

Governing Body: MARION COUNTY COMMUNITY AND PROVIDER SERVICES (CAPS)	Function: INTEGRATED DELIVERY SYSTEM (IDS) HANDBOOK	
Subject: Checking Oregon Health Plan (OHP) Eligibility in the Mid-Valley Independent Physician's Association (MVIPA) Website	Prepared By: CAPS	Original Date: 10/01/2007 Revised Date:

PURPOSE AND SIGNIFICANCE:

Whether an Oregon Health Plan (OHP) Member has current coverage is critical to the authorization and claims process for IDS Providers. A Member's coverage must be current on the date an authorization begins. Coverage must also be current on the date of service of a claim in order to receive reimbursement for the service.

Checking eligibility prior to entering an authorization and periodically thereafter assures continued, uninterrupted reimbursement for care.

PROCESS AND/OR PROCEDURE:

The first step in checking an Member's eligibility is to log into the Mid-Valley Independent Physician's Association (MVIPA) website and perform a Member Search.

MEMBER SEARCH can be accessed from the main menu.

Enter Member information in the fields that will be used to perform the search. The greatest chance of success lies with using either the OHP Member's recipient ID number or with using the Member's date of birth and social security number.

Assure that MID-VALLEY BEHAVIORAL CARE NETWORK is in the INS. Field.

Click SEARCH.

The screenshot shows a web interface titled "Member Search". It features several input fields: "Last:" with a text box, "SSN:" with a text box, "Ins.:" with a dropdown menu set to "Mid-Valley Behavioral Care Network" and a "Search" button, "First:" with a text box, "DOB:" with a text box, "Policy #:" with a text box, and "Elig. Date:" with a text box. Below these fields is a section titled "Search Criteria" which states: "When searching for members, the following fields are required:" followed by a bulleted list:

- **Member Policy Number ("Policy #")**
- or -
- **Two (2) of the following elements:**
 - Member First and Last *full* names (exact matches only);
 - Member Date of Birth ("DOB");
 - Member Social Security Number ("SSN");

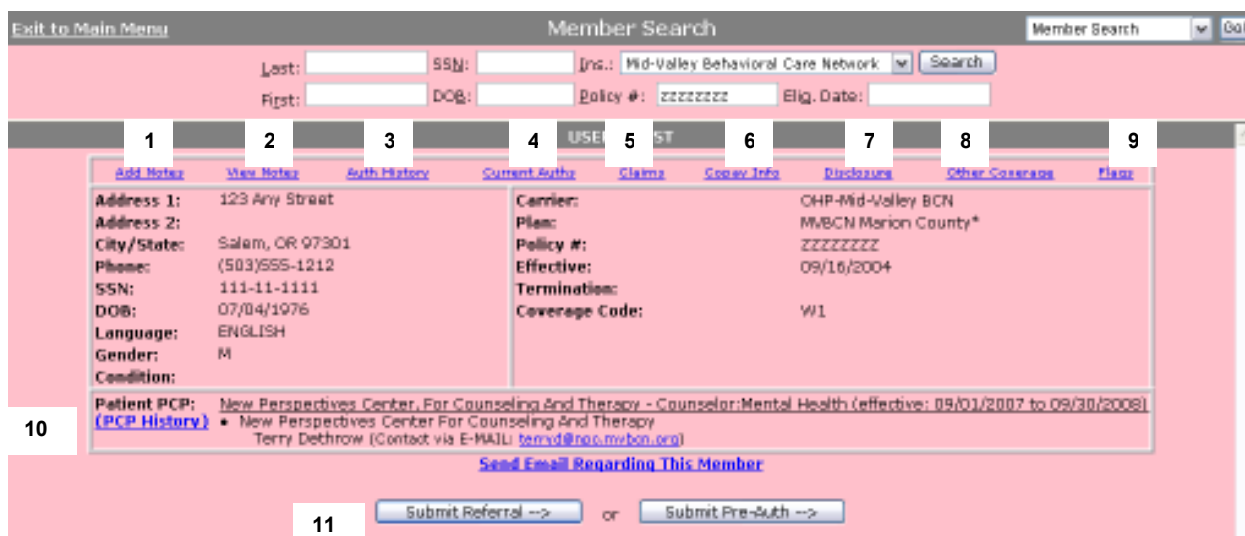
Many Members have more than one eligibility span. It is critical to choose the current open span when enter a new authorization or the span the covers the beginning date of the authorization.

If there is a discrepancy between the MVIPA website eligibility file and the CIM Express file, the information provided in the CIM Express file should be used.

Clicking on the button to the left of the coverage span will open the Member’s Demographic screen.



The Demographic Screen will also indicate the last coverage span for a Member.



From the Demographic Screen, many options are available for the user:

1. Add Notes – this option allows the user to add a patient note. Patient Notes are global to the Member. These notes are not linked to the Member’s specific authorization. Patient notes are viewable by all IDS users.
2. View Notes – this option allows the user to view all the patient notes available for the member. Remember that Patient Notes are global to the Member and that notes specific to an authorization are only viewable from each individual authorization.

3. Auth History – this option will display a list of all authorizations for this Member for all MVBCN services.
4. Current Auths – this option displays any authorization(s) effective as of today's date at any agency.
5. Claims History – this option displays all claims submitted to PH Tech within one year of the current date. To view all claims submitted for a Member, use the Claims Search function from the main menu.
6. The Copay Info link is not used.
7. The Disclosure link is not used.
8. Other Coverages – this option is used for Members having Marion Polk County Health Plan (MPCHP) or MPCHP Advantage coverage.
9. The Flags link is not used.
10. PCP History – this option provides a list of IDS Providers who have had previous authorizations for the Member.
11. Submit Referral – this is the link used to open the screen used to establish an authorization for the Member.

Questions concerning eligibility and or demographics can be directed to PH Tech or Community and Provider Services (CAPS).