REMINDER: Providers Must Review all the Information Returned for Both Physical and Behavioral Health When Using the Eligibility Verification System (EVS)

When using EVS, providers are reminded of the importance in reviewing all the information returned for both physical health and behavioral health. Because of the behavioral health managed care rollout more recipients are now enrolled in behavioral health managed care. However, it cannot be assumed that if a recipient’s behavioral health managed care coverage is for an entire month that the physical health coverage will be the same. Some recipients have managed care behavioral health coverage and fee for service physical health coverage. When medical assistance coverage ends prior to the end of the month, fee for service coverage ends on that date but managed care coverage may continue until the end of the month. For this reason you are encouraged to review the entire EVS return to avoid having claims denied.

Thank you for your service to our Medical Assistance recipients. We value your participation.

Check the Department of Human Services’ website often at: www.dhs.pa.gov