

Eligibility Flags

Flags replace the Provider Portal's Alerts. They can be enabled to display on both Visits and Appointments and appear as colored rectangular boxes.



This flag will appear next to the patient's name on the Checked In visits list and is notified users that patients have changed their demographics at the kiosk. Clicking on the rectangular box will open a window showing previous and new demographics; the icon will pinpoint which fields have changed. Depending on the integration, these changes can automatically update fields in the client's PMS/HIS. Users should review the flag and make necessary changes in their PMS/HIS.

SMITH, JANE

12/03/2014 12:10 PM - DemoDAWN

Primary Insurance - Universal Health

Insurance Changed at Kiosk ←

	Previous	Current
Insurance Type	Self Pay	Other Listed Payer
Payer Name		Universal Health
Member ID		123
Member Last Name		SMITH
Member First Name		JANE
Member DOB		01/01/2001
Member Gender		Female
Patient Relationship		Subscriber/Self

Clear Flag

Resubmit Insurance Close

This flag will appear when there is a discrepancy between the insurance information that is originally sent in the eligibility request and the information that returns from the insurance company in the eligibility response. The icon will show which fields have discrepancies. Users should click Resubmit with Response Data, and update the patient's record in their PMS/HIS.

Secondary Insurance - HealthSmart

Secondary Eligibility Data Conflict

	Submitted	Response
Last Name	[REDACTED]	[REDACTED]
First Name	[REDACTED]	[REDACTED]
Date of Birth	[REDACTED]	[REDACTED]
Gender	Male	Unknown
Member ID	[REDACTED]	[REDACTED]
Relationship	Spouse	Child
Group Number	[REDACTED]	[REDACTED]

[Resubmit With Response Data](#) [Clear Flag](#)

[Resubmit Insurance](#) [Close](#)

This flag is a notifier that something was changed or updated at the kiosk by the patient. Users should note the changes and update their systems accordingly. This alert shows what was on file and the information that was changed.

Primary Insurance - Aetna

Insurance Changed at Kiosk

	Previous	Current
Insurance Type	Other Listed Payer	Other Listed Payer
Payer Name	Aetna	Aetna
Group Number	[REDACTED]	[REDACTED]
Member ID	[REDACTED]	[REDACTED]
Member Last Name	[REDACTED]	[REDACTED]
Member First Name	[REDACTED]	[REDACTED]
Member DOB	[REDACTED]	[REDACTED]
Member Gender	Female	Female
Patient Relationship	Subscriber/Self	Child

[Clear Flag](#)

This flag will appear when there is another payer associated with a Medicare or Medicaid plan. When the Coordination of Benefits is for the current year, the other payer is generally the primary payer on file. Click Resubmit insurance to update the new payer name and resubmit. Update the patient's record in the PMS/HIS.

 **Secondary Insurance - Medicaid North Carolina**

Secondary Eligibility: Other Payer on File

Service Type Code	Health Benefit Plan Coverage
Coverage	Active Coverage - Health Maintenance Organization (HMO) (Code HM)
Name	SOUTH ROBESON MEDICAL CENTER - Primary Care Provider
Address:	[REDACTED]
Contact Information:	SOUTH ROBESON MEDICAL CENTER
Telephone	[REDACTED]
Telephone	[REDACTED]
Contact Information:	ACCESSCARE
Work Phone Number	[REDACTED]
Plan Coverage Descript...	CAROLINA ACCESS

Service Type Code	Health Benefit Plan Coverage
Coverage	Active Coverage - Other (Code OT)
Name	[REDACTED]
Address:	[REDACTED]

This flag will notify users that the patient is on a managed care plan and is a Medicaid patient without having to look at the benefits report. The flag appears on the patient row by the resulting eligibility response.

 **Primary Insurance - Medicaid Georgia**

Eligibility: Managed Care

Service Type Code	Professional (Physician)
Coverage	Managed Care Coordinator - Medicaid (Code MC)
Name	WELLCARE HEALTH PLANS SOUTHEAST - Payer
Telephone	[REDACTED]
Plan Coverage Descript...	GEORGIA FAMILIES
Dates:	Eligibility: 7/14/2017 - 7/14/2017

The Contact Entity Flag appears when an active payer response returns with a "U" EB segment in the 271 EDI Response. It displays the contact information of the entity that can provide eligibility/benefits data according to the responding payer. The flag is green in color and can be configured to trigger on the Visits/Appointments pages in a column next to the Clearwave Insurance Icon. The Contact Entity Flag may be hidden depending on the service type codes that are being filtered for the practice.

✔ Primary Insurance - UHC Medicare

█ Eligibility: Contact Other Entity

Service Type Code	Dental Care
Coverage	Contact Following Entity for Eligibility or Benefit Information -
Name	DBP DENTAL- WONDERBOX - <i>Vendor</i>
URL	WWW.OHDENTALGP.COM
Service Type Code	Vision (Optometry)
Coverage	Contact Following Entity for Eligibility or Benefit Information -
Name	OPTUMHEALTH SPECIALTY BENEFITS VISION - <i>Vendor</i>
URL	WWW.OPTUMHEALTHVISION.COM
Service Type Code	Pharmacy
Coverage	Contact Following Entity for Eligibility or Benefit Information -
Name	PRESCRIPTION SOLUTIONS - <i>Vendor</i>