

Santa Clara Family Health Plan Contact Information

Automated Eligibility: (24 hours/7 days week)

Phone: 1-800-720-3455

Language Interpretation Services:

Language Line: 1-888-898-1364

Customer Service: Mon-Fri 8:30 am – 5 pm

Phone: 1-800-260-2055

Claims and Authorizations Information

SCFHP Direct

Stanford Hospitals & Clinics

Palo Alto Medical Foundation (PAMF)

Authorizations:

Phone: 1-408-874-1821
 Email: umhelpdesk@scfhp.com
 Fax: 1-408-874-1957
 1-408-376-3548

Claim Submission:

Clearinghouses: Change Healthcare & Office Ally
 Payor ID: 24077

Provider Services:

Phone: 1-408-874-1788
 Email: providerservices@scfhp.com

Mailing Address:

Santa Clara Family Health Plan
 PO Box 18640
 San Jose, CA 95158

Claims Inquiries:

<https://providerportal.scfhp.com>
 1-800-720-3455
 1-408-874-1788

DELEGATED ENTITIES

Valley Health Plan (VHP)

Authorizations:

Phone: 1-408-885-4647
 Hospital: VMC PURC
 Admissions: 1-855-254-8264

Delegated Claim Submission:

Delegated for: Out-of-Area and In-Area Professional
 and Facility Claims

Provider Services:

Phone: 1-408-885-2221 #7

Payor ID:

VHP01

Clearinghouse:

Utah Health Information Network

Claims Inquiries:

Phone: 1-408-885-4563
 Email: customerservice@uhin.org

Mailing Address:

Valley Health Plan
 PO Box 28407
 San Jose, CA 95159

Language Interpretation Services:

Spanish: 1-408-808-6151
 Vietnamese: 1-408-808-6152
 Other: 1-408-808-6150 (Including Tagalog & Chinese)

DELEGATED ENTITIES

North East Medical Services (NEMS)

Authorizations:

Phone: 1-415-352-5045
Fax: 1-415-398-2895

Delegated Claim Submission:

Delegated for: All professional and Facility Claims

Provider Services:

Phone: 1-415-233-4892
Email: Provider.Relations@nems.org

Claims Inquiries:

Fax: 1-866-930-2290

Payor IDs:

NEMS

Clearinghouses:

Office Ally

Mailing Address:

NEMS Attn: MSO Claims Department
2171 Junipero Serra Blvd, Suite
600
Daly City, CA 94014

Physicians Medical Group of San Jose (PMG)

Authorizations:

Phone: 1-408-937-3645
Website: www.pmgmd.com

Delegated Claim Submission:

Delegated for: Non-Emergency Professional Claims In-Area (services within Santa Clara, Santa Cruz, Alameda, San Mateo and/or San Benito Counties)

Provider Services:

Phone: 1-408-937-3612

Claims Inquiries:

Phone: 1-1-408-937-3620

Payor IDs:

PMGSJ
PMGSJ
EXC01
EXC01
EXC01

Clearinghouses:

ENS
Proxymed
Change HealthCare
Office Ally
WebMD

Mailing Address:

Excel MSO, Physicians Medical Group
P.O. Box 1997
San Leandro, CA 94577-1997

Premier Care of Northern California

Authorizations:

Phone: 1-877-216-4215
Website: www.capcms.com

Delegated Claim Submission:

Delegated for: In-Area Professional Claims services within Santa Clara, Santa Cruz, Alameda, San Mateo and/or San Benito Counties

Provider Services:

Phone: 1-877-216-4215

Claim Inquiries:

Phone: 1-877-216-4215

Payor IDs:

95399
CAPMN
CAPMN

Clearinghouses:

Change HealthCare
Office Ally
MDX

Mailing Address:

Conifer Health Solutions
PO Box 261040
Encino, CA 91426

DELEGATED ENTITIES

Kaiser Permanente

Authorizations:

Phone: 1-800-464-4000 #1

Provider Services:

