

# OHP providers and plans

## Get ready for electronic data interchange and pharmacy point of sale changes

Beginning January 1, 2012, the Division of Medical Assistance Programs (DMAP) will switch to HIPAA 5010 and NCPDP D.0 electronic data interchange (EDI) formats. HIPAA 4010 or NCPDP 5.1 transactions will no longer be accepted. Please note that this information does **not** affect providers who use only the Provider Web Portal at <https://www.or-medicaid.gov>.

### All payers, providers and plans must comply with HIPAA 5010 by Jan. 1, 2012

All health care payers, including Medicaid, Medicare, and private health insurance carriers are moving to HIPAA 5010 transactions.

If you use something other than the phone, paper or Provider Web Portal to exchange information with DMAP, you are using EDI transactions.

All providers and plans who exchange information using EDI will need to send and accept EDI transactions in the new HIPAA 5010 formats starting Jan. 1, 2012.

### How you can prepare for HIPAA 5010

■ **Update your transactions and/or software:** Use the new Oregon MMIS Technical Specifications at [www.oregon.gov/OHA/edi/5010.shtml](http://www.oregon.gov/OHA/edi/5010.shtml).

If you use a clearinghouse, such as Availty, Emdeon, or WebMD, check with them to see if you need to make any software changes.

Plans should check with their Pharmacy Benefit Manager to make sure they can send NCPDP transactions in the 5010 format.

■ **Complete third-party and business-to-business testing:** DMAP and your clearinghouse can help. Testing should be complete by Dec. 30, 2011.

Make sure DMAP can accept the 5010 versions of your inbound transactions (*e.g.*, claims, eligibility inquiries) and that your system can accept DMAP's outbound transactions (*e.g.*, electronic remittance advice, eligibility response).

### Do you need to prepare for HIPAA 5010?

Find out by taking this quick quiz.

#### 1. How do you check OHP client eligibility and claim status?

- Provider Web Portal
- Automated Voice Response
- Call DMAP
- Something else

#### 2. How do you submit claims to DMAP?

- Provider Web Portal
- Paper claim (*e.g.*, UB-04 or CMS-1500)
- Pharmacy point of sale
- Something else

#### 3. How do you prefer to review payment (remittance) information from DMAP?

- Provider Web Portal
- Automated Voice Response
- Paper remittance advice
- Something else

**If you answered any of these questions with "Something else," HIPAA 5010 affects you.** Learn more at [www.oregon.gov/OHA/edi/5010.shtml](http://www.oregon.gov/OHA/edi/5010.shtml).



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## EDI mailbox conversion

DMAP is currently reviewing all mailboxes on the Oregon MMIS EDI server. If you have not accessed your mailbox this year, your mailbox will **not** convert to the 5010 mailbox format.

## Pharmacies must use the NCPDP D.0 point of sale format starting Jan. 1

The NCPDP D.0 version of the Oregon Medicaid Pharmacy Payer Sheet is available now on the DMAP Pharmaceutical Services billing information page at [www.dhs.state.or.us/policy/healthplan/guides/pharmacy/billing.html](http://www.dhs.state.or.us/policy/healthplan/guides/pharmacy/billing.html) (click on “Point of sale”).

- If you haven’t already, contact your Value-Added Network and software vendor to confirm your software supports the data elements in the D.0 version of the Oregon Medicaid Payer Sheet.
- Both the current and D.0 versions of the payer sheet now include DUR override information.

## 5010 and NCPDP D.0 changes will not affect Provider Web Portal availability

Providers who only use the Provider Web Portal at <https://www.or-medicaid.gov> do **not** need to take any action. DMAP has only minor Web portal changes planned for the switch to 5010 and NCPDP D.0 at this time.

## Questions?

**If you have any questions about this announcement**, contact the Provider Services Unit at [dmap.providerservices@state.or.us](mailto:dmap.providerservices@state.or.us) or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:30 p.m. and Friday 10 a.m. to 4:30 p.m. (phone lines closed 11:25 a.m. to 12:30 p.m. daily).

