# How to Use the Eligibility Lookup Tool

(Please note that any HIPAA protected information has been obscured.)

Begin by going to <a href="https://elt.medicaid.utah.gov">https://elt.medicaid.utah.gov</a>

	Username or Email
Utahid	Password 🏼 🍋
Image: Set Help Image: Set Help	SIGN IN Forgot password? Create an account
About Cerneip Contact	

- Login with your Utah ID Username or Email and Password
- If you do not have a Utah ID, click the "Create an account" hyperlink
- To see instruction on how to create a Utah ID, click the Get Help icon
- Click SIGN IN

### **Eligibility Lookup Tool Registration page**

Eligibility Lookup Tool Regist	ration
Account ID *	
00000001	
Email *	
provideremail@gmail.com	
Confirm email *	
provideremail@gmail.com	
First name *	
providerfirstname	
Middle name	
Last name *	
providerlastname	
NPI, Provider ID or Tax ID *	
Check this box to indicate that you are not a robot.	
V I'm not a robot	

On the Eligibility Lookup Tool Registration page:

- Fields are automatically populated with the Utah ID information from the logged in user
- Enter the NPI, PRISM Provider ID or Tax Id in the NPI, Provider ID or Tax ID field
- Select I'm not a robot checkbox
- Click the I agree to the Utah Department of Health Terms of Service and Privacy Policy
- Click Submit

## Eligibility Lookup Tool Results page

	Eligibility	y Lookup Tool I	Results	🗘 Logo
rms and Conditions:				
ily exact matches will return results.				
clicking the Submit button, you acknowledge t countability Act (HIPAA). Information accessed	hat the information you access may contain protected health in through the use of this Eligibility Lookup Tool must be kept sec	nformation and other identifiable infor cure and private in accordance with the	mation protected by federal and state privacy laws, including the Healt e Utah Department of Health HIPAA Policies.	th Insurance Portability and
llure to comply with the HIPAA Rule may result	in termination of access from this Portal.			
Provider ID: *Required				
Provider ID				
Jnique ID: "One of these and two personal	mormation are required			
Member ID		SSN		
Member ID		SSN		
Personal Information: * OR three	ze of these are required			
irst Name:	Last Name:		Date of Birth:	
First Name	Last Name		MM/DD/YYYY	
)ate of Service: *Required				
0372872023				

Once logged in:

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- In the Provider ID field, enter your 10 or 12-digit provider ID (required)
  - In the Unique ID and Personal Information sections, enter one of the following combinations:
    - 1 unique ID (Member ID or SSN) and 2 personal information fields (first name, last name, date of birth), or
    - 3 personal information fields
  - Enter the Date of Service (required)
- Click Submit (button is disabled until all required fields are completed)

#### Eligibility Lookup Tool Results page

Request date: 03/28/2023	Be Logout						
İ Show Coverage Calendar	]						
	음 Member		🕆 Member	Benefit Type		🛱 Service Date	
LOREM IPSUM				Traditional			03/28/2023
은 Mem	ber Information		🔂 Coverage	e Information			
First Name:	LOREM			Eligibility Date Span: 0	03/01/2023 - 03/31/2023		
Middle Initial:	R	Benefit Type:	Traditional		Health Plan:	SELECTHEALTH & 1-855-442-3	COMMUNITY CARE
Last Name:	IPSUM	Eligibility Program Type:	Disabled Medicald		Dental Plan:	U of U School o	of Dentistry Network
Gender:	F	Co-Pay Information:	No Co-pay required			৶ 1-801-587-6	453
DOB:	01/01/1900	Eligible Services:	This member is eligible for r services.	medical, dental and limited pharmacy	Mental Health Provider:	SALT LAKE CO - & 1-877-370-8	- OPTUM HEALTH 1953
Age:	123				Substance Use Disorder Provider:	SALT LAKE CO -	OPTUM HEALTH
Member ID:	1234567890					d 1-077-570-0	200
Case Number:	00000001						
⊗ Restrictions				Other Insurance			
None				None			
🗟 Pharmacy Billing Info			မှု Medicare				
RxGRP:			MBI Number:				
RxBIN:			Medicare Plan Type:				
RxPCN:	RxPCN:			Medicare Dual Status Code:			
RxID:							

