A Guide to an Eligibility Response

An electronic Eligibility response transaction can contain a large amount of information. This information may vary by payer or based on the information contained on the request, however in general the information can be grouped into some general categories. These categories are outlined in the table below. Also, a sample screen shot of an Eligibility Response transaction as viewed via the NEHEN Express application is provided for reference. NEHEN Express displays the contents of the eligibility response transaction as received from the payer, however in a user friendly format. NOTE: Not all response screens contain the information outlined in this example, some have more and some have less, however this example is intended to provide an overview which is applicable to other response screens.

The page contains multiple sections when eligibility information is returned. The following is a list of the common sections under the Eligibility Response page:

- Eligibility Status
- Health Plan name and Date of Service
- Patient - name, address, phone number, gender, member ID and coverage Information
- Payer information
- Primary Care Provider -name, address, telephone, provider NPI, risk group, plan description and messages.
- Benefit Information
  - Copay, Deductible, Limitations, Stop-Loss, etc
  - Additional Information - additional payer and restricted messages

<table>
<thead>
<tr>
<th>Section:</th>
<th>Contents:</th>
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<tbody>
<tr>
<td>(1) Eligibility Status</td>
<td>• Active or Inactive Coverage</td>
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| (2) Health Plan name and Date of Service | • Payer Name  
• Date of Service and Service Type from the Inquiry  
• Verified On Date and Time |
| (3) Patient Information      | • Subscriber & Dependent Demographics, if applicable  
• Member ID  
• Complete Name  
• Date of Birth  
• Gender  
• Address  
• Relationship to Subscriber  
• Additional Information: Case Number, Family Unit Number, Patient Account Number, ID Card Serial Number, HIC Number, ID Card Number, Issue Number, Prior ID Number, Social Security Number |
| (4) Payer Information        | • Plan Name & Enrollment Dates  
• Group Name and/or Number  
• Contact Information |
| (5) Primary Care Provider (PCP) | • Name, NPI and Address of Patient’s Primary Care Physician |
| (6) Benefit Information      | • Co-Pay and Co-Insurance amounts by Service Type  
• Deductibles and/or Visit Limitation Information  
• Exclusions  
• Limitations  
• Out of Pocket (Stop Loss)  
• Non-Covered Services  
• Other or Additional Payer Name, Member ID and Contact Information  
• Payer Messages |
NEHEN Express Eligibility Response Details - Example

1. Eligibility Response Details

2. Selected SNPI

3. Patient Information

4. Plan Information

5. Primary Care Provider

6. Limitations Information

Additional/Example Plan Information

- Evercare
  - Evercare (EVERCARE 2015)
  - Member ID: EVERCARE_456789
  - Address: 123 Main St, San Antonio, TX 78201

- Medicare
  - Medicare (MEDICARE 2015)
  - Member ID: MEDICARE_456789
  - Address: 123 Main St, San Antonio, TX 78201

Result Information

- COPD
  - Code: 493.2
  - Additional Information: AMBULATORY CLINICAL REVIEW REQUIRED"