

## Job Aid

# PRP-101 Eligibility, Benefit Usage Verification and Retro Eligibility

This job aid provides the process for viewing member current and future eligibility, service limits, Early Periodic Screening Diagnostic and Treatment (EPSDT) visits, treatment history, lock-in, managed care information, other insurance, and retro eligibility.

## View Current Member Eligibility

Complete the following steps to verify current member eligibility:

1. From the Provider Portal Secure Home page, Select the **Eligibility** tab.

**Figure 1: Provider Portal Home Page**



The screenshot shows the Provider Portal Home Page. At the top left is the Mississippi Division of Medicaid logo. To its right is a search bar labeled 'Search Medicaid:' with a magnifying glass icon. Below this is a navigation menu with tabs: Home, Eligibility (highlighted with a red box), Claims, Care Management, Patient Health History, Files Exchange, Resources, and Contact Us. A 'Logout' link is visible in the top right corner. Below the navigation menu, the page displays the user's current location and time: 'Home' and 'Tuesday 10/11/2022 02:11 PM CST'. A section for provider information shows: 'Provider Name' UNIVERSITY OF MS MEDICAL CENTER GRE, 'Role IDs' 1558798603 (NPI), 'Location' 000020026 - UNIVERSITY OF MS MEDICAL CENTER GRE, and 'Taxonomy' 282N00000X-General Acute Care Hospital. The main content area features a 'User Details' section with a 'Welcome' message for 'UNIV of MS MC' and links for 'My Profile' and 'Manage Accounts'. A 'Provider' section shows the 'Name' as 'UNIVERSITY OF MS MEDICAL CENTER GRE'. In the center, there is a 'MESA' logo (Medicaid Enterprise System Assistance) and a 'Welcome Health Care Professional!' message. To the right, there are links for 'Sign Up to Receive News', 'Secure Correspondence', and 'Latest News'. At the bottom right, there are links for 'Late Breaking News' and 'Provider Bulletins'.

2. On the **Eligibility** landing page, select the **Eligibility Verification** link, either at the top or the middle of the page.

**Figure 2: Eligibility Landing Page**

The screenshot shows the 'Eligibility' landing page. At the top, there is a search bar labeled 'Search Medicaid:' with a green search icon. Below the search bar is a navigation menu with links for Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, Resources, and Contact Us. The 'Eligibility' link is highlighted. Below the navigation menu, there is a sub-menu with links for Eligibility Verification, Treatment History, and Newborn Enrollment. The 'Eligibility Verification' link is highlighted with a red box. The main content area displays provider information for the University of MS Medical Center GRE, including Role IDs (1558798603 (NPI)) and Taxonomy (282N00000X-General Acute Care Hospital).

3. Enter the Member ID, or if you don't have it, enter two of the following:
  - Social Security Number (SSN)
  - Birth Date
  - Member's Full Name

**Note:** If the user does not receive the expected results with a Member ID search, search with two of the other fields.

**Figure 3: Eligibility Verification Panel**

The screenshot shows the 'Eligibility Verification Request' panel. It contains a form with the following fields: Member ID, Last Name, First Name, SSN, Birth Date, Begin Date, and End Date. A red box highlights the Member ID, SSN, and Birth Date fields. The Begin Date field is pre-filled with '08/16/2023'. There is a note at the top: '\* Indicates a required field.' and a sub-note: 'Enter the member information. If Member ID is not known, enter 2 of the following: SSN, Birth Date, Member Name.'

4. The user does not need to enter dates except to search for a specific time. The Effective To date defaults to the current date if left blank.

**Note:** Search for eligibility history up to three years in the past and four months into the future.

5. To include a service type code or procedure code in your search, select the type of search from the Search By drop-down list, then start typing the desired code. The system will provide a list and narrow it down as more characters are entered.

**Figure 4: Service Type Code or Procedure Code Search**

- When search criteria are entered, select **Submit**.

**Figure 5: Submit Eligibility Verification Request**

- The system returns the eligibility verification for the member, confirming the current assigned coverages. Remember, coverage is not a guarantee as a member can lose eligibility for a variety of reasons. To view coverage information, click the link for the listed coverage.

