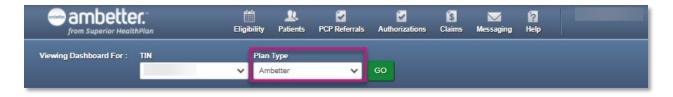
Eligibility Verification Guide

Secure Provider Portal



To verify if a patient is eligible for Ambetter from Superior HealthPlan, please follow the steps below:

- 1. Go to Provider.SuperiorHealthPlan.com and log in to Ambetter's Secure Provider Portal.
 - If you have not registered for the portal or need help getting access, please click on Create New Account.
- 2. Once you have logged into the portal, under the Plan Type drop-down, select "Ambetter".



3. Click on the **Eligibility** icon.



4. Under Eligibly Check, select the Date of Service, then input the member's Member ID or Last Name and their Date of Birth (DOB) and click on Check Eligibility.



- 5. Confirm the patient is **Eligible** and confirm their Ambetter plan under **Network**.
 - Eligible options are indicated by a green thumbs up (patient is eligible), an orange thumbs down (patient is not eligible) or a yellow warning sign (patient is delinquent on payments).
 - Network plan options are listed as "Value" (Ambetter Value), "Virtual" (Ambetter Virtual) or "Ambetter CORE" (Ambetter Essential, Balanced and Secure).



- **6.** Plan information can also be found in the patient's profile under the **Overview** tab, under **Eligibility History**.
 - In the profile, providers will need to pay attention to the following to determine the current plan for the patient:
 - The ending of the Product Name and Product Description, which can be "Value" (Ambetter Value), "Virtual" (Ambetter Virtual) and "Balance" (Ambetter Essential, Balanced and Secure).
 - The most recent Start Date indicates when the member began participating in the plan.

