



WE HAVE LIFTOFF

**Providers Now Able to Submit Claims
Individually Online**

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& INFORMATION FOR
PROVIDER PARTNERS

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COVER STORY: Electronic Claims Submission

COBs: Ready, Set, Launch

Portal now open to receive Coordination of Benefits

Previously in our fall 2015 Newsletter, it was announced that providers would have the ability to submit individual claims to PEHP through our web portal. We're

Coming Soon!

Web tutorial on how to submit claims through our online claims tool.

The use of submitting through a clearinghouse, like UHIN, is preferred. However, providers that aren't submitting through a clearinghouse may use our online claims tool to submit claims.

The PEHP online claims tool only allows claims to be

happy to announce the COB portion of the tool is now up and running.

Contractually, providers have agreed to submit claims electronically to PEHP, whether we are primary or secondary.

submitted individually and does not provide batch claim functionality. All batch claims must still be submitted through UHIN.

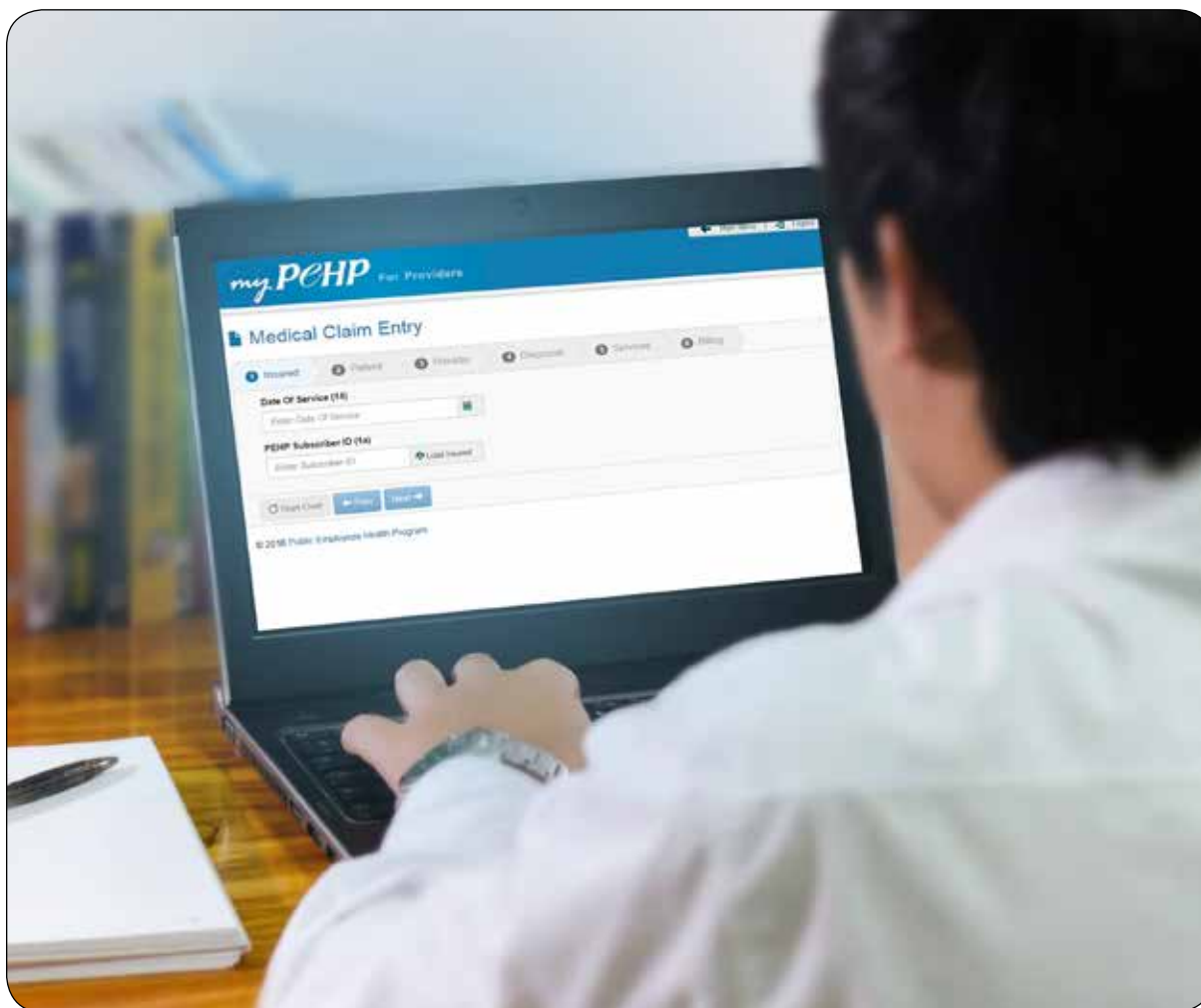
Login with your online credentials and choose "Submit Medical Claims" on the left hand side. To create a COB claim, simply enter the amounts and adjustment codes which are located on the primary payer's remittance advice.

