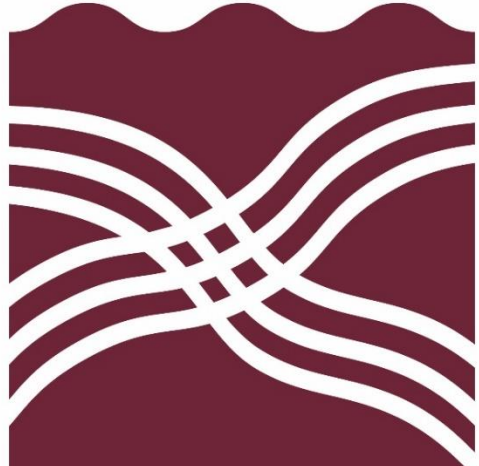


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PHC Wellness  
& Recovery™  
HOPE IS HERE

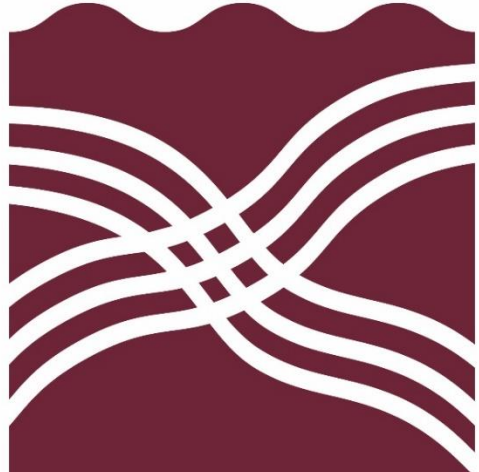
# Wellness and Recovery Program

Drug Medi-Cal Organized Delivery Service  
February 2021





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# Wellness and Recovery Electronic Claims

# Agenda

- Benefits of Billing Electronically
- EDI Terminology
- EDI Process
- Enrollment
- Testing
- Office Ally
- Resources

# Benefits of Billing Electronically

- Increased auto adjudication
- Faster reimbursement
- Reduced billing errors
- Reduced cost
- Resource conservation

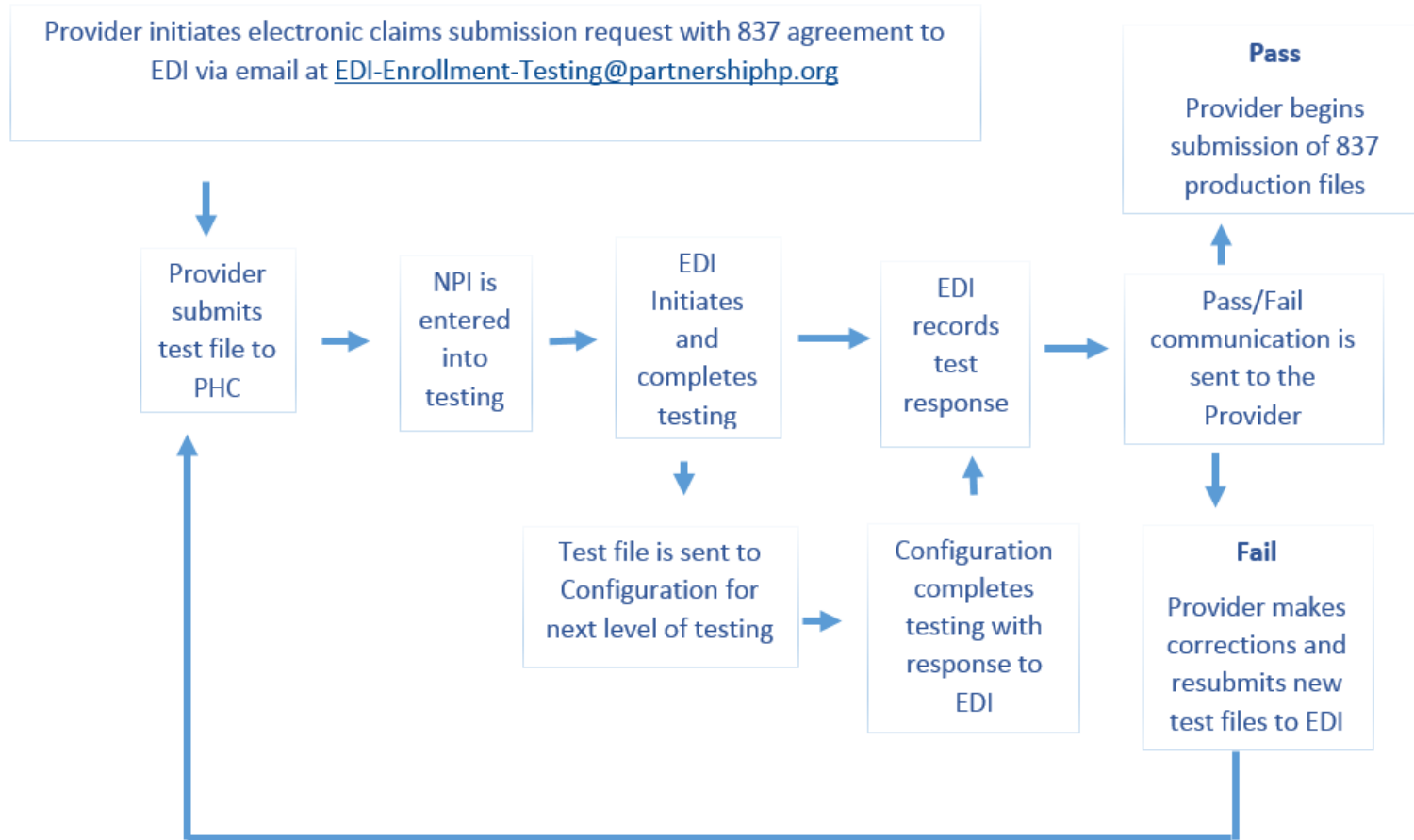
# EDI Terminology

- **EDI (Electronic Data Interchange):** The electronic interchange of business information using a standardized format that is HIPAA compliant and allows providers to send information to Partnership HealthPlan of California (PHC) electronically rather than on paper
- **Billing Provider:** SUD provider of service
- **Trading Partner/Clearinghouse:** HIPAA compliant vendor that submits claims on the provider's behalf in the appropriate 837 format
- **837 File:** Claim information in an electronic format
- **835 File/ERA:** Electronic Remittance Advice – payment information
- **277 File:** Claims accepted and rejected information sent back to the provider in an electronic format



