



Hennepin Health

EIDBI PROVIDERS- WORKING WITH HENNEPIN HEALTH

About Hennepin Health

- Hennepin Health serves residents of Hennepin County
- Hennepin Health is a department within Hennepin County
- Hennepin Health was established in 1983 and formerly known as Metropolitan Health Plan (MHP)
- Hennepin Health is a Managed Care Organization contracted with DHS for PMAP, MinnesotaCare and SNBC
- Hennepin Health (health plan) is not the same as Hennepin Healthcare (hospital system)



Who we serve with EIDBI



- Enrollees under the age of 21 who are diagnosed with Autism Spectrum Disorder and related conditions
- Hennepin Health enrollees eligible for EIDBI services may participate in any one of our three programs:
 - PMAP
 - MinnesotaCare
 - SNBC



Hennepin Health

EIDBI Providers partnering with Hennepin Health

Prior Authorization Process

- Hennepin Health does not require prior authorization for EIDBI services

Hennepin Health Network

- EIDBI services is an “open network” allowing members to see any provider
- We strongly encourage providers serving our members to become contracted with Hennepin Health

How to Contract

- Go to the Hennepin Health [website](#), select the Providers Tab
- Select “Join our Network” and select “[Request to be a contracted provider](#)”
- Following submission of the required information, Contract staff will contact the provider for next steps



Registration

- Registration is:
 - Required for Businesses that are non-contracted with Hennepin Health
 - Required to process claims
 - Can be completed prior to the contracting process.
- If you are unsure of your registration status, please contact Hhnetworkmanagement@hennepin.us

Locations

- Do not require Credentialing
- Complete the registration process by registering in eApply
- [Location Registration](#)

- EIDBI specific practitioners do not require Credentialing
- Complete the registration process using the Practitioner add/term/change form
- [Practitioner Add.Term.Change Form](#)

Practitioners

Credentialing

- It is the selection and evaluation of providers who meet the qualifications requiring [Practitioner Credentialing](#)
- If you are unsure of your credentialing status, please contact Hhcredentialing@hennepin.us

1

- Register with the MN Dept of Human [Services](#)

2

- Complete the Practitioner Initial Credentialing [Application](#)

3

- Submit the application via the Minnesota Credentialing [Collaborative](#)



Hennepin Health



Electronic Data Interchange

- Hennepin Health is contracted with several EDI clearinghouses that specialize in claim data exchange:
 - Eligibility
 - Claims Status
 - Professional Claims
 - Institutional Claims
 - Remittance Advice

Availity	ClaimLynx	Change Healthcare
Infotech Global (MN-eConnect)	Change Healthcare (Formerly Relay Health)	

- Hennepin Health requires all claims be submitted electronically, either directly or indirectly to one of our clearinghouses:
- If you use a different clearinghouse, contact your clearinghouse for intermediary access
- For more details go to [Hennepin Health Provider Manual](#) and [Electronic transactions | Hennepin Health](#).

Billing Requirements

- Hennepin Health follows the same EIDBI billing & Coding guidelines as [DHS](#)
- Providers billing via telehealth are required to:
 - Bill with place of service 02
 - Have the Telehealth Provider Assurance Statement (DHS-6806) on file with DHS effective June 1st, 2022.
- Claims being submitted must include:
 - Pay to Provider (Legal Business Entity)
 - Rendering provider who provided the service to the member
 - Level I, Level II & Level III providers must be billed if they are providing the service under direction of the QSP
 - UMPI or NPI of the rendering Provider
 - Supervising provider for all services that required the supervision of QSP
 - Procedure code and required modifiers for the EIDBI service provided

Billing Tips

1 Bill each date of service on a separate line

2 Do not bill multiple months on one claim

3 We accept only one date of service per provider per day

- Example:
 - Practitioner see member twice in one day, but the same service is provided. Combine units on one line of service billed to Hennepin Health.
 - Duplicate services billed on same day by same provider will be denied as a duplicate claim submission.

Hennepin Health Contacts

Provider Services Contact Center:

612.596.1036, HennepinHealth@hennepin.us

Credentialing:

612.543.5299, HHCredentialing@hennepin.us

Network Management:

HHNetworkManagement@Hennepin.us



Hennepin
Health

THANK YOU!

Hennepin Health Toll Free 1-800-647-0550 TTY 1-800-627-3529

Attention. If you need free help interpreting this document, call the above number.

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរសព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သူဉ်ဟ်သးဘဉ်တက့ၢ်. ဝဲန့ၢ်လိဉ်ဘဉ်တၢ်မၤစၤကလီလၢတၢ်ကကျိးထံဝဲဒၣ်လံာ် တီလံာ်မိတခါအံၤန့ၣ်,ကိးဘဉ်လီၤဝဲစိနီၢ်ဂံၢ်လၢထးအံၤန့ၣ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງໂທໄປທີ່ໝາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. Hennepin Health does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a complaint if you believe you were treated in a discriminatory way by Hennepin Health. You can file a complaint and ask for help filing a complaint by mail, phone, fax, or email at:

Hennepin Health
300 South Sixth Street MC 604
Minneapolis MN 55487-0604
Toll-free: 1-800-647-0550 (voice)
TTY: 1-800-627-3529 (MN Relay)
Fax: 612-632-8815
Email: hennepinhealth@hennepin.us

or in person at:

Hennepin Health
525 Portland Avenue South
Minneapolis

Auxiliary Aids and Services: Hennepin Health provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner, to ensure an equal opportunity to participate in our health care programs.

Contact: Hennepin Health Member Services at hennepinhealth@hennepin.us, or call Hennepin Health Member Services at 612-596-1036 (toll-free 1-800-647-0550) or your preferred relay service.

Language Assistance Services: Hennepin Health provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact:** Hennepin Health Member Services at hennepinhealth@hennepin.us, or call Hennepin Health Member Services at 612-596-1036 (toll-free 1-800-647-0550) or your preferred relay service.

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by Hennepin Health. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services' Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the **OCR** directly to file a complaint:

Office of Civil Rights, U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240 Chicago, IL 60601
Customer Response Center: 800-368-1019, TTY 800-537-7697
Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights

540 Fairview Avenue North, Suite 201, St. Paul, MN 55104

651-539-1100 (voice), 800-657-3704 (toll-free), 711 or 800-627-3529 (MN Relay), 651-296-9042 (fax)

Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have a right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administration actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator

Minnesota Department of Human Services

Equal Opportunity and Access Division

P.O. Box 64997

St. Paul, MN 55164-0997

651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to go to your primary care provider prior to the referral.