

ccLink Provider Portal Tip Sheet

#2: How to Check Eligibility

- 1. Open a patient's record (see tip sheet #1). You will see managed care coverage information on the Patient Story Board. If **Other Health Coverage** indicator says **YES**, you must always review coverages and coverage details for additional information.
- 2. You can access Coverages two ways:
 - a. On the patient menu toolbar, Click the Coverages tab (next to Demographics tab).

Epic n Home	In Basket	Patient List	Referral Search C	laims	×				*	Me	enu Log Out
-•		SnapShot	Chart Review	Results Review	Flowsheets	Medications	Histories	Search Chart	Demographics	Coverages	
		Patient	SnapShot							53	90
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PCP:		Contact w	vith a suspected or co	onfirmed COVID-19 ca	ase?						- 11
ACCESS ENDS 4/9/2023		Does patient If Yes to q called:	ent have fever, coug juestion 1 and 4, or 2	h, or shortness of brea 2 and 4, or 3 and 4, na	ath? ame of Charge Nurs	e or designee					
Other Health Coverage: YE	S	📼 Patie	ent ₹				⊞ Vita	als from encour	iters over the pa	st 365 days	

b. Hover over the patient's name to see a drop-down menu. Click on Coverages.

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The most current Coverage will be displayed with the effective date.

3. To see past coverages, click the **Past checkbox in Filters**.

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	Referral R. McValidate Legal: Tap R. McValidate Non-binary (1), 46 y.o., 3/11/1977 MRN:	Covered Filing Order	MLAFD-GO CCHP - TP MCAL/AFDC/RI Subscriber: Self Member ID	MC Effective 01/10/2022 onw	ard				. •
·、	Search Chart	1				ē	Benefits Inquiry 📃 D	Detail Report 📰 ID Card	
	Effective: 1/10/2022 Rel to Sub: Self								• —
	Member ID: PCP: None								
	ACCESS ENDS 7/31/2023								
	Other Health Coverage: No								

4. If needed, click **Detail Report** button to see the coverage details. You can also click on **ID card** i if temporary CCHP ID card is requested by or needed for member.

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ligibility Info	rmation as of ()7/28/2023	
	TAP REFERRAL	S	
Employer Group	Repetit Plan	Carrier	Davor
MLAFD-GO	TP MCAL/AFDC/RMC	ССНР	CCHP
Service Area	Networks	Primary Location	PCP
CCHS SERVICE AREA	RMC (REGIONAL MEDICAL CE* RMC CMRCL B MCAL ALL MEMBER NETWORK	MARTINEZ HEALTH CENTER	
Coverage Information			
Covered Flag	Туре	Effective From	Effective To
Covered	Managed Care	01/10/2022	
Relationship to Subscriber	Member Number	Patient Application Date	Patient Late Enrollment
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Coverage Detail Report

Important reminders:

- CCHP can only confirm CCHP coverage information.
- Any Other Health Insurance information is provided to us from DHCS for Medi-Cal members only and must be updated with DHCS.
- Other Health Coverage benefit verification should be done directly with the other insurance.
- Filing Order information indicates a member's other insurance coverage as a guideline to bill payers in correct sequence.