Financial Eligibility

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Financial Eligibility

In this lesson you will learn the steps for recording guarantor billing sources for a client. A *guarantor* is an expected source of reimbursement for client services.

You will also learn that you maintain a single-source record for a client's financial eligibility by making any guarantor modifications in Episode #1 and then linking all guarantor information for subsequent episodes from Episode #1.

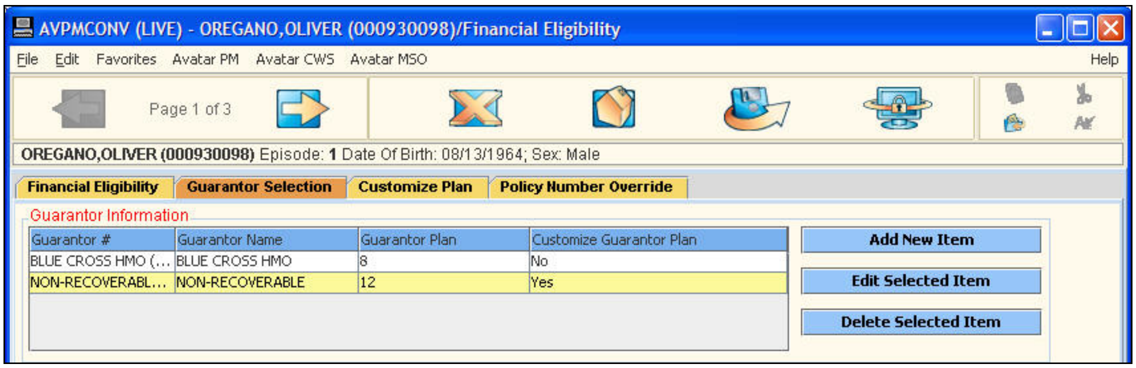
Lesson Objectives

- State the purpose of Financial Eligibility
- Learn to enter guarantors in the Guarantor Information table
- Enter the correct order of guarantors
- Understand how to maintain Episode #1 as the client's single-source record for financial eligibility
- Learn to link guarantor information from Episode #1 into the current episode
- Edit Financial Eligibility information

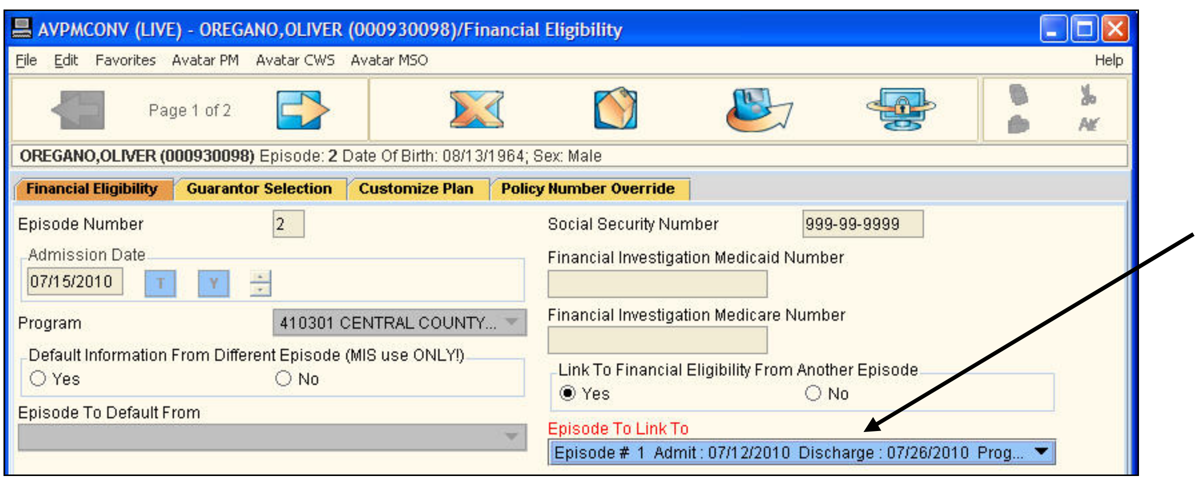
LESSON SCENARIO

Benjie Morados is an administrator in a BHRS clinic. He recently admitted a new client, and that client gathered the necessary information for Benjie to complete the Financial Eligibility window. Benjie finds that the information that autofills in this window from the admission saves a lot of time and that the dropdown lists and radio button choices make it easy to quickly enter the data.

Benjie finds the Guarantor Information table in the Guarantor Selection tab to be a convenient place to gather and review all guarantor information.



Benjie maintains Episode #1 as the single-source record for a client and then links Episode #1 data into the current episode as shown in the following figure. This makes it easy for Benjie to ensure that the guarantor information is correct.



UNDERSTANDING FINANCIAL ELIGIBILITY

You use Financial Eligibility to create and maintain a record of guarantor billing sources for a client. *Guarantor* is a synonym for insurance where insurance can include self pay, third party private insurance, such as Kaiser and Blue Cross, or entitlements such as Medi-Cal and Medicare.

The first time a client opens to BHRS, the administrator completes all guarantor information based on the financial interview with the client. When another episode is opened, you should perform another financial interview and verify whether the information is still correct.

SINGLE-SOURCE RECORD FOR CLIENT'S FINANCIAL ELIGIBILITY

IMPORTANT

In order to maintain a single-source record, you should update most guarantor information in Episode #1, and most episodes following Episode #1 should be linked to Episode #1. There are a few exceptions to this rule. See the Cheat Sheets for Clinics folder in the Admin Sppt Avatar Financial Cheat Sheets folder on the shared drive. Contact MIS if you need additional help.

