

Health Management System: Entering Insurance Information

User Guide



March 2019

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Key features about this user guide:

This user guide addresses how to enter Insurance information in the Health Management System.

Wide outside margins are provided for taking notes. Margins may also contain a relevant **TIP** about a task discussed on that page.

At the end of each section, a space is available for you to enter your local notes. You can enter your notes electronically or write them in a printed copy. Use this section to reference internal operating procedures or information unique to your CHD that would better explain how to use a particular feature or function. If you choose to use this section, please inform CHD staff to reference this section.

Bookmarks, along with page numbers, are provided for you to quickly reference another section of text within the document. Press [Ctrl] then click the hyperlink to go to the bookmarked text.

“Steps to” gives you step-by-step instructions to accomplish a task or function within HMS. Short sentences using verbs and objects are used in the steps. Asterisk (*) appearing at the left of the step indicate the step is optional and not required to complete the task.

Standard language is used to perform a task.

- Click button; e.g., Click Search.
- Press a key or key combination is shown in square brackets; e.g., Press [Enter] or Press [Ctrl+Alt+Delete].

The result of the action may appear after a step. Often a step may be done more than one way. Options follow the text “Do one of the following:” so you can choose the best way for you.

A **NOTE** supplies additional information pertinent to a particular step or action.

A **TIP** gives a shortcut or additional information referring to a task or step on that page and appears in the outside margin of the page.

Supplemental information or examples may be included in the Appendixes.

Getting Help

Please let us know how we can make our training materials more helpful to you. Email your questions, suggestions, or HMS training needs to dihmstrainingteam@flhealth.gov. You can also email us if you need help with HMS.

Section 1: General Information

Introduction

Entry of the client's insurance information into the Health Management System (HMS) should be completed for all clients that have coverage.

This section addresses how to access the Insurance screen and the different fields on this screen.

IN THIS SECTION

- **Access the Client Insurance page**
- **Explore the Client Insurance page**

Accessing the Client Insurance Page

The Client Insurance page is accessible from the legacy Billing module, Billing Portal and Client Information module. After selecting a client, you can access the page from any of these locations.

The screenshot shows the Legacy Billing Module interface for client **TEST, ABBY**. The top navigation bar includes options like Find Client, Find HS Client, Client Info, and Billing. The main content area is titled "Billing" and features a "Notepad" section with a table of entries. In the left sidebar, the "Insurance/Alt Payer Update" option is circled in red.

Client Notepad	Updated By	Updated Date
<input type="checkbox"/> All		
<input type="checkbox"/> this is my test notepad note to see how it displays in the billing porta if the billing preferences are updated.	FULFORD, JONI C	02/17/2017 11:01:14

Legacy Billing Module

The screenshot shows the Billing Portal - Insurance Page for client **TRAINING, TIA...**. The interface includes a search bar and a navigation menu with tabs for Account Ledger, Clinical Services, Payment Info, Receipts, Statement History, Insurance, Contracts, and NotePad. The "Insurance" tab is selected, and a table of insurance information is displayed. A red arrow points to an "Add" button in the top right corner of the table.

Ins. Type	Insurance or Payor	Policy Number	Start Date	End Date	Exp. Date	CRA Number
First	AETNA	52136875423	06/23/2011			

Billing Portal – Insurance Page

The screenshot shows the Client Information Module interface for client **BROWNING, LINDSAY T**. The top navigation bar includes options like Find Client, Find HS Client, Client Info, and Billing. The main content area is titled "Client Information" and features a "Notepad" section with a table of entries. In the left sidebar, the "Insurance" option is highlighted in blue.

Client Notepad	Updated By	Updated Date
<input type="checkbox"/> All		
<input type="checkbox"/> ACTIVE MCD / HMO	CARR, CARMEN G	08/29/2016 09:24:51

Client Information Module



Steps to Access Update Client Insurance Page

1. Select HMS client.
2. Click one of the following:
 - a. **Insurance** via the Legacy Billing module.
 - b. **Add** via the Insurance tab within the Billing Portal.
 - c. **Insurance** via the Client Information page.

