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Chinese  
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CCHP



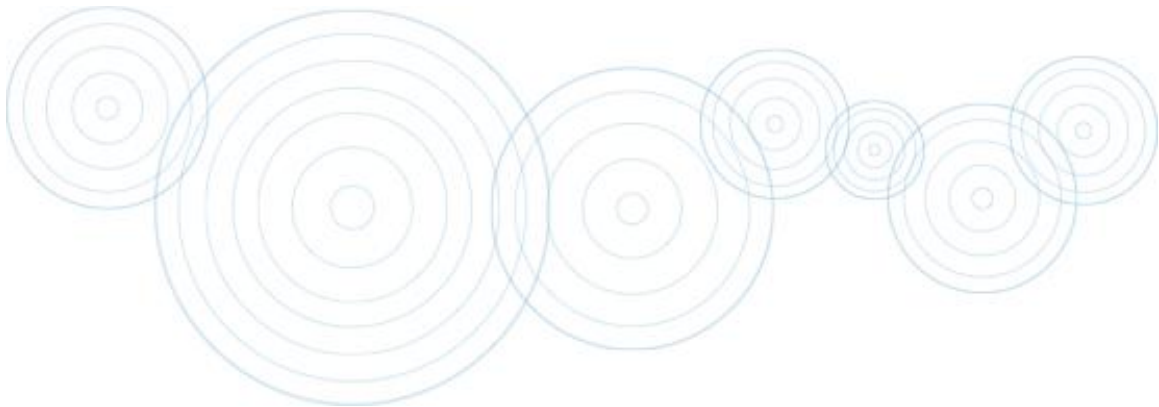
# SECTION 2



## VERIFYING MEMBER ELIGIBILITY

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## Verifying Member Eligibility

Providers are responsible for verifying member eligibility before rendering services. Eligibility must be verified every time services are received. To verify eligibility, go to our Web site at **www.cchphmo.com/eligibility\_inquiry**. It contains real time information and can be accessed 24 hours a day. After checking member eligibility on the Web site, if you have questions, please contact CCHP Member Services at 415-834-2118.

## Web Site Instructions for Verifying Eligibility

To use CCHP's Web site to check CCHP member eligibility and benefits:

1. Call Provider Relations to obtain a username and password.
2. Go to **http://www.cchphmo.com/eligibility\_inquiry.html**
3. Click on "Web Based Inquiry"
4. Enter your username and password and click on "login"
5. For CCHP Member Eligibility Search, select the "Member ID" box and enter the Patient ID (Example: 000111222\*01). Be sure to include the asterisk \*.
6. You can use the question mark (?) button to search by member last name and first name.

See "Eligibility search" screenshot below.

The screenshot shows a web form titled "Eligibility Search" with a red header bar. Below the header, it says "Specify all 4 search criteria below." The form contains four numbered sections:

- 1) Provider ID: A text input field with a question mark icon to its right.
- 2) Member ID: A text input field with a question mark icon to its right.
- 3) Request Date: A date picker showing "04 / 22 / 2011" with a question mark icon to its right.
- 4) Request Type: A radio button selection area with three options: "Generic" (selected), "Procedure" (with a text input field and question mark icon), and "Type of Service" (with a text input field and question mark icon).

A "search" button is located at the bottom of the form.

**Note:**  
To verify eligibility and benefits for Chinese Community Health Care Association (CCHCA) Medical Group's other health plan and program members, please use the applicable health plan Web site.

7. You can also use the Members Snapshot Page, on the right side of the screen to search eligibility. Using this screen (below):
  - a. Enter the last and first name of the patient and click on “search.” The provider box will automatically be populated with the provider ID.
  - b. A list of patient(s) will appear. Under the Action Column, click on “Elig” to view the member’s eligibility and benefits.

Members

The resulting list of members will provide [shortcut links](#) for services available to you.

Provider

Last Name

First Name

Under “Eligibility Details, next to the word, “Eligible” a “Y” will appear if the member is eligible on the request date. If the member is no eligible, an “N” will appear and there will be a “Disenroll Date” in the field to the right. Also included are a summary of the member’s benefits and copayments.

## Member ID Cards

Please ask patients to present their CCHP ID Card each time they present for services. The ID Card is not proof of eligibility. It is for identification purposes only, however it contains information to assist you in verifying eligibility on our Web site. If a member does not have an ID Card, you can still use the Web site to verify eligibility. Because member eligibility and benefits are subject to change, **providers are responsible for verifying eligibility each time services are received.**

The following are samples of Chinese Community Health Plan (CCHP) Member ID Cards.

### CCHP Commercial Program ID Card (Employer Group and Individual/Family Plan Members)



Name:	John W Smith	PCP:	
ID:	000123456*01	PCP:	Mary Joe, M.D.
Group:	GC012600	TEL:	
RxBIN:	610602	TEL:	(415)415-1415
RxPCN:	NVT	Issue Date:	
RxGrp:	CPC	Issue Date:	MM/DD/YYYY
Issuer:	(80840)1184901746		

### CCHP Senior Program (HMO) ID Card (Medicare Advantage Members with Medicare Parts A + B)



## CCHP Senior Select Program (HMO SNP) ID Card

(Medicare Advantage Members with Medi-Cal and Medicare Parts A + B)

Please note that the service area for CCHP's Senior Select Program (HMO SNP) is the City and County of San Francisco. It does not include northern San Mateo County. Senior Select Program Members must obtain care within CCHP's San Francisco Provider Network.

		 
Policy: <Policy #>		<PCP Name>
Issuer: (80840)1184901746		<PCP Phone #>
ID: <ID #>		
Name: <Name>		
RxBIN: 610602		
RxPCN: NVTD	<b>Copays</b>	
RxGrp: CPM	OV \$ <Copay>	CMS H0571-005
RxID: <ID #>	ER \$ <Copay>	