

Provider Guide to PEHP'S New System

Information about your new PEHP Provider Portal



What's Inside:

How to create a Provider Account	Page 2
How to add admin users to your Provider Account	Page 3
How to check a patient's benefits & eligibility	Page 4
How to submit & check authorizations.	Page 5
How to check claim status	Page 6
How to view authorization forms, clinical policies & Master Policies.	Page 7
How to read & print PEHP's medical fee schedule.	Pages 8-10
How to read & print PEHP's dental fee schedule	Pages 11-13
How to view Explanation of Payment for Claims.	Page 14

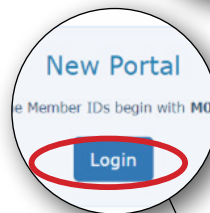
How to Create a PEHP Provider Account

The process to create a new Provider Account through pehp.org is easy. Here's what you need to do.

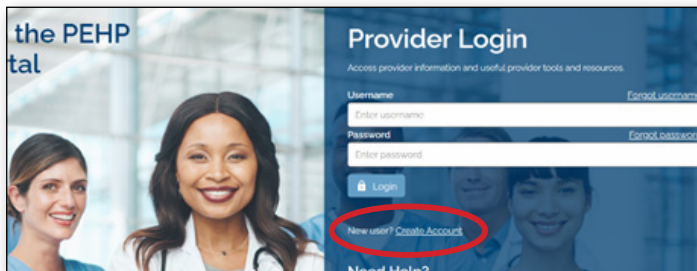
- 1 Visit www.pehp.org and click on Provider under Account at the top right.



- 2 If the PEHP member ID begins with MOOOO, choose New Portal.



- 3 Next, you will need to create a new account to access all the Provider functions.



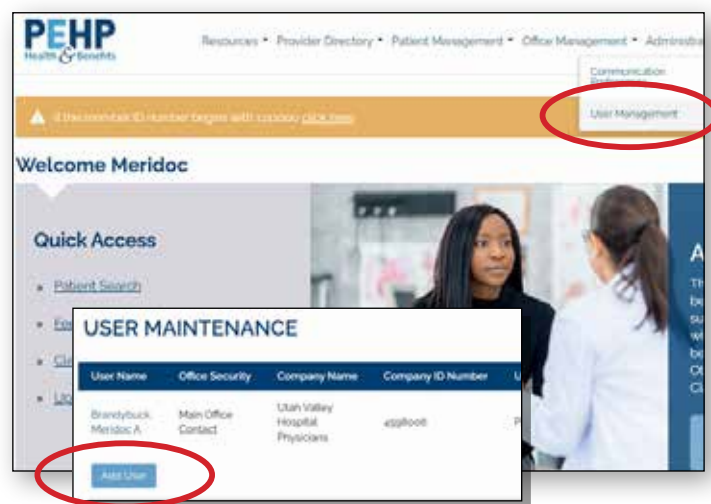
- 4 Go through the account creation process until you reach the final page. Note that as the primary registrant, you are automatically a local admin. You are not required to complete all fields, only required fields.

A screenshot of the 'User Information' form. The form has a title 'User Information' and a sub-header 'If you are an existing user please login [here](#)'. Below the header are three input fields: 'First Name', 'Middle Initial', and 'Last Name'. Each field has a red asterisk indicating it is a required field.

How to Add Admin Users to Your Provider Account

After registering as the Local Administrator, the Office Manager can add additional users to the PEHP account for specific tasks, such as submitting claims and/or authorizations. Account confirmation is not required when a user is added by the Local Administrator.

- 1 From the Home screen, click **Administration** > **User Management** from the navigation menu.
- 2 In the User Maintenance screen, click Add User
- 3 Next, complete the User information and click **Add**.



Note: The Local Administrator can decide whether the user can select his/her own username and password, or for the system to generate them. Most often the Local Administrator selects the username and allows the system to generate a temporary password.

- 4 On the **User Role Selection** screen, select a role from the Roles dropdown menu and a PEHP Health Plan from the Entity Lists dropdown menu.
Note: Access lists are generated by the entity (tax id, provider id, practice id, etc.) selected when a user registers or is added to the PEHP Health Plan. Users confirmed for an access list are granted access to information pertaining to those entities included in the access list.



