Viewing Medicare Eligibility in the Electronic Verification System (EVS)

To view Medicare eligibility in the Electronic Verification System (EVS), click on the "Other Insurance Detail Information" link on the Eligibility Verification Information page.

Eligibility Verification Information for HVXQOSDCN I IRAPSEU from 07/01/2018 to 07/31/2018		
Recipient ID 30356532844 **Birth Date** 07/27/2002		
Coverage	**Effective Date**	**End Date**
Medicaid Fee For Service	07/01/2018	07/31/2018
Other Insurance Detail Information		

The coverage details will include:

- Carrier Name
- Policy ID (The Policy ID for Medicare Fee-For-Service will be masked and display as XXXXXXXXX)
- Group ID
- Policy Holder
- Coverage Type
- Primary Indicator
- Effective Date and End Date

When recipients are dual-eligible, the EVS screens will no longer display the Specified Low Income Medicare Beneficiary/Qualified Medicare Beneficiary (SLMB/QMB) benefit plans. Providers must check for Medicare coverage.

The following screenshot shows Medicare coverage:

Other Insurance Information for RRCVFHC ZSUTDIPO							Back to Eligibility Verification Request ?	
Carrier Name	**Policy ID**	**Group ID**	**Policy Holder**	**Policy Type**	**Coverage Type**	**Primary**	**Effective Date**	**End Date**
Medicare Part A	XXXXXXXXXX		RRCVFHC ZSUTDIPO		30 (Non Specific)	Yes	03/01/2019	03/31/2019
Medicare Part B	XXXXXXXXXX		RRCVFHC ZSUTDIPO		30 (Non Specific)	Yes	03/01/2019	03/31/2019
Medicare Part D	XXXXXXXXXX		RRCVFHC ZSUTDIPO		30 (Non Specific)	Yes	03/01/2019	03/31/2019

The following screenshot shows Other Insurance coverage:

Print Preview

Other Insurance Information for UVTJ KJLPD							Back to Eligibility Verification Request ?	
Carrier Name	**Policy ID**	**Group ID**	**Policy Holder**	**Policy Type**	**Coverage Type**	**Primary**	**Effective Date**	**End Date**
BLUE CROSS CA	DXS613C08152		ALPDPX KJLPD	HEALTH	PHYSICIAN	Yes	03/01/2019	03/31/2019
BLUE CROSS CA	DXS613C08152		ALPDPX KJLPD	HEALTH	HOSPITALIZATION	Yes	03/01/2019	03/31/2019