



5010 Compliance

The Administrative Simplification Provision of the Health Insurance Portability and Accountability Act (HIPAA) requires standards for electronic transactions, such as claims (including pharmacy), remittance, eligibility and claims status. The current versions of these standards, X12 Version 4010/4010A1 and NCPDP Version 5.1 will be replaced with Version 5010 and Version D.0, respectively. The federally mandated compliance date is January 1st, 2012.

The covered entities who must comply with the new 5010 transaction standards are health care providers, health plans and health care clearinghouses. View the [HHS website](#) for additional details. WellCare plans to meet all applicable timeframes required to adopt the HIPAA 5010 transaction set as established by Health and Human Services. This means that 4010 ***transactions submitted after January 1st 2012 will not be accepted.***

WellCare will collaborate with provider organizations and other trading partners to achieve our common goal of 5010 compliance. To ensure a successful transition to 5010, WellCare encourages all providers and trading partners to test early and often. You can test with WellCare in the following manner:

- If you exchange transactions with WellCare through a clearinghouse, please contact your clearinghouse for testing. WellCare will subsequently test with the clearinghouse to ensure a smooth end-to-end transition.
- If your file exchange process is listed below, please contact #5010TestingTeam@WellCare.com :
 - Receipt of the 834 directly from WellCare, with no clearinghouse involvement
 - Submission of the 837 Encounter directly to WellCare with no clearinghouse involvement
 - Submission of the 835 directly to WellCare with no clearinghouse involvement

For any other 5010 related questions please contact: 5010_Questions@WellCare.com