OPERATIONAL WEBINAR SERIES:

INTERPRETING CLIENT ELIGIBILITY INFORMATION RETURNED IN PROVIDERONE

After Webinar you can:

- Search for the ProviderOne Client ID in ProviderOne
- Determine if the client:
  - has Medical Assistance
  - has a spenddown balance that may affect eligibility
  - has any special limitations or restrictions
  - is enrolled in a Managed Care Plan
- View the categories of services the client is eligible to receive

ProviderOne Eligibility Information

- Spenddown information!
- Benefit Service Packages (BSP) are hyperlinked to categories of services a client is eligible to receive
- Restrictions to a specific physician, hospital, or pharmacy
- Hospice coverage
- Developmental Disability Program and children with special healthcare needs
- ProviderOne Client ID (Instead of PIC)

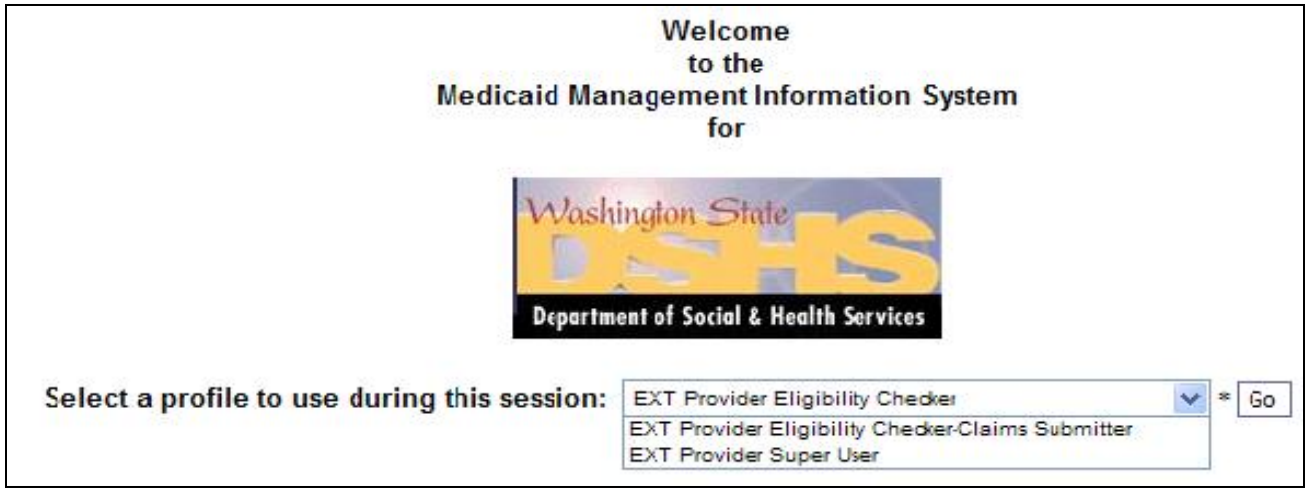
Automatically determines correct timeliness for delayed certification

Key Terms and Acronyms

- Benefits Service Package (BSP)
- Rural Health Center (RHC)
- Regional Support Network (RSN)
- Federally Qualified Health Center (FQHC)
- Primary Care Case Management (PCCM)
- Community Services Office (CSO)
- Spenddown - an expense or portion of an expense which has been determined by the Department to be a client liability

