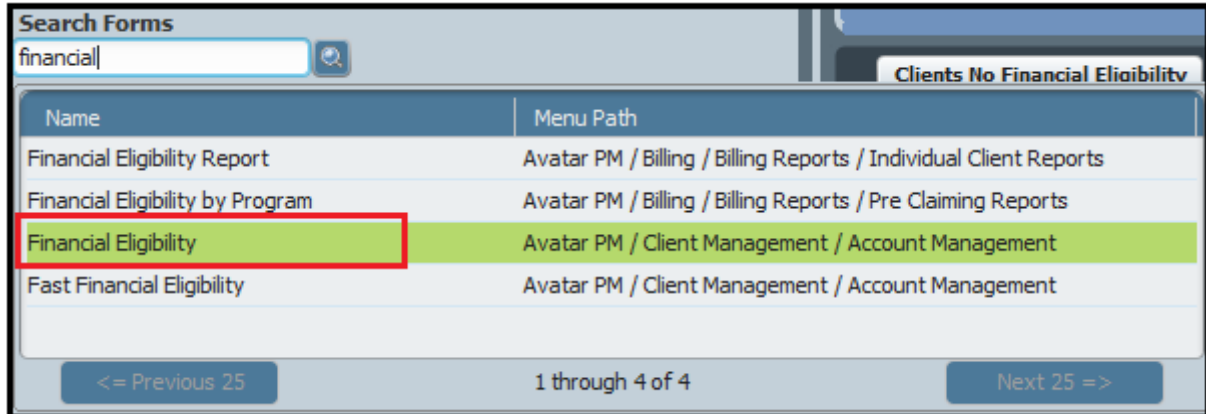


My Avatar - Financial Eligibility Guide

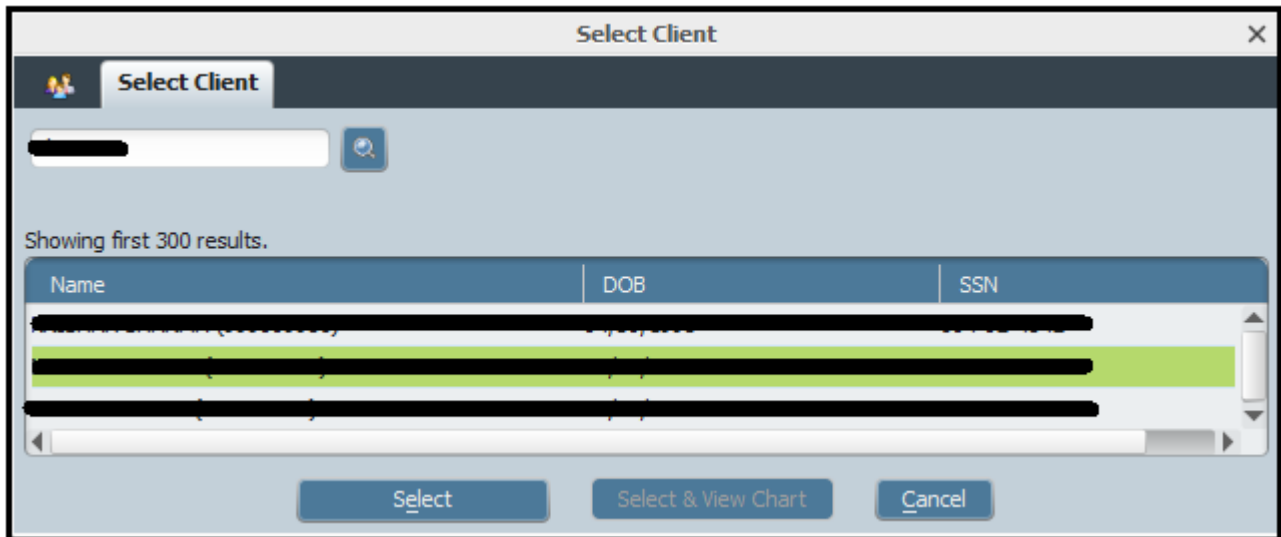
This **Financial Eligibility Form** is used to create and maintain a record of guarantor sources for financial liability distribution for the selected client. The term guarantor is used to identify an expected source of reimbursement for services provided to a client. Guarantor can include self pay, third party private insurance, or entitlements such as Medi-Cal or Medicare.


