

Member Eligibility Verification

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Eligibility Verification Overview

Introduction

Before submitting a referral/authorization request, verify patient eligibility.

This will eliminate submitting requests for services for a non-eligible member. Go to www.point32health.org/provider. Click on "Harvard Pilgrim Health Care Login" and sign in.

Best Practices

Harvard Pilgrim recommends using the "Patient Management" patient search option to check patient eligibility. Search for the member and select from your patient list. In the "Patient Management" section, when the current patient field is populated with a member name:

- The patient information bar displays at the top of the screen showing the selected member's name, birth date, Harvard Pilgrim ID number, and PCP.
- The user can easily switch between checking eligibility, viewing claims history, and referral/auth transactions for the selected member.

Eligibility Search Tips

- It is not necessary to capitalize names or ID# prefixes.
- You can search with partial or complete information.
 - For a name search, the minimum characters required is two and Date of Birth.
 - For an ID# search, the minimum required is the alpha prefix and at least two digits and Date of Birth.
- Searches with partial information will return more and varied results. It is best to supply as much information as possible to narrow the search.
- Do not use dashes or leave any spaces.

Examples:

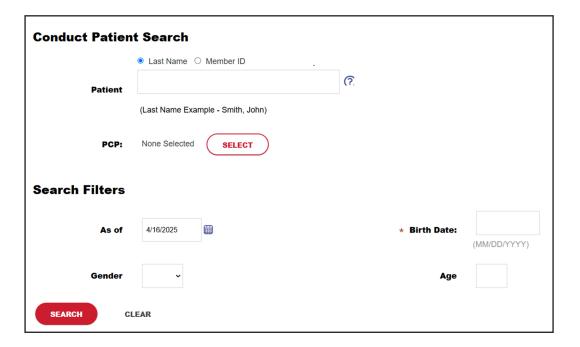
- ID # hp123456700 or 99999999900
- Last name/first name, e.g., smith, mary, or, last name/first name initial, e.g., smith, m

How to Verify Patient Eligibility

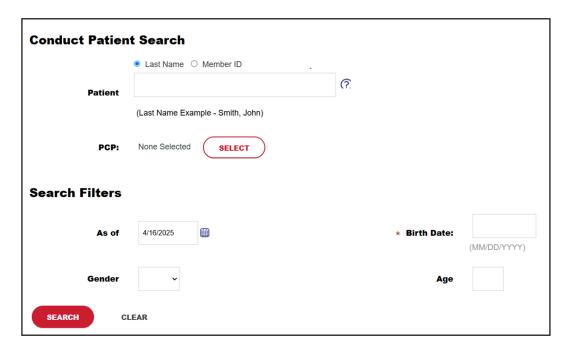
1. In the "Patient Management" section, click on "Search Patients" to access the patient search screen (below).



Patient Search Screen



- 2. a) Select the desired patient search criteria:
 - Name
 - Member ID, or
 - b) Enter the appropriate patient information in the [blank] field
 - c) Adjust the "As of" date, if you want eligibility information for a date prior to today's date, which is the default
 - d) Enter the patient date of birth (DOB)



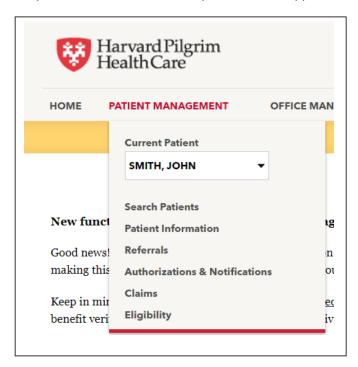
Optional — Other search criteria available but not required include:

- PCP (if on the access list drop-down)
- Gender
- Age
- **3.** Click "Search" to find the patient. The patient search results list appears, matching the data you entered. Patient information includes:
 - Name
 - Address
 - Birth date
 - Sex
 - ID
 - Primary care provider
 - Sponsor

4. Click "Select" to add patient to current patient list.

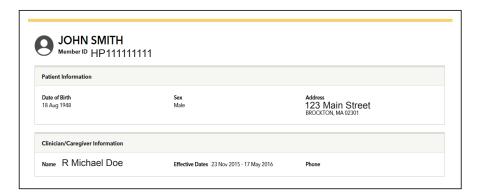


5. The patient's name is now on the patient list and appears in the current patient field.

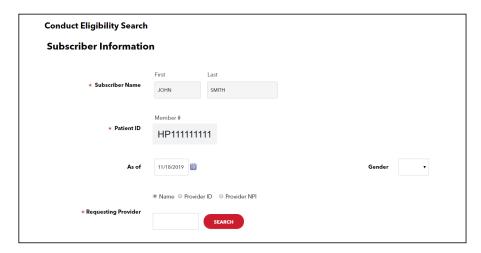


The gray bar at the top of the screen displays information about the member selected in the current patient field.