On the results page:

- The request date will be shown for documentation purposes
- This date will print with the results when you click the Print Results button
- The Member Information and Coverage Information displays
- Click Show Coverage Calendar,

### **Coverage Calendar**

Request date: 03/28/2023 Eligibility Lookup Tool Results						
🖾 Hide Coverage Calendar						
Please select a date of service withi	n the calendar to accurately view eligibility, pla	n enrollment, restrictions, and benefit in	formation.			
Legend: — Traditional — Non-	Traditional — Emergency Only — QMB Onl	IY — UPP — CHIP — PCN				
<b>‹</b> 2021	2022	20	23		ŕ	
January	February	March	April	May	June	
Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	
1 2 3 4 5 6 7	1 2 3 4	1 2 3 4			1 2 3	
8 9 10 11 12 13 14	5 6 7 8 9 10 11	5 6 7 8 9 10 11			4 5 6 7 8 9 10	
15 16 17 18 19 20 21	12 13 14 15 16 17 18	12 13 14 15 16 17 18			11 12 13 14 15 16 17	
22 23 24 25 26 27 28	19 20 21 22 23 24 25	19 20 21 22 23 24 25			18 19 20 21 22 23 24	
29 30 31	26 27 28	26 27 28 29 30 31			25 26 27 28 29 30	
July	August	September	30 October	November	December	
Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	
					1 2	
					3 4 5 6 7 8 9	
					10 11 12 13 14 15 16	
					17 18 19 20 21 22 23	
					24 25 26 27 28 29 30	
					24	

In the Coverage Calendar you can:

- Go back and forth between service dates without having to perform an entirely new search
- Hover over a date to see coverage type. The legend describes coverage types by color
- Click on a date to see updated coverage. It is important that you click on a date within the calendar to see the coverage details for each date of service in question to identify changes in eligibility, enrollment in managed care, or changes in eligible services and copay.

# Perform a New Search

Request date: 03/28/2023	Eli	A New Se	w Search 🔒 Print Results 🛛 🗭 Log		
Hide Coverage Calendar					
ease select a date of service within the	calendar to accurately view eligibility, pla	n enrollment, restrictions, and benefit in	formation.		
gend: — Traditional — Non-Tradit	tional — Emergency Only — QMB Or	IIY — UPP — CHIP — PCN			
< 2021	2022	20	023		
January	February	March	April	May	June
Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa
1 2 3 4 5 6 7	1 2 3 4	1 2 3 4			
8 9 10 11 12 13 14	5 6 7 8 9 10 11	5 6 7 8 9 10 11			
15 16 17 18 19 20 21	12 13 14 15 16 17 18	12 13 14 15 16 17 18			
22 23 24 25 26 27 28	19 20 21 22 23 24 25	19 20 21 22 23 24 25			
29 30 31	26 27 28	26 27 28 29 30 31			
July	August	September	30 October	November	December
Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa	Su Mo Tu We Th Fr Sa

To perform a search on another member, click **New Search**. This will take you to the main screen and will retain your Provider ID.

### No Match Found

Utah Department of Health & Human Services Integrated Healthcare	Apply	Members	Providers	Programs	Administration	Espanol
A We are sorry, we were information regarding the No match found. En information in the d	unable to pro problem: tered infor atabase. Pl	cess your requi mation has lease check	est. Please see t to exactly m for typos in	he following for atch with the the informati	more e	🖀 Re-try Search
This was the search inform Provider ID: 000000000 Member ID: SSN: 000000000 First name: Firstname Last name: Lastname DOB: Date of Service: 03/28/20	nation you en 023	tered:				
Please click to re-try you	r search.					

If your search doesn't succeed, you will be taken to an error screen where it will give you an error message which explains why your search didn't succeed. It will also give you a summary of the search criteria you entered. If you click on re-try search, you will be taken back to the main screen to correct your information. You will not need to re-type all of the fields.