

## VERIPRO ALERTS AND ERROR MESSAGING

### Sections:

1. Primary payor has not been mapped
2. Payor Outage – Error/Communication Error Alert
3. Products with Time of Service/Self Pay are unable to be verified
4. Request Error notification with benefits auto selected
5. Pay Now is not enabled
6. Base charge not found for HCPCS/Item number

#### 1. Primary payor has not been mapped

**Corrective Action:** Submit a MotionMD help ticket and request a Payor to be added in Availity.

• Primary Payer: (P) has not been mapped, contact Availity to map this payer.

**COVERAGES**

Policy # -  
Total Deductible (Ind/Fam) - / -  
Total OOP (Ind/Fam) - / -

Coverage Note:  
-

[View Coverage Information](#)

[Print Benefits Selection PDF](#)

[Edit/View Coverages](#)

**ESTIMATE DETAILS**

Description	Charge	Allowed Amt	Copay	Coins. <sup>®</sup>	Ded <sup>®</sup>	OOP <sup>®</sup>	EPR <sup>®</sup>	Rem Ded <sup>®</sup>	Rem OOP <sup>®</sup>
<b>PATIENT ESTIMATE</b>									
Total Before Benefits									
Total Benefits Covered									
Patient Responsibility									

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#### 2. Payor Outage – Error/Communication Error Alert

**Corrective Action:** Close out visit and attempt to re-verify.

No tasks remaining at this time

**COVERAGES**

Communication Error <sup>®</sup>  
**BCBS ALABAMA**

Policy # -  
Total Deductible (Ind/Fam) - / -  
Total OOP (Ind/Fam) - / -

Coverage Note:  
-

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**ESTIMATE DETAILS**

Description	Charge	Allowed Amt	Copay	Coins. <sup>®</sup>	Ded <sup>®</sup>	OOP <sup>®</sup>	EPR <sup>®</sup>	Rem Ded <sup>®</sup>	Rem OOP <sup>®</sup>
<b>PATIENT ESTIMATE</b>									
Total Before Benefits									
Total Benefits Covered									
Patient Responsibility									

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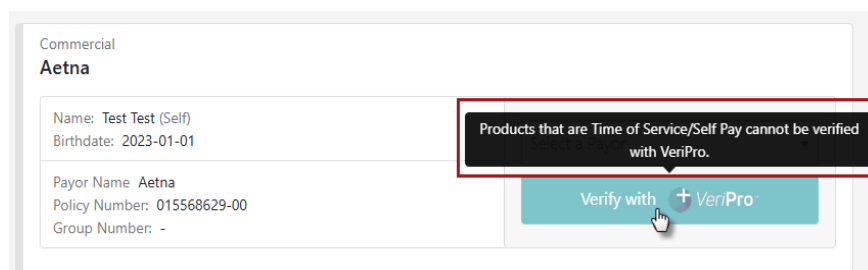
## VERIPRO ALERTS AND ERROR MESSAGING

If communication errors persist view Payor Outages by clicking on the bell in the upper right corner on the Availity coverage page.



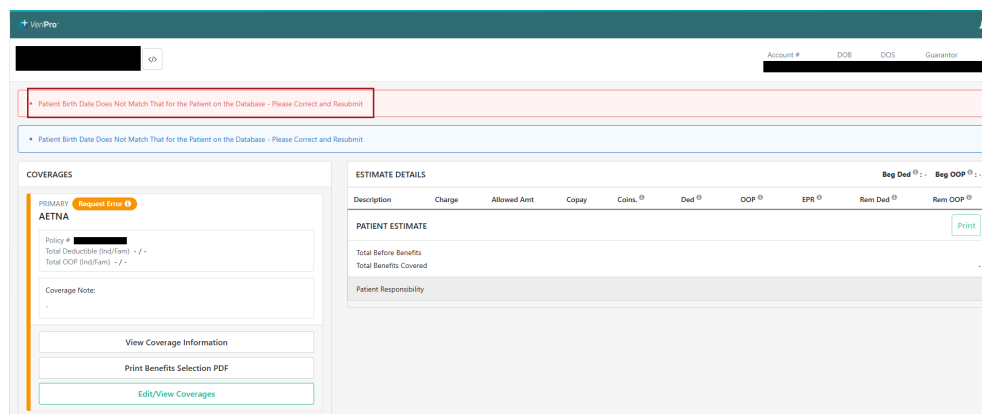
Once an outage is confirmed causing the communication error, select the Unable to Determine EPR option under the Decline Payment list on the MotionMD PA. If the payor is not on the outage list, please submit a help ticket for further investigation.

