



Provider Web Portal Quick Guide: Adding and Updating Third-Party Liability (TPL) Information

If a member has Third-Party Liability (TPL) coverage that is not listed in the Provider Web Portal, that information can be added by completing the required fields and clicking “Add.”

TPL information that already exist in the Provider Portal can be updated. A provider may update the “Policy ID” and “Effective To” date. Enter the new “Policy ID” and/or “Effective To” date and click “Save”.

The information submitted will be reviewed by the fiscal agent and will be entered on the member’s record in interChange.

Refer to the [Entering Other Insurance Information on a Claim Quick Guide](#) for details on full claim submission when TPL is present.

1. Verify Member Eligibility

Prior to adding new or updating existing TPL information, verify member eligibility. Navigate to [Eligibility > Eligibility Verification](#). After performing an Eligibility Verification for a member, select the [Other Insurance Detail Information](#) link at the bottom of the page.

Home
Eligibility
Resources

Eligibility Verification

Eligibility > Eligibility Verification
Monday 06/11/2018 10:02 AM MST

Provider Name
Provider ID
Location

Eligibility Verification Request

* Indicates a required field.
 Enter the member information. If Member ID is not known, enter two of the following: SSN, Birth Date, Member Name.

Member ID Last Name First Name
 SSN Birth Date ☺
 *Effective From 06/11/2018 ☺ Effective To 06/11/2018 ☺ Verification for Newborn?

Service Type Code

If the Service Type Code is selected from the 'Search By' dropdown list, the Service Type Code is required.

Search By ▼

Service Type Code

I'm not a robot reCAPTCHA
Privacy - Terms

Submit
Reset

Eligibility Verification Information for [redacted] from 06/11/2018 to 06/11/2018

| Member ID [redacted] | Birth Date [redacted] | Gender [redacted] |
|--|-----------------------|-------------------|
| Coverage | Effective Date | End Date |
| Medicaid State Plan | 06/01/2016 | 12/31/2299 |
| Behavioral Health Benefits | 06/01/2016 | 12/31/2299 |
| HCBS Developmental Disabilities Waiver | 06/01/2016 | 12/31/2299 |
| Other Insurance Detail Information | | |

2. Adding TPL Information

On the Other Insurance Details page, any existing TPL information for the member will display at the top of the page under “Other Insurance Information for Member ID”.

New TPL information is entered at the bottom of the page under “Other Insurance Carrier Information” and “Other Policy Holder Information”.

Other Insurance Information for Member ID [] - [] [Back to Eligibility Verification](#) [Print Preview](#)

* Indicates a required field.
Click '+' to view details in a row. Click '-' to collapse the row.

| | Carrier Name (Carrier ID) | Policy ID | Group ID | Policy Holder | Policy Type | Coverage Type | Effective From | Effective To |
|---|---------------------------|------------|------------|---------------|-------------|---------------|----------------|--------------|
| + | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | 08/01/2009 | 12/31/2299 |

Other Insurance Carrier Information

*Carrier
 *Policy ID Group ID
 Policy Type
 *Coverage Type
 *Effective From Effective To

Other Policy Holder Information

*Policy Holder Last Name *First Name MI
 Relationship

[Add](#) [Reset](#)

Under "Other Insurance Carrier Information", the "Carrier" field is a predictive search field. Begin typing the name of an insurance carrier to see matching values. The "Coverage Type" is a required field in order to successfully add TPL. Providers may select any coverage type from the dropdown list or use "Inpatient" as their default selection. If the first and last name of the policy holder is unknown, the provider may default to the member's first and last name.

Once the required TPL information has been added under "Other Insurance Carrier Information" and "Other Policy Holder Information", click the "Add" button.

The screenshot shows a web form with two main sections: "Other Insurance Carrier Information" and "Other Policy Holder Information".

