

# Medicaid Eligibility Verification Guide for Internet Access

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State of Nebraska  
Health and Human Services System  
Medicaid Program

Revised November 26, 2014

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## **Medicaid Eligibility Verification System**

This Medicaid Eligibility Verification Guide has been developed as a reference for Medicaid providers and their billing staff who have been authorized by the Nebraska Medicaid program to access the Medicaid Eligibility Verification System Application.

Specific instructions for logon to the NE CICS are part of the authorization process by the Nebraska EDI Help Desk. You can contact the Help Desk by calling 1-866-498-4357, 471-9461, or [DHHS.MedicaidEDI@Nebraska.gov](mailto:DHHS.MedicaidEDI@Nebraska.gov)

### **Accessing the Medicaid Eligibility Verification System via the Internet**

1. Go to <https://cicsppr1.ecs.nebraska.gov:3113/RFS6>
2. Enter your User Name and Password
3. Click on the OK button. The Nebraska Medicaid Eligibility Verification Screen displays.

### **Creating a Shortcut to Web on your Desktop**

1. From the Menu Bar, click on the File Button.  
Scroll down and select 'Send' → 'Shortcut to Desktop', a shortcut to the Web link displays on the desktop.

## Medicaid Eligibility Verification Screens

The two screens used for eligibility verification are:

1. Medicaid – Eligibility Search Screen
2. Medicaid – Eligibility Verification Result Screen

Authorized providers will be able to access recipient eligibility for a maximum of five years prior to the current date. If a recipient is eligible for the requested month and year of service, information provided will be:

- Verification of current eligibility (expressed as a whole month unless eligibility ends or begins during the month) and pending eligibility for the current month. The next month can be accessed during the last two working days of the current month.
- Nebraska Medicaid Managed Care program participation.
- Co-payment status.
- Private insurance, casualty coverage, and/or Medicare coverage.
- Lock-in status.
- Date of birth and gender.

# Medicaid Eligibility Verification Screens

## Eligibility Search Screen Criteria

From the Eligibility Search Screen, the following priorities of search options that can be accessed from the Eligibility Search screen are:

- Recipient Number search option
- Recipient Social Security number
- Recipient last name and first name.

State of Nebraska

RFS6  
PROD

NEBRASKA MEDICAID ELIGIBILITY SYSTEM

NPI:

RECIPIENT NUMBER:

RECIPIENT SSN:

ELIGIBILITY DATE (MMCCYY):

RECIPIENT LAST NAME:

RECIPIENT FIRST NAME:

RECIPIENT MIDDLE INITIAL:

RECIPIENT DOB (MM/DD/CCYY):  /  /

RECIPIENT GENDER:

A TYPICAL PROVIDER NUMBER:

HELP END CANCEL

1. When using the Recipient Number search option the following fields are **required**:

- NPI or Atypical Provider Number Use your National Provider Identifier (NPI), or the active 11-digit Atypical Provider Number.
- Recipient Number The recipient's 11-digit Medicaid Identification Number.
- Eligibility Date The 6-digit month and year. Inquiries can be made for up to five years prior. i.e. March 2014 = 032014

## Eligibility Search Screen Criteria

2. When using the Recipient Social Security Number option the following fields are **required**:

- NPI or Atypical Provider Number      Use your National Provider Identifier (NPI), or the active 11-digit Atypical Provider Number.
- Recipient Social Security Number      The recipient's Social Security Number.
- Eligibility Date      The 6-digit month and year. Inquiries can be made for current month only.

3. When using the Recipient last name and first name the following fields are **required**.

- NPI or Atypical Provider Number      Use your National Provider Identifier (NPI), or the active 11-digit Atypical Provider Number.
- Eligibility Date      The 6-digit month and year. Inquiries can be made for current month only.
- Recipient Last Name      Enter the Recipient last name. If the person has a suffix it must be entered as part of the last name with a space between the last name and suffix (i.e. Smith II).
- Recipient First Name      Enter the Recipient first name. If applicable, enter 'Unborn'.

To narrow down the search, enter the additional following fields:

- Gender      Enter M, F or U (Unborn).
- Date Of Birth      Enter the month, day, and year (MM/DD/CCYY).
- Middle Initial      Enter the recipient's middle initial, if known. The middle initial may be needed if two persons with the same first and last name are eligible. If a specific person is not found, no name will display.

<b>Note:</b>
For the quickest eligibility search, enter the required fields of the recipient number search option. If the recipient has a share of cost obligation that has not been met, a message 'The recipient is not eligible because the share of cost has not been met' appears.

## Eligibility Search Screen

### Redefine Search

To redefine your search, click on the PF3 Button to return to the ELIGIBILITY STATUS – SEARCH SCREEN

<b>ELIGIBILITY VERIFICATION – SEARCH SCREEN FUNCTION KEYS</b>		
Enter Button	Process/Find	Search, click on the Enter Button
PF1 Button	Help	Access the on-line help screen, click on the Help Button. Help information will display.
PF3 Button	End	Close out of the MMIS Application (Transaction RFS6) and end Internet access, click on the PF3 Button.
PF12 Button	Clear Screen	Clear Screen entries, click on the FF12 Button.
PF24 Button	Exit	Close out of the MMIS Application (Transaction RFS6) and end Internet access, click on the PF24 Button.

# Eligibility Verification Result Screen

All Individual information that met the search criteria is listed for the requested month and year of service. Information that is provided is as follows:

- Verification of current eligibility (expressed as a whole month unless eligibility ends or begins during the month) and pending eligibility for the current month.
- Nebraska Medicaid Managed Care program participation.
- Co-payment status.
- Private insurance, casualty coverage, and/or Medicare coverage.  
(To view all coverages you may have to page forward with PF8)
- Restricted status.
- Date of birth and gender.