If a client was in the system prior to the conversion from the VAX to Avatar, they *may* have a conversion record as their Episode #1. It may look like the following example in the Episode Selection screen. Note that the conversion record may also simply list a program name.

Episode	Program	Start	End
19	418152 CAMINAR NEW VENTURES SOUTH AMPHLE	11/05/2009	
18	990800 ACCESS ICI	10/21/2009	10/29/2009
17	990800 ACCESS ICI	10/13/2009	10/15/2009
16	990800 ACCESS ICI	09/02/2009	09/03/2009
1	FINANCIAL CONVERSION PROGRAM	07/01/2004	07/01/2004

In most cases, if a client is admitted to episodes following Episode #1, the administrator does the following:

1. Makes any changes to the guarantor information in Episode #1
2. Prints the forms that the client needs to sign from Episode #1
3. Opens the Financial Eligibility window for the current episode and links the guarantor information from the client's Episode #1 into the current episode

This ensures that the financial information for a client is consistent from one episode to another.

Refer to page 5 and Field A in the Field/Description table for details on client paperwork and linking from previous episodes. Refer to the Financial Eligibility Quick Reference Guide for the exact steps for editing and linking episodes.

NOTE: Do not begin the Financial Eligibility process until the client has all the necessary information. There are a number of required fields in this window and you are not able to save the information until you complete all of the required fields.

WHO CAN PERFORM THIS FUNCTION?

Administrators complete the Financial Eligibility window.

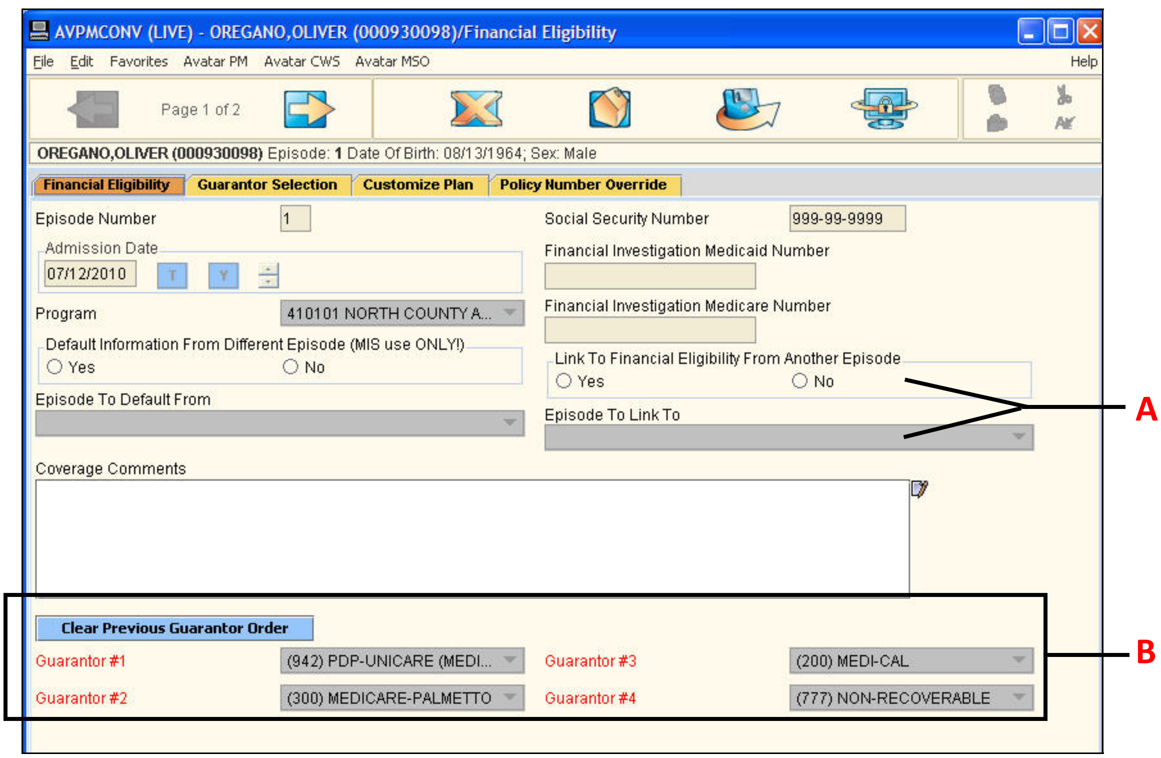
MENU PATH

Avatar PM→Client Management→Account Management→Financial Eligibility

FINANCIAL ELIGIBILITY TAB PAGE 1

In the Financial Eligibility window, you complete the Guarantor Selection tab first. After you enter the guarantors in the Guarantor Selection tab, you return to the Financial Eligibility tab to rank the guarantors in order of payment as shown at the bottom of the following illustration.

NOTE: You must complete the required Guarantor Order fields before you can submit the information. Information regarding the ranking of guarantors is located on the shared drive in the Admin Sppt Avatar Financial Cheat Sheets folder. Refer to the Copy of GUARANTOR RANKING FOR CLINICS for PBM.xls document. MIS is ultimately responsible for the order of guarantors; they will review the Guarantor Order and make any changes necessary.



