



**HIPAA Eligibility Transaction System
(HETS)
270/271**

R2012Q300 Release Summary

Document Version 3-0 FINAL
Implementation Date: Fourth Quarter 2012

R2012Q300 HETS 270/271 High Level Release

Summary of Impact on Trading Partners

The purpose of this summary document is to inform submitters of intended upcoming changes to the HIPAA Eligibility Transaction System (HETS) 270/271 application. The R2012Q300 HETS 270/271 release will address the new federally mandated Operating Rules which are effective 1/1/2013. The Department of Health and Human Services (HHS) has named the Council for Affordable Quality Health Care (CAQH) Committee on Operating Rules for Information Exchange (CORE) the authoring entity of the mandated Operating Rules. HETS will implement changes based on the following rules: 152, 154/260, 156, 157, 258 and 259.

For a copy of the mandated Operating Rules, please refer to:
http://www.caqh.org/CORE_operat_rules.php.

Changes in this release include:

- Expanded List of Supported Service Type Codes (STC)
- Handling of HETS Non-Supported STCs or No STC Requested
- Coverage Status for Requested and Supported STCs
- Changes to the 271 Response
- Changes to STC 30 Response
- Expanded Plan Level Financial Liability
- Expanded Beneficiary Financial Liability Detail
- Modified AAA Error Responses

Please refer to the following summary for additional information. Due to the extent of the upcoming changes, information included in this document is subject to change. Changes will be communicated as necessary.

Specific examples of 270/271 transactions will follow in a subsequent document.

1 Supported STCs and Coverage Status

1.1 Supported STCs on the 270

The following STCs will be supported by HETS in the 270 Request:

- 1, 2, 3, 4, 5, 6, 7, 8, 10, 12, 13, 14, 15, 18, 20, 23, 24, 25, 26, 27, 28, 30, 33, 35, 36, 37, 38, 39, 40, 41, 42, 45, 47, 48, 49, 50, 51, 52, 53, 54, 62, 65, 67, 68, 69, 73, 76, 78, 80, 81, 82, 83, 86, 88, 93, 98, 99, A0, A3, A4, A5, A6, A7, A8, AD, AE, AF, AG, AI, AJ, AK, AL, BF, BG, BH, BT, BU, BV, DM, UC, MH

The following STCs will be supported and returned as covered under Part A:

- 10, 15, 42, 45, 48, 49, 65, 69, 76, 78, 83, A5, A7, AG, BT, BU, BV

The following STCs will be supported and returned as covered under Part B:

- 2, 3, 4, 5, 6, 7, 8, 10, 12, 13, 14, 18, 20, 23, 24, 25, 26, 27, 28, 33, 36, 37, 38, 39, 40, 42, 50, 51, 52, 53, 62, 65, 67, 69, 73, 76, 78, 80, 81, 83, 86, 93, 98, 99, A0, A3, A4, A6, A8, AD, AE, AF, AI, AJ, AK, AL, BF, BG, BH, BT, BU, BV, DM, UC

All other STCs not listed will not be supported by HETS and will continue to be disregarded if included on a 270 request. For additional information on STCs, please refer to Section 7.2 of the HETS 270/271 Companion Guide.

1.2 Coverage Status

HETS will return the Coverage Status of all requested and supported STCs except for the following:

- When STCs **1, 35, 47 and/or MH** are requested, HETS will return the coverage status of **only** the “child” component STCs that are defined in the 5010 TR3 (formerly called the Implementation Guide) as specified on pages 22 and 23. Example: Components returned for STC 47 are STCs 48 - 53.
- When no STC, a non-supported STC, or STC 30 is requested, the coverage status for all of the following STCs will be returned:
 - 2, 3, 23, 24, 25, 26, 27, 28, 33, 36, 37, 38, 39, 40, 41, 42, 45, 48, 49, 50, 51, 52, 53, 54, 67, 69, 73, 76, 83, 86, 88, 98, A4, A5, A6, A7, A8, AG, AI, AJ, AK, AL, BT, BU, BV, DM, UC

The coverage status of the Part A covered STCs (identified in Section 1.1) will be returned in the Part A entitlement 2110C loop EB01 data element.

- If AG, 47, 48, or 49 is requested, the coverage status for both 48 and 49 are also returned.

The coverage status of the Part B covered STCs (identified in Section 1.1) will be returned in the Part B entitlement 2110C loop EB01 data element.

- If AF is requested, the coverage status for both AE and AF will be returned; however, if AE is requested, only the coverage status for AE will be returned.

When STC 88 (or STC 88 as component of STC 30) is requested, a separate specific coverage status 2110C loop is returned for STC 88 as follows:

- EB01=1 when the beneficiary has Part D plan coverage
- EB01=6 when the beneficiary does not have Part D plan coverage

The following STCs will be supported but returned as not covered (EB01= I) under Medicare:

- 41, 54, 68, 82

2 Changes to the 271 Response

The following data will be returned on every 271 response when active Part A and/or Part B entitlement exists, regardless of the requested STC:

- Beneficiary Demographics
- Part A and B Entitlement including any Periods of Inactivity
- Coverage Status of all Requested and Supported STCs (as noted above)
- MSP, MA, and Part D Plan Enrollment Information
- Plan Level Financial Information

When STC 1, 35, or MH is requested, no benefit data associated with Medicare services will be returned; only the coverage status of their child components will be returned.

