

Health Partners EDI Billing Do's and Don'ts

Health Partners Plans has identified the most common electronic errors that occur and compiled a list of helpful hints.

Incorrect Billing Procedures

Correct Billing Procedures

DO NOT submit claims with the Member's 10 digit access number or their Social Security number.



All Health Partners Plans (Medicaid) claims must be submitted with the Member's 9 digit Health Partners Plans ID number.



DO NOT submit Kidz Partners (CHIP) claims with the member's Social Security number only.



All Kidz Partners (CHIP) claims must be submitted with the 10 digit member ID number that starts with a three (3).



DO NOT submit claims for dependent children under the Mother's 9 digit Health Partners Plans ID number once the child has been assigned their own permanent member ID number.



Claims for children should be billed with the child's 9 digit Health Partners Plans member ID number.



DO NOT submit claims without verifying that the member ID number indicated is correct.



Verify that the member ID number submitted on the claim is the patient's Health Partners Plans /Kidz Partners ID number.



DO NOT submit claims with the incorrect sex indicator for the patient.



The sex indicator for the patient should be verified before claims are submitted.



DO NOT submit physician claims with the site location number, medical license number, Medicaid or UPIN or Tax ID number.



All physician claims must be submitted with the individual rendering provider's 10 digit National Provider Identifier (NPI) number.



DO NOT submit facility and ancillary claims with the Medicaid, UPIN, and tax ID number.



All facility and ancillary claims must be submitted with the group or organizational 10 digit NPI number.



DO NOT submit claims with NPI number in the Federal Tax Id number field on the CMS claim form.



For CMS- 1500 claims, individual physician's number should be entered in the "RENDERING PROVIDER ID. #" field (box 24J). The billing provider's NPI number should be entered in the "BILLING" PROVIDER INFO &PH #" field (box 33A).

Reminder: All providers are responsible for monitoring and updating any claim errors that appear on the daily R022 / RPT - 05/05A and R059/RPT - 10 EDI claim rejection reports. Corrected claim data should be immediately retransmitted electronically to Health Partners.

Please review all electronic claims data before transmission to verify all pertinent information is accurate.

For more information regarding EDI, please visit us at our website or contact us:

http://www.hpplans.com

Claims Department (EDI) Support Line: 215-991-4290