- 5 Finally, click Select Role to return to the User Information screen and then click Submit.

How to Check Patient Benefits & Eligibility

Here's how to check a patient's benefits and eligibility through the PEHP Portal:

1 From the Office Management menu, go to Eligibility.

2 On the **Eligibility Search** page, enter the Patient's Name, Subscriber ID, or Social Security Number, along with the patient's Date of Birth. **Both fields are required.**

3 Once the Eligibility Search Results are displayed, click on the Patient's name.

4 Choose the relevant Provider from the dropdown menu and select the appropriate **Service Type**:

- » For medical eligibility and benefits, choose "Health Plan Benefit Coverage."
- » For dental eligibility and benefits, select "Dental Care."

Note: If you have more than 50 providers, find them via the **Search** function.

5 Select **Submit Eligibility Request**. The system will return Benefits and Eligibility based on the **Service Type** selected.

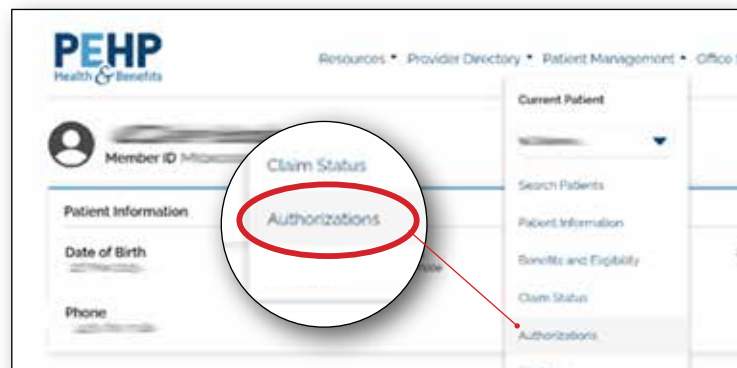


How to Check Authorizations

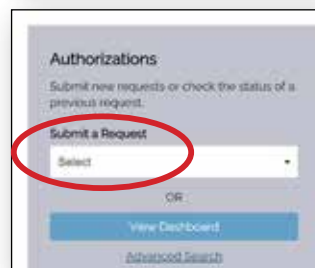
1 Login to your **PEHP New Provider** account at www.pehp.org.

2 You have two options to check authorizations:

a. Under the **Patient Management** menu, choose a patient, then click "**Authorizations**"



b. Use the **Authorizations** box from the bottom center of the homepage. Choose a provider from the drop-down list and click **Go**.



3 On this page you can search for authorizations.

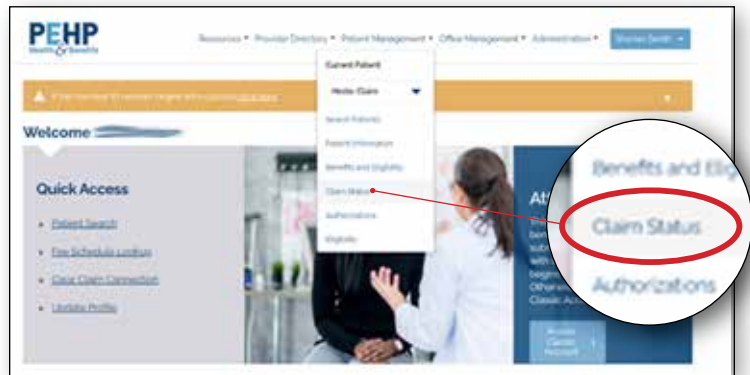
A screenshot of the 'Search Requests' form on the PEHP website. The form includes fields for 'Requesting Provider', 'Request Number', 'Request Date', 'Date Range', 'Status', and 'Requested Service'. There are also checkboxes for 'Outpatient', 'Specialist', 'Admission', 'Approved', 'Denied', and 'Pending'. A 'Search Requests' button is at the bottom left.

How to Check Claim Status

The process to check the status of a claim for a patient is simple. Here's how.

 Login to your **PEHP New Provider** account at www.pehp.org.

2 Under the ***Patient Management*** menu, choose a patient, then click ***Claim Status***. Choose a Provider from the drop-down list and click ***"Go."***



3 This page will display all the patient's claims, the status of each claim, and date of service. Click on the ***Claim Number*** to see detailed information about the claim.