# EDI Process

## Current EDI Process



Estimated 45-day turnaround from receipt of test file to response to provider

# Enrollment

- The 837 Claims Enrollment & Payer Agreement Document should be completed and signed by the Trading Partner and the Billing Provider.
- The Trading Partner is the party that submits electronic claims directly to PHC. The Trading Partner and the Billing Provider representatives that sign the 837 Claims Enrollment & Payer Agreement Document indicate that the Trading Partner is authorized to submit claim transactions in HIPAA compliant formats on behalf of the Billing Provider.
- The Billing Provider should continue to submit paper claims until they receive notification that the Trading Partner has been approved to submit electronic claims to PHC on behalf of the Billing Provider listed in the 837 Claims Enrollment & Payer Agreement Document.

# Testing

To enroll for electronic claims submissions to PHC, a HIPAA compliant test file needs to be submitted for each billing provider (NPI#) and have it validated and approved by PHC. The billing provider needs to prepare a test file according to the requirements below. If you are using a clearinghouse, third-party vendor, or billing entity, work with them in submitting a test file on behalf of the billing provider.

## **Test file requirements:**

- Submitter ID assigned by PHC must be sent in ISA06 and GS02 of the 837 files
- Only one billing NPI per test file. Each NPI needs to be enrolled separately
- A minimum of 10 test claims is recommended for each test file
- The test claims should include a variety of services that the provider normally bills and must include eligible PHC members and valid dates of service
- The testing process begins once the test file has been received

Once testing is completed you will be notified via email when you can begin to submit production claims



# Office Ally

Office Ally provides clearinghouse services to medical providers at no cost.

## Pros:

- No contract is required, only enrollment which can be canceled at any time
- All required forms are available on the website and they will assist with creating and submitting your test claims
- No billing software is required. Simply:
  - Create a claim as you currently do
  - Log into [www.OfficeAlly.com](http://www.OfficeAlly.com) and click, "Upload HCFA 1500"
  - Click, "Select File"
  - Find your file and click, "Open"
  - Click, "Upload"

# Office Ally, cont.



## WHAT FORM(S) SHOULD I DO?

- [837 Claims Enrollment & Payer Agreement](#)
- [835 ERA Enrollment & Payer Agreement](#)

## WHERE SHOULD I SEND THE FORM(S)?

- Fax to: (707) 863-4390; or
- Email to: [EDI-Enrollment-Testing@partnership.org](mailto:EDI-Enrollment-Testing@partnership.org)

## WHAT IS THE TURNAROUND TIME FOR ENROLLMENT?

- Standard processing time is 4-6 weeks.
- Notice of approval will be emailed to the provider and Office Ally.
- PHC requires each EDI approved provider to send a minimum of 10 test claims.
- Providers should contact [PayerSupport@officeally.com](mailto:PayerSupport@officeally.com) for instructions on sending test claims.

## HOW DO I CHECK STATUS?

- Call (707) 863-4520 and ask if you have been linked to our Submitter ID OFA330897513000 and approved for Production.
- Once enrollment has been approved, you **MUST** contact Office Ally at (360) 975-7000 Option 1 and notify us of the approval **BEFORE** submitting claims for electronic transmission.

Enrollment forms can be found here:

<https://cms.officeally.com/Pages/ResourceCenter/PayerEDIEnrollmentForms.aspx>

# Resources

## EDI Contact Information:

- PHC EDI Enrollment & Testing | Information Technology Department  
Phone: (707) 863-4527 | Fax: (707) 863-4390  
Email: [EDI-Enrollment-Testing@partnershiphp.org](mailto:EDI-Enrollment-Testing@partnershiphp.org)
- PHC EDI Production Support | Information Technology Department  
Phone: (707) 863-4520 | Fax: (707) 863-4390  
Email: [EDI-Production-Support@partnershiphp.org](mailto:EDI-Production-Support@partnershiphp.org)

## EDI Enrollment Forms:

[837 Claims Enrollment & Payer Agreement](#)  
[835 ERA Enrollment & Payer Agreement](#)

## Professional Companion Guide:

[Professional Companion Guide](#)

## SunGard – EFT Enrollment

Phone: (877) 330-4950 5 a.m. – 3 p.m PST  
Email: [TMSImplementations@unionbank.com](mailto:TMSImplementations@unionbank.com)

**Note:** Provider will need the Pay To/Payee code provided by Provider Relations for enrollment. SunGard refers to this code as Vendor ID.



# Resources

Monday - Friday  
8 a.m. - 5 p.m.

Claims Support  
(530) 999-6868

Partnership HealthPlan of California  
[www.partnershiphp.org](http://www.partnershiphp.org)

Email Support

[ClaimsWellnessRecovery@partnershiphp.org](mailto:ClaimsWellnessRecovery@partnershiphp.org)

PHC Online Services

<https://provider.partnershiphp.org/IUI/Login.aspx>