Colorado Medical Assistance Program Web Portal

Client Eligibility User Guide

An eligibility inquiry is used to verify a client's benefit coverage for a specified date range. The two ways to request the eligibility status of a client are:

- Eligibility Inquiry: a single client at a time – immediate response
- Batch Eligibility Inquiry: up to 99 clients at the same time – a delayed response report available in File and Report Service (FRS) that will display in the ASC X12 N 271 format.

Eligibility Inquiry

1. From the **Main Menu**, under **Eligibility** choose **Eligibility Inquiry**.
2. Enter the **Provider ID** by:
   1. Directly keying the **Provider ID** in the entry box, or
   2. Entering the first few characters of the **Provider ID** in the entry box and clicking the down arrow. This will bring up the provider search box where the provider may be selected from the table (Figure 1). Click on the desired entry.

The **National Provider Identifier** (**NPI**) field will auto-populate after selecting the provider when the **NPI** is stored in the provider's data maintenance record. The provider's **NPI** may also be used instead of the **Provider ID**. Either the **Provider ID** or the **NPI** must be entered. It is okay for the **Provider ID** and the **NPI** to be displayed on the screen, however, only the **NPI** will be submitted in the transaction.

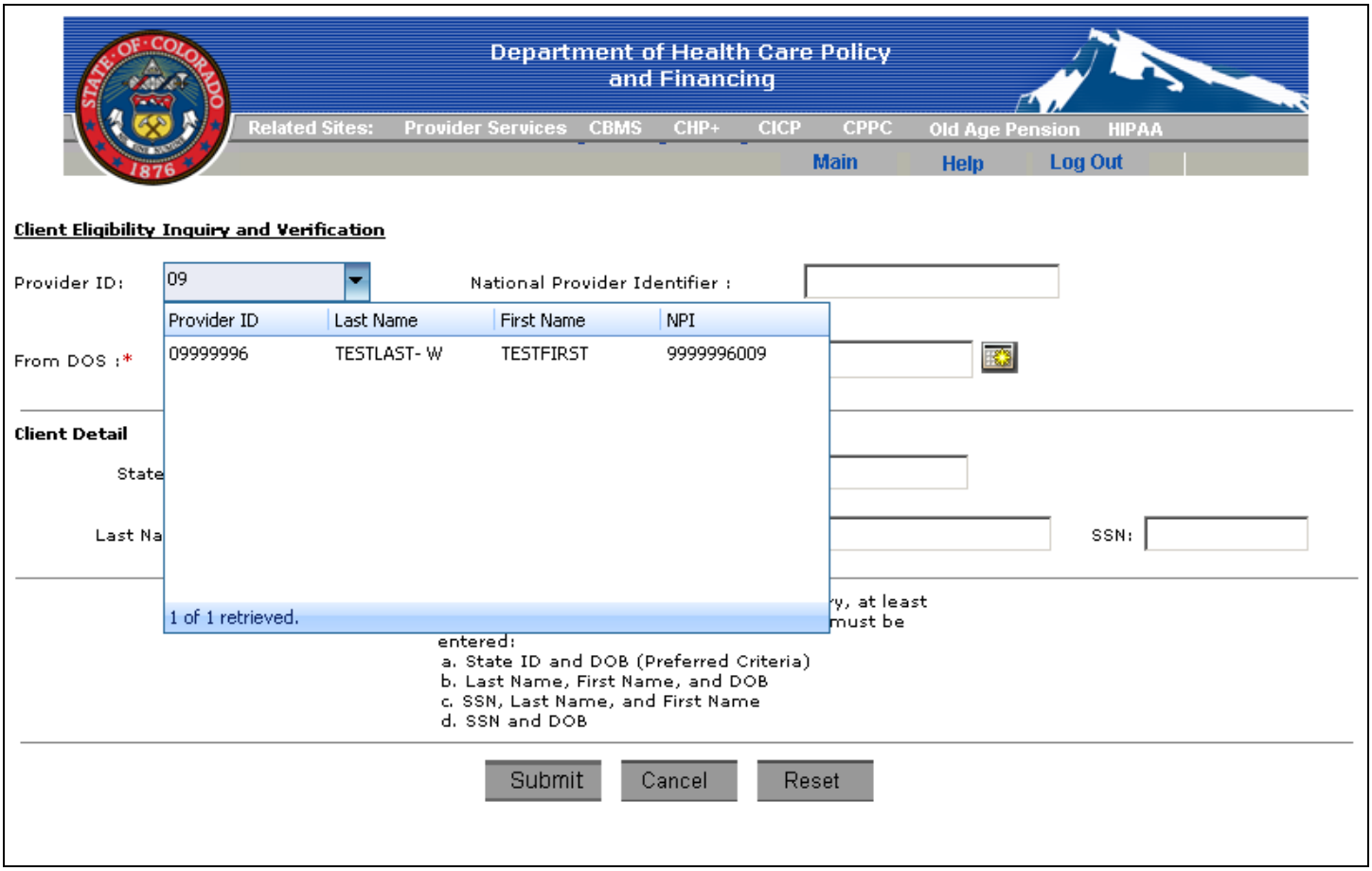

Figure 1 – Provider ID drop-down box

3. Enter the applicable **From DOS** (**Date of Service**) and **Through DOS** by typing the dates in **mm/dd/yyyy** format or by using the calendar option next to the field (Figure 2). **DOS** fields are required, and future dates are not valid and cannot be submitted.