[illegible]

Adjusted Procedure	Procedure	Modifier	Units	SPST	Emergency	Blind Amount	Allowed Amount	Outpatient	1-Cr Payment	1-Cr Insurance
92507	92507		1.00000			\$45.00	\$50.02	\$1.00	\$21.00	\$1.00
Totals						\$45.00	\$50.02	\$1.00	\$21.00	\$1.00

[illegible]

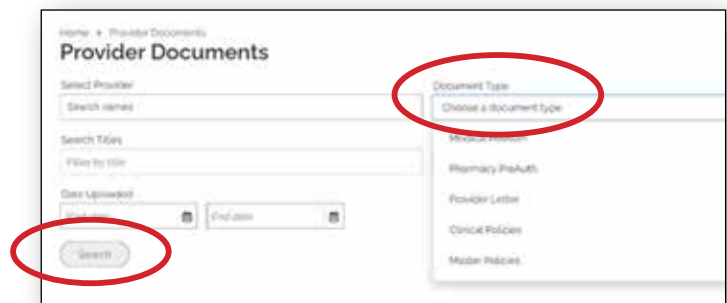
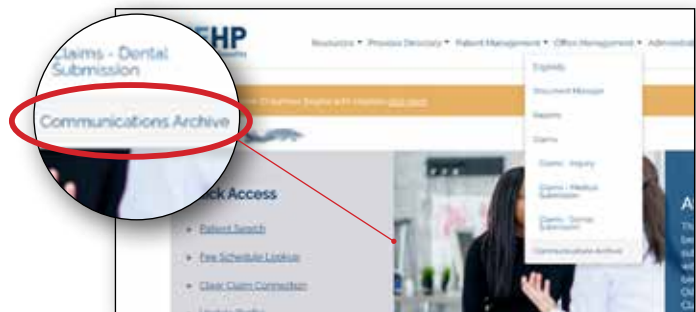
How to View Authorization Forms, Clinical Policies, and Master Policies

The process to view PEHP authorization forms, clinical policies, and master policies for a patient is simple. Here's how.





1 Login to your **PEHP New Provider** account at www.pehp.org.

2 Under the **Office Management** menu, choose **Communications Archive**.

3 In the **Provider Documents** page, select a Provider from your office. Next, choose a **Document Type** from the drop-down menu and click Search.



Sample list of Medical Preauthorization forms:

 Ambulatory & Video EEG Preauthorization Form Medical Pre-Authorization Form Uploaded Jul 27, 2021	Download
 Anesthesia Services Preauthorization Form Medical Pre-Authorization Form Uploaded Jul 27, 2021	Download
 ART Verification Form Medical Pre-Authorization Form Uploaded Jul 27, 2021	Download
 Autism Services Preauthorization Form Medical Pre-Authorization Form Uploaded Apr 26, 2022	Download

How to lookup PEHP's Medical Fee Schedule

To access PEHP's Medical Fee Schedule, you must login to your Classic Portal

- » When you're logged in, you will need to go to the left column and click "Fee Schedule Lookup". Once you have read the User Agreement, you'll want to click "Accept".

The screenshot shows the PEHP Classic Portal interface. On the left is a vertical menu with various options. The 'Fee Schedule Lookup' option is highlighted with a red box. To the right of the menu is a large red arrow pointing towards the 'User Agreement' page. The 'User Agreement' page is displayed, featuring the title 'User Agreement' and 'LICENSE FOR USE OF CURRENT TERMINOLOGY, SIXTH EDITION ("CDT6")'. It contains detailed text about the license for using Current Dental Terminology (CDT) and includes a 'Do Not Accept' button and an 'Accept' button at the bottom.

- » Once you are in the Fee Schedule Lookup, you'll want to change #1 to the date of service to the date you are looking for (this will ensure the correct fee schedule gets pulled up).

This screenshot shows the first step of the Fee Schedule Lookup process. It is titled '1. Select applicable date of service:'. Below the title is a text input field containing the date '06/14/2022'.

- » You'll need to change the Provider Panel to the network the member has (shows on their benefits card and can pull up under Eligibility).

This screenshot shows the second step of the Fee Schedule Lookup process. It is titled '2. Select the provider panel:'. Below the title is a dropdown menu with 'State Advantage' selected and a downward arrow icon.