How Do I Obtain Eligibility In ProviderOne

- Select the proper user profile

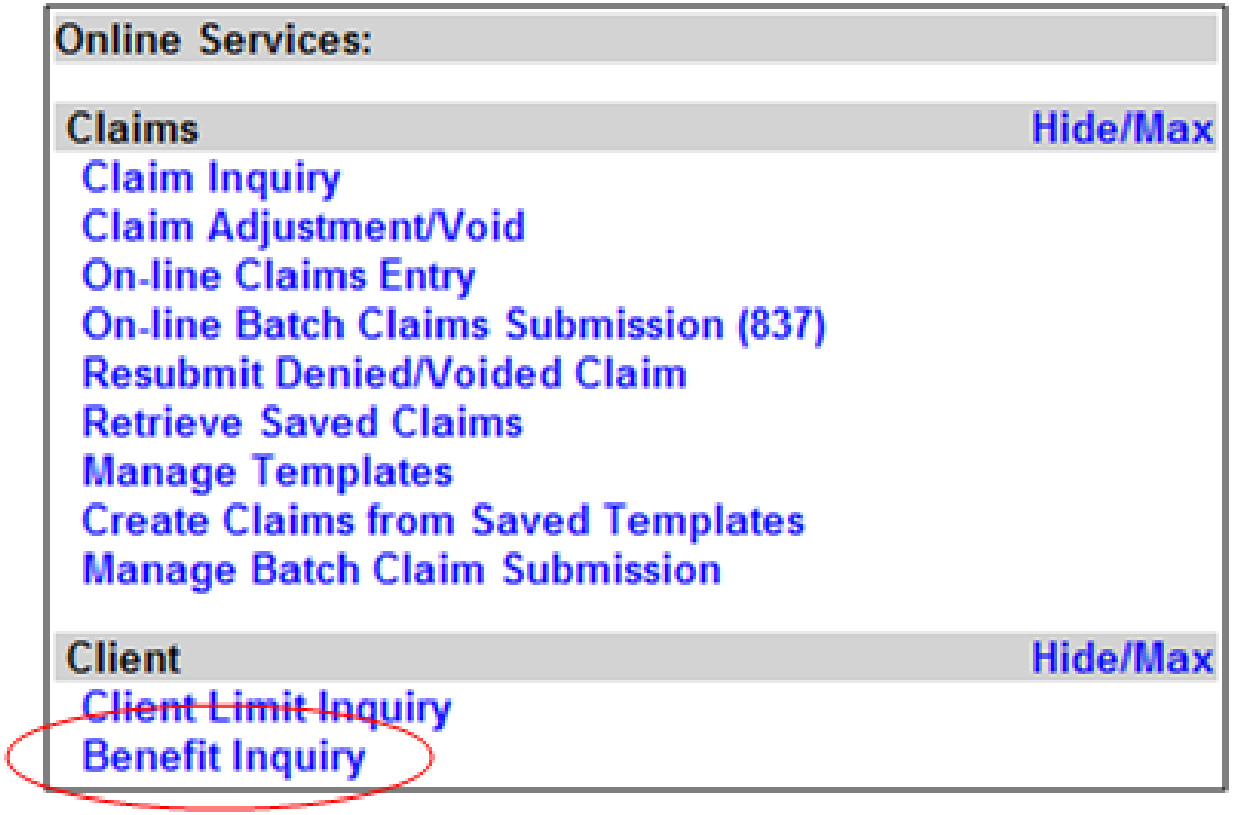


Note: There are three different profiles that can be used for checking client eligibility in ProviderOne

