

# Welcome to the new provider orientation

2024



# Agenda

- Websites
- Provider newsletter
- Claims submissions
- Contact us/provider relationship management representative



# Websites

## Member website

([wellpoint.com/wa/medicaid](https://wellpoint.com/wa/medicaid)):

- Live chat with agent
- Member handbook to review benefits
- Online website to view a claim, change PCP, manage prescriptions, and more
- Provider search tool (Find A Doctor/Find Care)
- Member forms for reimbursement
- Value-added benefits such as healthy rewards, transportation, and other resources

## Provider website

([provider.wellpoint.com/washington-provider](https://provider.wellpoint.com/washington-provider)):

- Access Availability and live chat with a Provider Services representative
- Provider handbook for Medicare, Medicaid, and Foundational Community Supports (FCS)
- *Medical Policies and Clinical UM Guidelines*
- Prior authorization search tool
- Claims submission information and disputes/appeals guides
- Contact us feature to email a provider relationship management representative
- Provider communications, including provider newsletters and important updates



# Claims resources

- Timely filing for claims submission: 365 days from date of service.
- Claim reconsideration timely filing: 365 days from original *Explanation of Payment (EOP)* or denial. Can be filed verbally, through Availity, or via mail.
- Claim payment appeal timely filing: 60 days from the decision of the claim reconsideration. Please note this option can only be filed in writing via Availity or mail.
- Corrected claim submission: 365 days from the date of service.
- Rejected claim submission: 365 days from the date of service.
- **Exceptions:** For claims that require coordination due to other health insurance or if the member has another policy, the timely filing limit for new claims would be 365 days from the date of the other carrier's *EOP* date.



# Provider newsletter

## Provider News

Your digital resource to stay current on all news and announcements related to your practice and patients.

[View the current newsletter](#)



This is located under the communications section of the provider website. You can sign up to receive the newsletter via monthly email, and you can use this section regularly to check for other updates or announcements.



# Community Behavioral Health Support (CBHS)

## What is CBHS?

- CBHS services are individually tailored to meet each person's needs and to provide stability, support independence, and help them stay in the community.

## Target population:

- Individuals who are at risk for hospitalization or institutionalization, as well as individuals who have exceptional behavioral care needs requiring additional supports in the community due to being unable to remain stable outside of hospital or institutional settings without behavioral supports

## Provider types:

- Adult family homes (AFH)
- Enhanced service facilities (ESF)
- Assisted living facilities (ALF)
- Enhanced adult residential care facility (EARC)
- Adult residential care facility (ARC)



## How to bill for CBHS and AFH:

- Providers must provide the authorization number on both the institutional and professional claims. What codes do day treatment programs use to bill?
- The dates of service (DOS) procedure codes and modifiers and units of service must match those authorized on the authorization record to be paid.
- The taxonomy used on the claim submitted to HCA must be loaded on the ProviderOne provider file.

## AFH:

- Claims from AFH should be billed on the *Supportive Supervision Reporting Spreadsheet* and sent to the Wellpoint email address: [WACBHS@wellpoint.com](mailto:WACBHS@wellpoint.com)

## Questions:

- If you have any questions, contact the designated provider relationship manager via email: [Chaloon.yara@wellpoint.com](mailto:Chaloon.yara@wellpoint.com) or phone at **702-575-9102**.

# Availity

Through the [Availity online website](#), you will have access to:

- Claims.
- Prior authorization look-up tool.
- Member eligibility and benefits inquiry.
- Authorizations.
- Clear claims connections.
- Member panel listings.
- Availity provider data management (PDM).

Get trained by visiting the [Availity Learning Hub](#).

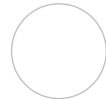


## Availity PDM:

- This tool includes our Roster Upload feature.
- When you need to upload a roster to add, term, or change linked provider data, you can do so via a roster submission. The standard Washington MCO roster template, or the standard roster template linked via our website or Availity payer spaces, can be used.
- If rosters are compatible after upload, and all required fields are included, the processing time through roster automation is five business days.

# How to use Availity PDM

- You will log in to your Availity account, select manage my organization, then Provider Data Management. This screen will list all TINs that you are assigned to.
- Find the business/TIN you need to upload the Roster for, then, on the right-hand side you will see a menu option, that will allow you to upload roster.
- If you do not have this option, contact your Availity Admin to ensure you have access. **\*You can only have one roster per TIN.**



## Accessing the PDM application:

- Log on to [Availity.com](https://www.availity.com) and select My Providers > **Provider Data Management** to begin the attestation phase.
- If submitting a roster, find the TIN/business name for which you want to verify and update information.
- Before you select the TIN/business name, select the **three-bar menu option** on the right side of the window, select **Upload Rosters**, and follow the prompts.





# Contact us

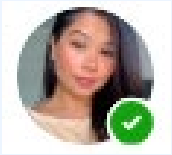
You have many options to contact Wellpoint:

- **Live chat:** Log in to Availity.
- **Phone: 833-731-2274.** Monday through Friday from 5 a.m. to 5 p.m. (PST). Hours may vary for holidays.
- **Email:** Navigate to the Contact Us section of our website to find this option.

Email a provider relationship management representative:

- Did you have a question? You can [message](#) the Health Care Networks team. Your provider relationship management representative will respond — usually within two business days.





# Chaloon Yara

## Provider Relationship CHBS Account Manager

The main point of contact for CBHS escalated issues and CBHS education and provider onboarding is Chaloon Yara. Contact for assistance with:

- Timely filing.
- Claims (including education on denials and rejections).
- New provider orientation.
- New provider onboarding.

Contact information:

- Email: [Chaloon.yara@wellpoint.com](mailto:Chaloon.yara@wellpoint.com)
- Phone: **702-575-9102**
- Office: 705 5th Ave, S Suite 300, Seattle, WA 98104

New provider orientation, sign-up and dates:

- June 28th at 10 a.m. (PST): [Sign up here](#)
- July 26th at 10 a.m. (PST): [Sign up here](#)
- August 30th at 10 a.m. (PST): [Sign up here](#)
- September 27th at 10 a.m. (PST): [Sign up here](#)
- October 25th at 10 a.m. (PST): [Sign up here](#)
- November 22nd at 10 a.m. (PST): [Sign up here](#)
- December 27th at 10 a.m. (PST): [Sign up here](#)



# Thank you

This presentation is available 24/7 via our website under the Training Academy section.

If you have any questions, submit an email to a provider relationship management representative, and we will get back to you within two business days.

Welcome to Wellpoint: We look forward to partnering with you in service to our members.





[provider.wellpoint.com/wa](https://provider.wellpoint.com/wa)

Coverage provided by Wellpoint Washington, Inc.

WAWP-CD-062476-24 | July 2024