

# BLUERIDE

Availity Essentials Eligibility and Benefits

[WWW.AVAILITY.COM/ESSENTIALS](http://WWW.AVAILITY.COM/ESSENTIALS)

# ELIGIBILITY & BENEFITS

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- ELIGIBILITY & BENEFITS

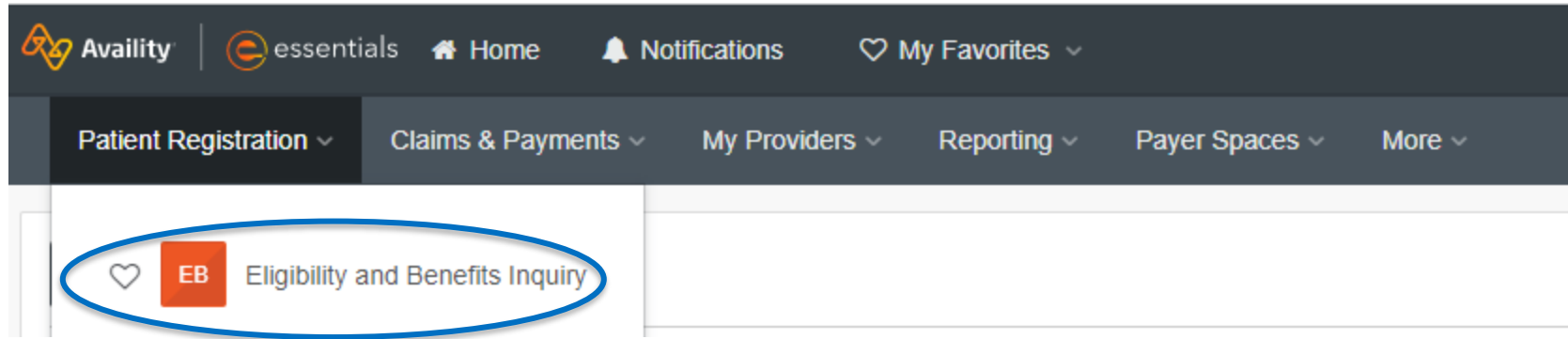
- ELIGIBILITY AND BENEFITS INQUIRIES ALLOW YOU TO VERIFY A PATIENT'S ELIGIBILITY AND CONFIRM THE BENEFITS COVERED UNDER THE MEMBER'S CONTRACT.
  - Availity Essentials is offered as a tool to review plan coverage dates and is based on information received from Minnesota Department of Human Service (MN-ITS) system. Eligibility & Benefit information can be used within the Availity Essentials portal.
  - Verification of Eligibility: All provisions of the Provider Service Agreement continue to apply to transportation services including verifying the eligibility of the Subscriber on Minnesota Department of Human Services (MN-ITS) system before providing Health Services and coordinating the service through BlueRide. [http://www.dhs.state.mn.us/main/idcplg?IdcService=GET\\_DYNA\\_MIC\\_CONVERSION&RevisionS\\_electionMethod=LatestRelease](http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNA_MIC_CONVERSION&RevisionS_electionMethod=LatestRelease)
  - Reference links
    - [mn-its.dhs.state.mn.us](http://mn-its.dhs.state.mn.us)
    - [mn-its.dhs.state.mn.us/gatewayweb/login](http://mn-its.dhs.state.mn.us/gatewayweb/login)

**\*\*YOU WILL NEED TO COMPLETE REGISTRATION PRIOR TO ACCESSING THIS INFORMATION. IF YOU HAVE NOT FINISHED THE REGISTRATION PROCESS, COMPLETE THAT FIRST, THEN RETURN TO THIS DOCUMENT**

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# ELIGIBILITY & BENEFITS

TO START AN ELIGIBILITY & BENEFITS INQUIRY, GO TO THE “PATIENT REGISTRATION” DROP DOWN MENU, CHOOSE “ELIGIBILITY & BENEFITS ”



# ELIGIBILITY & BENEFITS, CONTINUED

- Choose an organization, if the provider is associated to more than one organization (choose from the drop down in the upper right corner of the screen)
- Choose a Payer – search in drop down for BlueRide Non-Emerg Transportation
- If you would like to watch a demo, click on the link “Watch a quick demo”

Provider Org Name   [+ New Request](#)

## New Request

[Watch a quick demo](#)

\* Payer 

BLUERIDE NON-EMERG TRANSPORTATION 

## ELIGIBILITY & BENEFITS, CONTINUED

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- Select provider from the drop-down menu. This is only available if your provider information was entered in Manage My Organization
- OR
- Enter either the provider NPI, Provider Tax ID or Payer Assigned Provider ID

