



interChange

Part 9



DHS/DHCAA/BEPS Training April 2010



Introduction

The purpose of this presentation is to provide a more specific explanation of member eligibility and managed care enrollment information which is provided via the MCO and Partner Portal Eligibility Verification methods.

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Introduction

This presentation will be divided into two sections:

- **Section One: Enrollment Tab**
shows information provided when enrollment verification is done using the Enrollment Tab.
- **Section Two: iC Functionality Tab**
shows information provided when enrollment verification is done using the iC Functionality tab.

Introduction

The screen shots in this presentation are taken from the secure MCO Portal, which is the same information provided via the Partner Portal for member eligibility verification. Disregard any tabs that are included in the MCO Portal that are not available in the Partner Portal.

Section One: Enrollment Tab



Member Enrollment Enrollment Tab

Using the Enrollment Tab, you can verify a member's current BC+ or Medicaid eligibility in the Enrollment Verification section. Enter a member ID, from date of service, to date of service, and click the Search button

ForwardHealth interChange
Managed Care Organization

Welcome PURE MCO - September 15, 2009 3:10 AM [Logout](#)

Home | Search | Providers | Trading Partners | Partners | Managed Care | **Enrollment** | Claims | Prior Authorization | Trade Files | HealthCheck
Account | Contact Information | Online Handbooks | Site Map | Portal Administration | Security | Certification | iC Functionality | Admin | Help

Enrollment Verification

Required fields are indicated with an asterisk (*).
Either the Member ID or the Social Security Number and Date of Birth are required.

Member ID

Social Security Number Date of Birth

From Date of Service* To Date of Service*

Search

For your reference, the transaction verification number for this search is 0825900005.

Search Results

Member ID 555000021 Name JOHN MILLER
Date of Birth 05/30/1968 County Milwaukee

Benefit Plan

Plan	Benefit Plan	Effective Date	End Date
MEDICAID	Medicaid (MPSA Recipient)	01/01/2005	09/13/2005

Managed Care Enrollment

Provider Name	Effective Date	End Date
ASRI HEALTH PLAN INC (Chiropractic)	01/01/2009	07/20/2009
ASRI HEALTH PLAN INC (Dental)	01/01/2008	07/26/2008

Member Enrollment Enrollment Tab

Member Benefit Plan, Managed Care enrollment, Medicare and TPL information, NH Liability (includes Waiver Cost Share) and Spenddown (includes Waiver Spenddown) information will be returned for the dates of service entered.

From Date of Service* 01/01/2008 To Date of Service* 09/13/2008

For your reference, the transaction verification number for this search is 0825900005.

Search Results

Member ID 555000021 Name JOHN MILLER
Date of Birth 05/30/1968 County Milwaukee

Benefit Plan

Payer	Benefit Plan	Effective Date	End Date
MEDICAID	Medicaid (MPSA Recipient)	01/01/2008	09/13/2008

Managed Care Enrollment

Provider Name	Effective Date	End Date
ABRI HEALTH PLAN INC (Chiropractic)	01/01/2008	07/28/2008
ABRI HEALTH PLAN INC (Dental)	01/01/2008	07/28/2008

*Note that a transaction verification number is returned.

Member Enrollment Enrollment Tab

- **Benefit Plan** – this is the high level member Medicaid, SSI MA, SSI payment or limited benefit plan eligibility information. Specific medical status codes are not available via the Enrollment tab.
- **Managed Care Enrollment** – this is detailed MCO enrollment information for the member, including enrollment begin and end dates. Member special condition codes, otherwise called level of care, are not given in this section via the Enrollment tab.

Benefit Plan

Payer	Benefit Plan	Effective Date	End Date
MEDICAID	Medicaid (MPSA Recipient)	01/01/2008	09/13/2008

Managed Care Enrollment

Provider Name	Effective Date	End Date
ABRI HEALTH PLAN INC (Chiropractic)	01/01/2008	07/28/2008
ABRI HEALTH PLAN INC (Dental)	01/01/2008	07/28/2008

Member Enrollment Enrollment Tab

Additional search results for a member (with a waiver cost share amount).

