

HealthChoice

HealthChoice Network News Spring 2023

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Spring 2023

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News

Faxed certification requests are no longer accepted

As previously communicated in the Network News, as of Jan. 1, 2023, HealthChoice no longer accepts faxed certification requests and existing fax numbers for HCMU have been decommissioned. All certification requests must be entered through the [provider portal](#).

Through the portal, responses and updates to your certification requests are quicker, and certification requests are more efficient than filling out the forms previously used.

If you have questions or need assistance with the portal, call the Customer Care team at toll-free 800-323-4314. TTY users call 711.

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Provider appeals

Medical and dental providers now can file appeals online through the [provider portal](#). Visit our Policies and Guidelines for step-by-step instructions and further information on appeals.

For questions or additional information, call the Customer Care team at 800-323-4314.

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Network Management contact information update

To reach EGID Network Management, call 405-717-8790 or toll-free 800-804-2642. TTY users call 711. The additional phone number 405-717-8860 is no longer available.

Additionally, the fax number 405-717-8702 is no longer active. If you need to submit a fax, please use 405-717-8977 or email documents to EGID.NetworkManagement@omes.ok.gov.

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Billing with the rendering provider

Under the terms of the HealthChoice contracts, it is our intent to reimburse the rendering provider for their services. If the rendering provider is eligible for contracting, that provider should bill for the services. This includes physician assistants, registered behavioral technicians, counselors, nurse practitioners, etc. This information will ensure that the claims administrator processes the claim with the appropriate benefits according to the rendering provider's network status.

For questions, call EGID Network Management at 405-717-8790 or toll-free 844-804-2642. TTY users call 711.

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Fee schedule updates

Future fee schedule updates for services by HealthChoice network providers are scheduled for:

Annual Fee Schedule Releases	Jan. 1	April 1	July 1	Oct. 1
Anesthesia (ASA)	Comp			
ASC and ASC Implants	A/C/D	Comp	A/C/D	A/C/D
Bariatric Surgery - Inpatient	Comp	A/C/D	A/C/D	A/C/D
Bariatric Surgery - Outpatient	Comp	A/C/D	A/C/D	A/C/D
Certification Requirements	Comp	Comp	Comp	Comp
CPT	A/C/D	Comp	A/C/D	A/C/D
Dental (ADA)	Comp	A/C/D	A/C/D	A/C/D
Diabetes Prevention Program (DPP)	Comp			
Endodontic	Comp	A/C/D	A/C/D	A/C/D
HCPCS	A/C/D	Comp	A/C/D	A/C/D
MS-DRG				Comp
MS-DRG LTCH				Comp
NDC	Comp	Comp	Comp	Comp
Non-CMS Certified Facility	Comp	Comp	Comp	Comp
Outpatient	Comp	Comp	Comp	Comp
Outpatient Revenue	Comp	A/C/D	A/C/D	A/C/D
Preventive Services	Comp	A/C/D	A/C/D	A/C/D
Select Inpatient (MS-DRG)	A/C/D	A/C/D	A/C/D	A/C/D
Select Outpatient/ASC	A/C/D	A/C/D	A/C/D	A/C/D

*Comp =Comprehensive; A/C/D = Adds, changes, deletes and other necessary updates

As a reminder, national medical and dental associations may change, add, correct or delete billing codes throughout the year. When that occurs, EGID reviews the modifications as quickly as possible and makes any necessary updates. Additionally, EGID performs fee schedule updates on an ad hoc basis when necessary.

The EGID tiers were created in part to help support the continued existence and financial viability of truly rural hospitals. EGID's tier designation process is intended to only recognize a rural reimbursement methodology if the urban or rural status is based on the ZIP code of the hospital and the status of that ZIP code in the U.S. Census Bureau's metropolitan core-based statistical area.

Inpatient and outpatient tier designations and facility urban/rural designations are updated annually on Oct. 1. These designations are determined by the most current Centers for Medicare & Medicaid Services fiscal year inpatient prospective payment system impact file or the facility's ZIP code, included in the U.S. Census Bureau's metropolitan core-based statistical area. On Jan. 1, the urban/rural indicators are updated based on the most recent CMS ZIP code to carrier locality file for all facilities that are not hospitals.

For the most part, the applicable urban tier status is based on the most current CMS fiscal year inpatient prospective payment system impact file for network providers, unless the ZIP code of its physical location is included in the U.S. Census Bureau's metropolitan core-based statistical area.

Inpatient and outpatient tier designations are defined as:

- Tier 1 – Network urban facilities with greater than 300 beds.
- Tier 2 – All other urban and non-network facilities.
- Tier 3 – Critical access hospitals, sole community hospitals, and Indian, military and VA facilities.
- Tier 4 – All other network rural facilities.

Following each quarterly update of the HealthChoice fee schedule, outpatient rates for the procedures covered under the program will become fully phased in during the next quarterly update.

Fee schedule updates are reported in each quarterly issue of the Network News. If you need specific codes and allowable fees affected by these updates, please [view or download the latest fee schedule addendum](#). The fee schedule has not been publicly disclosed and is deemed confidential pursuant to 51 O.S., and should not be disseminated, distributed or copied to persons not authorized to receive the information. If you have questions or need additional information, please contact EGID Network Management.

For more information, email [EGID Network Management](#) or call 405-717-8790 or toll-free 844-804-2642. TTY

users call 711.

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HealthChoice contact information

Network Management

405-717-8790
Toll-free 844-804-2642
EGID.NetworkManagement@omes.ok.gov
HealthChoiceOK.com

Medical and Dental Claims, Eligibility, Benefits and Certifications

Toll-free 800-323-4314
TTY 711
Payer ID: 71064
[Provider portal](#)

New Claims, Correspondence and Medical Records

HealthChoice
P.O. Box 30511
Salt Lake City, UT 84130-0511

Pre-Service Appeals

HealthChoice
P.O. Box 400046
San Antonio, TX 78229

Post-Service Appeals

P.O. Box 30546
Salt Lake City, UT 84130-0546

Health Care Management

405-717-8879
Toll-free 800-543-6044, ext. 8879

Pharmacy Benefit Administrator: CVS/caremark

Prior Authorization toll-free 800-294-5979
Customer Care toll-free 877-720-9375
caremark.com

SilverScript (Medicare Part D)

Prior Authorization toll-free 855-344-0930
Customer Care toll-free 866-275-5253
healthchoice.silverscript.com

Optum Pay

Toll-free 877-620-6194
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