



Ambetter of Arkansas

*Arkansas Medical Society
12th Annual Insurance Conference
October 1, 2015*

10/5/2015



AGENDA

1. Verification of Eligibility
2. Prior Authorization
3. Claims Submission
4. PaySpan
5. Ambetter of Arkansas website
6. P4P
7. PCMH
8. What is New?



Verification of Eligibility, Benefits and Cost Share

Eligibility, Benefits and Cost Shares can be verified in 3 ways:


- 1. The Ambetter secure portal found at: www.ambetterofarkansas.com**
 - If you are already a registered user of the Ambetter of Arkansas secure portal, you do NOT need a separate registration!
- 2. 24/7 Interactive Voice Response system**
 - Enter the Member ID Number and the month of service to check eligibility
- 3. Contact Provider Service at: 877-617-0390**

Verification of Eligibility

Viewing Eligibility For :
430662495

Eligibility Check

Date of Service
06/28/2013
Member ID or Last Name
123456789 or Smith
DOB
mm/dd/yyyy
Check Eligibility
Print

ELIGIBLE	DATE OF SERVICE	PATIENT NAME	DATE CHECKED	CARE GAPS	PROGRAM
 Eligible	06/28/2013	SAMUEL MEMBER	6/28/2013		Ambetter

Remove

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Prior Authorization

Prior Authorization will be granted at the CPT code level.

1. If a claim is submitted that contains CPT codes that were not authorized, the services will be denied.
 - If during the procedure additional procedures are performed, in order to avoid a claim denial, the provider must contact the health plan to update the authorization. It is recommended that this be done within 72 hours of the procedure; however, it must be done prior to claim submission or the claim will deny.
2. Ambetter will update authorizations but will not retro authorize services. The claim will deny for lack of authorization. If there are extenuating circumstances that led to the lack of authorization, the claim may be appealed.

Prior Authorization

Pre-Auth Needed Tool:



Are Services being performed in the Emergency Department?

YES ☐ NO ☒

Types of Services	YES	NO
Is the member being admitted to an inpatient facility?	<input type="radio"/>	<input checked="" type="radio"/>
Is the member having observation services?	<input type="radio"/>	<input checked="" type="radio"/>
Are anesthesia services being rendered for pain management or dental surgeries?	<input type="radio"/>	<input checked="" type="radio"/>
Is the member receiving hospice services?	<input type="radio"/>	<input checked="" type="radio"/>
Are services, other than DME, orthotics, prosthetics, and supplies, being rendered in the home?	<input type="radio"/>	<input checked="" type="radio"/>

Enter the code of the service you would like to check:

Check

N
No

69436 - TYMPANOSTOMY GEN ANES
No authorization required.



Claim Submission

The timely filing deadline for initial claims is 180 days from the date of service or date of primary payment when Ambetter is secondary.

Claims may be submitted in 3 ways:

- 1. The secure web portal located at www.ambetterofarkansas.com**
- 2. Electronic Clearinghouse**
 - Payor ID 68069
 - Clearinghouses currently utilized by Ambetter of Arkansas will continue to be utilized
 - For a listing our the Clearinghouses, please visit our website at www.ambetterofarkansas.com
- 3. Paper claims may be submitted to PO Box 5010 Farmington, MO 64640-5010**

Claim Submission



Other helpful information:

NPI and Taxonomy Codes

- Professional claims must be submitted with the rendering provider's NPI and taxonomy code as well as the organizational NPI and taxonomy code.
- The claim will reject if the above elements are not present
- This information is necessary in order to accurately adjudicate the claim

CLIA Number

- If the claim contains CLIA certified or CLIA waived services, the CLIA number must be entered in Box 23 of a paper claim form or in the appropriate loop for EDI claims.
- Claims will be rejected if the CLIA number is not on the claim
- Certain basic tests may be performed under a Certificate of Waiver, but CLIA Certification is required for more complex procedures. You will not be paid for a test that you are not authorized to perform. **NO PASS THROUGH BILLING!**

ICD-10

- Claims submitted for dates of service on or after October 1, 2015 must utilize ICD-10 codes. Claims billed without the ICD-10 will be rejected.



