Top 6 Methods to Verify Medicare Coverage for Providers

Updates and Clarification

⤞ **New Method Added:** BellMedEx Medicare coverage verification tool has been considered as reliable method for providers(see details in Method#1)

⤞ **IVR System Update:** The MAC Interactive Voice Response(IVR) system has been withdrawn & discontinued for eligibility checks. CMS has clearly directed MACs to eliminate this service and refer providers to alternative options.

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MEDICARE COVERAGE VERIFICATION

Accurate Medicare coverage verification is important in preventing denial claims, which impact 1 in 7 medical claims and lead to almost 200 million rejections daily. Remarkably, 27% of these denials are caused by issues with patient registration and Medicare coverage verification.

Managing each denial commonly costs at least $25 which can cause revenue issues.

For healthcare practices the improper verification increases medical expenses and more delays in revenue collection. By implementing a reliable insurance verification process you can reduce the rate of claim denials and improve financial health.

IMPORTANCE OF VERIFYING MEDICARE COVERAGE FOR PROVIDERS

Making a manual eligibility verification can cause significant financial losses.

According to CompuGroup Medical study, it can cost providers the equivalent of 2 patients visits per day or $6,000 on annual basis.

Switching to electronic verification can save more time, resources and extra effort. Here are some of the important points to answer the Why's to verify Medicare eligibility.

- By conducting eligibility checks upfront improves the accuracy of initial claims and reduces Account Receivable (A/R) days, resulting in faster payments.
- By verifying the eligibility before services are provided can help to determine the patient copays, co-insurance out of pocket expenses and deductibles, resulting in a reduction of untimely payment collection.
- By collecting the payment upfront, healthcare providers can maintain a balance in cash flow and minimize the payment details.

KEY INFORMATION REQUIRED FOR MEDICARE COVERAGE VERIFICATION

Some information is necessarily required for Medicare coverage verification; having these details on your fingertips will help to smooth the verification process- here's list of these key elements:

- ✓ Provider Transaction Access Number(PTAN)
- ✓ Beneficiary's name

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- ✓ Beneficiary's date of birth
- ✓ Date of service (if applicable)
- ✓ National Provider Identifier (NPI)
- ✓ Tax Identification Number (TIN)

6 RELIABLE MEDICARE COVERAGE VERIFICATION METHODS FOR PROVIDERS

Determining patients' Medicare eligibility is important for avoiding billing complications and prompt payments. There are multiple methods to verify Medicare coverage- here are 6 effective ways to confirm patients Medicare eligibility:

06 Reliable Medicare Coverage Verification Methods

1 BellMedEx Medicare Coverage Verification
Best for Detailed Coverage Insights

2 SPOT Secure Provider Online Tool
Great for Checking Part A and Part B Eligibility

3 IVR - Interactive Voice Response
Most Convenient Over-The-Phone Solution for Busy Providers

4 MAC Online Provider Portal
Excellent for Providers Preferring Self-Verification

5 MAC Phone Verification
Reliable for 24/7 Patient Eligibility Confirmation

6 HIPAA Eligibility Transaction System
Highly Suitable for Extensive Healthcare Facilities

METHOD#1: BELLMEDEX MEDICARE COVERAGE VERIFICATION TOOL

BellMedEx, a medical billing company, has its own verification system that can simplify Medicare eligibility check, allowing healthcare providers to be focused on their patients rather than non clinical tasks. Follow these steps to make verification process more easier:

- *Visit BellMedEx online Medicare eligibility verification tool.*

- *Fill out the form by filling in all the fields and clicking on "**Book a Free Consultation**."*


- *A BellMedEx expert and representative will contact you for assistance.*
- *Alternatively, call at 888-987-6250 for support.*

METHOD#2: SECURE PROVIDER ONLINE TOOL (SPOT)

Secure Provider Online Tool (SPOT) is a versatile platform that offers a user-friendly and always available facility for quick patient eligibility verification by ensuring you have the correct information when needed. Moreover, it can include a Medicare Beneficiary identifier look-up tool and enables provider to:

- *Verify eligibility for Parts A and B*
- *Access benefit information for therapy caps, home health, hospice, Medicare secondary payer (MSP) details and many more.*

Check coverage data categories and claim statuses up to 12 months from inquiry date.

