WELCOME PROVIDERS

Provider Quarterly Training

May 11, 2017

ACCREDITED
Health Plan
Expires 04/01/2018

TEXAS STAR Your Health Plan ★ Your Choice | TEXAS Health and Human Services | CHIP | TEXAS Health and Human Services

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Agenda

- **Invited Presenter:** Jennifer Hickey, ECI Child Find Administrator
- **Provider Relations**: THSteps Updates
- **C.A.R.E.:** Program for Children of Farmworkers
- **Quality Improvement:** 2017 Performance Improvement Projects
- **Contracting:** Overview
- **Health Services:** Mental Health Screening and Benefits
- **Compliance:** Special Investigations Unit
- **Claims**: Reminders
- **Member Services:** Cultural Competency
- **Preferred Administrators:** Benefits Overview

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Provider Relations Updates

Corina Diaz
Provider Relations Coordinator

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THSteps Update

- Reporting Blood Lead Results Electronically
  - Texas Childhood Lead Poisoning Prevention Program (TXCLPPP) is now giving Healthcare Providers the option to submit blood lead reports electronically using a secure FTP server.
  - Electronic Reporting Sign-up Form
  - Instructions: Electronic Blood Lead Reporting Form

Phone: 512-776-7151

https://www.dshs.texas.gov/lead/child.shtm

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Pediatric Symptom Checklist-17 (PSC-17)

- **Effective February 1, 2017, the Pediatric Symptom Checklist-17 (PSC-17) may be used during a Texas Health Steps (THSteps) checkup**, when performing the required mental health screening for clients who are 12 through 18 years of age.

Pediatric Symptom Checklist (PSC-17)
Pediatric Symptom Checklist-17 (PSC-35)
Pediatric Symptom Checklist for Youth (Y-PSC)
Patient Health Questionnaire (PHQ-9)
Car, Relax, Alone, Forget, Family, and Trouble Checklist (CRAFFT)

Bright Futures internet Materials & Tools page

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THSteps Reminder

Effective January 1, 2017

Mental health screening procedure code 99420 will be discontinued

- Procedure code 99420 will be replaced by two new procedure codes, 96160 and 96161.
- Mental health screening using one of the validated, standardized mental health screening tools recognized by THSteps is required once for all clients who are 12 through 18 years of age.
- A mental health screening must be submitted with procedure code 96160 for a screening tool completed by the adolescent, or procedure code 96161 for a screening tool completed by the parent or caregiver on behalf of the adolescent.
- Only one procedure code (96160 or 96161) may be reimbursed for the mental health screening per client per lifetime based on the description of the procedure code and the service rendered.

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Contact Information

Corina Diaz
Provider Relations Coordinator
cdiaz@epfirst.com
915-532-3778 ext. 1167

Provider Relations Department
915-532-3778 ext. 1507

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Program for Children of Farmworkers who Travel for Work

Lluvia Acuña

Outreach Coordinator

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Accelerated Services for Children of Farmworkers who Travel for Work

- A State initiative to provide accelerated services to children of farmworkers who travel for work due to the uniqueness of the population.
- El Paso First Health Plans cooperates and coordinate with the State, outreach programs and Texas Health Steps regional program staff and agents to ensure prompt delivery of services to children of traveling farmworkers who may transition into and out of the MCO's Program more rapidly and/or unpredictably than the general population.
- Coordinate with the Outreach Coordinator for provider education on these services.

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What does Accelerated Services for Children of Farmworkers mean?

- El Paso First must provide accelerated services to FWC Members.
- ***Accelerated Services*** are services that are provided to FWC Members prior to their leaving Texas for work in other states.
  - Accelerated services include the provision of preventive Health Care Services that will be due during the time the FWC Member is out of Texas.
  - The need for accelerated services must be determined on a case-by-case and according to the FWC Member's age, periodicity schedule and health care needs.

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Indicator on Roster

An indicator was introduced to the THSteps Members Due Roster on May 2011.

ROBERTO CANALES MD PA

EL PASO, TX 79902

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STAR Master Roster - THSteps Due Members Only

July 2011

Member#	Member Name	Migrant	Age	DOB	Sex	Phone	Address	Effective	THSteps	PCPName

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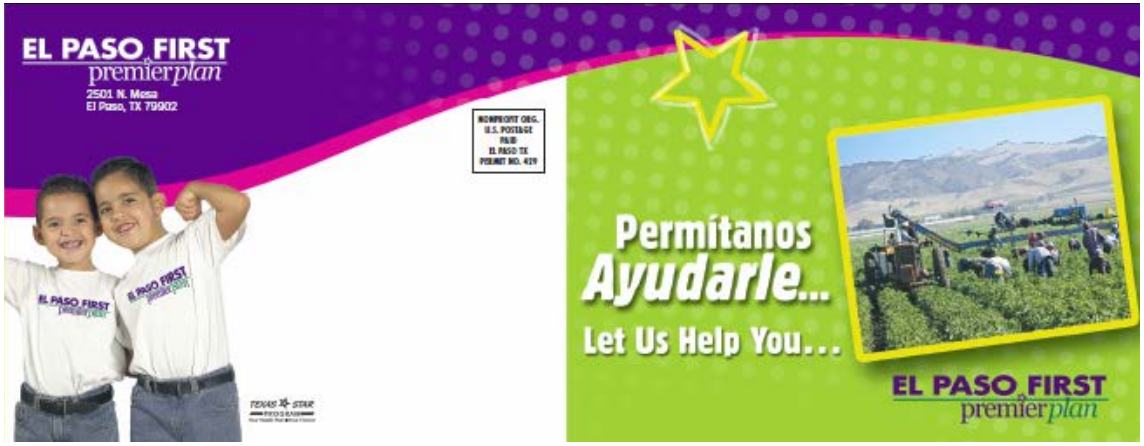
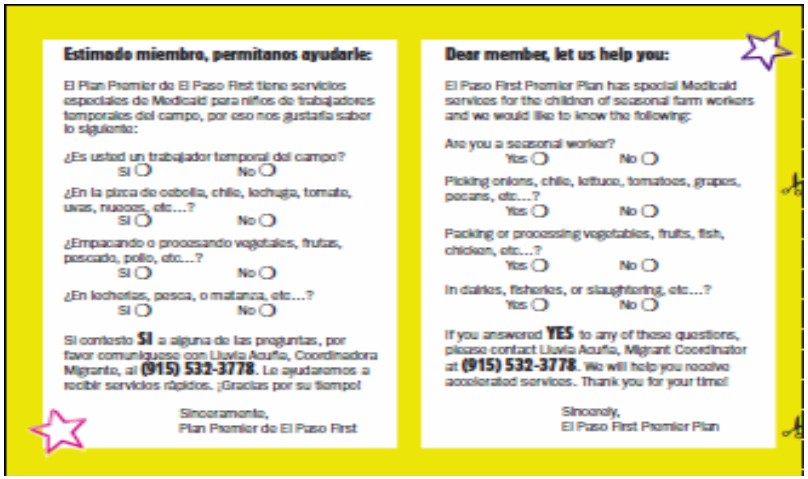
Reaching out to Children of Farm Workers

- Post cards
- Auto-dialer
- Text Messages
- Educational Posters





Estimado miembro, permítanos ayudarle:

El Plan Premier de El Paso First tiene servicios especiales de Medicaid para niños de trabajadores temporales del campo, por eso nos gustaría saber lo siguiente:

¿Es usted un trabajador temporal del campo?
SI ○ No ○

¿En la pizca de cebolla, chile, lechuga, tomate, uvas, nueces, etc...?
SI ○ No ○

¿Empacando o procesando vegetales, frutas, pescado, pollo, etc...?
SI ○ No ○

¿En lecherías, pesca, o matanza, etc...?
SI ○ No ○

Si contesto **SI** a alguna de las preguntas, por favor comuníquese con Lluvia Acuña, Coordinadora Migrante, al **(915) 532-3778**. Le ayudaremos a recibir servicios rápidos. ¡Gracias por su tiempo!

Sinceramente,
Plan Premier de El Paso First

Dear member, let us help you:

El Paso First Premier Plan has special Medicaid services for the children of seasonal farm workers and we would like to know the following:

Are you a seasonal worker?
Yes ○ No ○

Picking onions, chile, lettuce, tomatoes, grapes, pecans, etc...?
Yes ○ No ○

Packing or processing vegetables, fruits, fish, chicken, etc...?
Yes ○ No ○

In dairies, fisheries, or slaughtering, etc...?
Yes ○ No ○

If you answered **YES** to any of these questions, please contact Lluvia Acuña, Migrant Coordinator at **(915) 532-3778**. We will help you receive accelerated services. Thank you for your time!