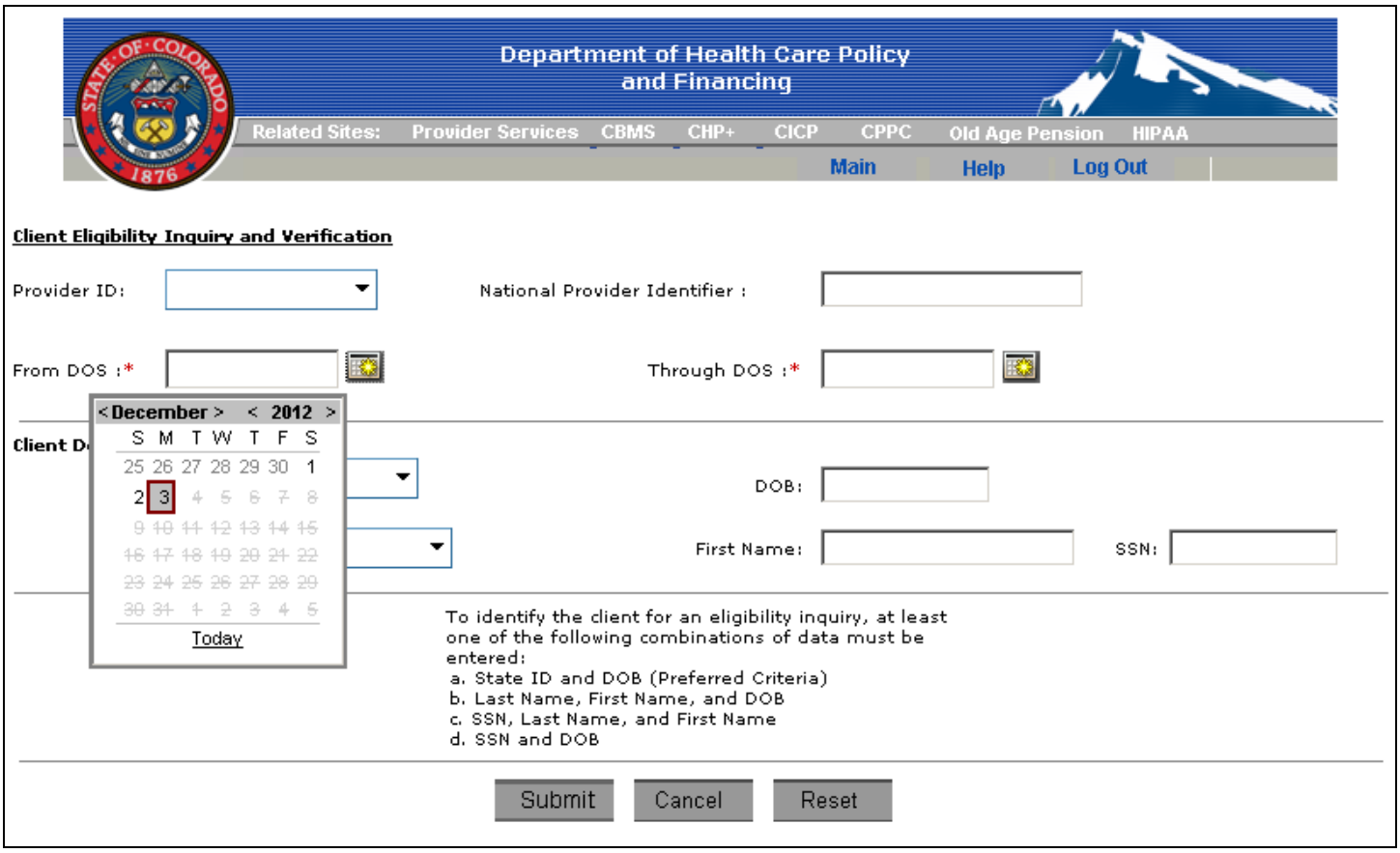

Figure 2 – Calendar drop-down box

- Complete the **Client Details** section by entering client data as listed in the area below the **Client Detail** section (Figure 3The **State ID** and **Last Name** fields have a search feature that will attempt to locate an associated record in the database as you begin to enter data characters. As individual characters are entered, the field will provide a drop-down box with entries that closely match the characters entered. Click on the desired record and the available information from your client maintenance database will pre-fill the remainder of the client fields for you.

