Centers for Medicare & Medicaid Services
Office of Information Technology

Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System: HETS 270/271

R2023Q200 Release Summary Document

Version 1.0

4/28/2023

Table of Contents

List of Tables

1. Introduction

The purpose of this document is to inform Submitters of upcoming changes to the Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System (HETS) 270/271 application that may be implemented with the HETS 270/271 R2023Q200 Release.

2. Overview of Release

The HETS R2023Q200 Release will introduce changes to the HETS 271 response.

The following section documents the confirmed and potential R2023Q200 changes.

3. Summary of Impact on Trading Partners

3.1 Update Financial Data for Select Preventive Service (Colorectal Cancer Screening) HCPCS

The HETS 271 response typically returns specific Medicare Part B financial data for submitted Preventive HCPCS code(s) when the Medicare Beneficiary has active Medicare Part B coverage and there is no recorded Date of Death on file. However, HETS is not currently returning Medicare Part B coinsurance data for the following Preventive services:

- Colorectal Cancer Screening (COLO) codes G0106 and G0120

Effective with the HETS R2023Q200 release, HETS will begin returning the expected Medicare Part B coinsurance data for these Preventive services.

All other HETS Preventive Service Financial Rules remain unchanged. Refer to Section 7.7.2 of the HETS 270/271 Companion Guide for additional information on current HETS Medicare Part B Preventive Service Financial handling.

3.2 Update Medicare Secondary Payer (MSP) Eligibility Response

The HETS 271 response returns all Medicare Beneficiary insurance coverage policies that are primary to Medicare coverage if the MSP enrollment period overlaps the requested Date(s) of Service. Effective with this release, the HETS 271 response for MSP coverage will be enhanced to return additional data elements when available.

- Example of the updated MSP 271 response. New/updated components are **bolded & italicized.**

  EB*R**30*14~ (EB04 = MSP Insurance Type Code)

  REF*IG*54321~ (REF02 = MSP Policy Number)

  REF*6P*8675309~ (REF02 = MSP Group Number)

  DTP*290*D8*CCYYMMDD~ (Ongoing MSP enrollment period)

  DTP*636*D8*CCYYMMDD~ (DTP03 = Last MSP Maintenance Date)

  MSG*M545,M542,M25512,M25412,S40012A,G5622~ (MSP diagnosis codes)

  MSG*Source Code- MSPSOURCECODE– MSP SOURCECODE VALUE DESCRIPTOR~

  MSG*Patient Relationship- MSPPATIENTRELATIONSHIPCODE– MSP PATIENT RELATIONSHIP CODE VALUE DESCRIPTOR~

  LS*2120~

  NM1*PRP*2*XYZ HEALTHPLAN~

  N3*987 BROADWAY~

  N4*ANYTOWN*HI*999999999~

  LE*2120~

  EB*R**30*14~ (EB04 = MSP Insurance Type Code)

  REF*IG*12345~ (REF02 = MSP Policy Number)

  REF*6P*8675309~ (REF02 = MSP Group Number)

  DTP*290*RD8*CCYYMMDD-CCYYMMDD~ (Completed MSP enrollment period)

  DTP*636*D8*CCYYMMDD~ (DTP03 = Last MSP Maintenance Date)

  MSG*S8002XA,S40012A,S93609A,G5622~ (MSP related diagnosis codes)

  MSG*Source Code- MSPSOURCECODE– MSP SOURCECODE VALUE DESCRIPTOR~

  MSG*Patient Relationship- MSPPATIENTRELATIONSHIPCODE– MSP PATIENT RELATIONSHIP CODE VALUE DESCRIPTOR~

  LS*2120~

  NM1*PRP*2*ABC HEALTHPLAN~

  N3*123 MAIN ST~

  N4*ANYTOWN*MD*21204~

  LE*2120~

All other HETS MSP Rules remain unchanged. Refer to Section 7.20 of the HETS 270/271 Companion Guide for additional information on current HETS Medicare MSP handling.

Appendix A. Record of Changes

Table 1 provides a summary of changes made to this document.

Table 1 - Document Revision History

Version	Date	Description of Changes
1.0	04/28/2023	Base Version