



Official CMS Industry Resources for the ICD-10 Transition
www.cms.gov/ICD10



FAQs: Versions 5010 and D.0 Transition Basics

1. What is the deadline for the transition to Versions 5010 and D.0?

The deadline to Version 5010 and D.0 was January 1, 2012.

Health care providers and payers should be prepared to use the updated X12 Version 5010 and National Council for Prescription Drug Programs (NCPDP) Telecommunications Standard D.0 in Health Insurance Portability and Accountability Act (HIPAA) standard transactions since January 1, 2012.

2. What is Version 5010?

In addition to the code set changes, standards for electronic administrative transactions (such as eligibility inquiries and remittance advices) are being updated from the current Version 4010/4010A1 to Version 5010 on January 1, 2012.

3. What is Version D.0?

Version D.0 is the updated version of the NCPDP standards for pharmacy transactions that replaces version 5.1. The mandatory compliance date for Version D.0 was January 1, 2012. In addition, NCPDP Version D.0 for retail pharmacy incorporates change requests submitted by the industry to accommodate changing business needs as well as changes necessitated by the requirements of the Medicare Prescription Drug Improvement and Modernization Act (MMA).

For Version D.0 information, please visit the CMS site at: http://www.cms.gov/Versions5010andD0/01_overview.asp

4. How does the Version 5010 transition affect the transition to ICD-10?

Version 5010 supports both the ICD-9 and the ICD-10 code set structures.

It is not possible to create or transmit electronic claims using ICD-10 codes without transitioning to Version 5010 HIPAA transaction standards. Version 4010/4010A1 does not support ICD-10 codes.

5. What happens if I don't switch to Version 5010?

Electronic claims submitted on or after January 1, 2012, must use Version 5010 standards in order to be compliant.

6. Why is the transition to Version 5010 happening?

Version 5010 HIPAA transaction standards result in improved standardization for administrative and clinical data compared with the current Version 4010/4010A standards.

Unlike Version 4010/4010A, Version 5010 allows for the use of ICD-10 in electronic claims.

7. What information and resources are available from CMS for Version 5010 implementation?

CMS has resources to assist you with Version 5010 implementation.

Visit http://www.cms.gov/Versions5010andD0/01_overview.asp#TopOfPage to find out more.

In addition, educational resources such as Medicare Learning Network (MLN) articles, past National Call audio-cast and frequently asked questions can be found at http://www.cms.gov/Versions5010andD0/40_Educational_Resources.asp#TopOfPage

I062 Rheumatic aortic stenosis with insufficiency
I068 Other rheumatic aortic valve diseases
I069 Rheumatic aortic valve disease, unspecified
I070 Rheumatic tricuspid stenosis
I071 Rheumatic tricuspid insufficiency
I072 Rheumatic tricuspid stenosis and insufficiency

8. What should providers be doing now to be in compliance with Versions 5010 and D.0?

Providers who use practice management and other applicable software programs should make sure that their software programs feature the updated Versions 5010 and D.0 HIPAA transaction standards. (If you are a Medicare Fee for Service (FFS) provider, please contact your Medicare Administrative Contractor (MAC) or legacy contractors to inquire about their software/testing protocols.)

Talk to your software vendor, clearinghouse, or billing service now, and work together to make sure you have what you need to be compliant.

9. What should software vendors, clearinghouses, and third-party billing services need to be doing now to be in compliance with Versions 5010 and D.0?

The upgrade to Versions 5010 and D.0 was January 1, 2012 and is required before the October 1, 2013, ICD-10 compliance date. Health plans and providers should have successfully tested Version 5010/D.0. For more information on 5010 and D.0 implementation, please visit http://www.cms.gov/ICD10/11a_Version_5010.asp#TopOfPage

10. What should payers be doing now to be compliant with Version 5010/D.0?

Payers should have successfully completed their 5010/D.0 testing and be collaborating with their trading partners on conducting compliant transactions and maintaining the flow of operations. For more information on 5010 and D.0 implementation, please visit http://www.cms.gov/ICD10/11a_Version_5010.asp#TopOfPage.

This fact sheet was prepared as a service to the health care industry and is not intended to grant rights or impose obligations. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.



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JULY 2011