- **Medicare** – the member Medicare Coverage information, including the begin and end date associated with each coverage type.

Managed Care Enrollment				
Provider Name	Telephone Number	Effective Date	End Date	
WESTERN WISCONSIN CARES	(977)657-0766	12/01/2008	02/04/2009	

Medicare			
Coverage	Medicare Coverage Start Date	Medicare Coverage End Date	
Medicare Part A	09/01/2008	02/04/2009	
Medicare Part B	09/01/2008	02/04/2009	
Medicare Part D	09/01/2008	02/04/2009	

Spenddown				
Case#	Benefit Plan	Current Balance	Effective Date	End Date
Medicaid	SENIORCARE COST SHARE	\$0.00	12/01/2008	09/30/2009
Medicaid	WAIIVER COST SHARE	\$0.00	12/01/2008	07/31/2009

Patient Liability				
Benefit Plan Group	Liability Amount	Effective Date	End Date	
WAIIVER COST SHARE	\$184.00	01/01/2009	01/31/2009	
WAIIVER COST SHARE	\$232.78	12/01/2008	12/31/2008	

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Member Enrollment Enrollment Tab

Additional search results for a member (with a waiver cost share amount).

- **Spenddown** - the Spenddown section reflects SeniorCare spenddown information as well as Waiver Spenddown amounts. The “Waiver Cost Share” amount in this section is actually the Waiver Spenddown amount and therefore it is not used to offset Family Care capitation payments.

Managed Care Enrollment				
Provider Name	Telephone Number	Effective Date	End Date	
WESTERN WISCONSIN CARES	(977)657-0766	12/01/2008	02/04/2009	

Medicare			
Coverage	Medicare Coverage Start Date	Medicare Coverage End Date	
Medicare Part A	09/01/2008	02/04/2009	
Medicare Part B	09/01/2008	02/04/2009	
Medicare Part D	09/01/2008	02/04/2009	

Spenddown				
Case#	Benefit Plan	Current Balance	Effective Date	End Date
Medicaid	SENIORCARE COST SHARE	\$0.00	12/01/2008	09/30/2009
Medicaid	WAIIVER COST SHARE	\$0.00	12/01/2008	07/31/2009

Patient Liability				
Benefit Plan Group	Liability Amount	Effective Date	End Date	
WAIIVER COST SHARE	\$184.00	01/01/2009	01/31/2009	
WAIIVER COST SHARE	\$232.78	12/01/2008	12/31/2008	

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Member Enrollment Enrollment Tab

Additional search results for a member (with a waiver cost share amount).

- **Patient Liability** - the member waiver cost share amount in the Patient Liability section is the waiver cost share amount that would be used to offset the Family Care capitation payment for this member. The member below has a waiver cost share amount of \$184.00 for 01/01/09 – 01/31/09.

Managed Care Enrollment				
Provider Name	Telephone Number	Effective Date	End Date	
WESTERN WISCONSIN CARES	(977)657-0766	12/01/2008	02/04/2009	

Medicare		
Coverage	Medicare Coverage Start Date	Medicare Coverage End Date
Medicare Part A	09/01/2008	02/04/2009
Medicare Part B	09/01/2008	02/04/2009
Medicare Part D	09/01/2008	02/04/2009

