



MEDTRON
SOFTWARE INTELLIGENCE



123011 NEWS BLAST

MEDPM RELEASE 16.1 / 5010 INSTRUCTIONS

MEDPM Release 16.1 has been installed for your practice. This release includes additional enhancements to accommodate 5010 electronic transactions and the option to enter an e-mail address for the patient and responsible party in Patient Demographics (Add/Change) screens.

Centers for Medicare & Medicaid (CMS) announced on November 17th, 2011 that, although the compliance date remains January 1, 2012, enforcement action will not be initiated for non-compliance of 5010 electronic claims until March 31, 2012. Basically, the enforcement delay gives private payers and CMS the flexibility to continue to accept 4010 electronic claims. However, CMS announced on December 14, 2011 that Medicare Fee-For-Service submitters/receivers that have tested and been approved for 5010, which includes your practice as part of the MEDTRON Software test/approval, will be notified that they have 30 days to cutover to the 5010 version. Although MEDTRON is not aware of any practices receiving the 30 day notice, MEDTRON recommends activation of 5010 for Medicare claims/remittances and Clearinghouse claims per the steps indicated below.

NOTE: MEDDATA Service Bureau clients are successfully submitting 5010 Medicare and Clearinghouse claims and receiving 5010 Medicare remittances for ERA; and need not make any changes.

5010 Claims Activation:

The Clearinghouse and Medicare carriers, i.e., Pinnacle or Cahaba, have already been provided your submitter ID as a MEDTRON client. The carriers have setup your ID to receive 5010 claims submissions.

Prior to activation in the **MEDPM** system:

- Submit any electronic claims that have already been prepared. (Although the carrier has your practice setup for 5010, they will still accept 4010 for a short period of time.)
- Review and update the zip codes to be **zip + 4**, i.e., **704339126**, in the Setup and Support Menu: Option #15 Places of Service and Option #11 Office Locations.
Also, verify that the practice actual address in the Location Master is **NOT** a P.O. Box (the mailing address can be a P.O. Box).

To activate 5010 in the **MEDPM** system,

From any menu, **F10** for command line

At **F10** command line,

Key ANSIUPDATE, **Enter**

At **Activate ANSI Electronic Claims** screen, update fields:

'Activate ANSI for Medicare' → 5

'Activate ANSI for Clearinghouse' → 5

Enter

ACTIVATE ANSI ELECTRONIC CLAIMS		Date: 12/29/11
		Time: 15:36:19
NOTE: Prior to activating or inactivating ANSI, all current submittal files should be sent.		
Activate ANSI for Medicare ----->	5 (A/5)	
Activate ANSI for Medicaid ----->	8 (A/5)	
Activate ANSI for KidMed ----->	8 (A/5)	
Activate ANSI for Blue Cross ----->	8 (A/5)	
Activate ANSI for Clearinghouse ->	5 (A/5)	
F3=Exit		
DE920A-01		

5010 Electronic Remittance Advice (ERA) Activation:

Verify the version number of the Medicare Remit Easy Print (MREP) software your practice is using.

The version number is located on the top bar of the program, i.e.,  Medicare Remit EasyPrint v3.2.

Your practice must have v2.9 or higher to view and print a 5010 ERA. The latest version is available for download from the CMS website at:

https://www.cms.gov/AccessstoDataApplication/02_MedicareRemitEasyPrint.asp

No action is necessary in **MEDPM** to switch to 5010 ERA. In all ERA files, there is an indication of version 4010 or 5010 and the **MEDPM** application handles it accordingly.

To activate Louisiana Medicare ERA:

Complete and return the 5010 Electronic Remittance Advice (835) Migration Form (*attached*) to Pinnacle Business Solutions, Inc. via fax (501) 378-2265 or email: edi_enrollment@arkbluecross.com.

To activate Mississippi Medicare ERA:

(Do not activate until MEDTRON notifies the practice that MEDDATA Service practices have completed testing and are actively using.)

Call Cahaba GBA EDI Dept at 1-866-582-3253; provide your Submitter ID, Group PTAN, and Group NPI. Inform the EDI Dept that your practice is ready to receive 5010 production ERA files.

5010 Claims/ERA for Medicaid (LA/MS) and Blue Cross (LA/MS):

Testing with these carriers was just recently made available and MEDTRON is at various stages with each carrier. All carriers indicate they will be ready to receive production 5010 claims for the first time on January 1, 2012. The carriers also state that they will continue to accept 4010 claims after January 1, 2012. Therefore, MEDTRON advises all practices **not** to activate these carriers for 5010 claims at this time. MEDDATA Service practices will be switched to 5010 production claims with each carrier on January 1, 2012, so proper claim processing and payment can be verified.

Once verification is complete, MEDTRON clients will be notified to activate one or all of these carriers for 5010 production claims. If necessary, MEDTRON will install any program enhancements prior to the notification to activate.

If you have any questions, please contact MEDTRON's Software Support Department via

Email: support@medtronsoftware.com

-OR-

Phone: (985) 234-0599 (local)

(800) 978-0599 (toll free)

-OR-

Fax: (985) 234-0609

Thank you for your patience, as together we continue to work with the insurance carriers toward full compliance with the 5010 requirements.



5010 Electronic Remittance Advice (835) Migration Form

Submitter Number: _____

Pay to NPI: _____
(Clearinghouses, billing agents and software vendors do not complete the Pay to NPI section.)

Submitter Name: _____

Contact Name: _____

Contact Phone Number: _____

Pinnacle Business Solutions, Inc. Electronic Data Interchange (EDI) requires a minimum of one business day advance notice to complete your migration request. Business hours are from 8:00 a.m. to 4:30 p.m. CST. This form should only be used by EXISTING 835 customers requesting to be migrated from version 4010A1 to version 5010.

Effective _____, 2011, please. This form should only be used by EXISTING 835 customers requesting to be migrated from version 4010A1 to vers update my existing submitter number _____ to production version 5010 835 electronic remittance advice. As of this effective date, I understand that I will no longer receive version 4010A1 835. Version 4010A1 will not be created or recreated during or after the time you have specified.

SIGNATURE:

By signing below, I attest to the fact that I am authorized to sign the document on behalf of the party identified above.

Signature _____ Date

Printed Name _____ Title _____

Please fax your completed 5010 835 Migration Form to EDI at (501) 378-2265 or email to edi_enrollment@arkbluecross.com.

Your request must be received one business day prior to your requested effective date. Incomplete 5010 835 Migration forms, or those signed incorrectly, will not be processed.