

Medicare Fee-for-Service Part A
Health Insurance Portability and Accountability Act (HIPAA) software release:
March 5, 2012

Description	Scheduled Implementation Date
Institutional claims without National Drug Codes (NDC) are being loaded to the system with invalid characters	03/05/12
HIPAA 5010 835 ERA MIA06 VALUE on 835. OOB on 72X bills with value code 71.	03/05/12
Institutional claims are being reported on remittance advice with invalid data elements (svc06-1 and svc06-2)	03/05/12
Institutional Claims the remittance advices showed information in BPR11 and TRN04.	03/05/12
Institutional claims when Other Provider Identifiers are necessary link providers and payments	03/05/12
Institutional Claims are being reported on the remittance advice with an invalid service line descriptor in SVC06-7.	03/05/12
Financial intermediary file populating incorrect 1000A PER segment contact information on 835.	03/05/12
Institutional claim with condition code 04 are being reported on the remittance advice with incorrect Claim Adjust Reason Codes for IME claims and will be corrected to use CARC 74.	03/05/12
Institutional Claims Acknowledgement corrections for Status Information segments.	03/05/12