The remittance information may be on paper, an EDI 835, or primary payer's website. You may be required to enter a RARC and CARC code.

Visit www.wpc-edi.com/reference/ to learn more about these codes.

For additional information or assistance with the online claim submission tool, contact your Provider Relations Specialist. We hope you find this tool useful with your daily office tasks.





Common Claim Denials

Tips to Prevent Claim Rejections

PEHHP rejects approximately 4% of electronic claims per day. The most common reasons for the rejections are:

- » A3:158 – Patient’s DOB
- » A3:771 – Claim submitted prematurely (COBA)

» A3:562 – Rendering Providers NPI error

How do you prevent rejections and get it right the first time?

- » Patient’s DOB: Check eligibility *before you submit*.
- » Providers have

the ability to check eligibility, by either sending in a 270 EDI Eligibility Request or by logging in to the secured site at www.pehp.org.

- » Claim Submitted

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DID YOU KNOW?

PEHP is no longer sending dual remittances. Paper will not be sent to providers receiving 835 ERAs. To view the paper version of the remittance, a PDF is available through the secure provider portal.

Claims

PEHP is First in State to Achieve National Efficiency Certification

PEHP has become the first entity in Utah to earn a national certification for payment and claims processing compliance.

Achieving Phase III CAQH CORE® Certification means PEHP complies not only with HIPAA, but with all the rules mandated by the Affordable Care Act (ACA).

This certification is regarded as a major achievement in the health information technology industry, PEHP Managing Director R. Chet Loftis said.

“It takes a lot of work, leadership, cooperation, and focus to accomplish a project of this magnitude,” Loftis said. “It takes everyone doing his or her part and finding solutions to the problems that inevitably come up. This is good work and we can all be proud of it.”

CAQH CORE establishes national operating rules to ensure uniform, reliable, electronic data transmission, compliant with the ACA. CORE



establishes national expectations for the flow and format of electronic funds transfer (EFT) and electronic remittance advice (ERA).

Learn more about CAQH Core: www.caqh.org.

DID YOU KNOW?

Contracted medical providers are now required to enroll in Electronic Funds Transfer (EFT). Sign up today by logging in at www.pehp.org.

Wait 30 Days to Submit Medicare COB Claims

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Prematurely (COBA): Providers must wait 30 days from Medicare’s payment before submitting a Medicare COB claim to PEHP.

- › 30 days **after** Medicare’s payment, if PEHP does not have the claim, the provider

will need to send a corrected claim directly to PEHP.

- » Rendering Providers NPI error: Check with PEHP to confirm if provider is set up correctly in our system.
- › If a provider is new to the group or has recently changed

clearinghouses, notify your Provider Relations Specialist or PEHP EDI Department to check provider enrollment.

Additionally, paper claim rejections have increased since our new EDI requirement in January 2015. All claims must be submitted electronically,

PEHP Provider Relations

Welcome Our New Specialists

Jennica Bodenhofer has recently joined PEHP’s Provider Relations Department as a Provider Relations Specialist with responsibility for Area #4. (See page11)

She brings an extensive background in healthcare and finance. After graduating from the University of Utah with a B.S. in Economics, she left the healthcare field to join the FAA. However, missing both healthcare and her home state, she decided to return to Utah.

Her background includes significant experience with finance, management, medical

software and healthcare administration. She has a strong knowledge of the state and federal healthcare regulations, healthcare operations, claims and billing practices. She is dedicated to customer satisfaction, public relations and provider support.



Jennica is an advocate of education and enjoys learning new things. She is an avid outdoorsman and loves to hunt, fish, hike, swim and snowboard.

