

507 Events - Eligibility workflow in Application - Claim Simulator.

Purpose: This procedure explains how to resolve eligibility events 507, 509 and 597.

Scenario	Definition
507	Eligibility found is partial
509	Contract not in effect for group/member
597	No active eligibility for service dates

Follow these steps to resolve partial eligibility events.

Steps	Action								
1	Resolve all events top to bottom as they appear in the Event Resolution.								
2	<table> <tr> <td>Determine if the claim is setting a newborn eligibility event (092, 280, GRC, etc.).</td><td></td></tr> <tr> <td>If the claim is...</td><td>Then continue to the...</td></tr> <tr> <td>Setting a newborn eligibility event</td><td>092, 280, 281, 503, GRC and NBN Events, Follow newborn guidelines to Scenario resolution</td></tr> <tr> <td>Not setting a newborn eligibility event</td><td>Next step.</td></tr> </table>	Determine if the claim is setting a newborn eligibility event (092, 280, GRC, etc.).		If the claim is...	Then continue to the...	Setting a newborn eligibility event	092, 280, 281, 503, GRC and NBN Events, Follow newborn guidelines to Scenario resolution	Not setting a newborn eligibility event	Next step.
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Not setting a newborn eligibility event	Next step.								
3	Go to Member Information and make note of the following information: <ul style="list-style-type: none"> • Name of patient • Date of birth • Gender • Date of service • Group number • Account prefix 								
4	Complete the following actions to access the membership file: <ul style="list-style-type: none"> • Check Member • Click the Member sub tab. 								
5	<table> <tr> <td>Check for the contract type</td><td></td></tr> <tr> <td>If the claim is...</td><td>action</td></tr> <tr> <td>Large group</td><td>Continue to the next step.</td></tr> </table>	Check for the contract type		If the claim is...	action	Large group	Continue to the next step.		
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6	Select the correct group number for the member. Caution: Ensure the group number is medical policy and is withing the dates of service.															
7	Compare the group numbers, account prefix, effective date and end date listed in the membership file to the group number and date(s) of service billed on the claim. Note: When a TRMDT/END DATE is present the coverage is active through midnight of the previous day.															
8	<table><tr><td><ul style="list-style-type: none">• Determine if the claim was keyed/received under the correct active GROUP/CONT number.• Make note of the effective and termination dates.</td><td></td></tr><tr><td>If the claim is...</td><td>then</td></tr><tr><td>Keyed/received under the correct GROUP/CONT number which is active</td><td>Pay the claim</td></tr><tr><td>Not keyed/received under the correct active GROUP/CONT number which is not active</td><td><ul style="list-style-type: none">• Go to the Member Information Tab.• Manually update the Group ID numberValidate for the correct group is updated or not. No further action is required within this process.</td></tr></table>	<ul style="list-style-type: none">• Determine if the claim was keyed/received under the correct active GROUP/CONT number.• Make note of the effective and termination dates.		If the claim is...	then	Keyed/received under the correct GROUP/CONT number which is active	Pay the claim	Not keyed/received under the correct active GROUP/CONT number which is not active	<ul style="list-style-type: none">• Go to the Member Information Tab.• Manually update the Group ID number Validate for the correct group is updated or not. No further action is required within this process.							
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