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

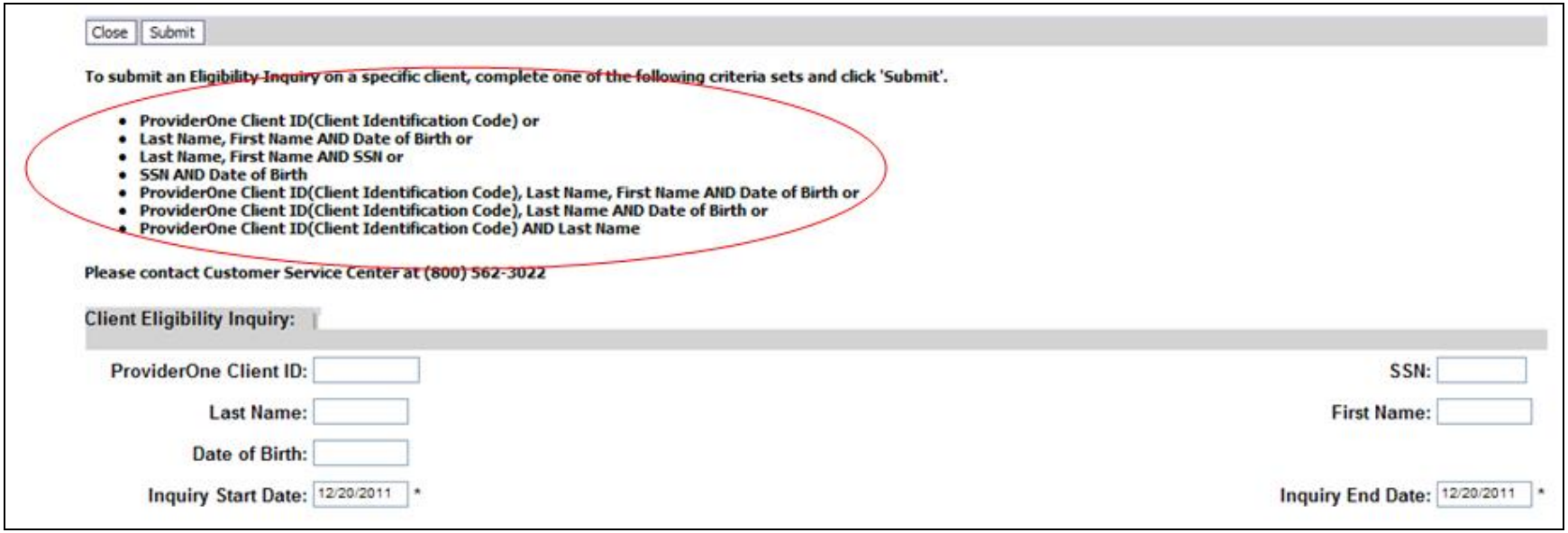
How Do I Obtain Eligibility In ProviderOne

