



# Medicaid BadgerCare Plus Provider Toolkit

This tool kit serves as a resource guide for our Medicaid BadgerCare Plus providers to include information regarding our services, claims support, and important contact information. Additional provider resources are also available on our website at [chorushealthplans.org](http://chorushealthplans.org).

Our provider manual will serve as a more comprehensive resource to include information regarding provider responsibilities, access standards, claims, benefits, prior authorization requirements, credentialing, and other plan components.

## **ABOUT CCHP**

Chorus Community Health Plans (CCHP), an affiliate of Children's Wisconsin, is an HMO dedicated to providing access to the highest quality healthcare and services to our members living in Wisconsin with the combined resources of Children's Wisconsin, Children's Community Services, Children's Specialty and Primary Clinics, as well as our community partners.

Chorus Community Health Plans (CCHP) is an HMO for Badger Care Plus that serves families, children, and childless adults living in 41 counties throughout Wisconsin.



Adams, Brown, Calumet, Columbia, Crawford, Dane, Dodge, Door, Eau Claire, Fond du Lac, Grant, Green, Green Lake, Iowa, Jefferson, Juneau, Kenosha, Kewaunee, Lafayette, Manitowoc, Marinette, Marquette, Menominee, Milwaukee, Oconto, Outagamie, Ozaukee, Portage, Racine, Richland, Rock, Sauk, Shawano, Sheboygan, Vernon, Walworth, Washington, Waukesha, Waupaca, Waushara, and Winnebago.

## **PROGRAMS AND SERVICES**

CCHP is responsible for providing all medically necessary covered services under Badger Care Plus. Some services may require a doctor's orders, a prior authorization, or a copayment. Refer to the Provider Manual for a complete list of included services. CCHP wants its members to receive the right care at the right time, in the right place. To help make this happen we offer outreach and education programs to support the providers in our network.



Our health management programs include:

- Asthma Resources
- Diabetes Resources
- Lead Testing Outreach
- Prenatal Care Coordination
- Tobacco cessation
- Nutrition Resources
- Behavior Health Resources
- Interpreter Services

For more information about our programs, call our Customer Service Center at 800-482-8010. We also offer a variety of handouts at no extra charge. Providers can choose from flyers, brochures, daily care logs and more.

### **Care4Kids**

Care4Kids is a Medicaid benefit that provides comprehensive healthcare to children in out-of-home care that addresses the unique health needs of these children. Children receive care from primary care physicians who are trained in needs of children who are placed out of home as well as a team of professionals who coordinate care for each child. The team consists of caseworkers, child welfare, healthcare professionals, out-of-home care providers, and the child's family. Refer to the provider manual for specific information on benefits and claims billing/reimbursement for this program.



Kenosha, Milwaukee, Ozaukee, Racine,  
Washington, and Waukesha Counties

### **PROVIDER DEMOGRAPHIC UPDATES**

CCHP provides a Provider Directory to our members to make sure they are receiving the most current information about their providers. Review your information in our Provider Directory on a regular basis to help ensure the accuracy of the directory information. This can include:

- Hours of Operation



- Provider Roster
- Panel Status
- Address
- Phone Number
- Information that could affect network status

If any of your information has changed or listed in error, make the appropriate changes by completing our [Provider Update Change Form](#). This form can be returned to our Provider Network Specialists at: [cchp-providerupdates@chorushealthplans.org](mailto:cchp-providerupdates@chorushealthplans.org).

## **CCHP PROVIDER PORTALS**

Accessing all of CCHP's Provider Portals is the key to utilizing our services. Our provider portals offer services such as submission of prior authorizations and a variety of claims related tasks.

- GuidingCare Prior Authorization Tool
- BadgerCare Plus Claims Look-up Tool
- BadgerCare Plus Claims Submission Tool
- BadgerCare Plus Claims Confirmation Tool

### *GuidingCare Prior Authorization Tool*

CCHP requires all network providers to submit their prior authorizations and notifications online through the GuidingCare Prior Authorization Tool portal. Prior authorizations must be obtained prior to services rendered. CCHP does not approve retro authorizations. You can include any clinical or supporting documentation through the portal. Our website provides helpful user guides on how to submit prior authorizations for specific services and provides a list of services that require prior authorizations.

Click [here](#) for more information.

View registration guide [here](#).

### *BadgerCare Plus Claims Look-up Tool*

The Claims Look-Up Tool is used to check the status of your claims and your appeals. You can also check eligibility and view Remittance Advice (RA) & Explanation of Benefits (EOB's).

View registration guide [here](#) and user guide [here](#).

### *BadgerCare Plus Claims Submission Tool*

The Claims Submission Portal is used when you need to manually enter in claims. This is needed if you are not able to send in a paper claim or do not have an electronic vendor to submit your claims electronically.

View user guide [here](#).



### BadgerCare Plus Claims Confirmation Tool

Before a provider can access the Claims Confirmation Portal, providers need to email the Provider Relations Representatives at:

[cchpproviderrelations@chorushealthplans.org](mailto:cchpproviderrelations@chorushealthplans.org).