- If active, the name, birth date, HP# and PCP with provider name and NPI, when available.
- If not active, the name, birth date, HP# and termination date only will appear.

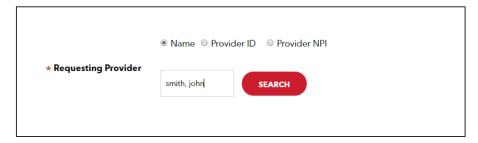


6. **Eligibility, claims, and referrals/auth** links now appear under the current patient field. To access information for the selected patient, click on the appropriate link.

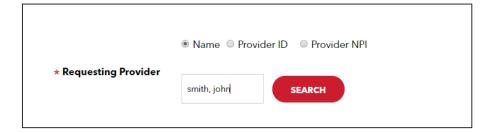


Reminder: Providers can only access referral/auth transactions for which they are the requesting provider, the servicing provider, or the member's PCP.

- 7. Enter requesting provider search criteria:
 - · Requesting provider's name
 - NPI



8. Click "Search" to find requesting provider.

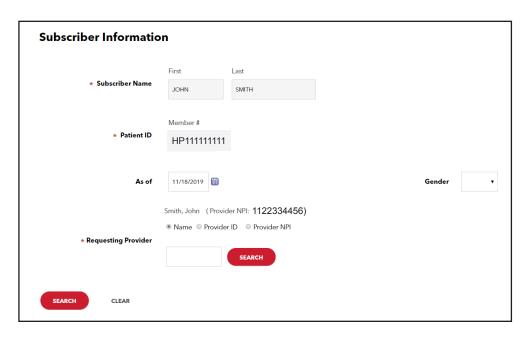


9. Click "Select" to choose the correct requesting provider. Requesting provider search results appear.

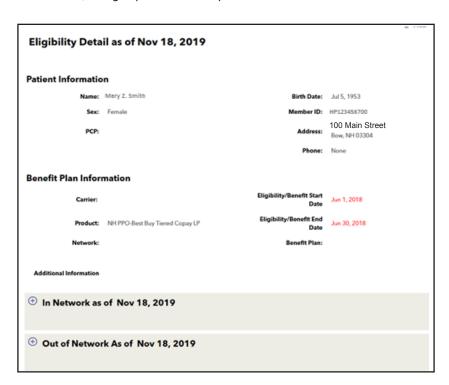


10. Click "Search" to submit eligibility request.

Requesting provider details will populate the new 270 eligibility detail request screen.



11. The eligibility detail screen displays in-network, out-of-network, network not defined, non-covered services, deductible information, deductible information remaining, out-of-pocket maximum, out- of-pocket maximum remaining and additional information, using expandable/collapsible tables +/- as seen below.

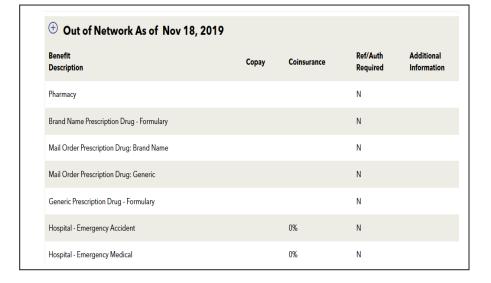


12. In-network section displays applicable copays by service type.

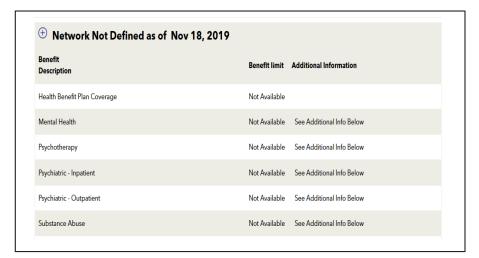
Benefits with copays or coinsurance will be reported in the "in-network services" and "out- of- network services" tables. If a benefit for which Harvard Pilgrim is reporting member eligibility does not have a patient responsibility, it will not be reported in these tables. For a list of all benefits for which Harvard Pilgrim is reporting the member eligibility details, please see the "network not defined" table.

