

CHECKING BENEFICIARY ELIGIBILITY



DIRECT DATA ENTRY (DDE) MANUAL

CHAPTER 2

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Checking Beneficiary Eligibility Using ELGA

Providers are encouraged to check the beneficiary's Medicare eligibility often. Eligibility should be checked at least prior to admission, monthly and prior to submitting billing transactions for processing. Checking beneficiary eligibility allows you to identify critical information such as whether the beneficiary is/has:

- Entitled to Medicare Part A, Part B, or both Part A and Part B
- Enrolled in a Medicare Advantage (MA) plan
- Enrolled with another insurance that is primary over Medicare
- In an open 60-day HH PPS (Home Health Prospective Payment System) episode
- A prior/current hospice election period
- Met their deductible requirements
- Met the therapy cap for the calendar year

Eligibility records, which are maintained for CMS (Centers for Medicare & Medicaid Services) by the Social Security Administration, are stored electronically in the CWF (Common Working File) system. You can access CWF records to view eligibility information via the eligibility screen, ELGA (Part A eligibility) provided that you have identifying information about your beneficiary.

ELGA is typically used by hospitals and skilled nursing facilities (SNFs).



Note: Beginning fall of 2019, CMS discontinued clearinghouse and vendor access to the CWF beneficiary eligibility data when they already access this same data through the HIPAA Eligibility Transaction System (HETS). Providers can continue to submit individual provider queries using the Fiscal Intermediary Standard System (FISS) Direct Data Entry (DDE) Beneficiary/CWF (Option 10). Refer to the CGS FISS DDE Guide, Chapter Three: Inquiry Menu at https://www.cgsmedicare.com/parta/edi/pdf/dde_chapter3.pdf and the MLN article, SE1249 at <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1249.pdf> for additional information.

Information Necessary to Check Eligibility

You must have the following five pieces of information about the beneficiary to check eligibility:

1. HIC (Health Insurance Claim)/MBI (Medicare Beneficiary Identifier) Number (also called their Medicare number)
2. First initial of first name
3. Last name
 - If the beneficiary's name is John Smith Jr., enter "SMITHJR"
4. Date of birth (MMDDCCYY format)
5. Gender



NOTE: Beginning January 1, 2020, you must use the MBI to access eligibility information. Refer to the CMS website at <https://www.cms.gov/Medicare/New-Medicare-Card/index.html> for additional information.

Prior to accessing ELGA, you should verify the information listed above matches the information on the beneficiary's red, white and blue Medicare card.

You must also have your National Provider Identifier (NPI) and the CGS intermediary number (15201 for OH and 15101 for KY) to check eligibility. The Provider Transaction Access Number (PTAN) is no longer used to access eligibility information.

The following provides information about the ELGA eligibility screen.

Accessing ELGA

- To access ELGA as you sign in to the FISS, type the letters ELGA on the 'Welcome to CMS EDC at HPES' screen (where you would normally type FSS0) and press **ENTER**.
 - Providers should not use the Inquiry Option 10 (Beneficiary/CWF) in the Fiscal Intermediary Standard System (FISS) to verify beneficiary eligibility as the information may not be as current as the CWF information that is accessed via ELGA.

```

elgaOME TO CMS CICSA052 - MAC J15 HHH PRODUCTION

      A C P F A 0 5 2      MVS/ESA VER 2R01 SP7.2.1 M2827      CICS TS 4.2.0
      NETNAME: T22G1101  TERMINAL: $23A      DATE: 01/09/18      TIME: 08:55:52

      This warning banner provides privacy and security notices
      consistent with applicable federal laws, directives, and other
      federal guidance for accessing this Government system, which
      includes all devices/storage media attached to this system. This
      system is provided for Government-authorized use only.
  
```

To access ELGA if you are already in FISS, press F4 at any time to terminate your session. You will see the **Session Successfully Terminated** message on your screen.

```
SESSION SUCCESSFULLY TERMINATED
```

Type the letters ELGA over the word Session and press **ENTER**.

```
elgaION SUCCESSFULLY TERMINATED
```

- The ability to access multiple sessions (FISS and ELGA) simultaneously is available. Contact your connectivity vendor to learn how to access multiple sessions simultaneously.
 - Remember that ELGA is not a menu option within FISS. You must be in the process of signing on or off of FISS in order to access ELGA.
- Once you have pressed Enter, the CWF Part A Eligibility System screen appears.

```

ELGA                      CWF PART A ELIGIBILITY SYSTEM
ELGASAT1
MM/DD/CCYY HH:MM:SS      INQUIRY BY PROVIDERS
      ENTER THE FOLLOWING FIELDS:
              HIC/MBI NUMBER :
              SURNAME         :
              INITIAL         :
              DATE OF BIRTH   :          (MMDDCCYY)
              SEX CODE        :
              REQUESTOR ID    :
              INTER NO        :
              NPI NO          :
              HOST-ID         :          GL, GW, KS, MA, PA, NE, SE, SO, SW
              APP DATE        :          (MMDDCCYY)
              REASON CODE     : 1
              RESPONSE CODE   : P
  
```

- Complete the required fields as indicated below.

Field Name	What to Enter
HIC/MBI NUMBER	The beneficiary's Health Insurance Claim (HIC) number or Medicare Beneficiary Identifier (MBI) number. Beginning January 1, 2020, you must use the MBI to access eligibility information. Refer to the CMS website at https://www.cms.gov/Medicare/New-Medicare-Card/index.html for additional information.
SURNAME	The beneficiary's last name (only accepts up to 6 letters). Note: If the beneficiary's name is John Smith Jr., enter "SMITHJ"

Field Name	What to Enter											
INITIAL	The first letter of beneficiary's first name.											
DATE OF BIRTH	The beneficiary's date of birth in a MMDDCCYY format.											
SEX CODE	The beneficiary's gender (M or F).											
REQUESTOR ID	The requestor ID number 0011											
INTER NO	The Medicare intermediary number 15201 for OH, 15101 for KY											
NPI NO	The National Provider Identifier (NPI).											
HOST ID	Usually left blank or insert one of the following. See the table under "Information About the HOST ID Field" found later in this chapter. <table><tr><td>GL – Great Lakes</td><td>GW – Great Western</td><td>KS – Keystone</td></tr><tr><td>MA – Mid-Atlantic</td><td>PA – Pacific</td><td>NE – Northeast</td></tr><tr><td>SE – Southeast</td><td>SO – South</td><td>SW– Southwest</td></tr></table>			GL – Great Lakes	GW – Great Western	KS – Keystone	MA – Mid-Atlantic	PA – Pacific	NE – Northeast	SE – Southeast	SO – South	SW– Southwest
GL – Great Lakes	GW – Great Western	KS – Keystone										
MA – Mid-Atlantic	PA – Pacific	NE – Northeast										
SE – Southeast	SO – South	SW– Southwest										
APP DATE	When left blank, the APP DATE field defaults to the current date. Entering a date into the APP DATE field (MMDDCCYY format) will affect the eligibility information that is displayed relating to: <ul style="list-style-type: none">• Medicare Secondary Payer (MSP) records• Hospital/SNF stays• Home health prospective payment system (HH PPS) episodes• Hospice benefit periods• Part B deductible• Therapy cap More detailed information about using the APP DATE field can be found under the heading "Information about the APP DATE Field" found later in this chapter.											
REASON CODE	Reason for the inquiry: 1 – Status Inquiry (default)											
RESPONSE CODE	Indicates whether the inquiry is an actual test or CWF test inquiry: P – Production (default)											

- The example below illustrates how the CWF Part A Eligibility System screen looks after the information is completed, but before the Enter key is pressed.