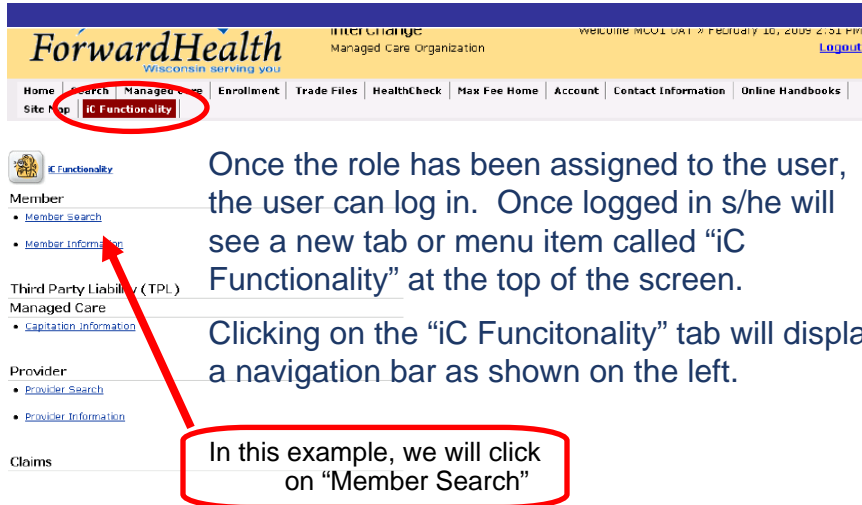
Spenddown				
Case#	Benefit Plan	Current Balance	Effective Date	End Date
Medicaid	SENIOR CARE COST SHARE	\$0.00	12/01/2008	09/30/2009
Medicaid	WAIIVER COST SHARE	\$0.00	12/01/2008	07/31/2009

Patient Liability				
Benefit Plan Group	Liability Amount	Effective Date	End Date	
WAIIVER COST SHARE	\$184.00	01/01/2009	01/31/2009	
WAIIVER COST SHARE	\$292.78	12/01/2008	12/31/2008	

Section Two: iC Functionality Tab



iC Functionality - Member, Capitation Payment & Provider Search



ForwardHealth
Managed Care Organization

Home Search **iC Functionality** Enrollment Trade Files HealthCheck Max Fee Home Account Contact Information Online Handbooks

Member
• [Member Search](#)
• [Member Information](#)

Third Party Liability (TPL)
Managed Care
• [Capitation Information](#)

Provider
• [Provider Search](#)
• [Provider Information](#)

Claims

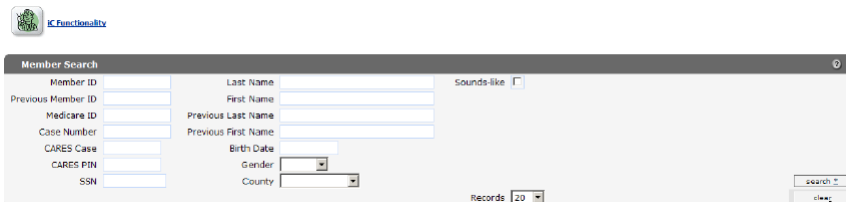
Once the role has been assigned to the user, the user can log in. Once logged in s/he will see a new tab or menu item called “iC Functionality” at the top of the screen.

Clicking on the “iC Functionality” tab will display a navigation bar as shown on the left.

In this example, we will click on “Member Search”

iC Functionality - Member Search

Clicking on “Member Search” will bring up the screen below. As you can see, this screen allows a greater range of options for searching on member information – including a name search and a “sounds-like” search. Users are encouraged to narrow their searches by as many fields as possible since search requests that produce too many results will return an error.



