

Frequently Asked Questions X12N Version 7030™ TR3 Public Review and Comment Process

We are providing this FAQ to assist our customers regarding the upcoming industry review of the X12N version 7030™ transaction standards. Our goal is to heighten industry awareness, provide a foundational understanding of the process, and encourage and support our customers in their participation.

What is version 7030™?

Version 7030™ refers to the next major release of electronic health care administrative transaction standards developed by the Insurance Subcommittee (N) of X12, a national accredited standards committee. Version 7030™ includes those transactions adopted under HIPAA (as version 5010) as well as those that were not adopted by regulation.

What is a TR3?

A TR3, or Technical Report Type 3, is an X12 publication which defines details such as the structure, syntax, and business rules pertinent to an X12 electronic health care administrative transaction. TR3s are often referred to as implementation guides.

What is the purpose of the version 7030™ public review and comment period?

The purpose of the X12N public review and comment period is to give the health care industry an opportunity to review and submit feedback on the draft version of each 7030™ TR3 prior to its publication. The public review and comment period is a critical phase in ensuring that the proposed X12 transaction standards are technically and operationally sound and meet the business needs of the health care industry.

As a Change Healthcare customer, do I need to make any changes at this time?

No action or change is required for current Change Healthcare customers at this time. This communication is simply to heighten awareness and understanding of the X12N version 7030™ public review and comment process and encourage our customers to participate.

When are the Version 7030™ TR3s scheduled for public review and comment?

The Public Review and Comment Period is composed of seven staggered cycles. One or more TR3s will be made available for review in each cycle.



Why are the TR3s coming out at different times for review?

A staggered approach allows for more focused reviews and hopefully, increased participation from the industry. A copy of the schedule has been included with these FAQs.

Who can participate in the public review and comment?

Public review and comment of the version 7030™ TR3s is open to anyone. You are not required to be an X12 member to participate. Change Healthcare strongly encourages industry-wide participation in this important step in the X12 standards development process.

Will Change Healthcare be participating in the public review and comment of the version 7030™ TR3s?

Yes. Change Healthcare supports the standards development process and will be actively participating in the version 7030™ review and comment process. We have assembled enterprise-wide cross-functional teams of subject matter experts from our IT, Operations, and Solutions teams who will be reviewing the new transaction standards. Change Healthcare comments will be submitted in a controlled manner as an outcome from our internal SME cross-organizational team review.

We strongly encourage industry stakeholders and our valued customers to engage in the public review and comment process for the version 7030™ TR3s.

How can healthcare organizations participate in the version 7030™ review and comment process?

Each draft TR3 will be made available for review at forums.x12.org at the beginning of the review cycle for that TR3. Downloadable change logs are also available from the online forum. Commenters will utilize X12's commenting tool available on the forum to submit comments. X12 has provided instructions on forums.x12.org for using the reviewing and commenting tools.

Will submitted comments be private?

No, all comments will be viewable by anyone with a Commenter login on the online forum at forums.x12.org.



What does X12N do with the comments?

All comments are considered by the X12N Insurance Subcommittee. The assigned delegates and other X12N members work together to determine the appropriate action to take based on the comment (for example, accepts or rejects the proposed change) and responds to the comment in the online forum at forums.x12.org. Responses are viewable by anyone with a Commenter login.

What happens after X12N adjudicates the comments?

X12N will hold a publicly announced Informational Forum, accessible virtually and in person if held during a Standing Meeting, during which the work group responsible for the TR3 summarizes the comments received and the actions resulting from the comment. Attendees may suggest additional changes at this time.

After the Informational Forum (and consideration of any additional comments received), the final publication process begins.

Note: X12N plans to publish all version 7030™ guides together.

Will version 7030™ of the HIPAA transactions be adopted under law?

It is unknown at this time whether the Department of Health and Human Services (HHS) will adopt version 7030™ as the next transaction standard. Any regulatory activity will likely not occur until after publication of the version 7030™ TR3's and will occur independently from X12's publication process.

Who should we contact if we have additional questions?

Please reach out www.x12.org or contact Change Healthcare for assistance or questions on the process. We are here to help!



X12N Public Review and Comment Schedule

Cycle 1: September 1, 2016 – October 31, 2016
Payroll Deducted and Other Group Premium Payment for Insurance Products (820) Health Insurance Exchange Related Payments (820) Benefit Enrollment and Maintenance (834) Health Insurance Exchange: Enrollment (834)
Cycle 2: October 1, 2016 – November 30, 2016
Health Care Claim Status Request and Response (276/277) Health Care Claim Acknowledgment (277CA) Health Care Claim Pending Status Information (277P) Implementation Acknowledgment for Health Care Insurance (999)
Cycle 3: November 1, 2016 – January 30, 2017
Health Care Claim Payment Advice (835)
Cycle 4: February 2, 2017 – June 1, 2017
Health Care Claim: Professional (837P) Health Care Claim: Institutional (837I) Health Care Claim: Dental (837D) Health Care Service: Data Reporting (837R)
Cycle 5: September 1, 2017 – January 31, 2018
Health Care Services Review – Request for Review and Response (278RR) Health Care Services Review Inquiry and Response (278IR) Health Care Services Review – Notification and Acknowledgment (278NA)
Cycle 6: TBD
Health Care Eligibility/Benefit Inquiry and Response (270/271)
Cycle 7: TBD
Health Care Claim Request for Additional Information (277RFI) Additional Information to Support a Health Care Claim or Encounter (275) Additional Information to Support a Health Care Services Review (275) Application Reporting for Insurance (824)
Cycle 8: Withdrawn
Health Care Fee Schedule (832)