Exploring the Client Insurance Page

The Client Insurance page allows you to enter First, Second, Medicaid and Other insurance information for the client. You can also verify insurance and suggest eligibility.

BROWNING, LINDSAY T SSN: 995-11-4731 HIE ID: LAST SERVICE: 06/29/2016 FP: 0 %

DOB: 05/03/1991 MIN: 119701 RIDHAS ID: FIN UPDATE: 05/24/2018 BPL: 55 %

AGE: 27 YEARS STATE ID: 52-95497892 ALIEN #: FIN DUE: 08/30/2017 STATUS: ACTIVE

SEX ASSIGNED AT BIRTH: FEMALE ST IMM ID: 5200081979 FEE: 100 % BALANCE: NONE

+
-
X

Allergies
Appr
Alerts
Labels
Client List

Client Insurance

Delete	Ins. Type	Ins. Co./Alt Payor	Cov. Start	Cov. End	Bill Type	Policy #	CRA/Sub-CRA #	Last Elig. Ver.	View Elig.	Verify Elig.
<input type="checkbox"/>	First	AMERIGROUP FLORIDA INC	06/30/2016	06/01/2020	MEDICAID HMO	3893161127		05/22/2018	271	Verify

Client Insurance Page

The Client Insurance page displays the client’s current insurance information including the insurance type, insurance company, coverage start and end dates, billing type, policy number, CRA/Sub-CRA number, last eligibility verification date, available eligibility forms and an option to verify eligibility.



Command buttons on the top right corner of the page allow you to add, delete or print insurance information. Clicking the **X** exits the Client Insurance page and returns to the previous page.



Local Notes Section		
Page No	Topic Heading	Note(s)

Section 2: Entering Non-Medicaid Insurance Information

Introduction

Within HMS, insurances are categorized as First, Second and Other.

This section addresses how to access insurance categories, and how to add and update insurance information for First, Second and Other type insurance.

This section also addresses how to access and enter insurance authorizations.

IN THIS GUIDE

- [Entering Insurance Information](#)
- [Accessing the Authorizations Search Page](#)
- [Entering Authorization Information](#)

Adding Insurance Information

To add insurance information for the client, click the blue plus (+) button from the top right corner of the Client Insurance page. The Add Insurance window displays.

Add Insurance Window

The Add Insurance window allows you to select the insurance type. Select an insurance from the **Insurance Type** drop down and click the green check. The Insurance Details page displays.

Client Insurance Page

The Insurance Detail page is divided into two components; Insurance Detail and Policy Holder. This allows you to enter medical and dental insurance information for a client.

Entering Insurance Detail Information

The Insurance Detail component contains fields related to the insurance company.

Client Information: Insurance Detail Component

The table below describes available fields in the Insurance Detail component:

Field/Button	Description
--------------	-------------

Company	Required. Name of the Insurance Company.
Authorization Indicator	Checkbox that activates the Authorizations button. For more information on authorizations, see Entering Authorization Information
Policy Number	Required. Policy number assigned by the insurance company.
Group Number	Policy holder group number.
Insurance Source – RW Clients Only	Source of insurance for HIV Ryan White clients. Options include: Private- Individual, Private- Employer, VA Other Military, Indian Health Services (IHS), Medicaid HMO and Medicare HMO.
Start Date	Required. Insurance coverage start date. Type a date (<i>dd/mm/yyyy</i>) or click the calendar icon to select a date.
End Date	Insurance coverage end date. Type a date (<i>dd/mm/yyyy</i>) or click the calendar icon to select a date.
App Pending Status	Indicates whether the application status has been filed, declined or expired.
App Expiration	Date the application expired. Type a date (<i>dd/mm/yyyy</i>) or click the calendar icon to select a date.
Co-Insurance	Percentage the policy holder must pay based on the insurance policy.
Copay	Indicates the payment defined in the insurance policy and paid by the insured person each time a medical service is accessed. Allows a dollar amount of \$0.01 - \$100.00 to be entered.

Entering Policy Holder Information

The Policy Holder component allows you to enter the policy holder's insurance information, date of birth, demographics, and the client's address.

Select the policy holder from the required **Policy Holder** drop down or use the **Search Policy Holder** button to use the client search feature. The selected policy holders information populates.