PaySpan


- Ambetter partners with PaySpan for Electronic Remittance Advice (ERA) and Electronic Funds Transfer
- If you currently utilize PaySpan, you will need to register specifically for the Ambetter product
- **To register for PaySpan:**
Call 1-877-331-7154 or visit www.payspanhealth.com

Public Website



Accessing the Public Website for Ambetter:

- Go to www.AmbetterofArkansas.com

	FOR MEMBERS	FOR PROVIDERS	HOW TO ENROLL
Login	Still need to enroll in a plan? You may qualify! Call 1-877-687-1189 Learn More		
Find a Provider			
How to Enroll			
Learn More			
Our Health Plans			
Health & Wellness			
For Members			
For Providers			
For Brokers			
Newsroom			
Community Events			



Public Website

Information contained on our Website:

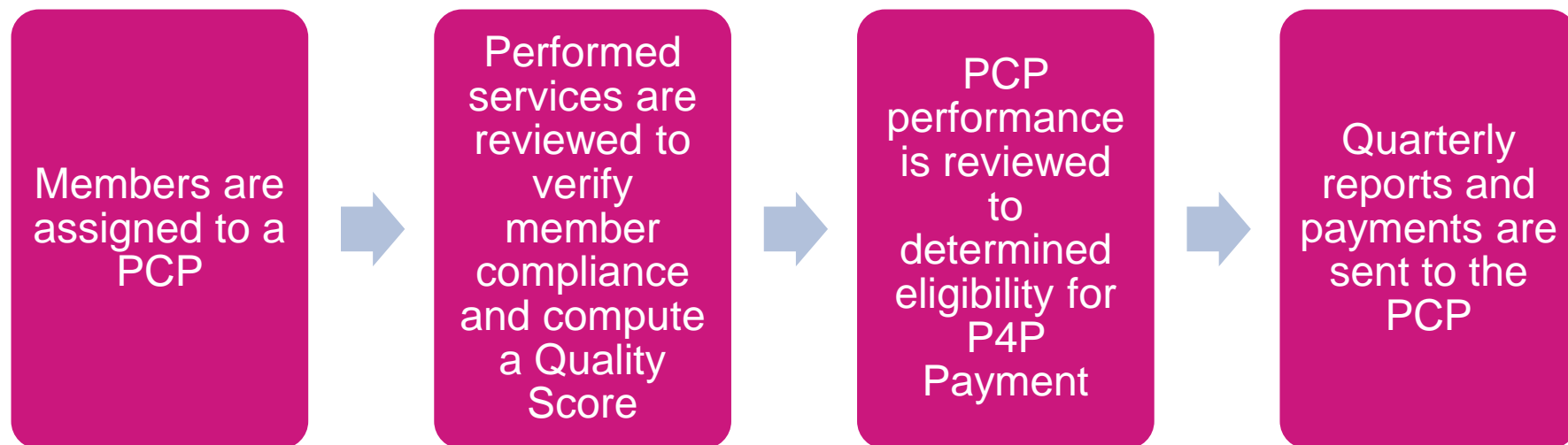
- The Provider and Billing Manual
- Quick Reference Guides
- Forms (Notification of Pregnancy, Prior Authorization Fax forms, etc.)
- The Pre-Auth Needed Tool
- The Pharmacy Preferred Drug Listing
- And much more...



P4P for PCPs

- Family Practice
- Internal Medicine
- Pediatrics
- Geriatrics
- Nurse Practitioners

How P4P Works





P4P Payouts

- Possible bonus Max \$2 PMPM for all member months
- Quality score determines percentage payment of maximum bonus available by quarter
- Final payout determined 3 months following the plan year for all services delivered to members throughout the year.

If you are a PCP and did not receive information about the Pay 4 Performance Program, please stop by our table.



PCMH for Arkansas

- Current participants are based on the Arkansas Medicaid PCMH Approved Provider Listing
- All Members have been assigned a PCP if one has not already been chosen
- \$5 PMPM Payments
- Providers can see their assigned members via the Secure Provider Portal
- Will add NQCA PCMH Accredited clinics to the PCMH participation list for 2016. If interested, you can send an email to ambetterarproviders@ambetterhealth.com or call 877-617-0390 (enter prompts 3,5,3) and an application will be sent to you.



Recent Changes

- NIA Requirements
- Physician Fee Schedule Updates
- EX Code Enhancements



Contact Information

Ambetter of Arkansas

Phone: 877-617-0390

TTY/TDD: 877-617-0392

www.AmbetterofArkansas.com