

## **CCH Participating Provider Quick Reference Guide**



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The Community Care Health (CCH) Quick Reference Guide provides an overview of key information for participating providers when treating CCH members. For more detailed information, please reference the CCH Provider Operations Manual:

 $https://www.communitycarehealth.org/wp-content/uploads/2021/11/CCH-Provider-Operations-Manual\_2022.pdf$ 

Service	Contact Information
Secure	CCH's web-based provider portal provides a 24/7 centralized location for eligibility and claims
Provider Portal	status.  To verify eligibility  1. In a web browser, navigate to: https://hconline.healthcomp.com/CCH  2. Enter your Username and Password and click Log In. If you do not have a HCOnline account, please see section titled "Register on HCOnline" below.  3. In the menu bar, click Verify Eligibility.  4. Enter the member's SSN or Subscriber ID in the textbox; select the corresponding radio button. Click Search.  Look up a claim  1. Navigate to: https://hconline.healthcomp.com/CCH  2. Click on "Are you a provider trying to look up a claim?" on the bottom (effective January 1, 2022).  3. In the bottom menu bar, click Claim Search.  4. Enter your search criteria and click Search.  Register on HCOnline  1. Navigate to: https://hconline.healthcomp.com/CCH  2. Click on "Don't have an HCOnline account? Sign Up.  3. In the upper-right corner, click Sign Up. From the dropdown menu, click Provider. This will open the New User Registration wizard.  4. Follow the step-by-step instructions to create your account.  5. To complete your registration, HCOnline will send a confirmation to your email address. Access your email and click the link within the email confirmation. This will complete the registration process.  For assistance, please contact us at: 1 (800) 442-7247.
	Please check for updates to the Provider Portal as CCH continues to enhance the tool.
Member Eligibility	Providers may verify CCH member eligibility through the following methods:  1. Online via the provider portal, which gives provider offices the ability to view member-specific eligibility information, including effective date, benefits and copayments.  To log on to the provider portal, go to <a href="https://hconline.healthcomp.com/CCH">https://hconline.healthcomp.com/CCH</a> 2. You may also contact CCH's Customer Service Department at: 1 (855) 343-2247 to verify member eligibility.
Utilization Management / Physician Referral & Prior Authorization	Self-Referrals  Members can self-refer to the following in-network specialists without a referral from their PCP: Dermatologists, most Behavioral Health and Substance Abuse providers (Halcyon), Allergists, Chiropractors and OB/GYNs. In addition, members can self-refer for emergency and urgent care. A PCP referral is required to access all other specialists.  Specialty Referrals The PCP is responsible for referring the member to the appropriate specialist by initiating a referral request to the specialist. This can occur via phone, email or by completing a referral form. A copy of the CCH Referral Form can be found in section VI Utilization Management of the Provider Operations Manual located at www.communitycarehealth.org/for-providers. Any subsequent visits or additional specialized care, such as certain lab tests, imaging services or therapy, might require a new referral or prior authorization.  In some cases, the member's condition will qualify for a standing referral to a specialist or specialty care center. Standing referrals require prior authorization from CCH. See Section VI Utilization Management of the Provider Operations Manual located at www.communitycarehealth.org/for-providers for information on standing referrals. Prior authorization is also required for certain services as described below.

Service	Contact Information	
Utilization Management / Physician Referral & Prior Authorization (cont'd)	www.communitycarehealth.org/for-prior Authorization process, or do not please contact Customer Service at If a request for Prior Authorization is Request for Prior Authorization Step 1: Complete form found at: www.communitycarehealth.org/for-prior Authorization Step 2: Complete form found at:	providers> 2022 Provider Toolkit mary: (559) 243-7012   Secondary: (559) 499-1001 ervice at: 1 (855) 343-2247 e prior authorization, please go to
Claims Submission Requirements	<ul> <li>Claims submitted outside of these</li> <li>Claims must be submitted on the intercept (non-institutional Providers and subsection)</li> <li>Forms should be completed legible "dropout" ink.</li> <li>Submit claims with all reasonably ensure timely processing and payre</li> <li>If CCH is the secondary payor, then it</li> </ul>	s or according to the terms of their CCH agreement. time frames may be denied as untimely. most current version of standard claim forms CMS 1500 uppliers) or UB-04 (institutional Providers). y in black ink with standard fonts on forms printed in red relevant information to determine payor liability and to
Customer Service	Friday from 8am to 5pm and can be customerservice@communitycarehe  Community Care Health PO Box 45026 Fresno, CA 93718	th has helpful representatives available Monday - reached at 1 (855) 343-2247 or by email: ealth.org.  Customer Fax: (559) 599-0022  bers and providers with information about:  No cost/free interpreter services for members  Status of medical referrals & authorizations  Community resources and support groups

communitycarehealth.org communitycarehealth.org

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Service	Contact Information		
Prescription Drugs	CCH has partnered with MedImpact for pharmacy benefit management services. For detailed information on members' pharmacy coverage, please refer to CCH's website at https://www.communitycarehealth.org/for-providers/#pharm		
	CCH utilizes MedImpact's MedPerform Formulary which can be downloaded from the website at https://www.communitycarehealth.org/for-providers.		
	For prior authorizations, the prescribing provider must complete and submit the "Prescription Drug Prior Authorization Form" by fax 1 (858) 790-7100, or by phone: 1 (800) 788-2949 along with supporting medical documentation to MedImpact. The form is available on the website at https://www.communitycarehealth.org/for-providers.		
	For questions on the formulary, or prior authorization process, please contact MedImpact: 1 (844) 348-8510		
Behavioral Health	CCH has partnered with Halcyon Behavioral for both mental health and substance abuse disorders.		
	Members have direct access to participating providers for behavioral health services without obtaining a PCP referral. Providers, or members, can call Halcyon Behavioral at 1 (888) 425-4800 for pre-certification of services. The line is available 24/7/365. halcyonbehavioral.com.		
	Questions Call: 1 (855) 424-4457		
PhysMetrics	CCH has partnered with PhysMetrics to manage the physical medicine benefit for members of CCH		
	Physmetrics specializes in managing physical therapy, occupational therapy, speech-language therapy, chiropractic, and acupuncture benefits.  Phone: 1 (877) 519-8839		
Provider Credentialing & Data Management	For demographic changes, or to report a discrepancy (i.e., incorrect address, phone number, Tax ID number), please utilize the Provider Update Form, located on our Find a Provider page > "Notice of Discrepancy" tab when accessing each specific provider.		
	For all other inquires: Email: CCHDataManagement@CommunityCareHealth.org		
Provider Relations	For assistance with any other questions related to your participating provider agreement, please email: ProviderRelations@CommunityCareHealth.org		
CCH Provider Directory	To locate a CCH Participating Provider, go to https://www.communitycarehealth.org/find-a-provider.		
J., Co., C.,	You can also search for providers who speak a certain language in the event a member has such a request.		
Language Assistance Services	CCH Participating Providers may request no cost (free) interpreters at all points of contact for CCH members, whose primary language is other than English, by calling CCH at 1 (855) 343-2247.		
Tools & Resources	Visit our public website at https://www.communitycarehealth.org/for-providers/ for:  • The Provider Toolkit  • 24/7 Secure Web Portal  • Provider Newsletters  • Timely Access to Care Standards  • Healthier Living/Weigh Loss		
Sample ID Card for CCH Members	HMO  Hender Name:  Member Name:  Primary Care Physician  Member ID#:  Group Number:  Plan 040: Medical  Plan		