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CMS to delay enforcing 5010 compliance by [Jacob Thomas](#)

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Center of Medicare and Medicaid announced that it will delay enforcing HIPAA 5010 transaction sets requiring hospitals, physician practices, health plans and claims clearinghouses to switch to using the ASC X12 Version 5010 standards for the electronic transmission of healthcare claims and other administrative communications until March 31, 2012 instead on Jan 1, 2012 as originally planned.

This decision is the outcome of industry feedback revealing that, with only about 45 days remaining before the Jan. 1, 2012 compliance date, testing between some covered entities and their trading partners has not yet reached a threshold whereby a majority of covered entities would be able to be in compliance by January 1.

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Background

HIPAA 5010 standards regulate the transmission of certain health care transactions among hospitals, physician practices, health plans and claims clearinghouses. Converting to the HIPAA 5010 standards is seen as key to the larger switch from the ICD-9 clinical coding system to the ICD-10 system.

CMS is encouraging all covered entities to continue working with their trading partners to become compliant with the new HIPAA standards and to determine their readiness to accept the new standards as of Jan. 1, 2012.

Medicalbillersandcoders.com the largest consortium of billers and coders is helping not only physicians but also billers and coders to cope up with these changes and their consultancy services assisting them to get ready for new HIPAA standards.

About Medical Billers and Coders

Medical Billers and Coders is the largest consortium of Medical Billers and Coders in the United States. Our aim is to help the physician community to reach the right expertise in the right location at the right time.

Physicians usually prefer the technology and expertise of a large billing company and the customization and attention of a local Biller Medical Billers and Coders brings out the best in both the options and caters to the exact need of the physicians' billing requirement.

From Anchorage in Alaska to Honolulu in Hawaii and from Port Orford, Oregon in the west to Boston, Massachusetts in the east our network is spread across the nation. Healthcare is well spread out and so is our representation. Our Billers will service your office within a radius of 30 miles and be discussing your billing process updates weekly. You can benefit from our consortium by:

Looking up Billers who have been servicing your specialty for years

What connects such a big network is our technology, our web based software through which we can use the best biller for the specific specialty, though doctors comfortable with their technology can

continue to do so, or switch to ours and also receive federal stimulus for it.

The benefit of centrally done operations and economies of scale is also passed to physicians/ you in terms of effective pricing.

The expertise of specialty wise billers is directed towards billing claims appropriately and getting maximum revenue for the practice.

Our billers are always updated with the latest in specialty billing regulations, state billing regulations and government regulations. They are always motivated to keep their certifications updated and know more about the industry.

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