

**Administrative Simplification
Web Validation Worksheet
BPR - Requesting & Receiving Eligibility and Benefits Information**

Provider Organization: _____

Contact Person: _____

Contact Phone: _____ Contact email: _____

Health Plan being validated: _____

Date of Validation: _____

Patient # _____ of 3 <<Note: 1 worksheet for each of 3 patients>>

General Instructions

Prior to completing this worksheet, ***please familiarize yourself with the BPR - Requesting & Receiving Eligibility and Benefits Information.*** Then, use this worksheet to assess how well the health plan's web site meets the requirements that are defined in the BPR document.

Our objective is to validate how a health plan handles a wide range of benefits. Since patients can have different benefits, ***please check eligibility and benefits for 3 patients*** and record what you found for each patient on a separate worksheet. Upon completion of the validation process, ***email the 3 patient identifying numbers along with the patient name to the health plan.*** (Do not send the patient numbers and names to me in order to protect patient privacy.)

In the tables below, complete the columns that are highlighted in **green**.

- If you do not answer, a positive response will be assumed, e.g. 'Information Found' or 'Yes the requirement was met'.
- Information on the web site should match information available from customer service (if the health plan makes the information available through a Customer Service type department.) As your time permits, please check with customer service to verify the information on the web site. If you don't check with customer service, please leave the column blank.

Note: When calling some health plans, they may refer you to their web site in lieu of providing claim status information over the phone. If this is the case, answer 'Yes' to any questions asking if the content of the web site was the same as customer service.

This worksheet will first ask you to assess the web site content and then ask you to assess the web site usability. As you look for the information, keep in mind how easy/hard it was to find it.

Have you reviewed the BPR - Requesting and Receiving Eligibility and Benefits Information?
 Yes/No: If 'No' - please do so before continuing.

I. Web Site Information Content

A. Patient Look-up

Options for Patient Search	Requirements	Page # in BPR Document
<i>Try to search using at least 2 different combinations of the following data elements:</i> <input type="checkbox"/> Firstname <input type="checkbox"/> Lastname <input type="checkbox"/> Member Date of Birth <input type="checkbox"/> Subscriber ID (aka Member ID)	<ul style="list-style-type: none"> • Multiple Search Options (at least 2) • Minimum Set of Data required for a Search Option (1- 4) 	9
Time Period for Search Results	<20 seconds	9

1. *Look Up Options*

Could you look up a claim using at least 2 different combinations of the above data elements? Yes/No:

If NO, what 2 combinations of data elements did you try (list the elements)?

a. Combination 1:

b. Combination 2:

2. *Time Period*

Was a search result(s) returned in less than 20 seconds? Yes/No:

Once patient search information is entered, the web site will go through a patient lookup and selection process. This process will vary by health plan depending upon their patient privacy and security requirements. The process should result in one of the following:

- An indication that a health plan's member is not found
- Presentation of information about a single health plan member that was found

B. Information Presented about a single Health Plan's member

General Eligibility Coverage Information	Page # in BPR Document	Found on web site for F or NF	Was the information on the Web Site, 270-271 Transaction, & Customer Service the same for Y or N
Subscriber Name	5		
Patient Name	5		
Patient's Relationship	5		
Patient Date of Birth	5		
Patient Member Number	5		
Group Number	5		
Coverage Date	5		
Eligibility Status	5		
Patient Gender	5		
Other Coverage	5		
Primary Care Physician	5		
Group Name	5		
Plan Type	5		

Legend: *F* - Found, *NF* - Not Found, *NA* – Not Applicable

Was the information displayed within 20 seconds of patient selection? Yes/No:

	General Comments or Supporting Information
Content	
Usability	

C. Contract Information (BPR Page 6)

Contract information must be available on the web site, as appropriate to the health plan and the member's coverage. *Were you able to find contract limit information?*

Contract Level Limits	For In-Network Provider				For Out-of--Network Provider			
	Individual Coverage		Family Coverage		Individual Coverage		Family Coverage	
	Benefit Limit Amount F or NF	Benefit Amount Remain F or NF	Benefit Limit Amount F or NF	Benefit Amount Remain F or NF	Benefit Limit Amount F or NF	Benefit Amount Remain F or NF	Benefit Limit Amount F or NF	Benefit Amount Remain F or NF
Medical Deductibles								
Out of Pocket Maximums								
Yearly or Lifetime Payment Maximum								
Spend Down (Medicaid)								

Legend: *F* - Found, *N* - Not Found

General Comments or Supporting Information	
Content	
Usability	

D. Services Information

1. For the Standard Set of Services (BPR Page 6)

Benefit status (i.e. whether or not the benefit applies to the patient) for each of the following 'standard services' should be available to you without having to request each service type.

- If a benefit applies to the patient and the health plan manages that benefit, benefit information should also be available.
- If a benefit applies to the patient and an organization other than the health plan manages that benefit, i.e. 'carve out', the name of the organization and the dates of coverage should also be available.

On the web site, were you able to find service level benefit information?

Service Type	Whether or Not Benefit Applies F or N
Pharmacy - Prescription	

Legend: *F* - Found, *N* - Not Found

Co-Insurance, Co-Pay, Deductible and Limitations information must be available for the basic set of standard service types, as appropriate to the health plan and the member's coverage.

Notes:

- a. Some health plans may not display benefit limits and benefit remaining information for behavior health services (e.g. psychiatric, substance abuse) due to patient privacy requirement. In these cases, a message to call customer service should be displayed.
- b. The website is likely to display this information in a format different than the tables below.

