

Quick Points



April 27, 2009

New Minnesota law for standardized electronic claims submission

Minnesota Statute 62J.536, requires health care providers and group purchasers (payers, health plans) to exchange claims electronically using a standard format beginning July 15, 2009. If you currently submit paper claims, you must explore your options for electronic claim submission and prepare to be in compliance. The intent of the law is to reduce costs, simplify and speed up health care transactions, and to give providers and health plans one set of rules to follow for electronic transactions. This statute applies to all health care providers that submit claims regardless of participating status.

Blue Cross is prepared to help

Blue Cross and Blue Shield of Minnesota, along with several other Minnesota health plans, have contracted with Infotech Global, Inc. (IGI) to offer providers a tool to easily meet the July 15 electronic claims submission deadline. This web-based tool is at no cost to providers and may be used by any provider, regardless of size.

Providers may register for the service starting May 15, 2009, with claims submission for Blue Cross to begin on July 15, 2009.

The eight health plans initially offering this tool, Blue Cross and Blue Shield of Minnesota, FirstPlan of Minnesota, HealthPartners, Medica, Metropolitan Health Plan, PreferredOne, Sanford Health Plan and UCare, will appear in the menu on the website. While the solution is free for submitting claims, providers may purchase other parts of the tool to meet the eligibility and payment/remittance requirements. Providers, of course, may also use other solutions they may have to meet the law's requirements.

Questions?

If you want to register to send electronic claim transactions through this free tool, follow the registration process found on the website at www.mneconnect.com. The website will be available no later than May 15, 2009.

For information on sending electronic claims (837 professional or institutional) transactions, contact ClearConnect Sales and Marketing at (651) 662-5742, option 2 or toll free at 1-866-251-6742, option 2. To register for ClearConnect services, use the online registration at www.clearconnect.com. You do not need to register with ClearConnect if you are registering with IGI.

If you already send claims electronically, watch for more information coming soon about changes to submission to Blue Cross, including where to submit claim attachments and when to submit previous carrier payment information.

Enclosure: Website offers free electronic claims submission to Minnesota health plans

Web site offers free electronic claims submission to Minnesota health plans

- 1. Minnesota health plans are offering a free tool to electronically submit claims. Why do we need this?** This is part of a state law that takes effect on July 15. Minnesota's health plans are offering health care providers a tool to easily submit claims electronically. The tool is a Web-based product developed by Infotech Global, Inc. (IGI)
- 2. Do providers have to use this or can they use their own vendors?** Providers are welcome to use this tool or any other solution they may have that meets the law's requirements. Health plans are offering this because of concerns voiced by many small providers that they may not be able to meet the state's July 15 deadline. These providers submit thousands of claims.
- 3. How much does the solution cost providers?** Providers can use this tool to submit claims free of charge. The vendor also offers tools that providers can purchase to meet other requirements in the law (checking eligibility and remittance); some payers may also offer these components. Watch for more details directly from payers.
- 4. Who is the vendor and how do providers register?** Providers may register starting May 15. Claims submission for some payers will be available June 1. Details on where to register and how will be announced soon.
- 5. How does this tool work?** These five steps highlight how the tool works:
 1. Provider registers online
 2. Health plan receives confirmation of provider registration
 3. Provider enters claims using the online tool, which is similar to the standard paper forms providers use today
 4. The tool flags any errors that providers can immediately correct to ensure compliance with the state and HIPAA requirements
 5. Provider clicks send, health plan receives compliant electronic claim
- 6. What health plans are offering this tool?** The health plans initially offering this tool are: Blue Cross and Blue Shield of Minnesota, FirstPlan of Minnesota, HealthPartners, Medica, Metropolitan Health Plan, PreferredOne, Sanford Health Plan and UCare. Other payers that choose to contract with IGI will also be listed on the Website.
- 7. How do other payers get signed up?** They should contact Mike Relli, IGI vice president of business development, 732-652-1518 or Mike.Relli@igiusa.com.
- 8. May any provider use the tool?** Yes. While the tool is open to all providers, it was sought for smaller organizations that send claims to Minnesota's health plans such as psychologists or chiropractors who provide direct care to patients, as well as those who offer services such as transportation to appointments or build a ramp to the home of a person who is physically disabled. Examples of providers who could benefit include:
 - Special transport providers
 - Licensed psychologists
 - Chiropractors
 - Home care providers
 - Medicaid-only providers
 - Dentists
 - Personal care attendants
 - Taxi drivers
 - Carpenters
 - Care coordinators
 - Language interpreters and translators
- 9. Is this tool for Minnesota-based providers only?** No. Out-of-state providers that bill Minnesota health plans can use this tool.

10. What is the goal of this new law? Where can I find more details? The law streamlines health care transactions. Further details on the requirements can be found online at www.health.state.mn.us/auc . In addition to claims submission, the law also requires all payers and health care providers to check eligibility electronically when it is checked, and to receive and transmit remittance advices electronically. All transactions must be in a standard format. While the solution is free for the claims submission requirement, providers may also consider purchasing other parts of the tool to meet the eligibility and payment/remittance requirements. The law (MN statute 62J.536), also known as the E3 initiative, is designed to help meet the goal of streamlining health care transactions in Minnesota. The work is taking place in three phases: eligibility began Jan. 15, claims submission begins July 15, remittance advice begins Dec. 15.