ELGA	CWF PART A ELIGIBILITY SYSTEM	ELGHSAT1
MM/DD/CCYY HH:MM:SS	INQUIRY BY PROVIDER	
ENTER THE FOLLOWING FIELDS:		
HIC/MBI NUMBER	:	xxxxxxxxxx
SURNAME	:	smith
INITIAL	:	j
DATE OF BIRTH	:	01011931 (MMDDCCYY)
SEX CODE	:	m
REQUESTOR ID	:	0011
INTER NO	:	15004
NPI NO	:	1234567890
HOST-ID	:	GL, GW, KS, MA, PA, NE, SE, SO, SW
APP DATE	:	(MMDDCCYY)
REASON CODE	:	1
RESPONSE CODE	:	P

- Once you have keyed the information on the CWF Part A Eligibility System screen, press **ENTER**. The system will indicate that it's searching for the record.
 - If you receive an error message, refer to the information under the heading "Error Messages" found later in this chapter.
- When the information is entered accurately and the record is located at the host site, the first page of the beneficiary's eligibility record will display on your screen.
 - The eligibility record will have several pages of information. Use your F8 key to page forward through the beneficiary eligibility pages. Use your F7 key to page back.

6. If you want to look up another beneficiary's eligibility information or need to enter an APP DATE, press **F1** from any of the CWF inquiry pages, and you will return to the CWF Part A Eligibility System screen.
7. When you are finished viewing the record, press **F3**. You will return to a blank screen. You may:
 - a. Type **FSS0** and press **ENTER** to access FISS; or
 - b. Type **logoff** and press **ENTER** to return to the "TPX Menu" screen. Enter **/k** to return to the DXC Virtual Data Center screen

Information about the HOST ID Field

The HOST ID field is related to different CWF host sites where beneficiary records are stored. Records are stored based on the location where the beneficiary's Social Security Number was issued. There are nine host sites as identified in the following table.

GL – Great Lakes	GW – Great Western (default)			KS – Keystone
<ul style="list-style-type: none"> • Illinois • Michigan • Minnesota • Wisconsin 	<ul style="list-style-type: none"> • Idaho • Iowa • Kansas • Missouri 	<ul style="list-style-type: none"> • Idaho • Iowa • Kansas • Missouri 	<ul style="list-style-type: none"> • Montana • Nebraska • North Dakota • Oregon • South Dakota • Utah 	<ul style="list-style-type: none"> • Delaware • New Jersey • New York • Pennsylvania

MA – Mid-Atlantic	NE – Northeast		PA – Pacific
<ul style="list-style-type: none"> • Indiana • Maryland • Ohio 	<ul style="list-style-type: none"> • Virginia • West Virginia 	<ul style="list-style-type: none"> • Connecticut • Maine • Massachusetts 	<ul style="list-style-type: none"> • New Hampshire • Rhode Island • Vermont • Alaska • Arizona • California • Hawaii • Nevada


SE – Southeast	SO – South	SW – Southwest
<ul style="list-style-type: none"> • Alabama • Kentucky • Mississippi 	<ul style="list-style-type: none"> • North Carolina • South Carolina • Tennessee 	<ul style="list-style-type: none"> • Florida • Georgia • Arkansas • Colorado • Louisiana • New Mexico • Oklahoma • Texas

The default HOST-ID is always GW. If the beneficiary's information cannot be found at the default host site, you may need to look for the beneficiary's information at another host site by entering a two-character HOST-ID site (e.g., SO). You may need to try each of the different host sites before finding the beneficiary's information. Note: Once you have accessed beneficiary eligibility information, it is no longer necessary for you to enter the HOST ID code as the system retains this information.

Information about the APP DATE Field

The ELGA screen displays beneficiary eligibility information. By using the APP DATE field, you can view the data that impacts your dates of services. When this field is left blank, the following eligibility information, if applicable, will display data based on the current date. By entering a date (MMDDCCYY) into the APP DATE field, the following information will display data based on the date entered:

- Medicare Secondary Payer (MSP) records
- Hospital/SNF stays
- Home Health Prospective Payment System (HH PPS) episodes
- Hospice benefit periods
- Part B deductible
- Therapy cap
- Medicare Advantage (MA) plans

To Access:	Action:
Prior MSP Records	<p>Type the beneficiary's date of admission to your facility or the date services were provided by your facility.</p> <p>To access prior MSP records, type the beneficiary's Medicare Part A or Part B effective date in the APP DATE field. MSP information will appear beginning on screen page 16. One additional page will display for each MSP record that exist.</p>
Prior Hospital/SNF Stay	<p>Type the beneficiary's date of admission to your facility or the date services were provided by your facility.</p> <p>Screen page 01 of ELGA displays the dates of the most recent hospital/SNF benefit period dates in the DOEBA and DOLBA fields, based on the APP DATE entered.</p> <p>For the earliest hospital/SNF stay, type the beneficiary's Medicare Part A or Part B effective date in the APP DATE field. To find if a subsequent hospital/SNF stay occurred, enter a date in the APP DATE field that is one day after the DOLBA date of the hospital stay.</p> <div>  <p>NOTE: The information for the most current inpatient stay may not be available if the hospital/SNF has not submitted their billing to Medicare. In addition, if a beneficiary has had multiple inpatient stays during a benefit period, you will see the date of admission of the earliest inpatient stay in the DOEBA field and the date of discharge of the latest inpatient stay in the DOLBA field, based on the APP date entered.</p> </div>
Prior HH PPS Episodes	<p>Type the beneficiary's date of admission to your facility or the date services were provided by your facility. In certain instances such as a beneficiary transfer between home health agencies, it may be necessary to enter a date that is one calendar day prior to your date of admission or dates of service.</p> <p>Page 04 of ELGA displays the two most recent HH PPS episodes based on the APP DATE entered.</p> <p>To find if prior HH PPS episodes exist, type the date that is prior to the START DATE of the earliest episode listed.</p>
Prior Hospice Benefit Periods	<p>When the APP DATE field is left blank ELGA (Page 2) will display the 5 most recent hospice benefit periods. To determine if there are any hospice benefit periods prior to the start date of Period 1, enter a date that is one day less than the START Date.</p>
Prior Part B deductible	<p>Type the beneficiary's date of admission to your facility or the date services were provided by your facility.</p> <p>Screen page 01 of ELGA will provide the Part B deductible year and deductible amount remaining based on the APP DATE entered.</p>
Prior Therapy Cap	<p>Type the beneficiary's date of admission to your facility or the date services were provided by your facility.</p> <p>Screen page 01 ELGA will provide the therapy cap amount remaining for the year based on the APP DATE entered.</p>
Prior Medicare Advantage (MA) plans	<p>Type the beneficiary's date of admission to your facility or the date services were provided by your facility.</p> <p>To display prior MA plan information on screen page screen page 01 of ELGA, the date entered in the APP DATE field must match the MA enrollment date, termination date, or be within the enrollment and termination date.</p>

Error Messages

- If you receive an error message **“Provider not on security file,”** contact the CGS Electronic Data Interchange (EDI) department at 1.866.590.6703 (select Option 2) and request your security be modified to allow access to ELGA.
- If the message **“BENE-ERROR, BENEFICIARY RECORD NOT FOUND”** displays, verify the information that was entered. There may be a data entry error preventing the system from finding the beneficiary's record. You may also want to enter various HOST ID codes, one at a time, to see if the beneficiary's record is at another HOST-ID site.