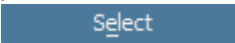
Menu Path → Avatar PM / Client Management / Account Management / Financial Eligibility

Or, go to **Search Forms** widget and type **financial** or **eligibility** in the search field. A dropdown list will display information meeting the search criteria. Select **Financial Eligibility** option and double-click it (highlighted in green).

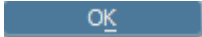


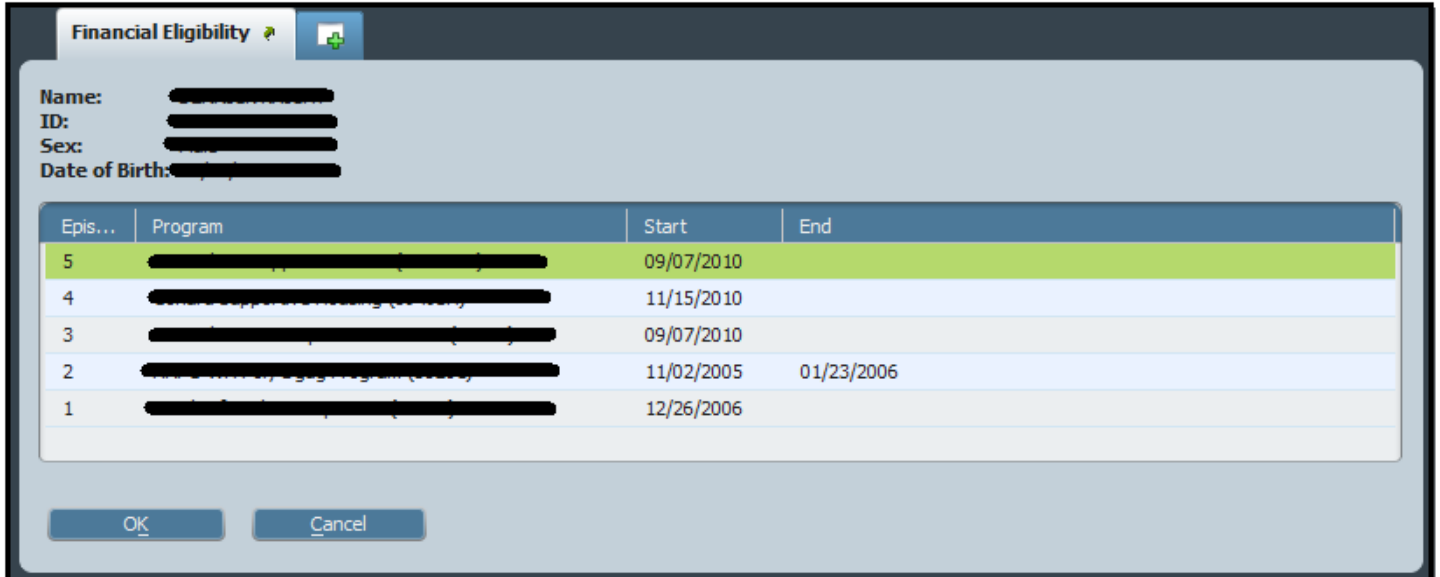
NOTE: The Financial Eligibility option is included in the MH Outpatient Admission Bundle for a new client. Or it can be selected using the menu path above, or through Search Forms, which can be added in My Forms too.



1. In the **Select Clients** field, enter client ID # or type in LastName,FirstName. Click on the  button to activate search. The dropdown list will display the client meeting the search criteria.
2. Choose the client and either Click  or double-click on the name and/or use the arrow keys to move to the desired client and press Enter.

