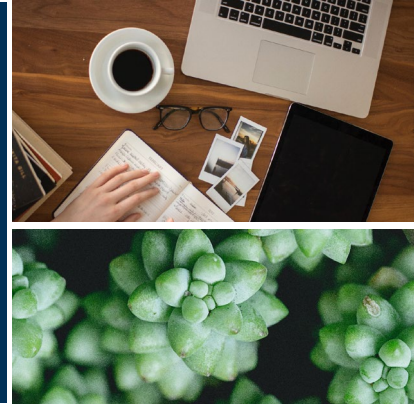


# Vantage

## Using the DESNP Verification Tool



**PURPOSE:** To describe how to use the DESNP Verification Tool to check a prospect's dual eligibility status, so that the agent knows if the prospect can enroll in a DESNP plan.

**SCOPE:** All Agents

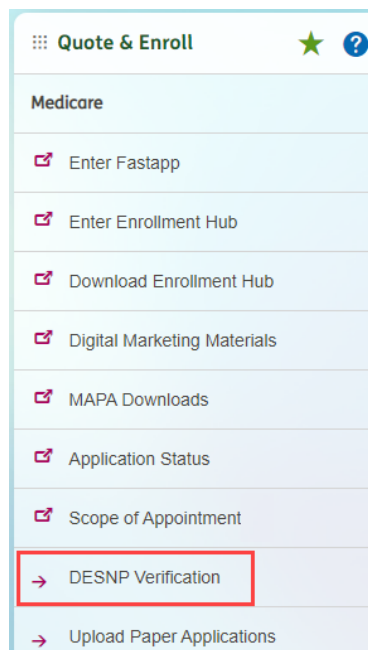
## Introduction:

Agents have an easy way to check a prospect's dual eligibility status directly in Vantage, using the DESNP Verification Tool.

Once you have a prospect's dual eligibility status, you are able to determine the available DESNP plans (if any) for that prospect in his or her state.

## Process:

In Vantage, click on the **DESNP Verification** link on the Quote & Enroll card.



## Vantage – Using the DESNP Verification Tool

The DESNP Verification Tool opens, and you'll see the form on the right.

Note the disclaimer at the top—this tool does not validate licensing. Be sure you are only selling in markets for which you are licensed.



Also, note that you must ask your prospect's permission before using this tool to check their dual-eligibility status. A good way to phrase it is:

*"All Medicaid eligibility is based on information provided today and is subject to change. As required by CMS, our enrollment team makes the final determination based on the information provided on the submitted enrollment form."*

*"Do I have your permission to look up your Medicaid status to determine if you are eligible for our Dual Eligible Special Needs Plan?"*

Required fields are marked with a red asterisk.

You'll need to enter or confirm:

- Plan year for which you are checking benefits
- Prospect's state of residence
- Prospect's first name
- Prospect's last name
- Prospect's date of birth
- Prospect's gender
- Prospect's SSN **and/or** the prospect's Medicaid ID/Medicaid Member ID
- Optionally, you can also enter the prospect's Medicare ID.

< Dual Eligibility Verification

Dual Eligibility Verification tool does not validate agent licensing. Please be advised that agents are ultimately responsible to ensure they have all required licenses. We recommend agents confirm with the relevant Departments of Insurance that they have the appropriate licensing and lines of authority for the products they intend to market and sell. All Medicaid eligibility is based on information provided today and is subject to change. As required by CMS, Humana Enrollment makes the final determination based on the information provided on the submitted enrollment form.

Plan Year \* 2020 State \* Select

First Name \* Last Name \*

Date of Birth \* MM/DD/YYYY

Gender \* ☐ Male ☐ Female

Please enter prospective members Social Security Number **or** Medicaid ID/Medicaid Member ID (or both) below in order to submit this request.

Social Security Number Medicaid ID/Medicaid Member ID

Medicare ID

Submit

Status

Medicaid ID

Dual Eligibility Level ?

[DESNP Plan Eligibility Guide](#)

New Request

Plan Year \* 2020 State \* Select

First Name \* Last Name \*

Date of Birth \* MM/DD/YYYY

Gender \* ☐ Male ☐ Female

Please enter prospective members Social Security Number **or** Medicaid ID/Medicaid Member ID (or both) below in order to submit this request.

Social Security Number Medicaid ID/Medicaid Member ID

Medicare ID

Submit

## Vantage – Using the DESNP Verification Tool

Once you have completed all of the required fields in the form, the **Submit** button will turn green. Click it to submit your request.

