



## Minnesota Law Mandates Electronic Health Care Transactions in 2009

Minnesota State Statute, section 62J.536, requires all health care providers and group purchasers licensed or doing business in Minnesota to exchange eligibility requirements, claims, and remittance advices electronically using a standard format. This mandate is particularly important to providers who currently submit paper claims.

### Are you ready to comply and submit electronic health care claims by July 15<sup>th</sup>?

This means all health care providers must comply and submit health care claims electronically. Listed below are the next upcoming implementation dates for the electronic health care claims:

<u>Transaction</u>	<u>Rule Promulgated</u>	<u>Rule in Effect</u>
Health care claim (837P, 837I, and NCPDP 5.1)	July 15, 2008	July 15, 2009



UCare works with several clearinghouses to submit claims, and provide other electronic transactions. A list of clearinghouses that UCare currently works with can be found in our online Provider Manual, **Chapter 6: Claim Submission Information**, by logging on to UCare's web site: [www.ucare.org/providers/pages/providermanual.aspx](http://www.ucare.org/providers/pages/providermanual.aspx).

In collaboration with other Minnesota health plans, UCare has contracted with Infotech Global, Inc. (IGI). IGI has developed a web-based tool for health care providers to directly submit claims electronically to UCare. This tool is open to all providers with a special focus on smaller organizations who may not have an alternative solution to meet the law's requirements. For more information about the solutions IGI can provide, please visit their web site at: [www.mneconnect.com](http://www.mneconnect.com).

### Remittance Advice

Did you also know that the last set of electronic transactions is coming up in December? The following information will give you an outline of the electronic remittance advice (835) and how you can prepare your organization in advance.

<u>Transaction</u>	<u>Rule Promulgated</u>	<u>Rule in Effect</u>
Payment/Remittance advice (835)	Dec. 1, 2008	Dec. 15, 2009

Once you are set up to receive electronic payments, also known as electronic fund transfer (EFT), you will also receive the 835 file along with the EFT. This means we will eliminate sending your organization paper remittance advice and checks, and you will be in compliance with the 835 transaction. For more information and to register for EFT, please visit the EFT page of our web site at: [www.ucare.org/providers/Pages/ElectronicFundTransfer\(EFT\).aspx](http://www.ucare.org/providers/Pages/ElectronicFundTransfer(EFT).aspx).

## [Exchanging Eligibility Inquiry and Responses](#)

On Jan. 15, 2009, the first electronic transaction was implemented by exchanging eligibility inquiry and responses (270/271) between the health care provider and group purchasers. By standardizing and automating the 270/271, it became more efficient, accurate, and inexpensive for health care providers and payers to exchange these inquiries. This rule was promulgated on Jan. 12, 2008; however, it was not in effect until Jan. 15, 2009.

## [Notifying UCare of Electronic Eligibility Verifications](#)

It is important to notify UCare if you intend to verify patient eligibility using a 270/271 eligibility transaction. We prefer that you send us your contact information via e-mail directly to: [270271EligTrans@ucare.org](mailto:270271EligTrans@ucare.org).

Providers also may use the following methods to receive eligibility inquiries directly with UCare:

### [Access UCare](#)

Access UCare offers several key features to help providers streamline business operations and gain quick and easy access to valuable information. For example, Access UCare enables providers to:

- Verify a member's eligibility.
- View the status of a claim and/or referral/authorization.
- Locate participating providers.
- Download a monthly member roster (for primary care clinics only).

Access UCare registration is simple using the new "Access UCare Registration Form." For more information and to register, log on to [www.ucare.org](http://www.ucare.org). Then select "Providers," "Access UCare," and "Access UCare Registration Form."

### [Interactive Voice Response System](#)

UCare's new Interactive Voice Response (IVR) system provides a "self-service" way for providers to verify a member's eligibility or check a status of a claim via a touch tone phone.

This convenient service is available 24 hours a day, seven days a week, by calling the Provider Assistance Center line at **612-676-3300** or **1-888-531-1493 (toll free)**.

Note:

- For quick service of eligibility inquiries, be ready with the individual's date of birth and personal member identification (PMI) or UCare Member ID number.
- For quick service on claim status inquiries, be ready with the individual's claim date of service, your National Provider Identifier (NPI) number, and the UCare Member ID number.

## [Additional resources](#)

The Minnesota Department of Health (MDH) consulted with the Minnesota Uniformity Committee (AUC) to develop uniform standard companion guides for such transactions. These guides will standardize the process for checking eligibility, submitting claims, and receiving remittance advices in an electronic format for providers. In addition, guides have been developed for providers and payers to plan, program and accommodate these electronic transactions.

Please visit the AUC website at <http://www.health.state.mn.us/auc/>. It provides in-depth information regarding each electronic transaction, associated companion guides, and best practices.

Remember to continually visit UCare's web site at [www.ucare.org](http://www.ucare.org) for provider headlines, news and notes, and updates. Also, don't forget to subscribe to our E-mail List Server to receive provider news and updates, including *health lines*, via e-mail. To subscribe to the E-mail List Server, send an e-mail to [ucareproviderupdate-subscribe@ucare.org](mailto:ucareproviderupdate-subscribe@ucare.org) and you automatically will be added to the list.

UCare's **Provider Assistance Center** is available at **612-676-3300** or **1-888-531-1493 (toll free)**, Monday through Friday, 8 a.m. to 5 p.m., if you have any questions or concerns.