Sincerely,
El Paso First Premier Plan

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Reaching out to Children of Farm Workers

- El Paso First partners with more than 20 community agencies that serve this special population.
- El Paso First also partners with all 11 school districts in the El Paso & Hudspeth Areas and their Education Programs
    - Anthony ISD MEP
    - Canutillo ISD MEP
    - Clint ISD MEP
    - Dell City ISD MEP
    - El Paso ISD MEP
    - Fabens ISD MEP
    - Ft. Hancock ISD MEP
    - San Elizario ISD MEP
    - Socorro ISD MEP
    - Tornillo ISD MEP
    - Ysleta ISD MEP

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Reaching out to Children of Farm Workers

Annual School Supply Distribution Health Fairs:

AT NO COST:

- Health Screenings
- Kids Immunizations
- Health Education and much more!!!!

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Reaching out to Children of Farm Workers

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Mobile Food Pantry Distributions

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Contact Information

Lluvia Acuña
Outreach Coordinator
lacuna@epfirst.com
915-298-7198 ext. 1075

Adriana Cadena
C.A.R.E. Unit Manager
acadena@epfirst.com
915-298-7198 ext. 1127

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Quality Improvement

2017

Performance Improvement Projects

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Performance Improvement Projects (PIPs)

- Current Active PIPs
  - Potentially Preventable ED Visits for URI (STAR and CHIP)
  - Well-Child Visits in the First 15 Months of Life (STAR and CHIP)
  - Potentially Preventable Readmissions (STAR & CHIP)

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Performance Improvement Projects (PIPs)

2017 Interventions	
Well Care Visits in the First 15 Months of Life	
Barrier	**Intervention**
Members of this age group had not received re-enforced messaging from the MCO to obtain their well-care visits.	Baby Steps Program
Members are consistent in completing the required visits until the 12 month birthday. At this time, they skip the 15 and 18 month checkup and resume at the 24 month checkup	Borderline Outreach
Providers may not be billing for all well-care services conducted. Through other interventions the MCO already has in place, a trend of being unable to confirm visits through claims had been identified.	Provider Education

Performance Improvement Projects (PIPs)

2017 Interventions	
Well Care Visits in the First 15 Months of Life	
Intervention	**Description**
Baby Steps Program	• Target members born between October 3, 2016 and October 2, 2017 (will turn 15 months in 2018) • Send regular texts to encourage completion of visits for chance to enter raffle
Borderline Outreach	• Target members born between October 3, 2015 and October 2, 2016 who have completed 4 to 5 of the 6 well-care visits • Send text messages to encourage completion of their last visits before 15 month birthday
Provider Education	• Target providers identified as having a high turn- around time for well-care claims submission • Timely submission is important for accurate tracking of other interventions

Performance Improvement Projects (PIPs)

2017 Planned Interventions	
Reducing Potentially Preventable Re-Admissions	
Barrier	**Intervention**
Lack of targeted contact for members who have been re-admitted.	Home Visits
Lack of care-coordination for members when they discharge after an inpatient admission.	H.O.M.E Program – Care Coordination

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Performance Improvement Projects (PIPs)

2017 Planned Interventions	
Reducing Potentially Preventable Re-Admissions	
Intervention	**Description**
Home Visits	• Target members identified as having a readmission within 30 days • Will receive a home visit from Disease Management staff
H.O.M.E Program Care Coordination	• Designed to target members that have been recently discharged from an inpatient facility • Intended to educate members with discharge needs and in turn prevent potentially preventable re-admission

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Contact Information

Don Gillis

Director of Provider Relations and Quality Improvement

915 298 7198 Ext 1231

dgillis@epfirst.com

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Contracting Overview

Sonia Fernandez

Contracting Representative

EL PASO FIRST
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Contract Request

Please contact our Contracting Representatives when you wish to contract or add a provider to your group.

<u>Contracting Department will require the following forms to begin the process :</u>

- ✓ Demographic Form (forms located on website)
- ✓ W-9
- ✓ TPI (STAR Medicaid)
- ✓ NPI

Contracting Representative
Sonia Fernandez
915-298-7198 x1130

Contracting Representative
Gabriel De Los Santos
915-298-7198 x1128

Credentialing Coordinator
Gabriela Macias
915-298-7198 x 1005

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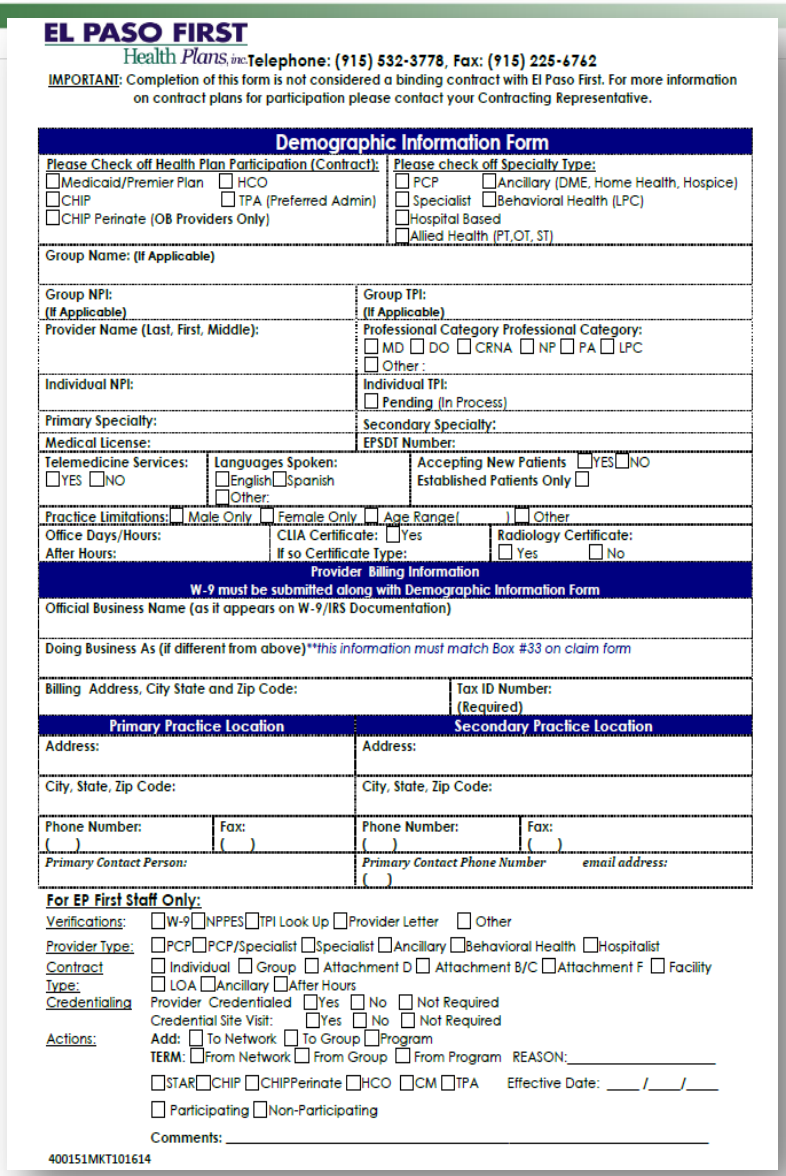
Contracting Process

- Verification of information provided on the Demographic form and W-9
  - ✓ Pay to name (W-9, NPI & TPI)
  - ✓ Desired participating Programs (STAR, CHIP, CHIP Perinatal, HCO, TPA)
  - ✓ Provider Specialty
  - ✓ Practice Limitations
  - ✓ Age Range
  - ✓ Accepting patients
  - ✓ Languages
  - ✓ Office Hours
  - ✓ CLIA

Demographic Form



EL PASO FIRST
Health Plans, inc. **Telephone: (915) 532-3778, Fax: (915) 225-6762**

IMPORTANT: Completion of this form is not considered a binding contract with El Paso First. For more information on contract plans for participation please contact your Contracting Representative.