- If a message appears containing the phrase **“TNIF”** (True Not in File), the eligibility file is being updated and this update may prevent you from being able to access the eligibility file for a short period of time. Try accessing the file at a later time.
- If the message **“Following Fields in Error – Correct and Resubmit”** displays, not all of the required information is keyed or the information keyed is invalid. The message will also identify which field is in error.

ELGA Screen Examples and Field Descriptions

The ELGA screens are typically accessed by hospitals and skilled nursing facilities (SNFs). This information includes:

- Hospital and SNF stay dates and number of benefit days remaining
- Detailed MSP information
- Date of earliest and latest billing action for home health services

Field descriptions for ELGA follow each set of screen examples.



All dates shown on the ELGA screens are in MMDDCCYY format unless otherwise noted.



ELGA Screen Page 01—Beneficiary Information (Beneficiary Entitlement, Hospital and SNF Days, Medicare Advantage Plan Information)

ELGA MM/DD/CCYY		CFW HH:MM:SS	PART A ELIGIBILITY SYSTEM BENEFICIARY INFORMATION				ELGACRO PAGE 01 OF XX	
IP-REC	CN		NM	IT	DB	SX	INT	
NPI		APP		REAS		REQ		
DIS-CODE		MSG						
CORRECT	CN		NM	IT	DB	SX		
A-ENT		A-TRM		B-ENT		B-TRM		
DOD		LRSV	LPSY					
DAYS LEFT	FULL-HOSP	CO-HOSP	FULL-SNF	CO-SNF	IP-DED	DOEBA	DOLBA	
CURRENT								
PARTB YR		DED-TBM	PSYC	PHYS THER APL	OCC THER APL			
FULL-NAME								
PLAN-TYPE				CURR-ID	OPT	ENR	TERM	
ESRD:	CODE-1	EFF DATE		CODE-2	EFF DATE			
PF1=INQ	SCREEN	PF3/CLEAR=END		PF8=NEXT				




ELGA does not display periods of inactive eligibility for beneficiaries who are in the country unlawfully, have been deported or are incarcerated. However, inactive eligibility periods are available by accessing the eligibility tab in the myCGS online Web portal. For additional information about myCGS, refer to the *myCGS User Guide* at http://www.cgsmedicare.com/ohb/myCGS/User_Manual.pdf on the CGS website. Inactive eligibility information is also available from the Medicare Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System (HETS). The HETS User Guide is available at: <https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/HETSHelp/Downloads/HETS-UI-User-Guide.pdf>. For information about HETS, refer to the Medicare Learning Network (MLN) Matters® article, SE1249 which is available at: <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1249.pdf>

ELGA Screen Page 01 Field Descriptions

IP-REC	For intermediary use only.
CN	The beneficiary's Health Insurance Claim Number (HICN) or Medicare Beneficiary Identifier (MBI) as entered on the Common Working File (CWF) Part A Eligibility System screen.
NM	The beneficiary's last name as entered on the CWF Part A Eligibility System screen.
IT	The first letter of beneficiary's first name as entered on the CWF Part A Eligibility System screen.
DB	The beneficiary's date of birth as entered on the CWF Part A Eligibility System screen.
SX	The beneficiary's gender as entered on the CWF Part A Eligibility System screen.
INT	The Medicare intermediary number as entered on the CWF Part A Eligibility System screen.
	If any of the information shown in the above fields appears in a different color, note the correct information found in the corresponding field on the "correct" line. Ensure that you update your records and submit claims that reflect the correct information.
NPI	Your facility's National Provider Identifier (NPI) as entered on the CWF Part A Eligibility System screen.
APP	The date as entered in the APP DATE field on the CWF Part A Eligibility System screen. If APP DATE field is left blank, this field will be blank.
REAS	The reason for this inquiry as entered on the CWF Part A Eligibility System screen. Valid codes: 1 – Status Inquiry (default); 2 – Inquiry relating to an admission.
REQ	The requester ID as entered on the CWF Part A Eligibility System screen (0011).
DISP-CODE	Disposition Code: (This field only displays when one of the following codes apply.) 05 – Applicable service date; DOD 50 – Not in file 51 – Not in file on CMS batch system 52 – Host Site ID error on database 55 – Does not match a master record 60 – Input/Output error on database 61 – Cross reference database problem
MSG	The description of the disposition code (DISP CODE). (This field only displays when one of the disposition codes listed above applies.)
	Information in the first five fields listed below (CORRECT CN, NM, IT, DB, SX) will only display if the data entered on the CWF Part A Eligibility System screen was incorrect or has been updated. When submitting claims to Medicare, use the corrected information (if available) to avoid claim submission errors. The remaining fields display the beneficiary's eligibility information.
CORRECT CN	Corrected claim number.

ELGA Screen Page 01 Field Descriptions	
NM	Corrected name.
IT	Corrected initial.
DB	Corrected date of birth.
SX	Corrected sex code.
A-ENT	The beneficiary's date of entitlement to Medicare Part A benefits.
A-TRM	The beneficiary's date of termination from Medicare Part A benefits.
B-ENT	The beneficiary's date of entitlement to Medicare Part B benefits.
B-TRM	The beneficiary's date of termination from Medicare Part B benefits.
DOD	Date of death of the beneficiary.
LRSV	Lifetime Reserve. Number of lifetime reserve days remaining.
LPSY	Lifetime Psychiatric. Number of psychiatric days remaining.
FULL-HOSP	The full hospital inpatient days remaining in the current benefit period.
CO-HOSP	The hospital inpatient coinsurance days remaining in the current benefit period.
FULL-SNF	The full skilled nursing facility (SNF) days remaining in the current benefit period.
CO-SNF	The SNF coinsurance days remaining in the current benefit period.
IP-DED	The amount of inpatient deductible remaining to be met.
DOEBA	The date of earliest billing action for an inpatient spell of illness in the current benefit period.
DOLBA	The date of the latest billing action for an inpatient spell of illness in the current benefit period.
PART B YR	Most recent Part B year (CCYYMMDD).
DED-TBM	The amount of Part B cash deductible remaining to be met for the year.
PSYC	The psychiatric deductible used for the year.
PHYS THER APL	The physical therapy and speech-language pathology (combined) cap amount applied in the Part B year.
OCC THER APL	The occupational therapy cap amount applied in the Part B year.
FULL-NAME	The beneficiary's full name as it appears on the Common Working File (CWF) master record. When submitting claims to Medicare, use the full name as it appears in this field to avoid claim submission errors.
PLAN-TYPE	<p>This field provides the type of Medicare Advantage (MA) plan (previously referred to Medicare Health Maintenance Organization (HMO)). Valid values are:</p> <ul style="list-style-type: none"> • HMO (Health Maintenance Organization) • PPO (Preferred Provider Organization) • FFS Demo (Fee-for-Service Demonstration) • Indemnity • POS (Point of Sale)
CURR ID	<p>The MA plan identification code (5-digits):</p> <ul style="list-style-type: none"> • 1st digit – Letter or number • 2nd and 3rd digit – State Code • 4th and 5th digit – MA plan number within the State • You can use the PLAN-ID code to look up contact information for the MA plan by accessing the MA Plan directory. More information about accessing this resource is available below.