- Select “Benefit Inquiry” under the “Client” section of the Provider Portal

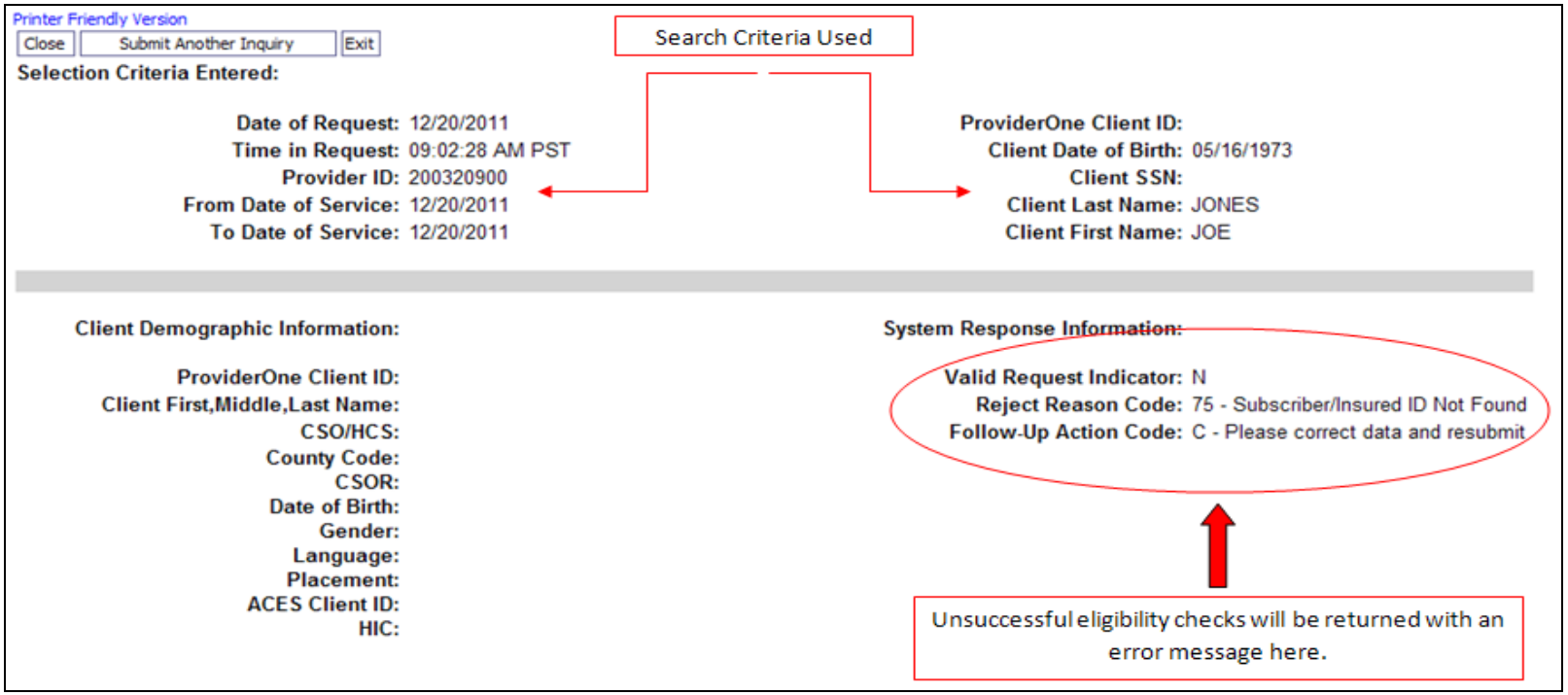


How Do I Obtain Eligibility In ProviderOne

- Use one of the search criteria listed along with the dates of service to verify eligibility