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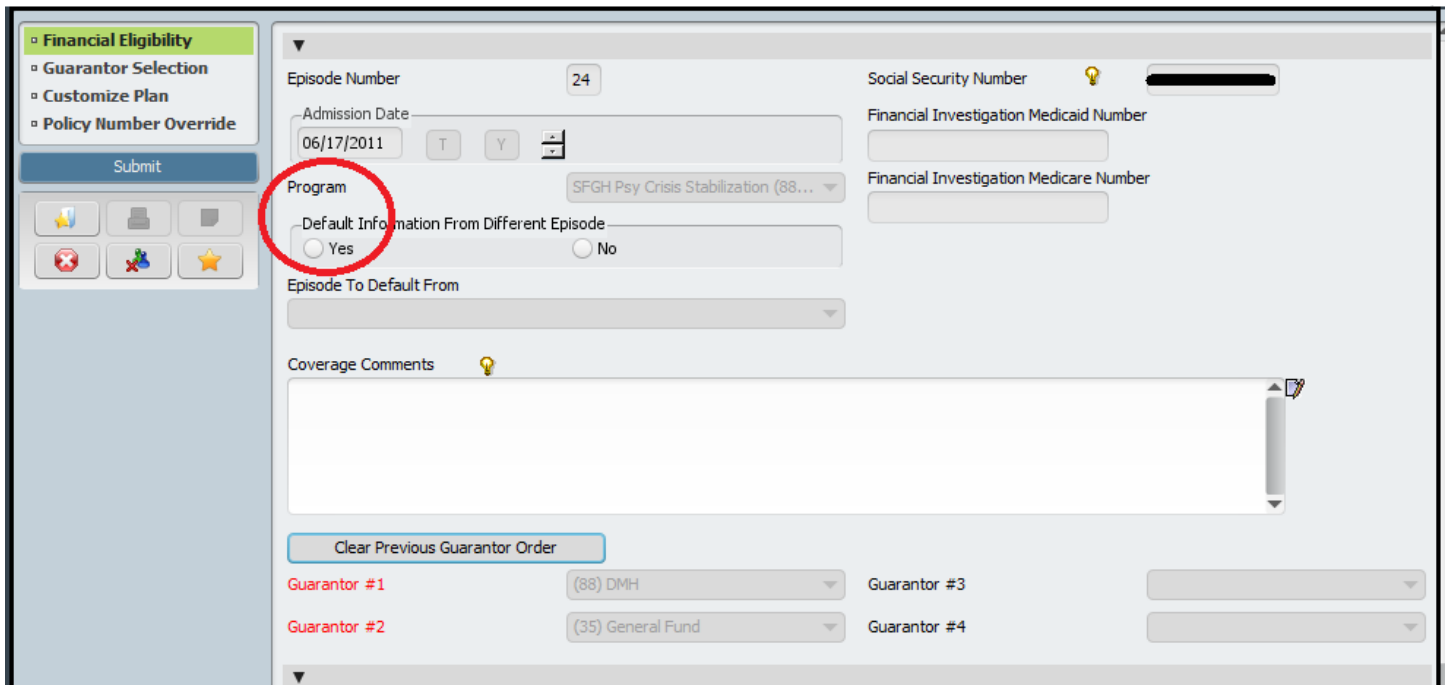
3. A client may have more than one episode. Choose the appropriate episode and click "OK" button or double-click the selected option (highlighted in green).
4. Financial Eligibility form will be launched; a list of episodes will be displayed starting with the most recent episode on the top. Double-click to [select episode](#) or click  button.



The screenshot shows a window titled "Financial Eligibility" with a header bar containing a plus icon. Below the header, there are fields for Name, ID, Sex, and Date of Birth, all of which are redacted with black bars. A table lists episodes with columns for "Epis...", "Program", "Start", and "End". Episode 5 is highlighted in green. At the bottom of the window are "OK" and "Cancel" buttons.

