Member Eligibility



Member Eligibility – Helpful Tips

The following is a list of helpful tips to keep in mind when determining a member's eligibility:

- AmeriHealth Caritas VIP Care Plus covers both traditional Medicare and Michigan Medicaid Services.
- MI Health Link members can change plans each month.
- Verify eligibility before each visit.
 - > Ensure member is seeing the appropriate provider.
 - Ensure that plan requirements are met. (Prior Authorizations)
 - Reduce claim issues because you are sending claim to the right plan.
- Make sure the the correct primary care physician (PCP) is listed on the member's identification card.
- Call Provider Services at 1-888-667-0318 with any questions.

Member Eligibility – Ways to Verify Member Eligibility

Providers can verify members' eligibility by using the following provider resources:

- Calling Provider Services at 1-888-667-0318.
- NaviNet.
- Using the Member Identification Card. However, a member's ID card is not a guarantee of eligibility.

Member Eligibility – How Can Members Enroll?

Individuals who want to enroll in one of the MI Health Link plans should contact Michigan ENROLLS at:

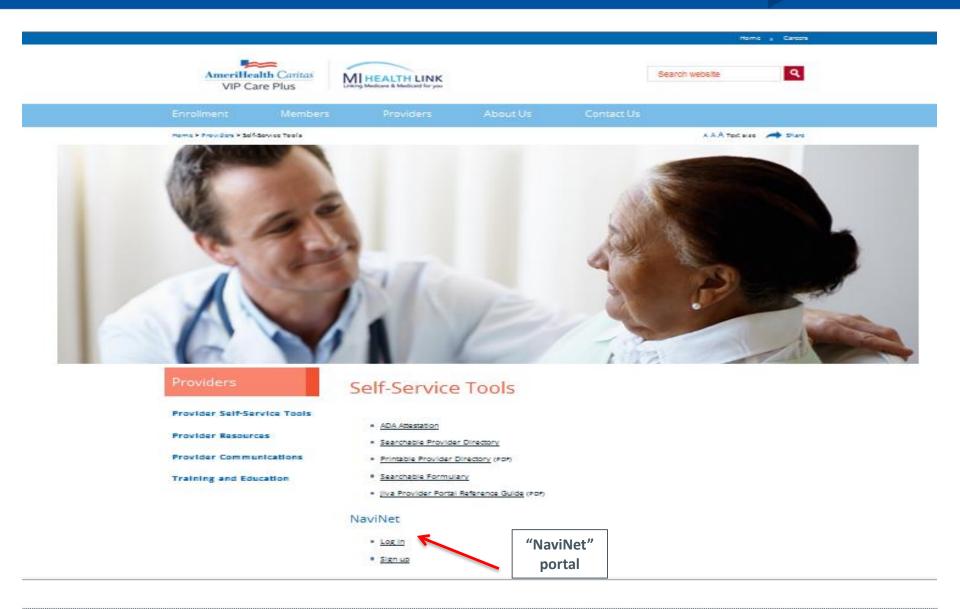
- 1-800-975-7630 to speak with an enrollment counselor Monday through Friday from 8 a.m. 7 p.m.
- TTY users should call 1-888-263-5897.

If individuals who want to enroll have questions they can:

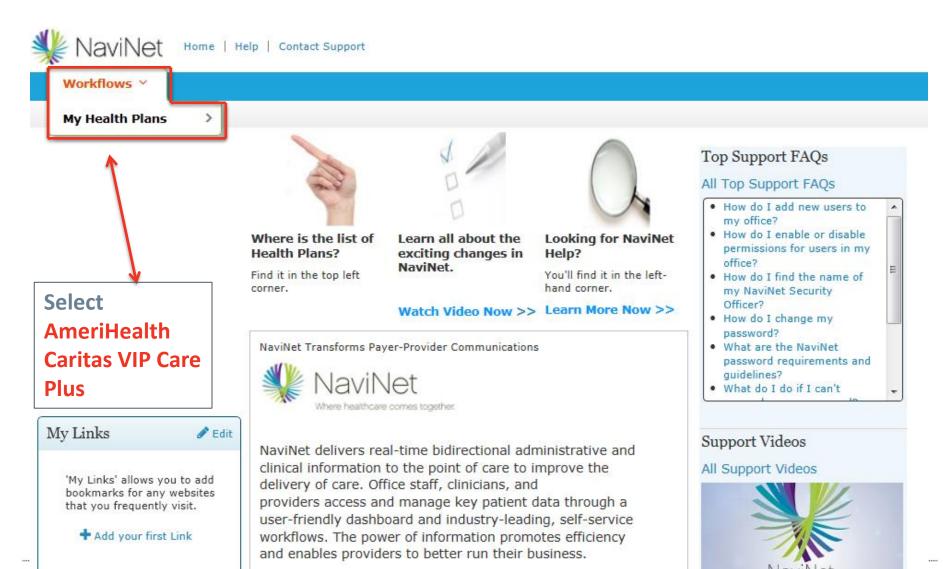
- Call the plan they are interested in directly.
- Call Michigan ENROLLS at 1-800-975-7630 to speak with an enrollment counselor Monday through Friday from 8 a.m. - 7 p.m.