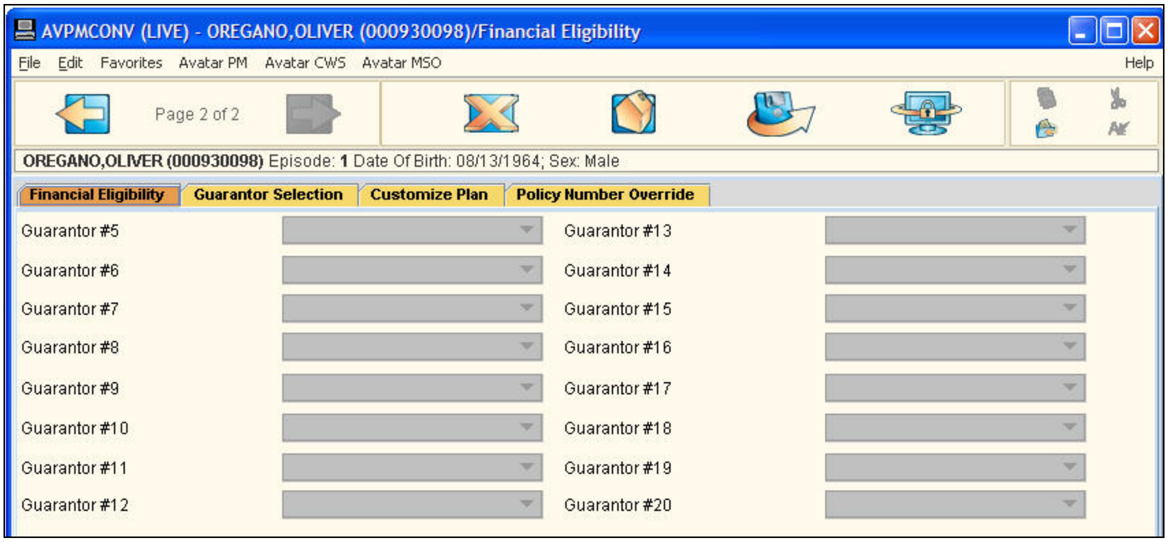
Field	Description

A) Link to Financial Eligibility from Another Episode
 	
Episode to Link To
	Use this feature for clients who have more than one episode.
	
	In order to maintain a single-source record for a client's financial information, always make any guarantor changes in the client's Episode #1 and then go to the current episode and link the information from Episode #1 into the current episode.
	
	IMPORTANT
	Print the forms that the client needs to sign from Episode #1.
	
	For Insurance Clients:
	• Assignment of Benefits (Avatar PM→Reports→Assignment of Benefits)
	    o Choose the appropriate Guarantor from the dropdown list in the Assignment of Benefits window.
	For Medicare Clients:
	• Assignment of Benefits (Avatar PM→Reports→Assignment of Benefits)
	    o Choose the appropriate Guarantor from the dropdown list in the Assignment of Benefits window.
	• Long Term Medicare Assignment
	• Medicare Secondary Payor Unit

B) Guarantor #1 – #4	Use these dropdown lists to place guarantors in order. Information regarding the ranking of guarantors is located on the shared drive in the Admin Sppt Avatar Financial Cheat Sheets folder. Refer to the Copy of GUARANTOR RANKING FOR CLINICS for PBM.xls document. MIS will verify the ranking order and make any necessary changes. The number of Guarantor fields that require an entry is based on the number of guarantors selected on the Guarantor Selection tab. (Guarantor fields #5 - #20 are available on page 2 of the Financial Eligibility tab.)

Financial Eligibility Tab Page 2

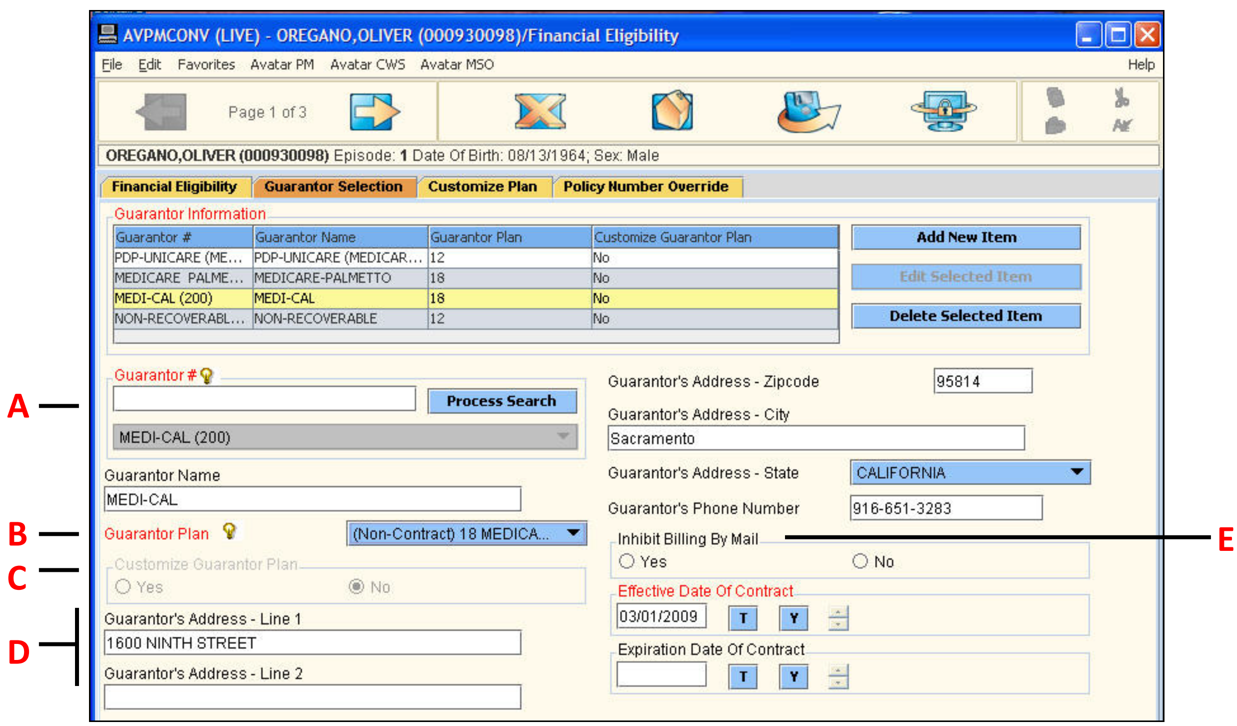
This page allows you to enter up to sixteen additional guarantors.