Phone: 1-800-464-4000

Claim Inquiries:

Phone: 1-800-390-3510

Delegated Claim Submission:

Delegated for: All Professional and Facility claims

Payor IDs:

94135
94135
RH009
NKAISERCA

Clearinghouses:

Change HealthCare
Office Ally
Relay Health
SSI

Mailing Address:

Kaiser Foundation Health Plan
Attn: Claims Administration Dept.
PO Box 12923
Oakland, CA 94604-2923

Eligibility

Providers are responsible for checking a member's eligibility each month. There are several ways to check eligibility:

1. **Visit** www.scfhp.com.
2. **Call** 24/7 automated eligibility line at 1-800-720-3455.
3. **Call** Santa Clara Family Health Plan (SCFHP) at 1-877-723-4795, 8:30 a.m. to 5:00 p.m., Monday through Friday.

Claims Payment for Cal MediConnect Enrollees

For dual eligible beneficiaries enrolled in SCFHP's Cal MediConnect program, **SCFHP will process the claim for both Medicare and Medi-Cal payment.** SCFHP contracts with both Emdeon and Office Ally for clearinghouse services. Please use SCFHP Payer I.D. number **24077**. The daily cutoff time for same day claims submission is 5:00 pm Pacific time. If you require clearinghouse submission assistance, please contact:

Emdeon Customer Services
Office Ally

1-866-742-4355
1-866-575-4120 Option 1

Crossover Claims for Non-Cal MediConnect Enrollees

For dual eligible beneficiaries who choose not to enroll in a Cal MediConnect program, the beneficiary's Medicare program should be billed first. The "crossover claim" must go to the beneficiary's Medi-Cal plan, which will pay any amount owed under state Medi-Cal law.

Provider Network

Providers may view SCFHP's Cal MediConnect provider network by accessing the provider search located at www.scfhp.com/for-members/find-a-doctor.

Benefit Summary

Providers may access the member's benefit summary and member handbook (Evidence of Coverage) located at www.scfhp.com/healthcareplans/calmediconnect/member-materials.

Authorization Grid

SCFHP has an authorization grid for the Cal MediConnect program showing the covered services that require prior authorization. The PDF is available at www.scfhp.com/for-providers/forms in the Authorization category.

Provider Manual and Policies

Providers may view the Provider Manual and Policies and Procedures at www.scfhp.com/for-providers/provider-resources.

Santa Clara Family Health Plan

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|-------------------------------|----------------|---|
| Member Services | 1-877-723-4795 | 8:00 a.m. to 8:00 p.m., 7 days a week, including holidays |
| TTY | 1-800-735-2929 | |
| Provider Services | 1-408-874-1788 | 8:30 a.m. to 5:00 p.m., Monday through Friday |
| Fax | 1-408-376-3537 | |
| Utilization Management | 1-408-874-1821 | 8:30 a.m. to 5:00 p.m., Monday through Friday |
| Fax | 1-408-874-1957 | |
| Claims | 1-408-874-1788 | 8:30 a.m. to 5:00 p.m., Monday through Friday |

Pharmacy

MedImpact 1-888-807-8666

Health Care Options

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|-------------------|----------------|---|
| Enrollment | 1-844-580-7272 | 8:00 a.m. to 5:00 p.m., Monday through Friday |
| TTY | 1-800-430-7077 | |

In-Home Support Services (IHSS)

Santa Clara County Social Services Agency

1-408-792-1600
Website www.sccgov.org

Behavioral Health

Santa Clara County Mental Health Department

1-800-704-0900
Website www.sccgov.org/sites/mhd

Community-Based Adult Services (CBAS)

Contact SCFHP Member Services at the number above.

Multipurpose Senior Services Programs (MSSP)

Sourcewise (Formerly Council on Aging)

1-408-350-3200
Website www.mysourcewise.com/care-management
Email community@mysourcewise.com

24-Hour Nurse Advice Line

1-877-509-0294