ELGA Screen Page 01 Field Descriptions	
OPT	<p>The MA plan Option Code. Describes the beneficiary's relationship with the MA plan. Valid codes are:</p> <ul style="list-style-type: none"> • 1 – Intermediary processes all (Part A and Part B) provider bill (unrestricted). Submit your claim to the intermediary. • 2 – HMO processes directly provided services and arranged services. Intermediary processes all others (unrestricted). • A – Intermediary processes all (Part A and Part B) provider bills (restricted). • B – HMO to processes only bills for directly provided services (restricted); intermediary to process all other bills. • C – HMO to process all bills (restricted). Submit your claim to the Medicare Advantage plan.
ENR	The MA plan enrollment date.
TERM	The MA plan termination date.
	<p>If the MA plan listed on this screen impacts your dates of service, CGS encourages providers to verify this information with the beneficiary. If the MA plan election listed is correct, providers must look to the MA plan for reimbursement and a claim should not be submitted to CGS, with the exception of Option Code 1. If the MA plan election is listed in error, a claim should not be submitted until the beneficiary's record has been updated. Providers are also encouraged to use ELGA page 17 to determine if the beneficiary has elected hospice. If the beneficiary has elected hospice and has an MA plan, all services (including those not related to the terminal diagnosis) are billed as usual to CGS, or other Medicare Fee-for-Service contractor (e.g., intermediary, Medicare administrative contractor (MAC)). Access the following link from the CMS website and click "MA Plan Directory" to determine which MA plan is associated with the identification code and how to contact the plan to submit services for payment or update incorrect enrollment or termination dates, when appropriate (http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDENrolData/MA-Plan-Directory.html).</p>
ESRD: – CODE-1	The End Stage Renal Disease (ESRD) method of reimbursement (Method 1 or Method 2).
EFF DATE	The ESRD method of reimbursement effective date.
CODE-2	The ESRD method of reimbursement (Method 1 or Method 2).
EFF DATE	The ESRD method of reimbursement effective date.

ELGA Screen Page 02—Rehabilitation Sessions

ELGA	CWF	PART A	ELIGIBILITY SYSTEM	ELGACRO
MM/DD/CCYY	HH:MM:SS		REHABILITATION SESSIONS	PAGE 02 OF XX
IP-REC CN		NM	IT DB SX	INT
	TECH	PROF		
PULMONARY REMAINING: (HCPC:G0424)		72	72	
CARDIAC APPLIED: (HCPCS:93797,93798)		0	0	
ICR APPLIED: (HCPCS:G0422,G0423)		0	0	
PF1=INQ SCREEN	PF3/CLEAR=END	PF7=PREV	PF8=NEXT	

ELGA Screen Page 02 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

PULMONARY REMAINING: (HCPC: G0424)	The pulmonary rehabilitation services remaining.
CARDIAC APPLIED: (HCPCS: 93797, 93798)	The cardiac rehabilitation services applied.
ICR APPLIED: (HCPCS: G0422, G0423)	The intensive cardiac rehabilitation services applied.

ELGA Screen Page 03—Home Health Benefit Periods

This screen should not be used to determine a beneficiary's status in a home health episode. (See "ELGA Screen Page 04" on the following page, for home health episode information.)

ELGA MM/DD/CCYY		CWF HH:MM:SS	PART A ELIGIBILITY SYSTEM HOME HEALTH BENEFIT PERIODS				ELGACRO PAGE 03 OF XX
IP-REC	CN		NM	IT	DB	SX	INT
EARLIEST BILLING DATE		LATEST BILLING DATE		PART A VISITS REMAINING		PART B VISITS APPLIED	
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT							

ELGA Screen Page 03 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

EARLIEST BILLING DATE	The earliest home health billing date.
LATEST BILLING DATE	The latest home health billing date.
PART A VISITS REMAINING	The remaining Part A visits.
PART B VISITS APPLIED	The Part B visits that have been applied.

ELGA Screen Page 04—Home Health PPS Episodes

This screen will display the two most recent Home Health Prospective Payment System (HH PPS) episodes based on the APP DATE entered in the CWF Part A Eligibility System screen.

ELGA MM/DD/CCYY		CWF HH:MM:SS	PART A ELIGIBILITY SYSTEM HOME HEALTH PPS EPISODES				ELGACRO PAGE 04 OF XX
IP-REC	CN		NM	IT	DB	SX	INT
EPISODE START		EPISODE END		DOEBA		DOLBA	
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT							

ELGA Screen Page 04 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

EPISODE START	The first day of the 60-day HH PPS episode. (Two most recent home health episodes.)
EPISODE END	The last day of the 60-day HH PPS episode. (Two most recent home health episodes.)
DOEBA	Date of Earliest Billing Action (DOEBA). The date of the first billable visit in the home health episode. If this field is blank or contains zeroes (0000000), a final claim has not been processed for this episode of care.
DOLBA	Date of Latest Billing Action (DOLBA). The date of the last billable visit in the home health episode. If this field is blank or contains zeroes (0000000), a final claim has not been processed for this episode of care.



This screen displays the two most recent HH PPS episodes based on the APP DATE entered. The most recent episode will appear on the top line. To determine if prior episodes exist, make a note of the earliest date that displays in the "EPISODE START" field, and press F1 to return to the CWF Part A Eligibility System screen. Ensure that all required fields are complete. Tab to the APP DATE field. Enter a date that is one day prior to the earliest episode start date. For example, if the date in the "EPISODE START" field appeared as 09172012, enter 09162012 in the APP DATE field and press **Enter**. ELGA Page 01 appears. Use your F8 key to page forward to ELGA Page 04. The two most recent HH PPS episodes, if there are any, will display based on the APP DATE entered. To see if additional episodes prior to the start date of these episodes exist, repeat the process by noting the earliest episode start date, pressing F1, and entering a date that is one day prior to the earliest episode start date in the APP DATE field.

ELGA Screen Page 05—Screening Information

ELGA MM/DD/CCYY		CWF HH:MM:SS	PART A ELIGIBILITY SYSTEM SCREENING INFORMATION				ELGACRO PAGE 05 OF XX
IP-REC	CN		NM	IT	DB	SX	INT
	HCPCS CODE	TECH/ PROF	RECENT DATES OF SERVICE				
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT							

ELGA Screen Page 05 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

HCPCS CODE	The HCPCS code for the screening service provided to this beneficiary.
TECH/PROF	Indicates whether the technical or professional component was billed. Valid entries: 26 – professional TC – technical
RECENT DATES OF SERVICE	The three most recent dates of service provided for each screening service HCPCS code listed (MMDDCCYY).

