
Program Memorandum Intermediaries/Carriers

Department of Health and
Human Services (DHHS)
HEALTH CARE FINANCING
ADMINISTRATION (HCFA)

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CHANGE REQUEST 1718

SUBJECT: HIPAA Release Testing/Production Schedule

The purpose of this Program Memorandum (PM) is to establish a schedule for the release and testing of code implementing the following scheduled Health Insurance Portability and Accountability Act (HIPAA) standard transactions:

- ASC X12N 837 version 4010 incoming claim and outgoing coordination of benefits (COB)
- ASC X12N 835 version 4010 outgoing electronic remittance advice (ERA)

This schedule is intended to show the approaches the standard system maintainers are taking to release these rather large and complicated HIPAA transactions to Carrier/FI beta and user testing. In some cases, the code will be released only for test or released with production code with no intent to execute the code in production—a departure from normal practice. The X12 incoming claim, outgoing COB, and ERA will be in production test environment by October 1, 2001. The release dates in this memorandum supersede the dates in the program memoranda that are listed in the attached release schedule.

The fiscal intermediary standard systems will release the incoming claim and COB in phases, which are described in the attachment. Phases will be cumulative (i.e., phase II will be combined with phase I in beta and so forth until 837 and 835 code is in beta in August), and the release schedule is intended to show that. The carrier standard systems will release the incoming claim and COB code 2 weeks after the regular Non-HIPAA release, thus allowing 2 weeks to test Non-HIPAA production issues. Carrier phases are also cumulative.

Carriers' translator mapping for incoming claim will be completed by June 2001 and the outbound COB will be completed by July 2001. The incoming claim maps for translators supported by the Arkansas Part A Standard System (APASS) and the Fiscal Intermediary Standard System (FISS) will be complete at the end of phase I.

HIPAA RELEASE TESTING/PRODUCTION SCHEDULE

FISCAL INTERMEDIARIES

APASS	FISS	Phase I
5/17/01	5/17/01	Part A SSM to release HIPAA to Beta CR#1391 & 1533
6/07/01	6/07/01	Release to FI Data Centers for User Testing CR1391 & 1533
APASS	FISS	Phase I and II
6/14/01	6/22/01	Part A SSM to release HIPAA to Beta CR #1391 & 1533
6/28/01	6/22/01	Release to FI Data Centers for User Testing CR1391 & 1533
APASS	FISS	Phase I and II and III
7/19/01	7/09/01	Part A SSM to release HIPAA to Beta CR#1391, 1533 & 1611
8/02/01	7/27/01	Release to FI Data Centers for User Testing CR1391, 1533 & 1611
APASS	FISS	Phases I, II, III and HIPAA 835 ERA
8/09/01	8/02/01	Release HIPAA remittance advice to Beta CR 1522
8/31/01	8/31/01	Release HIPAA remittance advice to data centers CR 1522
10/01/01	10/01/01	All fiscal intermediaries move HIPAA inbound 837, COB and ERA into production test environment.

CARRIERS

B&D	HIPAA Inbound 837 Release
4/16/01	Part B&D SSM to release HIPAA to Beta CR1094, 1417 & 1656
4/16/01	Release is available for carrier testing CR1094, 1417 & 1656
B&D	HIPAA Inbound 837 and Outbound 837 COB Release
7/16/01	Part B&D SSM to release HIPAA to Beta CR1534
7/16/01	Release is available for carrier testing CR1534
B&D	HIPAA Inbound & Outbound 837 and ERA 835 Release
8/06/01	Part B&D SSM to release HIPAA to Beta CR1094, 1417,1534, 1656 & 1523
9/03/01	Release is available for carrier testing CR1094, 1417, 1534, 1656 & 1523
10/1/01	SSM's and carriers move Inbound 837, COB and ERA into production test environment

The effective date for this PM is in chart above.

The implementation date for this PM is in chart above

These instructions should be implemented within your current operating budget.

This PM may be discarded after May 31, 2002.

Contact persons are Marlene Biggs for carrier systems (410) 786-7880 or Mbiggs@hcfa.gov and Barbara Redding for intermediary systems (410) 786-1651 or Bredding@hcfa.gov.

Attachment

ATTACHMENT

- FISS:** Phase I: Contains Mercator execution JCL, inbound 837, implementation guide edits, identify what goes on claim record and repository, identify and create new reason codes needed, create new field on claim record, and create new flat file copy book.
- Phase II: Map flat file fields to claim record, create repository file, and map flat file fields to repository file.
- Phase III: Create outbound 837 flat file, outbound 837 COB, functional acknowledgement, and repository purge process.
- APASS:** Phase I: 837 inbound translator, new flat file copybook, convert flat file to UB-92 v. 6, 837 unwrap software for wrapped 837 files.
- Phase II: Build the 997 electronic acceptance/rejection response, online display and correction of truncated fields, and the implementation guide edit module.
- Phase III: Create the outbound flat file with Medicare data and the COB 837 translator, update COB jobs, create user-designed acceptance/rejection reports, build the repository copybook, and perform duplicate file editing on new 837 files.