Guarantor Selection Tab Page 1

Use this tab to assign guarantors and guarantor plans to a client's record.

You click the Add New Item button to open a row for each new table entry. Then you choose a guarantor and complete pages 1 though 3 of the Guarantor Selection tab before adding the next guarantor. Continue adding guarantors as needed and then return to the Financial Eligibility tab for guarantor ordering.

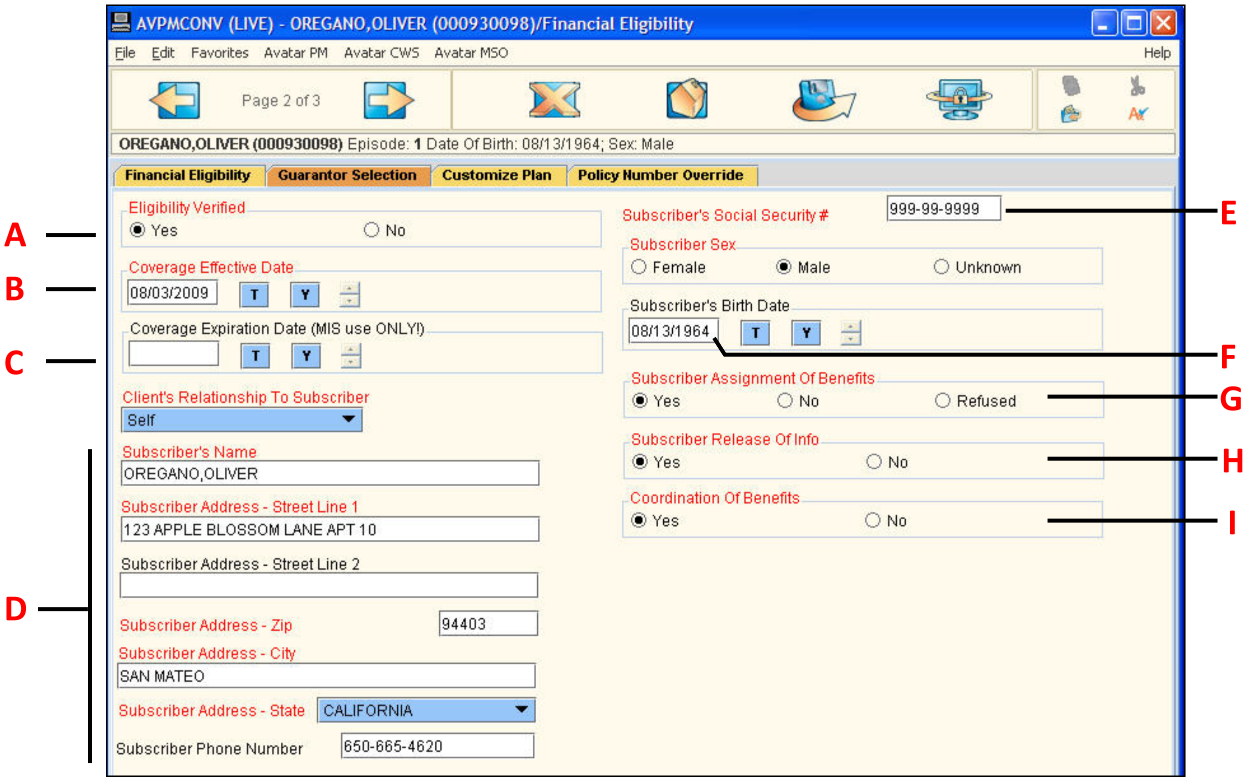


Field	Description
A) Guarantor #	Use an *alphabetic* Process Search to populate this field. If you cannot locate the Guarantor #, click the Help lightbulb icon for assistance.
B) Guarantor Plan	The Guarantor Plan defines the rules under which the guarantor is billed. The Guarantor Plan autofills based on the Guarantor #, except for Medi-Cal and Medicare Palmetto, in which case you must choose a plan from the Guarantor Plan dropdown list. (For Medi-Cal and Medicare Palmetto, refer to the Admin Sppt Avatar Financial Cheat Sheets folder on the shared drive for information on which guarantor plan to choose.)
C) Customize Guarantor Plan	Choose No. Customization is for MIS use ONLY.
D) Guarantor's Address Fields	If you are entering private insurance, you need to match the address in this field with the address on the client's insurance card to ensure that you have the correct insurance.
E) Inhibit Billing by Mail	MIS use ONLY.

GUARANTOR SELECTION TAB PAGE 2

Use this page to enter demographic information about the subscriber. If the subscriber is the client, the demographic information autofills from the admission.

NOTE: If you need to change the client's demographic information, make the change in Update Client Data and Financial Eligibility will update accordingly.



Field	Description
A) Eligibility Verified	Always choose Yes except for the Unknown Pending guarantor, where you would choose No.

