

Provider Claims Submission – Helpful Tips

You will see a reduction in pended claims and denials by following these helpful tips when submitting your claims:

1. Verify member eligibility at time of service.
2. Follow Medi-Cal billing guidelines.
3. Use the appropriate claim form. Please do not use a photocopy. The original redlined claim form is required.
4. Provide valid procedure and diagnosis codes (do not include any additional zeros or numbers).
5. Include appropriate revenue codes (must be included on UB04).
6. Provide the Tax ID Number (TIN).
7. Provide the NPI for the billing provider, rendering provider and attending physician, as appropriate.
8. Denote whether the member has other health insurance (OHI).
 - a. Submit claims electronically through a Plan-approved electronic billing systems software vendor or clearing-house. Completion of electronic claims submission requirements can speed claim processing and prevent delays. If you are not currently submitting claims electronically and would like to learn more about EDI and how to get connected, please [click here](#) or contact EDI Customer Support by phone at 1-800-952-0495 or by email at EDICommercialSupportTeam@Conduent.com.
9. Submit paper claims by mail (GCHP cannot process claims submitted via facsimile) to:
Gold Coast Health Plan Attn: Claims
P.O. Box 9152 Oxnard, CA 93031

For more information or for questions, contact Customer Service at 1-888-301-1228.