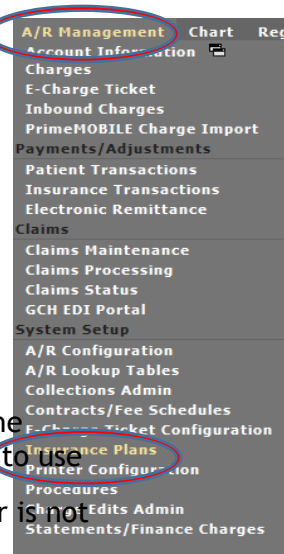


How to setup GCH Eligibility in Prime Suite

In the "A/R Management Menu", load the "Insurance Plan" page...
Once there select the tab "Insurance Company Maintenance".



3 areas to update for GCH Eligibility to work:

1. Payer ID (Eligibility) ~ refer to the GCH Eligibility Payer List
2. Eligibility Filing Plan ~ choose GCH ELIGIBILITY
3. Use NPI (Optional): ~ recommend the pay-to NPI, usually the group NPI, but sometimes I have to use the Dr's individual NPI# if a payer is not accepting the Group's NPI#

A screenshot of the 'Insurance Plans' configuration page in the application. The page title is 'Insurance Plans' and the sub-tab is 'Insurance Company Maintenance'. The 'Company ID' is 1383. The 'Company Name' is 'Medicare Of Ok J4'. The 'Payor ID (PROF Claim)' is 04302. The 'Payor ID (UB Claim)' is empty. The 'Payor ID (Eligibility)' is 10001, which is circled in red. The 'PI - Payer Identification Number' dropdown is set to 'PI - Payer Identification Number'. The 'Eligibility Filing Plan' dropdown is set to 'GCH ELIGIBILITY', which is circled in red. The 'Use NPI (Optional)' checkbox is checked, and the NPI number '1234567890' is entered in the adjacent field, also circled in red. Other fields include 'Filing Plan' (Gateway EDI 5010), 'Paper Filing Plan' (CMS-1500 0212 ICD 9-10 (12 DX) (v3) - CMS-1500), 'Insurance Class' (Medicare), 'Insurance Type' (MB - Medicare Part B), 'Default ERA Profile' (Default Profile), and 'Quality Reporting' (Not Medicare or Medicaid). At the bottom, there are 'Add New', 'Save', and 'Delete' buttons.

Click Save (correct any pop-ups such as: Payor ID type: PI, or Insurance Percentage then click Save again)

<input type="checkbox"/> Exclude From Auto Claim	<input type="checkbox"/> Referral Required	<input type="checkbox"/> ANSI TOS Required
Insurance Percentage	Follow-Up Period (Days)	Timely Filing Deadline
100%		
<input type="button" value="Add New"/> <input type="button" value="Save"/> <input type="button" value="Delete"/>		

Click Yes.

Use Company Defaults

Would you like to select items to update all Insurance Plans associated with this Company?

Check the box in the first column for 'Eligibility Filing Plan'... hopefully it says *GCH ELIGIBILITY* next to it. Then click OK.

-- Webpage Dialog

Please select the items you wish to update to all insurance plans for this company. Any item not selected will remain unchanged on each individual insurance plan.

<input type="checkbox"/> Check ALL	<input type="checkbox"/> Courtesy Filing No
<input type="checkbox"/> Filing Plan Gateway EDI 5010	<input type="checkbox"/> Electronic Secondary No
<input type="checkbox"/> Paper Filing Plan CMS-1500 0212 ICD 9-10 (12 DX) (v3) - CMS-1500	<input type="checkbox"/> Exclude from Auto Claim No
<input type="checkbox"/> Non-Primary Paper Filing Plan NONE	<input type="checkbox"/> Referral Required No
<input type="checkbox"/> Contract NONE	<input type="checkbox"/> ANSI TOS Required No
<input type="checkbox"/> Insurance Category Group Health Plan	<input type="checkbox"/> Use Performing/Referring rule No
<input type="checkbox"/> Insurance Class Commercial	<input type="checkbox"/> Include Unmapped Diagnosis Codes on Claim No
<input type="checkbox"/> Insurance Type CI - Commercial Insurance Co.	<input type="checkbox"/> Insurance Percentage 100%
<input type="checkbox"/> Quality Reporting Not Medicare or Medicaid	<input type="checkbox"/> Follow-Up Period (Days) 0
<input checked="" type="checkbox"/> Eligibility Filing Plan GCH ELIGIBILITY	<input type="checkbox"/> Timely Filing Deadline 0
<input type="checkbox"/> Eligibility Website NONE	<input type="checkbox"/> Claim Provider ID NPI
<input type="checkbox"/> Default ERA Profile Default Profile	<input type="checkbox"/> Group Taxonomy No
<input type="checkbox"/> Always check eligibility No	<input type="checkbox"/> Secondary Payor ID NONE
<input type="checkbox"/> ICD-9/ICD-10 ICD-9 Selected	<input type="checkbox"/> NAIC# NONE
<input type="checkbox"/> ICD-10 Effective Date NONE	

If possible; run ALT+E, so you can test and verify Eligibility Verification is working for the Insurance payer you just updated.