



COMPANION DOCUMENTATION

270/271 Health Care Eligibility Inquiry and Response

WebMD Office

**Administered by:
Unison Administrative Services
300 Oxford Drive
Monroeville, PA 15146**

INTRODUCTION

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that Unison Administrative Services (UAS) comply with the mandated EDI standards for health care as established by the Secretary of Health and Human Services. UAS recognizes the administrative efficiencies that can be gained from the HIPAA transactions and contracted with ENVOY, a subsidiary of WebMD, to make these transactions accessible to the provider community. Please utilize the HIPAA implementation guides for the corresponding transactions. The implementation guides can be found at the Washington Publishing Company's website and downloaded free of charge (http://www.wpc-edi.com/hipaa/HIPAA_40.asp). Additional information regarding the standards for electronic transaction are available at the Department of Health and Human Services website (<http://aspe.hhs.gov/admnsimp/final/txfin00.htm>).

PURPOSE

The companion guides produced by UAS are designed to be used in conjunction with the implementation guides that are posted on the Washington Publishing Company website. Due to the evolving nature of the HIPAA regulations these documents are subject to change as updates occur to UAS's adjudication procedures or as legislation is updated or revised. The sole purpose of the documentation is for clarification and to outline specific requirements for the transactions.

SPECIAL NOTES

- Unison's trading partner ID: **251756858**
- Provider must use the health plan's provider identifier. *
- Please use the patient identifier found on the health plan's member identification card. *
- **Please reference the Health Care Eligibility Inquiry and Response implementation guide (004010X092).**

**Indicates additional information provided within the data element description section.*

REQUESTED DATA

- Member ID Number – 9 or 10 character number as seen on the Member ID card
- Last Name – as seen on the Member ID card
- First Name – as seen on the Member ID card
- Ins DOB – Members date of birth in the format MMDDYYYY
- Start Date – defaulted to today’s date, can be changed if necessary
- End Date – defaulted to today’s date, can be changed if necessary
- Network/Facility ID – 12 character number given by your provider representative
- Provider ID – 9 character Federal Tax ID number

Sample Inquiry Screen

WebMD Office John Klesius Tuesday, May 24, 2005
 • [Logout](#)

Turn On Batching | [Office Home](#) | [Check Eligibility](#) | [Check Claims](#) | [HCS Review Inquiry](#) | [HCS Review Request](#) | [Batch Manager](#) | [Find Providers](#) | [Claim Entry](#) | [Send Claims](#) | [Help](#)

Step 1 - Select payer

Three Rivers Administrative Services/UNISON [Provider Search](#)

Step 2 - Enter search criteria * indicates required fields

* Subscriber ID 1234567890	* Last Name Smith	* First Name John	* Date of Birth 07/04/1995
Local Patient ID <input type="text"/>	* Start Date 05/24/2005	End Date 05/24/2005	
* Service Type Health Benefit Plan Coverage <input type="button" value="Edit..."/>			
* Network/Facility Prov Network	* Network/Facility ID 000000123456 <input type="button" value="Select..."/>		
* Provider ID Type Tax ID	* Provider ID 123456789 <input type="button" value="Select..."/>		

Step 3 - Begin search

[[Help](#)] [[Glossary](#)] [[Contact Customer Support](#)] [[Terms of Use](#)] [[Privacy Policy](#)]

WebMD is a licensee of the [TRUSTe Privacy Program](#)
 and subscribes to the [HONcode](#) principles of the [Health On the Net Foundation](#)

Sample Response Screen

The screenshot shows the WebMD Office interface. At the top, it displays the user name 'John Klesius' and the date 'Tuesday, May 24, 2005'. A navigation bar includes buttons for 'Turn On Batching', 'Office Home', 'Check Eligibility', 'Check Claims', 'HCS Review Inquiry', 'HCS Review Request', 'Batch Manager', 'Find Providers', 'Claim Entry', 'Send Claims', and 'Help'. The main content area is titled 'Eligibility and Benefit Information' and 'Three Rivers Administrative Services/UNISON'. It shows a request for 'Insured= JOHN SMITH' with MemberID=1234567890, DOB=07/04/1995, and ProviderID=000000123456. There are buttons for 'Check Claims' and 'HCS Review Request'. The WEBMD Trace Number is 392292458. The patient information section includes: Patient: JOHN SMITH, Member ID: 1234567890, Address: 123 MAIN STREET, ANYTOWN, PA 12345, and Eligibility: 05/24/2005-05/24/2005. The submitter information shows Submitter Type: Provider and Federal Taxpayer's ID: 123456789. A plan section titled 'Plan' shows 'Coverages' with a link to 'Health Benefit Plan Coverage'. A benefits section titled 'Benefits' shows Coverage Level: Individual, Insurance Type: Medicaid, Active Coverage, Eligibility Begin: 12/01/1997, PCP Name: Bewell, John M., and PCP #: 000000112233. A yellow banner at the bottom of the benefits section reads 'Coverage: Health Benefit Plan Coverage'.

EDI INQUIRES & TROUBLE SHOOTING

If you are interested in submitting electronic transactions or have EDI issues please contact UAS’s Provider Services Department at 1-800-600-9007.

To assist the Provider Services Representative with EDI issues please have the following:

- 12 Character health plan provider identification number
- 9 Character transaction number
- Provider Identifier Number

If you are having any problems, contact ENVOY Customer Support at 1-877-469-3263, officesupport@emdeon.com, or your clearinghouse.