



RHODE ISLAND MEDICAID HEALTHCARE PORTAL

QUICK REFERENCE GUIDE

VERIFICATION OF ELIGIBILITY



To verify eligibility for a RI Medicaid beneficiary:

1. You must be enrolled and registered as a [Trading Partner](#) to use the Healthcare Portal.
2. Log in to the [Healthcare Portal](#) with your security credentials.
3. Click on the eligibility tab shown below. If no eligibility tab is present, [click here](#).



4. Select the correct provider information from the drop down lists. As you complete each field, the next will open:

Eligibility Verification Request

* Indicates a required field.
Please select or enter valid Provider information. Either a Billing Provider or Rendering Provider can be specified. Status indicated for the Billing Provider is based upon the current state.

NPI Provider Type Taxonomy

Billing Provider

Rendering Provider

5. Enter the recipient ID, and the effective from date and effective to date, and select the click the search button at the bottom of the screen:

Please enter Recipient ID.
For CNOM Providers only: If the Recipient ID is not known, please enter the Recipient's Last Name, First Name, Middle Initial (if known)

Recipient ID

Last Name First Name

Payer

Date range may be 12 months prior to today through the end of the current date, with a maximum 3-month date span.

* Effective From Date Effective To Date

Note: you are unable to search by the name of the recipient.

6. The eligibility response will be returned. Click the plus signs (+) on the right to expand each field and show details.

Eligibility > Eligibility Verification Response Friday 05/07/2013 04:18AM EST

Eligibility Verification Response [Back to Eligibility Verification Request](#) [Expand All](#) [Collapse All](#)

Verification Number: 2013099012345

Recipient Information				
Recipient ID	0132546799	Recipient Name	John Doe	
Birth Date	05/21/1986	Gender	Male	
Date of Death	-			

Benefit Plan Details				
Plan Name	Effective From Date	Effective To Date	Base Deductible	Message
Categorical and Fee for Service	08/15/2012	08/15/2012	\$0.00	Message Text

Service Type Code Details - Covered (+)

Service Type Code Details - Not Covered (+)

Managed Care Details (+)

Managed Care Service Type Code Details - Covered (+)

Lock-in Details (+)

Medicare Details (+)

TPL Details (+)

Premium Payment Details (+)

Long Term Care Details (+)