State of Nebraska

RF27 NEBRASKA MEDICAID ELIGIBILITY SYSTEM 09:53 AM 11/26/2014  
 PROD ELIGIBILITY DATE: 11/20/14

NPI: [REDACTED] ATYPICAL PROVIDER NUMB: [REDACTED]  
 RECIPIENT NUMB: 0 [REDACTED] STATUS: [1] 1 ELIGBEG: [1] 11/01/2014 ELIGEND: [1] 11/30/2014  
 RECIPIENT NAME: [REDACTED]  
 RECIPIENT SSN: [REDACTED] DOB: 11/09/1969 GENDER: M COPAYSTATUS: [1] 0  
 AGENCY: [1] ACCESS NEBRASKA PHONE: 1-888-622-7633  
 MCMED/SURG: [1]  
 PCP: [1]  
 PCP ADDR: [1]  
 MCMH/SA: [1] Magellan Behavioral 800-424-0333  
 MEDICARE: [1] MA MB MD HIC: [REDACTED]  
 PART D CNTR #: [1] [REDACTED] PLANID: [REDACTED] PLAN: [1] [REDACTED]  
 RESTRCT: [1]  
 PRIVATE COVERAGE:  
 CARRIER: [REDACTED] BEG: [REDACTED]  
 ADDRESS: [REDACTED] END: [REDACTED]  
 POLICY: [1] PCYHLDR: [REDACTED] GRP: [REDACTED] COB [1] OF [1]

PRNTR ADDR: [REDACTED]

## Eligibility Verification Result Screen

ELIGIBILITY SEARCH RESULT FUNCTION KEYS		
Enter Button	Process/Find	Search for Detail information, click on the enter Button.
PF1 Button	Help	Access the on-line help screen, click on the Help Button. Help information will display.
PF3 Button	Search	Return to Eligibility Status - Search screen to conduct another search. The information you previously entered will be retained. If you wish to conduct another search, key over the previous search criteria and click on the PF3 Button.
PF6 Button	Print Screen/Printer Address	Allows the user to print the eligibility screen if your computer is directed to a printer, otherwise use print screen.
PF7 Button	Back	Used to page backward through multiple coverage results when additional data is available.
PF8 Button	Forward	Used to page forward through multiple coverage results when additional data is available.
PF24 Button	Exit	Close out of the MMIS Application (Transaction RFS6) and end Internet access, click on the PF24 Button.

### Signing out of the Medicaid Eligibility Application – 2 options are available:

1. **Click on the PF24 Button** to close out of the MMIS Application.
  - From the Selection screen, click on the PF3 Button to close out of the MMIS Application (Transaction RFS6) and end your Internet Access.
  - Click on the X button in the upper right hand corner to close out of the MMIS Application (Transaction RFS6) and end your Internet Access, **OR**
2. **Click on the PF3 Button** to return to the previous screen until you return to the search screen where you can re-enter a new search or continue to click on the PF3 Button until you close out of the MMIS Application (Transaction RFS6) and end your Internet Access.
  - Click on the X button in the upper right hand corner to close out of the MMIS Application (Transaction RFS6) and end your Internet Access.

## Error Messages

Message	Comments
First Page is being displayed PF8 to scroll down	The data display exceeds more than one screen.
Date of Service in Future	Service date is in the future.
Date of Service Not Within Allowable Inquiry Period	Inquiry is outside of available data.
Duplicate subscriber/insured ID Number	Two or more people are found using the same search criteria for the same time period.
Gender Must Be F, M, or U	Letter other than the F,M, or U.
Invalid Key depressed	Invalid key depressed; refer to bottom of screen.
Invalid Date of Birth	Date of birth entered does not match the recipient inquiry.
Invalid Eligibility Date	Recipient is not eligible for the date inquiry.
Invalid/Missing Date(s) of Service	Dates of service entered are not complete or are not a valid month.
Invalid/Missing Provider Identification	Atypical Provider Number entered is less than 11-digits or not entered.
Invalid/Missing Subscriber/Insured ID	Recipients' id number is less than 11-digits or if required was not entered.
Invalid/Missing Subscriber/insured Gender Code	Gender search criteria does not match.
Invalid/Missing Subscriber/Insured Name	Name entered is not valid.
Invalid NPI	NPI entered is not valid
Last Page is being displayed PF7 to scroll up.	Last page of data displayed.
Lock-in information incomplete. Contact Central Office	Lock-in information is not complete and refers the user to the contact Central Office.
NPI or Provider Number Required	NPI or Atypical Provider Number is required on this inquiry.
Patient Date of Birth does not match that for the patient on the database.	Date of birth does not match the recipient inquired on.
Provider ineligible for Inquires	User is not authorized to inquire.
Provider Not On File	No record of the provider.
Provider Number Not Complete	Need 11-digit number.
Provider Number required	Atypical Provider Number required on this inquiry.
Provider Number not valid	Less then 11-digits entered.
Provider Number is required and a Recipient Number is required	No Atypical Provider Number and/or a Recipient Number entered.
Provider Number not found	Not an active Medicaid provider.

<b>Message</b>	<b>Comments</b>
Recipient Number is required	Recipient ID not entered.
Recipient Number Not Complete	Less than 11-digit number entered.
Recipient Not Eligible for MM/CCYY	Recipient not eligible for month & year of service.
Recipient SSN Not Complete	Less than 9-digit number entered.
Service Dates Not Within Provider Plan Enrollment	Provider not eligible for month entered.
Subscriber/insured not found	Recipient is not in the database system.
This client is eligible for ambulatory prenatal services only.	Client has limited Medicaid coverage.

## Help Screens for Eligibility Verification Result Screen

### Help Screen Guide

Help is available throughout the system by clicking on the 'question mark boxes' (as seen below):