You can verify Medicare coverage by following these steps:
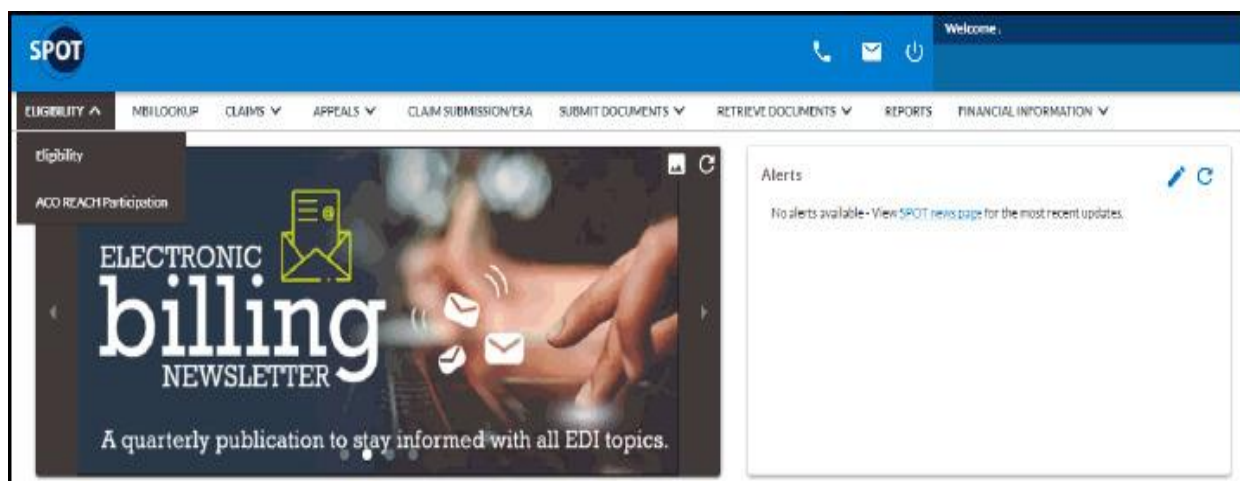
- Select the "Eligibility" option from the drop-down menu.
- Enter beneficiary information by entering these details: First Name, Last Name, ID, Date of Birth
- Initiate a search by clicking on **Search** to check eligibility status.
- Review eligibility results with complete information on Part A and Part B status.

METHOD#3: VERIFY MEDICARE PART A AND B ELIGIBILITY USING IVR

The Interactive Voice Response (IVR) system provides a free and convenient way to verify Medicare eligibility. The IVR method allows you to access primary insurance details, prior authorization confirmation, and check claim status.

Medicare Part A Verification

- *Toll- free: 1-888-664-4112*
- *For speech and hearing impaired: 1-877-660-1759*

Medicare Part B Verification

- Toll- free: 1-866-454-9007
- For speech and hearing impaired: 1-877-660-1759

IVR Availability

- Monday-Friday: 7am to 7pm ET
- Saturday: 6am to 3pm ET

CSR Availability

- For Florida Providers: 8 am to 4 pm ET and CT (Monday-Friday)
- For U.S. Virgin Islands Providers: 8 am to 4 pm ET (Monday-Friday)

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METHOD#4: VERIFYING MEDICARE BENEFITS THROUGH MAC ONLINE PROVIDER PORTAL

Medicare Administrative Contractors(MACs) handle eligibility verification for fee-for-service(FFS) Medicare. They provide an online portal for healthcare providers to register or contact MAC directly. Here are the steps to verify Medicare eligibility using MAC portals:

- Enter Medicare Beneficiary Identifier (MBI) or Health Insurance Claim Number(HICN)

- Enter the beneficiary's DOB and first and last name.

- After entering your information, you can view your eligibility status.

METHOD#5: VERIFY MEDICARE ELIGIBILITY BY PHONE

MACs also offer a phone verification system for Medicare eligibility checks. Healthcare providers can find the phone number on MAC's website or by calling 1-800-MEDICARE (800-633-4227). To verify Medicare Insurance coverage, follow these steps:

- Authenticate using National Provider Identifier(NPI),Tax Identification Number(TIN) and Provider Transaction Access Number(PTAN).

- Enter the beneficiary's Date of Birth, HICN or MBI, and first and last name.

- This self-service option is available around the clock (24/7).

METHOD 6: MEDICARE COVERAGE VALIDATION USING HETS

The HIPAA Eligibility Transaction System (HETS) enables healthcare providers to verify Medicare eligibility through HIPAA-complaint transactions.

- Submit a HETS 270 request to get complete eligibility information.

- Enter the beneficiary's Date of Birth, HICN or MBI, and first and last name.

If eligible, a 271 response will provide details such as:

- *Part A, B, and D entitlement*
- *Hospital Lifetime Receive Days*
- *Skilled nursing facility remaining benefit days and more.*

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Medicare Eligibility Verification

Note: *If you have Medicare coverage through a current or former employer or another source, contact your benefits administrator, plan manager, or insurer before making any decision or changes. For additional information and assistance with Medicare coverage options, [contact BellMedEx](#).*

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