Objective
Verify Eligibility for MHCP Recipients

Performed by
MN–ITS Users

Background
This User Guide instructs providers to use the MN–ITS Interactive Eligibility Request feature to verify eligibility on the Single Eligibility Inquiry tab (one at a time) or the Multiple Eligibility Inquiry tab (up to 50 at a time).

A recipient’s eligibility through MHCP may terminate or change. Since there are no eligibility dates on the MHCP ID card, providers are strongly encouraged to verify recipient eligibility prior to rendering services.

Use MN–ITS Interactive
- Complete all **bolded** (required) fields
- Complete other (non-bolded, situational) fields as appropriate
- **Underlined items** are linked to definitions and additional information about that item, including information about completing a field, code definitions for fields, or instructional information
- Some fields are grouped together in “boxes” of associated information. Field titles with an asterisk (*) indicate that the information is “situational.” If you complete one asterisked field within a boxed section of a screen, you must complete all asterisked fields in that section of the screen

Verify MHCP Eligibility for a Single Recipient

1. [Login](#) to MN–ITS.

2. Select MN–ITS from the left-hand menu.

3. Select **Eligibility Request (270)**. MN–ITS Interactive auto-populates the NPI/UMPI based on your login.

4. If you are not a consolidated provider, you do not have to complete the asterisk (*) fields of the Taxonomy Code Qualifier or the Taxonomy Code. Move down to the Date of Service fields.

5. If you are a consolidated provider, a [Lookup](#) button will display. Select the [Lookup](#) button.
   a. Select the **Show Taxonomy** link in the right hand column of the location or provider service.
   b. The circle will be auto-selected for the location chosen.
   c. If the location contains more than one taxonomy code, use the drop-down arrow to select the appropriate taxonomy code or description.
   d. Click on the **Submit** button in the upper left corner of the taxonomy code pop-up screen.
e. In the Taxonomy Code Qualifier field, use the drop down arrow to select the provider’s role related to the eligibility of benefits being verified. If this inquiry is for the Rendering/Performing provider, select Performing.

6. The **Date of Service** field auto-populates with the current date. To view a different date than the one that was auto-populated, delete the From date and enter the date you want to inquire about in the MMDDYYYY format. You can verify eligibility for up to the previous 12 months, but not for a future date. The eligibility response will only provide information for the date entered in the From field. Effective 1/15/13, you may enter a future search date within the same month.

7. Enter a combination of two or more fields of **Subscriber** information. Refer to the [Minnesota Uniform Companion Guide](#) for search scenarios.

8. Effective 1/15/13, the **Service Type Codes** field defaults to the general inquiry 30-Health Benefit Plan Coverage. The 12 general service types include:

- 01 Medical Care
- 33 Chiropractic
- 35 Dental Care
- 47 Hospital
  - 48 Hospital - Inpatient
  - 50 Hospital - Outpatient
- 86 Emergency Services
- 88 Pharmacy
- 98 Professional (Physician) Visit – Office
- AL - Vision (Optometry)
- MH - Mental Health
- UC - Urgent Care

Providers using the **general inquiry** search; select the **Submit** button on the left side of the screen to generate an Eligibility Response.

If you are not sure how to read the response, scroll down to view Understanding your Eligibility Response (271).

9. Providers requesting eligibility information for specific **Service Type Codes**; use the MN–ITS drop-down menu to select the service type code(s) and description that best fits the service you will be providing.
   a. Select **Add** to save the service type code.
   b. Select **Del** to delete it.

10. Select the **Submit** button on the left side of the screen to generate an Eligibility Response. If you are not sure how to read the response, scroll down to view Understanding your Eligibility Response (271).

**Verify MHCP Eligibility for Multiple Recipients**

The Multiple Eligibility Inquiry tab allows you to verify eligibility for up to 50 MHCP recipients in one transaction. The search fields are the same as on the Single Eligibility Inquiry tab. The difference is that the responses are indicated in a list below the search fields.
1. Complete lines 1-7 as outlined for Verify MHCP Eligibility for a Single Recipient.

2. Click the **Add** button below the search fields to create the list of recipients for whom you will verify eligibility. The word *Response* is underlined and located at the end of each recipient line. This is the 271 Response for each inquiry. Remember to change the date of service for each recipient, as appropriate. Repeat as needed to a maximum list of 50. To delete an entry, click the NPI/UMPI on the line you wish to remove and click the **Delete** button.

3. After you have completed your list, click the underlined *Response* in the first line of the list to open the 271 Response. You may move from one response to the next using the Previous or Next options at the top of the page.

**Understanding your Eligibility Response (271)**

The Subscriber Information includes the date of service, subscriber ID number, birth date, age, and gender at the top of the page. The next line will display the last known address of the subscriber.

The next section, Provider Information, includes the provider’s NPI/UMPI that was used for this inquiry, the Provider Name associated with that NPI/UMPI, the Taxonomy Code qualifier and the Taxonomy Code that was selected.

The eligibility information displayed will provide information pertaining to the Taxonomy Code Qualifier and Taxonomy Code reported on the Eligibility Request.

A **Print** button is at the top left of the page; a **Close** button is at the top right of the page. Next at each end.

Print or save the 271 Response for your records.