

# Provider Update

A Quarterly Update for HealthWave 21 CHIP Providers



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In this issue:

**Page 1— Payformance, Web Updates**

**Page 2 — Claims Corner, KHPA/KDHE changes, Form to Use for Claims**

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### **Claims**

Cenpatico  
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CLAIMS DEPARTMENT  
P. O. Box 6400,  
Farmington, MO 63640

### **Appeals – Claims**

Cenpatico  
ATTN: CLAIMS APPEALS  
P. O. Box 6000  
Farmington, MO 63640

### **Claims Support Liaison**

866-324-3632

### **KMAP**

800-933-6593

[www.kmap-state-ks.us/  
Public/Provider.asp](http://www.kmap-state-ks.us/Public/Provider.asp)

## Cenpatico and Payformance Partner to Provide Innovative Web Based Solutions for EFT and ERA

Cenpatico and Payformance have partnered to provide an innovative web-based solution for Electronic Funds Transfers (EFTs) and Electronic Remittance Advices (ERAs). The service, PaySpan Health, is provided at no cost and allows online enrollment.

Providers can take advantage of EFTs and ERAs to settle claims electronically without making an investment in expensive EDI software. Following a fast online enrollment, providers will be able to receive ERAs and import the information directly into their Practice Management or Patient Accounting System. This will eliminate the need to key remittance data off of paper advices.

PaySpan Health service can rapidly transition providers into the world of electronic payments and automated reconciliation and greatly reduce time and paperwork. PaySpan Health offers providers a complete solution for claim payment management. Using PaySpan Health, providers can route EFTs to one or more bank account(s), manage multiple payers, choose how to receive remittance details, easily re-associate payments with claims and take advantage of claim and remittance retrieval and reporting.

**Getting Started is Easy...**The process starts with an invitation from Cenpatico that includes a registration code. Armed with this code, providers can pursue an online enrollment process that will take about 5-10 minutes to complete. During this enrollment process, providers will set up a profile of their practice, specify bank accounts (multiple accounts if you desire) and specify other preferences for management of checks, EFTs, ERAs or online presentation of claim payment information.

Payformance will conduct all provider training and provider support either via phone or online.

Watch for further details on how to enroll in Fall 2011.

## New on the Cenpatico Website

Check out the Cenpatico website at [www.cenpatico.com/providers/forms/kansas/](http://www.cenpatico.com/providers/forms/kansas/) for updates to:

- ◆ Provider Manual
- ◆ FAQ Guides

## Claims Corner

### A Reminder About Verifying Member Eligibility

Providers are responsible for verifying eligibility every time a member schedules an appointment and when they arrive for services. A member's eligibility for coverage under HealthWave 21 may change suddenly for a variety of reasons beyond Cenpatico's control.

To verify member eligibility providers may:

- Go to the secure KMAP website that allows providers with authorization to conduct real-time eligibility verifications by entering the member's ID and the date of service. The website, [www.kmap-state-ks.us/Public/Provider.asp](http://www.kmap-state-ks.us/Public/Provider.asp), is available 24 hours a day, seven days a week.
- Call KMAP Customer Service at 800-933-6593. This service is available between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday.

To learn more about HealthWave 21 go to [www.kdheks.gov/hcf/healthwave/eligibility\\_guidelines.html](http://www.kdheks.gov/hcf/healthwave/eligibility_guidelines.html)

### State of Kansas Changes to KHPA and Medical Cards

Effective July 1, 2011, all references to Kansas Health Policy Authority (KHPA) were changed to the new agency name, which is Kansas Department of Health and Environment, Division of Health Care Finance (KDHE-DHCF). Kansas Medical Assistance Program (KMAP) letterheads, forms, bulletins and manuals will be updated. Due to this transition, newly issued medical cards have the new KDHE-DHCF logo. Cards with both the KHPA and the new KDHE-DHCF logos can be accepted by providers. Providers can accept and verify eligibility with either card design until further notice.

### What Form to Use When Filing Claims?

The CMS 1500 Form must be used when providers are filing a claim for professional services with either CPT or HCPCS (Healthcare Common Procedure Coding System) codes. This form is typically used by practitioners (physicians, social workers, counselors, etc.).

The UB 04 Form must be used by providers (hospitals, clinics, facilities, etc.) who are filing a claim for institutional services (inpatient, partial hospitalization, observation, etc.) with a revenue code. When a provider includes professional services on a UB 04 Form, the revenue code **and** the corresponding CPT or HCPCS code must also appear on the claim form.

**Only those codes listed on the provider agreement or subsequent amendments to the provider agreement may be filed for reimbursement. Should you not have a copy of your provider agreement or amendment(s), please contact Deb Burnham at 800-989-1655, ext. 1.**

### Announcements

Please welcome these facility providers to the Cenpatico network...Catholic Charities of Salina Inc., Via Christi Hospitals Wichita Inc., Substance Abuse Assessment Center of Kansas Inc., City on a Hill Inc., and KVC Hospitals, Inc.

Paper copies of the member handbook, provider directory and member and provider brochures are available in our Topeka office. Please call Deb or Jeanie at 800-989-1655 with the document(s) you need, the quantity and address to ship the documents.