- » If you are wanting to pull up individual codes, you will go to #3 and enter the code you are looking for into the search bar then click add code.

This screenshot shows the search options for the Fee Schedule Lookup. It is titled 'Search by:'. There are two radio buttons: the first is selected and labeled 'Enter list of codes.', and the second is labeled 'Enter a range of codes'. Below the radio buttons is a text input field containing the code '99214' and an 'add code' button. At the bottom of the section is a blue button labeled 'Lookup Fees'.

Continued on next page >>

How to lookup PEHP's Medical Fee Schedule

Continued from previous page

- » Once you have added the codes you are looking for it will show a list of your codes that you're about to look up then you'll click "Lookup Fees".

Search by:
☒ Enter list of codes.
 99214 Remove
 17110 Remove
 add code
☐ Enter a range of codes
 Lookup Fees

- » A list of the fee schedule will pull up for the codes you've searched, showing the allowable as well as if pre-auth is needed.

Search Criteria:

Service Date:	06/15/2022
Code(s):	99214, 17110
Provider Panel:	State Advantage

[Download Results to Spreadsheet](#)

SEARCH RESULTS:

Code	Modifier	Non-Facility Allowable	Facility Allowable	Provider Panel	Comments
17110		165.95	95.18	State Advantage	Preauth - No
99214		146.23	112.00	State Advantage	Preauth - No
99214	GT	131.61	100.80	State Advantage	Preauth - No

[New Search](#)

- » If you are looking to pull up the full Fee Schedule then you will want to go back to #4 and instead of putting in codes, you will click the bullet that says "Enter a range of codes".

Search by:
☐ Enter list of codes.
☒ Enter a range of codes
 Lookup Fees

- » In the Left box, you'll want to put either 00000 or the lowest numbered CPT code you use. In the Right box, you'll want to put either 99999 or the highest numbered CPT your use. Then Click "Lookup Fees".

Search by:
☐ Enter list of codes.
☒ Enter a range of codes
 00000 - 99999
 Lookup Fees

- » The full Fee Schedule will pull up and look something like this.

Search Criteria:

Service Date:	06/15/2022
Code(s):	00000 - 99999
Provider Panel:	State Advantage

[Download Results to Spreadsheet](#)

SEARCH RESULTS:

Code	Modifier	Non-Facility Allowable	Facility Allowable	Provider Panel	Comments
0001A		40.00		State Advantage	Preauth - No
0001F		0.00		State Advantage	Not Covered
0002A		40.00		State Advantage	Preauth - No

- » For codes that start with an letter, enter AAAAA in the first code box and ZZZZZ in the second box.

Search Criteria:

Service Date:	07/28/2022
Code(s):	aaaaa - zzzzz
Provider Panel:	Preferred Provider Panel

Reading & Printing PEHP's Medical Fee Schedule

Below is what each column means on the Fee Schedule and how to print it.

Code: The code that is in relations to the service.

Modifier: Most common modifier used with the code.

Non-facility Allowable: Allowed amount for non-facilities.

Facility Allowable: Allowed amount for Facilities (ignore unless you're billing from a hospital).

Provider Panel: The contract you have with us that the allowed amount is being pulled.

Comments: additional information.

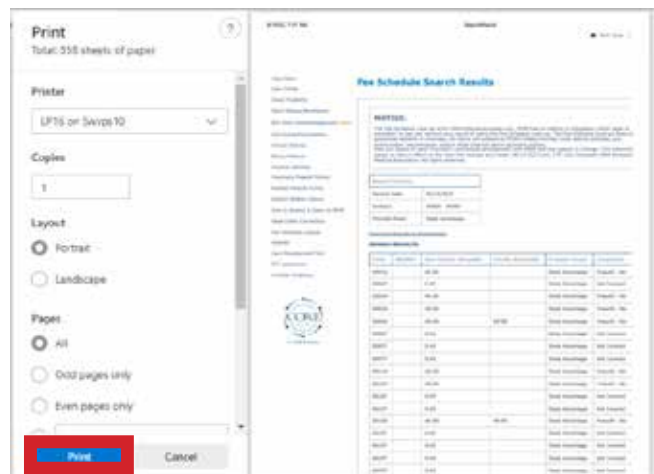
- » Pre-auth – No/Yes: Status if a pre-auth is required for the service.
- » Code Under Review: Currently reviewing this code and might ask for records.
- » Not Covered: This service is not covered.