Demographic Information Form

Please Check off Health Plan Participation (Contract):	Please check off Specialty Type:
☐ Medicaid/Premier Plan ☐ HCO ☐ CHIP ☐ TPA (Preferred Admin) ☐ CHIP Perinate (OB Providers Only)	☐ PCP ☐ Ancillary (DME, Home Health, Hospice) ☐ Specialist ☐ Behavioral Health (LPC) ☐ Hospital Based ☐ Allied Health (PT,OT, ST)

Group Name: (If Applicable)	
Group NPI: (If Applicable)	Group TPI: (If Applicable)
Provider Name (Last, First, Middle):	Professional Category Professional Category: ☐ MD ☐ DO ☐ CRNA ☐ NP ☐ PA ☐ LPC ☐ Other :
Individual NPI:	Individual TPI: ☐ Pending (In Process)
Primary Specialty:	Secondary Specialty:
Medical License:	EPSDT Number:

Telemedicine Services:	Languages Spoken:	Accepting New Patients ☐YES☐NO
☐YES ☐NO	☐English☐Spanish ☐Other:	Established Patients Only ☐

Practice Limitations: ☐ Male Only ☐ Female Only ☐ Age Range( ) ☐ Other

Office Days/Hours: After Hours:	CLIA Certificate: ☐Yes If so Certificate Type:	Radiology Certificate: ☐ Yes ☐ No

Provider Billing Information
W-9 must be submitted along with Demographic Information Form

Official Business Name (as it appears on W-9/IRS Documentation)
Doing Business As (if different from above)***this information must match Box #33 on claim form*
Billing Address, City State and Zip Code: — Tax ID Number: (Required)

Primary Practice Location		Secondary Practice Location	
Address:		Address:	
City, State, Zip Code:		City, State, Zip Code:	
Phone Number: ( )	Fax: ( )	Phone Number: ( )	Fax: ( )
Primary Contact Person:		*Primary Contact Phone Number* ( )	*email address:*

For EP First Staff Only:

Verifications: ☐W-9 ☐NPPES ☐TPI Look Up ☐Provider Letter ☐ Other

Provider Type: ☐PCP ☐PCP/Specialist ☐Specialist ☐Ancillary ☐Behavioral Health ☐Hospitalist

Contract Type: ☐ Individual ☐ Group ☐ Attachment D ☐ Attachment B/C ☐Attachment F ☐ Facility ☐ LOA ☐Ancillary ☐After Hours

Credentialing: Provider Credentialed ☐Yes ☐ No ☐ Not Required
Credential Site Visit: ☐Yes ☐ No ☐ Not Required

Actions: Add: ☐ To Network ☐ To Group ☐Program
TERM: ☐From Network ☐ From Group ☐ From Program REASON:_____
☐STAR ☐CHIP ☐CHIPPerinate ☐HCO ☐CM ☐TPA Effective Date: ____ /____/____
☐ Participating ☐Non-Participating
Comments: _____

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Contracting Process

- Contracting Packet will include:
  - ✓ 2 copies of an unsigned contract
  - ✓ Credentialing Application (if the provider is not credentialed, a credentialing application will be included in the packet)

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Important things to Remember

- ✓ Make sure that all applications, forms and contracts are completed in their entirety.
- ✓ Make sure that your applications and contracts are signed before returning.
- ✓ Failure to complete and sign will cause your application or contract to be returned and cause a delay in the process.
- ✓ Network participation begins when you have received a copy of your executed agreement with the effective start date.
- ✓ If your Individual or Group TPI are pending, the provider will continue with a non-par status for STAR-Medicaid until received and contract is amended. (No retro dates)

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Network Closed to Specialty

- Panel Status continues to be closed for STAR and CHIP programs for the following specialties:
  - DME
  - Home Health
  - Physical Therapy, Speech Therapy and Occupational Therapy
  - Laboratory Services

- The provider network specialties that have an adequate amount of qualified providers may be subject to being closed for an indefinite time period.
- The review process of closed panels and network adequacy is conducted annually.

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Questions

Sonia Fernandez

Contracting Representative

915-298-7198 ext. 1130

EL PASO FIRST Health Plans, inc.

Mental Health Screening and Benefits

Edna Lerma, LPC
Health Services
Clinical Supervisor

EL PASO FIRST
Health Plans, inc.

Mental Health Screening

- Mental health screening is required at each THSteps checkup and includes behavioral, social, and emotional development.

- Mental health screening using one of the following validated, standardized mental health screening tools recognized by THSteps is required once for all clients who are 12 through 18 years of age: (Link to Bright Futures Materials & Tools page to download the forms.) www.dshs.texas.gov

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Referrals for Behavioral Health

- Behavioral health services are very private, so members do not need permission from their Primary Care Provider to receive these services.
- Members/providers may call El Paso First if any information regarding Behavioral Health services and/or if a list of providers is needed.

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Case Management for Behavioral Health

- Providers may refer members to BH Case Management
- A Case Management Referral form can be filled out, faxed in or called in
- A BH CM will assess members needs, provide education, service coordination and referrals as deemed necessary
- BH CM will collaborate with referring provider

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What is Case Management?

A collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote quality, cost-effective outcomes. (Case Management Society of America)

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Benefits of Case Management

CM will provide a holistic, person-centered, medically appropriate service coordination for members who have chronic medical complexities or for whom a health incident has precipitated a need for additional support.

The case management program will address the member's physical, social, and psychological needs to promote optimal health outcomes and prevent fragmented service delivery.

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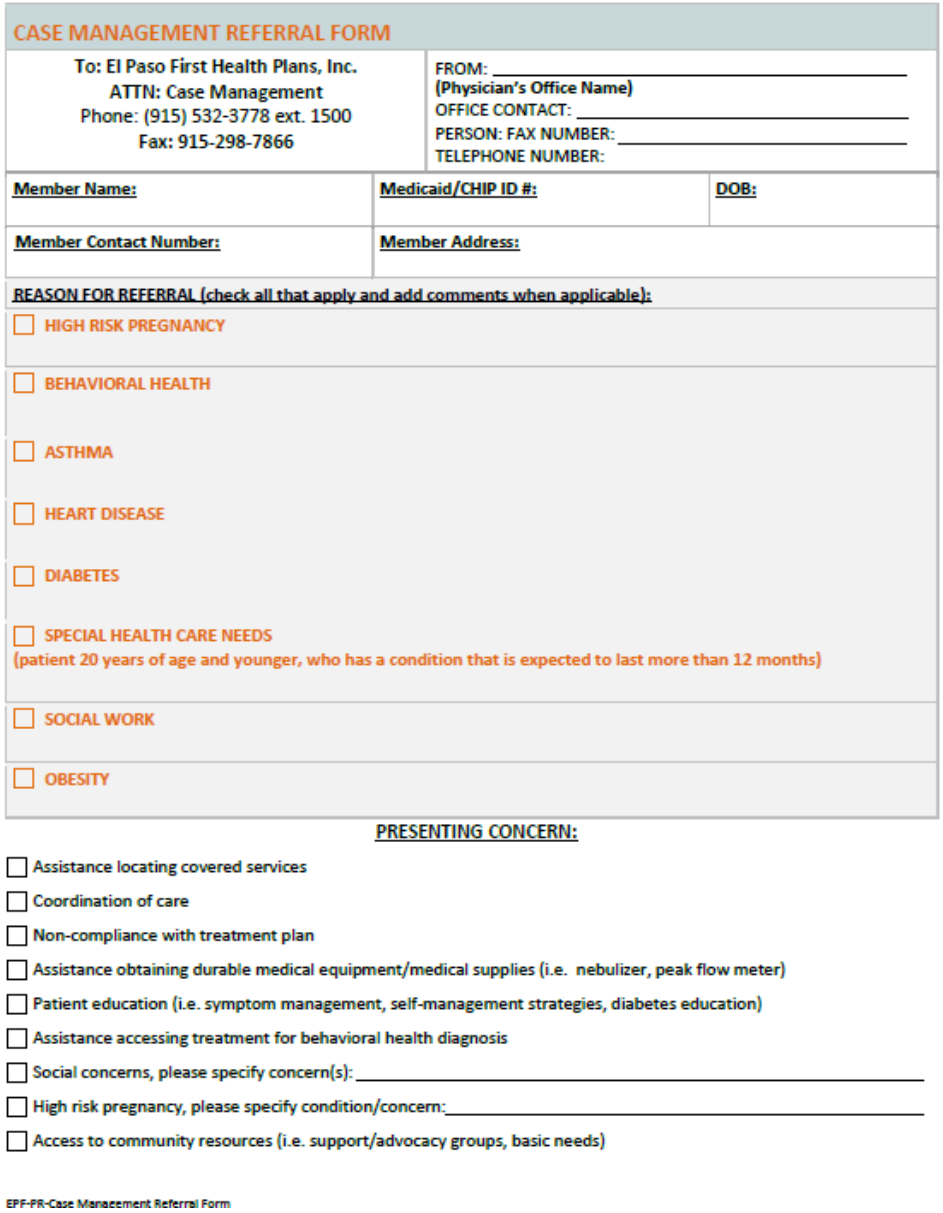
Case Management Referral Form



CASE MANAGEMENT REFERRAL FORM

To: El Paso First Health Plans, Inc.
ATTN: Case Management
Phone: (915) 532-3778 ext. 1500
Fax: 915-298-7866

FROM: _____
(Physician's Office Name)
OFFICE CONTACT: _____
PERSON: FAX NUMBER: _____
TELEPHONE NUMBER:

Member Name:	Medicaid/CHIP ID #:	DOB:
Member Contact Number:	Member Address:	

REASON FOR REFERRAL (check all that apply and add comments when applicable):

- ☐ HIGH RISK PREGNANCY
- ☐ BEHAVIORAL HEALTH
- ☐ ASTHMA
- ☐ HEART DISEASE
- ☐ DIABETES
- ☐ SPECIAL HEALTH CARE NEEDS
  (patient 20 years of age and younger, who has a condition that is expected to last more than 12 months)
- ☐ SOCIAL WORK
- ☐ OBESITY

PRESENTING CONCERN:

- ☐ Assistance locating covered services
- ☐ Coordination of care
- ☐ Non-compliance with treatment plan
- ☐ Assistance obtaining durable medical equipment/medical supplies (i.e. nebulizer, peak flow meter)
- ☐ Patient education (i.e. symptom management, self-management strategies, diabetes education)
- ☐ Assistance accessing treatment for behavioral health diagnosis
- ☐ Social concerns, please specify concern(s): _____
- ☐ High risk pregnancy, please specify condition/concern: _____
- ☐ Access to community resources (i.e. support/advocacy groups, basic needs)

EPF-PR-Case Management Referral Form

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Benefits for Mental Health and Substance Abuse

- Inpatient Psychiatric Care (acute condition)
- Outpatient services (individual, family and group therapy)

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AVAIL CRISIS LINE

Behavioral Health and Substance Abuse Helpline/Drug and Alcohol Treatment

- You can get behavioral health or substance abuse help when you need it. This line is open 24 hours a day, 7 days a week. A qualified and trained person, fluent in both English and Spanish, will be there to help you.
- STAR: 1-877-377-6147
- CHIP: 1-877-377-6184

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AA/PCA

- Beginning 9/1/2017 El Paso First may have members that are part of AA/PCA
- Members that are part of AA/PCA are considered Members with Special Health Care Needs (MSHCN)
- Member will automatically be enrolled in Case Management

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Adoption Assistance Program

- Adoption assistance is a program designed to facilitate the adoption of children defined as having special needs.
  - In CPS cases, adoption becomes an option if CPS and the child's birth parents cannot resolve issues that made it unsafe for the child to live at home.

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Permanency Care Assistance Program

- Individuals who assume managing conservatorship of a child who was previously in the temporary or permanent managing conservatorship of DFPS

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Case Management and AA/PCA

- Assessment of members needs
- Identification of strengths and barriers to accessing health care services
- Individualized Service Plan to be completed between 10 – 30 business days upon enrollment
- Multi-disciplinary team approach
- Collaboration between health plan and providers

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Contact Us

Health Services Department

915-532-3778 ext. 1500

EL PASO FIRST Health Plans, inc.

Special Investigations Unit Compliance

Alma Meraz- Special Investigations Unit Claims Auditor

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Monthly Random Medical Records Reviews

- Texas enacted bill 2292 to require that all Managed Care Organizations like El Paso First establish a plan to prevent waste, fraud and abuse.
- To comply with this bill we randomly select 5-7 providers on monthly basis. These are providers that flag our system because of edits, billing patterns and coding issues
- This process involves the review of paid claims and if necessary a request for medical records
- This might result in education to the provider letting you know what problem we have detected.

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Record Request Protocol

- Please make sure that you submit all of the requested information. If not submitted those claims will be recouped as:

  No documentation for that date of service

- You will be required to sign a records affidavit
- At the end of the record review you will be notified of the findings
- If the review results in a recoupment:
  - You will include a detailed spreadsheet with claim and recoupment information
  - Within 30 days of the notice you will have the right to dispute the findings, *except for the claims that were recouped for no documentation submitted*
- The recoupment process is done via claims unless other arrangements are made.

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Monthly 39 Week OB Reviews

- Random selection of 15 providers. If you have more than one physician in your group you might have more than one request for that month.
- Records are requested and reviewed to:
  - Ensure medical necessity of inductions and or c-sections, and
  - Determine proper utilization of modifiers U1, U2,U3
- Please note we only request the last progress note prior to the delivery and the Delivery Summary/Operative report.

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Member Services Verification

- Random selection of 60 members a month
- Phone calls to verify that services were rendered as billed
- If unable to be verified by member we will request medical records
- The provider will be notified in writing of the findings

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Contact information

Alma Meraz

Special Investigations

Unit Claims Auditor

(915) 298-1798 ext. 1039

ameraz@epfirst.com

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Claim Reminders

Adriana Villagrana

Claims Manager

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Claims Processing

- Timely filing deadline
  - –**95** days from date of service
- Corrected claim deadline
  - —**120** days from date of EOB
  - —Use the comments section of the corrected claim form and be specific

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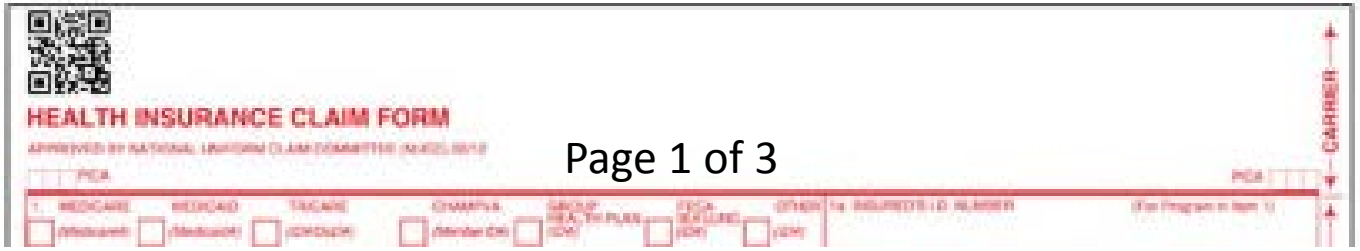
Claims Processing

- If you are submitting multiple claims for a patient, please ensure that you are:
  - Indicating page 1 of x (number of pages)
  - Stapling the claims together



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Common Denials

- Authorization Number
  - Does not match DOS
  - Does not match Member
  - Does not match Provider
  - Benefit Requires Authorization
- Timely Filing has exceeded
- Invalid diagnosis code for benefit
- Missing or Invalid NDC code

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Availity Web Portal Functionalities

- Express Entry
- Billing Provider Information
- Authorization Number
- Coordination of Benefits

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Express Entry

- Express Entry
  - Allows you to set up providers
  - Allows you to add providers
  - Allows you to edit providers
  - Allows you to delete providers

Important:

For Express Entry you may use an NPI only once within an Organization

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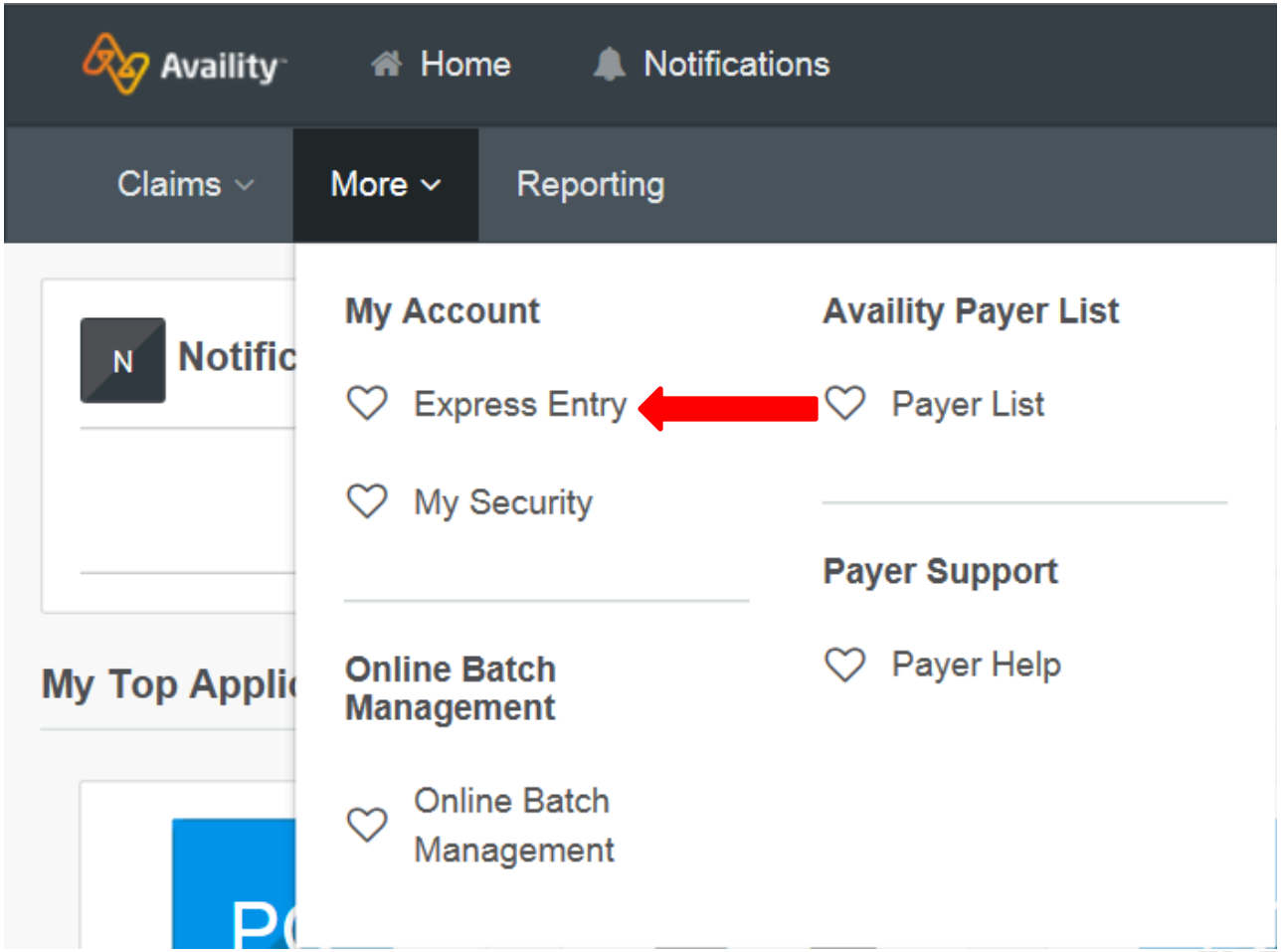
Express Entry