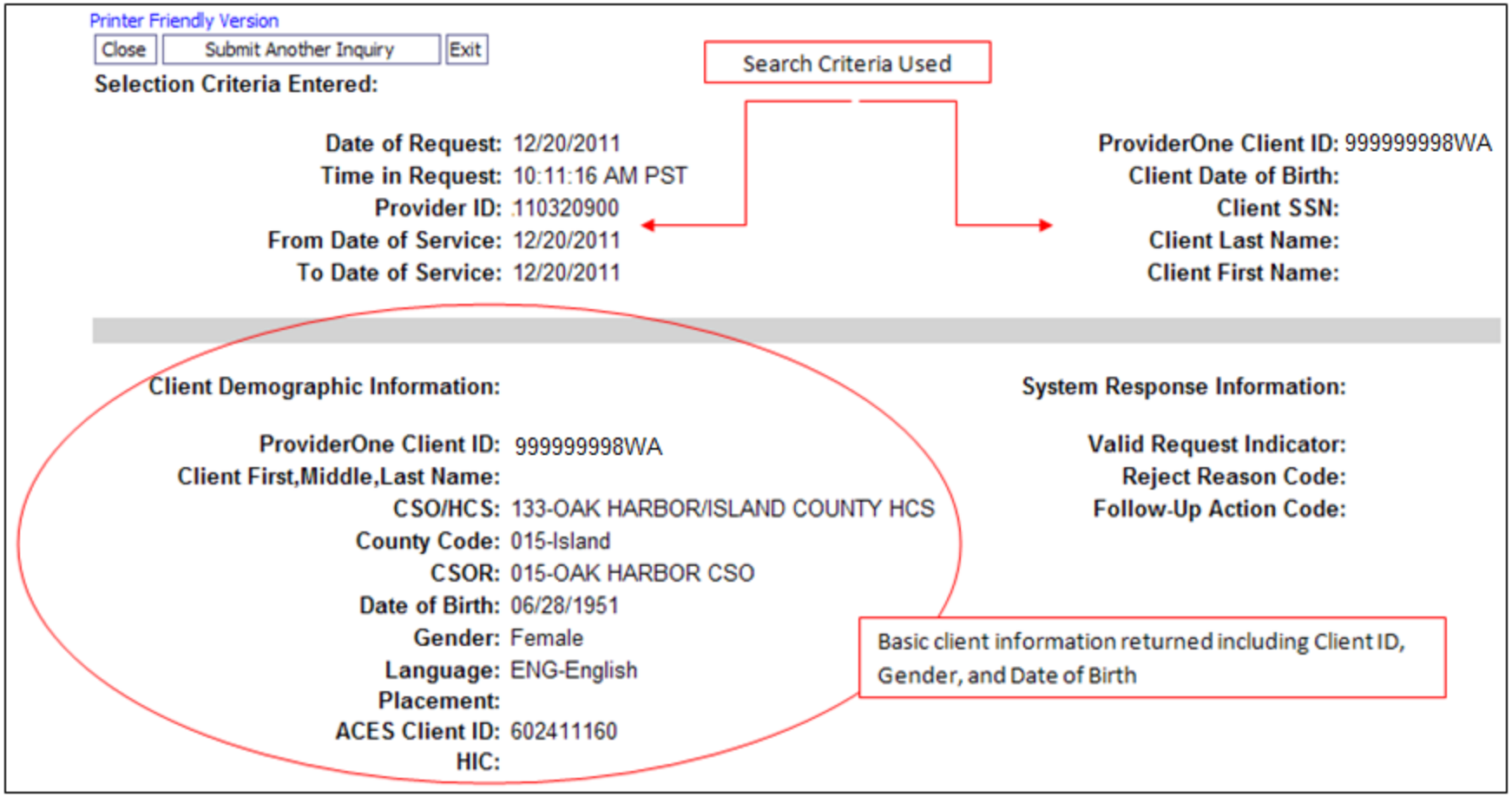
Unsuccessful Eligibility Checks



Note: If unsuccessful eligibility error message is displayed a couple of issues could have happened:

- Keying in of information is incorrect. Verify what was entered,
- Client is not eligible for dates of service entered.

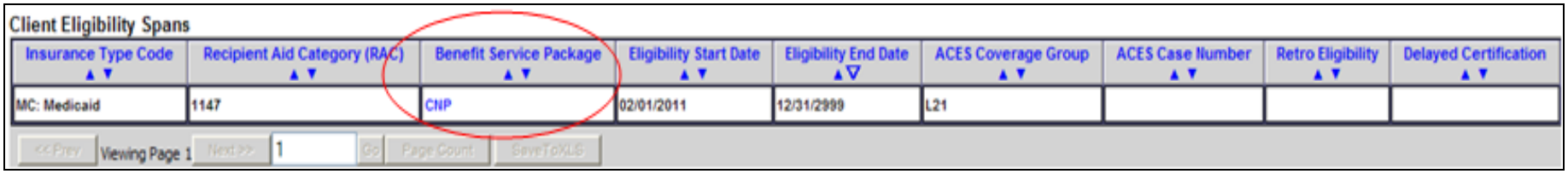
Successful Eligibility Checks



Note: Notice that the eligibility information can be printed out using the “Printer Friendly Version” link located in the upper left corner.

Successful Eligibility Checks

"Client Eligibility Spans"


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	1147	CNP	02/01/2011	12/31/2999	L21			

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Note: Clicking on the "Benefit Service Package" hyperlink will provide a list of covered services for the client.

Spenddown Information

- **Spenddown is a Client Liability**
  - **DSHS determines the Spenddown liability that a client is responsible for**
  - **DSHS does not pay for services or an expense used to meet a client's Spenddown liability and reduces a provider's payment by any amount that is determined to be a client liability**
- **Spenddown liability must be reported on claims for clients who**
  - **Become eligible for LCP-MNP by incurring medical expenses equal to or greater than the Spenddown liability, and some or all of those expenses are included in the claim**
  - **Receive medical services on the Medicaid eligibility start date**
- **Not all LCP-MNP clients are subject to Spenddown reporting**
  - **Aces coverage groups ending in 99 (e.g. S99,P99,F99)**
    - May have a Spenddown liability
  - **Aces coverage groups ending in 95 (e.g. S95, L95, C95)**
    - Not required to meet a Spenddown requirement prior to eligibility

Spenddown Information

- **How do I find out if a client has Spenddown Liability?**
  - **Ask the client for a copy of the Medicaid approval letter that identifies the client's medical bills and the dollar amounts Medicaid used to determine Spenddown liability**
- **Call the customer service line at 1-800-394-4571 to find out the following:**
  - **The client's Medicaid eligibility beginning and ending dates, if questionable**
  - **If the claim was assigned to a client's Spenddown liability**
  - **The exact amount of the Spenddown liability that was assigned on the claim**
- **Review the client eligibility screens in ProviderOne**

For further information regarding Spenddown, refer the Spenddown Fact Sheet.