NOTE: To add a new financial member, users must navigate to the Family Financial page.

- Policy Holder

Policy Holder:*

Last Name: First Name: Middle Name: Suffix:

DOB: Gender: Client Relationship to Policy Holder:



Address Line 1: Zip: Ext:

City: State:

Update Comments:

Client Insurance: Policy Holder Component

 The table below describes available fields in the Policy Holder component:

Field/Button	Description
Policy Holder	Required. Menu displaying the client and/or family member(s) for whom the insurance policy is listed under. Selecting a client from the drop down automatically populates the remaining policy holder fields.
Search Policy Holder 	Searches the HMS database for an existing client to add as a policy holder.
Remove Policy Holder 	Clears the policy holder fields from the policy holder component.
Last Name	Last name of the policy holder.
First Name	First name of the policy holder.
Middle Name	Middle name of the policy holder.
Suffix	Name suffix, if any, of the policy holder.
DOB	Date of birth of the policy holder. Type a date (<i>dd/mm/yyyy</i>) or click the calendar icon to select a date.
Gender	Gender of the policy holder.

Client Relationship to Policy Holder	Required. Drop down to indicate the client relationship to the policy holder. Options include: Spouse, Child and Other.
Use Client's Mailing Address	Checkbox to indicated whether to use the client's mailing address. If selected, the address fields automatically populate with the client's address enter on the demographics page.
Address 1	Address of the policy holder.
Zip	Zip code of the policy holder.
Ext	Zip code extension of the policy holder.
City	City of the policy holder.
State	State of the policy holder.

Searching for a Policy Holder



Clicking the **Search Policy Holder** button displays the HMS Client Search screen.

Client Search

Q
↺
✕

Name:

SSN:

Family ID:

DOB:

MRN:

Search Policy Holder- Client Search

You have the option to search by Name [(Last,First) or partial name], Social Security Number, Family ID, Date of Birth and Medical Record Number. Click the **search** button and the client displays in the search list.

Client Search

Q
↺
🖨
✕

Name:

SSN:

Family ID:

DOB:

MRN:

Found 1 Clients.

Name	SSN	Family ID	DOB	MRN	Status
PAN, PETER	PXP-10-1386		10/13/1986		NON-CLIENT

Policy Holder Component - Search Policy Holder

Selecting the client from the list automatically populates the Policy Holder component.

Client Insurance: Policy Holder Component

Click the **save** button to save the policy holders information.

Removing a Policy Holder



Clicking the **Remove Policy Holder** button clears any client information from the Policy Holder fields.

Once information has been removed, click the **save** button to save the changes.

Entering Comments

Comments can be entered in the **Update Comments** text box. This is a free-text field with a max length of 250 characters.

Once all information has been entered, click the green **Save** button in the top right corner of the page.

Steps to add insurance information

NOTE: An asterisk (*) indicates the step is required.

1. Access Client Insurance page.
2. Click blue plus (+) button
3. Select one of the following from the **Insurance Type** drop down:
 - a. **First.**
 - b. **Second.**
 - c. **Medicaid.**
 - d. **Other.**
4. Click green check button.
5. Enter or select the following **Insurance Detail** information:
 - a. ***Company.**
 - b. **Authorization Indicator.**

- c. ***Policy Number.**
 - d. **Group Number.**
 - e. **Insurance Source – RW Clients Only.**
 - f. ***Start Date.**
 - g. **End Date.**
 - h. **App Pending Status.**
 - i. **App Expiration.**
 - j. **Co Insurance.**
 - k. **Copay.**
6. Enter or select the following Policy Holder information:
- a. ***Policy Holder.**
 - b. **Last Name.**
 - c. **First Name.**
 - d. **Middle Name.**
 - e. **Suffix.**
 - f. **DOB.**
 - g. **Gender.**
 - h. ***Client Relationship to Policy Holder.**
 - i. **Use Client's Mailing Address.**
 - j. **Address Line 1.**
 - k. **Zip.**
 - l. **Ext.**
 - m. **City.**
 - n. **State.**
7. Click **Search Policy Holder** button.
 8. Click **Remove Policy Holder**
 9. Type comments in the **Update Comments** text box.
 10. Click **Save.**

Updating Current Insurance Information

To update the client's insurance information, highlight and select the insurance row from the Client Insurance page. The Insurance Details page displays.