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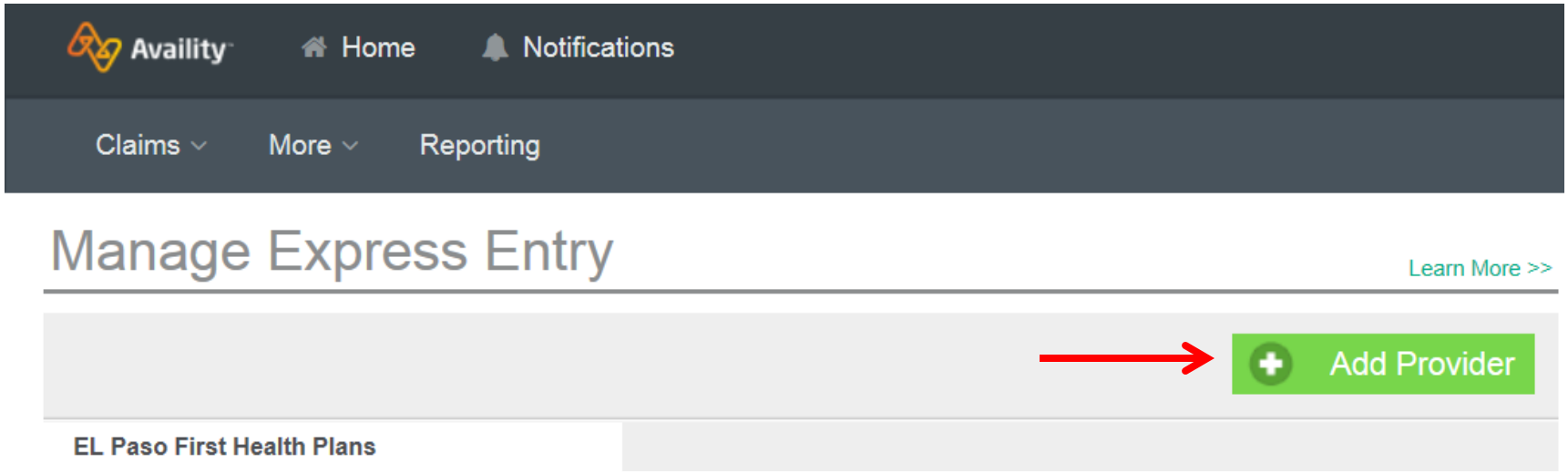
Express Entry



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Express Entry

- Type NPI
- Click on Add Provider
  - Provider information associated with NPI will populate

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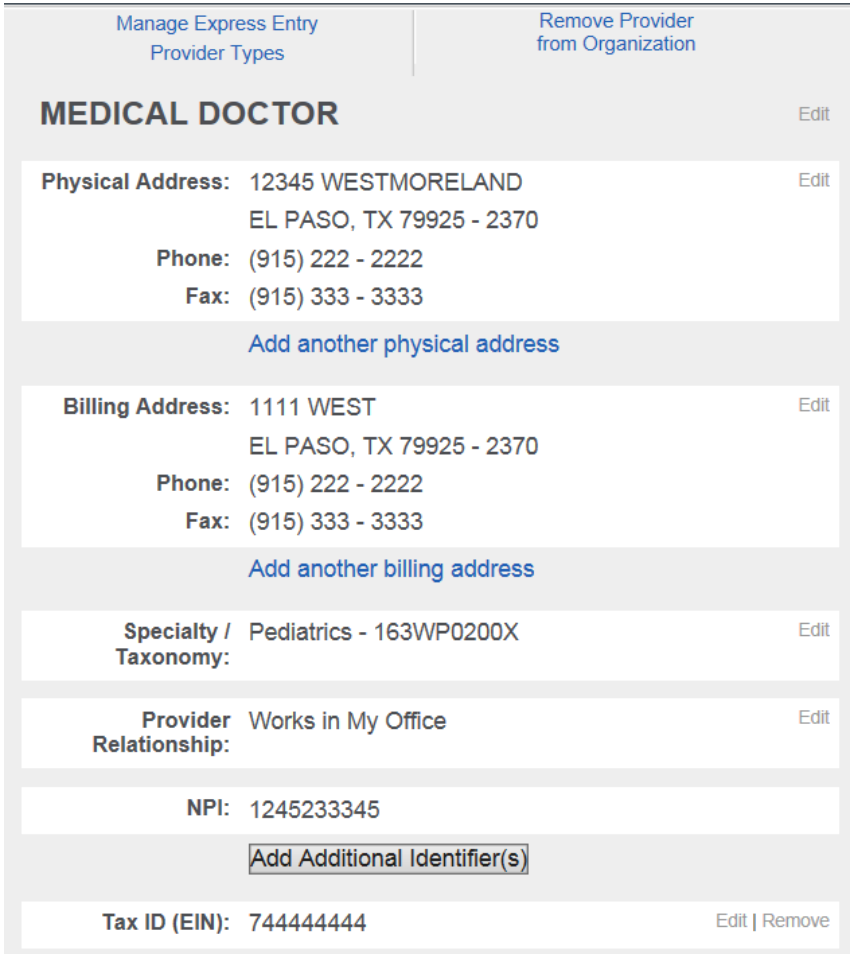
Express Entry



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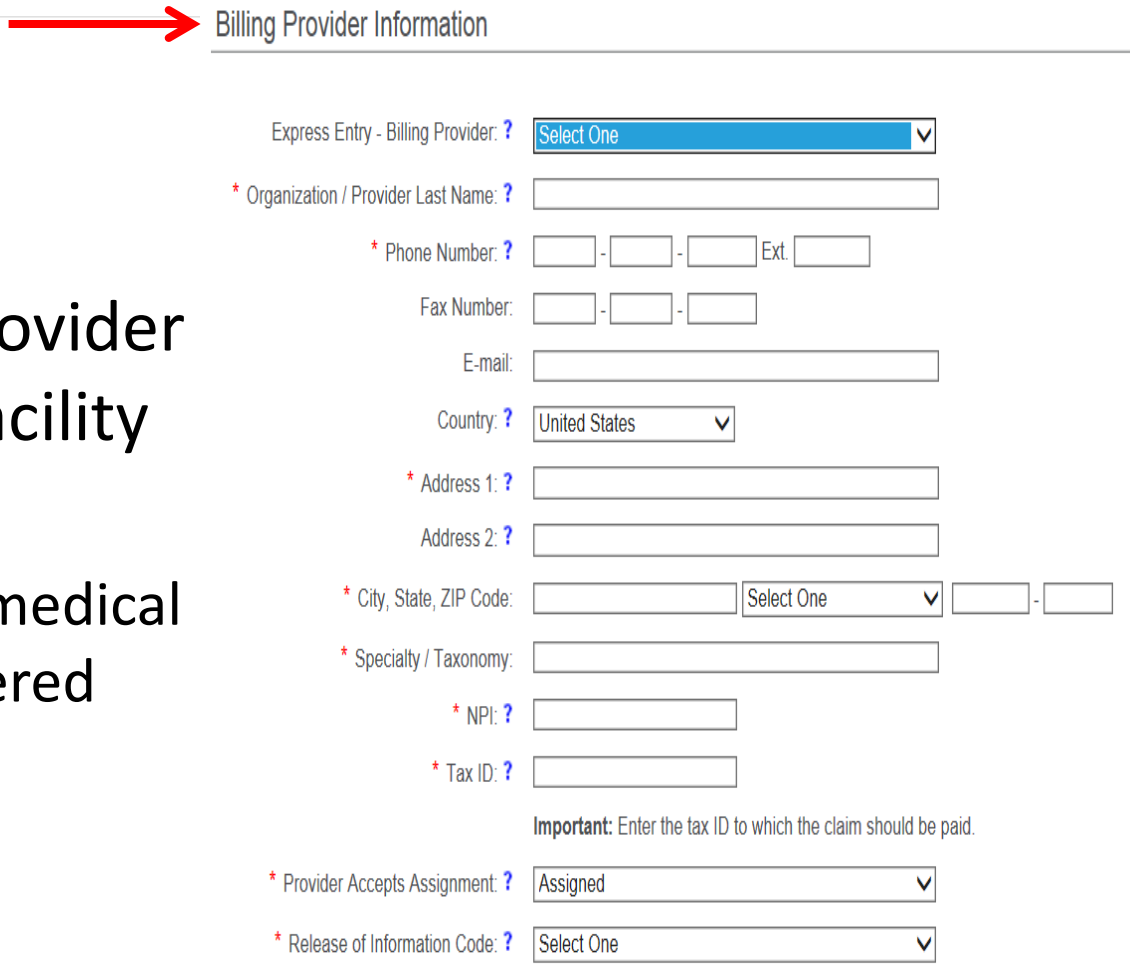
Billing Provider – Facility Claims

- Entering Billing Provider Information for Facility Claims
  - Enter where the medical service was rendered



EL PASO FIRST Health Plans, inc.

