

Q: WHAT WILL BE DIFFERENT ABOUT THE NEW MEDICAID MEMBER CARD?

A: Starting July 2014, Medicaid and PCN members will start receiving a new wallet-sized plastic Medicaid card. The new card will replace the current color-coded, full sheet of paper that shows the member's eligibility each month. You will no longer see a card for each month of a Medicaid member's eligibility.

Q: WHAT INFORMATION IS ON THE NEW CARD?

A: The new wallet-sized cards will not have eligibility information listed on them. Instead, they will have the member's **name, Medicaid ID number, and date of birth**. The back of the card has helpful contact information and websites for both providers and members.

Q: WHO WILL RECEIVE A NEW CARD?

A: Each Medicaid member in a household will receive their own card. The new Medicaid member card will be used whenever the member is eligible for Medicaid. A new card will NOT be mailed each month. Replacement cards will be issued if a card is lost or damaged.

Q: HOW DO I KNOW IF MY PATIENTS ARE ELIGIBLE FOR MEDICAID?

A: Before providing services to card holders, you will need to verify you patients' Medicaid eligibility. There are two ways to help you do so:

- 1) The Eligibility Lookup Tool: <https://medicaid.utah.gov/eligibility>
- 2) *AccessNow*: 1-800-662-9651

Q: WHAT IS THE ELIGIBILITY LOOKUP TOOL?

A: The Eligibility Lookup Tool is a website that allows a provider to electronically view a member's Medicaid eligibility and plan enrollment information. The Eligibility Lookup Tool will also tell you if the patient is restricted to a specific provider and if the patient is responsible for co-pays. In addition, the Eligibility Lookup Tool can be used to verify Primary Care Network (PCN) and Children's Health Insurance Program (CHIP) eligibility.

Q: WHAT DO I NEED TO DO TO GET ACCESS TO THE ELIGIBILITY LOOKUP TOOL?

A: In order to be in compliance with HIPAA, we must assure that only those that have the right to this information have access. A provider will have to register with the State of Utah Master Directory (UMD). Upon selecting "Eligibility Lookup Tool" (<https://medicaid.utah.gov/eligibility>) you will be prompted to log into the UMD before accessing the tool.

If you have not previously created a UMD Utah-ID and password, you can create an account from the login screen. The system will walk you through the activation process after you have selected "Create Account" in the shaded box to the left.

Q: WHAT INFORMATION WILL I NEED TO VERIFY MY PATIENT'S ELIGIBILITY?

A: To verify your patient's eligibility on the portal you will need the information off of the Medicaid card which includes member's **name, Medicaid ID and date of birth**. A provider must also have a Provider ID (NPI or API) known to Medicaid.

Q: CAN I STILL CALL ACCESSNOW FOR ELIGIBILITY INFORMATION?

A: Yes, *AccessNow* is still be available at 1-800-662-9651; however, the Eligibility Lookup Tool is faster, with more complete information that can be printed for your records.

Q: WHEN WILL THE ELIGIBILITY LOOKUP TOOL BE AVAILABLE?

A: The Eligibility Lookup Tool is available now at <https://medicaid.utah.gov/eligibility>.

Q: WHAT INFORMATION IS PRODUCED BY THE ELIGIBILITY LOOKUP TOOL?

A: Providers can view:

- Member demographics
- Member eligibility (including the past 36 months)
- Eligibility for the next month (after benefit issuance which is 6 business days before the end of the month)
- Plan enrollment information
- Provider restrictions
- Patient co-pays
- TPL and other health insurance

Q: WHY DOES THE NEW CARD SAY “VERIFY THE MEDICAID MEMBER’S IDENTITY WITH A PHOTO ID”?

A: To prevent someone else from fraudulently using a Medicaid card to get health care services, please verify your patient’s identity. It is up to each provider to decide how to verify identity; one example is a photo ID.

Q: HOW WILL MY PATIENTS KNOW THEIR HEALTH/DENTAL PLANS, CO-PAYMENTS OR BENEFIT INFORMATION?

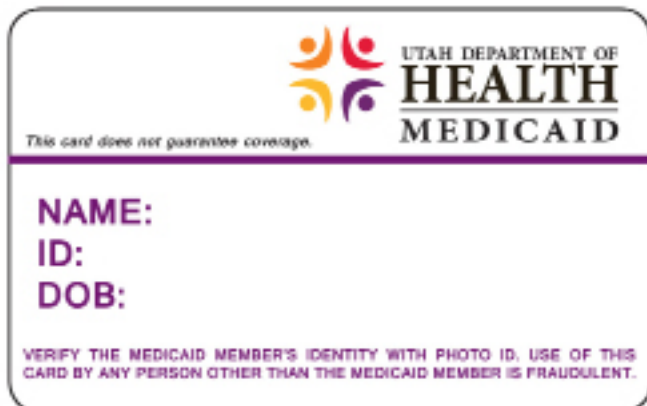
A: Members will receive a Benefit Letter in the mail that contains all their plan information. When there are changes, Medicaid will send a new Benefit Letter. In addition, members can call the Medicaid Member Services hotline at 1-844-238-3091 to check eligibility. In the near future, they will also have a web tool, similar to the Eligibility Lookup Tool, to check their eligibility online.

Q: WHAT IF MY PATIENT’S MEDICAID CARD GETS LOST OR DAMAGED?

A: A Medicaid member can call the Department of Workforce Services at 1-866-435-7414 for a new card.

Q: WHAT WILL THE NEW CARD LOOK LIKE?

A: FRONT



BACK

