

Checking Eligibility in Novitasphere

Updated: 12/09/2024

The Eligibility feature in Novitasphere interfaces directly with the CMS HIPAA Eligibility Transaction System (HETS) to pull back patient information. To check eligibility, enter:

- Beneficiary First Name*
- Beneficiary Last Name*
- Suffix
- Medicare Beneficiary ID or Date of Birth*
- Date(s) of Service*
- * indicates a required field by HETS to obtain information.

To protect the privacy of beneficiary data, the subscriber first name, last name and Medicare Beneficiary ID must match the beneficiary's data maintained by Medicare and is located on the beneficiary's Medicare card; otherwise eligibility data will not populate.

Once submitted, the Eligibility submenu icons tabs will appear as shown below.

- Active icons contain information relevant to the beneficiary.
- Inactive icons indicate that no information was available from HETS for the beneficiary.

The Export button will create a printable file that displays all available information.



Tab Name	Content
Eligibility	End Stage Rental Disease (ESRD) Dates
	Acupuncture Benefits
	Part A and B Eligibility Effective and Termination Dates
	Inactive Periods
	MDPP Eligibility
	Inactive MDPP Periods
Deductible/Caps	Current Year Part A and B base amount and remaining deductible
	Free Services
	Part B Plan Coinsurance and Coinsurance Free
	Blood Deductible units remaining
	Outpatient Mental Coinsurance
	Therapy Cap used amount
	Rehabilitation Session information

Tab Name	Content
Preventative	Smoking cessation sessions remaining, base sessions, and initial session date
Services	Preventive services procedure codes, Technical and Professional dates
	Medicare Diabetes Prevention Program (MDPP) with no prior usage
	MDPP with prior usage
	Services with prior usage
	PPV with no prior usage
	COVID-19 Immunization Influence (Fl.) Variable (Fl.)
	Influenza (Flu) Vaccination Cognitive services
	Gog. mare der vices
MSP	Type Code for why Medicare is secondary
(Medicare	Effective and Termination dates for the primary insurance MCP diagraphia and as
Secondary Payer)	MSP diagnosis codesPolicy Number
	Insurer's name and address
MAP	Name of the beneficiary's insurance
(Medicare	Contractor number, plan number, and plan name
Advantage Plan)	Plan type
Advantago i lanj	MCO Bill Opt Code
	Effective and Termination Dates for the MAP plan
	Address and telephone (if available) for the plan
Hospice/Home	Home Health Certification HCPCS codes and recertification date
Health	Home Health Care start and end dates, earliest and latest billing dates, provider number and
	Medicare contractor name and number.
	 Hospice effective and termination dates, provider number, and revocation code.
Inpatient	Hospital Information
	 Date of earliest/latest billing activity
	 Co-payment information
	Lifetime Reserve Days
	Hospital Stay
	Date of earliest/latest billing activity for spell of illness
	The full Hospital stay begin and end dates.
	Skilled Nursing Facility (SNF) Information Date of conflict (letter billing activity for applied illness).
	Date of earliest/latest billing activity for spell of illness
	Full days remaining in the spell
	 SNF co-payment days remaining and amount
	 If no information populates in the SNF spell fields, the beneficiary
	has all full and co SNF days available for the dates entered.
	SNF Stay
	Psychiatric Information
	 Lifetime Base days
	 Lifetime Psychiatric Remaining days
QMB	QMB Medicaid Enrollment effective date, termination date, and plan type.
(Qualified Medicare	QMB Deductible – This field will always display 0 for a Qualified Medicare Beneficiary
Beneficiary)	QMB Inpatient Spell
	QMB Hospital Information
	QMB SNF Information
PBID (Part B	PBID Effective and termination date
Immunosuppressant	
Drug)	