Adding Additional Provider Information Facility Claims

This claim has additional provider information...

- ☐ additional billing provider contact information
- ☐ a billing provider pay-to address that is different from the billing provider address
- ☐ a service facility location that is different from the billing provider

Attending Provider Information

Express Entry - Attending Provider:	Select One
* Last Name:	
* First Name:	
* Specialty / Taxonomy:	
* NPI: ?	

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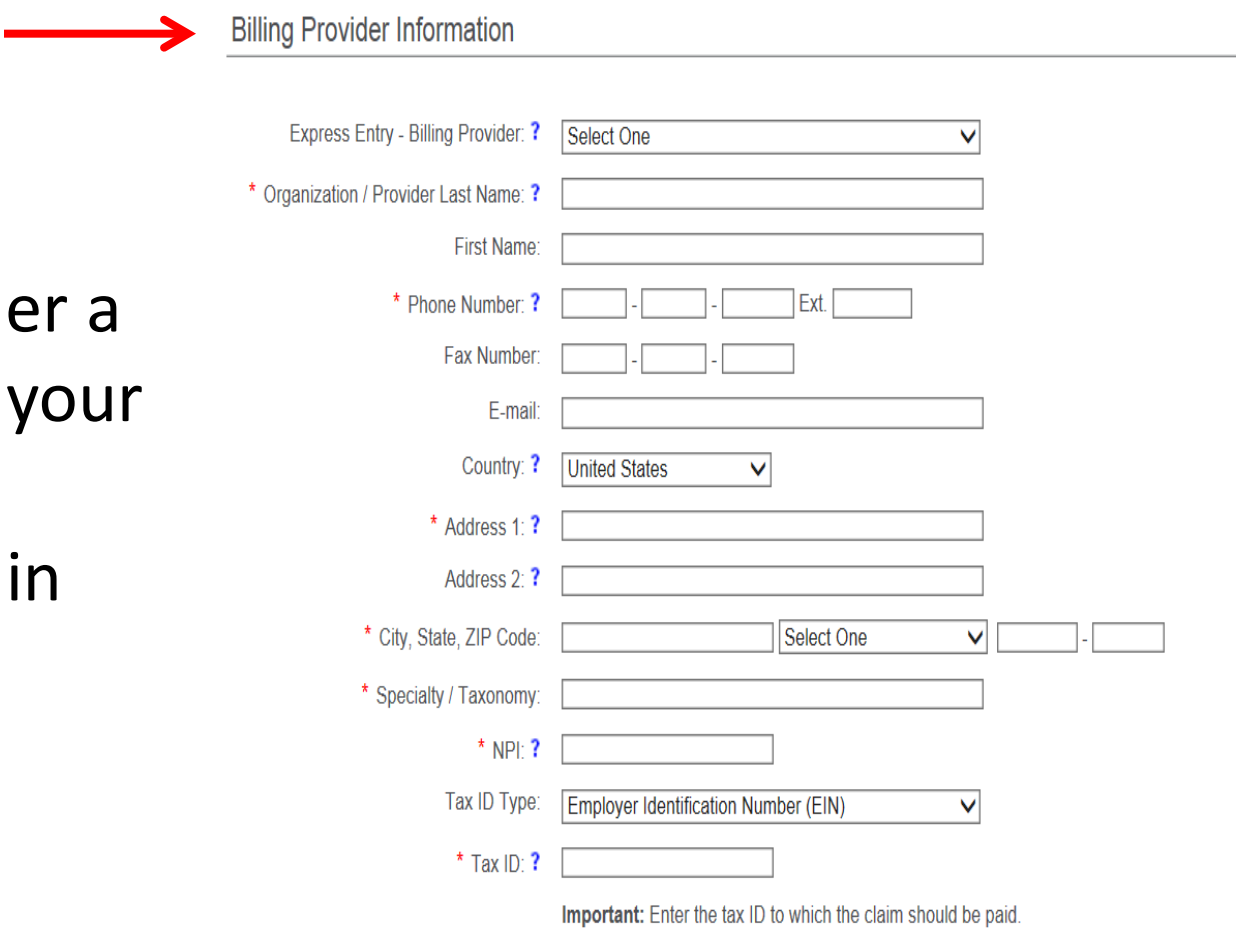
Billing Provider – Professional Claims

- If billing under a group enter your pay to information in this section.



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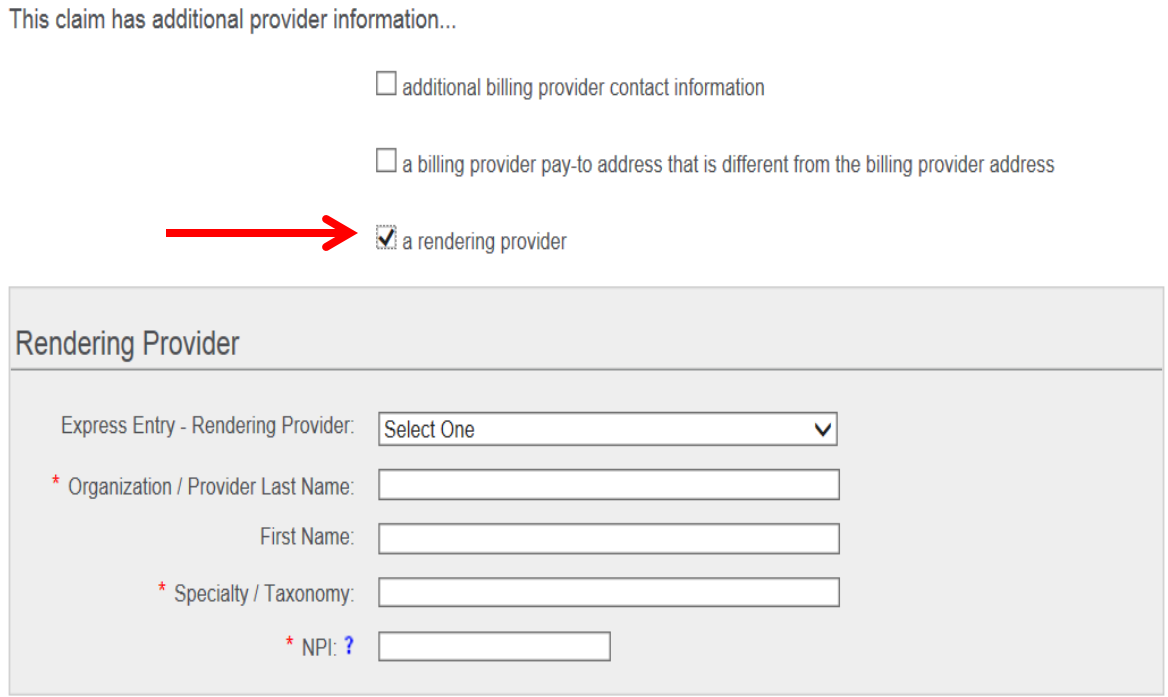
Rendering Provider – Professional Claims

