



CHECKING MEDICARE ELIGIBILITY

Need to Know if Your Patient is Eligible for Medicare?

To ensure you are billing appropriately for Medicare-covered supplies and services, check for eligibility. Regularly review your patients' eligibility information.

People may be eligible for Medicare if they are:

- 65 or older
- Under age 65 with certain disabilities
- Of any age and have End-Stage Renal Disease (ESRD)

You can check for eligibility through the following online tools and services:

- MAC Portal
- MAC Interactive Voice Response (IVR) System
- Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System (HETS)
- Billing agencies, clearinghouses, or software vendors

MAC Online Provider Portal

Each MAC offers its own Medicare online provider portal so that you can access real time information, anytime.

You can look up eligibility information by entering the following information:

- Medicare Beneficiary Identifier (MBI)
- First and last name
- Date of birth (MM/DD/YYYY)

[Contact your MAC](#) to register to use the appropriate portal.

If you don't have a way to verify eligibility and you don't want to use a third-party eligibility verification process, consider using the MAC Online Provider Portal or IVR system.

MAC IVR System

Each MAC offers its own Medicare IVR so that you can access real time information, anytime.

Authenticate through the automated phone system by entering your:

- National Provider Identifier (NPI)
- Provider Transaction Access Number (PTAN)
- Last five digits of your Tax Identification Number (TIN)

Then, you can look up eligibility information by entering the following information:

- MBI
- First and last name
- Date of birth (MM/DD/YYYY)

[Contact your MAC](#) for information on how to use the IVR.

HETS

You can access 4 years of eligibility data in HETS in real-time, anytime. You must have the following information to check eligibility:

- MBI
- First and last name
- Date of birth (MM/DD/YYYY)

If you don't want to use a third-party entity to verify eligibility, you can use HETS.

You can get eligibility information by submitting a HETS 270 request. If a patient is eligible, you will get a 271 response with the following information:

- Demographics
- Part A entitlement
- Part B entitlement
- Part D
- Medicare Advantage
- Qualified Medicare Beneficiary
- Date of death
- Deductibles and coinsurance
- Hospital spells

- Hospital lifetime reserve days remaining
- Skilled Nursing Facility spells and remaining benefit days
- Home health periods
- Hospice care coverage periods
- ESRD data
- Therapy service
- Preventive services
- Medicare Secondary Payer

For a complete list of eligibility data available in the HETS 271 response, see the [HETS Companion Guide](#).

Billing Agency, Clearinghouse, or Software Vendor

HETS transactions require system capabilities that some providers prefer to contract out to a third-party entity. Billing agencies, clearinghouses, or software vendors can also verify Medicare coverage. For example, if you use a billing agent to submit claims, the billing agent can also verify Medicare coverage. Use this [list of available billing agency, clearinghouse, and software vendors](#) to see if their services can help you.

Resources

- [HETS 270/271 Frequently Asked Questions \(FAQ\)](#)
- [HIPAA Eligibility Transaction System](#)
- [MAC Provider Portal](#)
- [Medicare Billing: Form CMS-1450 and the 837 Institutional](#)
- [Medicare Billing: Form CMS-1500 and the 837 Professional](#)
- [Medicare & You](#)

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