Field	Description
B) Coverage Effective Date	This is the date the client's coverage started. • For Self Pay and Non-recoverable, the effective date is the date of admission. • For Medi-Cal, Medicare, and PDPs, the effective date should be backdated to the first day of the month the coverage became effective to capture any services performed as of the first of the month. This information is located in MMEF, MEDS, or on the Medicare card. • For IEP 26.5, the effective date is the start date of the IEP. • For any other guarantor, the effective date is the effective date of the client's coverage.
C) Coverage Expiration Date (MIS use Only)	For MIS use ONLY.
D) Subscriber Name and Demographic Fields	Complete these fields only if the subscriber is someone other than the client. If the subscriber is the client, the information autofills from the admission. Follow this data entry conventions for address information: • Do not use punctuation or special symbols such as the pound sign (#) for apartment numbers.
E) Subscriber's Social Security #	Enter zeros if the social security number is unknown. **NOTE:** If you need to edit a *client's* social security number, modify it through Admission (Outpatient), Admission Bundle (Outpatient), or Update Client Data. Financial Eligibility will update accordingly. *Do not* change the social security number in the Financial Eligibility window as it will not update other windows.
F) Subscriber's Date of Birth	Leave blank if date of birth is unknown.

Field	Description
G) Subscriber Assignment of Benefits	**IMPORTANT** **Yes:** Choosing Yes in this field allows BHRS to bill the client's insurance company and/or Medicare. (There is one form that includes both release of information and assignment of insurance benefits.) **No:** Choosing No means that the client has not yet signed the Subscriber Assignment of Benefits. It does not indicate refusal to sign. **Refused:** Choose this option if the client refuses to sign the Subscriber Assignment of Benefits. If the client refuses to sign for a particular guarantor, then that guarantor will not be liable for the client for that episode.
H) Subscriber Release of Information	You need a release of information if the client has insurance and/or Medicare. See "Financial Forms for Client Signature" following this table.
I) Coordination of Benefits	**IMPORTANT** Always choose Yes in order to allow billing for services. MIS is responsible for coordinating benefits.

Financial Forms for Client Signature

IMPORTANT

Print the forms that the client needs to sign from Episode #1.

For Insurance Clients:

- Assignment of Benefits
    - Choose the appropriate Guarantor from the dropdown list in the Assignment of Benefits window.

For Medicare Clients:

- Assignment of Benefits
    - Choose the appropriate Guarantor from the dropdown list in the Assignment of Benefits window.
- Long Term Medicare Assignment
- Medicare Secondary Payor Unit

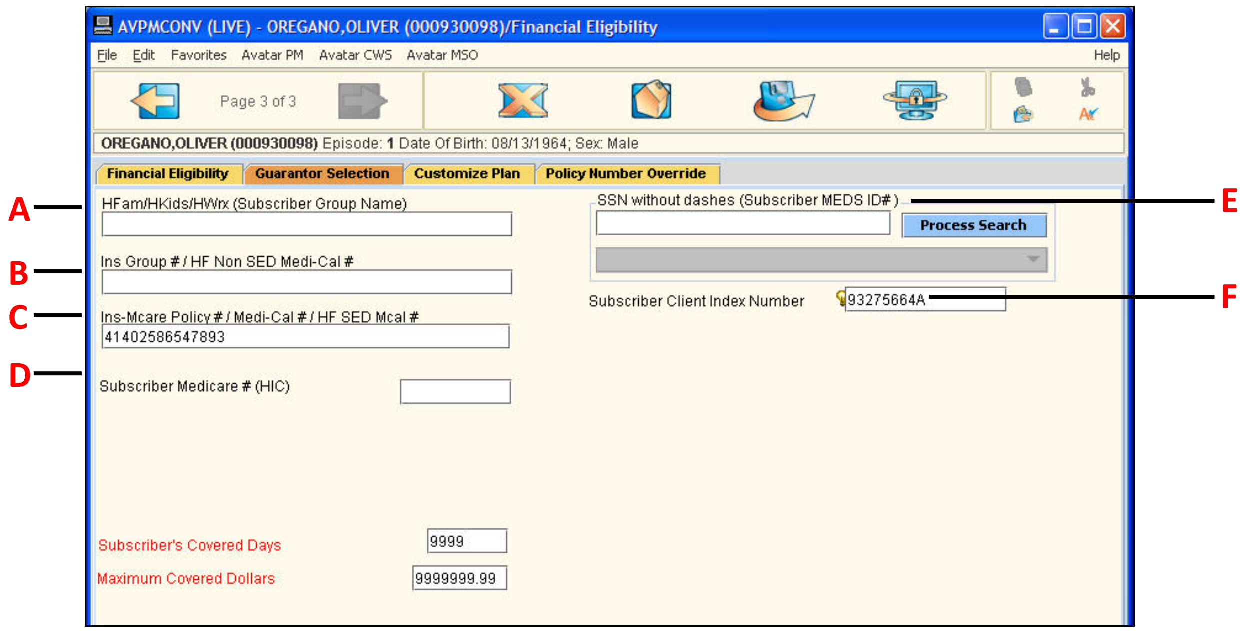
Scan the Paperwork into Avatar

Once the client signs the forms, scan them into the system. (See the "Scanning and Viewing Documents" lesson.)

Any additional client paperwork you have from the financial interview should be scanned into
the system.

Guarantor Selection Tab Page 3

Use this tab to provide additional information about the client's insurance.



Field	Description
A) HFam/HKids/HWrx (Subscriber Group Name)	Only use this field for Healthy Families (H-Families), Healthy Kids (H-KIDS), and Health Works (H-WORKS). **NOTE:** Enter the full name, not the shortcut. Enter Healthy Families, Healthy Kids, or Health Works.
B) Ins Group # / HF Non SED Medi-Cal #	Enter the client's insurance group # here. For Healthy Family (HF) Non SED clients, enter the 14 digit Medi-Cal #.
C) Ins-Mcare Policy # / Medi-Cal #/ HF SED Mcal#	Enter the client's insurance policy # or the Medi-Cal # here.
D) Subscriber Medicare # (HIC)	Enter the Medicare HIC # here.