ELGA Screen Page 06—Next Eligible Date

ELGA		CWF		PART A		ELIGIBILITY SYSTEM		ELGACRO	
MM/DD/CCYY		HH:MM:SS		NEXT ELIGIBLE DATE				PAGE 06 OF XX	
IP-REC	CN	NM		IT	DB	SX	INT		
PREVENTIVE	SERVICE	TECH	DTE	PROF	DTE	PREVENTIVE	SERVICE	TECH	DTE
		MMDDCCYY	MMDDCCYY					MMDDCCYY	MMDDCCYY
CARDIOVASC	(80061)	01012005	01012005		PCB EXAM	(G0101)		GDRNOELG	GDRNOELG
CARDIOVASC	(82465)	01012005	01012005		PV 90732,90669,90670		VACCINTD	VACCINTD	
CARDIOVASC	(82718)	01012005	01012005		PROSTATE	(G0102)	01012000	01012000	
CARDIOVASC	(84478)	01012005	01012005		PROSTATE	(G0103)	01012000	01012000	
COLORECTAL	(G0104)	09011998	09011998		PAP TEST	(Q0091)	GDRNOELG	GDRNOELG	
COLORECTAL	(G0105)	09011998	09011998		DIABETES	(82947)	01012005	01012005	
COLORECTAL	(G0106)	09011998	09011998		DIABETES	(82950)	01012005	01012005	
COLORECTAL	(G0120)	09011998	09011998		DIABETES	(82951)	01012005	01012005	
COLORECTAL	(G0121)	07012001	07012001		GLAU (G0117,G0118)		01012002	01012002	
FOB TEST	(G0107)	09011998	09011998		MAMM (G0202,G0203)		GDRNOELG	GDRNOELG	
FOB TEST	(G0328)	01012004	01012004		76092,77057,				
FOB TEST	(82270)	01012007	01012007		77067)				
IPP EXAM	(G0344)	SRVNOELG	SRVNOELG		PAPT (P3000,G0123,		GDRNOELG	GDRNOELG	
IPP EXAM	(G0366)	SRVNOELG	SRVNOELG		G0143,G0144,				
IPP EXAM	(G0367)	SRVNOELG	00000000		G0145,G0147,				
IPP EXAM	(G0368)	00000000	SRVNOELG		G0148)				
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT									

The top line of information is carried over from the ELGA screen page 01. Refer to the “ELGA Screen Page 01 Field Descriptions” for information about these fields.

PREVENTIVE SERVICE	The abbreviation of each preventive service and the associated HCPCS codes.		
	Preventive Services	Abbreviation	HCPCS
	Cardiovascular	CARDIOVASC	80061, 82465, 82718, 84478
	Colorectal	COLORECTAL	G0104, G0105, G0106, G0120, G0121
	Fecal Occult Blood Test	FOB TEST	G0107, G0328, 82270
	Initial Preventive Physical Exam	IPP EXAM	G0344, G0366, G0367, G0368
	Pelvic and Clinical Breast Exam	PCB EXAM	G0101
	Pneumococcal Pneumonia Vaccine	PPV	90732, 90669, 90670
	Prostate (including separate next eligible dates for digital rectal examination)	PROSTATE	G0102, G0103
	Pap Test	PAP TEST or PAPT	Q0091, P3000, G0123, G0143, G0144, G0145, G0147, G0148
	Diabetes	DIABETES	82947, 82950, 82951
	Glaucoma	GLAU	G0117, G0118
	Mammography	MAMM	G0202, G0203, 76092, 77057, 77067

TECH DTE and PROF DTE	The next eligible technical or professional date the beneficiary can receive that preventive service.	
	In the event, the beneficiary is not eligible for the preventive service, the technical and professional date fields will display an abbreviated message that explains why the beneficiary is not eligible. These abbreviated messages are:	
	NOPTBENT or PTB	Beneficiary not entitled to Part B or beneficiary's next eligible date is after their Medicare Part B termination date.
	RECEIVED	Beneficiary already received service.
	DODNOELG	Beneficiary not eligible due to date of death.
	GDRNOELG	Beneficiary not eligible due to gender.
	AGENOELG	Beneficiary not eligible due to age.
	SRVNOELG	Beneficiary not eligible for the service.
	VACCINTD	Beneficiary already vaccinated.
	HCPCTERM	HCPCS code for the preventive services has been terminated.
	00000000	Service not applicable.
	DODNOENT or DOD	Next eligible date for the preventive service is after the beneficiary's date of death.

It is important to keep in mind that the eligibility date is calculated based on claims payment history. As claims are processed, the eligibility dates may change; therefore, it is important for providers to check the eligibility status before providing a service.



The Centers for Medicare & Medicaid Services (CMS) has a variety of Medicare Learning Network (MLN) products related to preventive services. These resources are available on the CMS website at: <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/index.html>

ELGA Screen Page 07—Next Eligible Date

ELGA		CWF		PART A		ELIGIBILITY SYSTEM		ELGACRO	
MM/DD/CCYY		HH:MM:SS				NEXT ELIGIBLE DATE		PAGE 07 OF XX	
IP-REC	CN	NM		IT		DB		SX	INT 15004
PREVENTIVE	SERVICE	TECH DTE	PROF DTE			PREVENTIVE	SERVICE	TECH DTE	PROF DTE
		MMDDCCYY	MMDDCCYY					MMDDCCYY	MMDDCCYY
AAA	(76706, G0389)	07012007	07012007						
IPP EXAM	(G0402)	SRVNOELG	SRVNOELG						
IPP EXAM	(G0403)	SRVNOELG	SRVNOELG						
IPP EXAM	(G0404)	SRVNOELG	00000000						
IPP EXAM	(G0405)	00000000	SRVNOELG						
PTWR	(G9143)	08032009	08032009						
AWV	(G0438)	01012011	01012011						
AWV	(G0439)	01012011	01012011						
HCAS	(G0472)	DODNOELG	DODNOELG						
COCS	(G0464/81528)	DODNOELG	00000000						
LDCT	(G0297)	AGENOELG	AGENOELG						
HIV	(G0432,G0433, G0435,G0475)	DODNOELG	SRVNOELG						
HPVS	(G0476)	AGENOELG	00000000						
HBVS	(G0499)	DODNOELG	DODNOELG						
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT									

ELGA Screen Page 07 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

PREVENTIVE SERVICE	The abbreviation of each preventive service and the associated HCPCS codes.		
	Preventive Services	Abbreviation	HCPCS
	Abdominal Aortic Aneurysm	AAA	76706, G0389
	Initial Preventive Physical Exam	IPP EXAM	G0402, G0403, G0404, G0405
	Pharmacogenomic Testing for Warfarin Response	PTWR	G9143
	Annual Wellness Visit – Initial visit	AWV	G0438
	Annual Wellness Visit – Subsequent visit	AWV	G0439
	Hepatitis C Virus Screening	HCAS	G0472
	Colorectal Cancer Screening	COCS	G0464/81528
	Low Dose Computed tomography	LDCT	G0297
	Human Immunodeficiency Virus Screening	HIVS	G0432, G0433, G0435, G0475
TECH DTE and PROF DTE	Human Papillomavirus Screening	HPVS	G0476
	Hepatitis B Screening	HBVS	G0499
	The next eligible technical or professional date the beneficiary can receive that preventive service.		
	In the event, the beneficiary is not eligible for the preventive service, the technical and professional date fields will display an abbreviated message that explains why the beneficiary is not eligible. These abbreviated messages are:		
	NOPTBENT or PTB	Beneficiary not entitled to Part B or beneficiary's next eligible date is after their Medicare Part B termination date	
	RECEIVED	Beneficiary already received service	
	DODNOELG	Beneficiary not eligible due to date of death	
	GDRNOELG	Beneficiary not eligible due to gender	
	AGENOELG	Beneficiary not eligible due to age	
	SRVNOELG	Beneficiary not eligible for the service	
	VACCINTD	Beneficiary already vaccinated	
	00000000	Service not applicable	
	HCPCTERM	HCPCS code for the preventive service has been terminated.	
	DODNOENT or DOD	Next eligible date for the preventive service is after the beneficiary's date of death	