Epis...	Program	Start	End
5	[REDACTED]	09/07/2010	
4	[REDACTED]	11/15/2010	
3	[REDACTED]	09/07/2010	
2	[REDACTED]	11/02/2005	01/23/2006
1	[REDACTED]	12/26/2006	

TIP — If the client has previous episodes, you have the option to bring the financial information forward from a previous episode to the current episode by clicking "Yes" to "Default information From Different Episode". Choose the episode you would like to bring the information from. Click the Submit button, and reopen the Financial Eligibility Form. Go through all the fields of the form and verify that the information is accurate.



The screenshot shows the "Financial Eligibility" form. On the left is a sidebar with a "Submit" button and several icons. The main form area contains the following fields:

- Episode Number: 24
- Admission Date: 06/17/2011 (with T, Y, and a calendar icon)
- Program: SFGH Psy Crisis Stabilization (88...)
- Default Information From Different Episode: Radio buttons for Yes and No. The "Yes" radio button is circled in red.
- Episode To Default From: A dropdown menu.
- Coverage Comments: A text area with a lightbulb icon and a scroll bar.
- Clear Previous Guarantor Order: A button.
- Guarantor #1: (88) DMH
- Guarantor #2: (35) General Fund
- Social Security Number: [REDACTED]
- Financial Investigation Medicaid Number: [REDACTED]
- Financial Investigation Medicare Number: [REDACTED]
- Guarantor #3: [REDACTED]
- Guarantor #4: [REDACTED]

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TIP – The term guarantor is used to identify any expected source of reimbursement for services provided to a client. Guarantor can include self pay, third party private insurance, or entitlements such as Medi-Cal or Medicare.

Guarantor Information

Guarantor #	Guarantor Name	Guarantor Plan	Customize Guara...
MH MediCal Full Scope (88)	DMH ...	1	No
General Fund (35)	General Fund	7	No

Guarantor #: MH MediCal Full Scope (88)

Guarantor Name: DMH

Guarantor Plan: (Non-Contract) Medi-Cal

Customize Guarantor Plan: Yes No

Guarantor's Address - Zipcode: [REDACTED]

Guarantor's Address - City: Sacramento

Guarantor's Address - State: CALIFORNIA



Guarantor's Phone Number: [REDACTED]

Inhibit Billing By Mail: Yes No

Effective Date Of Contract: 01/01/2000

Expiration Date Of Contract: [REDACTED]

To add a new Guarantor:

1. Click on the  button. This will add a blank line to the table.
2. Enter the guarantor # from the "Guarantor List" below in the search field. Click on the  button to activate search. Choose the appropriate guarantor from the dropdown list.
3. If a pop-up window appears, click OK in order to automatically add the guarantor's information to this tab. Review and/or enter the information on each field as required.
4. **CAUTION** in "Customize Guarantor Plan" option, you must select **"No"**.

Customize Guarantor Plan

Yes No


5. **Inhibit Billing By Mail** - Only select **"Yes"** to prevent sending a self-pay bill or patient statement to a client. *E.g., Minor Consent (12-18 years old) clients with Medi-Cal Aid Code 7M, 7N, 7P & 7R, should not receive a bill. Otherwise, you may select "NO" or disregard this option.*