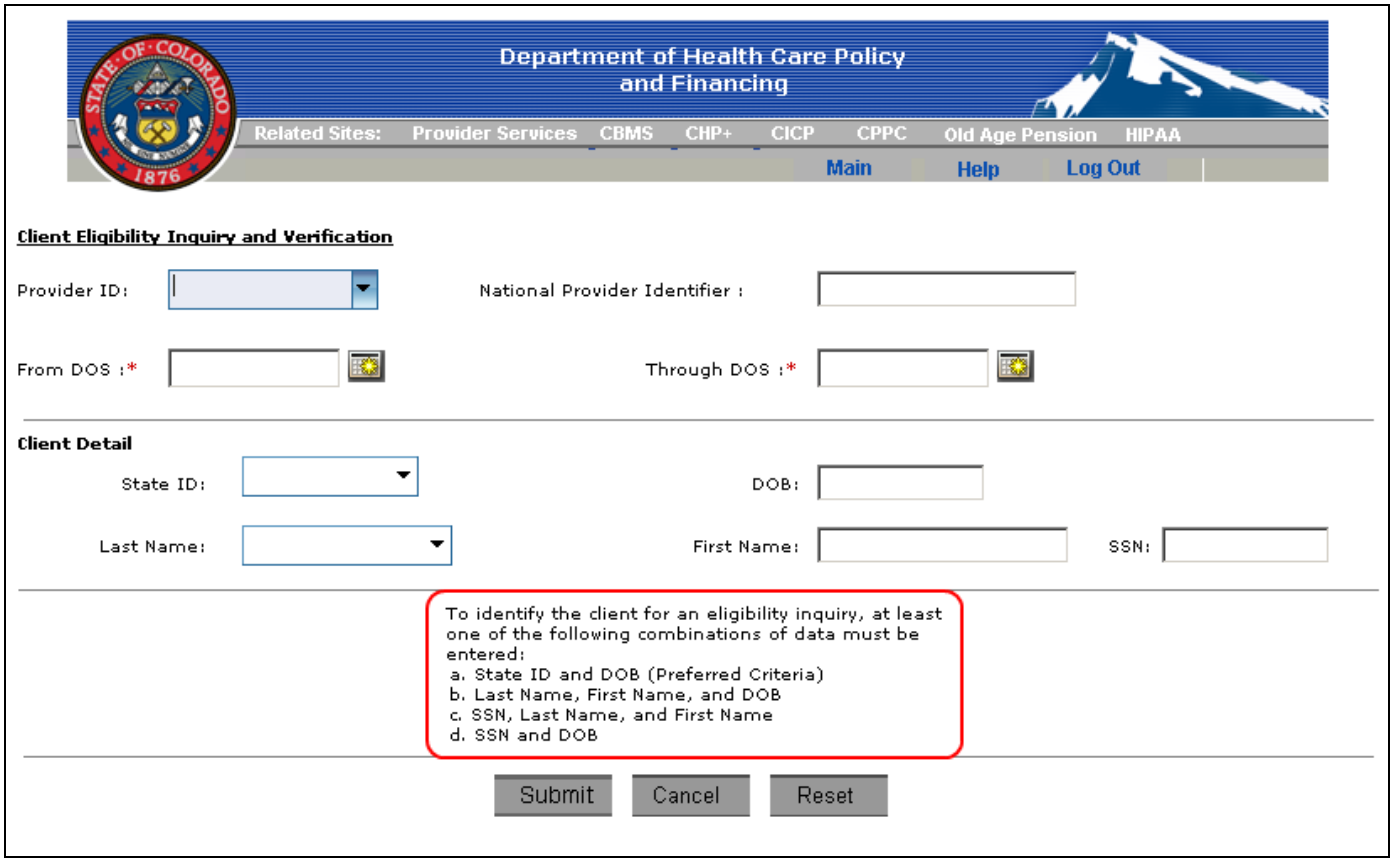

Figure 3 – Client Detail entry combinations

4. Click on the **Submit** button to transmit the data for an eligibility inquiry.

- ***An unsuccessful submission will result in the following:***
  Error messages will be displayed in red above the **Provider ID** field if there are errors in the format of the fields or required fields are not completed. Correct the errors and then click on the **Submit** button again.
- ***A successful submission will result in the following:***
  The message "***Processing Your Request, Please Wait...***" will be shown until the eligibility response is displayed (Figure 4).