### Provider Information

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Select a Provider [?](#)

Search for a Provider ▼

NPI [?](#)

Tax ID [?](#)

Payer Assigned Provider ID [?](#)

# ELIGIBILITY & BENEFITS, CONTINUED


- Service information
  - The “As of Date” will default to the current date.
  - Enter the date that the service has been or will be rendered. The date allowed is from 24 months before the current date and to the last day of the following month.
- Benefit/Service Type
  - Based on the benefit/service type chosen the benefit response will display those benefits
  - Health benefit plan coverage is defaulted to provide a general overall benefit information

## Service Information

\* As of Date 

01/21/2022

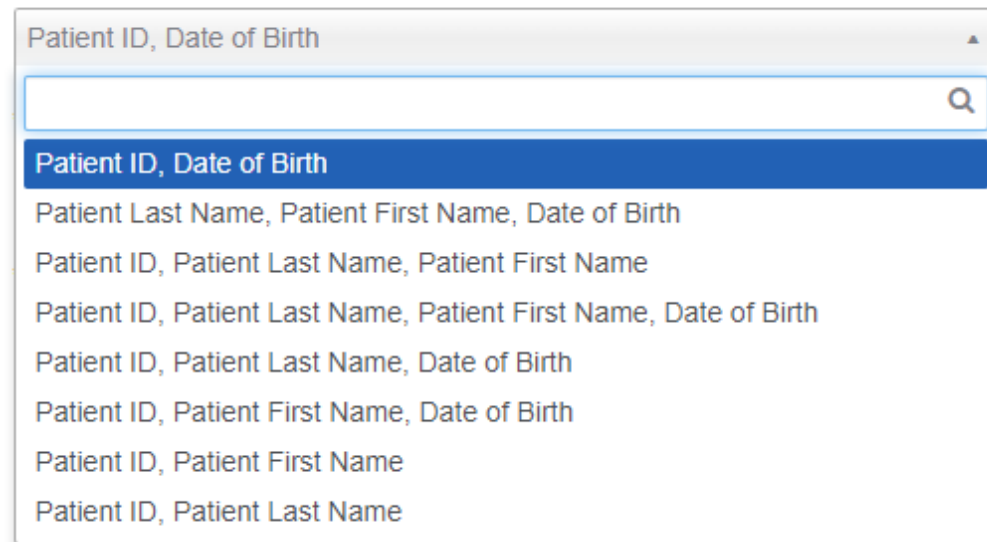
\* Benefit / Service Type 

Health Benefit Plan Coverage 

# ELIGIBILITY & BENEFITS, CONTINUED

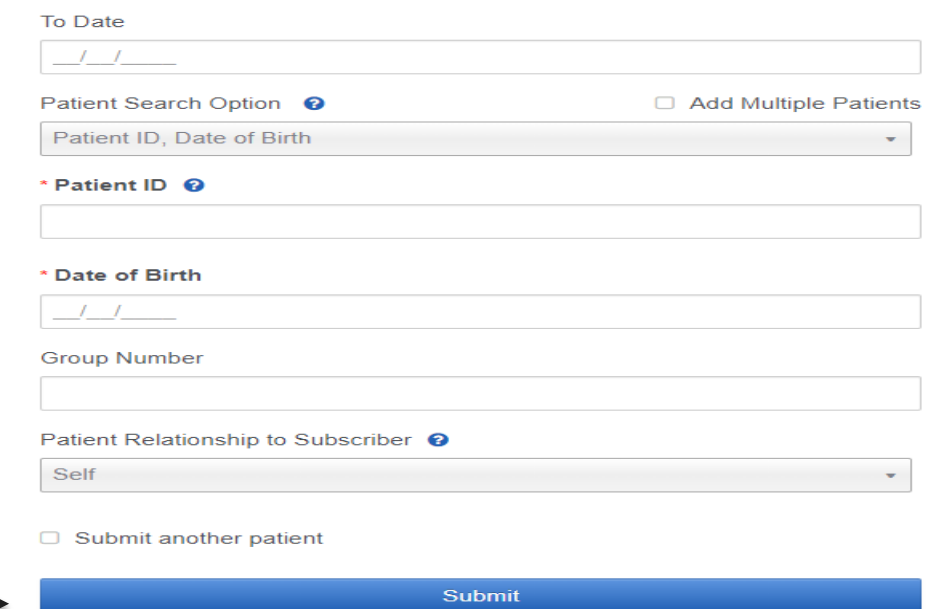
- Patient information
  - Patient search option
    - The default option for patient search is set to Patient ID and Date of Birth
    - To use different criteria, choose options from the drop-down list

Patient Search Option 



A screenshot of a dropdown menu for 'Patient Search Option'. The menu is open, showing a search bar at the top with a magnifying glass icon. Below the search bar, several search criteria are listed: 'Patient ID, Date of Birth' (highlighted in blue), 'Patient Last Name, Patient First Name, Date of Birth', 'Patient ID, Patient Last Name, Patient First Name', 'Patient ID, Patient Last Name, Patient First Name, Date of Birth', 'Patient ID, Patient Last Name, Date of Birth', 'Patient ID, Patient First Name, Date of Birth', 'Patient ID, Patient First Name', and 'Patient ID, Patient Last Name'.