Successful Eligibility Checks

"Client Eligibility Spans" - Spenddown

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	1030	Pending Spenddown - No Medical	04/01/2011	12/31/2999	S99			

Spenddown Information

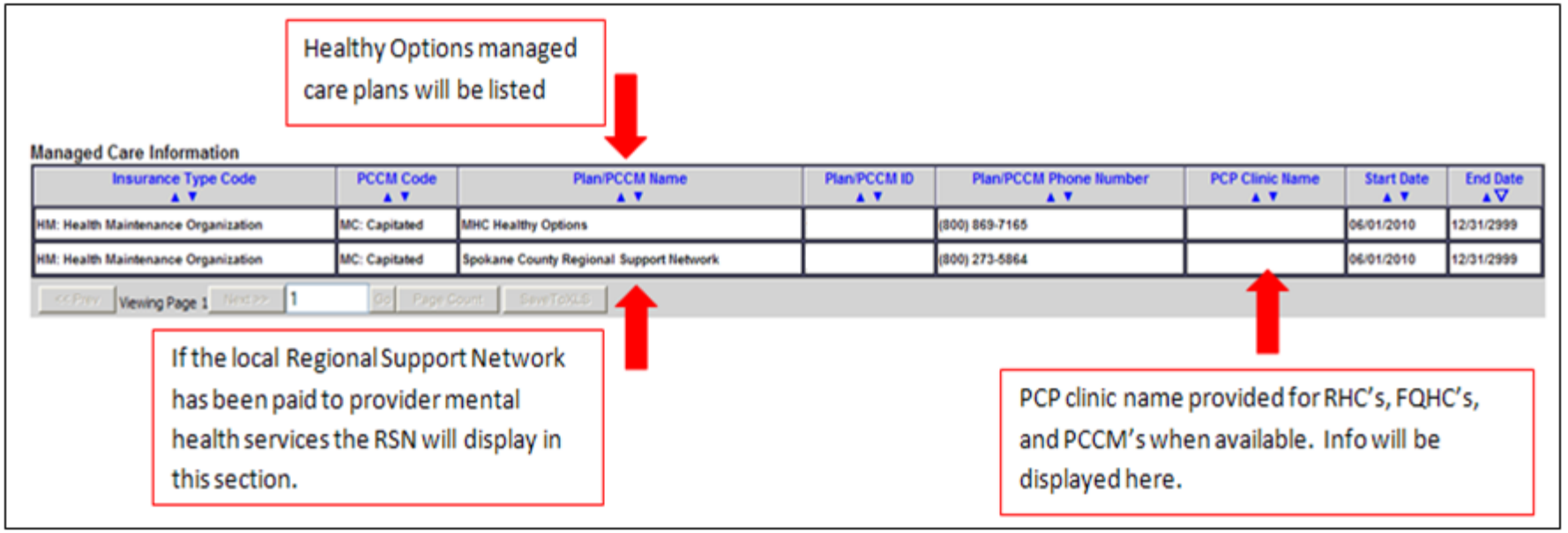
RAC C - 1124 Base Period - Start: 08/01/2011 End: 01/31/2012

Total Spenddown	Spenddown Liability	Remaining Spenddown	EMER Liability	Remaining EMER	Spenddown Status	Update Date	Spenddown Start Date
2022.00	2022.00	2022.00	0.00	0.00	Pending	08/09/2011	08/01/2011

Note: Client may not have eligibility due to a "Spenddown" amount. If a remaining balance needs to be met, it will be shown here.