Figure 4 – Response Wait screen display

A successful submission will then return the eligibility response (Figure 5):

Print

Return To Eligibility Inquiry

Eligibility Request

Provider ID:99999999 National Provider Identifier:

From DOS: 7/1/2010 Through DOS: 7/1/2010

Client Detail

State ID:X999999 DOB: MM/DD/YYYY

CO MEDICAL ASSISTANCE Eligibility Response

Response Creation Date & Time: 06/21/2011, 13:32:0782

Contact Information for Questions on Response

Provider Relations Number: 800-237-0757

Requesting Provider

Provider ID: 99999999

Name: XXXXXXXXXX, MD

Client Details

Name:XXXXXXXX, XXXXXXXX

State ID: X999999

Address:

9999 XXXXXXXXXX

XXXXXXXX, CO 99999

County: XXXXXXXXXX

Date of Birth: MM/DD/YYYY

Gender: XXXXXXXXXX

Client Eligibility Details

Eligibility Status: **Eligible**

Eligibility Benefit Date:

07/01/2010 - 07/01/2010

Guarantee Number: **111720000000**

Coverage Name: Medicaid

Figure 5 – Successful Eligibility Response display

The following sections may be included in an Eligible client response:

- **Eligibility Request** – a recap of the details submitted for the request
- **Accountable Care Collaborative (ACC) Information** – additional information for ACC if the client is an ACC client.
- **Child Health Plan Plus Program (CHP+) Enrollment Information** – The CHP+ enrollment Health Plan Name and enrollment begin and end dates.
- **Contact Information** – the phone number to call should questions arise for any of the eligibility information
- **Requesting Provider** – a recap of the requesting provider information
- **Client Details** – a recap of the client information on file in the Medicaid Management Information System (MMIS)
- **Client Eligibility Details** – information regarding the **Eligibility Status** for the requested client and **Dates of Service**
- **Copayment Information** – details regarding the copayment required from the client
- **Prepaid Health Plan** – displays the information regarding the type of coverage with regard to Medicaid
- **Third Party Liability** sections – these sections display information regarding other insurance coverage the client has on file with the Medicaid office

To print the response, click on the **Print** button. Click on the **Cancel** button to terminate the transaction and return to the **Main Menu**. Click on the **Reset** button to clear the Provider ID and client detail data and remain on the same screen.

When a response is received for an eligibility request and the client is eligible, the client information in the response is compared against the client's record in your Client Maintenance database. The Client Update Review Screen is displayed the first time an eligibility inquiry is made for a client or if the client's information in the MMIS has changed since the last inquiry. The user will have an option to accept or reject the update with the latest information from MMIS (Figure 6). Accepting the changes allows for the most recent eligibility status.

