



February 1, 2024

Claims: Timely Filing Requirements

Dear Provider,

As a reminder in order to receive payment, claims must be submitted within the timely filing requirements. All claims must be submitted electronically within 180 days from the date of service to receive payment.

The following is a list of the 4 clearinghouses that have direct relationships with KHS:

Office Ally	Change Healthcare (Emdeon, Relay Health)
SSI	Cognizant (Trizetto)

These clearinghouses have no additional cost to you. If you need additional information to sign up with one of them, please contact your Provider Relations Representative for assistance.

KHS Payer ID: 77039 (Office Ally, SSI, Change Healthcare

KHS Payer ID: KERNH (Professional) (Cognizant/Trizetto)

UERNH (Institutional) (Cognizant/Trizetto)

There are 4 exceptions that will be accepted via paper submission:

1. Any claim requiring the PM330 (Sterilization Consent Form) to be attached. (PM330 must be attached)
2. Any claim where contract requires invoice pricing. (Invoice must be attached)
3. Prior KHS claim submission resulted in an EOB where KHS requested documentation to be provided. (Request from KHS or EOB requesting documentation must be attached)
4. Claims with a California Children's Services (CCS) Notice of Action (NOA) which show CCS has denied the case for coverage by CCS.

For the 4 exceptions identified above, claims must be mailed to:

Kern Family Health Care
PO Box 85000
Bakersfield, CA 93380

KHS posts all bulletins on the KHS website, www.kernfamilyhealthcare.com, choose Provider, then Bulletins.

For any questions, please contact your Provider Relations Representative at 1-800-391-2000.

Sincerely,

Melissa McGuire
Director of Provider Network
Kern Health Systems