

Member Eligibility 270/271 Batch Transaction Update

FACT SHEET: Trading Partners (Providers, Billing Intermediaries, Clearinghouses and Software Vendors)

On July 28, 2019 changes to the electronic HIPAA transaction, Health Care Eligibility Benefit Inquiry and Response (270/271) became effective. This Fact Sheet provides information on these changes and how they will impact eligibility verification submissions for all MassHealth Trading Partners, including vendors. Prior to this new effective date, when a 270 request was submitted the eligibility system would check eligibility based upon the MassHealth member ID (MID). If the MID was invalid, the process then searched for a match based on the demographic data, specifically first name, last name, date of birth (DOB), and gender. If the system was able to match on the demographic data, it would generate a 271 response with eligibility results containing the correct MID and eligibility for that member.

Effective July 28, 2019, if an invalid MID is submitted, a 271 response indicating “**Invalid Member ID**” is generated. The rejected transaction must then be resubmitted with a valid MID or only the member’s first name, last name, DOB, and gender.

The rejected transaction will state error code “72”, which means “Invalid/Missing Subscriber/Insured ID” in the **AAA03 – Reject Reason Code** segment for Loop **2100C – Information Receiver Name**. Direct Data Entry (DDE) eligibility requests submitted with an invalid MID will display a “Member ID missing or not on file” message on the Provider Online Service Center (POSC).

Batch Eligibility Submission Requirements

Follow these guidelines to ensure successful processing of a 270 request and 271 response transactions:

- **ONLY** check eligibility for MassHealth members you will provide services to on the same day or the following day
- **DO NOT** submit your entire roster of MassHealth members unless you are providing services for your entire roster of members the same day or the following day
- **DO NOT** include more than 3,000 member requests in any single eligibility Transaction Set Header (ST)/Transaction Set Trailer (SE) segment within an eligibility batch file request. The system will reject ST/SE segments that exceed this maximum number of members
- **YOU MUST INCLUDE** a valid member MID on the eligibility request, if known. The system will reject **Invalid** MIDs. If MID is not known, you must include the following four demographic data elements so that the system may search for the member: First Name, Last Name, DOB, and Gender. If a single match is found, the system will return eligibility information.
- **WHEN** an eligibility request returns a valid MID based solely upon the demographic data submitted in the 270, **YOU MUST** ensure you populate all subsequent eligibility requests for that member with the correct MID

Resources for Providers

- **New webpage** – Technical Refresh: www.mass.gov/masshealth-technical-refresh
- **Webpage Update(s)** –
 - Eligibility Verification System (EVS) Overview: www.mass.gov/service-details/eligibility-verification-system-overview
 - **Job Aid** – Upload Eligibility Batches Master & Download 271 Responses: www.mass.gov/files/documents/2019/02/27/jobaid-uploadeligibilitybatchesmaster.pdf
- **Email:** edi@mahealth.net
- **Phone:** 1-800-841-2900