

Clarifying the eligibility verification process for Healthy Blue members



Overview:

- Providers need to confirm member coverage with MO HealthNet or Healthy Blue prior to healthcare service delivery.
- Healthy Blue won't cover services for ineligible patients.
- Eligibility verification can be conducted via MO HealthNet's eMOMed system or Availity Essentials.
- Should you encounter any inconsistencies between eMOMed and the processing of a claim or information presented by Healthy Blue, it's crucial to promptly contact your designated Healthy Blue provider relationship management representative. Your assigned representative is equipped to amend the erroneous information and facilitate the reprocessing of claims related to enrollment/eligibility issues, reducing the need for further outreach. Please refrain from outreaching to the State on such issues as your representative should be your primary point of contact.

When a member seeks medical attention, you must attempt to verify their coverage with MO HealthNet or Healthy Blue before providing care. As a provider associated with Healthy Blue, you can serve any member of Healthy Blue, irrespective of whether you are their recorded Primary Care Provider (PCP) or not. Healthy Blue recognizes claims billed with either the member ID number or the MO HealthNet Departmental Client Number (DCN).

If you do not verify eligibility, Healthy Blue does not accept financial responsibility for any services performed on an ineligible patient.

Please note that a member's eligibility status may vary at any time. Healthy Blue suggests providers to request the member's ID card and verify the member's eligibility on the date of service (DOS). In cases where eligibility may be in question due to receiving a rejection or claim(s) denial, you can verify eligibility as follows:

Option 1: Verification of eligibility through MO HealthNet:

- MO HealthNet's online system, eMOMed, available at emomed.com.
- Calling MO HealthNet's Interactive Voice Response unit at **573-635-8908**

Option 2: Verification of eligibility through Availity Essentials:

- Log in to Availity.com, select **Patient Registration** > Eligibility and Benefits.
- Select **Healthy Blue** from the drop down menu.
- Complete the required fields and select **Submit**.

Tips:

- Your assigned provider relationship management representative can assist in validating and updating a member's eligibility.
- The Lock in information on eMOMed's eligibility screen indicates which managed care health plan the member is enrolled in.
- Eligibility may change daily; it is important to check eligibility on the DOS.
- Your assigned provider relationship management representative can assist in the reprocessing of incorrectly **denied** claims due to eligibility discrepancies.
- Claims that have been incorrectly **rejected** due to eligibility discrepancies can be resubmitted back to the health plan after the eligibility has been corrected.



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provider.healthybluemo.com