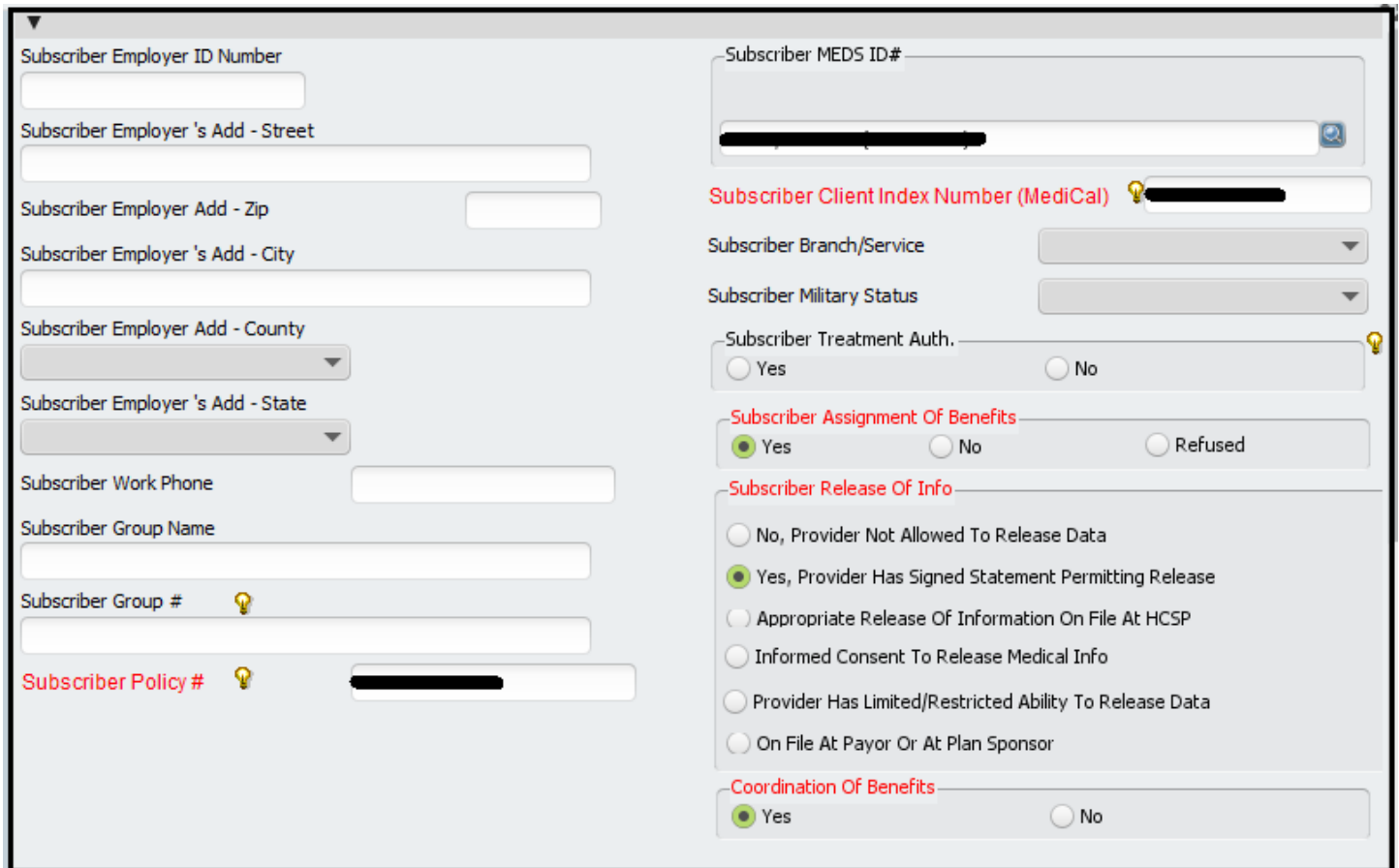
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6. **Eligibility Verified** - Select **"Yes"**.
7. **Coverage Effective Date** - Enter the first day of the month for Medi-Cal beneficiaries or the accurate date based on the member's insurance card.
8. **NOTE:** System will pre-populate Subscriber's Name, Address and DOB, if **"Update Client Data"** form is filled out.
9. **Subscriber Sex** - Select appropriate gender.

The screenshot shows a web-based form for financial eligibility. The 'Eligibility Verified' field is highlighted with a red box and has the 'Yes' radio button selected. Other fields include 'Is This A Managed Care Contract' (Yes/No), 'Insurance Code/Medicaid Tape' (1), 'Coverage Effective Date' (08/01/2010), 'Coverage Expiration Date', 'Client's Relationship To Subscriber' (Self), 'Subscriber's Name', 'Subscriber Address - Street Line 1', 'Subscriber Address - Zip', 'Subscriber Address - City' (San Francisco), 'Subscriber Address - County' (San Francisco), 'Subscriber Address - State' (CALIFORNIA), 'Subscriber Phone Number', 'Subscriber's Social Security #', 'Subscriber Sex' (Male), 'Subscriber's Employment Status' (Not In Labor Force - Other Not ...), 'Subscriber's Birth Date', 'Subscriber Employee ID #', and 'Subscriber Employer Name'.

