Washington State Health Care Authority

ProviderOne

December 2016

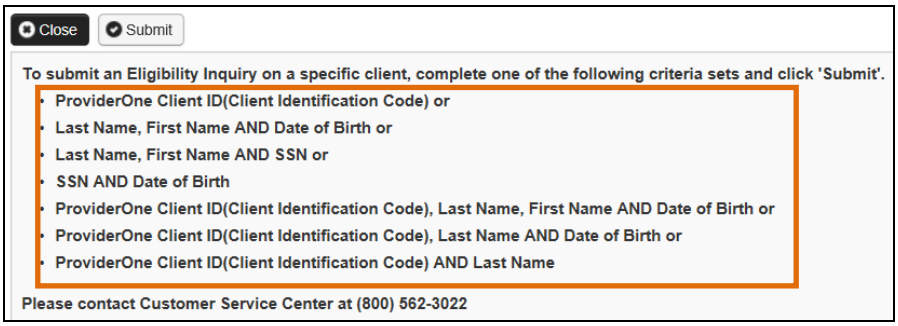
Successful Eligibility Checks using ProviderOne

There are three different profiles that can be used to check client eligibility in ProviderOne:

- **EXT Provider Eligibility Checker**
- **EXT Provider Eligibility Checker-Claims Submitter**
- **EXT Provider Super User**

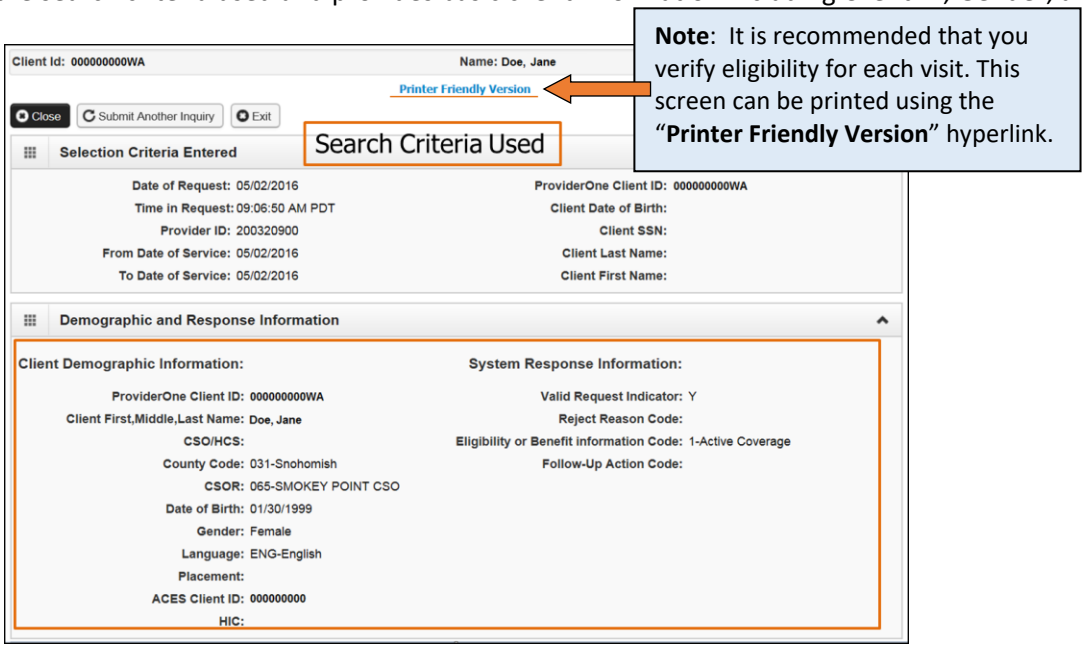
Next choose the **Benefit Inquiry** link under the Client section of the Provider Portal:

Use one of the sets of criteria noted below, as seen on the Client Eligibility Inquiry screen, along with the date(s) of service:



ProviderOne cannot search future dates, so only enter current or previous dates. The maximum date span is limited to 2 years. If you require an eligibility check over 2 years old, use the Contact Us web form and select **Client Eligibility** as the topic. If the appointment is within 48 hours, contact the customer service center at 800-562-3022.

ProviderOne displays the search criteria used and provides basic client information including Client ID, Gender, and Date of Birth:



Note: It is recommended that you verify eligibility for each visit. This screen can be printed using the "**Printer Friendly Version**" hyperlink.

Scroll down to view the **Client Eligibility Spans** and **Managed Care Information** with relevant start and end dates.

Client Eligibility Spans

Insurance Type Code	Recipient Aid Category (RAC)	Benefit Service Package	Eligibility Start Date	Eligibility End Date	ACES Coverage Group	ACES Case Number	Retro Eligibility	Delayed Certification
MC: Medicaid	1203	CNP	01/01/2015	12/31/2999	N11			

View Page: 1 Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last

Message(s): This is the Client's eligibility as of this date, based on information available at this time

Managed Care Information

Insurance Type Code	PCCM Code	Plan/PCCM Name	Plan/PCCM ID	Plan/PCCM Phone Number	PCP Clinic Name	Start Date	End Date
HM: Health Maintenance Organization	MC: Capitated	MHC Healthy Options	105010201	(800) 869-7165		03/01/2015	12/31/2999
HM: Health Maintenance Organization	MC: Capitated	King County Behavioral Health Organization	105020601	(800) 790-8049		01/01/2015	12/31/2999

View Page: 1 Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last

Message(s):

If the client had Medicare as their primary, this information would be shown under **Medicare Eligibility Information**. **Please note that Nursing Home information will not be displayed in these sections.**

Medicare Eligibility Information

Service Type Code	Insurance Type Code	Eligibility Start Date	Eligibility End Date
30: Health Benefit Plan Coverage	MA: Medicare Part A	07/01/2012	12/31/2999
30: Health Benefit Plan Coverage	MB: Medicare Part B	07/01/2012	12/31/2999

View Page: 1 Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last

Message(s): We believe this information to be correct, but you must verify eligibility and coverage with specified payor

The **Coordination of Benefits Information** section will show if the client has a commercial insurance as their primary coverage, with date spans and applicable carrier code information. Medicare Part D prescription benefit information may also be displayed here.

Coordination of Benefits Information

Service Type Code	Insurance Type Code	Insurance Co. Name & Contact	Carrier Code	Policy Holder Name	Policy Number	Group Number	Plan Sponsor	Start Date	End Date
30: Health Benefit Plan Coverage	C1: Commercial	SILVERSCRIPT INSURANCE COMPANY (866) 552-6106	S5601		Med Part D			01/01/2013	12/31/2999

View Page: 1 Go Page Count SaveToXLS Viewing Page: 1 First Prev Next Last

Message(s): We believe this information to be correct, but you must verify eligibility and coverage with specified payor

Note: Effective for claims with dates of service on and after January 1, 2017, clients with other primary health insurance may be enrolled in an Apple Health Managed Care plan as their secondary insurance. Remember to always check for other primary payers when verifying eligibility in ProviderOne. See the Apple Health Medicaid: Provider Alert dated 11/16/2016 10:09 AM PST.

If your search is unsuccessful, check how the entry was keyed and what criteria you entered for possible correction:

System Response Information:

Valid Request Indicator: N

Reject Reason Code: 72 - Invalid/Missing Subscriber/Insured ID

Eligibility or Benefit information Code:

Follow-Up Action Code: C - Please correct data and resubmit