- Select appropriate box



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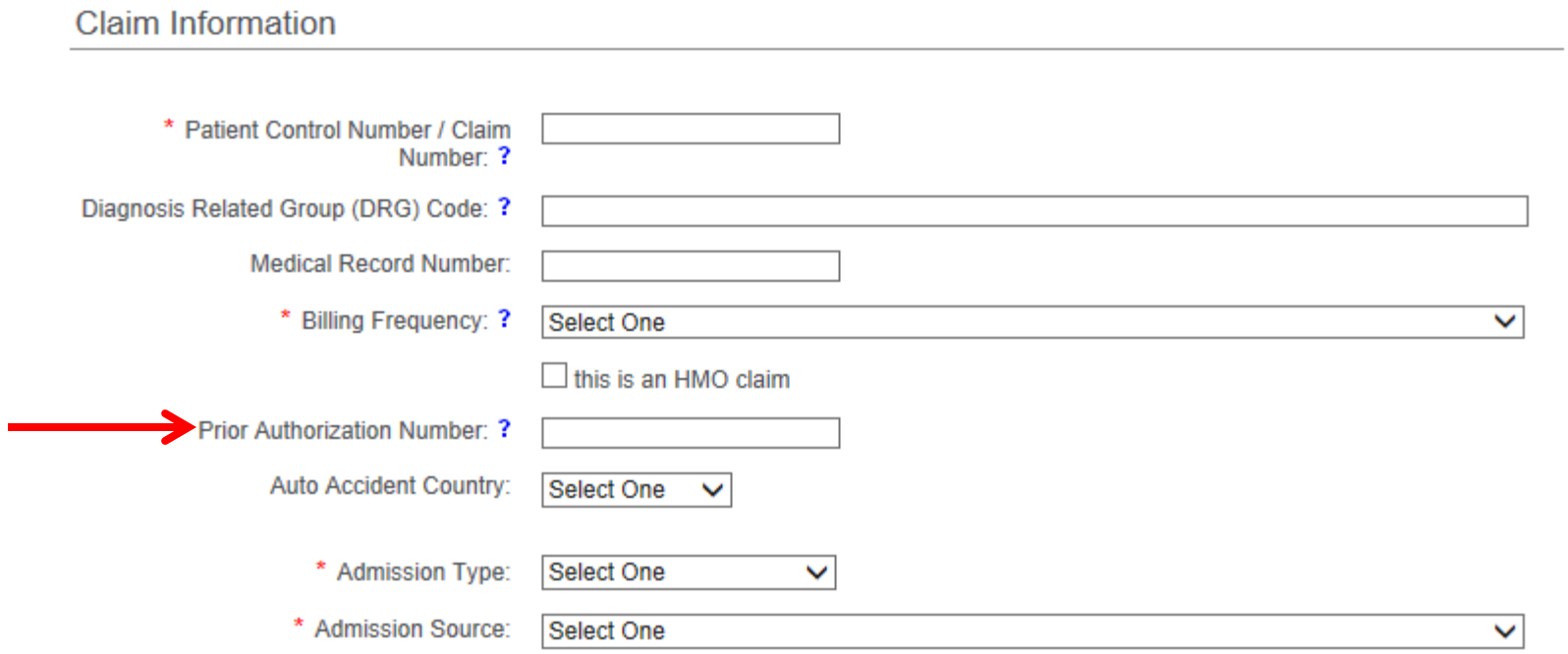
Authorization Number – Facility Claim



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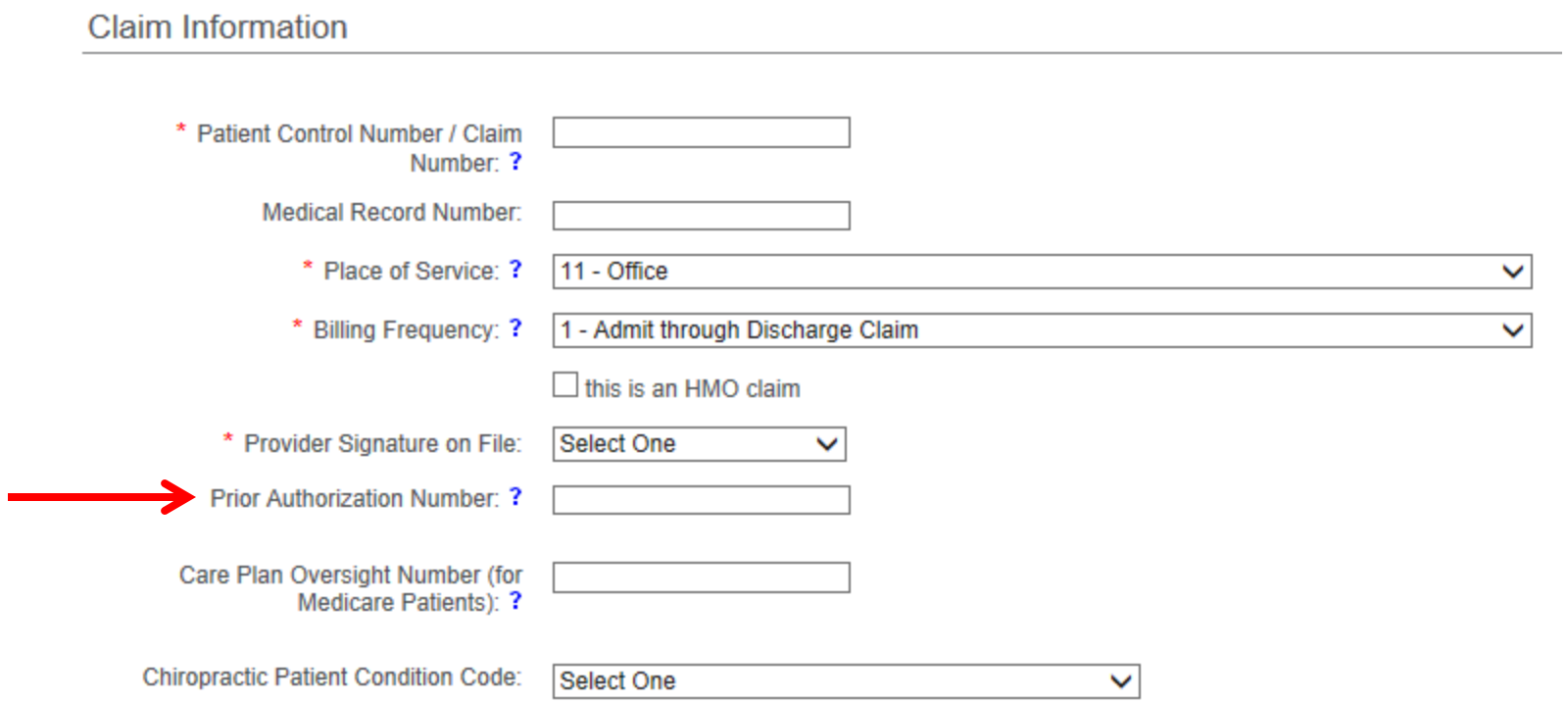
Authorization Number Professional Claim



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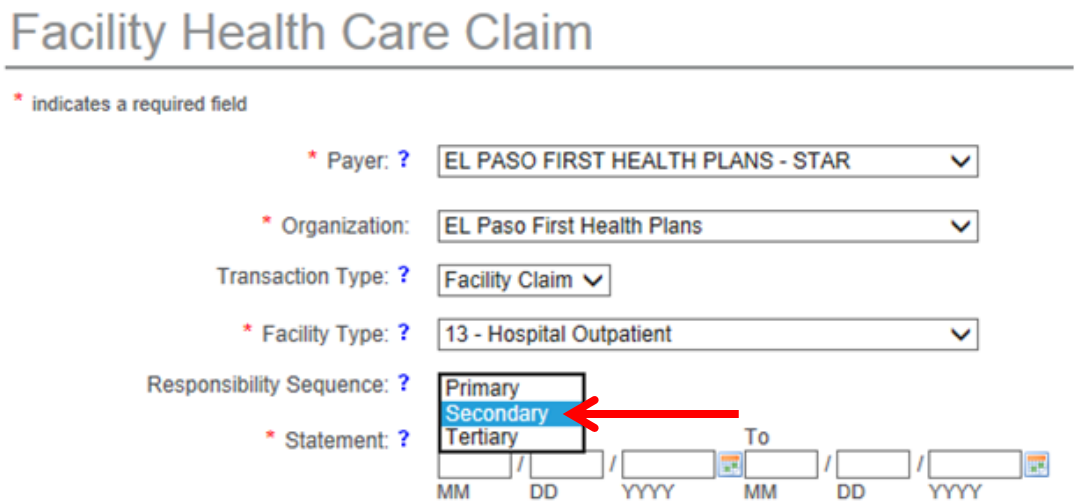
Coordination of Benefits