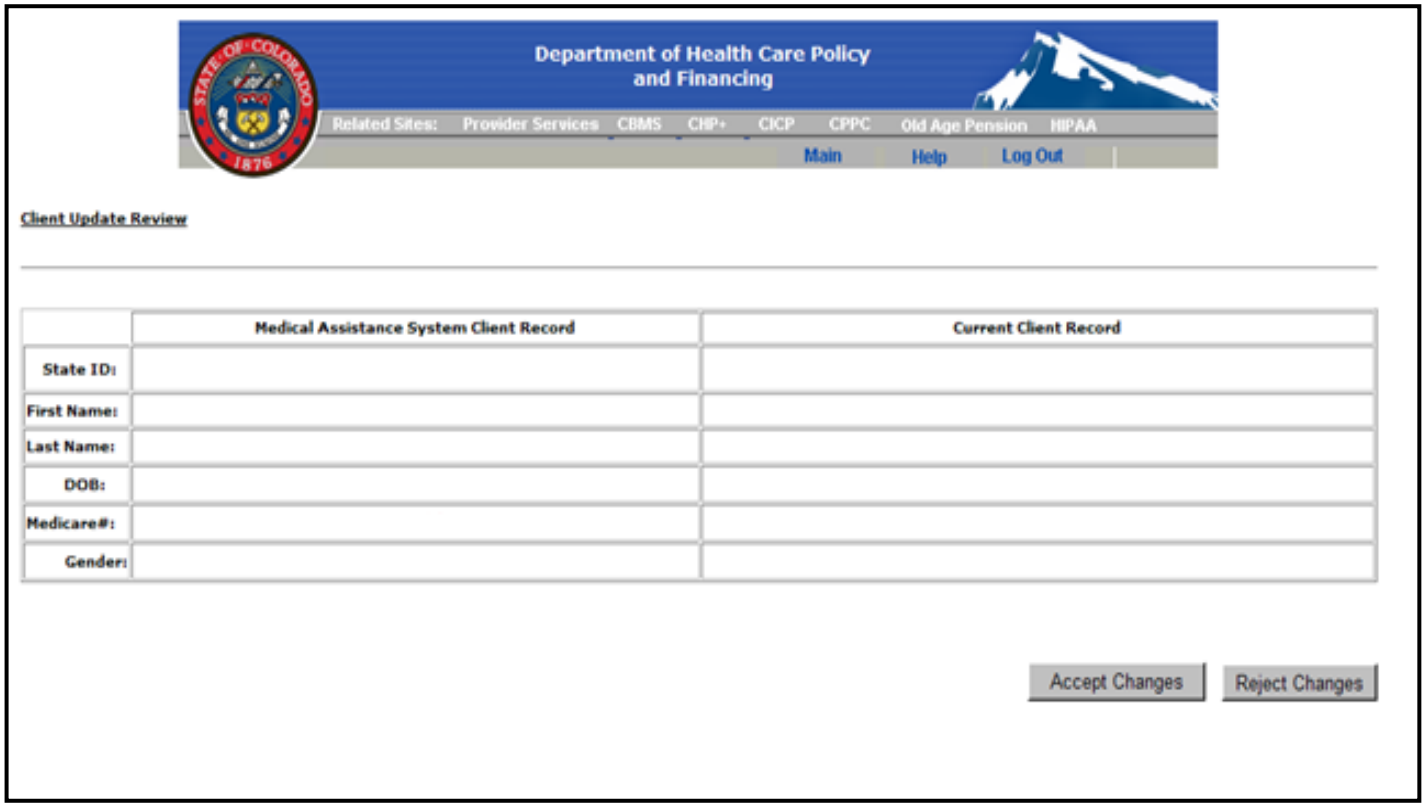

Figure 6 – Client Update Review screen

Batch Eligibility Inquiry

The Batch Eligibility Inquiry allows you to request the eligibility status for multiple providers and clients at the same time. Unlike the single Eligibility Inquiry option, the Batch Eligibility Inquiry uses a client selection list located at the bottom of the screen. The table will remain empty until clients/providers are entered at the top of the screen and saved to the table by using the **Add Client to List** button.

Add Clients to List

The following are the recommended steps to building the client list:

1. Enter the provider in the **Provider ID** field by keying the first few characters of the **Provider ID** to display a drop-down box of available providers in your Trading Partner's Provider Maintenance database. Scroll through the list to find the required **Provider ID** and click on the record.
   When the **National Provider Identifier** (**NPI**) is included in the Provider Maintenance record, the **NPI** will auto-populate the **NPI** field. The **NPI** can also be selected from the drop-down **National Provider Identifier** field. The screen will refresh once a provider has been chosen. It is okay for the **Provider ID** and the **NPI** to be displayed on the screen, however, only the **NPI** will be submitted in the transaction.

2. Complete the **Client Details** by entering client data as listed in the area below the **Client Detail** section:
   a) The **State ID** and **Last Name** fields have a feature that will attempt to locate an associated record in your Client Maintenance database as you begin to enter data characters. As individual characters are entered, the field will provide a drop-down box with entries that closely match the characters entered. Click on the desired record and the available information from your Client Maintenance database will pre-fill the remainder of the client fields for you.
   b) Enter the applicable **From DOS** (**Date of Service**) and **Through DOS** by typing the dates in **mm/dd/yyyy** format or by using the calendar option next to the field. **DOS** fields are required, and future dates are not valid and cannot be submitted.
   c) Click on the **Add Client to List** button. The screen will refresh and the client's name will appear in the client list at the bottom of the screen.

Prepare a Batch for Submission

There are two methods in which to prepare a batch eligibility request:

- Inquiry from Client List
- Inquiry by Single Provider

Inquiry from Client List

1. From the **Main Menu**, under **Eligibility** choose **Batch Eligibility Inquiry**.
2. Select **All Providers** in the **Provider ID** field. This will allow the client list to display all records regardless of the provider (Figure 7).