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10. **Subscriber MEDS ID#** - Enter SSN for only Medi-Cal client, and click on the  button to activate search, which will link the client eligibility record with the **“Review MEDS Information”** form in the system, which allows a glance of an entire year’s benefit coverage.
 11. **Subscriber Policy #** - Enter member’s Medicare, Medi-Cal CIN # and/or Insurance Policy #.
 12. **Subscriber CIN (Medi-Cal)** - Leave blank for Medicare/ Insurance Plans. *Enter Medi-Cal CIN, which must contain 9 characters, 8 numeric digits and end with an alpha-character.*
- TIP: The “3 Yeses”.**
13. **Subscriber Assignment of Benefits** - Select **“Yes”**.
 14. **Subscriber Release of Info** - Select **“Yes”**.
 15. **Coordination of Benefits** - Select **“Yes”**.



Subscriber Employer ID Number

Subscriber Employer's Add - Street

Subscriber Employer Add - Zip

Subscriber Employer's Add - City

Subscriber Employer Add - County

Subscriber Employer's Add - State

Subscriber Work Phone

Subscriber Group Name

Subscriber Group #

Subscriber Policy #

Subscriber MEDS ID#

Subscriber Client Index Number (MediCal)

Subscriber Branch/Service

Subscriber Military Status

Subscriber Treatment Auth.

Subscriber Assignment Of Benefits

Subscriber Release Of Info

Coordination Of Benefits

CAUTION – DO NOT change the information that automatically populates in certain fields.


IMPORTANT: Guarantors should always be added in the following order (as appropriate for the client and based on the client’s benefit coverage).

Billing Precedence:

- **Private insurance is usually billed first**
- **Medicare is usually billed second**
- **Medi-Cal is the payer of last resort**
- **County General Fund is the last payer of source**

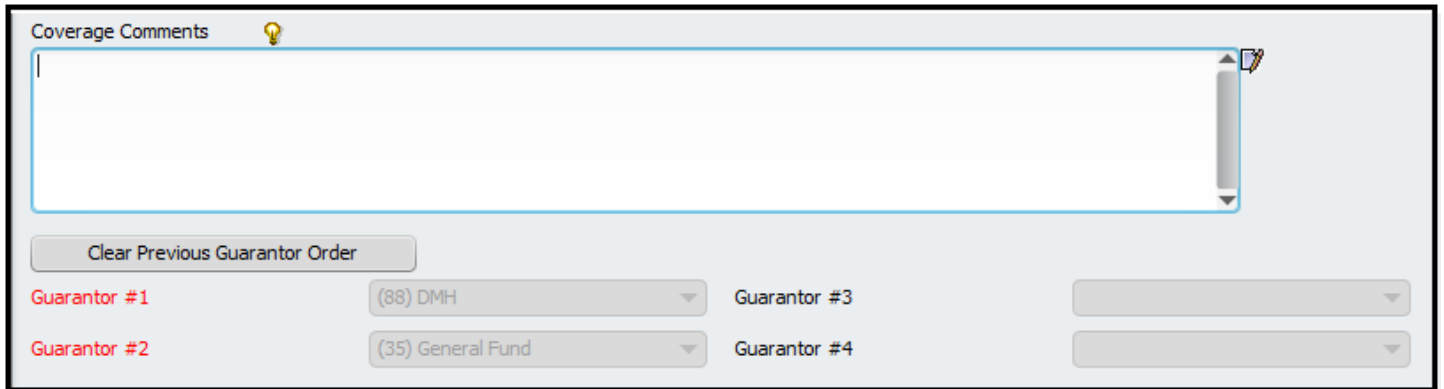
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Upon completion of filling out all the information in **"Guarantor Selection"** section, return to **"Financial Eligibility"** section to enter the Guarantor Order. That is a requirement.