Other Insurance Carrier Information:

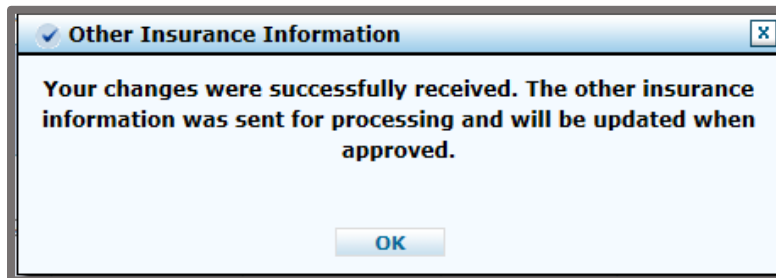
- *Carrier: 000070-BLUE CROSS & BLUE SHIE
- *Policy ID: 1234
- Group ID: [Empty]
- Policy Type: PRIVATE PAY HEALTH INSURAN
- *Coverage Type: CHILDREN'S BASIC HEALTH PLA
- *Effective From: 01/01/2018
- Effective To: [Empty]

Other Policy Holder Information:

- *Policy Holder Last Name: LAST
- *First Name: FIRST
- MI: [Empty]
- Relationship: Child

At the bottom of the form, there are two buttons: "Add" and "Reset". A red arrow points to the "Add" button.

A pop-up will appear when the changes have been accepted.



The newly-added record is visible in the grid.

If additional changes need to be made, click the “+” sign. Make the change and click “Save”.

In the example below, the member has more than one TPL coverage. This is common and acceptable. Health First Colorado (Colorado’s Medicaid Program) is the payor of last resort.

Home
Eligibility
Resources

Eligibility Verification

[Eligibility](#) > [Eligibility Verification](#) > Other Insurance Details Monday 06/11/2018 10:25 AM MST

| Provider Name | Provider ID | Location |
|-------------------------------|-------------|----------|
| Print Preview | | |

Other Insurance Information for Member ID [REDACTED] - [REDACTED] [Back to Eligibility Verification](#)

* Indicates a required field.

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

| Carrier Name (Carrier ID) | Policy ID | Group ID | Policy Holder | Policy Type | Coverage Type | Effective From | Effective To |
|---------------------------|---|------------|---------------|------------------------------|------------------------------|----------------|--------------|
| + | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | 08/01/2009 | 12/31/2299 |
| + | BLUE CROSS & BLUE SHIELD OF AR (000070) | 1234 | FIRST LAST | PRIVATE PAY HEALTH INSURANCE | CHILDREN'S BASIC HEALTH PLAN | 01/01/2018 | |

Other Insurance Carrier Information

*Carrier

*Policy ID Group ID

Policy Type

*Coverage Type

*Effective From Effective To

Other Policy Holder Information


*Policy Holder Last Name *First Name MI

Relationship




3. Updating Existing TPL Information

Verify Member Eligibility (See Step 1). On the Other Insurance Details page, any existing TPL information for the member will display at the top of the page under “Other Insurance Information for Member ID”. Click the “+” sign to the left of the TPL resource to edit the existing TPL information.



COLORADO
Department of Health Care
Policy & Financing



Health First
COLORADO
Colorado's Medicaid Program
[Contact Us](#) | [Logout](#)

Home
Eligibility
Resources

Eligibility Verification

[Eligibility](#) > [Eligibility Verification](#) > Other Insurance Details Monday 06/11/2018 10:05 AM MST

| Provider Name | Provider ID | Location |
|---------------|-------------|----------|
| | | |

Print Preview

Other Insurance Information for Member ID
Back to Eligibility Verification
?

* Indicates a required field.

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

| | Carrier Name (Carrier ID) | Policy ID | Group ID | Policy Holder | Policy Type | Coverage Type | Effective From | Effective To |
|---|------------------------------|------------|------------|---------------|-------------|---------------|----------------|--------------|
| + | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | 08/01/2009 | 12/31/2299 |

Other Insurance Carrier Information

*Carrier
 *Policy ID Group ID
 Policy Type
 *Coverage Type
 *Effective From
 Effective To

Other Policy Holder Information

*Policy Holder Last Name *First Name MI
 Relationship

Add
Reset

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Only the "Policy ID" and "Effective To" fields can be updated on an existing TPL resource.