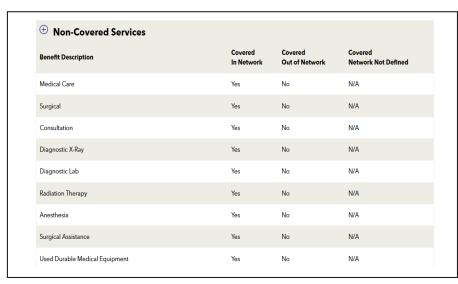
Benefit Description	Copay	Coinsurance	Ref/Auth Required	Renefit limit	Additional Information
·	СОРАУ	Comsulance	·		Additional information
Medical Care			N	Not Available	
Used Durable Medical Equipment		20%	N	Not Available	
Used Durable Medical Equipment	\$0		N	Not Available	
Durable Medical Equipment Purchase		20%	N	Not Available	
Durable Medical Equipment Purchase	\$0		N	Not Available	
Ambulatory Service Center Facility		0%	N	Not Available	
Ambulatory Service Center Facility	\$100		N	Not Available	
Durable Medical Equipment Rental		20%	N	Not Available	
Durable Medical Equipment Rental	\$0		N	Not Available	
Surgical			Υ	Not Available	
Second Surgical Opinion			Υ	Not Available	
Second Surgical Opinion		0%	Υ	Not Available	PCP/Select Specialist
Second Surgical Opinion	\$25		Υ	Not Available	PCP/Select Specialist

13. "Out-of-Network" section displays copays and coinsurance, if applicable.



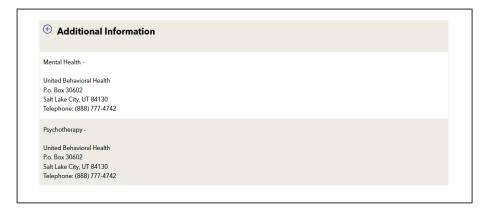
14. "Network Not Defined" displays a list of all benefits for which Harvard Pilgrim is reporting member eligibility details.





15. "Additional Information" section displays information regarding behavioral health services coverage.

**Note: This additional information will only display for inquiries on or before Oct. 31, 2023. As we've insourced our behavioral health program for Harvard Pilgrim commercial members on Nov. 1, 2023, this field will be blank for inquiries with a date of Nov. 1, 2023 or after.



Variable Eligibility Search Criteria

Last Name Only Search

Note: Do not use this search method when searching for patients with common last names, such as, Smith, Jones, etc. Reminder: Date of Birth still required.



Last Name and First Initial Search

Do not leave any spaces before or after the comma.



The eligibility search results list displays only members, from the past 13 months, with this last name and a first name that begins with the initial submitted that matches the birth date entered.

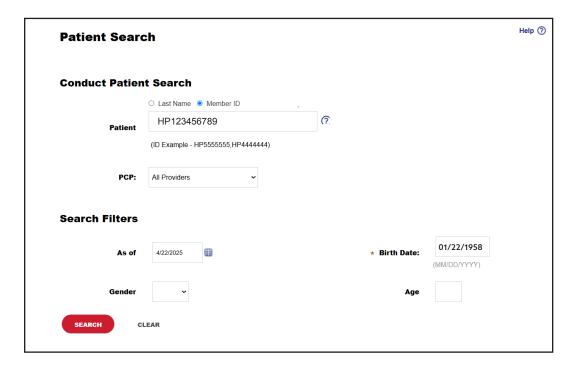


Full Patient ID # Search

Select "Member ID" and enter the full 11-digit number without any dashes.

The eligibility search results screen displays only the member that you have requested.

Reminder: Date of Birth required.



Partial Patient ID # Search

To view a list of all members covered on the policy, select "Member ID" and enter only the first 9 digits of the ID#. This can be helpful to identify the subscriber for a dependent child, etc.



No Current Information Available

If you search for the patient's eligibility as of today's date and receive an 'invalid request' error, the patient may have been terminated. Search for the member under the "Office Management" section to view the patient's policy effective dates.



