

Long-Term Care Survey Alert

Industry News

CMS extends 5010 compliance period. Providers that were sweating the April 1 deadline for 5010 compliance can breathe a little easier, thanks to a March 15 CMS announcement that the agency will once again be pushing enforcement up the road. CMS first planned to require the 5010 format Jan. 1, but last November it announced a three-month delay, CMS notes in a message to providers. Now CMS is putting off 5010 enforcement another three months, to June 30.

Providers and other claims submitters "have been making steady progress," CMS said in its announcement. "The Medicare Fee-for-Service (FFS) program is currently reporting successful receipt and processing of over 70 percent of all Part A claims and over 90 percent of all Part B claims in the Version 5010 format."

But some technical glitches are still plaguing the new format. "There are still a number of outstanding issues and challenges impeding full implementation," CMS admits. CMS's Office of E-Health Standards and Services "believes that these remaining issues warrant an extension of enforcement discretion to ensure that all entities can complete the transition."

CMS plans "to expand technical assistance opportunities and eliminate remaining barriers," the agency pledges.

Note: The preceding article originally appeared in the Coding Institute's Part B Insider. For subscription information, call 1-800-508-2582.