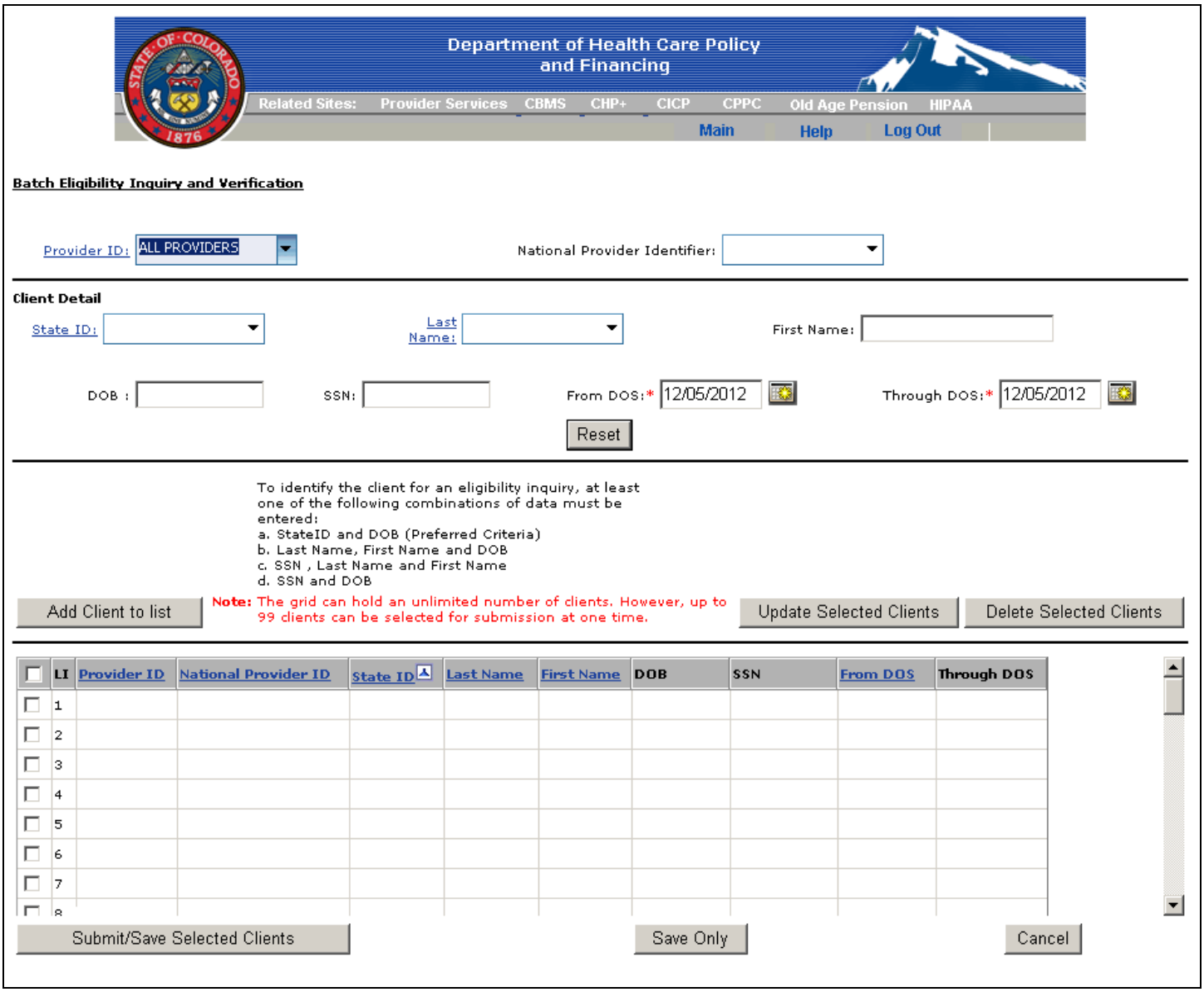

Figure 7 – Provider ID set to "All Providers"

3. Select the clients to be included in the eligibility inquiry from the client list by clicking the box at the left of the row where the client's name appears. If a client is listed more than once, select the client record(s) that has the appropriate **Provider ID** and **Date of Service** associated with it. To select all clients in the list, click the box at the top of the column of boxes.

If you need to change the **Dates of Service** for clients in the client list, click in the check box of the client or clients that will have the same **From** and **Through Dates of Service**, enter the new dates in the appropriate box in the client detail area, and click on the **Update Selected Clients** button to have the revised dates updated for the selected clients. Click on the **Save Only** button at the bottom of the screen to save the changes.

4. Click on the **Submit/Save Selected Clients** button to submit the inquiry. The batch report will be located in the File and Report Service (FRS). The Batch Eligibility report will display in the ASC X12N 271 format and, in general, will be available in the FRS after two hours. It may be necessary to import the file into another application in order to read the report.

Inquiry by Single Provider

1. From the **Main Menu**, under **Eligibility** choose **Batch Eligibility Inquiry**.
2. Enter the **Provider ID** to restrict the client list to records previously saved in the list for that provider. The **Provider ID** can be entered by directly keying the **Provider ID** in the entry box, or by entering the first few characters of the **Provider ID** in the entry box and clicking the down arrow. This will bring up the provider search box where the provider may be selected from the table. Click on the desired entry.
3. View the selected **Provider ID's** client list to verify all clients to be included in the inquiry are listed.
4. Add clients not appearing on the selected **Provider ID's** client list. Complete the **Client Detail** section by conducting a search using the **State ID** or **Last Name** according to the following:

   The **State ID** and **Last Name** fields have a search feature that will attempt to locate an associated record in the database as you begin to enter data characters. This means that as individual characters are entered, the field will provide a drop-down box with entries that closely match the characters entered. Click on the desired record and the available information from your Client Maintenance database will pre-fill the remainder of the client fields for you.

