Running Eligibility when the Claim goes to an Alternative Payer

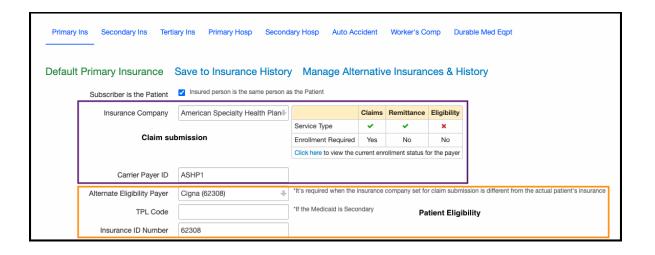
Last modified on 11/08/2024 9:30 am EST

DrChrono has added an exciting new feature for those claims where the eligibility information comes from one company, and the claim goes to another payer for processing. This scenario is most common in the chiropractic and mental health fields.

Now, there are 2 separate lines where you can store both the company that is processing the claim as well as the payer from whom you receive eligibility information. An example is included below. The claim in the example receives eligibility information from Cigna, while the claim is sent to American Specialty Health for processing.

Insurance Company field = (purple box) payer who will be processing the claim

Alternative Eligibility Payer = (orange box) payer who provides eligibility information



When a patient's account is set up in this fashion:

- The Insurance ID Number (orange box under Alternative Eligibility Payer) will be used when requesting eligibility information.
- The Carrier Payer ID (purple box under Insurance Company) will be used when submitting the claim for processing.

This feature is available for Primary Ins, Secondary Ins, Primary Hospital, and Secondary Hospital.

***NOTE *** If you are utilizing ePS for your clearinghouse, the information regarding Claims/Remittance/Eligibility pertains to the company listed in the Insurance Company field (purple box above).