

Announcement

Subject: Medicare HETS 270/271 – Information Bulletin – December 7, 2007

This Information Bulletin provides important announcements about several topics relevant to the Medicare HETS 270/271 Eligibility System including

- The end date of the HETS new user moratorium
- Revised Trading Partner Agreement
- Termination of HETS broadband and dial-up AGNS connections to the MDCN
- Availability of an Internet based HETS Provider GUI (HPG) application (Clearinghouses Only)
- Strengthening of HETS audit processes

Please carefully review this announcement in its entirety and contact the Help Desk if you have any questions or concerns.

1. End of the HETS New User Moratorium

On October 12, 2007, CMS announced a moratorium on new provider users. This moratorium will end on January 31, 2008. Therefore, effective February 1, 2008, CMS will allow new Medicare provider submitters to sign up, as well as allow existing clearinghouse submitters to add new Medicare providers/suppliers to their customer rolls (provided all submitters attest to a revised Trading Partner Agreement, see Item 2 below). Clearinghouse submitters must continue to ensure that only valid, active Medicare Legacy Provider Number and/or NPI numbers are submitted on 270 eligibility requests.

2. Revised Trading Partner Agreement

All submitters must attest to a revised Trading Partner Agreement. CMS has revised the Trading Partner Agreement for eligibility transactions. An updated Trading Partner Agreement document will be distributed to all existing submitters by December 19, 2007. Submitters must, via email, attest that they have read and understand the agreement, and agree to comply with the requirements set forth. In order to retain Medicare HETS 270/271 access, current submitters must return attestations by January 31, 2008.

3. Termination of HETS Broadband and Dial-up AGNS connections to the MDCN

CMS announces that effective immediately, all **new** HETS 270/271 eligibility submitters (both provider and clearinghouse), must utilize a dedicated AT&T Global Network Services (AGNS) connection to access the Medicare Data Center Network (MDCN), and subsequently, the HETS 270/271 application. Submitters obtain their MDCN access via AGNS connections purchased through authorized AT&T resellers.

CMS previously allowed AT&T resellers to offer broadband or dial-up connectivity to the HETS 270/271 application in the MDCN via the AGNS network. Effective immediately, because of identified security risks, this connection option will no longer be offered to new HETS 270/271 eligibility submitters. Submitters who were in the process of testing connectivity/trading with the HETS 270/271 system using a broadband or dial-up connection will need to obtain a different connectivity source before they will be permitted to complete implementation and testing.

CMS also announces that effective March 1, 2008, all **current** HETS 270/271 eligibility submitters must also utilize a dedicated AGNS connection to access the MDCN, and subsequently, the HETS 270/271 application. Effective March 1, 2008, CMS will reject all 270 eligibility requests submitted via a broadband or dial-up connection.

If you currently use a broadband or dial-up connection to connect to the HETS 270/271 application, you must take action or your HETS access will be terminated March 1, 2008. If you no longer utilize the

HETS 270/271 system or have obtained a dedicated AGNS connection, please contact the MCARE Help Desk immediately.

CMS urges affected submitters who are utilizing a broadband or dial-up connection to obtain a new connection method before March 1, 2008, so they will not lose service. Impacted submitters may consider the following connection alternatives:

- Contact an approved AT&T reseller to discuss upgrading your AGNS account from broadband/dial-up to a dedicated connection.¹
- Contact a third party vendor that resells network capacity on an existing dedicated connection to entitled submitters.
- If you are a provider submitter, contact a healthcare clearinghouse that utilizes the Medicare HETS 270/271 eligibility system and submit your transaction via a clearinghouse.

If you have any questions or need additional information regarding your current connection to the HETS 270/271 application, please contact the MCARE Help Desk immediately.

4. Availability of an Internet Based HETS Provider GUI (HPG) Application (CLEARINGHOUSES ONLY)

CMS announced availability of the HETS Provider GUI (HPG) application to registered clearinghouse submitters on September 4, 2007. The HPG is an application that assists clearinghouses to validate Medicare Legacy Provider and NPI numbers. HPG currently requires extranet connectivity to the MDCN. Some clearinghouses have encountered difficulties connecting to this application in its current location.

To resolve this situation and as requested by clearinghouse submitters, effective December 22, 2007, the HPG application will be available exclusively via the Internet. Current clearinghouse users will need to modify their connectivity as of this date. HPG Access will still require a User ID and password, but this change will resolve all outstanding connectivity issues. Before December 22, 2007, CMS will publish an updated HPG User Guide that will include necessary technical details.

5. Strengthening HETS Audit Processes

CMS continues to conduct random audits of HETS 270/271 transactions. Components of these audits ensure that submitters are complying with the requirement to submit 270 eligibility requests only for valid, active Medicare providers and/or suppliers.

Effective March 1, 2008, CMS will strengthen the Medicare provider audit criteria for clearinghouse submitters. CMS will set a 97% match requirement to allow for occasional typographic errors, lags in provider enrollment and updates to HPG data. Therefore, CMS will institute audits requiring that no more than 3% of provider and/or NPI numbers (Medicare provider identifiers) can be in error, and that at least 97% of all transactions submitted contain a valid, authenticated Medicare provider identifier.

To prepare clearinghouse submitters for the new audit criteria, CMS will issue reports outlining past audit performance. These reports will be distributed no later than Wednesday, December 12, 2007. Please contact the Help Desk if you do not receive your report, or have any questions about the data in the report.

¹ AT&T reseller contact information can be found online at: http://www.cms.hhs.gov/HETSHelp/02_SignUpNow.asp#TopOfPage

Submitters who fail random audits will face suspension of their trading privileges.

HETS 270/271 Suspension Procedures

- If results from a random audit fail audit criteria, the clearinghouse access will automatically be suspended without notice for the 24 hour period following the audit.
- After three such suspensions, the clearinghouse access will be terminated until a written Corrective Action Plan (CAP) outlining steps that will be taken to improve future audit results is submitted and accepted by CMS.
- Clearinghouses with repeated terminations will face penalties up to and including permanent suspension of HETS 270/271 trading privileges.

Per the Trading Partner Agreement, all HETS 270/271 submitters take the necessary steps to ensure that only valid, active Medicare providers receive beneficiary eligibility information. Your cooperation in this endeavor is vital.

If you have questions about any information contained within this email, please contact the Help Desk immediately.

**Medicare Customer Assistance Re: Eligibility (MCARE) Help Desk
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