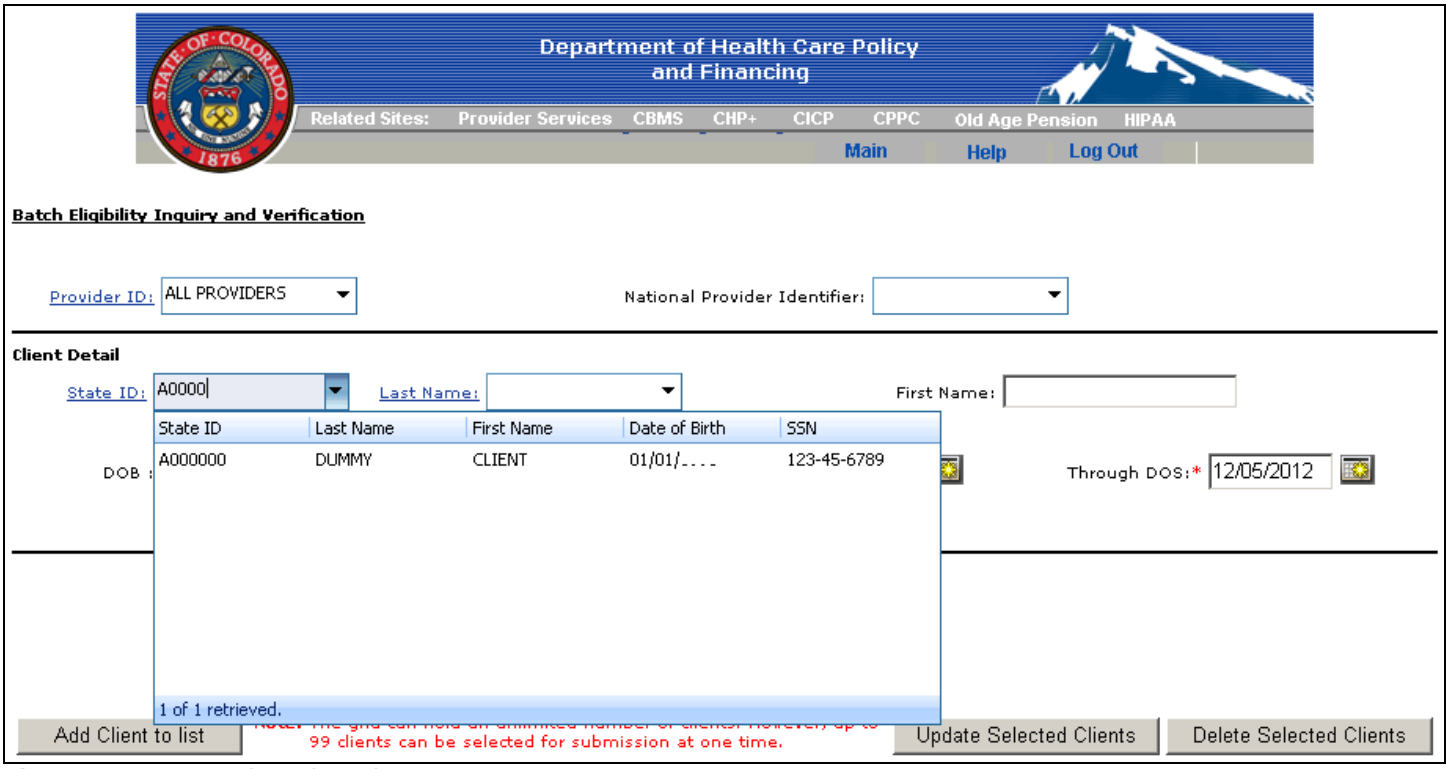

Figure 8 – State ID drop-down box

5. Enter the applicable **From DOS** (**Date of Service**) and **Through DOS** by typing the dates in **mm/dd/yyyy** format or by using the calendar option next to the field. **DOS** fields are required, and future dates are not valid and cannot be submitted.
6. Click on the **Add Client to List** button. The screen will refresh and the client's name will appear in the client list at the bottom of the screen.
7. Select the clients to be included in the eligibility inquiry from the client list by clicking the box at the left of the row where the client's name appears. To select all clients in the list, click the box at the top of the column of boxes in the column heading bar (Figure 9).