MI Health Link Plans have no ability to enroll or dis-enroll individuals.

Member Eligibility – Using NaviNet to Verify Eligibility (log on directly or from the AmeriHealth Caritas VIP Care Plus Provider Page)



Member Eligibility – Using NaviNet to Verify Eligibility (NaviNet Home Page)



Member Eligibility – Using NaviNet to Verify Eligibility (NaviNet Health Plan Page)



Workflows >

AmeriHealth Caritas VIP Plans

Workflows for this Plan Eligibility and Benefits Inquiry Claim Status Inquiry Claim Submission Report Inquiry Provider Directory Referral Submission Referral Inquiry Pre-Authorization Management Forms

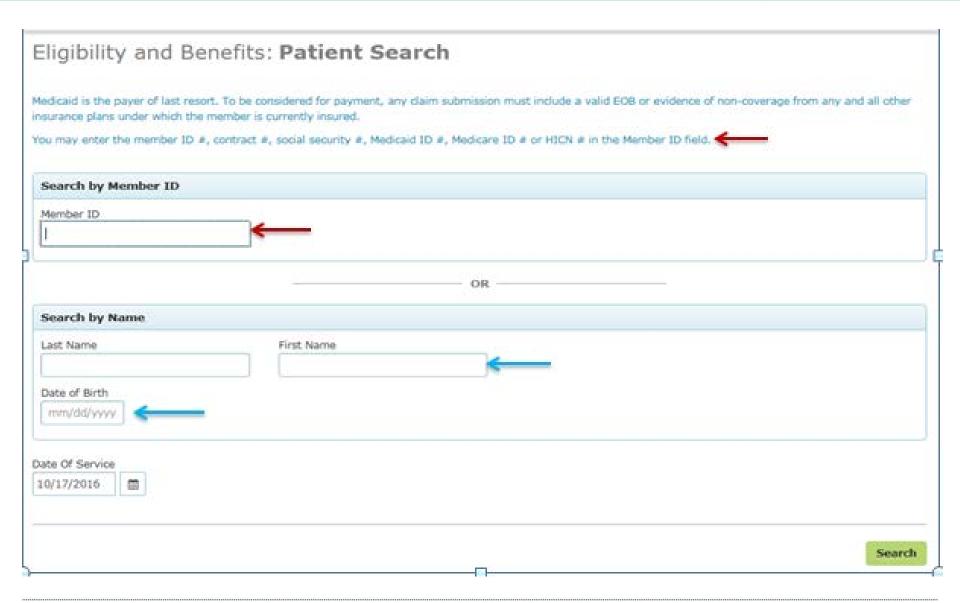
Eligibility and Benefits Inquiry Portal



Welcome to NaviNet

This easy-to-use portal will provide you with the latest plan updates and other pertinent information that will enable you to provide the best care possible to our members. You can search our provider directories, view prior authorization criteria, download forms, and more.

Member Eligibility – Using NaviNet to Verify Eligibility (NaviNet Health Plan Member Eligibility and Benefits Inquiry Page)



Member Eligibility – Using NaviNet to Verify Eligibility (NaviNet Health Plan Page)



