

Claims/EDI Submission Guidelines Table of Contents

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Claims/EDI Submission Guidelines: Tab

Overview

- As previously communicated, MeridianCare, a WellCare company, will change its name and logo to WellCare, **effective Jan. 1, 2020**. This change means current MeridianCare Medicare members will become WellCare Health Plans members.
- This announcement is to help providers with changes in 2020 for Claim Submissions, Member Eligibility, Claim Status Inquires and Customer Service information. We want to help your billing department submit claim submissions for processing as efficiently as possible.

Determine Correct Payer for Date of Service

- **Please be aware, your billing department must send claim submissions to the appropriate payer to prevent delays.** Please use the date of service logic tab provided below. **To avoid a rejection**, a claim submission with service dates spanning 2019 and 2020 should be split by year and sent as two claim submissions to be handled by the appropriate payers.

Instructions on How to Determine Correct Payer for Date of Service:

- If billing a **fee for service (FFS) institutional submission with the bill types 18x, 21x or 32x**, please use the **through date to perform the date of service evaluation in the Date of Service Guidance Grid on top of the next page**. Institutional (837I) statement date is in Loop 2300 (DTP*434*from-through~) and for paper box FL-06 of the UB-04 standard paper form.
- If billing a **fee for service (FFS) professional or institutional submission with an outpatient bill type**, please use the **earliest from date to perform date of service evaluation in the Date of Service Guidance Grid on top of the next page**. Professional (837P) earliest service date in all claim lines which is in Loop 2400 (DTP*472*from-through~) or FL-24a unshaded area on the CMS1500 02/12 form. Institutional statement date is in Loop 2300 (DTP*434*from-through~) or FL-06 of the UB-04 paper form.
- If billing a **fee for service (FFS) institutional inpatient bill type**, please use **the admit date to perform date of service evaluation in the Date of Service Guidance Grid on top of the next page**. Institutional (837I) statement date is located Loop 2300 (DTP*435*date~) or FL-06 of the UB-04 paper form.

Fee For Service (FFS) and Encounter (ENC) Guidance:

- Fee-For-Service (FFS) is defined in the Transaction Type Code BHT06 as CH, which means Chargeable, expecting adjudication
- Encounters (ENC) is defined in the Transaction Type Code BHT06 as RP, which means Reportable only, NOT expecting adjudication

Date of Service Logic Guidance:

Date of Service	Health Plan Name	Transaction Type (CH/RP)	Clearing House Payer ID	Paper Claim Submissions
On or before Dec. 31, 2019	MeridianCare, Health Plan of Illinois (MHPIL)	Fee-for-Service BHT06 = CH	13189	MeridianCare ATTN: Claims Department 1 Campus Martius, Suite 720 Detroit, MI 48226
On or before Dec. 31, 2019	MeridianCare, Health Plan of Michigan (HPM)	Fee-for-Service BHT06 = CH	Meridian: 52563 Emdeon: 83253	MeridianCare ATTN: Claims Department 1 Campus Martius, Suite 710 Detroit, MI 48226
On or before Dec. 31, 2019	Above HPM plan using Emdeon Payer ID	Fee-for-Service BHT06 = CH	83253	MeridianCare ATTN: Claims Department 1 Campus Martius, Suite 710 Detroit, MI 48226
On or after Jan. 1, 2020	WellCare Health Plans, Inc.	Fee-for-Service BHT06 = CH	14163	WellCare Health Plans ATTN: Claims Department P.O. Box 31372 Tampa, FL 33631-3372
On or after Jan. 1, 2020	WellCare Health Plans, Inc.	Encounter BHT06 = RP	59354	WellCare Health Plans ATTN: Claims Department P.O. Box 31372 Tampa, FL 33631-3372

Please Note: For fastest, most accurate processing, EDI is the preferred method.

REAL-TIME CONNECTIVITY

Vendor Partner	Health Plan	Phone Numbers
Change Healthcare	WellCare and Meridian	1-877-363-3666, prompt 1
Availity®	WellCare and Meridian	1-800-282-4548
TransUnion® Healthcare	WellCare	1-877-732-6853
AdminisTEP.com	WellCare	1-888-751-3271
Payerpath	Meridian	1-877-623-5706, prompt 2
SSI® Group	Meridian	1-800-880-3032, prompt 8

These services improve data interchanges, provide an innovative solution to provider requests and implement other HIPAA-compliant transactions in the future:

- Real-time eligibility and claim status information – no waiting on the phone
- Low or no cost to the provider community

- Increased office productivity
- One-stop shopping-view eligibility and claim status information for all participating health insurance companies from a single website with a single login

CORRESPONDENCE ADDRESSES:

Please be aware, your billing department must submit to the appropriate payer to prevent submission delays. Use the same date of service logic shown on the first page to determine the correct payer to mail any paper submissions.

Health Plan & Correspondence Type	Date of Service	Mailing Address
IL Claim Payment Disputes (Related to untimely filing, incidental procedure, unlisted procedure code)	On or before Dec. 31, 2019	MeridianCare ATTN: Claims Department 1 Campus Martius, Suite 720 Detroit, MI 48226
	On or after Jan. 1, 2020	WellCare Health Plans Claim Payment Disputes PO Box 31370 Tampa, FL 33631-3370
MI Claim Payment Disputes (Related to untimely filing, incidental procedure, unlisted procedure code)	On or before Dec. 31, 2019	MeridianCare ATTN: Claims Department 1 Campus Martius, Suite 710 Detroit, MI 48226
	On or after Jan. 1, 2020	WellCare Health Plans Claim Payment Disputes PO Box 31370 Tampa, FL 33631-3370
IL and MI Claim Appeals (Medical) (Medical necessity, authorization denials, benefits exhausted and non-covered procedures)	On or before Dec. 31, 2019	MeridianCare ATTN: Appeals Department P.O. Box 44260 Detroit, MI 48244
	On or after Jan. 1, 2020	WellCare Health Plans Appeals Department PO Box 31368 Tampa, FL 33631-3368

ELECTRIC FUNDS TRANSFER AND ELECTRONIC REMITTANCE



WellCare offers a free solution for Electronic Funds Electronic Funds Transfer (EFT) and Electronic Remittance Advice/Explanation of Payment (ERA/EOP) through PaySpan®. If you are not already registered, create a new account by registering at www.payspanhealth.com or calling **1-877-331-7154**.

OTHER PROVIDER SERVICE INQUIRIES

For eligibility/benefit information, prior authorization, claim status or other claims-related inquiries you may have, please choose the appropriate provider service number below:

Date of Service	Health Plan	Provider Service Phone #
On or before Dec. 31, 2019	MeridianCare	1-877-902-6784
On or after Jan. 1, 2020	WellCare Health Plans	1-877-902-6784

Please remember to register for the Provider Portal as soon as possible to take advantage of our self-service tools and to utilize CHAT for your inquiries starting on 1/1/2020. Click here to register.

If you have any questions regarding this message, please feel free to email WellCare's EDI Department at EDI-Master@wellcare.com. We look forward to partnering with you in healthcare.

Sincerely,

WellCare Health Plans, Inc.