

Surest plan: benefits with variable copays

Overview

Effective October 19, 2023, UnitedHealthcare updated Electronic Data Interchange (EDI) 271 transaction responses for members with medical plans within Surest which have specific service benefits that provide a copay based on a variable rate. The rate is determined by either the practitioner being seen or the location where care is administered and can vary based on the type of service benefit requested.

- Practitioner-based variable copay can be determined based on the National Provider Identifier (NPI).
- Location-based variable copay can be determined based on the Tax ID Number (TIN) and address of the location providing care.

What changed?

Based on what information is provided on the 270x12 Request, the service copay can be returned in one of the following ways:

- **Non-variable (standard) copay**
Not all services will have variable copay. In these cases, the benefit should match what is returned for other copay amounts on the 271x12 response today.
- **Variable exact copay**
If a service benefit does support variable copay, a specific amount can be returned if a match to a specific practitioner or location is found based on the information provided on the 270x12. These scenarios will generally look the same as the standard copay, but will include an additional message segment identifying the copay as a variable copay.
- **Variable range copay**
If a service benefit does support variable copay, a range of copays will be returned in scenarios where a specific practitioner or location is unable to be determined or is not supported by that network status. This will be presented by displaying a minimum copay amount and a maximum copay amount based on all supported practitioners or locations for that service.

How will this affect me?

Whether you interpret your own 271 responses or use a vendor or clearinghouse to translate them, the change should allow you to identify if the benefit returned is a variable copay, how that copay was determined (by practitioner or location), and if either a specific amount was identified or the range the copay amount would fall into for the member who requested the service.

If you have questions, please contact Optum360 EDI Support at 866-678-8646 x2 / 866-OPTUM-GO (M-F, 8 a.m.–7 p.m. EST) or via our [Support Portal](#) (Log in using your Optum One Healthcare ID and password and select the “New Case” button in the center of the screen).

Variable copay 270x12 request fields

In order to filter variable copay amounts to a specific practitioner or location, information must be provided on the 270x12 request.

Please note: The variable copay can only match when the practitioner/location is in the same network. In Network variable copay cannot match to an Out of Network NPI.

- **Practitioner-specific searches**

When looking to retrieve practitioner-specific variable copay amounts, only the NPI value is required. This should be populated via NM108 (XX) and NM109 (NPI value) fields:

```
NM1*1P*1*LastName*FirstName****XX*NPI~
```

- **Location-specific searches**

When looking to retrieve location-specific variable copay amounts, the TIN value and address are both required. The TIN should be populated via NM108 (FI) and NM109 (TIN value) fields. The address associated with the TIN should also be passed in the N3 and N4 loops:

```
NM1*1P*1*LastName*FirstName****FI*TIN~  
N3*AddressStreet~  
N4*AddressCity*AddressState*AddressZip~
```

- **Practitioner and location searches**

When the 270x12 submitter is looking to have support for both practitioner-specific and location-specific variable copays on a single 271x12 response, the NPI must be passed at the NM109 segment and the TIN will need to be passed using a REF loop where REF01 (TJ) and REF02 (TIN value) are populated. The address associated with the TIN should still be passed in the N3 and N4 loops:

```
NM1*1P*1*LastName*FirstName****XX*NPI~  
REF*TJ*TIN~  
N3*AddressStreet~  
N4*AddressCity*AddressState*AddressZip~
```

Sample variable copay 271x12 responses

- **Non-variable (standard) copay**

Standard copay below showing a \$125 copay per visit for In Network uses of service code 50 (Hospital Outpatient).

```
EB*B*IND*50***27*125*****Y~
```

- **Variable exact copay**

Variable Copay when an exact practitioner/location match is found will present in almost the same EB loop as a Non-Variable Copay. To identify this copay as a variable one, the MSG segment will be populated with one of two messages: "AMOUNT VARIES BY LOCATION" or "AMOUNT VARIES BY PRACTITIONER":

```
EB*B*IND*50***27*125*****Y~  
MSG*AMOUNT VARIES BY LOCATION~
```

- **Variable range copay**

When an exact practitioner/location match cannot be found, the 271x12 response will display two loops, showing the range of what the copay could be. The first loop will set EB09 segment as 8H (Minimum) and the second loop will set EB09 segment of M2 (Maximum). The amount will be present within both the EB07 and EB10 segments.

```
EB*B*IND*BY***27*5**8H*5**Y~  
MSG*AMOUNT VARIES BY PRACTITIONER~  
EB*B*IND*BY***27*90**M2*90**Y~  
MSG*AMOUNT VARIES BY PRACTITIONER~
```