Member Search

Member ID _____ Last Name _____ Sounds-like

Previous Member ID _____ First Name _____

Medicare ID _____ Previous Last Name _____

Case Number _____ Previous First Name _____

CARES Case _____ Birth Date _____

CARES PIN _____ Gender _____

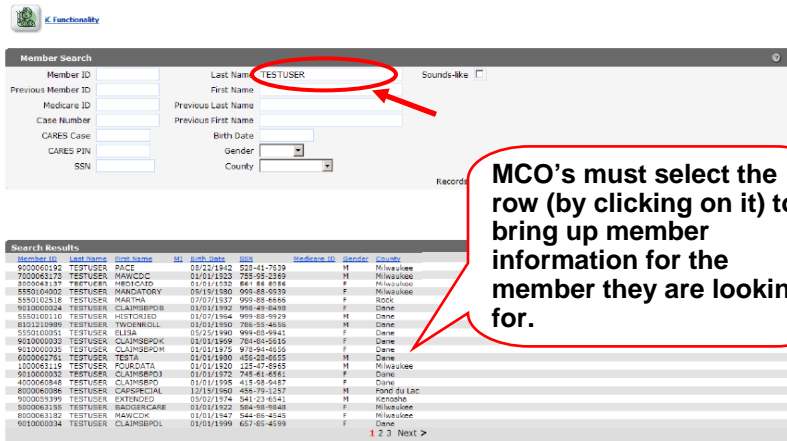
SSN _____ County _____

Records: 20

search clear

iC Functionality - Member Search

Below is an example of results displayed for the last name of "TESTUSER". Note at the bottom of the page are 3 pages of results for this search request.



Member Search

Member ID: Last Name: Sound-like

Previous Member ID: First Name:

Medicare ID: Previous Last Name:

Case Number: Previous First Name:

CARES Case: Birth Date:

CARES PIN: Gender:

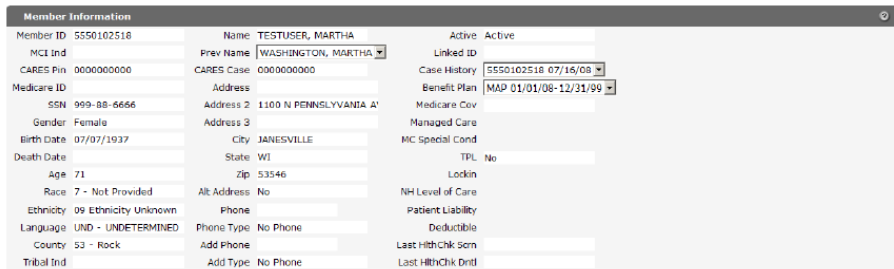
SSN: County:

Search Results

Member ID	Last Name	First Name	MI	Birth Date	DOB	Medicare ID	Gender	County
920000192	TESTUSER	RACE		05/22/1912	052-41-7539		M	Milwaukee
720000172	TESTUSER	MAWCOG		01/01/1932	785-65-2929		M	Milwaukee
800048137	TESTUSER	MEDICAD		01/01/1932	86-84-8186		F	Milwaukee
880100020	TESTUSER	MARCHPOW		09/01/1980	999-88-9939		F	Milwaukee
550102518	TESTUSER	MARTHA		07/07/1937	999-88-8888		F	Rock
901000024	TESTUSER	CLAIMSREP		02/01/1992	999-88-9940		F	Dane
550100110	TESTUSER	HETORIED		01/07/1964	999-88-9929		M	Dane
811121989	TESTUSER	TRISEMOLL		02/01/1990	708-95-8438		M	Dane
550100051	TESTUSER	ELISA		05/21/1980	999-88-9941		F	Dane
901000020	TESTUSER	CLAIMSREP		02/01/1999	704-90-5555		F	Dane
901000020	TESTUSER	CLAIMSREP		01/01/1975	979-91-4055		F	Dane
600000170	TESTUSER	TESTA		02/01/1990	405-98-8009		M	Dane
100005119	TESTUSER	FOURDATA		01/01/1920	125-47-8955		M	Milwaukee
901000020	TESTUSER	CLAIMSREP		01/01/1972	745-41-8885		F	Dane
400000948	TESTUSER	CLAIMSREP		01/01/1995	415-58-5187		F	Dane
800060998	TESTUSER	CAPSPECIAL		12/15/1960	456-79-1257		M	Pond du Lac
900000399	TESTUSER	EXTENDED		09/01/1974	541-22-6941		M	Kenosha
800063193	TESTUSER	BADSHICARE		01/01/1922	584-98-9848		F	Milwaukee
800063182	TESTUSER	MAWCOG		01/01/1947	844-98-4943		F	Milwaukee
901000034	TESTUSER	CLAIMSREP		01/01/1999	657-85-4999		F	Dane

iC Functionality - Member Information

If you click on the Member Information link from the first page of options, the screen below will display which includes the demographic information for the member, in the first two columns, as well as high level eligibility, enrollment, Medicare, TPL, and Patient Liability information.