Client Insurance Details

All insurance detail information can be updated as needed. Comments are required when making corrections to insurance information. Enter comments into the **Update Comments** field.



Once all information has been entered, click the green **Save** button in the top right corner of the page.



Steps to update insurance information

1. Access Client Insurance page.
2. Select insurance from the insurance list.
3. Modify information as needed.
4. Type comments in the **Update Comments** text box.
5. Click **Save**.

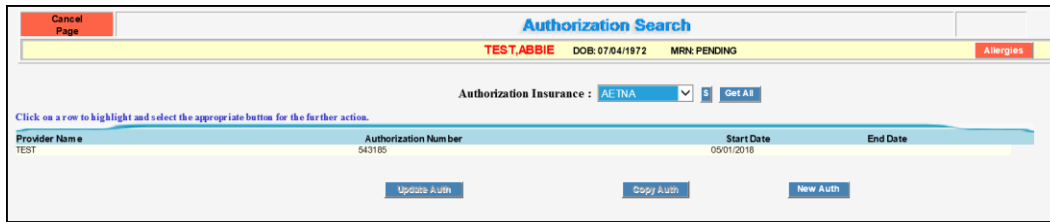
Entering Authorizations Information



You can update, copy and add new authorizations from the Authorization Search page. To access, click the blue **Auth** button located in the top right corner of the Insurance Detail page. The Authorization Search page displays.

NOTE: The Authorization button displays when the Authorization Indicator checkbox is selected and appears after insurance information has been saved.

Authorization Indicator Checkbox and Auth Button



Authorization Search Page

The Authorization Search page displays any current authorizations in the results list. You can search for an insurance type by selecting an insurance from the Authorization Insurance drop down list or by clicking the Search button.



Selecting an authorization from the results lists enables the Update and Copy Auth buttons. To update an existing authorization, click the **Update Auth** button.

The **Copy Auth** button allows you to copy an existing authorization and modify existing information. **NOTE:** The copy function creates an additional authorization for the insurance company.

To add a new authorization to the client's existing insurance information, click the **New Auth** button. The Authorization Details page displays.



Authorization Details Page

 The table below describes available fields on the Authorization Details page:

Field/Button	Description
Provider Name	Required. Name of the Insurance Company. Max limit of 45 characters.
Authorization Insurance	Display only field that indicates the Authorizing Insurance company.
Authorization #	Required. Authorization Number which includes alphanumeric and special characters. Max limit of 25 characters.
Phone	Required. Phone number for the provider.

Start Date	Required. Date in which the authorization is valid for service provision. Must be within the date range of the insurance.
End Date	Date in which the authorization will expire for service provision. Must be within the date range of the insurance.
Contact Person	Required. Name of the contact person.
Comments	Required. Free text field allowing authorization detail information. Max of 250 characters.



Once all information has been entered, click the green **Save Page** button in the top right corner of the page.

Steps to add Authorization information

1. Access existing insurance from the Client Insurance page.
2. Click blue **Auth** button.
3. Click **New Auth** to create a new insurance authorization.
4. Type the following authorization detail information:
 - a. **Provider Name.**
 - b. **Authorization #.**
 - c. **Phone.**
 - d. **Start Date.**
 - e. **End Date.**
 - f. **Contact Person.**
 - g. **Comments.**
5. Click **Save Page.**

Adding Historical Insurance Information

To add historic insurance information, click the blue plus (+) button from the top right corner of the Client Insurance page. The Add Insurance window displays.

Add Insurance
✕

Insurance Type:*
Historic Coverage:

.....

▼

✓

Add Insurance Window

The Add Insurance window allows you to indicate a historical insurance type. To enter historical insurance information, the client must have existing information documented.

Select the **Historic Coverage** checkbox, the type of historic insurance from the **Insurance Type** drop down and click the green check. The Insurance Details page displays.

Client Insurance Details

Enter insurance information in the corresponding Insurance Detail and Policy Holder components. Historic insurance information must include an end date.