### 3. Products with Time of Service/Self Pay set to YES are unable to be verified



### 4. Request Error notification with benefits auto selected - If there is an interruption in the connection between MotionMD® and Availity, users may see the Request Error message.

**Corrective Action:** Remove the payment method from the PA. Import and update the payment method based on the information provided in the RED task bar. Then re-verify.



### 5. Pay Now is not enabled - Pay Now is enabled when benefits are Auto Selected. On occasion users may encounter a payor that requires manually viewing and selecting benefits to provide the patient estimate.

**Corrective Action:** Select View Coverage as benefits may need to be manually selected.

## VERIPRO ALERTS AND ERROR MESSAGING

Payment Methods Add

Commercial  
**BLUE CROSS BLUE SHIELD**  
Verified

Drag to reorder payment methods

Name: [REDACTED]  
Birthdate: [REDACTED]

Payor Name: BLUE CROSS BLUE SHIELD  
Policy Number: [REDACTED]  
Group Number: -

Verified on 2025-06-05  
ANTHEM BCBS FEDERAL - ALL STATES - 51164

View Coverage

Must view eligibility

Pay Now Decline Payment Actions

If the benefits have not been auto selected navigate to the Edit/View Coverages button to manually select benefits. Manually select the following benefits if applicable - Remaining IND/FAM Deductible, IND/FAM Out-of-Pocket Max and Co-Insurance.

VeriPro

Account # [REDACTED] DOB [REDACTED] DOS [REDACTED] Guarantor [REDACTED]

Benefits were not selected from the patient's coverage information for the following: L3984 (DURABLEMEDICUP) consequently, the estimation was not created.

**COVERAGES**

PRIMARY Active 0  
**BCBS ALABAMA**

Policy # [REDACTED]  
Total Deductible (Ind/Fam) - / -  
Total OOP (Ind/Fam) - / -

Coverage Note:  
[REDACTED] REFERRED, PROVIDER, ORG, (PPC) Active Coverage Effective from [REDACTED] - [REDACTED] @ after deductible with met met on OOP Family deductible with met met on OOP Patient Address: [REDACTED] Group No.: FAM-06/05/2025 014445 PM EST -  
Note:

View Coverage Information  
Print Benefits Selection PDF  
Edit/View Coverages

**ESTIMATE DETAILS**

Description	Charge	Allowed Amt	Copay	Coins. <sup>0</sup>	Ded <sup>0</sup>	OOP <sup>0</sup>	EPR <sup>0</sup>	Rem Ded <sup>0</sup>	Rem OOP <sup>0</sup>
<b>PATIENT ESTIMATE</b>									
Total Before Benefits									
Total Benefits Covered									
Patient Responsibility									

Print

### 6. Base charge not found for HCPCS/Item number

**Corrective Action:** Submit a MotionMD help ticket and request the HCPCS/item number to be added in Availity.

VeriPro

Account # [REDACTED] DOB [REDACTED] DOS [REDACTED] Guarantor [REDACTED]

The estimation calculation has failed.  
The base charge amount was not found for procedure code L0457 with product code 11-1697-2; consequently, the estimation could not be calculated.

**COVERAGES**

PRIMARY Active 1  
**UNITED HEALTHCARE**

Policy # [REDACTED]  
Total Deductible (Ind/Fam) [REDACTED]  
Total OOP (Ind/Fam) [REDACTED]

Coverage Note:  
[REDACTED]

View Coverage Information

**ESTIMATE DETAILS**

Description	Charge	Allowed Amt	Copay	Coins. <sup>0</sup>	Ded <sup>0</sup>	OOP <sup>0</sup>	EPR <sup>0</sup>	Rem Ded <sup>0</sup>	Rem OOP <sup>0</sup>
<b>PATIENT ESTIMATE</b>									
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