When STC 47, 48, or 49 is requested, applicable Inpatient Hospital Spells will be returned.

To receive the following benefit data, the specific STC (noted below) must be requested:

- AD - Occupational Therapy
- AE, AF - Physical and Speech Therapy (combined)
- AG - Inpatient Hospital/SNF Spell
- BF - Pulmonary Rehabilitation
- BG - Cardiac Rehabilitation
- 10 - Blood Charges
- 14, 15 - ESRD
- 30 - Preventive Services
- 42 - Home Health
- 45 - Hospice
- 47, 48, 49 - Inpatient Hospital Spell
- 67- Smoking Cessation

3 Changes to STC 30

When STC 30 is requested on the 270, the benefits associated with the following Medicare Services will be returned:

- Preventive Services (returned using HCPCS)

The benefits associated with the following Medicare services will no longer be returned when STC 30 is requested on the 270:

- Occupational and Physical/Speech Therapy
- Pulmonary and Cardiac Rehabilitation
- Blood Charges
- Smoking Cessation

4 Plan Level Financial Liability

4.1 Part A Financials

The following financial information will be returned on every 271 response where Part A entitlement exists in 2110C loops:

- The base Part A deductible amount for each calendar year within the date/date range on the 270 request.
- The base Part A deductible amount for each calendar year of any intersecting inpatient spell(s). (Sent in an additional 2110C Loop)
- The remaining Part A deductible amount for each calendar year within the date/date range on the 270 request.
- The remaining Part A deductible amount for each calendar year of any intersecting spell(s) (Sent in an additional 2110C Loop)
- The remaining Part A deductible amount and applicable DOEBA/DOLBA dates for every spell that intersects the date/date range on the 270 request.

STCs 42 (Home Health) and 45 (Hospice) are Medicare Part A covered at 100% and therefore do not apply to the Part A deductible. When these STCs are requested and the beneficiary has Part A entitlement, the following financial information, specific to these STCs, will be returned to distinguish the differing plan level beneficiary responsibility:

- Base Part A Deductible = zero (Sent in an additional 2110C Loop)

4.2 Part B Financials

The following financial information will be returned on every 271 response where Part B entitlement exists:

- The base Part B deductible amount for every calendar year within the date/date range on the 270 request.(NEW)
- The remaining Part B deductible amount for every calendar year within the date/date range on the 270 request.

The following financial information will be returned when the STC requested is covered under Part B and where Part B entitlement exists:

- The Part B co-insurance amount for every calendar year within the date/date range on the 270 request.(NEW)

STCs 5 (Diagnostic Lab), 42 (Home Health), 67 (Smoking Cessation), and AJ (Alcoholism) are Medicare Part B covered at 100% and, therefore do not apply to the Part B deductible and co-insurance. When these STCs are requested and the beneficiary has Part B entitlement, the following financial information, specific to these STCs, will be returned to distinguish the differing plan level beneficiary responsibility:

- Base Part B Deductible = zero (Sent in an additional 2110C Loop)
- No Part B co-insurance applies and the STC will not be included in the Part B Coinsurance Loop

5 Beneficiary Financial Liability

5.1 Benefit Financial and Accumulator Changes

Additional benefit loops, which include financial or other beneficiary accumulators, will be added to the HETS 271 response for the following STCs. An example of what is currently being returned on the HETS 271 response is posted on HETSHelp at: <http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/HETSHelp/index.html>

- STC 47, 48, 49 or AG - (Hospital- Inpatient/SNF) - The HETS 271 will now return base amounts for all accumulators currently returned under Hospital and SNF, as well as copayment amounts applicable per day per benefit period. In addition, the information presently sent will continue to be returned.
- STC 10 (Blood) - The HETS 271 will now return the base number of pints per year for which the beneficiary is liable before Medicare coverage of this Service Type begins. In addition, the information presently sent will continue to be returned.
- STC 67 (Smoking Cessation) - The HETS 271 will now return the base number of sessions authorized by Medicare. In addition, the information presently sent will continue to be returned.
- STC 30 (Preventive HCPCS codes) - The HETS 271 will return Preventive data as is currently done today. Preventive beneficiary financial liability will be forthcoming in a future HETS release.
- STC AD, AE, AF (Therapy changes) – The HETS 271 will now return the used dollar amount that has already been applied to the therapy capitation limit instead of the capitation amount remaining.

6 Modified AAA Error Responses

The following are the two modified AAA errors. Refer to Section 8.3, Table 7 of the HETS 270/271 Companion Guide for additional information on AAA error handling.

- If both the DOB and First Name are missing, then HETS will return AAA03 = 58 instead of AAA03 = 15.
- If the HICN is missing, then HETS will return AAA03 = 72 instead of a 999 error.