

Limited Exception for Payers Not Subject to HIPAA from Minnesota's Requirements for Only the Standard, Electronic Exchange of Eligibility Transactions (270-271) is Continued Through June 30, 2024

Intended Purpose and Audience

This update provides guidance regarding implementation and enforcement of [Minnesota Statutes, section 62J.536](#) and is intended for health care group purchasers and providers, as well as clearinghouses, billing services, other vendors, and any interested parties. The law and related rules require that health care providers, clearinghouses, and group purchasers (payers) exchange specified health care administrative transactions electronically, using a standard data content and format adopted in rule. More information about Minnesota's health care administrative data exchange rules is available at [MDH's Administrative Simplification Act \(ASA\) website](#).

Targeted, Limited Exceptions

Minnesota Statutes, section 62J.536 authorizes the Commissioner of Health to exempt group purchasers not subject to federal HIPAA transactions regulations (United States Code, title 42, sections 1320d to 1320d-8) from one or more of the MS §62J.536 data exchange regulations if the Commissioner determines that:

- i. a transaction is incapable of exchanging data that are currently being exchanged on paper and is necessary to accomplish the purpose of the transaction; or
- ii. another national electronic transaction standard would be more appropriate and effective to accomplish the purpose of the transaction.

Reviews and Determinations

MDH consults annually with the [Minnesota Administrative Uniformity Committee \(AUC\)](#) to determine whether to grant the exemptions described above. Based on these consultations, MDH previously granted a series of annually renewable limited exceptions to non-HIPAA covered payers from the state's data exchange requirements for only the ANSI ASC X12N/005010X279A1 Health Care Eligibility Benefit Inquiry and Response (270-271) transaction for the years 2009 through 2019.

Note: As a result of the competing demands of the COVID-19 pandemic response, the annual cycle of exception reviews and renewals described above was suspended from 2020-present. During that time, the previously approved exception from 2019 has continued to remain in

force unchanged. MDH is now restarting the statutorily required cycle of annual exception reviews and renewals.

Current Limited Exemption Continued Through June 30, 2024

MDH consulted with the AUC in April 2023 regarding the continued need for the very narrow exemption described above. It determined through the review process that the limited exception to Minnesota's health care administrative data exchange rules will continue through June 30, 2024.

The continued exception applies only to exchanges of the ASC X12N/005010X279A1 Health Care Eligibility Benefit Inquiry and Response (270-271) with health care group purchasers not subject to federal HIPAA transactions regulations. Examples of such payers include workers' compensation, property & casualty, and auto insurers. All other requirements of MS §62J.536 remain in force.

The next annual review of this exception to rules adopted pursuant to Minnesota Statutes, section 62J.536 is scheduled for April-May 2024.

Please contact us if you have questions.

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June 2023