Member Information

Member ID: 5550102518 Name: TESTUSER, MARTHA Active: Active

MCI Ind: Prev Name: WASHINGTON, MARTHA Linked ID:

CARES Pin: 000000000 CARES Case: 000000000 Case History: 5550102518 07/16/08

Medicare ID: Address: Benefit Plan: MAP 01/01/08-12/31/99

SSN: 999-88-6666 Address 2: 1100 N PENNSYLVANIA A' Medicare Cov:

Gender: Female Address 3: Managed Care:

Birth Date: 07/07/1937 City: JANESVILLE MC Special Cond:

Death Date: State: WI TPL: No

Age: 71 Zip: 53546 Lockin:

Race: 7 - Not Provided Alt Address: No NH Level of Care:

Ethnicity: 09 Ethnicity Unknown Phone: Patient Liability:

Language: UND - UNDETERMINED Phone Type: No Phone Deductible:

County: 53 - Rock Add Phone: Last HltChk: Som

Tribal Ind: Add Type: No Phone Last HltChk Dnt:

iC Functionality - Member Information

- **Active** – this indicates whether the Member ID that was entered is the active ID for this member. When a Member ID is linked to another Member ID, usually due to permanent demographic changes that assign a new MCI ID for the member, the old Member ID will display as Inactive.
- **Linked ID** – if the Member ID entered was inactivated, and linked to a new Member ID, then the new Member ID will display in this field (and the Active field will be “Inactive”).

Member Information			
Member ID	5550102518	Name	TESTUSER, MARTHA
MCI Ind		Prev Name	WASHINGTON, MARTHA
CARES Pin	0000000000	CARES Case	000000000
Medicare ID		Address	1100 N PENNSYLVANIA A'
SN	999-88-6666	Address 2	
Gender	Female	Address 3	
Birth Date	07/07/1937	City	JANESVILLE
Death Date		State	WI
Age	71	Zip	53546
Race	7 - Not Provided	Alt Address	No
Ethnicity	09 Ethnicity Unknown	Phone	
Language	UND - UNDETERMINED	Phone Type	No Phone
County	53 - Rock	Add Phone	
Tribal Ind		Add Type	No Phone
		Active	Active
		Linked ID	
		Case History	5550102518 07/16/08
		Benefit Plan	MAP 01/01/08-12/31/99
		Medicare Cov	
		Managed Care	
		MC Special Cond	
		TPL	No
		Lockin	
		NH Level of Care	
		Patient Liability	
		Deductible	
		Last HthChk Sern	
		Last HthChk Dntl	

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iC Functionality - Member Information

- **Benefit Plan** – this is the high level member Medicaid, SSI MA, SSI payment or limited benefit plan eligibility information. This is the same Benefit Plan information provided via the Enrollment Tab.
- **Managed Care** – this is the Managed Care program enrollment information for a member. Valid values are: FAMCR (Family Care), PACPB (PACE and Partnership), HMOM (HMO enrollment), SSIM (SSI HMO enrollment), WAMMM (Wraparound Milwaukee) and CCFMM (Children Come First).

