

Health Plus Medical & Claims Payment Bulletin

Bulletin number: CL - 302

Original Bulletin Date: 03/01/06

Updated: 03/07/06

Subject: Electronic Medical Claims Submission

Policy:


Claim Submission:

- Original claims for payment of medical services and supplies may be submitted electronically.
- Health Plus accepts electronic medical claims filing through Electronic Data Interchange (EDI) utilizing the Emdeon Business Services clearing house.
- In order to submit claims electronically the following information is needed:
 - The Health Plus Payer ID number **11324**;
 - The complete Health Plus Member ID number;
 - A valid Health Plus Provider ID number;
- **Note:** each of your Health Plus patients is both the member and subscriber. Please enter each individual Health Plus member as both the member and the subscriber on your 837P claims.
- Claims that are resubmissions and require paper attachments such as a provider's procedure reports for manual pricing should NOT be submitted electronically. To resubmit a claim, send a written explanation attached to the front of the claim form, within 60 business days of the initial claim determination, indicating the reason for the claim resubmission.
- For the Health Plus Provider Implementation Guide on how to submit HIPAA 837 Professional Claims visit our website at:

www.healthplus-ny.org

- If additional information is needed on how to submit medical claims electronically, call the Health Plus Electronic Date Interchange (EDI) Administrator at 1-718-491-8355.

Policies in this manual are intended to reflect standard Health Plus procedures. In instances where a provider's contract contains other policies which may be more or less restrictive than those in this manual, these contractual provisions will apply.

Date Approved:	5/14/06	Approved By:	
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