Once all information has been entered, click the green **Save** button in the top right corner of the page.

Historical insurance information displays on the Update Ins Co/Alt Payor page.

Ins Type	Ins Co/Alt Payor	Bill Type	Policy Holder	Number	Group #	Start Date	End Date
First	ARC OF FLORIDA INC	COMMERCIAL	BROWNING, LINDSAY T	12354235		01/01/2000	05/15/2001
Medicaid	MEDICAID	MEDICAID	BROWNING, LINDSAY T	3693161127		06/01/2016	05/17/2018

Update Ins Co/Alt Payor Page

Accessing the Update Ins Co/Alt Payor Page

To access the client's historical address list, click the blue **Update Insurance History** button. The Update Ins Co/Alt Payor page displays.

Ins Type	Ins Co/Alt Payor	Bill Type	Policy Holder	Number	Group #	Start Date	End Date
First	ARC OF FLORIDA INC	COMMERCIAL	BROWNING, LINDSAY T	12354235		01/01/2000	05/15/2001
Medicaid	MEDICAID	MEDICAID	BROWNING, LINDSAY T	3693161127		06/01/2016	05/17/2018

Update Ins Co/Alt Payor Page

Updating Insurance History

To update insurance history, highlight and select the record. The Update Insurance Information window displays below the historial list.

Update Ins Co/Alt Payor – Update Insurance Information Window

Verify and make insurance updates as needed. Click on the green **Save Page** button to save the changes.



Steps to add historical insurance information

1. Access Client Insurance page.
2. Click blue plus (+) button
3. Select **Historic Coverage** checkbox.
4. Select one of the following from the **Insurance Type** drop down:
 - e. **First.**
 - f. **Second.**
 - g. **Medicaid.**
 - h. **Other.**
5. Click green check button.
6. Enter insurance information in the corresponding fields.
7. Click **Save.**



Step to access Update Ins Co/Alt Payor Page

- Click ***Update Insurance History.***



Steps to update historical insurance information

1. Access Client Insurance page.
2. Click ***Update Insurance History.***
3. Select insurance from the Historical Insurance results list.
4. Modify insurance information in the corresponding fields.
5. Click ***Save.***



Local Notes Section		
Page No	Title Heading	Notes

Section 3: Entering Medicaid Insurance

Introduction

This section addresses how to access the Medicaid insurance option, explores the fields on the page and how to add or update information.

IN THIS GUIDE

- **Enter Medicaid Insurance Information**

Entering Medicaid Insurance Information

To add Medicaid information, click the **plus (+)** button in the top right corner of Client Insurance page. The Add Insurance window displays.



The screenshot shows a window titled "Add Insurance" with a close button (X) in the top right. Below the title bar, there are two fields: "Insurance Type:*" with a dropdown menu showing "Medicaid" and a green checkmark button to its right, and "Historic Coverage:" with an unchecked checkbox.

Add Insurance Window

Select **Medicaid** from Insurance Type dropdown and click the green check button. The Medicaid Insurance Detail page displays.

NOTE: To add new insurance information, the current Medicaid information must have an end date.

The screenshot shows the "Client Insurance" page with a sub-section for "Medicaid Insurance". It includes a left-hand menu with "Insurance Detail" selected. The main form contains the following fields: "Medicaid Number:*" (3693161127), "Medicaid Start:*" (08/01/2014), "Medicaid Type:" (ME I), "Medipass Ind:" (checkbox), "Medicaid End:" (MM/DD/YYYY), "HMO Ind:" (checkbox), and "Insurance Source - RW Clients Only:" (dropdown menu). There is also a text area for "Update Comments:".

Medicaid Insurance Detail Page

The Medicaid Details page includes 9 data fields and one comment box. Certain fields are required based on the selection of other fields. Required fields are denoted by a **red star**.

The table below describes available fields on the Medicaid Details page:

Field/Button	Description
Medicaid Number	Required. 10-digit number assigned to the client by Medicaid.
Medipass Ind	Indicate if the Medicaid type is Medipass Ind. The HMO Ind checkbox disables when this box is selected. The Authorization button displays when this box is selected, but is not required.
HMO Ind	Checkbox to indicate the Medicaid type is an HMO. The Medipass Ind checkbox is disabled when this box is selected. The Authorization button displays when this box is selected, but is not required.

