

Dear Provider:

Thank you for your continued service to our Members!

As the Commonwealth Coordinated Care Program approaches its first full year of operation, Virginia Premier CompleteCare (VPCC) would like to take this opportunity to Thank You for all that you do for our Members and provide you with some program updates and resource information.

Claims:

Late last year, Virginia Premier implemented a new claims platform. After implementation of the new system, VPCC experienced a backlog of claims.

As of March 20, 2014, VPCC is pleased to report that the back log has fully cleared and our claim processing has normalized.

VPCC has worked closely with providers who have experienced issues and are committed to ensuring our claims processing continues to improve for all providers.

Virginia Premier CompleteCare offers Providers **three ways** to submit claims:

I. Clearinghouses:

VPCC is contracted with two Clearinghouses for the CCC line of business

- Availity – 813-363-5255
- RelayHealth – 877-684-9625 option 1

CompleteCare Payer IDs

Institutional Claims: VPCCI

Professional Claims: VPCCP

If you are not contracted with one of our Clearinghouses, that's ok. Your clearinghouse may work directly with one of VPCC's clearinghouses to have your claims routed. Please confirm with your clearinghouse how your claims will be submitted to Virginia Premier CompleteCare.



II. Portal:

VPCC has completed several upgrades to our CCC portal in the last year.

Registration information for **PremierConnect**, the Virginia Premier CompleteCare portal, can be found here:

<https://www.vapremier.com/providers/completecure-overview/provider-portals/>

Check with your office Administrator or CCC lead prior to registration. To register, find the “New User” section at the bottom of the page.

III. Paper Claims:

Paper claims are accepted by Virginia Premier CompleteCare.

Only claims submitted on official red and white UB04 or CMS 1500 forms will be accepted.

Paper claims must be electronically created.

Not Accepted:

- Handwritten
- Faxed
- Black and White Claims

Paper claims should be submitted to the following address:

Primary Care Providers Virginia Premier CompleteCare P.O. Box 4468 Richmond, VA 23220-0207	Specialty Providers Virginia Premier CompleteCare P.O. Box 4468 Richmond, VA 23220-0208
Hospital Claims Virginia Premier CompleteCare P.O. Box 4468 Richmond, VA 23220-0120	Claims Appeals Virginia Premier CompleteCare P.O. Box 4468 Richmond, VA 23220-0307
Transportation Claims Virginia Premier CompleteCare P. O. Box 4468 Richmond, Virginia 23220-5287	



Electronic Fund Transfers (EFTs) and Remittance Advice:

PaySpan www.PaySpan.com

Virginia Premier CompleteCare now offers EFT services through PaySpan. If you do not register with PaySpan, you will no longer be able to receive EFT services for Virginia Premier CompleteCare claims.

If you would like more information about how to register with or access PaySpan, visit the video library on their website at <https://www.payspanhealth.com/help/videolibrary/>.

If you need additional assistance or have questions, please contact PaySpan by either sending an email to providersupport@payspanhealth.com or calling their Provider Services Team by dialing 1-877-331-7154, Option 1. Provider Services Specialists are available to assist Monday through Friday from 8am to 8pm, Eastern Time.

PaySpan now processes remittance advice for Virginia Premier CompleteCare.

Please note ALL claims submitted to Virginia Premier CompleteCare are processed through both Medicare AND Medicaid benefits.

For those providers whose services might only be applicable to Medicaid benefits, you will typically see the first claim line on your remittance advice Denied – (D05 Not a covered service)

This denial is indicating that No Medicare benefits were applicable to the claim.

Once the claim processes through Medicare benefits, it will then move on to process the claim against Medicaid Benefits.



