



## AMBETTER UPDATE - Answers to Most Frequently Asked Questions:

### Contract Effective Date - February 1, 2018



On 1/04/2018, Ambetter informed ActivHealthCare that the effective date of the contract will be 2/1/2018. Originally, they were looking for a January start date, but the holidays delayed the credentialing audit. Since they did not complete the audit before the December credentialing committee meeting, they will have to wait until the January meeting to approve our providers. Once approved, they will have to update their computer database with our provider information. We regret this delay, but they said the 2/1/2018 date was the earliest they can do.

**Covered Lives** - As of 1/4/2018, there were approximately 256,000 covered lives for Ambetter.

**Patient Visits in January** - Claims for January 2018 will be prior to our credentialing effective date. Ambetter does not have out of network benefits.

**Coverage Verification** - We asked how to verify coverage for Ambetter patients. We were told by Ambetter to call the number on the patient's insurance ID card. We have been told by one provider's office that verification can be done through an online source called Availity, at [www.availity.com](http://www.availity.com). We have not tried it, but it may be easier than calling on patients. We have just started the enrollment process, and if it works well for us, we will post it on our website.

**How to Submit Claims** - Once the contract is effective, claims should be submitted through Office Ally, as stated in our EDI training at <http://activhealthcare.com/network-resources/training/edi-references>, with the following format:

AHCØ1 "Name of Payor"  
"Insurance co. payer ID"  
Address  
City, State, Zip

For Ambetter, it would be as follow:

**AHC01 Peach State Health Plan (Ambetter)**  
**EDI Payer ID 68069**  
**P.O. Box 5010**  
**Farmington, MO 63640-5010**

Additional instructions and training presentations can be found on our website, [www.ActivHealthCare.com](http://www.ActivHealthCare.com), under Network Resources.

**Fee Schedule and Term Summary Sheet** - The fee schedule will be based on a percentage of the CMS fee schedule. It will be 110% based on provider locality. We will post the fee schedule and Term Summary Sheet on the Customer Service Center before the contract is effective. CMS values change at least annually. The CMS values can be looked up at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PFSlookup/index.html?redirect=/PFSlookup/>.

**Coverage** - Coverage will vary in terms of Co-Payments and Deductibles. Ambetter sells multiple policies; however, the general benefit structure is 40 visits per year, subject to medical necessity. Modalities are covered. This is not Medicare or Medicaid

**Utilization Management** - ActivHealthCare is not involved in any UM for Ambetter. We are simply providing the network and centralized billing. We have been told by a couple of provider offices that there is currently no requirement for prior authorization

**Medicare** - There is a Medicare Advantage product under this contract. If the patient has that coverage, Medicare benefits will apply and fee schedule will apply to their claims. At this time, ActivHealthCare has not been given any information on the Medicare Advantage product.

**Ambetter Website** - For additional information on Ambetter, please visit their website:  
<https://ambetter.pshpgeorgia.com/provider-resources.html>

**How to Participate** - If you wish to be a part of this product, you will need to "Opt In." Do this by completing the **Participating Provider Enrollment Form**, which can be accessed through the following link:

[Provider Enrollment Form](#)

Please fax your form back to 470-514-3697 as soon as possible. We cannot add you to Ambetter without the completed "Opt In" form. Once the form is received, we have to notify Ambetter through the monthly provider update process. Ambetter will have to approve you. This process may take up to 45 days or more once the initial provider group is submitted. The best way to be effective by 2/1/2018 is to return your form now.

**If you have any questions**, please contact Mark Brickhouse at 770-455-0040 x108 or email [mbrickhouse@activhealthcare.com](mailto:mbrickhouse@activhealthcare.com).

**Why Join Through ActivHealthCare?** - There are several reasons to join through ActivHealthCare, even if you already have a direct contract:

1. The Activ fee schedule is higher
2. Activ will be a voice and advocate for our members
3. If you are enrolled through Activ, we can help if you have any issues
4. Simplify your credentialing by only credentialing with Activ

January 8, 2018



ActivHealthCare, Inc. | (770) 455-0040 | [www.ActivHealthCare.com](http://www.ActivHealthCare.com)