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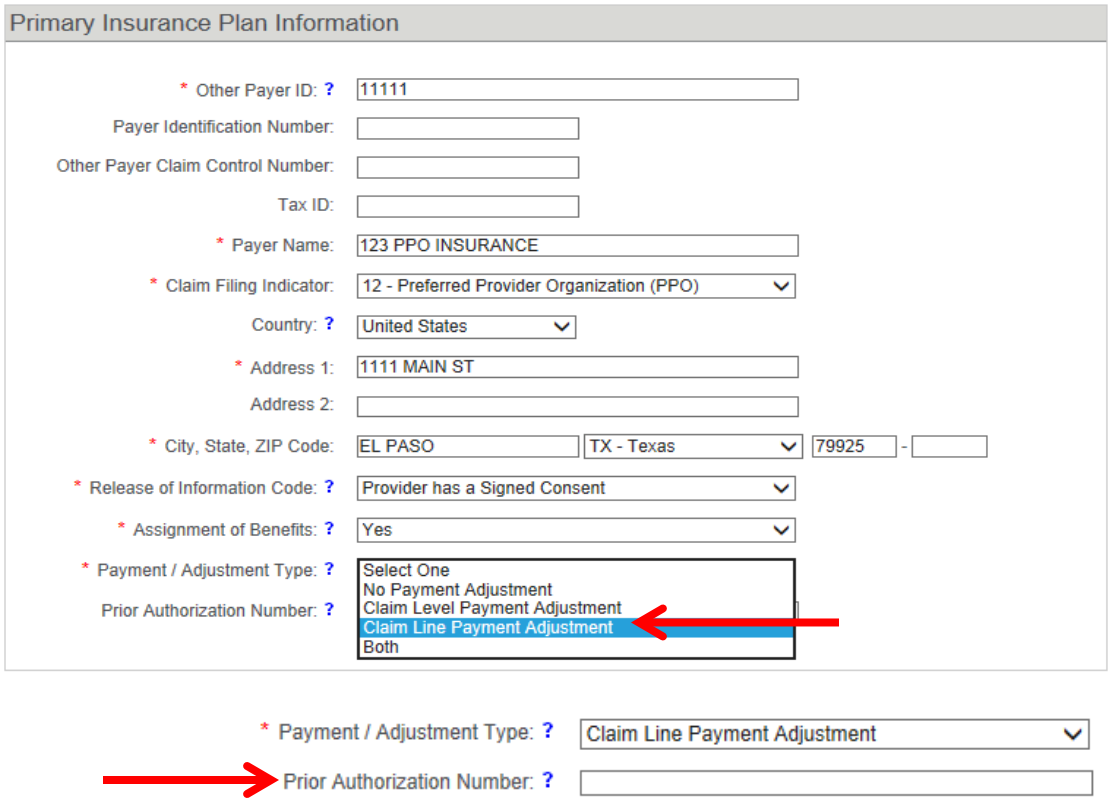
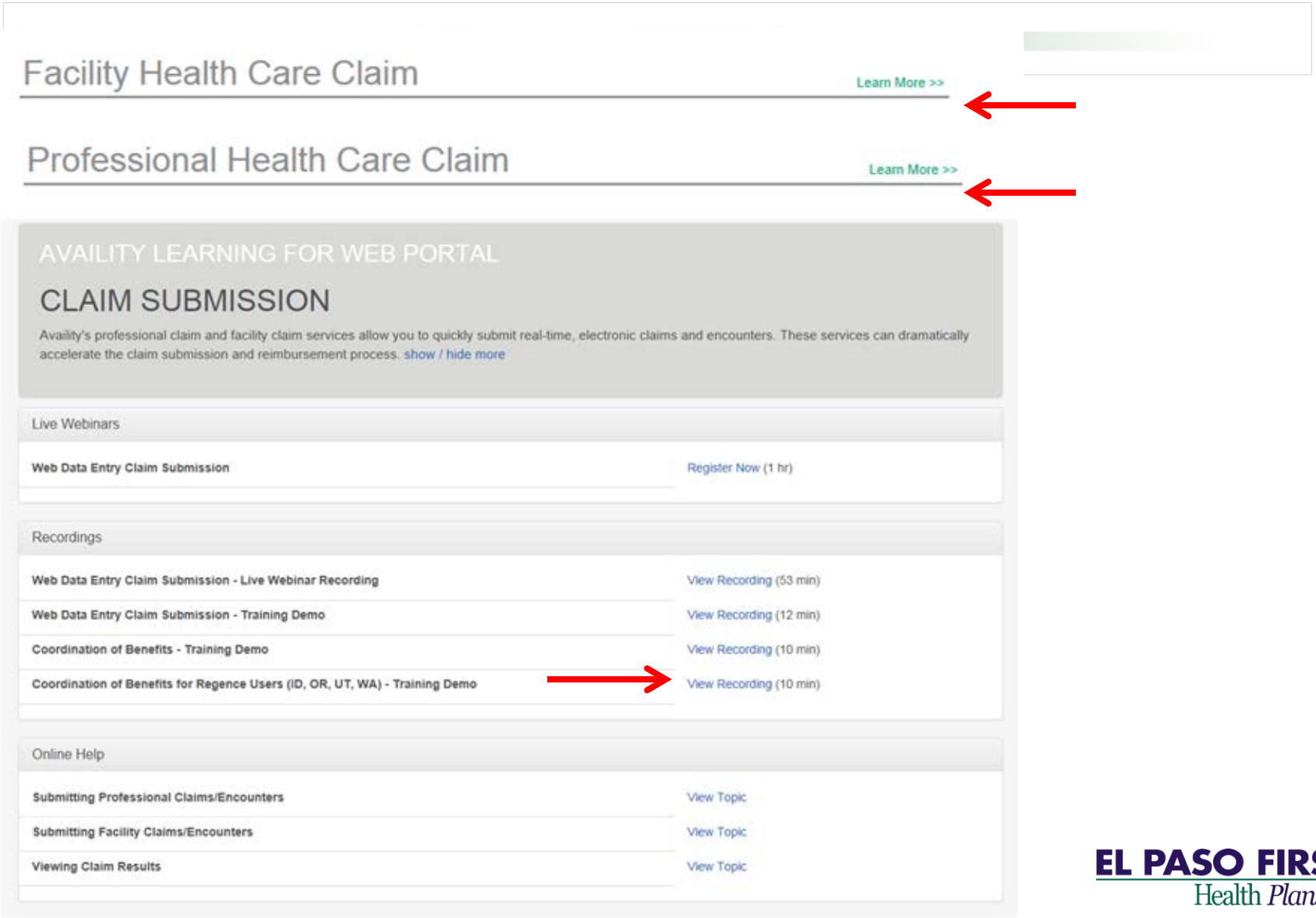
Coordination of Benefits



EL PASO FIRST Health Plans, inc.

Coordination of Benefits



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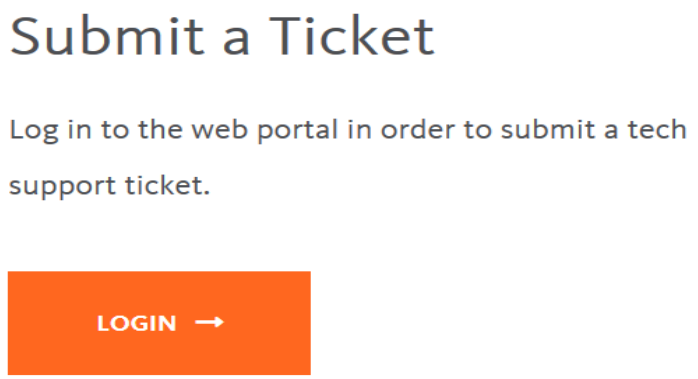
Availity Contact

- Web Portal Support
  - 877-732-5633
- Submit an Inquiry on line



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Electronic Claims

- Claims are accepted from:
  - Availity
  - Trizetto Provider Solutions, LLC.
    (formerly Gateway EDI)
- Payer ID Numbers:

STAR	EPF02
CHIP	EPF03
Preferred Admin. UMC	EPF10
Preferred Admin. EPCH	EPF11
Healthcare Options	EFP37

EL PASO FIRST Health Plans, inc.

Contact Us

(915) 532-3778

Provider Care Unit Extension Numbers:

- 1527 – Medicaid
- 1512 – CHIP
- 1509 – Preferred Administrators
- 1504 – HCO

EL PASO FIRST Health Plans, inc.

Member Services Department Cultural Competency

Edgar Martinez

Director of Member Services

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ACCREDITED
Health Plan
Expires 04/01/2018

EL PASO FIRST
Health Plans, inc.

Cultural Competency

- El Paso First places great emphasis on the wellness of our Members. A large part of quality healthcare delivery is treating the whole patient and not just the medical condition.
- Sensitivity to differing cultural influences, beliefs and backgrounds, can improve a Provider‘s relationship with patients and in the long run the health and wellness of the patients themselves.
- We coordinate interpreter and translation services to meet the Member‘s needs. El Paso First‘s Cultural Competency and Linguistic Services Plan is available to its Network Providers upon request.

EL PASO FIRST Health Plans, inc.

Cultural Competency

For additional resources regarding cultural competency services contact:

- CLASinTexas: Resource for Adoption and Implementation of Culturally and Linguistically Appropriate Services

Texas Office of Minority Health and Health Equity
Center for Elimination of Disproportionality and Disparities
CLASinTexas List-Serve Contact Information:
CLASinTexas@hhsc.state.tx.us
https://www.thinkculturalhealth.hhs.gov/clas/standards
(512) 380-4325

EL PASO FIRST Health Plans, inc.

Thank You!

Edgar Martinez

Director of Member Services

915-532-3778 ext. 1064

Juanita Ramirez

Member Services & Enrollment Supervisor

915-532-3778 ext. 1063

EL PASO FIRST Health Plans, inc.

Thank You for Attending Providers!

TEXAS STAR Your Health Plan ★ Your Choice | TEXAS Health and Human Services | CHIP | TEXAS Health and Human Services | EL PASO FIRST Health Plans, inc.