



Dear Provider:

Thank you for being a valued provider. As we've previously shared with you, Centene, which owns Peach State Health Plan, has purchased WellCare. Effective May 1, 2021, the integration of Peach State Health Plan and WellCare will be complete. The information contained in this announcement will assist you with changes affecting current Georgia Medicaid members' 2021 EDI Claims Submissions, Member Eligibility, Claims Status Inquires and Customer Service information.

**Please Note:** We would like to help your billing department get your electronic claim submissions processed as efficiently as possible. For the fastest, most accurate processing, EDI is the preferred method.

We ask all providers to review the below date of service guidance and update your system accordingly to submit to the correct payer. This will be the quickest and most efficient way to submit all (837P) and (837I) claim submissions.

**DATE OF SERVICE GUIDANCE**

Date of Service	Health Plan Name	Claim Type	Clearinghouse Payer ID
<b>Before</b> 05/01/2021	WellCare of Georgia, Inc. (including PeachCare for Kids Planning for Healthy Babies) (Medicaid)	Professional and Institutional	14163
<b>On or after</b> 05/01/2021	Peach State Health Plan (Medicaid)	Medical Professional and Institutional	68069
<b>On or after</b> 05/01/2021	Peach State Health Plan	Behavioral Health Professional and Institutional	68068

**INSTRUCTIONS ON HOW TO DETERMINE CORRECT PAYER FOR DATE OF SERVICE**

- **If billing a professional submission with services beginning prior to 05/01/2021, and ending on or after 05/1/2021**, to avoid rejection please **split the services into two separate claim submissions**. Professional (837P) service date for all claim lines is located in Loop 2400 (DTP\*472\*from-through~).
- **If billing a professional or an outpatient bill type institutional submission**, please use the **earliest From Date in the claim submission for the guidance outlined below**. Professional (837P) earliest service date in all claim lines is located in Loop 2400 (DTP\*472\*from-through~). Institutional statement date is located in Loop 2300 (DTP\*434\*from-through~).



- **If billing an institutional inpatient bill type submission**, please use the **From Date** Institutional statement date located in Loop 2300 (DTP\*434\*from-through~) **in the claim submission for the guidance outlined below.**

**CORRESPONDENCE**

**Please be aware, your billing department will need to submit to the appropriate payer to prevent submission delays.** Use the same date of service logic provided on the first page to determine the correct payer.

Health Plan & Correspondence Type	Date of Service	Mailing Address
<b>Claim Payment Disputes</b> (Related to untimely filing, incidental procedure, unlisted procedure code)	<b>Before</b> 05/01/2021	WellCare Health Plans Claim Payment Disputes P.O. Box 31370 Tampa, FL 33631-3370
	<b>On or after</b> 05/01/2021	Peach State Health Plan Medical Claims P.O. Box 3030 Farmington, MO 63640-3800
<b>Claim Payment Disputes</b> Behavioral Health Claims (Related to untimely filing, incidental procedure, unlisted procedure code)	<b>Before</b> 05/01/2021	WellCare Health Plans Claim Payment Disputes P.O. Box 31370 Tampa, FL 33631-3370
	<b>On or after</b> 05/01/2021	Peach State Health Plan Behavioral Health Claims P.O. Box 6700 Farmington, MO 63640-3816
<b>Claim Appeals</b> (Medical) (Medical necessity, authorization denials, benefits exhausted and non-covered procedures)	<b>Before</b> 05/01/2021	WellCare Health Plans Attn: Medical Appeals Department P.O. Box 31368 Tampa, FL 33631-3368
	<b>On or after</b> 05/01/2021	Peach State Health Plan Attn: Provider Appeals P.O. Box 3000 Farmington, MO 63640-3800
<b>Claim Appeals</b> Behavioral Health	<b>Before</b> 05/01/2021	WellCare Health Plans Attn: Provider Appeals P.O. Box 31368 Tampa, FL 33631-3368



	<b>On or after</b> 05/01/2021	Peach State Health Plan Attn: Provider Appeals P.O. Box 6000 Farmington, MO 63640-3809
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**ELECTRONIC FUNDS TRANSFER AND ELECTRONIC REMITTANCE**

There are no changes, as PaySpan® Health will continue to be the provider of Electronic Funds Transfer (EFT) and Electronic Remittance Advice/Explanation of Payment (ERA/EOP) free solutions. If you are not already registered, create a new account by registering at **www.payspanhealth.com** or calling **1-877-331-7154**.

**RESOURCES**

<b>Date of Service</b>	<b>Resource Links</b>
<b>Before</b> 05/01/2021	<a href="https://www.wellcare.com/Wellcare/Georgia/Providers/Medicaid">https://www.wellcare.com/Wellcare/Georgia/Providers/Medicaid</a>
<b>On or after</b> 05/01/2021	<a href="https://www.pshpgeorgia.com/providers/resources.html">https://www.pshpgeorgia.com/providers/resources.html</a>

**OTHER PROVIDER SERVICE INQUIRIES**

For eligibility/benefit information, claim status or other claims-related dispute questions you may have, please choose the appropriate provider service number below.

If you have any questions about this message, please contact the EDI Department at the email below.

<b>Date of Service</b>	<b>Health Plan</b>	<b>Provider Service Phone #</b>	<b>Questions via email</b>
<b>Before</b> 05/01/2021	<b>WellCare of Georgia, Inc.</b>	<b>1-866-231-1821</b>	<a href="mailto:EDI-Master@wellcare.com">EDI-Master@wellcare.com</a>
<b>On or after</b> 05/01/2021	<b>Peach State Health Plan</b>	<b>1-866-874-0633</b>	<a href="mailto:EDIBA@CENTENE.COM">EDIBA@CENTENE.COM</a>

Sincerely,

WellCare Health Plans