



## CHECKING MEDICARE ELIGIBILITY



### **NEED TO KNOW IF YOUR PATIENT IS ELIGIBLE FOR MEDICARE?**

To ensure you are billing appropriately for Medicare-covered supplies and services, check for eligibility. Regularly review your patients' eligibility information.

People may be eligible for Medicare if they are:

- 65 or older
- Under age 65 with certain disabilities
- Of any age and have End-Stage Renal Disease (ESRD)

You can check for eligibility through the following online tools and services:

- MAC Portal
- MAC Interactive Voice Response (IVR) System
- Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System (HETS)
- Billing agencies, clearinghouses, or software vendors

## MAC ONLINE PROVIDER PORTAL

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Each MAC offers its own Medicare online provider portal so that you can access real time information, anytime.

You can look up eligibility information by entering the following information:

- Medicare Beneficiary Identifier (MBI)
- First and last name
- Date of birth (MM/DD/YYYY)

[Contact your MAC](#) to register to use the appropriate portal.

If you don't have a way to verify eligibility and you don't want to use a third-party eligibility verification process, consider using the MAC Online Provider Portal or IVR system.

## MAC IVR SYSTEM

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Each MAC offers its own Medicare IVR so that you can access real time information, anytime.

Authenticate through the automated phone system by entering your:

- National Provider Identifier (NPI)
- Provider Transaction Access Number (PTAN)
- Last five digits of your Tax Identification Number (TIN)

Then, you can look up eligibility information by entering the following information:

- MBI
- First and last name
- Date of birth (MM/DD/YYYY)

[Contact your MAC](#) for information on how to use the IVR.

## HETS

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You can access 4 years of eligibility data in HETS in real-time, anytime. You must have the following information to check eligibility:

- MBI
- First and last name
- Date of birth (MM/DD/YYYY)

If you don't want to use a third-party entity to verify eligibility, you can use HETS.

You can get eligibility information by submitting a HETS 270 request. If a patient is eligible, you will get a 271 response with the following information:

- Demographics
- Part A entitlement
- Part B entitlement
- Part D
- Medicare Advantage
- Qualified Medicare Beneficiary
- Date of death
- Deductibles and coinsurance
- Hospital spells
- Hospital lifetime reserve days remaining
- Skilled Nursing Facility spells and remaining benefit days
- Home health periods
- Hospice care coverage periods
- ESRD data
- Therapy service
- Preventive services
- Medicare Secondary Payer

For a complete list of eligibility data available in the HETS 271 response, see the [HETS Companion Guide](#).

## **BILLING AGENCY, CLEARINGHOUSE, OR SOFTWARE VENDOR**

HETS transactions require system capabilities that some providers prefer to contract out to a third-party entity. Billing agencies, clearinghouses, or software vendors can also verify Medicare coverage. For example, if you use a billing agent to submit claims, the billing agent can also verify Medicare coverage. Use this [list of available billing agency, clearinghouse, and software vendors](#) to see if their services can help you.

## RESOURCES

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- [HETS 270/271 Frequently Asked Questions \(FAQ\)](#)
- [HIPAA Eligibility Transaction System](#)
- [MAC Provider Portal](#)
- [Medicare Billing: Form CMS-1450 and the 837 Institutional](#)
- [Medicare Billing: Form CMS-1500 and the 837 Professional](#)
- [Medicare & You](#)

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