



Health Insurance Portability and Accountability Act

*Michigan Department
of Community Health*



HIPAA Seminar Series Summer 2004

1

What You Will Learn About Today

1. The End of the Contingency Period for Electronic Claims
2. How to Receive the New Electronic Remittance from Medicaid
3. Crossover Claims Between WPS and Medicaid
4. How to Subscribe to the New Trading Partners e-mail Service to Receive the Latest Updates from Medicaid

2

Are You Prepared for the End of the HIPAA Transactions Contingency Period?

What is the “Contingency Period?”

- The Centers for Medicare and Medicaid Services (CMS) created the Contingency Period to give providers and their electronic submitters more time to prepare and comply with the HIPAA law
- It allowed payers to continue to accept non-compliant electronic claims after the October 16, 2003 deadline

When Does the Contingency End?

- All non-HIPAA compliant claim formats will be retired November 1, 2004 for Michigan's Medicaid program

5

To Continue to Receive Payments from Medicaid you should:

- Convert electronic claims to the HIPAA compliant claims format ANSI x12N 837 v. 4010A1
 - If you're not sure, verify with your electronic submitter
- Convert to HIPAA compliant code sets
 - All code sets must be updated to current compliant versions

6

How to Become HIPAA Compliant?

- Partner with an “approved” vendor or billing service
- If your current partner is not “approved,” consider finding a vendor or clearinghouse that is HIPAA compliant

7

837 v.4010A1 HIPAA Compliance Update – Medicaid Still Lagging

- Medicaid providers are still lagging Medicare providers in the submission of 837 v. 4010A1 claim transactions
 - Medicare Part A for Michigan – 99%
 - Medicare Part B for Michigan – 89%
 - Medicaid Institutional – 60%
 - Medicaid Professional – 73%

8

What Resources are Available to Help?

- B2B testing and help is available for all Medicaid providers and their trading partners on a first come first served basis
- Contact Jim Kunz at kunzj@michigan.gov for more information

835 Electronic Remittance

What is an 835 Remittance?

- The 835 Remittance is a HIPAA compliant electronic transaction (ANSI x12n 835 v.4010A1)
- This transaction is the companion to the 837 claims transaction
- The 835 Remittance electronically cross-references claim information and provides electronic submitters with detailed payment information

11

MDCH Currently Testing Electronic 835 Remittance

- Michigan Medicaid is currently sending 835 electronic Remittance Advice (RA) transaction to Medicaid providers or service bureaus that choose to receive one

12

What Do I Need to Do to Receive an 835?

1. Complete the Trading Partner Agreement

- Medicaid providers should make sure they have completed the new Trading Partner Agreement
- Confirm you enrollment information
- Verify enrollment information at:
<https://tpa.mihealth.org>
Call Provider Inquiry 800-292-2550

13

What Do I Need to Do to Receive an 835? (cont)

2. Choose a Unique Receiving Service Bureau

- Choose one Unique Receiving Service Bureau (URSB) per tax identification number (TIN)
- Identify your URSB to Medicaid by its service bureau ID number
- Contact Karen Parker, manager of the MDCH Provider Support unit, to confirm:
517- 335-5455
parkerk@michigan.gov

14

835s to be Issued by Tax ID

- Facilities and multiple provider practices that operate under one TIN will be issued a single consolidated 835 RA
- This process mirrors Medicaid's payment procedure: one check or electronic fund transfer (EFT) per tax ID number
- 835s must be consolidated so that the transaction balances to the single payment device

15

Facilities and Multiple Provider Practices: Where Do You Want Your Checks Sent?

- Facilities and multiple provider practices that operate under one Tax ID number will be issued a single check delivered to one designated location
- Multiple addresses cannot be paid
- Medicaid needs to obtain the single address associated with your Tax ID number
- Contact Provider Inquiry at 800-292-2550 to identify your designated payment location

16

Crossover Claims

What are Crossover Claims?

- Crossover Claims enable a provider to electronically submit a single patient claim to two payers saving time, money and improving cash flow
- Michigan Medicaid has signed a MOU with Wisconsin Physician Services and tested the crossover process.
- Michigan Medicaid has begun accepting Medicare Part B Crossover Claims from Wisconsin Physician Services (WPS) for patients that are dual eligible for both Medicare and Medicaid

What are Crossover Claims? (cont)

- **The claim can be “crossed-over” to Medicaid from WPS without any additional work...providing the submitter includes their Medicaid ID number on the 4010A1 format**

What You Should Know About Crossover Claims:

1. WPS is the only Medicare Part B carrier submitting crossovers to Michigan Medicaid
2. Conversion to the ASC x12N 837 4010A1 format will expedite claim processing
3. **“Crossed-over” claims cannot be paid without the provider’s Medicaid ID number**

What's the Most Important Thing to Know About Crossover Claims?

- Converting to 4010A1 format and including your Medicaid Provider ID number are key to your crossover claim being processed
- The Medicaid provider ID must be reported in addition to the Medicare provider ID by repeating Loop ID 2010AA REF01 and REF02 on a crossover claim, as follows:
 - Loop ID 2010AA REF01: Enter “1D” for Medicaid
 - Loop ID 2010AA REF02: Enter the 9-digit Medicaid provider ID (2-digit provider type followed by the 7-digit number)

21

Need More Detailed Information About Crossover Claims? Read:

- [MDCH Bulletin \(All Provider 04-05\)](#)
- [Medicare-Medicaid Crossover Claims FAQ](#)
- www.michigan.gov/mdch

22

Trading Partners e-mail Service

Get the Latest Updates from
Michigan Medicaid via e-mail

Subscribe to the Trading Partners e-mail Service

- It's FREE
- It's easy to join
- It's organized by provider type

What Do You Get From the Trading Partners e-mail Service?

- Late breaking news
- Information
- Training opportunities from Michigan Medicaid
- Policy changes
- Transactions information
- Billing code information

25

How Do You Get the Information?

- Via e-mail
- Subscribe at: <http://www.mihealth.org/tp/subscribe.aspx>

26

Contact Information

Contact Information

- Trading Partners Support
Contact Provider Inquiry 800-292-2550
ProviderSupport@michigan.gov
- 835 B2B Testing with Medicaid
kunzj@michigan.gov
- Michigan Medicaid
<http://www.michigan.gov/mdch>

Contact Information (cont)

- Electronic Fund Transfer (EFT)
Contract & Payment Express
<http://www.cpexpress.state.mi.us>
- mihealth.org — Your Link to Michigan Health Resources
<http://www.mihealth.org>
- Trading Partners List Serve
<http://www.mihealth.org/tp/subscribe.aspx>