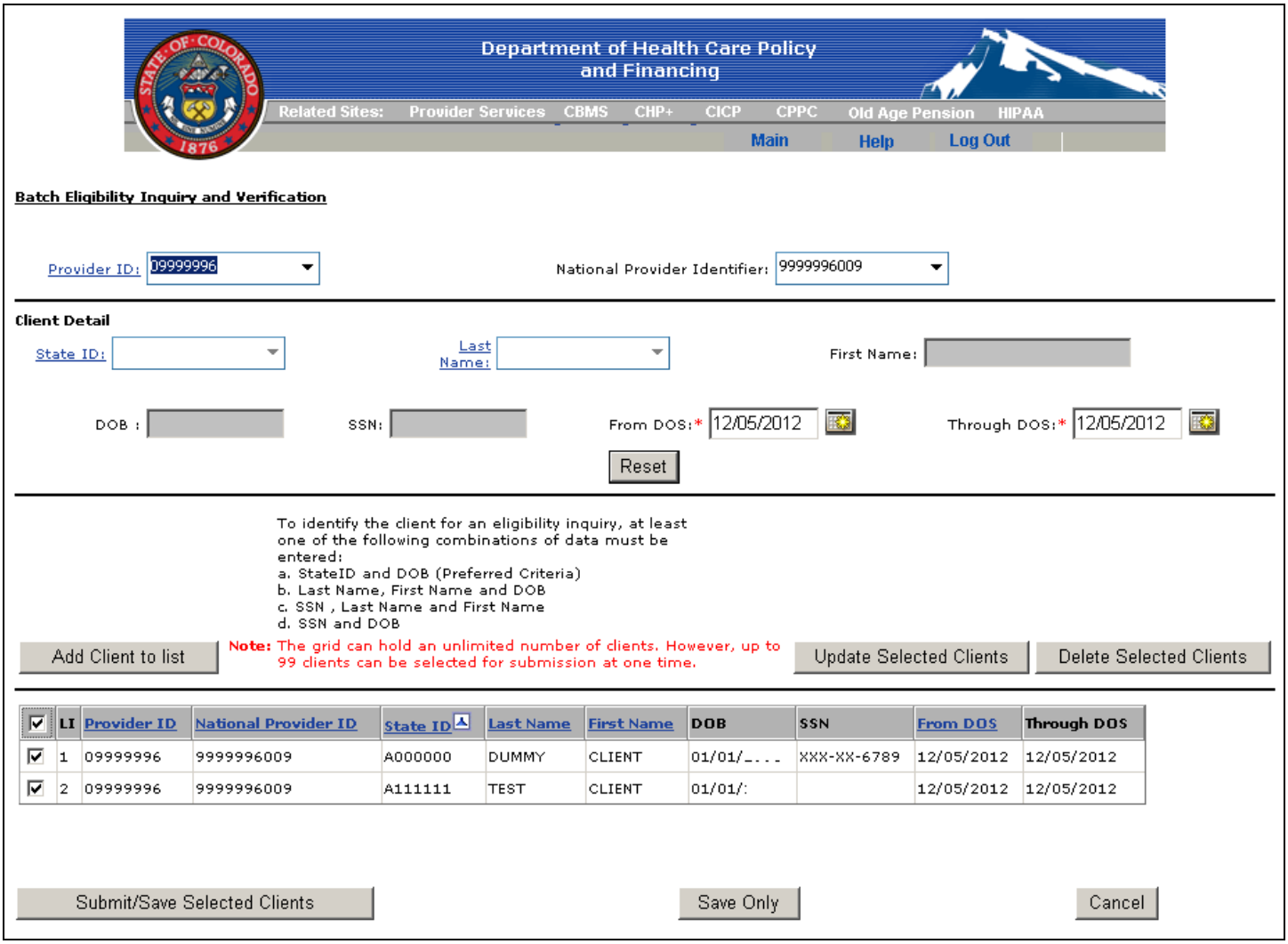

Figure 9 – All names in the client list selected for inquiry

If you need to change the **Dates of Service** for clients in the client list, click in the check box of the client or clients that will have the same **From** and **Through Dates of Service**, enter the new dates in the appropriate box in the client detail area and click on **Update Selected Clients** to have the revised dates updated for the selected clients. Click on the **Save Only** button at the bottom of the screen to save the changes.

5. Click on the **Submit/Save Selected Clients** button to submit the inquiry. The batch report will be located in the File and Report Service (FRS). The Batch Eligibility report will display in the ASC X12N 271 format and, in general, will be available in the FRS after two hours. It may be necessary to import the file into another application in order to read the report.

Additional Functions

- Click on the **Reset** button to clear the client detail data and remain on the same screen.
- Click on the **Save Only** button to save client detail data and remain on the same screen. This will not submit an eligibility request.
- Click on the **Cancel** button to terminate the transaction and return to the **Main Menu**.
- Click on the **Delete Selected Clients** button to remove any client records in the list where the box for the record is checked. To delete all records in the list, click in the check box located next to the **LI** field title in the column header. This will select all records in the list. Click on the **Delete Selected Clients** button to complete the delete.

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