Standard Service Types (HIPAA Code)	Whether or not Benefit Applies F or NF	For In-Network Provider				
		Co-Pay F or NF	Co-Ins F or NF	Benefit Limit F or NF	Visit Limits* ¹ F or NF	Benefit Remain F or NF
Medical Care (1)						
Professional (Physician) Visit Office (98)						
Professional (Physician) Visit Office - Sick (BY)						
Professional (Physician) Visit Office - Well (BZ)						
Hospital (47)						
Hospital -Inpatient (48)						
Hospital - Outpatient (50)						
Emergency Services (86)						
Urgent Care (UC)						
Mental Health (MH)						
Psychiatric - Inpatient (A7)						
Psychiatric - Outpatient (A8)						
Substance Abuse (AI)						
Vision (Optometry) (AL)						
Chiropractic (33)						
Dental (35)						

Legend: **F** - Found, **NF** - Not Found, **NA** – Not Applicable

*¹ Visit Limits: For some benefit plans, there may be limitations pertaining to the dollar amount for each visit and/or the frequency and timeframe in which the services must be delivered, e.g. Benefit Limit is 12 visits, Visit Limits is no more than 2 visits per month.

For Out-of-Network Provider					
Standard Service Types (HIPAA Code)	Co-Pay F or NF	Co-Ins F or NF	Benefit Limit F or NF	Visit Limits ^{*1} F or NF	Benefit Remain F or NF
Medical Care (1)					
Professional (Physician) Visit Office (98)					
Professional (Physician) Visit Office - Sick (BY)					
Professional (Physician) Visit Office - Well (BZ)					
Hospital (47)					
Hospital -Inpatient (48)					
Hospital - Outpatient (50)					
Emergency Services (86)					
Urgent Care (UC)					
Mental Health (MH)					
Psychiatric - Inpatient (A7)					
Psychiatric - Outpatient (A8)					
Substance Abuse (AI)					
Vision (Optometry) (AL)					
Chiropractic (33)					
Dental (35)					

Legend: **F** - Found, **NF** - Not Found, **NA** – Not Applicable

2. Carved out Services

Were any services “carved out”, i.e. the benefits are managed by another organization other than the health plan? **Yes/No:** **Y/N**

If Yes, indicate the information that you were able to find about those benefits.

Service with Carved out Benefit ^{*1}	Coverage Dates Y/N	Name of Responsible Organization Y/N	Responsible Organization Phone Number and/or Link Y/N

*1 – A carved out benefit is managed by an organization other than the member’s health plan

3. For all Other Services (BPR Page 44)

For service types other than the standard set of services listed above, you may have to inquire about each service type.

Were you able to find the service type(s) of interest to you AND the corresponding benefits information? Yes/No:

If YES, Go To '3. For the Standard Set of Services and for all Other Services' below

If NO, Complete the appropriate section(s) below:

For what Service Types were you NOT ABLE to get any benefit information:

Use the following table to list the Service Type(s) that you were able to find, but that did not have the benefit information that you wanted. Indicate the Benefit Information that you could not find. (Use the appropriate table depending upon whether you were unable to find In-Network Provider benefits, Out-of-Network Provider benefits or Both.)

For In-Network Provider						
Service Types	Whether or not Benefit Applies F or NF	Co-Pay F or NF	Co-Ins F or NF	Benefit Limit F or NF	Visit Limits*1 F or NF	Benefit Remain F or NF

For Out-Of-Network Provider						
Service Types	Whether or not Benefit Applies F or NF	Co-Pay F or NF	Co-Ins F or NF	Benefit Limit F or NF	Visit Limits*1 F or NF	Benefit Remain F or NF

4. For the Standard Set of Services and for all Other Services

When accessing service information, were the following requirements met?

Requirement	Page # in BPR Document	Requirement Met? Y or N
Each page of information displayed within 20 seconds of click	9	
Was the information on the Web Site the same as from Customer Service? <i>Note: Assumed to be consistent unless indicated otherwise</i>	3	

5. Deductible Information

To help you determine whether the deductible for a service is included in the general deductible:

- a. Was there a general comment or note on the web site indicating that the deductible for all service types is included in the general medical deductible unless otherwise indicated? (Y, N)
- b. Was there some indication for each service, e.g. checkmarks or radio buttons, indicating whether or not the deductible for that service is included in the general medical deductible? (Y, N)

Was there some indication whether or not the deductibles, contract level deductible and/or service-specific deductible, apply to the patient's out of pocket responsibility?
(Y, N)

	General Comments or Supporting Information
Content	
Usability	

E. Is the web site accessible using the OHP single sign on?

Capability	Page # in BPR Document	Y or N
Web site accessible using the OHP single sign on	9	

II. Web Site Usability

How quick and easy was it to find the information that you needed about a patient's eligibility and benefits, e.g. how easy was it to find general eligibility information for the member?

(1-5)

- 1 - Extremely Difficult:** Information was not grouped together logically. I had to jump from page to page or scroll endlessly. Format didn't make sense. I couldn't print out the information that I needed.
- 2 - Difficult:**
- 3 - Okay:** I could find my way around okay. But it was not as easy or quick as other sites. Printer support didn't exist or was cumbersome.
- 4 - Nicely Designed:**
- 5 - Excellent:** Very intuitive and easy to navigate. Quickly found what I needed. Very readable format. Could print what I wanted.

	General Comments or Suggestions
Usability	

Please:

- 1. Email a copy of this worksheet to wec3@viaconsulting.com, and**
- 2. Email a copy of this worksheet **ALONG WITH** the 3 patient identifying numbers and names to *name and email contact here!***