**Figure 6: Eligibility Verification**

Eligibility Verification Information for MABEL M ZACHARY JR. from 08/21/2023 to 09/04/2023					
Member ID	688026127	Birth Date	08/04/2017	Gender	Female
Coverage	Effective Date	End Date	Add Date	Last Update Date	
<a href="#">Children age 1-5</a>	08/01/2022	08/31/2023	08/16/2022	09/30/2022	
<a href="#">Children age 6-19 with income at/below the MAGI</a>	09/01/2023	12/31/9999	08/16/2022	09/30/2022	
<a href="#">Other Insurance Detail Information</a>					

- To view the coverage limits section, click the **+** at the end of the **Limit Details** row or select **Expand All**.
- To return to the Eligibility Verification panel, click the **Back to Eligibility Verification** link.

Figure 7: Coverage Details

Coverage Details for Member ID 684549557 - CLIFTON A CLEMMONS from 8/30/2020 to 8/30/2023
Back to Eligibility Verification

Verification Response ID 2324200001 [Expand All](#) | [Collapse All](#)

Benefit Details -

Coverage	Effective Date	End Date	Add Date	Last Update Date
Children age 1-5	07/01/2022	12/31/9999	07/20/2022	09/30/2022

Medicare Coverage Detail +

Coverage	Effective Date	End Date	Last Update Date
None			

Managed Care Assignment Details +

Managed Care Plan	Managed Care Plan Phone	Primary Care Provider	Provider Phone	Benefit Plan	Effective Date	End Date
MOLINA HEALTHCARE OF MISSISSIPPI IN	1-844-809-8438			MississippiCAN	10/1/2022	12/31/9999

Limit Details -

**\* Only Service limits that have paid claims will be displayed**

Note: Dollar Limits and Service Limits information may not reflect recent claims and is subject to change daily as available benefits are used and the information provided is not a guarantee for payment.

Service Date

Used	Remaining	Limit	Used	Remaining	Last Service Date
Individual	5501 Dental max dollar amount \$2500	\$2,500.00	\$108.08	\$2,391.92	9/19/2022
		Limit	Used	Remaining	Last Service Date
Individual	5513 Dental prophylaxis service Limit	2	1	1	9/19/2022
	5514 Dental fluoride service Limit	2	1	1	9/19/2022
	5520 Physician Office Visit Service Limit	16	1	15	8/15/2022

Lock-In Details -

Lock-in Provider	Lock-in Provider Phone	Benefit Plan	Effective Date	End Date
ALEXANDER	1-601-486-2458	Community Support Program Lockin	05/01/2023	12/31/2025

Living Arrangement Details -

Level of Care Plan	Provider NPI	Provider Name	Effective Date	End Date
Mississippi Long Term Care	1932278231	VALOBUSHA COUNTY NURSING HOME	05/18/2015	12/31/9999

EPSDT Well Child Service Details -

Service	Last Exam	Next Exam
EPSDT- Medical		12/01/2027
EPSDT- Dental		
EPSDT- Hearing		
EPSDT- Vision		
EPSDT- Other		

Demographic Details -

Street Address 90 HOSKINS CREEK  
City VARDAMAN State Mississippi Zip Code 38878-9523

- The **Benefit Details** panel displays the aid category assigned to the member.
- The **Medicare Coverage Details** display if the member has coverage, or it will state 'None' when the member does not have Medicaid coverage.
- The **Managed Care Assignment Details** displays the Managed Care Name, phone number, Primary Care Provider, and phone number also the CCO plan.
- **Limit Details** are displayed once a date is provided, and the **Search Limits** button is clicked.
- **Lock-In Details** will display if the member has a Lock-in segment with the Lock-in provider's name and phone number, Lock-In benefit plan and the effective/end dates of the lock-in.
- **Living Arrangement Details** displays the member's coverage begin/end for their Long-term care /Nursing Home facility coverage, along with the provider LTC/Nursing home provider and NPI. It will display "None" if the member does not have LTC/Nursing Home Facility for the verification period.
- If the individual has **EPSDT Services**, those details will be displayed as well.
- **Demographic Details** will be displayed for all members.

## View or Add Other Insurance

10. To view or add other insurance for a member, click **Other Insurance Detail Information**.

**Figure 8: Access Other Insurance**

Eligibility Verification Information for HERMAN A SULLIVAN from 10/01/2022 to 10/30/2022			
Member ID	Birth Date	12/01/2014	Gender Female
Coverage	Effective Date	End Date	
<a href="#">Medicaid State Plan</a>	10/01/2022	10/30/2022	
<a href="#">PHARM EPSDT (PBM Plan 400)</a>	10/01/2022	10/30/2022	
<b>Other Insurance Detail Information</b>			

11. The portal displays any other insurance policies for the member. If the member does not have TPL coverage, the Other Insurance Panel will display 'None'. To view details for any record in this list, click the **plus +** sign on the left.
12. To **add** other insurance, enter the carrier and policy holder information, then click **Add**. The system creates the record and stores it in the Other Insurance list; however, it will not appear when the user returns to this list until it is validated.