ELGA Screen Page 08—Next Eligible Date

ELGA	CWF	PART A	ELIGIBILITY SYSTEM	ELGHCRO
MM/DD/CCYY	HH:MM:SS		NEXT ELIGIBLE DATE	PAGE 08 OF XX
IP-REC CN	NM	IT	DB	SX
PREVENTIVE SERVICE	TECH DTE	PROF DTE	PREVENTIVE SERVICE	INT 15004
	MMDDCCYY	MMDDCCYY		TECH DTE PROF DTE
				MMDDCCYY MMDDCCYY
PF1=INQ SCREEN	PF3/CLEAR=END	PF7=PREV	PF8=NEXT	

ELGA Screen Page 08 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

PREVENTIVE SERVICE	The abbreviation of each preventive service and the associated HCPCS codes.
TECH DTE and PROF DTE	<p>The next eligible technical or professional date the beneficiary can receive that preventive service.</p> <p>In the event, the beneficiary is not eligible for the preventive service, the technical and professional date fields will display an abbreviated message that explains why the beneficiary is not eligible.</p>

ELGA Screen Page 09—Next Eligible Date

ELGA MM/DD/CCYY	CWF HH:MM:SS	PART A NEXT ELIGIBLE DATE	ELGHCRO PAGE 09 OF XX
IP-REC CN	NM	IT DB SX	INT 15004
PREVENTIVE SERVICE	TECH DTE PROF DTE MMDDCCYY MMDDCCYY	PREVENTIVE SERVICE	TECH DTE PROF DTE MMDDCCYY MMDDCCYY
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT			

ELGA Screen Page 09 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

PREVENTIVE SERVICE	The abbreviation of each preventive service and the associated HCPCS codes.
TECH DTE and PROF DTE	<p>The next eligible technical or professional date the beneficiary can receive that preventive service.</p> <p>In the event, the beneficiary is not eligible for the preventive service, the technical and professional date fields will display an abbreviated message that explains why the beneficiary is not eligible.</p>

ELGA Screen Page 10—HH Certification Plan of Care

Information will only display on Page 10 if the physician submitted their Part B claim for these services. Home health providers may use this information in conjunction with ELGH Page 03 and ELGA Page 04 to determine if the beneficiary is currently receiving or has received prior services under the Medicare home health benefit.

ELGA MM/DD/CCYY	CWF HH:MM:SS	PART A HH CERTIFICATION PLAN OF CARE	ELGACRO PAGE 10 OF XX
IP-REC CN	NM	IT DB SX	INT
REC HCPCS	FROM DT	REC HCPCS	FROM DT
01	11		
02	12		
03	13		
04	14		
05	15		
06	16		
07	17		
08	18		
09			
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT			

ELGA Screen Page 10 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGH Screen Page 01 Field Descriptions" for information about these fields.

REC	Record number.
HCPCS	The HCPCS code submitted by the physician for services provided to certify that the beneficiary is eligible for home health services. Valid HCPCS codes are: <ul style="list-style-type: none"> • G0179 - Physician re-certification for Medicare-covered home health services under a plan of care • G0180 - Physician certification for Medicare-covered home health services under a plan of care
FROM DT	The date of services for either of the two codes above when these codes have been paid.

ELGA Screen Page 11—Telehealth Service Next Elig Date

ELGA	CWF PART A	ELIGIBILITY SYSTEM	ELGACRO
MM/DD/CCYY	HH:MM:SS	TELEHEALTH SERVICE NEXT ELIG DATE	PAGE 11 OF XX
IP-REC CN	NM	IT DB SX	INT

TELEHEALTH SERVICES:HOSPITAL CARE	TELEHEALTH SERVICES:NURSING CARE
HCPCS:99231,99232,99233	HCPCS: 99307,99308,99309,99310
NEXT ELIGIBLE DATE: MM/DD/CCYY	NEXT ELIGIBLE DATE: MM/DD/CCYY
RULE:ALLOW HCPCS 99231,99232, 99233 WITH MODIFIER GQ OR GT OR POS 02 EVERY 4TH DAY	RULE:ALLOW HCPCS 99307,99308, 99309,99310 WITH MODIFIER GQ OR GT OR POS 02 EVERY 31ST DAY

PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT

ELGA Screen Page 11 Field Description

The top line of information is carried over from the ELGA screen page 01.

TELEHEALTH SERVICES: HOSPITAL CARE	Fields that appear below this heading apply to subsequent hospital care services.
HCPCS:	HCPCS codes for subsequent hospital care services, with the limitation of 1 telehealth visit every 3 days.
NEXT ELIGIBLE DATE:	The next eligible date is based on previously received telehealth services for hospital care service. Valid values include: MM/DD/CCYY If a date is present, the next eligible date is the 4th day after the posted date. If the beneficiary had no previous hospital care services the next eligible date field will display 01/01/2011. If the beneficiary's Part B effective date is after the effective date of the hospital care services, the Part B effective date is the next eligible date. NOPTBENT Beneficiary is not entitled to Medicare Part B. DODNOENT Next eligibility date falls after the date of death.
RULE:	The Medicare guideline for telehealth services.
TELEHEALTH SERVICES: NURSING CARE	Fields that appear below this heading apply to subsequent nursing facility care services.
HCPCS:	HCPCS codes for subsequent nursing facility care services, with the limitation of 1 telehealth visit every 30 days.

ELGA Screen Page 11 Field Description

The top line of information is carried over from the ELGA screen page 01.

NEXT ELIGIBLE DATE:	<p>The next eligible date is based on previously received telehealth services for nursing facility care services. Valid values include:</p> <p>MM/DD/CCYY If a date is present, the next eligible date is the 31st day after the posted date. If the beneficiary had no previous nursing facility care services the next eligible date field will display 01/01/2011. If the beneficiary's Part B effective date is after the effective date of the nursing facility care services, the Part B effective date is the next eligible date.</p> <p>NOPTBENT Beneficiary is not entitled to Medicare Part B.</p> <p>DODNOENT Next eligibility date falls after the date of death.</p>
RULE:	The Medicare guideline for telehealth services.

ELGA Screen Page 12—Behavioral Services

ELGA MM/DD/CCYY IP-REC CN	CWF HH:MM:SS	PART A NM	ELIGIBILITY BEHAVIORAL IT	SYSTEM SERVICES DB	ELGACRO PAGE 12 OF XX INT	SX
ALCOHOL ABUSE:	(G0442)	NEXT ELIG PROF:	MM/DD/CCYY			
ALCOHOL SCREENING:	(G0443)	NEXT ELIG PROF:	MM/DD/CCYY		REM XX	
ADULT DEPRESSION:	(G0444)	NEXT ELIG TECH:	MM/DD/CCYY			
		NEXT ELIG PROF:	MM/DD/CCYY			
IBT FOR CVD:	(G0446)	NEXT ELIG TECH:	MM/DD/CCYY			
		NEXT ELIG PROF:	MM/DD/CCYY			
OBESEITY:	(G0447)	NEXT ELIG TECH:	MM/DD/CCYY		REM XX	
		NEXT ELIG PROF:	MM/DD/CCYY		XX	
	(G0473)	NEXT ELIG TECH:	DODNOELG		XX	
		NEXT ELIG PROF:	DODNOELG		XX	
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT						

ELGA Screen Page 12 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

ALCOHOL ABUSE: (G0442)	The preventive service and its associated HCPCS.
NEXT ELIG PROF	<p>Next eligible professional date for the behavioral service. (MM/DD/CCYY)</p> <p>May also display:</p> <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
ALCOHOL SCREENING: (G0443)	The preventive service and its associated HCPCS.
NEXT ELIG PROF	<p>Next eligible professional date for the behavioral service. (MM/DD/CCYY)</p> <p>May also display:</p> <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
REM	Remaining behavioral services available.