Medicaid Start	Required. Medicaid Eligibility start date. Date must be prior to the earliest service date.
Medicaid End	Medicaid Eligibility end date.
Insurance Source - RW Clients Only	Source of insurance for HIV Ryan White clients. Options include: Private- Individual, Private- Employer, VA Other Military, Indian Health Services (IHS), Medicaid HMO and Medicare HMO.
App. Pending Status	Status of Medicaid application. Options include: App. Filed, App. Denied, App. Expired. NOTE: Eligibility Period Start is not required when this field is populated.
App. Expiration Date	Medicaid application expiration date. NOTE: Date is required if App. Pending Status field is populated.
Medicaid Type	Listing of Medicaid types from FIMMIS.
Update Comments	Required if completing a correction to the insurance information.

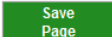
Updating Current Medicaid Insurance

To update current insurance information, highlight and select the insurance row within the Insurance List. The Medicaid Insurance Details page displays allowing you to make needed corrections.

The **Update Comments** field is required when making corrections.



Steps to enter Medicaid Insurance Information

1. Access The Update Ins Co/Alt Payor page.
2. Select **Medicaid** from the results list.
3. Select one of the following:
 - a. **Correction to Current Insurance.**
 - b. **Add a new Insurance Coverage.**
 - c. **Add a Historic Coverage.**
4. Enter Medicaid information into the applicable fields.
5. Click **Save Page.** 

Local Notes Section		
Page No	Topic Heading	Note(s)

Section 4: Working with Eligibility

Entering Medicaid Insurance

This section addresses how to view client eligibility forms, as well as verify and suggest eligibility.

IN THIS GUIDE

- **View eligibility forms**
- **Verify eligibility**
- **Suggest client eligibility**

i Viewing Eligibility Forms



The **271**, **AAA**, **999** and **TA1** error reports can be viewed by clicking the corresponding buttons from the View Elig. column of the Client Insurance page.

The **Eligibility, Coverage or Benefit Information Report (271)** displays payer, policy, dependent, and benefits and coverage information along with whether errors were returned.

Health Management System

Eligibility, Coverage or Benefit Information Report

HOUSTON, TEST
 DOB: 01/08/1973
 State ID: 52-92896152
 Medical Record: 789prh

Payer Information

Payer Name: _____ Coverage: _____

Plan Coverage Dates: _____ Plan: _____

Policy Holder Information

Policy Holder: HOUSTON, TEST DOB: 01/08/1973 Gender: Female

Member ID: 78945612 Address: _____

Policy Holder Additional Information

Plan Number: _____ Group Number: _____

Medicaid ID: _____ Case Number: _____

Prior Identification Number: _____

Dependent Information

Dependent: _____ DOB: _____ Gender: _____

Member ID: _____

Dependent Additional Information

Plan Number: _____ Group Number: _____

Medicaid ID: _____ Case Number: _____

Prior Identification Number: _____

Dates Information

Plan Date: _____ Service Date: _____

Benefits and Coverage Information

+

Benefits Disclaimer

This is not a guarantee of benefits or payment. The data shown is the latest information available that was received from the payer's system. All services are subject to any limitations or exclusions that may be in effect at the time the client receives services.

271 Form

The **Eligibility, Coverage or Benefit Information Report – 271 with AAA Errors** report displays payer information, the error rejection reason and follow-up action.

Health Management System

Eligibility, Coverage or Benefit Information Report - 271 with AAA Errors

Houston, Test
 DOB: 01/08/1973
 State ID: 52-92896152
 MRN: 789prh

Payer Information

Payer Name: MEDICAID


Subscriber Level Error

Reject Reason: Invalid/Missing Subscriber/Insured ID

Follow-up Action: Please Correct and Resubmit

271 with AAA Errors

The **Interchange Acknowledge Report (999)** displays errors and pinpoints the Electronic Data Interchange (EDI) location error example: IK3 or IK4.