Figure 9: Other Insurance Panel

Other Insurance Information for Member ID 349983687 - HERMAN A SULLIVAN from 8/30/2023 to 8/30/2023 [Back to Eligibility Verification](#) ?

\* Indicates a required field.

Click '+' to view details in a row. Click '-' to collapse the row.

There is no Third-Party Liability (TPL) Insurance Information available on records. Click on the Add button to add TPL information. It will be reviewed and added to the member profile after validation.

	Carrier Name	Policy #	Group #	Policy Holder	Policy Type	Effective From	Effective To
<input type="checkbox"/>	CAREMARK/CVS	F020659745954	RX5449	HERMAN A SULLIVAN	OTHER INSURANCE	09/01/2017	09/30/2017
<input type="checkbox"/>	CAREMARK/CVS	V362354838474	RX5449	HERMAN A SULLIVAN	OTHER INSURANCE	02/01/2017	08/24/2017
<input type="checkbox"/>	HUMANA	O1656344012	R8679001	HERMAN A SULLIVAN	HEALTH INSURANCE	06/01/2015	12/31/2016
<input type="checkbox"/>	CIGNA	Q70579203	R8679001	HERMAN A SULLIVAN	OTHER INSURANCE	06/01/2015	12/31/2016

**Other Insurance Carrier Information**

\*Carrier Name       \*Policy #       \*Group #

Policy Type

\*Effective From

**Other Policy Holder Information**

\*Subscriber Last Name       \*First Name       MI

\*Birth Date

\*Social Security Number

\*Confirm Social Security Number

## View Treatment History

1. View **Treatment History** to verify if a particular CPT, HCPCS or Rev code has been billed.
2. Under the eligibility page, select **Treatment History** link at the top or the middle of the page.

**Figure 10: Treatment History**

The screenshot shows the Medicaid Eligibility system interface. At the top, there is a navigation bar with links: Home, Eligibility, Claims, Care Management, Patient Health History, Files Exchange, Resources, and Contact Us. Below this is a sub-navigation bar with links: Eligibility Verification, Treatment History, and Newborn Enrollment. The main content area displays the 'Eligibility' page. On the left, there is a sidebar with a blue button labeled 'Eligibility' and three links: 'Eligibility Verification', 'Treatment History', and 'Newborn Enrollment'. A red arrow points to the 'Treatment History' link in the sidebar. Another red arrow points to the 'Treatment History' link in the sub-navigation bar. The main content area also displays provider information: Provider Name (WALGREENS #10131), Role IDs (1780797639 (NPI)), Location (003126089 - WALGREENS #10131), and Taxonomy (333600000X-Pharmacy). The date and time are shown as Monday 11/21/2022 05:12 PM CST.

3. Select the **Medical or Dental** tab. The medical tab is also for **Vision**. (See Figure 11).
4. Enter the **Member ID #**.
5. Select **Lifetime** or enter the **Service From / To Date**.
6. Select the **Procedure Code Type** drop down and select CPT/HCPCS or Rev Code.
7. Enter the **Code**. You can enter a few numbers and a code selection will populate.

**Figure 11: Treatment History – Medical Tab**

**Search Treatment History** ?

Medical
Dental

\* Indicates a required field.

This search feature retrieves PAID claim records for a particular Member ID as of the timeframe submitted.

Enter the Member ID, Date of Service, and Procedure Type/Code, then click **Search**. Select **Lifetime** to view treatment history for the procedure identified over the lifetime of the patient. Click **Reset** to clear all fields.

**Member Information**

**\*Member ID**

**Service Information**

**\*Service From Date**  **To Date**   Lifetime ←

**\*Procedure Code Type**  **\*Procedure Code**

Search
Reset

**Search Results**

Total Records: 44

Service Date ▼	Procedure Code	Description	Units
09/21/2022	T4534	YOUTH SIZE PULL-ON	6
09/20/2022	T4534	YOUTH SIZE PULL-ON	6



**Figure 12: Treatment History – Medical Tab-Vision CPT Code Search**

Medical **Dental**

\* Indicates a required field.