Successful Eligibility Checks

"Managed Care Information"



Successful Eligibility Checks

"Medicare Eligibility Information"

Medicare Eligibility Information

Service Type Code	Insurance Type Code	Eligibility Start Date	Eligibility End Date
30: Health Benefit Plan Coverage	MB: Medicare Part B	03/01/1980	12/31/2999
30: Health Benefit Plan Coverage	MA: Medicare Part A	02/01/1979	12/31/2999

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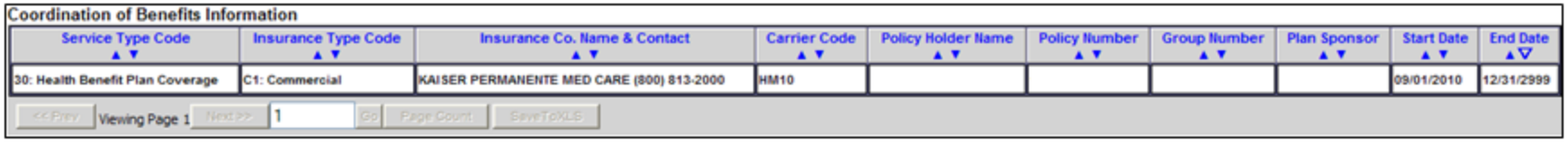
- If client has Medicare Part A or Part B this information will be shown with the Medicare eligibility effective dates of service.

Successful Eligibility Checks

"Coordination of Benefits Information"

- Will display phone number and any policy or group numbers on file with WA Medicaid for the commercial plans listed.



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	KAISER PERMANENTE MED CARE (800) 813-2000	HM10					09/01/2010	12/31/2999

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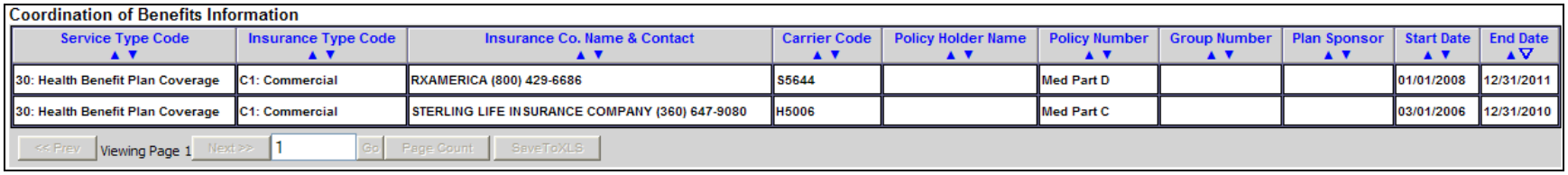

Coordination of Benefits Information

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	RXAMERICA (800) 429-6686	S5644		Med Part D			01/01/2008	12/31/2011
30: Health Benefit Plan Coverage	C1: Commercial	STERLING LIFE INSURANCE COMPANY (360) 647-9080	H5006		Med Part C			03/01/2006	12/31/2010

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Note: The Coordination of Benefits section not only displays commercial insurance information but will also display the Medicare Part C and D plans.

Successful Eligibility Checks

"Restricted Client Information"

- Client's may be restricted to specific Hospitals, PCP's, and Pharmacies for care

Restricted Client Information

Assignment Type	Provider Name	Provider Phone Number	Period Start Date	Period End Date
Hospital	MULTICARE HEALTH SYSTEM		01/05/2010	12/31/2999
Pharmacy	WALGREEN CO		01/01/2010	12/31/2999
Primary Care Physician	SEA-MAR COMMUNITY HEALTH CENTER		01/01/2010	12/31/2999
Primary Care Physician	DITTMER, STEPHANIE		01/01/2010	12/31/2999

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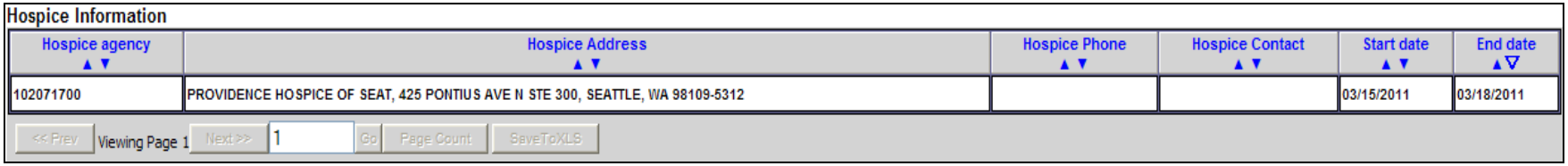
Note: If a client is restricted to specific providers, you will need to get a referral from these providers to see the client. Use this referral when billing your claims.