When not traveling to new destinations, she spends her downtime reading.

We welcome Henry Cruz to the Provider Relations Team.

Henry comes from PEHP Member Services department with over 20 years experience in the healthcare industry and 9 of those with



PEHP. He is fluent in Spanish, is a Director on the US bowling congress (USBC) board and enjoys playing racquetball.

He is excited to join the Provider Relations team and looks forward to working with the provider community.

either through a clearinghouse or PEHP’s web tool. There are a few exceptions where paper claim submission will be allowed.

They are:

- » Providers not contracted with any PEHP Networks;
- » Claims that require medical records – **Note:**

This does not include COB claims; or

- » When PEHP is the tertiary payer.

We look forward to working with our providers, on lowering the rejection rates, therefore, avoiding delays in processing of claims and getting it right the first time!



DID YOU KNOW?

To keep members out of the middle, PEHP encourages providers to utilize the Provider Directory at www.pehp.org, ensuring that labs are being referred to in-network laboratories.

Billing

Audit Finds Trend of Wrong

PEHP 's Financial Assurance Department, along with our third party auditing vendor continually reviews and audits claims to ensure accuracy of billing and correct use of CPT codes. Providers, by contracting with PEHP, have agreed to follow coding guidelines set in place by the American Medical

Association (AMA) Current Procedural Terminology (CPT) including billing for services/procedures using the most specific code available.

Recent audits have demonstrated a trend of billing CPT physical therapy codes when conducting Vision Therapy. The appropriate CPT code that PEHP

accepts for this service is 92065. Along with submission of the proper CPT code, Vision Therapy requires prior authorization (PA) to determine if the criteria for this service is met.

Also of note in recent audits is the use of Fundus Photography (CPT code 92250), as a screening tool. PEHP considers Fundus Photography

Clinical Policies

Check for Medical Necessity

PEHP Clinical Policies are designed to help providers in understanding what PEHP considers to be “medically necessary” under the terms and conditions of our member Master Policy benefit agreements.

The clinical policies are updated regularly and are subject to change without notice. They are available to providers through the secured portion of the provider web portal. To locate the policies, you'll need to sign in with your login credentials.

If you do not have access to the provider web portal, contact your Provider Relations Specialist. Otherwise, please login and choose Clinical Policies on the left hand side. You can scroll through all policies, or you can type in a term and/



or a word and the policy(ies) containing that term and/or word in the document will appear.

We hope your office will take the opportunity to login and review our clinical policies, understanding and becoming familiar with what PEHP considers medically necessary.

DID YOU KNOW?
Providers can view the updated ACA grid for both ICD-9 and ICD-10 by going to www.pehp.org, clicking on for Providers, Claims & Billing tab on the left hand side and then Preventive Services.

Codes, Lack of PA

for screening and all other indications, not mentioned in the clinical policy, as experimental / investigational and therefore, not a payable service.

Both policies for Vision Therapy and Vision Surgery and Vision Screening for Medical Diseases of Injury, can be found online.

Login at www.pehp.org and choose clinical policies on the left hand side.

We encourage your office to become familiar with our medical policies, to ensure that the services you are providing meet criteria and determine if they are eligible for reimbursement.

Claims



Repetitive Injections & Office Visits

According to CCI Bundling Edits, claims for office visits in conjunction with repetitive injections will be denied as inclusive to the procedure and will be a contractual write-off.

If there is a separately identifiable reason for an office visit on the same day as a repetitive injection, please use the appropriate modifier and include records to support the need for the office visit.

Code Changes

AMA Updates Codes for 2016

PEHHP has adopted the new CPT and HCPCS codes released by the AMA effective January 1, 2016. This includes both the deletion of codes that are no longer valid as well as the addition of new codes.

Not all new codes may be eligible for reimbursement as some of the codes may represent services that are not covered.

The Fee Schedule Lookup tool will list the status of the codes, their fee, and if the code has any prior authorization requirements.

Fee Schedule Tool

For a complete listing of the codes, fees, and if any of the new codes require prior authorization, we invite you to log into the my PEHP for Providers secure provider portal and select the Fee Schedule Lookup tool.

DID YOU KNOW?

