

# Health Safety Net (HSN) Updates

Massachusetts Health Care Training Forum  
July 2019



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# HSN Updates – Agenda

- Billing Updates and Reminders
  - Bad Debt Application Updates
  - Carrier Codes for HSN Claims
  - HSN Secondary/Tertiary Claims
  - CHC Covered Code List
  - FY 2017 Closing
- HSN Presumptive Determination Reminders



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# HSN Bad Debt Application Updates

- As of July 1, 2019, the Health Safety Net updated the Bad Debt Application(s) in the INET system.
- The changes to the application are as follows:
  - MMIS ID Check
  - Collection Period Application Entry Limit
  - Batch Upload File to include MMIS\_ID and MMIS\_ID\_Checked columns



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# HSN Bad Debt Application Updates – Check for MMIS ID

- Providers will be required to verify if a patient has an existing MMIS ID in the Eligibility Verification System (EVS) before manually entering or uploading applications via the Batch Upload File function.
- When manually entering an application, and an existing MMIS ID has been found, users will be required to enter the MMIS ID into the application.
- Please refer to Bad Debt Application User Guide for more detailed information and instructions at <https://www.mass.gov/service-details/information-about-hsn-provider-guides-and-billing-updates>



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# HSN Bad Debt Application Updates – Application Entry Limit Collection Period

- Bad Debt applications have been updated to prevent a provider from entering additional applications for the same patient within the 120 day collection period.
- Bad Debt now checks whether the new application you are entering is within or beyond the collection period since the last application was entered for the same patient.
- The current collection period is 120 days. You may enter additional applications for the same patient after 120 days of the previous application.
- For more information, please refer to “Collection Period Verification” in the Bad Debt User Guide.  
<https://www.mass.gov/service-details/information-about-hsn-provider-guides-and-billing-updates>



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# HSN Bad Debt Application Updates – Batch Upload File

- Users must now supply a patient MMIS ID or an indication that the user checked for an MMIS ID and none was found.
- The Batch Upload File will need to contain 2 new columns.
  - Column L: MMIS ID (if found)
  - Column M: MMIS\_ID\_Checked (indication that no existing MMIS ID was found)
- By checking for existing MMIS ID's, there should be less “duplicate” accounts which need to be merged by MMIS.
- For more information, please refer to the Bad Debt User Guide “Batch Upload File Columns” for more detail and information.  
<https://www.mass.gov/service-details/information-about-hsn-provider-guides-and-billing-updates>
- Any questions regarding the Bad Debt Application updates, please contact the HSN helpdesk at [HSNHelpdesk@state.ma.us](mailto:HSNHelpdesk@state.ma.us)



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# HSN Updates and Reminders – Carrier Codes for HSN Claims

- HSN will be implementing carrier code requirements effective **September 1<sup>st</sup>, 2019**.
- Please consider this notification that as of **September 1<sup>st</sup>, 2019**:
  - **All seven characters** or digits, including preceding zeros, are necessary for the carrier code to pass adjudication.
- HSN has implemented these new carrier codes to reduce the difficulty with using specific naming conventions for MassHealth claims:
  1. **Carrier Code DMA7384**: This carrier code should be used to report any MassHealth Comprehensive coverage (i.e. MassHealth Standard or other comprehensive plans).
  2. **Carrier Code 0007001**: This carrier code should be used to report any MassHealth Non-comprehensive coverage (i.e. MassHealth Limited or other non-comprehensive plans).
  3. **Carrier Code 0007002**: This carrier code should be used to report CMSP (only) that has been processed by MMIS.



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# HSN Updates and Reminders – Carrier Codes for HSN Claims

- A complete listing of the carrier codes is provided by MassHealth in the All Provider Manual under Transmittal Letter ALL-213 dated 11/01/2014; see Section II, page C-2.  
[https://www.mass.gov/files/documents/2016/07/qn/all-213\\_0.pdf](https://www.mass.gov/files/documents/2016/07/qn/all-213_0.pdf)
- Using the above carrier codes eliminates the use of naming conventions and no longer effect whether a claim is paid by HSN (or delay payment of claims due to naming convention).
- HSN is working in collaboration with MassHealth on updating the carrier code list to ensure that all carrier codes since 2014 are available in Appendix C.





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## HSN Secondary/Tertiary Claims

- HSN will be implementing fatal edits for claims received that do not meet the necessary EAF requirements effective **September 1<sup>st</sup>, 2019.**
- Please consider this notification that as of **September 1<sup>st</sup>, 2019:**
  - In order for HSN to process payments on secondary or tertiary claims, HSN requires that the (EAF) Remaining Patient Liability Amount and (PR) Patient Responsibility segments are captured within the 837 files.
  - HSN also requires that the EAF amount equals the PR segments indicated.
  - Failure to include both PR and EAF amounts that are equal will result in a \$0 or null payment on the remit.



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# Community Health Center (CHC) Covered Code List

- HSN has updated the covered procedures for CHC's.
- To view the list, providers should visit:  
<https://www.mass.gov/service-details/payment-information-for-chcs>



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# HSN Updates and Reminders – HSN Fiscal Year 2017 (FY17) Closing

- FY 2017 Closing: Providers are reminded that FY17 will be closing on September 30, 2019.
  - Any claims or corrections for FY17 must be completed before the FY is closed.
  - Any claims trying to process after the FY close will be denied by HSN.
- If providers have questions regarding the FY17 closing, please contact the HSN Helpdesk at [HSNhelpdesk@state.ma.us](mailto:HSNhelpdesk@state.ma.us)



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## HSN Presumptive Determination Reminders

- If the facility finds the patient qualifies for HSN-PD, then the Facility Representative (FR) must provide an approval letter with the eligibility start and end dates.
  - The begin date is the date of the temporary HSN determination.
  - The end date is the last day of the month following the month in which the temporary HSN determination was made. For example, if a patient is determined on June 15, the end date is July 31.
- FRs need to also provide specific contact information for a Certified Assister who the patient can contact for assistance completing a full application.
  - If the facility has Certified Assistors available at the facility, consider referring the patient to them.
- The HSN-PD application and training materials can be found on the HSN website at <https://www.mass.gov/service-details/health-safety-net-presumptive-determinations-hsn-pd-information-0>



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# QUESTIONS?