Here is a sample of the new paper remittance advice you will receive:

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PAY TO:
 SAMPLE MEDICAL CENTER
 PO BOX 99999
 CENTRAL VA 232201111

EXPLANATION OF PAYMENT
 MEDICARE/MEDICAID PAYMENTS

Payment Date: 09/29/2014
 Payment#: 105
 Payment Amt: \$72.75

Prov ID: P0099999

Insured Name: EXAMPLE, MEMBER
Insured Policy#: 99999999
Claim Number: 10069E00001

Patient ID: 000100100001
Servicing Provider: TEST PROVIDER
NPI/API: 1234567890

Serv	Dates From/To	Diag#	Proc#	Mod	Days/Cnt Qty	Charged	Allowed	Deduct	CoPay	Disallow	Discount	Interest	Denied	Explanation Codes	Payment
001	08/19/2014-08/19/2014	710.0 695.4 733.09 V58.69	99214		1	\$185.54	\$106.02	\$106.02	\$0.00	\$79.52	\$0.00	\$0.00	\$0.00		\$0.00
002	08/19/2014-08/19/2014	710.0 695.4 733.09 V58.69	36415		1	\$5.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.25	D05	\$0.00
Sub-total						\$190.79	\$106.02	\$106.02	\$0.00	\$79.52	\$0.00	\$0.00	\$5.25		\$0.00

Insured Name: EXAMPLE, MEMBER
Insured Policy#: 99999999
Claim Number: 10763S00005

Patient ID: 000100100001
Servicing Provider: TEST PROVIDER
NPI/API: 1234567890

Serv	Dates From/To	Diag#	Proc#	Mod	Days/Cnt Qty	Charged	Allowed	Deduct	CoPay	Disallow	Discount	Interest	Denied	Explanation Codes	Payment
001	08/19/2014-08/19/2014	710.0 695.4 733.09 V58.69	99214		1	\$185.54	\$72.75	\$0.00	\$0.00	\$33.27	\$0.00	\$0.00	\$0.00		\$72.75
002	08/19/2014-08/19/2014	710.0 695.4 733.09 V58.69	36415		1	\$5.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.25	D05	\$0.00
Sub-total						\$190.79	\$72.75	\$0.00	\$0.00	\$33.27	\$0.00	\$0.00	\$5.25		\$72.75

Explanation Code	Description
D05	D05-NOT A COVERED SERVICE

If you have received a denial on your claim and would like to appeal the decision, please do so within 60 days from the date of your remittance as we are unable to consider any claim after the 60 day limit has expired. Please include the Claim Appeal Adjustment form and any supporting documentation to the following address:

Virginia Premier CompleteCare Claims
 PO Box 4468
 Richmond, VA 23220

Customer Service:

Questions regarding claim submission, claim status, or payment can be directed to our Claims Customer Service Department. They can be reached at 1-855-338-6467 Option 3 for providers and option 2 for Claims Customer Service.

Long Term Service and Support:

Virginia Premier CompleteCare has dedicated Long Term Service and Support Managers available in your region.

If you are a Provider and experiencing Claims, Enrollment, Care Coordination, Contract or other LTSS difficulty with our dedicated phone lines, or you feel that your issue should be escalated please contact:

- Rick Gordon, Director, Duals Contracting and Network Development
rgordon@vapremier.com OR 804-819-5151 Ext. 55075
- Rashard Grier, Manager, Long Term Services & Support (Tidewater)
rgrier@vapremier.com OR 757-461-0064 Ext. 55501
- Rebecca Frango, Manager, Long Term Services & Support (Roanoke)
rfrango@vapremeir.com OR 540-344-8838 Ext. 55876
- Nicole Williams, Manager, Long Term Services & Support (Central)
nwilliams2@vapremier.com OR 804-819-5151 Ext. 55118

Please check our website for the most up-to-date information - www.vapremier.com. Also, feel free to reach out to your Contracting Specialist, your Provider Service Representative, or your LTSS Manager with any questions or concerns that you may have. You can reach them at 1-800-727-7536 or by emailing us at vphpnetdev@vapremier.com.

As always, we appreciate your continued service to our members.

Sincerely,



Patrick McMahon

VP, Network Development & Contracting