Click  button on the left hand side of the screen to save your input data.

Or Click  button to **"Exit"** and select **"Yes"** to close the small window display.

NOTE: It is strongly recommended to enter a detailed note of benefit coverage in "Coverage Comments" for the Billing Unit to determine it further.



Coverage Comments 

Guarantor #1	<input type="text" value="(88) DMH"/>	Guarantor #3	<input type="text"/>
Guarantor #2	<input type="text" value="(35) General Fund"/>	Guarantor #4	<input type="text"/>

****DO NOT delete guarantor(s) for an existing client or if the charges are already claimed****

Should you have any questions, contact CBHS Billing Unit 255.3610.

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Guarantor List:

Index	Guarantor Name	Guar Code	Benefit Plan Name
01	AARP Healthcare Option	1	HMO Insurance
02	AB3632 ERMHS	84	AB3632
03	ADP Medi-Cal (Share of Cost)	103	Medi-Cal
04	ADP Medi-Cal (Full Scope)	33	Medi-Cal
05	Aetna	2	HMO Insurance
06	Aetna Life Ins Co MDC HMO	40	HMO Insurance (MDC)
07	Alaska Laborers Trust	41	HMO Insurance
08	American Postal Workers Union HLTH Plan	3	Commercial Insurance
09	Bankers Life and Casualty Company	43	HMO Insurance
10	Baycare Medical Group	44	HMO Insurance
11	BC Freedom Blue MDC HMO	42	HMO Insurance (MDC)
12	Benefit and Risk Management Services	45	HMO Insurance
13	Benesight	46	HMO Insurance
14	Blue Cross of CA	4	HMO Insurance (MDC)
15	Blue Shield Federal Emp Program	47	HMO Insurance
16	Blue Shield of CA (MH Service Admin)	5	HMO Insurance
17	Brown and Toland Group Commerical	79	HMO Insurance
18	Brown and Toland Medicare HMO	87	HMO Insurance (MDC)
19	Cal Western Insurance	48	HMO Insurance
20	Calif Pacific Medical Services CPMSO	49	HMO Insurance
21	California Childrens Services	50	HMO Insurance
22	Calworks	99	DHS Workorders
23	Chinese Comm Hlth MDC HMO	51	HMO Insurance (MDC)
24	Chinese Community Health Plan	6	Commercial Insurance
25	CHIPA College Health IPA	52	HMO Insurance
26	Cigna Behavioral Health	7	HMO Insurance
27	Conservator/Public Guardian	105	Conservator ONLY
28	CSM Default Payor	99999	Short-Doyle County GF
29	DCYF Work Order IHBS	95	DHS Workorders
30	DHS Foster Care Work Order	71	DHS Workorders
31	DMH Out of County Medi-Cal SB785	102	Medi-Cal
32	DMH Medi-Cal with SOC	32	Medi-Cal
33	DMH Medi-Cal Healthy Families SED/SDMC	34	Medi-Cal
34	DMH Full Scope Medi-Cal with no SOC	88	Medi-Cal
35	DMH Restricted Medi-Cal	89	Medi-Cal
36	Empire UBH Claims Optimum Health	53	HMO Insurance
37	Family Mosaic Project Capitated MediCal	54	Family Mosaic Capitated MC
38	First Health Life & Insurance	8	Commercial Insurance
39	Foundation Health Champus	55	HMO Insurance
40	Full Pay	39	Self Pay

