



JOHNS HOPKINS

M E D I C I N E

JOHNS HOPKINS
HEALTHCARE

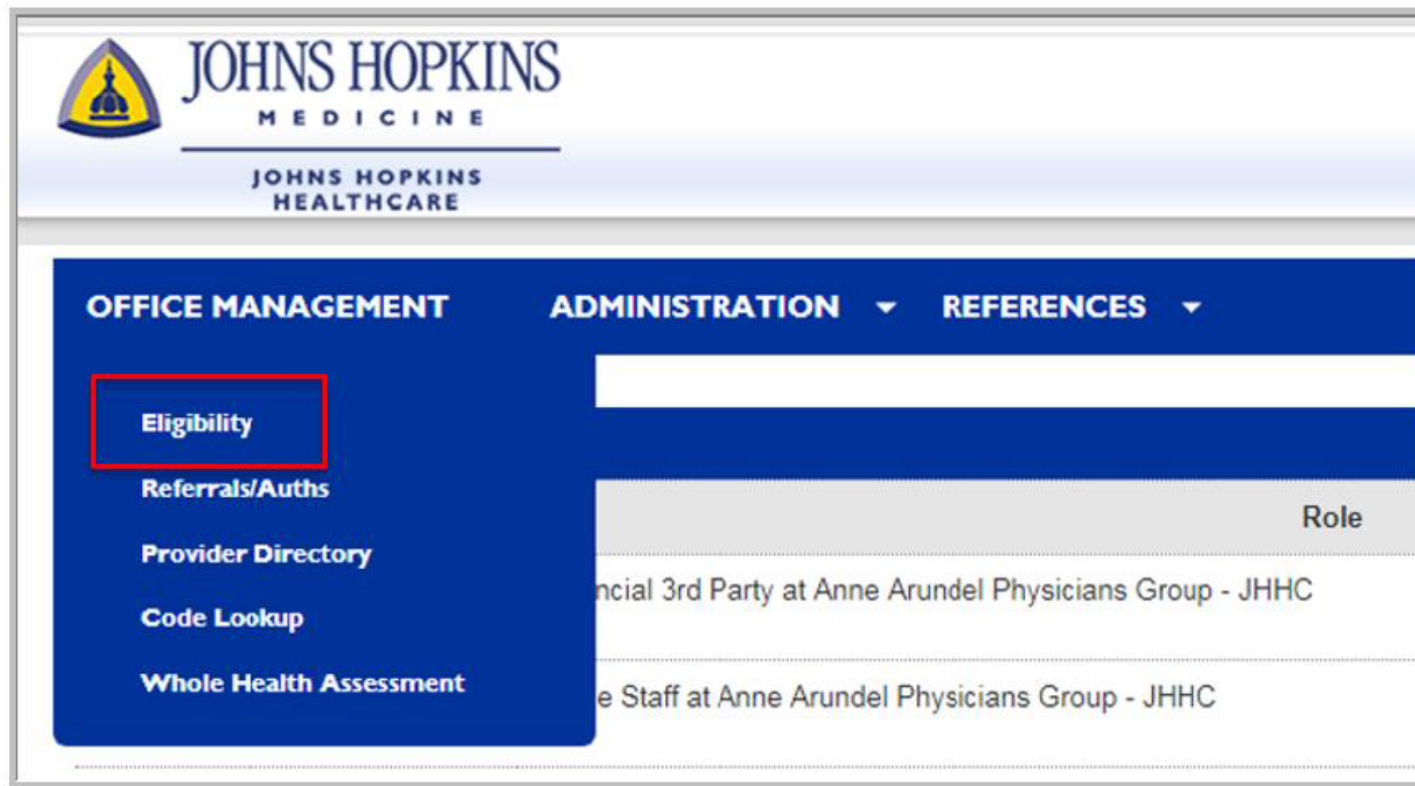
Johns Hopkins HealthCare LLC

How to Check Eligibility in HealthLINK

Presented by: Johns Hopkins HealthCare Provider Relations Department

Step One

1. Go to the Office Management tab from your HealthLINK home page and choose Eligibility.



The screenshot displays the Johns Hopkins HealthCare HealthLINK interface. At the top, the Johns Hopkins Medicine logo is visible, along with the text "JOHNS HOPKINS MEDICINE" and "JOHNS HOPKINS HEALTHCARE". Below this, a navigation bar contains three main sections: "OFFICE MANAGEMENT", "ADMINISTRATION", and "REFERENCES". The "OFFICE MANAGEMENT" section is expanded, showing a list of options: "Eligibility", "Referrals/Auths", "Provider Directory", "Code Lookup", and "Whole Health Assessment". The "Eligibility" option is highlighted with a red rectangular box. To the right of the navigation bar, a table is partially visible, showing a header row with the word "Role" and two data rows. The first data row contains the text "ncial 3rd Party at Anne Arundel Physicians Group - JHHC" and the second data row contains "e Staff at Anne Arundel Physicians Group - JHHC".



Step Two

2. Key in the member ID number and date of birth and click Search.

Eligibility Search

Conduct Eligibility Search

| | | | |
|--|--|--|---|
| Patient | <input type="radio"/> Last Name <input checked="" type="radio"/> Member ID <input type="radio"/> Medicaid ID | <input type="text" value="Test110000001"/> | <input type="text" value=""/> |
| <small>(ID Example - 555555555 444444444)</small> | | | |
| <h4>Search Filters</h4> | | | |
| As of | <input type="text" value="11/28/2018"/> | Birth Date | <input type="text" value="01/01/1940"/> |
| Gender | <input type="text" value="-Select-"/> | Age | <input type="text" value=""/> |
| <input type="button" value="Search"/> <input type="button" value="Clear"/> | | | |



Step Three

3. The member's eligibility information will be displayed. To view benefit information, click on the member's name.

| Name | Sex | Effective Dates | Birth Date | Member ID | Medicaid ID | Primary Care Provider | Product |
|-----------|-----|-----------------|------------|---------------|-------------|--------------------------------|---------|
| Doe, John | M | 1 Jan 2017- | 1 Jan 1940 | test110000001 | | PCP NOT SELECTED OR IS INVALID | |



Step Four

- The Benefit Plan Information will display. Click on the Benefit URL to search the benefit.

| Benefit Plan Information | | | |
|--|---|--------------|-------------------|
| Carrier | Johns Hopkins HealthCare LLC | Start Date | 1 Jan 2018 |
| Product | Employer Health Programs (EHP) | End Date | |
| Network | Employer Health Programs (EHP) | Benefit Plan | Med / RX / Vision |
| Group | JH HEALTH SYSTEM SECURED (E00194) | Relationship | Self |
| Benefits Document(s) | Medical Benefits Vision Benefits Benefit Document Other 8 | | |
| Other Insurance Information | | | |
| No Other Insurance Information is available. | | | |



Step Five

5. If the member has other insurance, the information will be displayed.

| | | | |
|-----------------------------|--|-----------------------------|--------------|
| Insurer Name/Address | NATIONAL ACCOUNT SERVICE PO BOX 9885 BALTIMOREMD 21284 | Effective Dates | 1 Jan 2011 - |
| | | Payor Responsibility | PRIMARY |