ELGA Screen Page 12 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

ADULT DEPRESSION: (G0444)	The preventive service and its associated HCPCS.
NEXT ELIG TECH	Next eligible technical date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
NEXT ELIG PROF	Next eligible professional date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
IBT FOR CVD: (G0446)	The preventive service and its associated HCPCS
NEXT ELIG TECH	Next eligible technical date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
NEXT ELIG PROF	Next eligible professional date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
OBESITY: (G0447, G0473)	The preventive service and its associated HCPCS.
NEXT ELIG TECH	Next eligible technical date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
NEXT ELIG PROF	Next eligible professional date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death • SVCNOELG – Beneficiary not eligible for the service
REM	Remaining behavioral services available.

ELGA Screen Page 13—HIBC Counselling

ELGA	CWF PART A	ELIGIBILITY SYSTEM	ELGACRO
MM/DD/CCYY	HH:MM:SS	HIBC COUNSELLING	PAGE 13 OF XX
IP-REC CN	NM	IT DB SX	INT
STIS: (G0445)		NEXT ELIG TECH DATE: MM/DD/CCYY	
STIS: (G0445)		NEXT ELIG PROF DATE: MM/DD/CCYY	
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT			

ELGA Screen Page 13 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

STIS: (G0445)	Sexually Transmitted Infections (STIs) and HCPCS.
NEXT ELIG TECH DATE:	Next eligible technical date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death
STIC: (G0445)	Sexually Transmitted Infections (STIs) and HCPCS.
NEXT ELIG PROF DATE:	Next eligible professional date for the behavioral service. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death

ELGA Screen Page 14—Bone Density Service Next Elig Date

ELGA	CWF	PART A	ELIGIBILITY SYSTEM	ELGACRO
MM/DD/CCYY	HH:MM:SS	BONE DENSITY SERVICE NEXT ELIG DATE		PAGE 14 OF XX
IP-REC CN		NM	IT DB	SX INT
BONE DENSITY SERVICES				
HCPCS: 76977,G0130,77078,77080,77081, 77085, 0508T, 0554T, 0555T, 0556T, 0557T, 0558T				
NEXT ELIGIBLE TECH DATE: 00/01/0000 NEXT ELIGIBLE PROF DATE: 00/01/0000				
RULE: ALLOW HCPCS 76977,G0130,77078,77080,77081, 77085, 0508T, 0554T, 0555T, 0556T, 0557T, 0558T EVERY 24 MONTHS FOR TECH AND PROF SERVICES				
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT				

ELGA Screen Page 14 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

HCPCS:	HCPCS codes associated with bone density testing.
NEXT ELIG TECH DATE:	Next eligible technical date for bone density testing. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death
NEXT ELIG PROF DATE:	Next eligible professional date for bone density testing. (MM/DD/CCYY) May also display: <ul style="list-style-type: none"> • NOPTBENT – Beneficiary not entitled to Part B • DODNOELG – Beneficiary not eligible due to date of death
RULE	The Medicare preventative benefit provided for bone density testing.

ELGA Screen Page 15—Medicare Care Choices Model

ELGH	CWF PART A	ELIGIBILITY SYSTEM	ELGHCRO
MM/DD/CCYY HH:MM:SS	MEDICARE CARE CHOICES MODEL	PAGE 15 OF XX	
IP-REC CN	NM IT DB SX	INT	
PROVIDER NUMBER	START DATE	TERM DATE	TRANSFER DATE
NO MCCMAUX DATA AVAILABLE FOR THIS HIC			
PF1=INQ SCREEN	PF3/CLEAR=END	PF7=PREV	PF8=NEXT

ELGA Screen Page 15 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

PROVIDER NUMBER	The provider number of the hospice who is participating in the Medicare Care Choice Model (MCCM).
START DATE	The beginning date of a beneficiary's election with the hospice provider participating in the MCCM.
TERM DATE	The ending date of a beneficiary's election of the hospice provider participating in the MCCM.
TRANSFER DATE	The date of the MCCM hospice provider change of ownership.

ELGA Screen Page 16— Supervised Exercise Therapy Sessions

ELGA	CWF PART A	ELIGIBILITY SYSTEM	ELGACRO
MM/DD/CCYY HH:MM:SS	SUPERVISED EXERCISE THERAPY SESSIONS	PAGE 16 OF XX	
IP-REC CN	NM IT DB SX	INT	
TECH			
SET SESSIONS REMAINING: (HCPC:93668)			
PF1=INQ SCREEN	PF3/CLEAR=END	PF7=PREV	PF8=NEXT

ELGA Screen Page 16 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGH Screen Page 01 Field Descriptions" for information about these fields.

SET SESSIONS REMAINING TECH	The number of Supervised Exercise Therapy (SET) sessions remaining.
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ELGA Screen Page 17— Hospice Election Period

ELGA MM/DD/CCYY	CWF PART A HH:MM:SS	ELIGIBILITY SYSTEM HOSPICE ELECTION PERIOD				ELGACRO PAGE 17 OF XX	
IP-REC	CN	NM	IT	DB	SX	INT	
HOSPICE ELECTION		PERIOD	PERIOD	PERIOD	PERIOD		
ELECT DATE							
RECIPT DATE							
REVOC DATE							
REVOC IND							
PROVIDER							
NPI							
NO HOEPAUX DATA AVAILABLE FOR THIS HIC							
PF1=INQ SCREEN		PF3/CLEAR=END		PF7=PREV		PF8=NEXT	

ELGA Screen Page 17 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

HOSPICE ELECTION PERIOD	A maximum of four most recent hospice election periods display
ELECT DATE	Hospice election start date (MMDDCCYY).
RECIPT DATE	Receipt date (MMDDCCYY). The receipt date of the hospice notice of election (NOE).
REVOC DATE	The revocation indicator showing whether the Hospice election period is active. (MMDDCCYY)
REVOC IND	The revocation indicator shows whether the hospice election period is active or revoked. Zero (0) means the election period is active. Anything other than zero (0) indicates the hospice period is revoked.
PROVIDER	The hospice provider number.
NPI	The hospice provider's National Provider Identifier (NPI).

