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How to Check Eligibility for Insurance Claims (Provider) Jay-Ileen (Ai) - 2022-07-15 - VSee Clinic for Providers

In order for the Patient's health insurance to pay for the services you have rendered, you must check first if the Patient is Eligible for you to submit a claim.

Note: This feature may not be available in your clinic. Please contact <u>Sales</u> *or your Account Manager to enable this feature.*

- Add the Diagnosis and Procedure Codes for the Visit
- Add Patient's Insurance Information
- Check the Patient's Eligibility
- Scope and Limitations
- Related Articles

Adding the Diagnosis and Procedure Codes for the Visit

During the visit, it is important that you add the diagnosis (dx) and procedure (cpt) codes related to the services rendered to the Patient;

1. On the visit details page, click on **Notes** tab. And scroll down past the Patient's EMR section.



You may update the SOAP notes section accordingly. Then continue to scroll down to the bottom of the page.

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Having issues with your in-browser video? Join via VSee Messenger App	Health Habits 🥒 Edit	
	Family History 🥒 Edit	
	Medications / Edit Last updated on 03/14/2022 10:10AM by Dr. Adison Kenter	
	Vitamin C Aderol - ADHD Medication Salbutamol	
	Allergies & Edit Last updated on 03/14/2022 10:10AM by Dr. Adison Kenter	
	Seafood	
	New Prescriptions State	
	Preferred Pharmacy / Edit Last updated on 03/14/2022 10:10AM by Dr. Adison Kenter	
	 CVS/Pharmacy #9793, 2700 Homestead Rd, Santa Clara, CA, 95051, 4082478700 	
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- 2. Add the **Diagnosis code/s** by selecting from the dropdown list.
- 3. After selecting each code, make sure to click on the **Add** button.
- 4. Add the **Diagnosis code/s** by selecting from the dropdown list.
- 5. After selecting each code, make sure to click on the **Add** button.
- 6. You may **Save** it for now OR click on **Sign & Send** to complete.

Note: Currently, the Diagnosis and Procedure codes will only be added to the

insurance claim form after the provider has clicked the "Sign & Send" button.

Select ICD	Diagnosis Code(s)			ľ
DX	Codes			
1	ICD-10-CM Z32.2 - Childbirth education	; Child	birth instruction: Chile	birth Ed
2	ICD-10-CM Z71.89 - Health education; I	ndividu	al or group safety & f	irst aid
Procedure C Select CPT	Codes T, HCPCS Procedure Code(s)]6
Codes		Qty	Modifiers	DX
G2012 B	rief communication (5-10 minutes) techno	1		1, 2
G2010 R	emote evaluation of recorded video and/or	1		1
Patient Instr	ructions (Optional)			Note Terr
Write a co	mment			
Upload Files	(Optional)			
	Drag and Drop fi Or Click Here to be	iles her rowse f	re files	0
			Save	Sign &

Adding Patient's Insurance Information

If the Patient did not choose to add their Insurance information before getting into the visit, you still have the option to do it on behalf of the Patient.

1. Click on the **Insurance** tab. This tab is related to the patient's profile. And can be accessed throughout the patient's profile details regardless of the visit number.

2. Click on +Add Insurance.

Note: You can add a maximum of 2 insurance plans per patient.



3. Ask the Patient for the details of their Health insurance and fill them in the form.



Once all the required fields have been answered, you may now proceed to Check Eligibility.

Checking the Patient's Eligibility

Once the Patient's health insurance is already added by the Patient or by you, you can now proceed to check eligibility.

- 1. Go to the **Insurance** tab.
- 2. Click on the **Check Eligibility** button.



In this example, the status is "Inactive". It means the Patient is currently ineligible or their insurance coverage is not active.

Clicking the "Check Eligibility" button will save the changes. You have the option to keep it in the patient's profile or remove it.

Note: An insurance claim can only be created using an insurance plan with an "Active" status.

surance coverage is inactive. Please check the insurance details and try again. You may so choose not to add this insurance.		Add Insurance
so choose not to add this insurance.	surance covera	ge is inactive. Please check the insurance details and try again. You may
	so choose not t	o add this insurance.

In this example, the status is "Pending Eligibility". This will be the status if the check returns "no response". You may try to check the eligibility status as many times as you want until it returns an "Active" or "Inactive" status. But you may not be able to create a claim while the status is "Pending Eligibility".

	+ Add Insurance
ligibility check r ligibility is in pe	eturned no response. You may proceed using this insurance plan while nding status.

A "Verifying.." message will be shown until there is a response from the checking.

+ /	Add Insurance
Eligibility check returned no response. Ye eligibility is in pending status.	ou may proceed using this insurance plan while
Processing Eligibility Status: 🤁 Pene	ding Eligibility
Last updated 03/30/2022 10:10AM by Dr. Adison Ke	inter
Primary Insurance Company Name*	
	nuary 2, 1992
Insured Address*	Insured City*
3188 Kimlee Drive	san Jose
Insured Zip [*] Please wait while we w	erify your insurance details
	California

Once the checking returns an eligible status, the provider will see an "Active" status and success message. A response will display all the details related to the patient's insurance coverage below. An **Active** status icon (green circle with a check symbol) will be displayed beside the "Insurance" tab as well to indicate that the most recent eligibility check is "Active". You may click the "Check Eligibility" button anytime.



Here's an example of when the Patient has 2 insurance plans. You or the Patient may add a maximum of 2 insurance plans per patient account. As long as there is 1 "Active" status insurance, the "Active" icon beside the "Insurance" tab will be displayed, regardless of the status of the other insurance.





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	John Workman	January 2, 1992					
	Insured Address* 3188 Kimlee Drive	Insured City* San Jose					
	Insured Zip*	Insured State*					
	95132 Upload Insurance Card (Front)*	California Upload Insurance	Card (Back)*				
	Drag and Drop files here	Drag	and Drop files here				
	Insurance card front.jpg	Or Click	and back.jpg X				
	Remove Insurance						

🜲 🗩 🔗 Dr. Ad

Scope and Limitations:

- An insurance claim can only be created using an insurance plan with an "Active" status.
- Currently unable to view claim status via VSee Clinic / Patient Portal.
- Currently, Procedure and Diagnosis details are not reflected on the invoice.
- An insurance plan with an "Active" eligibility status cannot be edited or removed by the patient until the eligibility period has expired. Or if the provider chooses to update it themselves on their end.
- Two is the maximum number of insurance plans a patient may add per patient account. If ever the primary insurance plan is removed, the secondary insurance plan will become the primary.
- Currently, the Diagnosis and Procedure codes will only be added to the insurance claim form after the Provider has clicked the "Sign & Send" button.

Related Articles:

- How the Eligibility Feature Works
- How to Submit a Claim (Provider)

If you have any questions, please contact us at <u>help@vsee.com</u>.

Last updated on: 15 July 2022

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