Printing the Fee Schedule

- » If are looking to print the Fee Schedule, you either click "Download Results to Spreadsheet" and it will pull it up in an Excel spreadsheet for you to save and/or print.

Search Criteria:		Code	Modifier	Non-Facility Allowable	Facility Allowable	Provider Panel	Comments
Service Date:	06/15/2022	0001A		40		State Advantage	Preauth - No
Code(s):	00000 - 99999	0001F		0		State Advantage	Not Covered
Provider Panel:	State Advantage	0002A		40		State Advantage	Preauth - No
		0003A		40		State Advantage	Preauth - No
		0004A		40	40	State Advantage	Preauth - No
		0005F		0		State Advantage	Not Covered
		0005T		0		State Advantage	Not Covered
		0007T		0		State Advantage	Not Covered
		0011A		40		State Advantage	Preauth - No
		0012A		40		State Advantage	Preauth - No
		0012F		0		State Advantage	Not Covered
		0012T		0		State Advantage	Not Covered
		0013A		40	40	State Advantage	Preauth - No

- » Another option for printing is you can do "Control P" and it will pull up a pop-up to print off the Fee Schedule from the website.



How to lookup PEHP's Dental Fee Schedule

To access PEHP's Dental Fee Schedule, you must login to your Classic Portal

- » When you're logged in, you will need to go to the left column and click "Fee Schedule Lookup". Once you have read the User Agreement, you'll want to click "Accept".

The screenshot shows the PEHP Classic Portal interface. On the left, a vertical menu lists various options, with 'Fee Schedule Lookup' highlighted by a red box. To the right, the 'User Agreement' page is displayed, featuring the title 'LICENSE FOR USE OF CURRENT DENTAL TERMINOLOGY, SIXTH EDITION ("CDT®")'. The agreement text is visible, and at the bottom, the 'Accept' button is highlighted with a red box.

- » Once you are in the Fee Schedule Lookup, you'll want to change #1 to the date of service to the date you are looking for (this will ensure the correct fee schedule gets pulled up).

The screenshot shows the first step of the Fee Schedule Lookup process: '1. Select applicable date of service:'. A text input field contains the date '06/14/2022'.

- » Don't have to worry about #2 as the Provider Panel stays the same.

- » If you are wanting to pull up individual codes, you will go to #4 and enter the code you are looking for into the search bar then click add code.

The screenshot shows the fourth step of the Fee Schedule Lookup process: '4. Exclude "D" from alphanumeric code numbers.' Below this, there is a 'Search by:' section with a radio button selected for 'Enter list of codes.' A text input field contains the code '0330', and the 'add code' button next to it is highlighted with a red box. At the bottom, there is a 'Lookup Fees' button.

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How to lookup PEHP's Dental Fee Schedule

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- » Once you have added the codes you are looking for it will show a list of your codes that you're about to look up then you'll click "Lookup Fees".

4. Exclude "D" from alphanumeric code numbers.

Search by:

☒ Enter list of codes.

0330	Remove
0120	Remove
1110	Remove

add code

☐ Enter a range of codes

Lookup Fees

- » A list of the fee schedule will pull up for the codes you've searched, showing the allowable as well as if pre-auth is needed.

Search Criteria:

Service Date:	06/14/2022
Code(s):	0330, 0120, 1110
Provider Panel:	Preferred Provider Panel

[Download Results to Spreadsheet](#)

SEARCH RESULTS:

Code	Modifier	Non-Facility Allowable	Provider Panel	Comments
0120		22.97	Preferred Provider Panel	Preauth - No
0330		60.01	Preferred Provider Panel	Preauth - No
1110		47.36	Preferred Provider Panel	Preauth - No

[New Search](#)

- » If you are looking to pull up the full Fee Schedule then you will want to go back to #4 and instead of putting in codes, you will click the bullet that says "Enter a range of codes".

4. Exclude "D" from alphanumeric code numbers.

Search by:

☒ Enter list of codes.

add code

☐ Enter a range of codes

- » On the left box, you will put in 0000 and on the right side you will put in 9999 (This will ensure every dental code is pulled up). Then click "Lookup Fees".