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Index	Guarantor Name	Guar Code	Benefit Plan Name
41	General Employees Trust Fund	9	Commercial Insurance
42	General Fund	35	Short-Doyle County GF
43	Great West Healthcare	10	HMO Insurance
44	Greater Oregon Behavioral Health Inc	56	HMO Insurance
45	Harmony Health Care	57	Commercial Insurance
46	Health Net - MHN	11	HMO Insurance
47	Health Plan of San Mateo	13	HMO Insurance
48	Healthpartners	12	HMO Insurance
49	Healthy Kids - SFHP	107	SFHP Benefits
50	Healthy San Francisco	14	Healthy San Francisco
51	Healthy Workers - SFHP IHSS	106	SFHP Benefits
52	HMC CLAIMS	80	HMO Insurance
53	HPSM SM Co Behavioral Health MDC HMO	58	HMO Insurance
54	HSA Non SPMP	93	DHS Workorders
55	HSA SPMP	92	DHS Workorders
56	Humana Health Care	59	HMO Insurance (MDC)
57	ILWA ONA Coastwise Claim	60	HMO Insurance
58	John Hancock McGraw Hill	61	HMO Insurance
59	Kaiser MDC HMO	62	HMO Insurance (MDC)
60	Kaiser Permanente	15	HMO Insurance
61	Laborers Health and Welfare Trust	63	HMO Insurance
62	Lifesynch Guardian Behavioral	16	HMO Insurance
63	Magellan Behavioral Health	17	HMO Insurance
64	Managed Health Network (Child Crisis)	18	Managed Care Network
65	Massachusetts Life Insurance	64	HMO Insurance
66	Medicare Part A - Palmetto	38	Medicare Part A
67	Medicare Part B Palmetto	37	Medicare Part B
68	Medicare Part B Palmetto Secondary	86	Medicare Part B
69	Medicare Railroad Retirees Part B	85	Medicare Part B
70	MH Minor Consent	109	Short-Doyle County GF
71	MHN Services MDC HMO	65	HMO Insurance (MDC)
72	MHSA Family Mosaic FSP	94	MHSA
73	MHSA FSP	90	MHSA
74	MHSA Non FSP	98	MHSA
75	Motion Picture Industry Health Plan	66	HMO Insurance
76	Northwest Administrator	67	HMO Insurance
77	On Lok Senior Health Plan	68	HMO Insurance
78	Other Unlisted Insurance	104	HMO Insurance
79	Pacificare	19	HMO Insurance
80	Pacificare Behavioral Health MDC HMO	69	HMO Insurance (MDC)

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Index	Guarantor Name	Guar Code	Benefit Plan Name
81	PBH Claims	83	HMO Insurance
82	PPO Blue Cross of California	78	HMO Insurance
83	Retail Clerks Emp Ben Plan of NC	70	HMO Insurance
84	SAMHSA Grant	96	Fed/State Grants (Restricted)
85	SB 163 Crisis Wrap	97	DHS Workorders
86	Secure Horizon	21	HMO Insurance
87	SF Can Do	101	DHS Workorders
88	SF City Health Plan	22	Commercial Insurance
89	SF Culinary Bartenders & Welfare	23	HMO Insurance
90	SF Dept Human Services PAES	91	DHS Workorders
91	SF First	100	DHS Workorders
92	SF PATH	108	Healthy San Francisco
93	SFHP Healthy Families Program	20	SFHP Benefits
94	Shop Ironworkers Local 790 Trust Fund	72	HMO Insurance
95	Take Care	73	HMO Insurance
96	Tricare/Triwest Healthcare	24	HMO Insurance
97	UFCW Employer's Benefit Plan	25	HMO Insurance
98	UMDAP	36	Self Pay
99	UMR	26	HMO Insurance
100	United Administrative Services	82	HMO Insurance
101	United Behavioral Health (UBH)	27	HMO Insurance (MDC)
102	United Behavioral Health PPO	81	HMO Insurance
103	United Health Care	28	HMO Insurance
104	Value Options ASO	29	HMO Insurance
105	Veterans Administration Insurance	30	HMO Insurance
106	Victim Witness Program	74	Victim Witness
107	Wellcare Health Insurance	31	HMO Insurance
108	Wellcare PFFS MDC HMO	75	HMO Insurance
109	Wells Fargo 3rd Party Administrator	76	Commercial Insurance
110	Western Health Network	77	HMO Insurance

Technical Writer: Allyn-Frances Quan