

Health Partners HIPAA Transactions and Code Sets Frequently Asked Questions

Q: Does Health Partners Plans require certification/testing with providers?

A: Health Partners Plans does not require providers to certify with us directly. Providers, their billing software vendor and/or EDI clearinghouse must be certified with our EDI clearinghouse, Emdeon. We encourage our providers to work with Emdeon and their EDI clearinghouse and/or billing software vendor to ensure that the electronic transactions they send meet the HIPAA requirements.

Q: Do providers need to test with Health Partners Plans if they utilize an EDI clearinghouse to process their transactions?

A: Providers should provide their EDI clearinghouse and/or billing software vendor with a copy of the Health Partners Plans Companion Guide for each transaction. If the billing software vendor or EDI clearinghouse utilized has already been certified by Emdeon, additional testing should not be necessary.

Q: How can providers obtain copies of Health Partners Plans' Companion Guides?

A: All Companion Guides are available on the Health Partners Plans website: <http://www.healthpartnersplans.com/HIPAA.asp> under "Eligibility & Claims –HIPAA CONNECT/EDI CLAIMS, HIPAA Companion Guides."

Please check this site frequently for updates.

Q: Who can we contact at Health Partners Plans if we have Transaction and Code Sets or EDI questions?

A: If you have questions regarding electronic billing or transaction and code sets, please contact the ***Health Partners Plans EDI Support Line at (215) 991-4290.***

Q: Does Health Partners Plans have a Contingency Plan?

A: Yes, Health Partners Plans has developed a Contingency Plan to address the needs of our provider community. Our plan follows the direction established by the Centers for Medicare and Medicaid Services (CMS) and the State of Pennsylvania Department of Public Welfare (PA DPW). Health Partners will continue to accept transactions in both the legacy and HIPAA standard formats for a limited period of time.

Q: Has Health Partners Plans implemented their Contingency Plan? If so, how long will it be in effect?

A: Health Partners has made the decision to implement our Contingency Plan. Health Partners Plans will work with providers during this transition period, and will establish a final transition date based on the readiness of our providers. For more information on the Contingency Plan, please go to the Health Partners Plans website: <http://www.healthpartnersplans.com/HIPAA.asp> under "Eligibility & Claims –HIPAA CONNECT/EDI CLAIMS, Contingency Plan Announcement."

Please check this site frequently for updates.

Q: Can Health Partners Plans currently accept HIPAA standard transactions?

A: Yes, Health Partners Plans has been ready to accept HIPAA standard transactions since October 16, 2003.

Q: Can Health Partners Plans currently accept claims in non-HIPAA compliant legacy format?

A: As identified in our Contingency Plan, Health Partners Plans will accept claims in current legacy formats for a limited time after the October 16, 2003 deadline. Providers who currently submit electronic claims should not change legacy submission formats.

Q: Is Health Partners Plans currently accepting Medical Assistance local codes (W-Codes)?

A: No, Health Partners Plans stopped accepting W-Codes on December 31, 2003, as per the local code waiver to state Medicaid plans by CMS.

Q: Will Health Partners Plans require the use of NDC codes for all pharmaceuticals?

A: Health Partners Plans will not accept the use of NDC codes by non retail pharmacies. J codes are required unless otherwise specified in the provider contract.

Q: Must specialists include the Primary Care Physicians (PCPs) NPI number when submitting claims?

A: Yes, the Primary Care Physician's NPI number must be submitted on all specialist claims.