Member Information			
Member ID	5550102518	Name	TESTUSER, MARTHA
MCI Ind		Prev Name	WASHINGTON, MARTHA
CARES Pin	0000000000	CARES Case	000000000
Medicare ID		Address	1100 N PENNSYLVANIA A'
SN	999-88-6666	Address 2	
Gender	Female	Address 3	
Birth Date	07/07/1937	City	JANESVILLE
Death Date		State	WI
Age	71	Zip	53546
Race	7 - Not Provided	Alt Address	No
Ethnicity	09 Ethnicity Unknown	Phone	
Language	UND - UNDETERMINED	Phone Type	No Phone
County	53 - Rock	Add Phone	
Tribal Ind		Add Type	No Phone
		Active	Active
		Linked ID	
		Case History	5550102518 07/16/08
		Benefit Plan	MAP 01/01/08-12/31/99
		Medicare Cov	
		Managed Care	
		MC Special Cond	
		TPL	No
		Lockin	
		NH Level of Care	
		Patient Liability	
		Deductible	
		Last HthChk Sern	
		Last HthChk Dntl	

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iC Functionality - Member Information

- **MC Special Cond** – this is either the level of care for members enrolled in LTC MCOs or an exemption from HMO or SSI HMO enrollment. Exemptions are E01-E99 and they do not prevent LTC MCO enrollment.
- **Patient Liability** – this field includes a member's Waiver Cost Share amount. The Waiver Cost Share amount in this field will be the amount sent to iC from the CARES system and it includes Family Care cost share amounts for members with Waiver MA as well as Nursing Home MA.

Member Information			
Member ID	5550102518	Name	TESTUSER, MARTHA
MCI Ind		Prev Name	WASHINGTON, MARTHA
CARES Pin	0000000000	CARES Case	000000000
Medicare ID		Address	
SN	999-88-6666	Address 2	1100 N PENNSYLVANIA A'
Gender	Female	Address 3	
Birth Date	07/07/1937	City	JANESVILLE
Death Date		State	WI
Age	71	Zip	53546
Race	7 - Not Provided	Alt Address	No
Ethnicity	09 Ethnicity Unknown	Phone	
Language	UND - UNDETERMINED	Phone Type	No Phone
County	53 - Rock	Add Phone	
Tribal Ind		Add Type	No Phone
Linked ID		Case History	5550102518 07/16/09
Benefit Plan		Benefit Plan	MAP 01/01/08-12/31/99
Managed Care		MC Special Cond	
TPL	No	Lockin	
NH Level of Care		Patient Liability	
Deductible		Last HthChk Sern	
Last HthChk Dntl			

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iC Functionality - Member Maintenance Menu

The "Member Maintenance" Menu is shown at the bottom of the Member Information screen. This allows the user access to more specific information for the member. By clicking the categories on the left (Member, Managed Care, Medicare, etc...) the user will be given sub-menu options to choose from.

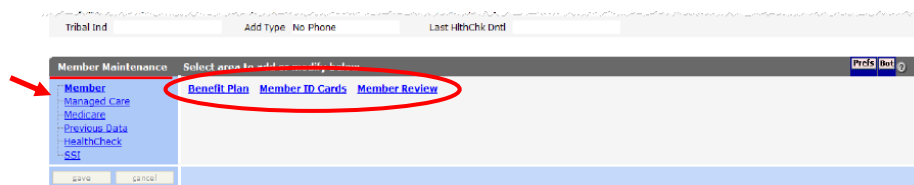
Member Maintenance	
Member	Benefit Plan Member ID Cards Member Review
Managed Care	
Medicare	
Previous Data	
Healthcheck	
SSI	
save	cancel

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iC Functionality - Member Maintenance Menu

In this example, the category “Member” is selected, which reveals sub-menu items of “Benefit Plan”, “Member ID Cards”, and “Member Review”.



