

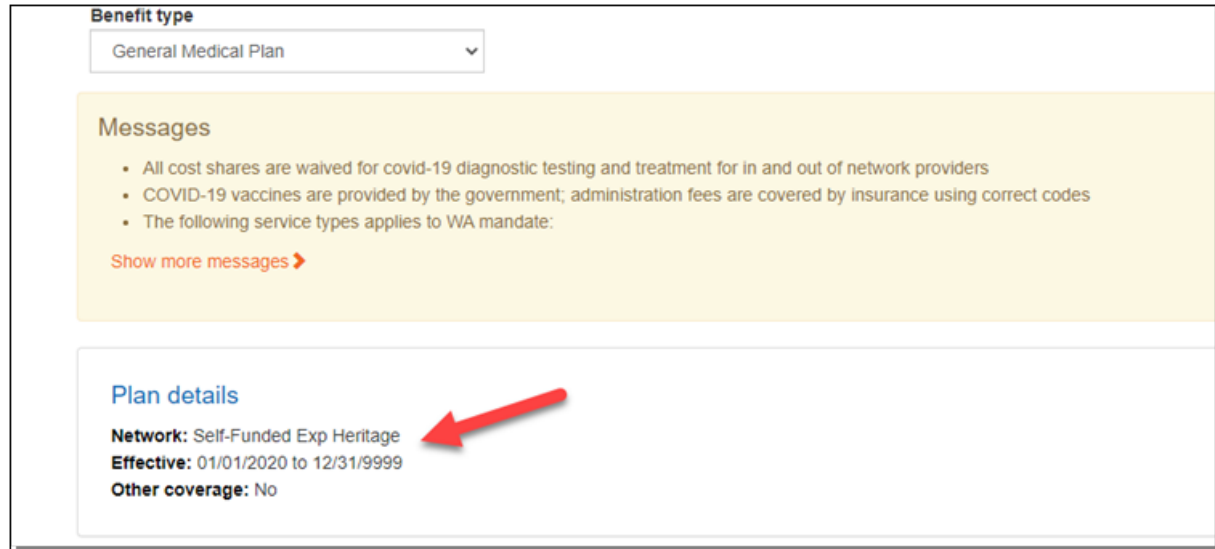
How to determine health plan fully-insured status

Health Carrier	How to determine fully-insured health plan status
<p>Aetna Better Health of Washington, Inc.</p> <p>Aetna Health Inc.</p>	<p>Contracted providers may obtain this information by contacting Aetna by telephone utilizing the member services phone number listed on the patient’s identification card.</p> <p>Additionally, the funding information can be found on the provider portal, Availity (https://www.availity.com/). The provider should select the “Eligibility and Benefits” feature and enter the member specific information. The provider would then select the benefit in question and the funding information will be available in the benefit details.</p>
<p>Cigna Health and Life Insurance Company</p>	<p>For Cigna (CHLIC) health plans, the provider can determine the type of plan by calling the Cigna’s customer service number. This is the same number located on the back of the enrollee’s ID card.</p> <p>Cigna would prefer to have providers just bill separately for PPE regardless of whether the enrollee’s plan is fully insured or self-funded, and Cigna will sort it out during the claims adjudication process.</p>
<p>Kaiser Foundation Health plan of the Northwest</p> <p>Kaiser Foundation Health Plan of Washington</p> <p>Kaiser Foundation Health Plan of Washington Options, Inc.</p>	<p>Washington region</p> <p>Contracted providers are directed to the provider website to look up eligibility information for members. In the Washington region, eligibility information includes whether the member is on a fully insured or self-insured plan. There is an Eligibility Inquiry Tool at the following link: https://wa-provider.kaiserpermanente.org/provider-manual/coverage/member-id</p> <p>Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. administer self-funded plans. Programming configuration changes were required so that the system could distinguish self-funded groups that opted out of PPE coverage and those self-funded groups who were participating. This configuration work has been completed, and we are now reprocessing the claims</p>