PEHP has removed PA's on many chemotherapy medications. We've also removed the PA on Prolia, when purchased under the pharmacy benefit, and Zoledronic Acid. Questions, call 888-366-7551.

Online Tools

Is Preauth Required?

PEHP contracted providers have the ability to check if codes require prior authorization with a few simple clicks.

Login at www.pehp.org with your user id and password. Once you've successfully logged in, click on "Fee Schedule Lookup" on the left hand side and follow the prompts. Once you've passed the terms and conditions, scroll down and choose your desired network, then proceed to enter codes.

After entering the desired codes, select "Lookup Fees." In doing this, you'll obtain the current fee schedule and determination on if prior authorization is required.

Additionally, providers can see a list of services that require prior authorization. Go to www.pehp.org, click on *for* Providers, Care Management & Wellness, Medical Preauthorization. Furthermore, your office can download prior authorization forms by logging into our website and choosing "Medical Preauth Forms" on the left hand side.

As contracted PEHP providers, you have agreed to obtain PreAuthorization/Prenotification on all applicable services



prior to rendering services, as stated in section 2.3 of your contract.

We encourage you and your staff to check often to determine if the services that will be rendered require prior authorization.

If you need a login or have forgotten your login credentials, contact your Provider Relations Specialist for assistance.

Fee Schedule Example

Here's an example of the result you'll see when looking up fee schedules:

Code	Modifier	Non-Facility Allowable	Facility Allowable	Provider Panel	Comments
99214		\$	\$	Advantage Provider Panel	Preauth - No
11954		\$	\$	Advantage Provider Panel	Preauth - Yes

DID YOU KNOW?

To bill services under a supervising physician, we require the following are met:

- » *Mid-Level Provider must follow Medicare's Incident-To Guidelines; and*
- » *Supervising MD must be present, in the same building as the mid-level provider at the time the service is performed.*

Save the Date

Community Education Fairs Coming

Mark your calendars for the annual Community Education Fairs, which will return in April.

These free workshops will feature a wide range of engaging topics, including chronic care, Medicare payment, positively impacting your

Fair Schedule

Provo	Wed, April 6
Salt Lake City	Tues, April 12
Ogden	Thurs, April 14
St. George	Tues, April 19

bottom line, and the ever-popular payer panel.

Come for the experts, exciting classes, and vendors; stay for the prize drawing at the end of the fair!

Visit <https://www.uhin.org/events> for dates, schedules and registration.

PEHP WeeCare

Prenatal & Postpartum Program

PEHP WeeCare offers services to meet the needs of your pregnant patients, helping them have a healthy pregnancy, safe delivery and a healthy baby.

This program is for PEHP insured members only. Our insured members can enroll at any time during their pregnancy up through 12 weeks

Contact Us

Email: weecare@pehp.org

Phone: 801-366-7400 or 855-366-7400

Fax: 801-328-7400

Available: Monday-Friday, 9 a.m. – 5 p.m.

postpartum to participate and be eligible to receive rebates. We encourage enrollment during

pregnancy to earn extra incentives.

Both members and providers can learn more by going to www.pehp.org. We encourage your office to speak to your pregnant patients about this program and the information they can obtain, to help with a healthy pregnancy.

What PEHP WeeCare Offers

Benefit	Enrollment		
	During Pregnancy	After delivery, up to 12 weeks postpartum	After 12 weeks postpartum
Book and Educational Materials	Yes	Yes	Yes
Extra Information for High-Risk Pregnancies	Yes	Yes	Yes
Prescription on Prenatal Vitamins (Generic Only)	100% coverage* for generic brand	100% coverage* for generic brand	100% coverage* for generic brand
Enrollment Rebates	\$50 + \$50	\$50	No

* A co-pay is charged for Jordan District Plans

DID YOU KNOW?

ICD-9 and ICD-10 Reminders:
 » Dual use of ICD-9 and ICD-10 will not be accepted for the same claim.
 » If DOS spans the Oct 1 implementation date, the claim will need to be split.
 » Inpatient Claims that span Oct 1 – We will take discharge date as determination for ICD-9 or ICD-10.
 » DX criteria for prior authorization will be based upon date of service established in prior authorization.

Provider Relations Representatives

To provide optimal service to PEHP providers, each Provider Relations Representative is assigned a specific area to manage. This assignment is based on the physical locations of the providers. If you are unsure who your representative is, please call PEHP at 800-677-0457 or 801-366-7557.

