Real-Time Eligibility Verification from a Patient's Chart

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DrChrono allows you to verify eligibility and see what type of benefits your patient has under their insurance plan before you provide services.

1. To access the Real-Time Eligibility tool, you first need to open a patient's chart (**Patients > Patient List > Chart ID** or search directly for your patient's name).

2. Select the **Eligibility** tab in the left-hand navigation pane.

Verifying Eligibility or Active Coverage

1. Ensure the patient's insurance information is loaded into their account; including the Payer ID for their insurance and their complete membership number.

2. Select **Run Primary Insurance** or **Run Secondary Insurance**, depending on which insurance you are verifying.

The system will ping the eligibility file provided by the payer and display the eligibility and benefit information obtained.

If the response is **Cannot Process,** it could be that the payer does not offer Real-Time Eligibility Checks, the payer ID is incorrect or missing or the patient ID number is wrong or missing.

Checking Benefit Level/Services Covered

You are also able to check benefits/services covered for a particular specialty

1. Search for one or multiple from the specialty drop-down.

2. Select **Run Primary Insurance** or **Run Secondary Insurance**.

If you don't select a specialty, the function will return benefits for any/all specialties listed on the eligibility and benefit file provided by the payer.

Here you can view all the plan's coverage details about the specialty you have selected.

Insurance Eligibility & Benefits Check

| Search for a service type | or | Choose Profile ⬍ | | Run Primary Insurance | Run Secondary Insurance |

Latest Eligibility

[Active Coverage]

Subscriber: JANE DOE 1980-01-01
Last Updated: 2 days ago

Insurance: ANTHEM BLUE CROSS
Insurance ID#: 123456789
Group Number:
Group Name:

[Health Benefit Plan Coverage]   Print

| Copayment |
| Deductible |
| Coinsurance |
| Active Coverage |
| Benefit Description |
| Benefit Disclaimer |
| Limitations |
| Out of Pocket (Stop Loss) |

Copayment

Chiropractic
[In-Plan-Network]
$20

Emergency Services
[Not Applicable for Plan Network]
Additional Information:
- FACILITY BENEFIT
$150

Hospital - Emergency Accident
[Not Applicable for Plan Network]
$150

Hospital - Emergency Medical
[Not Applicable for Plan Network]
$150

Professional (Physician) Visit - Office
[In-Plan-Network]
Additional Information:
- SPECIALIST
$20

Professional (Physician) Visit - Office
[In-Plan-Network]
$20

Urgent Care
[In-Plan-Network]
$20

| Copayment |
| Deductible |
| Coinsurance |
| Active Coverage |

Service Types	Coverage Level	Insurance Type	Plan Coverage Description	In Plan Network	Notes
Physician Visit - Office: Well Hospital - Inpatient Urgent Care Medical Care Chiropractic Hospital Mental Health Hospital - Outpatient Hospital - Emergency Accident Hospital - Emergency Medical Emergency Services Pharmacy Professional (Physician) Visit - Office				Not Applicable for Plan Network	
Professional (Physician) Visit - Office				Not Applicable for Plan Network	SPECIALIST
Health Benefit Plan Coverage	Individual	Preferred Provider Organization (PPO)	PPO PRUDENT BUYER CLASSIC		

| Benefit Description |
| Benefit Disclaimer |
| Limitations |
| Out of Pocket (Stop Loss) |

Past Eligibility Checks

By selecting the **Past Eligibility Checks** tab, you can view eligibility checks previously run for the patient. You can filter by date of appointment, the date eligibility was checked, and sort by heading type. Failed eligibility checks are also recorded here.