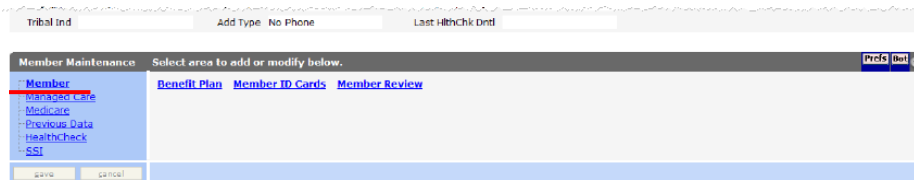
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iC Functionality - Member Maintenance Menu

RCs will have access to the following “Member Maintenance” Categories:

- Member
- Managed Care
- Medicare
- SSI
- Case Search
- TPL
- Provider

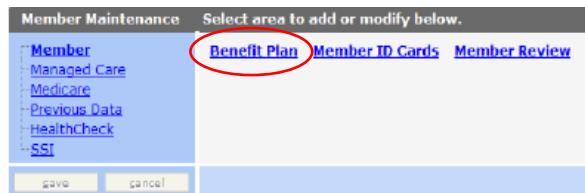


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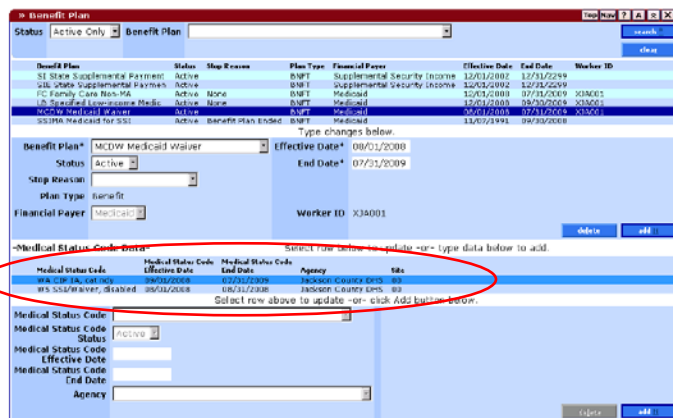
iC Functionality - Member Benefit Plan Information

The sub-menu “Benefit Plan” will allow the user to view more detailed member eligibility information. All of the benefit plans that a member is or was eligible for will display. The user can select any of the rows of Benefit Plan information to view more detailed information for that specific Benefit Plan.



iC Functionality - Member Benefit Plan Information

In this example, the member's Medicaid Waiver (MCDW) Benefit Plan is selected. The member's Medical Status code associated with the MCDW Benefit Plan is W5 from 8/1/08 – 8/31/08 and WA from 9/1/08 – 7/31/09.



iC Functionality - Member Benefit Plan Information

The Family Care Non-MA Benefit Plan does NOT mean that the member is a Family Care Non-MA member from 12/1/08-7/31/09. The Family Care Non-MA is not used for capitation payment purposes or claims editing purposes. It is stored because the Family Care information is sent from CARES.

» Benefit Plan Top Nav ? A S X

Status: Benefit Plan: search clear

Benefit Plan	Status	Stop Reason	Plan Type	Financial Payer	Effective Date	End Date	Worker ID
SI State Supplemental Payment	Active		BNFT	Supplemental Security Income	12/01/2002	12/31/2299	
SIE State Supplemental Payment	Active		BNFT	Supplemental Security Income	12/01/2002	12/31/2299	
FC Family Care Non-MA	Active	None	BNFT	Medicaid	12/01/2008	07/31/2009	XJA001
SS Spousal Low Income Medic	Active	None	BNFT	Medicaid	12/01/2008	09/30/2009	XJA001
MCDW Medicaid Waiver	Active		BNFT	Medicaid	06/01/2008	07/31/2009	XJA001
SSIPA Medicaid for SSI	Active	Benefit Plan Ended	BNFT	Medicaid	11/07/1991	09/30/2008	

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Member ID Card & the Member Review Screens

The Member ID Card screen indicates when the last Member ID card was issued, why it was issued, the type of card, whether or not it is active and whether or not it was returned.

Member Maintenance Print Top Out ? X

save cancel

Base Information Print Nav ? A S X

Member ID Cards Top Nav ? A S X

Date Issued	Issue Reason	Card Type	Active Indicator	PAN	Source	Return Reason
11/28/2005	IC Replacement	ForwardHealth ID Card	Active	600000001050061	PS/2	03 - Active card, not returned
02/12/2005	New	ForwardHealth ID Card	Active	807288097967496	PS/2	03 - Active card, not returned

Select row above to view the data.