Field	Description
E) SSN without dashes (Subscriber MEDS ID #)	This field searches the MEDS file. Enter all or part of a client's LASTNAME,FIRSTNAME and Avatar displays the client's social security number. or Enter the social security number and Avatar displays the client's name. Avatar then places both the name and social security number in the field.
F) Subscriber Client Index Number	This Client Medi-Cal identifier (CIN) is located in the MEDS Information Report. See the Help lightbulb for formatting rules for this number. **TIP!** Copy and paste the number from the MEDS ID report to ensure accuracy. **IMPORTANT** Avatar will not bill Medi-Cal if this field is blank.

NOTE: It is not necessary to inform MIS of new financials. MIS receives a daily report listing all new and updated financials.

Customize Plan Tab

NOTE: This tab is for MIS use ONLY.

Policy Number Override Tab

This feature is used to track changes in Medi-Cal numbers based on information from the MMEF.

NOTE: This tab is for MIS use ONLY.

Exercise 1: Enter Guarantor Selection Information

In this exercise you will enter the guarantor information for your client.
Before You Begin: *Your client should be active in your My Session Frame.*

1. Choose Avatar PM→Client Management→Account Management→Financial Eligibility from the Menu Frame.

   You must enter the Guarantor Selection tab information prior to completing the Financial Eligibility tab.

2. Click the Guarantor Selection tab.

3. Follow these steps to enter a guarantor:

A Click the Add New Item button to place a blank row in the table.

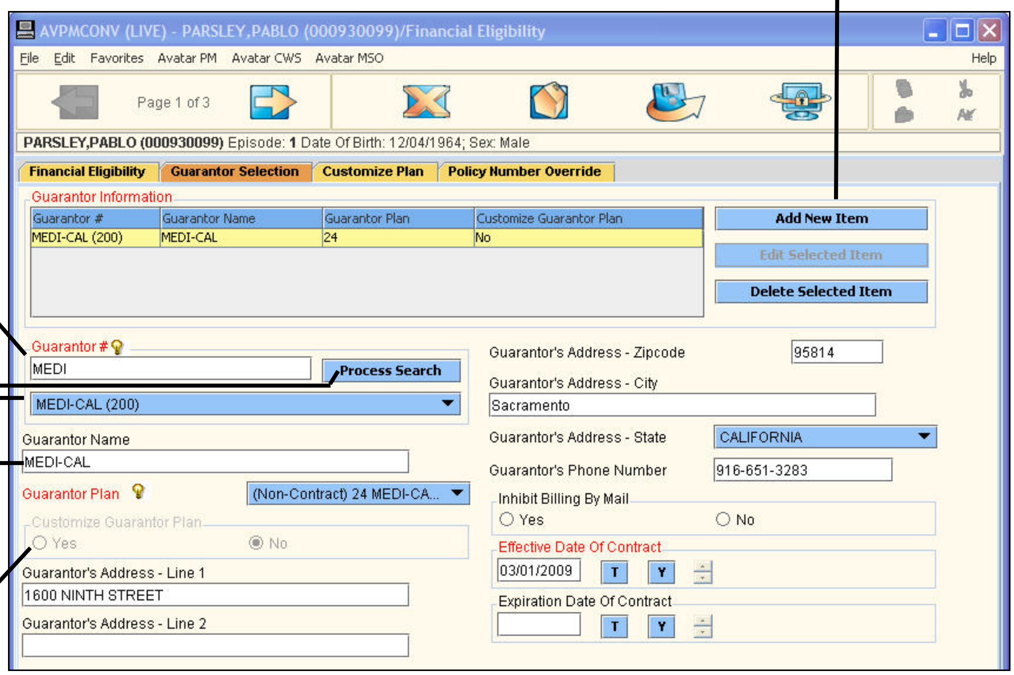
B Type **`MEDI`**, the first few letters of the guarantor's name.

C Click the Process Search button.

D Choose Medi-Cal (200) from the dropdown list.

E The Guarantor Plan autofills based on the Guarantor #. (For Medi-Cal and Medicare Palmetto you must choose a Guarantor Plan.)

F Always choose No in the Customize Guarantor Plan field.



The guarantor's demographic information autofills.

4. Click the Forward icon in the upper-left corner of the window to move to page 2 of the Guarantor Selection tab.

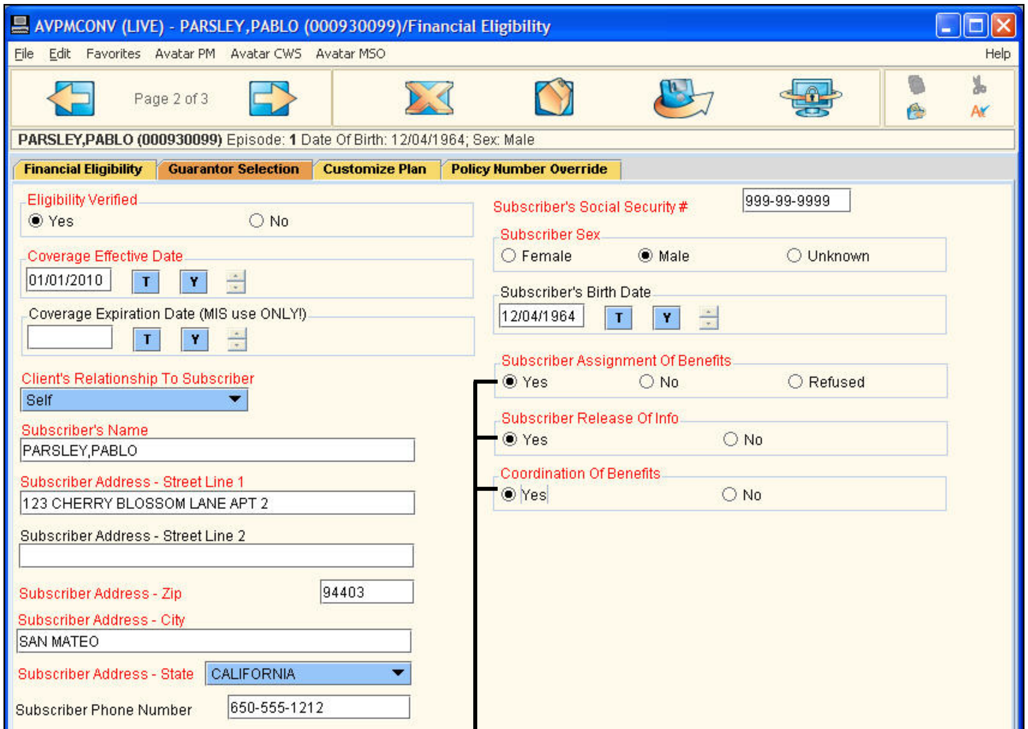
5. Follow these steps to enter information in page 2 of the Guarantor Selection tab:

A Choose Yes for Eligibility Verified.

B Enter the coverage Effective Date.

C Choose Self as the subscriber.

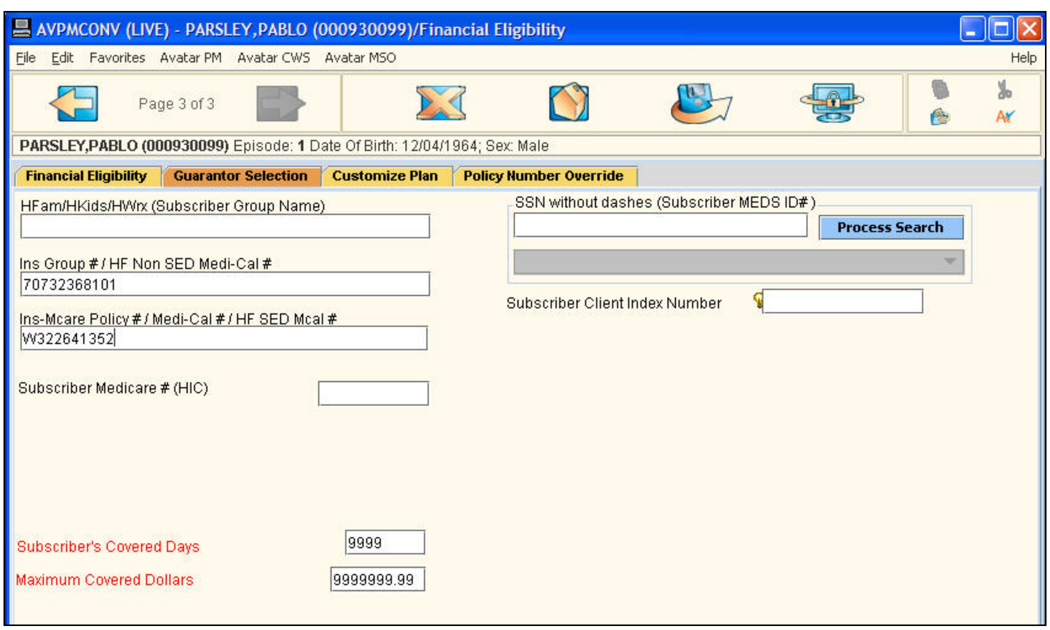
D When the subscriber is Self, the demographic information autofills.



E Choose Yes in these three fields.

6. Click the Forward icon in the upper-left corner of the window to move to page 3 of the Guarantor Selection tab.

7. Enter the numbers shown in the following illustration.



8. Click the Back icon enough times to return to page 1 of the Guarantor Selection tab.

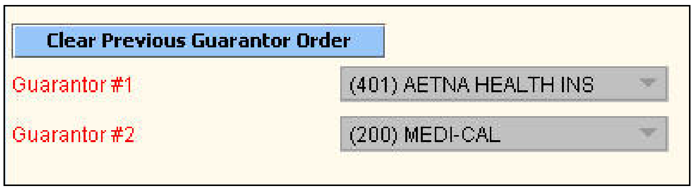
9. Using the process described in steps 3–7, add another guarantor to the table.

   Remember to add a new row to the table before you start or you will override the information in the row you just completed.

ENTER THE GUARANTOR ORDER

10. Click the Financial Eligibility tab.

11. In the bottom-left corner of the window, click the dropdown lists and choose Guarantor #1 and Guarantor #2.



   NOTE: See the Cheat Sheets for Clinics folder in the Admin Sppt Avatar Financial Cheat Sheets folder on the shared drive for information on ranking guarantors.

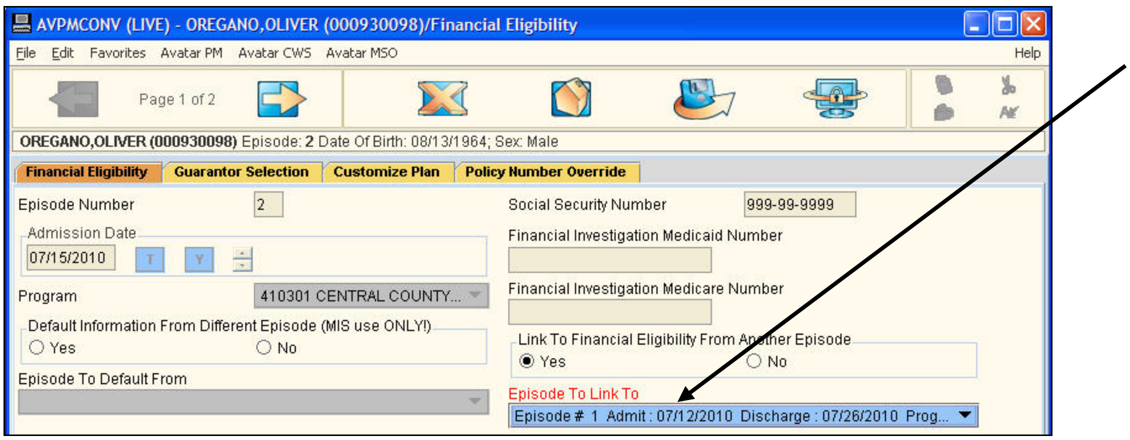
12. Click the Submit icon on the Option toolbar to save the information.