Please enter prospective members Social Security Number **or** Medicaid ID/Medicaid Member ID (or both) below in order to submit this request.

Social Security Number

111111111

Medicaid ID/Medicaid Member ID

Medicare ID

Submit

It may take a moment for your verification to complete.

Please wait while we are processing your request. Response times may vary based on state selected. Please do not close this window.

If your prospect is not dual eligible, you will see the message on the right, meaning he or she is not eligible for a DESNP plan.

Submit

Status

Not Eligible : Can't locate member in the State's system. Please contact Agent Support at 1.800.309.3163 for further validation if needed.

Medicaid ID

Dual Eligibility Level ?

[DESNP Plan Eligibility Guide](#)

New Request

**Field agents** can call Agent Support at the number displayed in the message if further validation is needed.

**Telesales (DMS and Vendor) agents** should not call ASU.

If the tool verifies your prospect's dual eligibility, you'll see results like those on the right, including the prospect's:

- Eligibility status
- Medicaid ID, and
- Dual Eligibility Level

You can click the Question mark icon next to the Dual Eligibility Level for descriptions.

Status

Eligible

Medicaid ID

9

Dual Eligibility Level ?

QMB

[DESNP Plan Eligibility Guide](#)

New Request

### Dual Eligibility Level Descriptions

Qualified Medicare Beneficiary (QMB)  
Qualified Medicare Beneficiary with Comprehensive Medicaid Benefits (QMB+)  
Specified Low-Income Medicare Beneficiary (SLMB)  
Specified Low-Income Medicare Beneficiary with Comprehensive Medicaid Benefits (SLMB+)  
Qualified Individual  
Qualified Disabled and Working Individual  
Full Benefit Dual Eligible (FBDE)

Now that you have your dual eligibility level code, you need to check what specific plans your prospect is eligible to enroll in for his state of residence.

Click the **DESNP Plan Eligibility Guide** link.

Status

Eligible

Medicaid ID

9

Dual Eligibility Level ?

QMB

[DESNP Plan Eligibility Guide](#)

New Request



## Vantage – Using the DESNP Verification Tool

The guide will open in a new window.

Scroll down to the state in which your prospect resides (in this case, Ohio) and check what plans your prospect is eligible to enroll in based on the Dual Eligibility Level returned in the tool.

In this example, our prospect's dual eligibility level is **QMB**, which means we know he is eligible to enroll in either the HMO or PPO plan.

The DESNP Plan Eligibility Guide does not contain information for CarePlus plans.

Field agents can call ASU at the number listed in the guide for CarePlus Florida Dual Eligibility verification.



**DMS Agents should not call ASU. Instead, refer to the Summary of Benefits for a CarePlus plan to determine if the eligibility level returned by the tool makes the prospect eligible for that plan.**

|                |  |                |                                 |
|----------------|--|----------------|---------------------------------|
| North Carolina | HMO<br>H1036-167,<br>168, 276<br>H6622-027 | \$0 Cost Share | QMB, QMB+ and<br>SLMB+ and FBDE |
|                | PPO<br>H5525-036                           | \$0 Cost Share | QMB, QMB+, SLMB+<br>and FBDE    |
| Ohio           | HMO<br>H6622-015                           | \$0 Cost Share | QMB, QMB+, SLMB+<br>and FBDE    |
|                | PPO<br>H5525-046                           | \$0 Cost Share | QMB, QMB+, SLMB+<br>and FBDE    |
| Pennsylvania   | HMO<br>H6622-038                           | \$0 Cost Share | QMB, QMB+ and<br>SLMB+ and FBDE |

|  |  |                |                          |
|--|--|----------------|--------------------------|
| Please contact the below number to complete a <b>CarePLUS Florida Dual Eligibility Verification/Status Check</b> .<br>Career Agents: 844-322-2347<br>Delegated/External Agents: 844-722-2347 |  |                |                          |
| Florida (Humana)   | HMO<br>H1019-023,<br>024, 026,<br>028, 073,<br>090, 100<br>H1036-<br>077,102, 103,<br>104, 209,<br>210, 213,<br>214, 226,<br>231, 261, 285 | \$0 Cost Share | QMB+, SLMB+,<br>and FBDE |
|  | HMO-FIDE<br>(Humana<br>only)<br>H1036-280,   | \$0 Cost Share | QMB+, SLMB+,<br>and FBDE |

Process complete