



March 29, 2018

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It's Time to Submit Claims for Peach State Health Plan (Ambetter & Allwell)

Peach State Health Plan has finally loaded our first group of providers with a 2/1/2018 effective date. We found a few errors, which they are fixing, but most of the group was properly loaded so patients can find you. We have also submitted our test claims and received our first payment, which was processed in our 3/27/2018 check run.

If you have been holding claims, it is finally time to submit. So please send us your claims.

Provider Effective Dates

PSHP Provider Load 1 - Peach State Health Plan has completed the loading of the first group of providers, those who submitted enrollment forms by 1/23/18. They are effective as of 2/1/18. Please submit claims for services from 2/1/18 to present. You can verify you are loaded by going to the Ambetter website and completing a [Provider Search](#). Remember, all claims must come through ActivHealthCare. [SEE HOW TO SUBMIT CLAIMS](#).

PSHP Provider Load 2 - The second group of providers, those who sent the enrollment form after 1/24/2018, but before 2/19/2018, are being loaded now. We sent the list on 2/20/2018. We just received confirmation that 3/1/2018 will be the effective date and provider updates should be completed within the next week.

Subsequent Provider Updates - Peach State Health Plan will determine the effective date on Providers submitted after 2/20/18.

If you have not joined, it is not too late. The enrollment form is necessary to participate in the Peach State Health Plan Ambetter and Allwell products. It can be found on the Home page of our website, www.ActivHealthCare.com.

How to Submit Claims

All claims must be submitted through ActivHealthCare. This can either be done electronically through Office Ally or on paper. Paper claims and other clearinghouses will take longer to process, so we strongly encourage providers use Office Ally as a clearinghouse.

- If you use Office Ally, the format for submitting Peach State Health Plan Ambetter and Allwell claims is as follows:

AHC01 Peach State Health Plan (Ambetter)
EDI Payer ID 68069
P.O. Box 5010
Farmington, MO 63640-5010

- If you use a clearinghouse other than Office Ally for your ActivHealthCare claims, you will need to submit paper claims to ActivHealthCare. Otherwise, the claims may be processed as out of network and denied. The website training, under Network Resources at www.ActivHealthCare.com, thoroughly covers how to format the address. If you have questions, call 770-455-0040.
- If you submit claims on paper, be sure to review the training presentations to avoid unnecessary delays.
- If you use a billing service, be sure they are properly trained. Most of the claim problems we see originate with billing services not knowing how to work with ActivHealthCare.

Use of Modifiers



Peach State Health Plan follows CMS guidelines with respect to modifiers. Providers are expected to use modifiers appropriately. The Provider Manual and Billing Manual, which is available on the Ambetter website under Provider Resources, will give additional information. It can be accessed through the following link: <https://ambetter.pshpgeorgia.com/provider-resources.html>.


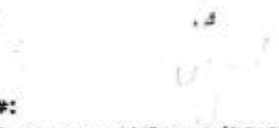
Claim Status and Benefit Verification

Peach State Health Plan has an online Provider Tool for benefit verification and checking claims status. **DO NOT USE IT.** Peach State has loaded the providers under ActivHealthCare's Tax ID number. Do not try to set up an account with Activ's TIN. Providers may only use Activ's TIN to verify eligibility, not set up accounts.

Claim Status can be tracked through the [ActivHealthCare Customer Service Center](#).

Benefits can be verified either by calling the number on the insurance ID card or by using Availity. We have tested Availity and it works. The deductible and copays are the main variables. All other benefits will be the same. Below are two examples of insurance ID cards. On the top card, there is a \$5 co-pay for Specialist (Chiropractors). The deductible will not apply on exams, adjustments or modalities. It may apply on X-rays. On the bottom card, the deductible applies to everything. Notice the wording difference on the card. Once you verify coverage on one or two patients, it will become easy.

 FROM 		IN NETWORK COVERAGE ONLY	
Subscriber:		Effective Date of Coverage:	01/01/2018
Member:		RXBIN:	004336
Policy #:		RXPCN:	ADV
Member ID #:		RXGROUP:	RX5446
Plan:	Ambetter Balanced Care 4 (2018)		
Copays:		Int. Coinsurance: 0.00%	
PCP:	n/a	Int. Deductible:	\$600
Specialist:	\$5.00	Rx (Generic/Brand):	n/a / \$25.00
Urgent Care:	\$10.00		
ER:	n/a		

		IN NETWORK COVERAGE ONLY
Subscriber: Member: Policy #: Member ID #: Plan: Ambetter Essential Care 1 (2018)		Effective Date of Coverage: 01/01/18 RXBIN: 004336 RXPCN: ADV RXGROUP: RX5446
COPAYS		
PCP: \$0 after Deductible Specialist: \$0 after Deductible Rx (Generic/Brand): \$20/\$0 after Deductible Urgent Care: \$0 after Deductible ER: \$0 after Deductible	Int. Deductible: \$6800 Int. Coinsurance: 0%	

TriZetto (Gateway) and Office Ally

Several ActivHealthCare providers use TriZetto as a clearinghouse. We have had several provider offices tell us that TriZetto said the provider could send claims electronically to ActivHealthCare through TriZetto. We have never seen this work. TriZetto has never tested with ActivHealthCare. Claims submitted electronically by TriZetto are either processed as out of network by the payor or they do not reach the payor. If TriZetto drops the claims to paper, we are able to get them processed if we can identify who the payer is. In summary, Office Ally is currently the only clearinghouse from whom we can accept electronic claims.

Term Summary Sheets and Fee Schedules

The TSS and FS for Peach State Health Plan have been posted on the [Customer Service Center](#). Please be sure to pull these if you have questions on amount allowable for services.