This search feature retrieves PAID claim records for a particular Member ID as of the timeframe submitted.

Enter the Member ID, Date of Service, and Procedure Type/Code, then click **Search**. Select **Lifetime** to view treatment history for the procedure identified over the lifetime of the patient. Click **Reset** to clear all fields.

**Member Information**

\*Member ID

**Service Information**

\*Service From Date  To Date   Lifetime

\*Procedure Code Type  \*Procedure Code

**Search Results**

Total Records: 1

Service Date ▼	Procedure Code	Description	Units
02/16/2022	V2020	VISION SVCS FRAMES PURCHASES	1

**Figure 13: Treatment History – Dental Tab**

Medical **Dental**

\* Indicates a required field.

This search feature retrieves PAID claim records for a particular Member ID as of the timeframe submitted.

Enter the Member ID, Date of Service, and Procedure Code or Tooth Number, then click **Search**. Click **Reset** to clear all fields.

**Member Information**

\*Member ID

**Service Information**

Either Procedure Code or Tooth Number is required.

Procedure Code  \*Date of Service

Results will show services that are only compensable once per lifetime

Tooth#/Letter

**Search Results**

For Treatment Detail, click on any procedure code.

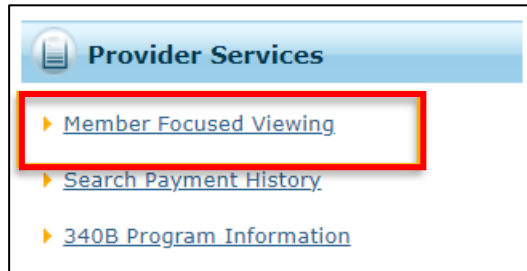
Total Records: 12

Service Date ▼	Procedure Code	Tooth#/Letter	Oral Cavity Area	Tooth Surface
09/13/2022	D0150			
09/13/2022	D0272			
09/13/2022	D1120			

## View Retro Eligibility

1. To view **Retro Eligibility**, log into the portal, and select the **Member Focused Viewing Link** found at the bottom, left side of the home page.

**Figure 14: Member Focused Viewing Link**



2. Select the **Search Tab**, enter the **Member ID**, and select **Search**.
3. The Last Members Viewed Tab will show a list of the members that were searched.

**Figure 15: Member Focus Search**

The screenshot shows a web form titled "Member Focus Search". At the top, there are two tabs: "Last Members Viewed" and "Search", with the "Search" tab highlighted in red. Below the tabs, there is a red asterisk icon and the text "Indicates a required field." followed by the instruction "Enter the Member ID or Last Name, First Name and Birth Date." The form contains several input fields: "Member ID" (highlighted in red), "Last Name", "City", "First Name", "Zip Code", and "Birth Date" (with a calendar icon). At the bottom of the form, there are two buttons: "Search" (highlighted in red) and "Reset".

4. This shows you the member demographics, the original effective date, and the end date of coverage.

**Figure 16: Member Focus Details**

The screenshot shows the "Member in Focus" page for Clifton A. Clemmons. At the top, it displays "Member in Focus: CLIFTON A CLEMMONS Change" and "ID: 684549557" with a "Close Member Focus" button. On the left, there is a photo of a doctor and a patient. The main content is divided into two sections: "Member Details" and "Coverage Details".

**Member Details:**

- Member ID: 684549557
- Name: CLIFTON A CLEMMONS
- Birth Date: 03/09/2020
- City: FOREST
- State: Mississippi
- Gender: Male
- Primary Language: ENGLISH

**Coverage Details:**

Coverage	Effective Date	End Date
Children age 1-5	07/01/2022	12/31/9999

Below the coverage table, there is a link: "View eligibility verification information".

## Change History

The following change history log contains a record of changes made to this document:

Version #	Published/ Revised	Author	Section/Nature of Change
1.0	10/21/2022	Gainwell	Initial publication
1.2	01/13/2023	Gainwell	Updated
1.3	5/18/2023	Gainwell	Updated based on CR1980 and CR1925
1.4	5/19/2023	Gainwell	Updated verbiage and images
1.5	05/22/2023	Gainwell	Updated images per review
1.6	8/17/2023	Gainwell	Updated per CR1982
1.7	8/30/2023	Gainwell	Updated per CR1983