

Questions and Answers from

Rural Health

Open Door Forum

August 6, 2019

1. It's not really about 2020, but the changeover from losing the Eligibility Lookup on the System to HETS. And I've contacted two MACS and neither one of them had any idea what I was talking about when I said HETS. And I had contacted a vendor - outside vendor - who does this type of thing and they didn't know anything about HETS, but they offered me Eligibility Lookup and it was quite expensive. I didn't know if someone there could tell me how I was supposed to get a hold of HETS? Or if they're aware of this cost? I mean a normal cost would be close to \$10,000 a year for a hospital for this Eligibility Lookup for an outside vendor. And if that's passed onto Medicare, that could be a very high expense and loss of money to pay for health care.

a. If you are a provider currently using vendor or clearinghouse to check eligibility, the vendor/clearinghouse should automatically route the queries to HETS for a response. If you don't use a vendor/clearinghouse, you can continue to submit individual provider queries (i.e., not computer to computer queries) using the Direct Data Entry (DDE) application. Additionally, you can always use your MAC's portal for individual provider eligibility queries.

2. I recently had an opportunity to consult various Hospital Chargemasters that are posted online. And with the variable descriptions that are posted and no reference HCPCS or no reference CPT codes, it's very difficult to select and compare pricing between facilities. I know there's been controversy regarding posting CPT codes, but has there been any solution or resolution to that so that there can be from institution to institution, comparison in prices?

a. Thanks for your question. We agree with you, which is why in this year's OPPS Proposed Rule, we are proposing that when hospitals post their standard charges, they present the information in a way that allows people to compare it in an apples-to-apples way across hospitals. The proposal discusses including certain data in the file, for example common billing codes. Please let us know if there are any additional data points that you feel would be important to include for comparing prices across hospital settings, we would appreciate your comments.