ELGA Screen Page 18—Hospice Information

ELGA MM/DD/CCYY	CWF PART A HH:MM:SS	ELIGIBILITY SYSTEM HOSPICE INFORMATION				ELGHCRO PAGE 18 OF XX	
HOS-REC	CN	NM	IT	DB	SX		
HOSPICE		PERIOD	PERIOD	PERIOD	PERIOD	PERIOD	
START DATE							
TERM DATE							
REVOC IND							
PF1=INQ SCREEN		PF3/CLEAR=END		PF7=PREV		PF8=NEXT	

ELGA Screen Page 18 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

IMMUNO/TRANS	Line 3 provides immunosuppressive/transplant information.												
TRANS IND	<p>This identifies whether the beneficiary has received a Medicare covered transplant. Valid codes are:</p> <table> <tr> <td>1 Allograft bone marrow – transplant from another person</td><td>D Kidney and pancreas transplant</td></tr> <tr> <td>2 Autograft bone marrow – transplant from beneficiary</td><td>H Heart transplant</td></tr> <tr> <td>B Lung transplant</td><td>I Intestinal transplant</td></tr> <tr> <td>C Heart and lung transplant</td><td>K Kidney transplant</td></tr> <tr> <td></td><td>L Liver transplant</td></tr> <tr> <td></td><td>P Pancreas transplant</td></tr> </table>	1 Allograft bone marrow – transplant from another person	D Kidney and pancreas transplant	2 Autograft bone marrow – transplant from beneficiary	H Heart transplant	B Lung transplant	I Intestinal transplant	C Heart and lung transplant	K Kidney transplant		L Liver transplant		P Pancreas transplant
1 Allograft bone marrow – transplant from another person	D Kidney and pancreas transplant												
2 Autograft bone marrow – transplant from beneficiary	H Heart transplant												
B Lung transplant	I Intestinal transplant												
C Heart and lung transplant	K Kidney transplant												
	L Liver transplant												
	P Pancreas transplant												
DISCHARGE DATE	Date of hospital discharge following transplant.												
The following fields display up to five hospice periods.													
HOSPICE PERIOD	Provides the five most recent hospice benefit periods if the APP DATE field is left blank. If a date is entered in the APP DATE field, the screen will display up to 5 hospice benefit periods with a TERM DATE equal or prior to the APP DATE.												
START DATE	Start date of the hospice benefit period.												
TERM DATE	Termination date of the hospice benefit period.												
REVOC IND	<p>A revocation indicator of "1" will display for the benefit period when the beneficiary has revoked or been discharged from the hospice benefit.</p> <p>If the REVOC IND field is blank, the beneficiary is still under the hospice benefit; therefore, all services that are related to the terminal illness must be billed by the hospice agency caring for the beneficiary. Any non-hospice claims submitted for services related to the terminal diagnosis will be rejected.</p> <p>When a hospice claim with dates of service on/after January 1, 2012, is submitted with a patient status code "01" (Discharge to home), a revocation indicator of "1" will display.</p>												

ELGA Screen Page 19—Smoking Cessation

ELGA	CWF	PART A	ELIGIBILITY SYSTEM	ELGACRO
MM/DD/CCYY	HH:MM:SS		SMOKING CESSATION	PAGE 19 OF XX
IP-REC	CN	NM	IT DB	SX INT
COUNSELING PERIOD: 1 2 3 4 5				
TOTAL TECH SESSIONS:				
TOTAL PROF SESSIONS:				
HCPCS	FROM	THRU	PER QT TP	HCPCS FROM THRU PER QT TP
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT				

ELGA Screen Page 19 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

TOTAL TECH SESSIONS	The total number of technical sessions per counseling period.
TOTAL PROF SESSIONS	The total number of professional sessions per counseling period.
HCPCS	The HCPCS code identifying the level of smoking and tobacco-use cessation counseling.
FROM	From date of service in MM/DD/CCYY format.
THRU	Through date of service in MM/DD/CCYY format.

ELGA Screen Page 19 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

PER	Period number.
QT	Quantity.
TP	Claim type.

ELGA Screen Page 20—Radiation Oncology Model

ELGH	CWF	PART A	ELIGIBILITY SYSTEM	ELGACRO		
MM/DD/CCYY	HH:MM:SS	RADIATION ONCOLOGY MODEL		PAGE 21 OF		
XX						
IP-REC	CN	NM	IT	DB	SX	INT
HCPCS ACT SOEACT EOE DIAGNOSIS TAX ID NUM/ RENDER NPI TEMP SOE TEMP EOE CODE CCN						
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT						

ELGA Screen Page 20 Field Description

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

HCPCS	The professional radiation oncology model-specific HCPCS code.
ACT SOE	Actual start of episode date.
ACT EOE	Actual end of episode date.
DIAGNOSIS CODE	Professional line item diagnosis code.
TAX ID NUM	The Tax Identification Number (TIN) of the radiation oncologists performing the service.
RENDER NPI	The National Provider Identifier (NPI) of the radiation oncologists performing the service.
TEMP SOE	Temporary start of episode date.
TEMP EOE	Temporary end of episode date.
CCN	Facility/Technical participant provider number.

ELGA Screen Page 21—Radiation Oncology Model

ELGH	CWF	PART A	ELIGIBILITY SYSTEM	ELGACRO		
MM/DD/CCYY	HH:MM:SS	RADIATION ONCOLOGY MODEL		PAGE 21 OF		
XX						
IP-REC	CN	NM	IT	DB	SX	INT
HCPCS ACT SOEACT EOE DIAGNOSIS TAX ID NUM/ RENDER NPI TEMP SOE TEMP EOE CODE CCN						
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT						

ELGA Screen Page 21 Field Description

The top line of information is carried over from the ELGH screen page 01. Refer to the "ELGH Screen Page 01 Field Descriptions" for information about these fields.

HPCPS	The professional radiation oncology model-specific HCPCS code.
ACT SOE	Actual start of episode date.
ACT EOE	Actual end of episode date.
DIAGNOSIS CODE	Professional line item diagnosis code.
TAX ID NUM	The Tax Identification Number (TIN) of the radiation oncologists performing the service.
RENDER NPI	The National Provider Identifier (NPI) of the radiation oncologists performing the service.
TEMP SOE	Temporary start of episode date.
TEMP EOE	Temporary end of episode date.
CCN	Facility/Technical participant provider number.

ELGA Screen Page 22—MSP Information

If MSP information is not applicable to the beneficiary, page 22 will not display. Additional pages, beyond page 22, will display if more than one MSP record exists.

This page displays Medicare Secondary Payer (MSP) information only when another insurance company is primary to Medicare. Supplemental insurer information (insurance which is secondary to Medicare), such as Medigap and Medicaid, will not appear on these screens. For Medicare Advantage (MA) plan information, refer to "ELGA Screen Page 01."



MSP records that have been termed are not viewable without the use of the "APP DATE" field. Review the information under the heading "Information about the APP DATE Field" found earlier in this chapter to ensure you review data that may impact your dates of service.

ELGA				CWF PART A ELIGIBILITY SYSTEM				ELGACRO				
DD/MM/CCYY		HH:MM:SS		MSP INFORMATION				PAGE 22 OF XX				
IP-REC	CN			NM		IT		DB		SX		INT
MSP CODE:		EFF DATE:		TERM DATE:								
INSURER INFORMATION:												
NAME		:										
ADDRESS1		:										
ADDRESS2		:										
CITY		:										
STATE		:										
ZIP		:										
POLICY NO		:										
PF1=INQ SCREEN PF3/CLEAR=END PF7=PREV PF8=NEXT												

ELGA Screen Page 22 Field Descriptions

The top line of information is carried over from the ELGA screen page 01. Refer to the "ELGA Screen Page 01 Field Descriptions" for information about these fields.

MSP CODE	Valid MSP code indicator. Valid values are: <ul style="list-style-type: none"> • 12 = Working Aged • 13 = End Stage Renal Disease (ESRD) • 14 = Auto/Liability • 15 = Worker's Compensation • 16 = Federal - Public Health • 41 = Black Lung • 43 = Disabled • 47 = Any Liability 	
EFF DATE	Effective date of the primary insurance.	
TERM DATE	Termination date of the primary insurance.	
INSURER INFORMATION	NAME	Primary Insurer's Name
	ADDRESS 1 and 2	Primary Insurer's Address
	CITY	Primary Insurer's City
	STATE	Primary Insurer's State
	ZIP	Primary Insurer's Zip Code
	POLICY NO	Policy Number of Primary Insurance