Florida HEALTH
PINELLAS County Health Department

Health Management System
Interchange Acknowledgement Report - 999

Houston, Test
DOB: 01/08/1973
State ID: 52-92896152
MRN: 789prh

Payer Information

Payer Name: PAMELAS MONEY MAKER

Error Information

999 IK3 Error Identification

Segment ID Code	Segment Position	Loop identification	Error message
NM1	4	2100	Segment has data element errors

999 IK4 Error Identification

Position in segment	Data element reference number	Error description	Copy of bad data element
9	67	Invalid code value	9999999999

999 Form

The **TA1** error report is returned when the login credentials in the background have expired for Change Healthcare. If you receive this error, contact [DL HMS Support](#).

Steps to view eligibility forms

1. Access Client Insurance page.
2. Select forms button from **View Elig** column.

i Verifying Eligibility



To verify eligibility, click the **Verify** button from the Client Insurance page. The Eligibility Service Type Code window displays.

Eligibility Service Type Code ✕

Service Type Code:*

Health Benefit Plan Coverage - 30 ▾

Service Date:*

05/24/2018 📅

Transmit Eligibility Request

Note: All payers accept the code Health Benefit Plan Coverage - 30. You may or may not get results for a code other than 30 depending on whether the payer accepts that code or not.

Eligibility Service Type Code Screen

The Eligibility Service Type Code window includes the ability to select an eligibility service type and service date.

The payer uses the eligibility service type code to determine what kind of service(s) the client is eligible for. Select a code from the **Eligibility Service Type Code** drop down.

The **Service Date** indicates the date for which real-time eligibility verification is being performed. Type a date to click the calendar icon to select a date.

NOTE: A future date cannot be used for the Service Date.

[Transmit Eligibility Request](#)

Click **Transmit Eligibility Request** to submit the eligibility request based on the service code and date selected. The Eligibility, Coverage or Benefit Information Report displays.



Health Management System

[Eligibility, Coverage or Benefit Information Report](#)

BROWNING, LINDSAY T
 DOB: 05/03/1991
 State ID: 52-86497692
 Medical Record: 119701

Payer Information

Payer Name: AMERIGROUP Coverage: Active
 Plan Coverage Dates: 02/06/2018 - 12/31/9999 Plan: See Benefits and Coverage Information Section

Policy Holder Information

Policy Holder: BROWNING, LINDSAY T DOB: 05/03/1991 Gender: Female
 Member ID: 717387047 Address: PO BOX 16732
CLEARWATER FL 33766-6732

Policy Holder Additional Information

Plan Number: FLTANF00; FL MMA TANF Group Number: FLMCD000; FLORIDA MEDICAID
 Medicaid ID: Case Number: FLBASI20
 Prior Identification Number: 3693161127

Eligibility, Coverage or Benefit Insurance Report

Steps to verify eligibility

1. Access Client Insurance page.
2. Click **Verify** from the View Elig column.
3. Select service code from the **Service Type Code** drop down.
4. Do one of the following for the **Service Date**:
 - a. Type date.
 - b. Select calendar icon to select a date.
5. Click **Transmit Eligibility Request**.

Suggesting Client Eligibility

To suggest client eligibility, click on the blue **Suggest Eligibility** button from the Client Insurance page. The Suggested Client Eligibilities window displays.

Suggested Client Eligibilities
✕

View: Eligible ▼

Eligibility Status	Insurance Co	Eligibility Description	Billable

Suggested Client Eligibilities Page

The Suggested Client Eligibilities page displays the client's eligibility status, insurance company, eligibility description and billable information.

The view drop down allows you to select which types of records to display in the Eligibilities list. Select **All**, **Eligible** or **Not Eligible** from the View drop down.

View:

All
Eligible
Not Eligible

By click on the record the **Client Insurance Page** displays to make changes.

Clicking the **(X)** icon closes the page.



Steps to suggest client eligibilities

1. Access Client Insurance page.
2. Click ***Suggest Eligibility***.
3. Select record type from the ***View*** drop down.
4. Select record from the results list.

