

# Claims Denied Due to OHC Reference Guide

**Provider Network Operations** 

Email: ProviderServices@scfhp.com

The California Department of Health Care Services (DHCS) law outlines that Medi-Cal is a last resort payer. Santa Clara Family Health Plan (SCFHP) has implemented a cost avoidance system to only process claims where the member does not have other health coverage (OHC) or in instances where member OHC has been exhausted (i.e., claim submitted with evidence of a Remittance Advice (RA) or Coordination of Benefits (COB)/ Explanation of Benefits (EOB)).

# How to successfully bill for Medi-Cal members with OHC

#### Submitting a claim

If SCFHP receives a claim for a member who has OHC, the claim will be denied. Find this reason code, D07 – Resubmit with primary EOB or D07A - Resubmit with corrected primary EOB, in Provider Link **Claims**: providerportal.scfhp.com.

Description	CPT	Charges	Status	Reason Code
Therapeutic behavioral services, per 15 mins	H2019	\$225.00	DENY	D07
Therapeutic behavioral services, per 15 mins	H2019	\$225.00	DENY	D07
Therapeutic behavioral services, per 15 mins	H2019	\$225.00	DENY	D07
Therapeutic behavioral services, per 15 mins	H2019	\$225.00	DENY	D07
Total		\$900.00		
Denial Reason Description(s)				

#### How to check if a member has OHC

SCFHP recommends providers verify member eligibility prior to rendering care. If the member has OHC, bill the OHC first then the SCFHP Medi-Cal plan as secondary. Providers can check member eligibility information in Provider Link **Eligibility**.

The first column, Plan Type, will indicate whether the coverage is OHC or SCFHP. See Scope of Coverage column to locate policies that state OIM with current effective dates. OIM denotes full scope coverage for the member.

#### Coverages

Plan Type	Plan	<b>Policy Number</b>	Scope Of Coverage	Effective Date	Termination Date
ОНС	K990 - KAISER NORCAL - COMMERCIAL RX	840492714	OIM P	07/01/2019	12/31/9999
SCFHP	Medi-Cal	-	-	07/01/2015	12/31/9999

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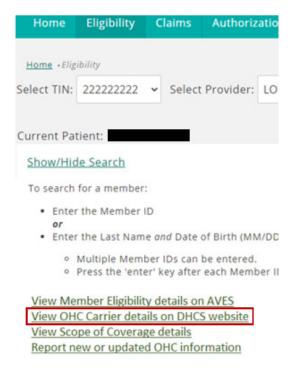
## How to find OHC insurance carrier information

 Provider Link Eligibility will display OHC plan information, including the OHC carrier code that is represented with a letter followed by three digits (i.e., K990). You will need this information to find insurance carrier information.

### Coverages



2. Click on the "View OHC Carrier details on DHCS Website" hyperlink.



3. Enter the OHC carrier code in the search field to find the insurance carrier information, including address and phone number. Use this information to bill the insurance carrier.



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# Claims Denied Due to OHC Reference Guide Frequently Asked Questions

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# Q1: What if the member says the OHC information is incorrect?

**A1:** Contact the insurance carrier to verify. If correct, notify the member and have member speak to the insurance carrier to resolve.

# Q2: What if the insurance carrier says the OHC information is incorrect?

**A2:** DHCS requires providers to report newly discovered OHC information and incorrect OHC information within 10 days ofidentification. Please use the following link to submit the new or incorrect OHC information to DHCS: <a href="https://www.dhcs.ca.gov/services/Pages/TPLRD">www.dhcs.ca.gov/services/Pages/TPLRD</a> OCU cont.aspx. No log in is required.

#### Q3: What if the OHC denies the claim?

A3: If your claim is denied by the member's OHC carrier, send RA/COB/EOB to SCFHP with the claim.

#### Q4: I'm a non-contracted provider. How do I access SCFHP's Provider Link?

**A4:** You can create an account on Provider Link even if you are not an SCFHP-contracted provider at <u>providerportal.scfhp.com</u>. For more information about the portal, visit <u>www.scfhp.com/provider-training/</u>.

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