4. Exclude "D" from alphanumeric code numbers.

Search by:

☐ Enter list of codes.

☒ Enter a range of codes

0000 - 9999

Lookup Fees

- » The full Fee Schedule will pull up and look something like this.

Search Criteria:

Service Date:	06/14/2022
Code(s):	0000 - 9999
Provider Panel:	Preferred Provider Panel

[Download Results to Spreadsheet](#)

SEARCH RESULTS:

Code	Modifier	Non-Facility Allowable	Provider Panel	Comments
0120		22.97	Preferred Provider Panel	Preauth - No
0140		38.45	Preferred Provider Panel	Preauth - No
0145		35.17	Preferred Provider Panel	Preauth - No
0150		40.33	Preferred Provider Panel	Preauth - No
0160		22.97	Preferred Provider Panel	Code Under Review
0170		0.00	Preferred Provider Panel	Not Covered
0171		0.00	Preferred Provider Panel	Not Covered
0180		44.08	Preferred Provider Panel	Preauth - No

Reading & Printing PEHP's Dental Fee Schedule

Below is what each column means on the Fee Schedule and how to print it.

Code: The code that is in relations to the service.

Modifier: Not used in Dental. Can ignore.

Non-facility Allowable: This is PEHP's allowed amount for the service.

Provider Panel: The contract you have with us that the allowed amount is being pulled.

Comments: additional information.

- » **Pre-auth – no:** Can ignore, Dental does not require pre-authorization.
- » **Code Under Review:** Currently reviewing this code and might ask for records.
- » **Not Covered:** This service is not covered.

Printing the Fee Schedule

- » If are looking to print the Fee Schedule, you either click "Download Results to Spreadsheet" and it will pull it up in an Excel spreadsheet for you to save and/or print.

Search Criteria:						
Service Date:	06/14/2022					
Code(s):	0000 - 9999					
Provider Panel:	Preferred Provider Panel					
Download Results to Spreadsheet						

	A	B	C	D	E	F
1	Code	Modifier	Non-Facility Allowable	Provider Panel	Comments	
2	120		22.97	Preferred Provider Panel	Preauth - No	
3	140		38.45	Preferred Provider Panel	Preauth - No	
4	145		35.17	Preferred Provider Panel	Preauth - No	
5	150		40.33	Preferred Provider Panel	Preauth - No	
6	160		22.97	Preferred Provider Panel	Code Under Review	
7	170		0	Preferred Provider Panel	Not Covered	
8	171		0	Preferred Provider Panel	Not Covered	
9	180		44.08	Preferred Provider Panel	Preauth - No	

- » Another option for printing is you can do "Control P" and it will pull up a pop-up to print off the Fee Schedule from the website.

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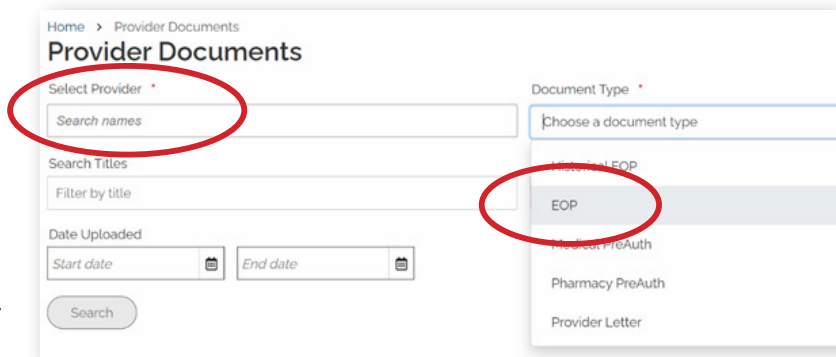
How to View Explanation of Payment (EOP) for a Claim

Here's how to view EOPs for a claim.

1 From the home screen, click **Office Management » Communications Archive** from the navigation menu.



2 In the **Provider Documents** screen, start typing the name of the provider in the **Select Provider** box. Make sure to select the provider entry with the Supplier number (not the Supplier Location or Practitioner number).



Note: The date listed in the document is the payment date.

3 Choose EOP from the Document Type drop-down, then input a date or date range and press the Search button.