Successful Eligibility Checks

"Hospice Information"

- Client's may be enrolled in a Hospice agency for care



Hospice Information

Hospice agency	Hospice Address	Hospice Phone	Hospice Contact	Start date	End date
102071700	PROVIDENCE HOSPICE OF SEAT, 425 PONTIUS AVE N STE 300, SEATTLE, WA 98109-5312			03/15/2011	03/18/2011

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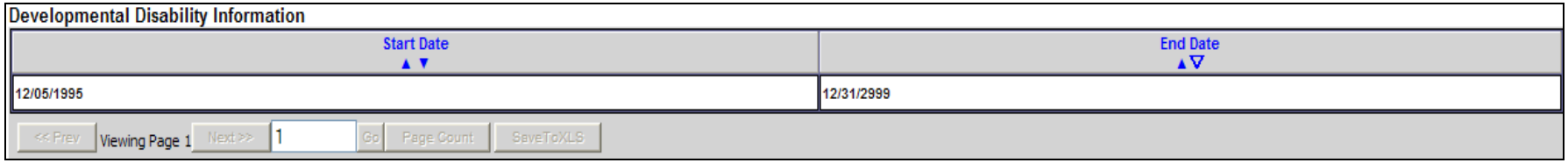
Note: If a client is assigned to a Hospice agency, bill the Hospice agency for any care related to the client's terminal illness. WA Medicaid has paid a monthly payment to the agency to cover these services.

Note: If service is not related to the client's terminal illness, bill these services to WA Medicaid with a note "SCI=K" or with a statement "Not related to terminal illness".

Successful Eligibility Checks

"Developmental Disability Information"

- Client's may be enrolled in the "Developmental Disability" program.


Developmental Disability Information

Start Date	End Date
12/05/1995	12/31/2999

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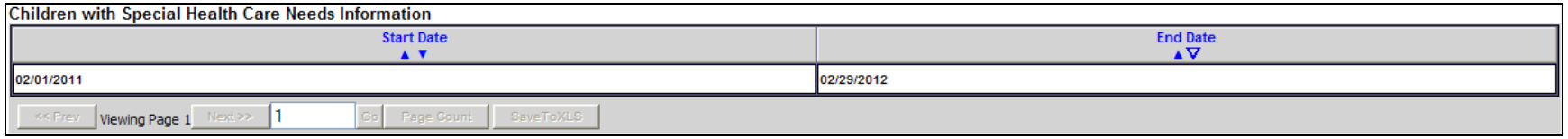
Note: If a client is enrolled in the "Developmental Disability" program they could be entitled to additional services

Successful Eligibility Checks

"Children with Special Health Care Needs Information"

- Client's may be enrolled in the "Children with Special Health Care Needs (CSHCN)" program.


Children with Special Health Care Needs Information

Start Date	End Date
02/01/2011	02/29/2012

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Note: If a client is enrolled in the "Children with Special Health Care Needs (CSHCN)" program they could be entitled to additional services

Successful Eligibility Checks

Information Source Data / Information Receiver Data

- Information Source Data is where the eligibility results were received from
- Information Receiver Data is the office that is requesting the eligibility

Information Source Data

Name:	WA State DSHS
Identification Code Qualifier:	PI: Payor Identification
Primary Identifier:	77045
Contact Name:	WA State DSHS Provider Relations
Communications Number:	(800) 562-3022

Information Receiver Data

Organization:	
Provider Name:	
Provider Number:	

Helpful Resources

- ProviderOne Resources web page
- Visit the ProviderOne Billing and Resource Guide