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ASC X12: Electronic Health Data Interchange Standards

The healthcare industry has been taking a rapid shift from manual to electronic transactions. Providers and health insurance plans are increasingly moving towards information technology infrastructures to restructure and simplify the daily exchange of healthcare administrative data. With hospitals and individual medical practices becoming more and more digitized, it is no surprise that electronic data interchange (EDI) is on the rise. Under the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA), all covered entities that submit electronic claims for services are required to do so via a common set of standards. EDI is an electronic communication system that provides standards for exchanging data through any electronic means. There are many EDI standards—one of which is X12.

The Accredited Standards Committee (ASC X12) *develops electronic data interchange standards for national and global markets*. X12 maintains the standards and associated guidelines for many types of business and commerce and has various subcommittees that focus on specific areas. Healthcare falls under the Insurance subcommittee, X12N. As noted on the X12 website, this subcommittee:

- *Develops and maintains X12 EDI and XML standards, standards interpretations and guidelines as they relate to all aspects of insurance and insurance-related business processes*
- *Includes development and maintenance activities relating to property, casualty, health care, life, annuity, reinsurance, pensions and reporting to regulatory agencies. Insurance Subcommittee initiatives also include all products and services, such as government health care programs like Medicare*
- *Serves as a liaison with complementary insurance standards bodies, such as HL7, to coordinate standards development activities*

In 2009, pursuant to the Administrative Simplifications of the Health Insurance Portability and Accountability Act (HIPAA), the Department of Health and Human Services (HHS) finalized the transition and update from the established ASC X12 4010 and 4010A standards to Version 5010. The transition worked towards updating technical issues, accommodating new business needs and removing inconsistencies in the 4010 and 4010A standards. Physicians electronically submitting administrative transactions either directly to a health insurance payer or through a clearinghouse must use the Version 5010 transaction set.

The update to standards for certain electronic health care transactions via the transition to Version 5010 announced changes to the standard for claims for professional health services that directly affected anesthesia. Historically, anesthesia time on claims submitted to Medicare for anesthesia services was reported in minutes, whereas time was reported in units on claims to private payers. The 5010 standard changed the requirements and anesthesia time is reported in minutes to both Medicare and private payers *(Source: ASA NEWSLETTER: Volume 76, Number 3 - Practice Management: Anesthesia Claims and the 5010 Standards)*.

As exemplified by the Version 5010 standard, it is important to be aware of and current with electronic health standards that are pertinent to anesthesia and pain medicine services. The ASC X12 is currently working on the HIPAA transaction standard 6020. The 6020 Type 3 Technical Reports (TR3) includes revisions that satisfy a significant number of business needs and requests. Although the 6020 transaction standard is near completion and incorporates several changes that differ from the 5010, the 6020 TR3s will not be considered for adoption under HIPAA until further notice. The ASC X12 is holding off on publishing the 6020 version until it recognizes the industry is ready to begin another transition. Further, a change from the 5010 will require further rulemaking. The ASA will continue to keep its members informed of new rulemaking and policies as the ASC makes them available.

The ASC X12N Subcommittee holds quarterly standing meetings to discuss new issues and updates in billing and encounters. ASA is well-represented in the ASC X12N—Marc Leib, M.D., J.D. (chair of the Committee on Economics) and Morasa Shaker, CCA (ASA Payment and Practice Management Specialist) attend the meetings and participate in the process.

Please visit the ASC X12 Insurance Subcommittee page for further information on the purpose and scope of the X12N Group: ASC X12N Insurance Subcommittee – Purpose and Scope

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