might want to ask your 5010 team now:

- 1. Have we completed a high-level risk analysis around 5010?
- 2. Do we have a dedicated 5010 team, including representatives from Revenue Cycle, MIS, Treasury, Accounting, Audit, Compliance, Risk Management, and Vendor Management?
- 3. Is our billing system ready for 5010? What upgrades will be required to process 837 claims transactions, and when are those upgrades scheduled?
- 4. If the answer to #3 is "not sure," have we identified a backup plan?
- 5. Are we receiving 835s from our payers? If so, do we know those payers' plans for 5010, including dates when the payers might be ready to provide 5010 test files?
- 6. What is our strategy for payers that might not be ready for 5010? Are we considering up/down conversion from 4010 to 5010? Will we accept both formats? Are we planning on engaging outside business partners to convert files from 4010 to 5010?
- 7. 5010 tightens requirements for provider to payer enrollment for eligibility (270) and claims status (276) transactions. 5010 also modifies the structure of the authorization and referral (278) transactions to align better with the 837 claim structure. Are we sending these transactions electronically to any payers now? If so, do we know those payers' enrollment requirements

under 5010?

- 8. Have we surveyed all of our Business
 Associates regarding 5010 compliance,
 including Business Associates that might
 be indirectly impacted by the changes?
 (Think about how this will impact patient
 payment lockboxes, document imaging
 vendors that might be using 835 data for
 indexing purposes, healthcare clearinghouses and other similar trading partners.)
- 9. Do we have adequate internal resources for testing, including MIS and revenue cycle staff?
- 10. Have we planned our test process?
 For example, will there be a 5010 testing database? How will patient account information be populated to the test database? Will we test 4010 and 5010 files in parallel, if files are available from Business Associates? Have test scripts been written, or will we rely on existing knowledge within the MIS and Revenue Cycle teams?

It is critical to answer these top ten questions sooner rather than later in preparation for 5010. It is a significant change for systems and business processes and it will require a dedicated team of representatives from various areas of your organization to adequately prepare for the transition.

If you have questions regarding PNC's 4010 to 5010 migration, please email pncha@pnc.com

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