SERVICE AREA #1

Chantel Lomax

Provider Relations Specialist

Phone: 801-366-7507 or 800-753-7407

Fax: 801-245-7507

E-mail: chantel.lomax@pehp.org

In-State Cities

Holladay (84117, 84121 & 84124), Midvale (84047), Salt Lake City (other zip codes not mentioned in other service areas), All University of Utah

Out-of-State

Colorado

SERVICE AREA #3

Henry Cruz

Provider Relations Specialist

Phone: 801-366-7721 or 800-753-7721

Fax: 801-245-7721

E-mail: henry.cruz@pehp.org

In-State Cities

Kearns (84118), Magna (84044), Taylorsville (84084, 84129 & 84119), West Jordan (84084 & 84088), West Valley (84119, 84120 & 84128)

In-State Counties

Tooele, Utah

Out-of-State

Wyoming

SERVICE AREA #5

Selena Johnson

Provider Data Specialist

Phone: 801-366-7511 or 800-753-7311

Fax: 801-245-7511

E-mail: selena.johnson@pehp.org

Out-of-State

All states other than those listed above

SERVICE AREA #2

Wendy Philbrick

Provider Relations Specialist

Phone: 801-366-7753 or 800-753-7753

Fax: 801-245-7753

E-mail: wendy.philbrick@pehp.org

In-State Counties

Box Elder, Cache, Davis, Morgan, Rich, Weber

In-State Cities

Murray (84107, 84123 & 84157)

Out-of-State

Idaho

SERVICE AREA #4

Jennica Bodenhofer

Provider Relations Specialist

Phone: 801-366-7419 or 800-753-7419

Fax: 801-328-7419

E-mail: jennica.bodenhofer@pehp.org

In-State Cities

Draper (84020), Herriman (84065 & 84096), Riverton (84065, 84095 & 84096), Sandy (84070, 84090, 84091, 84092, 84093 & 84094), South Jordan (84065 & 84095)

In-State Counties

Beaver, Carbon, Daggett, Duchesne, Emery, Garfield, Grand, Iron, Juab, Kane, Millard, Piute, San Juan, Sanpete, Sevier, Summit, Uintah, Wasatch, Washington, Wayne

Out-of-State Cities

Las Vegas, Nevada
Mesquite, Nevada

Out-of-State

Arizona

MAILING ADDRESSES

PEHP
560 East 200 South
Salt Lake City, UT 84102

PROVIDER NEWS
 A PEHP PROVIDER RELATIONS PUBLICATION PEHP SPRING 2016

Contact List

Please note: *The contact numbers for Case Management, Preauthorization and Customer Service are not the same.*

Case Management

.....801-366-7755 or 800-753-7490

**Customer Service/
Pre-authorization (outpatient)**

.....801-366-7555 or 800-765-7347

EDI Helpdesk

.....801-366-7544 or 800-753-7818

Inpatient Preauthorization

.....801-366-7755 or 800-753-7490

**Inpatient Mental Health
& Substance Abuse Authorization**

Blomquist Hale Consulting Group (BHCG)
Jordan School District
801-262-9619 or 800-926-9619

Pharmacy

.....801-366-7551 or 888-366-7551

Wellness Program

.....801-366-7300 or 855-366-7300
 PEHP Healthy Utah.....801-366-7300 or 855-366-7300
 PEHP Waist Aweigh801-366-7300 or 855-366-7300
 PEHP QuitLine.....855-366-7500
www.pehp.quitlogix.org

PEHP WeeCare

.....801-366-7400 or 855-366-7400

Provider Relations

.....801-366-7557 or 800-677-0457
 Chantel Lomax801-366-7507 or 800-753-7407
 Provider Relations Specialist chantel.lomax@pehp.org
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 Jackie Smith801-366-7795 or 800-753-7595
 Provider Relations Analyst jackie.smith@pehp.org
 Laurel Rodriguez801-366-7350 or 800-753-7350
 Provider Relations Manager laurel.rodriguez@pehp.org
 Cortney Larson801-366-7715 or 800-753-7715
 Director of Provider Relations cortney.larson@pehp.org

PEHP Website

.....www.pehp.org



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PRESORTED STANDARD
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