

# PROVIDER RELATIONS NEWSLETTER

from the OSU Health Plan

## Credentialing

Every new provider to be added to the OSU Health Plan must have a Council for Affordable Quality Health (CAQH) number. Providers can self-register at CAQH.org or call 202-517-0400 for general inquiries. The CAQH must be re-attested every 120 days.

When filling out the CAQH, it is important to cover each section. Providers that have had a name change should note so in the "Other Last Name" section of the form. This is important because education is verified and if there was a different name while in school, we need to have that information.

## Recredentialing

Currently the CAQH application is being utilized for re-credentialing purposes. Please ensure timely re-attestation to avoid disruption in participation. Your CAQH profile needs to be re-attested every 120 days.

## Having Claims Issues?

If you are experiencing claims issues, you can contact CoreSource by dialing either 614.292.4700 or 800.678.6269 and then pressing 4. Should you not have successful resolution, the OSU Health Plan has a new way to communicate via the OSU Health Plan PR mailbox: [OSUHealthPlanPR@osumc.edu](mailto:OSUHealthPlanPR@osumc.edu).

For any general questions and/or concerns, please e-mail this box, and your issue will be triaged accordingly. If you are e-mailing for specific claims that need to be reviewed, please complete the Claims Reconsideration Form found at [https://www.osuhealthplan.com/sites/all/themes/osuhealthplan/pdf/claims/REQUEST%20FOR%20CLAIM%20RECONSIDERATION\\_Editable.pdf](https://www.osuhealthplan.com/sites/all/themes/osuhealthplan/pdf/claims/REQUEST%20FOR%20CLAIM%20RECONSIDERATION_Editable.pdf).

## Sign Up for the CoreSource Portal

Have you signed up for the CoreSource Portal yet? The portal is a self-serve system where you will have access to your claims status information and member eligibility as well as a messaging system that will allow you to communicate with CoreSource.

Registration is easy, and instructions to do so can be found at this link: <http://mycoresource.com/RegistrationGuide.pdf>.



## Student Health Plan Update



The OSU Student Health Insurance Plan chose a new administrator. Effective August 19, 2015, the new TPA and plan administrator is Health Smart Benefit Solutions, Inc., underwritten by UnitedHealthcare Student Resources. For eligibility and benefit information, call HealthSmart/OSU at 1-844-206-0374 or visit <https://shi.osu.edu/comprehensive-plan/new-2015-2016-policy-year/>.

Send paper claims to:  
HealthSmart Benefit Solutions, Inc.  
3320 West Market St., Ste. 100  
Fairlawn, OH 44333-3306  
Payor ID #: 38225

## 2016 Provider Manual Is Now Available

The 2016 Provider Manual has been updated and can be found at <https://www.osuhealthplan.com/providers/policies-and-guidelines>.



## ICD-10 Billing Effective October 1, 2015



October 1, 2015 is the compliance date for the transition to ICD-10 coding to replace ICD-9. These codes will be used by physicians and health care professionals to record and identify diagnoses and procedures for claim payments. ICD-10 affects diagnosis and inpatient procedure coding only. It does not affect current procedural terminology coding for outpatient procedures.

Please ensure that you are billing with the correct codes per the date of service. If you have dates of service that are prior to the October 1 date as well as dates that are after, be sure to bill those on separate claim forms. Be sure to update the ICD-10 indicator in box 21 to a "0" for all claims with a date of service after October 1.

There is a fillable .pdf claim form available, please visit [https://osuhealthplan.com/sites/all/themes/osuhealthplan/pdf/insurance/CMS%201500%20claim%20\(02-12\).pdf](https://osuhealthplan.com/sites/all/themes/osuhealthplan/pdf/insurance/CMS%201500%20claim%20(02-12).pdf).

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## Changing of Demographic Information

If you are planning on moving, changing your name, or remitting address or tax identification number, it is imperative that you notify us of these changes. Failure to do so could result in claims not being processed or paid in a timely manner.

PLEASE NOTE: If you are moving to a location where the tax identification number is not contracted, this will result in claims being denied. Please be specific in your demographic changes when submitting your request.

Changes must occur in writing and can be faxed or e-mailed to:  
Fax # 614-292-1166

[OSUHealthPlanPR@osumc.edu](mailto:OSUHealthPlanPR@osumc.edu)

## 2016 Benefit Changes

There were a number of benefit changes that took place for the 2016 benefit year. Please review the link below outlining the new patient deductibles and copays.

<https://ohp-webapp-vp01.osumc.edu/sites/all/themes/osuhealthplan/pdf/providers/2016full-medical-chart.pdf>

## Ohio PPO Connect (OPPOC) FAQs

**What is Ohio PPO Connect?** Ohio PPO Connect is made up of four networks that provide statewide coverage to its members. If you are a contracted provider with OSU Health Plan, you are possibly participating in this network. Your pricing is the same for all members seen under this network.



**Who Should I contact?** If you are experiencing pricing issues where the claims are pricing out of network or at a lower rate, please contact [OSUHealthPlanPR@osumc.edu](mailto:OSUHealthPlanPR@osumc.edu). If you are questioning the payment amount or how benefits were applied, please contact the corresponding TPA for that member.

## Policy Changes

### Claims Overpayment

Once an overpayment has been identified and is within 12 months of payment, CoreSource, our third-party administrator, will send an overpayment request letter to the provider. The provider will be asked to refund the Plan the amount overpaid within 60 days of receipt of the notice. If the provider disputes the overpayment request, they must submit the changes in writing to CoreSource.

All refunds received from providers will be processed in CoreSource's claims-processing system to reflect receipt and to verify accurate payment.

If the provider does not reimburse the OSU Health Plan for an uncontested overpayment within 60 days of receipt of the notice, the claims overpayment amount will be offset against future payments.



### Chiropractic Policy Change

Effective April 1, 2016, there will be a change in policy. A letter will be forth coming with the new policy enclosed.

### Friendly Reminder for Licensed Massage Therapy Providers

Please note the only payable codes for medical massage are the following: 97110, 97112, 97124, 97140, and 97530.

### Provider News

<https://osuhealthplan.com/providers/provider-news>

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## ***Important Phone Numbers***

**OSU Health Plan Customer Service** - 614-292-4700 or 1-800-678-6269 option 0

**CoreSource Customer Service** - 1-866-442-8257

**Utilization Management** - 614-292-4700 or 1-800-678-6269 option 1

**Prior Authorization** - Phone 614-292-4700 option 3 Fax 614-292-2667

**OSU Health Plan Provider Relations** - Fax 614-292-1166

**Express Scripts (ESI)** - 1-888-468-5539 (provider general line, also includes prior authorization)  
1-800-417-8164 (direct for prior authorization only)

## ***Important Emails***

**OSU Health Plan Customer Service** - OSUHealthPlanCS@osumc.edu

**Utilization Management** - utilizationmanagement.osuhealthplan@osumc.edu

**OSU Health Plan Provider Relations** - OSUHealthPlanPR@osumc.edu

**Care Coordination** - carecoordination.osuhealthplan@osumc.edu

## ***Important Websites***

[www.osuhealthplan.com](http://www.osuhealthplan.com)

[www.coresource.com](http://www.coresource.com)