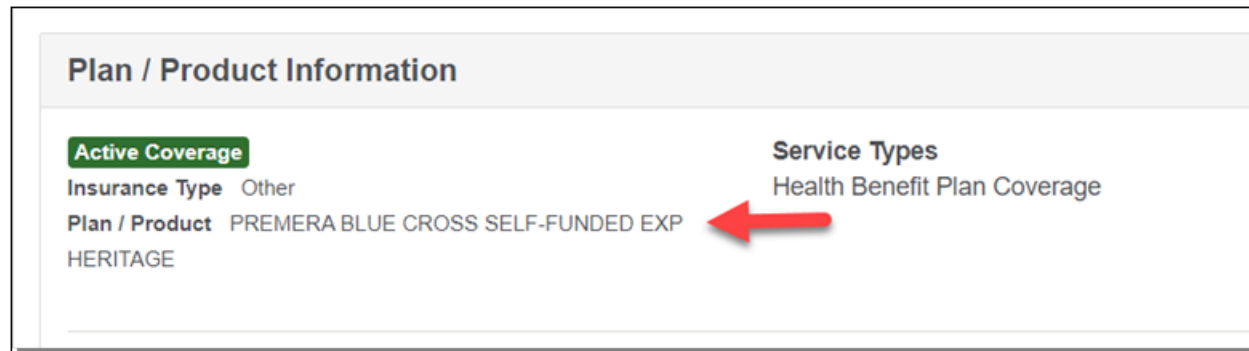
	<p>that are owed the \$6.57 for PPE. We expect to complete this work by the week of June 14, and the checks will go out the weekend of June 19. Going forward the system is now configured so any new claims will process correctly.</p> <p>It is our expectation that contracted providers will submit a claim for all services rendered, regardless of whether someone is on a self-funded or fully insured plan. The remittance advice that the provider receives will include a denial description when the payment was denied because the service was for a self-funded member. "THE SERVICE BILLED IS NOT COVERED BY THE CONTRACT; DO NOT BILL PATIENT".</p> <p>Northwest region</p> <p>To find out a member's fully insured vs. self-funded status, physicians and health care providers may contact Member Services at 503-813-2000 or 1-800-813-2000. In addition to being listed on the member's health plan ID card, these numbers are also posted on the Contact Us page of the Community Provider Portal: http://www.providers.kaiserpermanente.org/html/cpp_knw/contactus.html.</p>
<p>Molina Healthcare of Washington Inc.</p>	<p>Providers who have questions regarding which Molina Members are fully insured can contact us at 855-322-4082</p> <p>Providers do not need to call Molina, they can bill 99072 regardless of member plan status. The Marketplace claims will be paid while the Medicaid claims will be denied as instructed by HCA.</p>
<p>PacificSource Health Plans</p>	<p>Providers can contact the provider relations department regarding any PPE payment questions or to determine whether an enrollee is on a fully insured or self-insured plan. https://pacificsource.com/contact/provider</p> <p>Providers do not need to make this determination in advance of billing. If the provider submits the claim, we will adjudicate the claim as is appropriate to the enrollee's plan.</p>
<p>Premera Blue Cross</p> <p>LifeWise Healthplan of Washington</p>	<p>First, the funding arrangement displays in the benefits and eligibility tools on both the Premera Blue Cross and Availity (provider portal) websites. Two screenshots are included below as an example. Additionally, the ID cards for self-funded groups include language that is not present on the fully insured ID cards. The language says: Premera Blue Cross provides administrative services only and does not assume financial risk or obligation with respect to claims. Providers may also contact customer service by calling the</p>

number on the back of the ID card to speak to a representative who can confirm whether the plan is self-funded or fully insured.

Premera’s site: displays self-funded or fully insured under “Plan details”



Availity’s site: displays under “Plan/Product Information”



Providence Health Plan

Providers can call either call our service numbers (1-800-878-4445 or 503-574-7500) or look members in up in our provider portal, ProvLink (<https://phpprovider.providence.org/portal/login>).

<p>Regence BlueShield</p> <p>Asuris Northwest Health</p> <p>BridgeSpan Health Company</p>	<p>We are advising that the easiest course of action for providers is to bill the PPE for all patients and to let the claim adjudicate according to that plan's benefits. This is the best way for providers to ensure they are reimbursed appropriately. Furthermore, billing for all members does save the provider the step of contacting the health plan to determine plan type and covers all bases in the event the member changes plans. Of course, providers can always contact our customer service to ask what the funding type is for their patient. I have provided those general provider customer services lines below.</p> <p>Regence Provider Contact Center: 1 (800) 253-0838 Asuris Northwest Health Provider Contact Center: 1 (888) 349-6558 BridgeSpan Health Provider Contact Center: 1 (855) 522-8894</p>
<p>UnitedHealthcare Insurance Company</p> <p>UnitedHealthcare of Washington</p>	<p>UnitedHealthcare offers providers a number of methods that can be used to obtain this information. Most frequently used is our secure, online provider portal which can be used by both contracted and non-contracted providers. Within this portal, there is an eligibility section which does include information on whether the plan is fully-insured or self-funded. The portal can be accessed at www.uhcprovider.com. Separately, providers may contact customer service at the number on the member's ID card.</p> <p>It may be easier for everyone if the provider just wants to submit a claim for all visits where a PPE was used, and we can handle whether it is payable or not on the back end as we process the claim. We'd be ok with that.</p>

Last updated June 18, 2021