



Avoid Common Claim Denials and Rejections by Verifying Eligibility

Did you know?

Some of the most common reasons that claims are rejected or denied include:

- ✚ **Incorrect member identification number**
- ✚ **Incorrect member date of birth**
- ✚ **Incorrect member identification number and name combination**
- ✚ **Member not covered on the date of service**

By verifying a member's eligibility prior to a visit and at the time of the visit, you can increase the volume of claims submitted with accurate information and avoid costly administrative rework.

Here are some useful tips

- Develop a process to verify a member's eligibility prior to a visit and at the time of the visit.
- If you receive a response "member not found" during the eligibility verification process, resubmit an eligibility request using the following methods:
 - ✓ Double check the member identification number, including prefix and suffix. *Consider making a copy of the member's identification card. Data entry errors may often be resolved by referring to information included on the member's identification card.*
 - ✓ If you cannot locate the member's information using the member identification number, try a search using the member's name and date of birth. Pay special attention to the spelling of the member's name and date of birth.
 - ✓ If the member's information cannot be found using these methods, contact the member directly as there could be additional reasons you are unable to locate the member's information, including:
 - A name change due to life event (i.e. marriage)
 - An incorrect date of birth at the health plan or housed within the provider's information system
 - The provider office has the wrong insurance information on file and may need updating.
- Maintaining accurate and current patient demographic information is essential to the eligibility verification process. Remind the member to inform the provider's office and health plan of any changes to personal information.

For NEHEN/NEHEN*Net* users:

You can check member's insurance eligibility and benefits at many health plans at once, with one click, instead of checking each insurance plan separately. This may assist in easily obtaining information of alternative insurance coverage the member may have. Please visit the NEHEN Web site at www.nehen.org or www.nehennet.org for more details on this useful feature.