Local Notes Section		
Page No	Topic Heading	Note(s)

Appendix A: Summary of Steps

✓ Section 1: General Information

Steps to Access Update Ins Co/Alt Payor Page

1. Select HMS Client.
2. Click one of the following:
 - a. **Insurance** via the Legacy Billing module.
 - b. **Add** via the Insurance tab within the Billing Portal.
 - c. **Insurance** via the Client Info page.

✓ Section 2: Entering Non-Medicaid Insurance Information

Steps to add insurance information

NOTE: An asterisk (*) indicates the step is required.

1. Access Client Insurance page.
2. Click blue plus (+) button
3. Select one of the following from the **Insurance Type** drop down:
 - a. **First.**
 - b. **Second.**
 - c. **Medicaid.**
 - d. **Other.**
4. Click green check button.
5. Enter or select the following **Insurance Detail** information:
 - a. ***Company.**
 - b. **Authorization Indicator.**
 - c. ***Policy Number.**
 - d. **Group Number.**
 - e. **Insurance Source – RW Clients Only.**
 - f. ***Start Date.**
 - g. **End Date.**
 - h. **App Pending Status.**
 - i. **App Expiration.**

- j. **Co Insurance.**
- k. **Copay.**
6. Enter or select the following Policy Holder information:
 - a. ***Policy Holder.**
 - b. **Last Name.**
 - c. **First Name.**
 - d. **Middle Name.**
 - e. **Suffix.**
 - f. **DOB.**
 - g. **Gender.**
 - h. ***Client Relationship to Policy Holder.**
 - i. **Use Client's Mailing Address.**
 - j. **Address Line 1.**
 - k. **Zip.**
 - l. **Ext.**
 - m. **City.**
 - n. **State.**
7. Click **Search Policy Holder** button.
8. Click **Remove Policy Holder**
9. Type comments in the **Update Comments** text box.
10. Click **Save.**

Steps to update insurance information

1. Access Client Insurance page.
2. Select insurance from the insurance list.
3. Modify information as needed.
4. Type comments in the **Update Comments** text box.
5. Click **Save.**

Steps to add Authorization information

1. Access existing insurance from the Client Insurance page.
2. Click blue **Auth** button.
3. Click **New Auth** to create a new insurance authorization.
4. Type the following authorization detail information:
 - a. **Provider Name.**
 - b. **Authorization #.**
 - c. **Phone.**

- d. **Start Date.**
 - e. **End Date.**
 - f. **Contact Person.**
 - g. **Comments.**
5. Click **Save Page.**

Steps to add historical insurance information

1. Access Client Insurance page.
2. Click blue plus (+) button
3. Select **Historic Coverage** checkbox.
4. Select one of the following from the **Insurance Type** drop down:
 - a. **First.**
 - b. **Second.**
 - c. **Medicaid.**
 - d. **Other.**
5. Click green check button.
6. Enter insurance information in the corresponding fields.
7. Click **Save.**

Step to access Update Ins Co/Alt Payor Page

- Click **Update Insurance History.**

Steps to update historical insurance information

1. Access Client Insurance page.
2. Click **Update Insurance History.**
3. Select insurance from the Historical Insurance results list.
4. Modify insurance information in the corresponding fields.
5. Click **Save.**

✓ Section 3: Entering Medicaid Insurance Information

Steps to Enter Medicaid Insurance Information

1. Access The Update Ins Co/Alt Payor page.
2. Select **Medicaid** from the results list.
3. Select one of the following:
 - a. **Correction to Current Insurance.**
 - b. **Add a new Insurance Coverage.**

c. **Add a Historic Coverage.**

4. Enter Medicaid information into the applicable fields.
5. Click **Save Page.**

✓ Section 4: Working with Eligibility

Steps to view eligibility forms

1. Access Client Insurance page.
2. Select forms button from **View Elig** column.

Steps to verify eligibility

1. Access Client Insurance page.
2. Click **Verify** from the View Elig column.
3. Select service code from the **Service Type Code** drop down.
4. Do one of the following for the **Service Date**:
 - a. Type date.
 - b. Select calendar icon to select a date.
5. Click **Transmit Eligibility Request.**

Steps to suggest client eligibilities

1. Access Client Insurance page.
2. Click **Suggest Eligibility.**
3. Select record type from the **View** drop down.
4. Select record from the results list.