Date Issued: Issue Reason:

Card Type: PAN:

Address 1: Source:

Address 2: Active Indicator*:

Address 3: Return Reason*:

City:

State:

Zip:

Member Review Top Nav ? A S X

No rows found.

Select row above to update -or- click Add button below.

Review Reason: Effective Date:

Review Requestor: End Date:

delete add

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Member ID Card & the Member Review Screens

The Member Review screen is used by Wisconsin to suspend/deny long term care claims for members that have divested prior to applying to Medicaid.

The screenshot displays the 'Member Maintenance' interface. It includes sections for 'Base Information', 'Member ID Cards', and 'Member Review'.

Member ID Cards Table:

Date Issued	Issue Reason	Card Type	Active Indicator	PAN	Source	Return Reason
11/26/2005	IC Replacement	ForwardHealth ID Card	Active	600000000520861	PS/2	03 - Active card, not returned
02/17/2005	New	ForwardHealth ID Card	Active	5077080507507495	PS/2	03 - Active card, not returned

Member Review Section:

Review Reason: Effective Date:
 Review Requestor: End Date:

Buttons: Update, Add

Managed Care Information

If the Managed Care category is chosen, the Member MCO Enrollment History and the MC Special Conditions screens displayed to the user.

Managed Care Information

The member MCO Enrollment History will show you all MCO Enrollment segments, both active and inactive for the member, as well as the Effective and End Date for each enrollment segment and the MCO name and MCO ID, which was not available on the Member Information screen.

Managed Care Information

The MC Special Conditions screen is used to identify member level of care information for the Long Term Care (LTC) Managed Care Organizations as well as to identify exemptions from HMO and SSI HMO enrollment. Exemptions do not impact LTC enrollment and always start with an “E” and are in the range of E01-E99.

The LTC special condition codes are:

Family Care	Level of Care	PACE/Partnership	Level of Care
L04	Non NH level of care	ICF/IC1	ICF
L06	NH level of care	SNF/SN1	SNF
		ISN/IS1	ISN

Managed Care Information

Base Information							Top	Nav	?	A	S	X
Member MCO Enrollment History												
MCO ID	MCO Name	MC Program	MC Service Area	Effective Date	End Date	Lock-In Date	Status					
6905530	WESTERN WISCONSIN CARES	Family Care	ENROLL CONVERSION	09/23/2005	12/31/2009		Active					
6905530	WESTERN WISCONSIN CARES	Family Care	ENROLL CONVERSION	04/28/2005	12/31/2003		Active					
Type changes below:												
MCO ID	6905530 - WESTERN WISCONSIN CARES			Effective Date	03/21/2005							
MC Program	Family Care			End Date*	12/31/2009							
MC Service Area	ENROLL CONVERSION			Lock-In Date								
Start Reason	57 - System Assigned - Conversion Start			Status	Active							
Stop Reason	81 - System Assigned - Eligibility Ended			Enrollment Source	Conversion							
add												
MC Special Conditions												
Special Condition Code	Effective Date	End Date										
L06 - Nursing Home Level of Care (NM)	04/29/2003	12/31/2003										
L06 - Nursing Home Level of Care (MO)	03/21/2005	12/31/2009										
Type changes below:												
Special Condition Code	L06 - Nursing Home Level of Care (MA)											
Effective Date	03/21/2005											
End Date*	12/31/2009											
delete add												

Note the enrollment segments with a status of "Inactive" which are not valid & will not generate a capitation payment, nor will it be used for Medicaid claims editing purposes. MC Enrollment segments that are inactivated after a capitation payment is issued will cause the capitation payments to be recouped.

To Exit

Congratulations, you have completed:

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Click the "X" on the navigation bar to exit properly.