Forms

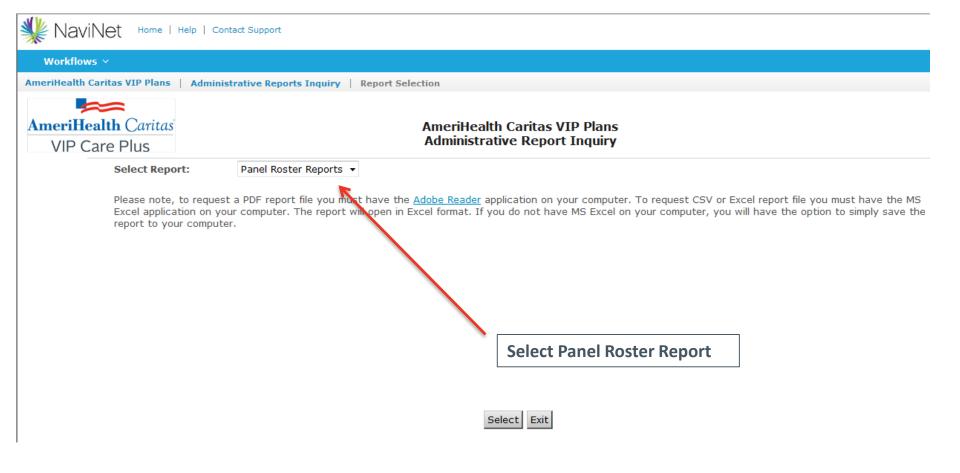


Welcome to NaviNet

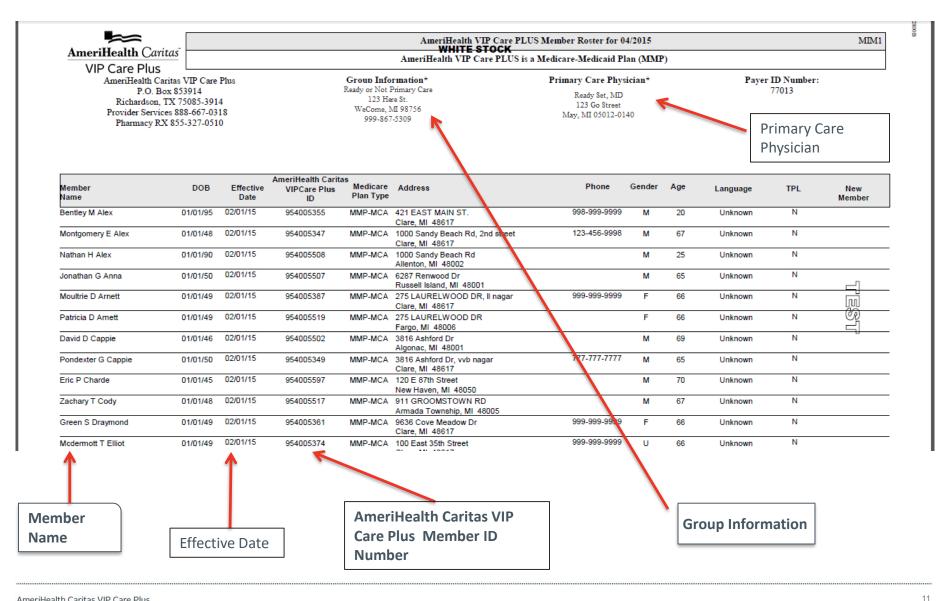
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Select Report Inquiry

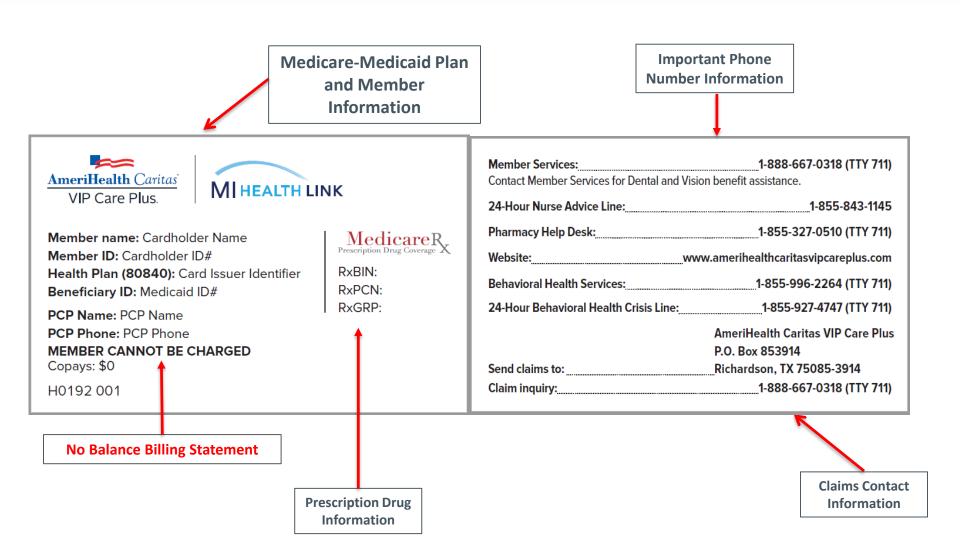
Panel Roster Reports



Panel Roster



Member Eligibility – Member ID Card



AmeriHealth Caritas VIP Care Plus

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