

This Best Practice is intended for use to assist health care group purchasers or other entity when creating companion guides.

Creating Companion Guides Compliant with Minnesota Statutes, section 62J.536

Purpose of this document

This document provides guidance for health care group purchasers (payers) to comply with Minnesota's requirements for the standard, electronic exchange of health care administrative transactions when developing companion guides.

Requirements

Minnesota statutes, section 62J.536, enacted in 2007, requires health care providers, group purchasers (payers), and clearinghouses to exchange certain health care administrative transactions electronically, using a single Minnesota Uniform Companion Guide (MUCG) that has been adopted into rule.

- Minnesota's law and rules do not require group purchasers (payers, health plans) to produce a companion guide. However, <u>if you are a group purchaser (payer)</u> or other entity subject to Minnesota Statutes, section 62J.536 and related rules, and <u>if you create or</u> <u>provide a companion guide</u> with instructions and specifications for a transaction subject to the state's requirements (see Table 1 below), <u>your companion guide must</u>:
 - Incorporate relevant information from the applicable MUCG and be compliant with the MUCG. The MUCG specifications and related information may be incorporated by reference, or by copying and pasting from the applicable MUCG. The MUCGs are available for free at http://www.health.state.mn.us/asa/rules.html.
- 2. In addition, <u>if your companion guide is based on</u> the Committee on Operating Rules for Informational Exchange (CORE) <u>"CORE v5010 Master Companion Guide Template"</u>, the <u>transaction-specific information from the applicable MUCG must be included/incorporated by reference in section 10 ("Transaction Specific Information") of the CORE Template. A suitable incorporation by reference to include in section 10 is:</u>

10 TRANSACTION SPECIFIC INFORMATION

The transaction-specific information for entities subject to Minnesota Statutes, section 62J.536 and related rules is incorporated by reference from the applicable Minnesota Uniform Companion Guide (MUCG) at: http://www.health.state.mn.us/asa/rules.html. Readers are referred to the MUCG for information and instructions to comply with Minnesota's requirements.

3. Finally, if your companion guide is based on the "CORE v5010 Master Companion Guide Template" you are also encouraged to reference the applicable MUCG in sections 1 ("References") and 7 ("Payer specific rules and limitations") of the Template as follows:

1 REFERENCES

Entities subject to Minnesota Statutes, section 62J.536 and related rules must follow the data content and other transaction specific information of the applicable Minnesota Uniform Companion Guide. A copy of the Minnesota Uniform Companion Guide is available at no charge from the Minnesota Department of Health at: http://www.health.state.mn.us/asa/rules.html.

7 PAYER SPECIFIC RULES AND LIMITATIONS

Entities subject to Minnesota Statutes, section 62J.536 and related rules must follow the data content and other transaction specific information of the applicable Minnesota Uniform Companion Guide. A copy of the Minnesota Uniform Companion Guide is available from the Minnesota Department of Health at no charge at: http://www.health.state.mn.us/asa/rules.html.

Additional information

Table 1. List of Minnesota Uniform Companion Guides (MUCGs)		
(See http://www.health.state.mn.us/asa/rules.html for more information and copies of the MUCGs)		
Transaction category	Transaction	
Eligibility	Health care eligibility benefit inquiry and response (270/271)	
Claims	Health care claim: Professional (837)	
	Health care claim: Institutional (837)	
	Health care claim: Dental (837)	
	Pharmacy claims submission and response (NCPDP D.Ø)	
	Pharmacy claims reversal and response (NCPDP D.Ø)	
Payment/advice	Health care claim payment/advice (835)	
Acknowledgments	Health Care Claim Acknowledgment (277CA)	
	Implementation Acknowledgment for Health Care Insurance (999)	
	Interchange acknowledgment segment (TA1)	

Operating rules

The federal Accountable Care Act (ACA) mandated that the Secretary of Health and Human Services adopt of a series of "operating rules" between 2012 and 2016. To date, operating rules have been adopted for eligibility, claims status, electronic funds transfer, and electronic remittance advices. These federal operating rules incorporate by reference the applicable operating rules developed and adopted by the Committee on Operating Rules for Informational Exchange (CORE), including "CORE v5010 Master Companion Guide Template".

Compliance and status dates for use of adopted operating rules by the federal Department of Health and Human Services (HHS) adopted operating rules for the ASC X12N are listed in Table 2 below for reference.

Transaction	CMS Compliance Date	
Health Plan Eligibility	January 1, 2013	
Health Claim Status	January 1, 2013	
Electronic funds transfers (EFT)	January 1, 2014	
Health Care Payment and Remittance Advice	January 1, 2014	
Health Care Claims or Equivalent Encounter Information (Attachments)	January 1, 2016	
Coordination of benefits	January 1, 2016	
Health Plan Enrollment/Disenrollment	January 1, 2016	
Health Plan Premium Payment	January 1, 2016	
Referral Certification and Authorization Transactions	January 1, 2016	
Source: http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/OperatingRulesforHIPAATransactions.html		

Additional References/Resources

Following are links to References/Resources to federal operating rules, Minnesota regulations, and other mandated regulations to ensure compliance with health care administrative simplification and in developing companion guides.

http://www.health.state.mn.us/asa/

http://www.cms.gov/Regulations-and-Guidance/HIPAA-Administrative-Simplification/Affordable-Care-Act/OperatingRulesforHIPAATransactions.html

http://www.cagh.org/CORE operat rules.php

For examples to aid in completing and using the CORE Template, please see the list of CORE-certified health plans, at: http://www.caqh.org/CORE_organizations.php. Some of these health plans have issued companion guides based on the CORE Companion Guide Template that have been posted online.