EDIT FINANCIAL ELIGIBILITY INFORMATION

In most cases, you should update guarantor information in Episode #1. (See the Cheat Sheets for Clinics folder located in the Administrator Sppt Avatar Financial Cheat Sheets folder on the shared drive for exceptions.)

In cases where you should make changes to Episode #1 and link to the current episode, follow this procedure:

1. Make any changes to the guarantor information in Episode #1
2. Print the forms from Episode #1 that the client needs to sign
3. Open the Financial Eligibility window for the current episode and link to Episode #1. The current episode populates with the information from Episode #1.



NOTE: If you need to edit a client's social security number, modify it through Admission (Outpatient), Admission Bundle (Outpatient), or Update Client Data. Financial Eligibility will update accordingly. *Do not* change the social security number in the Financial Eligibility window as it will not update other windows.

If you are editing a row in the Guarantor Information table on page 1 of the Guarantor Selection tab, you have to select the row to be edited and click the Edit Selected Item button before Avatar allows you to move through the other pages in the tab.

NOTE: If a field needs to be changed and it is not editable, contact MIS.

Exercise 2: Edit and Link Guarantors for a Client's New Episode

In this exercise you will modify the guarantor plan information for your client's second episode.

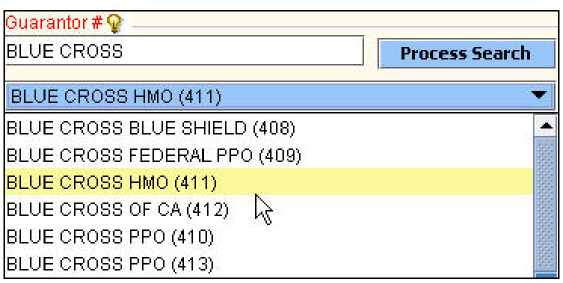
1. Admit your client to a new episode.

   See the Admission Bundle Quick Reference Guide for steps on completing an admission. In this exercise, you only need to complete the required admission fields.

2. Choose Avatar PM→Client Management→Account Management→Financial Eligibility from the Menu Frame.
3. Choose Episode #1 from the Episode Selection screen.
4. Click OK.

Add a Guarantor and Order the Guarantors In Episode #1

5. Click the Guarantor Selection tab.
6. Click the Add New Item button to add a row to the Guarantor Information table.
7. Type **`Blue Cross`** in the Guarantor # field.
8. Click the Process Search button.
9. Choose BLUE CROSS HMO (411) from the dropdown list as shown in the following illustration.



10. Click the Financial Eligibility tab and choose the Guarantor Order from the dropdown lists in the bottom-left corner of the window.
11. Click the Submit  icon to save the change.

Link the Current Episode to Episode #1

12. Choose Avatar PM→Client Management→Account Management→Financial Eligibility from the Menu Frame.
13. Choose the new episode you just created from the Episode Selection screen and click OK.
14. Click the Yes radio button in the Link to Financial Eligibility from Another Episode field.
15. When the Linking to Another Episode Will Erase Current Coverage Information message appears, click OK.
16. Click the Episode to Link To dropdown list and choose Episode #1.

The linked information does not populate the Guarantor Information table until you submit the window.

17. Click the Submit  icon on the Option toolbar.

VERIFY THE LINKING

18. Choose Avatar PM→Client Management→Account Management→Financial Eligibility from the Menu Frame.

19. Choose the new episode that you just linked to from the Episode Selection table and click OK.

20. Click the Guarantor Selection tab.

    You can see that the Guarantor Information table is populated with the guarantors copied from Episode #1.

21. Click the Close  icon on the Option toolbar.

22. Click the Yes button when the Close message appears.

CONCEPT REVIEW

See appendix for answers.

1. A guarantor is any expected source of reimbursement for services provided a client.
   a. True
   b. False
2. You should attempt to order the guarantors correctly by ______.
   a. calling MIS
   b. taking your best guess
   c. referring to the Cheat Sheets for Clinical folder in the Administrator Sppt Avatar Financial Cheat Sheets folder on the shared drive.
3. You can only place four guarantors in ranking order
   a. True
   b. False
4. Leave the Subscriber Client Index Number (CIN) field blank if you want Avatar to bill Medi-Cal.
   a. True
   b. False
5. You should always choose Yes for Eligibility Verified in the Guarantor Selection tab except for Unknown Pending.
   a. True
   b. False
6. The Coverage Effective Date for Medi-Cal, Medicare, and PDPs is the date of admission.
   a. True
   b. False
7. The social security number should *not* be edited in which window?
   a. Admission
   b. Financial Eligibility
   c. Update Client Data
8. All episodes following Episode #1 must be linked to Episode #1.
   a. True
   b. False

9. If you need to modify guarantor information, always make the changes in Episode #1.
    a. True
    b. False
10. You must choose the guarantor order on the Financial Eligibility tab prior to entering guarantors in the Guarantor Information table.
    a. True
    b. False

Appendix—Concept Review Answers

1. a
2. c
3. b
4. b
5. a
6. b
7. b
8. a
9. a
10. b