

Online Eligibility Checking - Private Health Fund Cover at Pre-Admission

Last Modified on 21/11/2022 4:17 pm ACDT

Online Eligibility Checking - Private Health Fund Cover at Pre-Admission (OEC ECF)

CareRight has the functionality to complete an Online Eligibility Check (OEC ECF) for a patient/client with a health fund.

This can assist hospitals and day surgeries in determining the patient's eligibility for service(s) and any out of pocket expenses for care. It also provides an overview of the information required to ensure the most accurate assessment is provided and that the assessment data is clearly interpreted. Before a Patient Eligibility Check can be performed, consent must be obtained from the patient or a legally authorised representative.

The check will determine whether the patient is eligible for a selected presenting illness/condition as at the admission date. It will detail the out of pocket expenses a patient has for excess and co-payments associated with the hospital product.

The check process utilises the Medicare online claiming web services. The results presented are in accordance with the Medicare specifications. It does not produce an Informed Financial consent (IFC) form.

The check can be performed as part of the Pre-Admission process; or can be delivered as part of an Assessment.

For more information see [OEC \(Online Eligibility Check\)](#).

Creating a Pre-Admission

1. Search for the Patient record.
2. Select **Admissions** from the menu.
 - a. The Admissions screen will display.
3. Select the **Pre-Admit** button.
 - a. The Pre-Admission screen will display.
4. Fill in the relevant fields.
5. Click **Create Pre-admit** button.
 - a. A success message will appear on the next screen.

Performing an Online Eligibility Check

1. Once the Pre-admit has been completed...
2. The OEC button will now be present at the top of the screen.
3. Select the **OEC** button.
 - a. The OEC screen will display.
4. Fill in any relevant information as requested (These are Medicare related fields and not related to CareRight).
5. Update additional services button.
 - a. A message advising that CareRight is communicating with the health fund will display.

6. Once the check is completed the standard Medicare eligibility report will display.

Note: Once an OEC is complete there is some information which will flow through. This information is:

- Excess amounts
 - Co-Payment amounts
 - Additional Services information such as:
 - Service Type
 - Session Type
 - Provider Type
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