You will need to provide the following information:

- Provider/Clinic Name and complete address
- Tax ID Number
- NPI Number
- Name and email address of requester

Once this information is received you will receive a separate email from our EDI team with your log in instructions. Our Provider Relations team will then send you the user guide with instructions on how to use the portal.

View user guide [here](#).

The Claims Confirmation Portal provides confirmation on all new claim submissions for network providers for every claim received by CCHP whether it is filed on paper or through an Electronic Claims Transmission (ECT). A receipt of confirmation is generated and available to the provider of service.

Providers who have access to the Claims Confirmation Portal can:

- Confirm all their claims were received by CCHP and were entered into the claims processing system whether submitted on paper or electronically.
- Receive an electronic report of rejected claims through this portal.

Providers who do not have access to the Claims Confirmation Portal will:

- Receive a printed letter listing the specific claim that didn't pass the initial editing process along with a reason explaining the rejection.
- A printed copy of the claim.

Depending on the rejection code, providers will need to make any necessary changes and resubmit the claim within the allotted time frame agreed upon in their contract.



## CLAIMS FILING

CCHP currently has an administrative services agreement with Dean Health Plan for customer service and claims. To help you get your claims processed as efficiently and quickly as possible, here are a few tips when submitting your claims.

- CCHP requires a prior authorization number if services require a prior authorization. Enter this authorization number in box 23 of the CMS 1500 claim form.
- When you submit a claim with an unlisted code, attach the medical records explaining this unlisted code on the claim. You will also need to list the description of service in the following fields:
  - Field SV202-7: Source 8371
  - Field SV101-7: Source 837P
  - Field 19: Source 1500
  - Field 80: Source UB-04
- All claims must have your providers NPI number and taxonomy codes on their claims. Review the CCHP NPI and Taxonomy Billing Guide: [Taxonomy Billing Requirement Guide](#) & [Taxonomy Tip Sheet](#).
- To submit a corrected claim, make sure to enter "Corrected Claim" in the appropriate box on a CMS 1500 or UB claim form. For further instructions, see our [Corrected Claim Submittal Guide](#).
- You may file claims electronically through a vendor of your choice.
  - The CCHP EDI Payer number is 39113
  - Paper claims claim be mailed to:

*Chorus Community Health Plan  
P.O. Box 56099  
Madison, WI 53705*

- Use the CCHP Appeal form to file your appeal. Review your contract for timely filing of claims appeals. CCHP requires all in network providers to submit your appeals through the *BadgerCare Plus Claims Look-Up Tool* to avoid any delays.
- Our provider relations representatives do not have access to the claims system and are unable to push a claim back for correction. Contact our Customer Services Center at **1-800-482-8010** for any claim's issues.



**ELECTRONIC CLAIM PAYMENTS (ePayments)**

InstaMed through Dean Health Plan (DHP) manages providers' electronic payments (ePayments) from various payers. InstaMed replaces paper-based claims payments.

If you are already signed up through InstaMed you do not need to register again, although each provider TIN and NPI needs to be registered with InstaMed to receive electronic payments. If a provider does not sign up for InstaMed a paper check and paper EOP will be sent. You can enroll online with InstaMed [here](#). Providers are encouraged to use the online registration solution, however providers can also contact InstaMed's network development team at 866-945-7990. Once registration is complete a representative from Instamed will call to verify your information.

Refer to these quick how-to videos [here](#) for further assistance on registration.

**CONTACT INFORMATION**

GuidingCare Prior Authorization Portal	1-877-227-1142 Option 2, option 2, option 1 <a href="mailto:cchp-portalreg@chorushealthplans.org">cchp-portalreg@chorushealthplans.org</a>
Claims Address	Chorus Community Health Plans P.O. Box 56099 Madison, WI 53705 EDI# 39113
Credentialing	<a href="mailto:cchp-credentialing@chorushealthplans.org">cchp-credentialing@chorushealthplans.org</a>
Customer Service <i>Eligibility, Benefits, &amp; General Claim Questions</i>	800-482-8010
Dental Services	414-389-9870
Health Management	414-266-3173
Interpreter Services	414-607-8766
Pharmacy	<a href="http://forwardhealth.wi.gov">forwardhealth.wi.gov</a>
Prior Authorizations	414-266-4155
Provider Appeals	Appeal Status: <a href="mailto:cchpproviderappeals@chorushealthplans.org">cchpproviderappeals@chorushealthplans.org</a>
Provider Contracting	<a href="mailto:cchp-contracting@chorushealthplans.org">cchp-contracting@chorushealthplans.org</a>
Provider Demographic Updates	<a href="mailto:cchp-providerupdates@chorushealthplans.org">cchp-providerupdates@chorushealthplans.org</a>
Provider Relations Representatives	<a href="mailto:cchpproviderrelations@chorushealthplans.org">cchpproviderrelations@chorushealthplans.org</a>