



June 8, 2018

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VERY IMPORTANT - Alliant Health Plans

Alliant Health Plans includes SoloCare and SimpleCare. Alliant has discovered an issue with their third-party administrator (TPA) regarding the distribution of provider Explanation of Payments (EOPs) via the provider portal. The portal allows providers and clients to view, download or print their remittance advice and at this time, this function is unavailable. Alliant was informed by their TPA that they expect to have the issue corrected by June 22nd, if not sooner. We received payment from Alliant last Wednesday, May 31st, and again this week, but, without the corresponding Explanation of Payment, we have not been able to distribute the payment to you. We have been in communication with them since last week.

On June 7th, I received the following message from our Provider Relations Representative at Alliant:

Good morning Mark,

Alliant has just been updated by our claims vendor that this is a much larger issue than just Alliant Health Plans and they are not sure when they will be able to get the issue resolved.

We have an internal data analytics team who is working to extract the data from the claims system. Once the data is extracted I will need to review and verify the information and then hope to be able to provide you with the information in an excel document.

Please know that we are doing everything that can be done internally to get the information that you need out as soon as possible.

I will reach out again just as soon as I have another update available.

Thank you so much for your continued patience with us!

As soon as we get an Explanation of Payment or Excel file, we will be able to disburse the payments to you. We apologize for this delay.

CMS Fraud Waste and Abuse Training

Peach State Health Plan has recently reminded us that all providers and their office staff must complete the required CMS FWA training. It must be completed annually. It is required for all employees in our office and your office. We have posted the presentation on our website for your convenience. Please click this link to access the [CMS FWA training](#). Once you and your staff have completed the training, please complete the signature page at the end of the training and fax it to (678) 990-1124.

Paper Check Fee

Over the past several years, ActivHealthCare has tried to convince all providers to enroll in direct deposit or electronic funds transfers (EFT) for claim payments.

Our primary reason for providing direct deposit was security. Over the years, we have had several checks clear the bank for an amount greater than we issued the checks. The checks were stolen during the mail process, probably out of a mailbox, and the amount of the check was increased and cashed. EFT is much more secure for your office.

Another benefit is efficiency. EFT saves ActivHealthCare time and money. We do not have to fold or stuff checks, we do not have postage, and balancing our bank account is much easier. Also, we do not get calls asking us to do stop-payments and reissues.

Currently, about 98% of the network providers are set up on direct deposit. We have tried to get the other 2%, but they do not want to change. Since they do not want to change, we are going to ask them to pay for the added cost of sending paper checks

As of June 1, 2018, we will be adding a \$1.00 Paper Check Fee to each claim when the provider is not enrolled in direct deposit. This will help to cover the added cost of extending the time it takes to do check runs, postage and reconciling the bank statements.

If a provider wishes to avoid the fee, he/she can enroll in our EFT program. The form is available at www.ActivHealthCare.com.

Term Summary Sheets Updated

We have recently updated the Term Summary Sheets for ActivHealthCare. They are available on the [Customer Service Center](#) under Network Resources.

Prime Health Services

As mentioned last month, we have decided to offer providers the option to participate in a First Party Auto Liability (Med-Pay) program with Prime Health Services. Unlike MultiPlan, you will have the option to remain in the Group Health even if you Opt-Out of the Auto. Like MultiPlan, the discount is only 7% off of billed charges, subject to reasonable and customary. If you have a problem you can also Opt-Out. To participate in Prime Health Services First Party Auto or to Opt-Out, please follow this link for the [Option Form](#).

Peach State Health Plan (Ambetter)

97140-59 CPT code ActivHealthCare has filed an appeal on the 97140-59 CPT code. We are waiting for a response. In the meantime, we are filing a second appeal on claims processed over the past month that were not included in the first appeal. We are working hard to get Ambetter to reconsider and allow the code when used appropriately.

Based upon the guidelines, it is acceptable to bill for a 98941 and a 97140-59 on the same visit provided that certain criteria is met. The 97140 procedure must be a distinct procedural service from the 98941. Also, it is a timed unit code. It is not interchangeable with 97124 (massage). Payers are likely to request and review documentation for evidence of medical necessity when 97140 is used. They may do the review retrospectively. If it is used inappropriately, there may be serious consequences. If you bill for this code, be sure you are doing so appropriately.