Patient Information



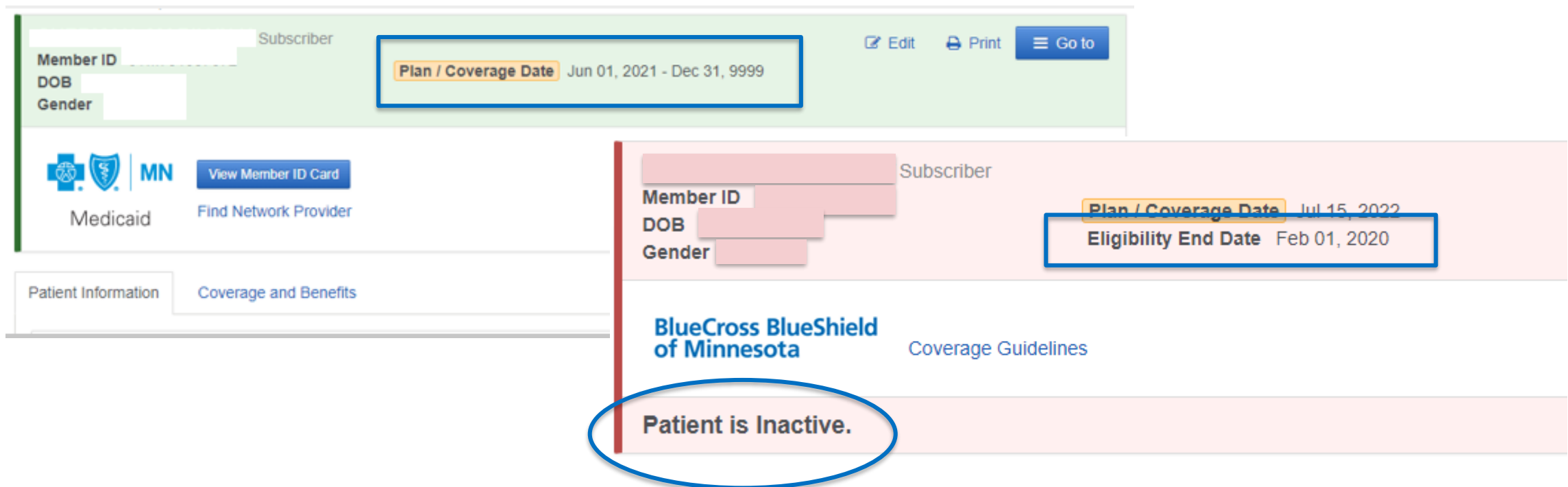
A screenshot of a 'Patient Information' form. It includes a 'To Date' field with a date picker, a 'Patient Search Option' dropdown menu (set to 'Patient ID, Date of Birth'), an 'Add Multiple Patients' checkbox, a 'Patient ID' field, a 'Date of Birth' field with a date picker, a 'Group Number' field, a 'Patient Relationship to Subscriber' dropdown menu (set to 'Self'), and a 'Submit another patient' checkbox. A blue 'Submit' button is located at the bottom right.

- **Click Submit Button to send the inquiry** 

# ELIGIBILITY & BENEFITS, EXAMPLE

Review the Plan/Coverage Date and/or Eligibility End Date fields to verify coverage

- Green indicates coverage is active
- Red indicates coverage is inactive



Subscriber

Member ID [REDACTED]  
DOB [REDACTED]  
Gender [REDACTED]

Plan / Coverage Date Jun 01, 2021 - Dec 31, 9999

Edit Print Go to

Subscriber

Member ID [REDACTED]  
DOB [REDACTED]  
Gender [REDACTED]

Plan / Coverage Date Jul 15, 2022  
Eligibility End Date Feb 01, 2020

BlueCross BlueShield of Minnesota Coverage Guidelines

**Patient is Inactive.**



# THANK YOU

For technical support contact Availity 1-800-282-4548 or 1-800-AVAILITY. Or select **Help & Training | Availity Support** for additional Availity assistance.