Other Insurance Information for Member ID [redacted] - [redacted] [Back to Eligibility Verification](#) ?

* Indicates a required field.
Click '+' to view details in a row. Click '-' to collapse the row.

| | Carrier Name (Carrier ID) | Policy ID | Group ID | Policy Holder | Policy Type | Coverage Type | Effective From | Effective To |
|--------------------------|---------------------------|------------|------------|---------------|-------------|---------------|----------------|--------------|
| <input type="checkbox"/> | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | [redacted] | 08/01/2009 | 12/31/2299 |

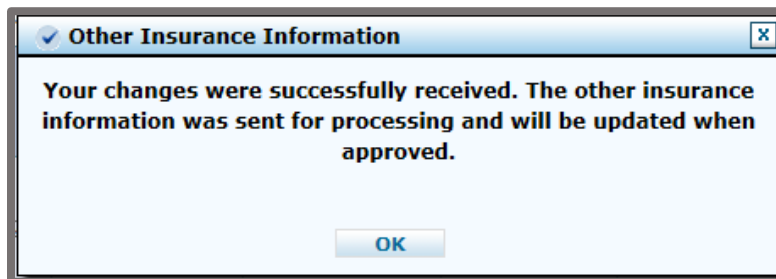
Other Insurance Carrier Information

Carrier [redacted]
 Policy ID [redacted]
 Policy Type [redacted]
 Coverage Type [redacted]
 Effective From 08/01/2009
 Group ID [redacted]
 Effective To 12/31/2299

Other Policy Holder Information

Policy Holder Last Name [redacted] First Name [redacted] MI _
 Relationship Self

Click "Save" after making the updates.



The updated "Policy ID" and/or "Effective To" date will reflect in the grid after review and processing by the fiscal agent.

4. Confirming TPL Information Update

The additional TPL information is sent to the fiscal agent for review and processing once "Add" or "Save" is clicked. Once the information is submitted and the provider navigates away from the Other Insurance Details page, the new TPL changes will not be visible when navigating back to the Other Insurance Details page.

Once the new content is reviewed and added to interChange by the fiscal agent, it will display on the Other Insurance Details page in the Provider Portal.

Need More Help?

Please visit the [Quick Guides and Webinars](#) web page to find all the Provider Web Portal Quick Guides:

Aid Code and Benefit Plan Acronyms

Are You Billing from the Correct Account?

Copy, Adjust, or Void a Claim

Delegates

Delegate Access Definitions

Entering Third Party Liability

Provider Maintenance

Pulling your 835 - Linking to your own TPID

Pulling your Remittance Advice (RA)

Reading your Remittance Advice (RA)

- Internal Control Number (ICN) Information Sheet
- Region Code Information Sheet

Updating your EFT Information

Updating your ERA Information

Validating a Trading Partner ID (TPID)

Verifying Member Eligibility and Co-Pay

- Managed Care Assignments
- Primary Care Provider
- Medicare Coverage
- Member Co-Pay Amounts

Updating Additional TPL Information

Viewing Prior Authorizations in the Portal

Web Portal Registration

Provider Web Portal – Frequently Asked Questions (FAQs)

Please visit the [Provider FAQ Central](#) web page and look under the Billing and Web Portal headings to see Provider Web Portal FAQs.

Provider Web Portal – Recorded Webinars

Click the links below to access the recorded webinars:

[Session #1](#) Access the new Portal, Portal Registration, Log in, My Profile, Manage Accounts (including delegates)

[Session #2](#) Provider Maintenance (including updates and affiliations), EFT/ERA Enrollment, Disenrollment

[Session #3](#) Member Information and Eligibility Verification

[Session #4](#) Remittance Advice (RA), Search Payment History, Search for Accounts Receivable Records, Make a Payment

[Session #5](#) Notify Me, Alerts, Secure Correspondence

[Session #6](#) Files Exchange, Resources

[Session #7](#) Search & Submit CMS 1500, UB-04, Emergency Dental Claims, Prior Authorizations (Nursing Facility PETI PARs only)

[Bridge](#) Bridge training for Community Centered Boards (CCBs) only