

DEPARTMENT OF VETERANS AFFAIRS (VA) BILLING FACT SHEET FOR VA COMMUNITY CARE PROGRAMS

This fact sheet is a tool to help community providers delivering care through the Veterans Choice Program (VCP), VCP Provider Agreements, Patient-Centered Community Care (PC3), or Traditional VA Community Care submit claims and get paid faster. VA is working with Congress to further simplify and streamline the process. Until we get there, we will continue to provide tools like this fact sheet to help community providers and the Veterans they serve navigate VA Community Care.

WHICH PROGRAM?

Prior to receipt of care, you will receive a detailed authorization from either VA or one of VA's contractors (Health Net or TriWest) specifying which VA Community Care Program the specific episode of care is under. An authorization gives the community care provider the authority to provide health care to the Veteran and provides assurance of payment for those services.

Veterans Choice Program (VCP)	VCP, administered by VA's contractors, provides primary care, specialty care, and inpatient medical services to eligible Veterans in circumstance where: (Appendix A)		
	 VA services are not available within the appropriate timeframe A Veteran faces an unusual or excessive travel burden A Veteran has to travel more than 40 miles to a VA primary physician 		
Patient-Centered Community Care (PC3)	PC3, administered by VA's contractors, is a nationwide program that provides Veterans access to medical care when local VA medical facilities cannot due to: (Appendix A)		
	 ✓ VA services are not available within the appropriate timeframe ✓ Geographic inaccessibility or other factors 		
VCP Provider Agreements	VCP Provider Agreements, administered by local VA facilities, have to meet the VCP criteria above and one of the following circumstances: (Appendix B)		
	 ✓ VCP contractors are unable to schedule ✓ Specific services are not available from the contract network 		
Traditional VA Community Care	Traditional VA Community Care, administered by local VA facilities, is a direct authorization with community providers to provide health services to Veterans. (Appendix C)		

HOW TO FILE A CLAIM?

VETERANS CHOICE PROGRAM AND PATIENT-CENTERED COMMUNITY CARE

Where to File a Claim Electronically?			
Health Net Visit <u>http://www.changehealthcare.com/solutions/providers</u> to register with Change Healthcare. Payer Name: Health Net – VA Patient-Centered Community Care. Payer ID: (68021)	TriWest Step 1: Upload medical documentation to provider portal at www.TriWest.com/provider Step 2: Set up an EDI to submit electronic claims by calling Wisconsin Physicians Service (WPS) at 1-800-782-2680 and select Option 2 to register.		
Where to Mail a Paper Claim?			
Health Net VETERANS CHOICE PROGRAM – VACAA PO Box 2748 Virginia Beach, VA 23450 PATIENT-CENTERED COMMUNITY CARE (PC3) PO Box 9110 Virginia Beach, VA 23452	TriWest VETERANS CHOICE PROGRAM AND PC3 WPS-VAPCCC PO Box 7926 Madison, WI 53707-7926 Note: Must use form CMS 1500 or UB04.		
Where Can I Find Detailed Instructions?			
Health Net Call 1-866-606-8198 Open 6:00am–7:00pm EST, Monday through Friday, excluding federal holidays OR Visit <u>Health Net claims submission provider page</u>	TriWest Call 1-855-722-2838 Open 8:00am–10:00pm EST, Monday through Friday, excluding federal holidays OR Visit <u>TriWest Claims and Reimbursement Quick Reference Guide</u>		



VCP PROVIDER AGREEMENTS AND TRADITIONAL VA COMMUNITY CARE

Where to File A Claim Electronically?

To register for Change Healthcare' EDI visit http://www.emdeon.com/contactform/ or Call 1-877-363-3666

While registering you will need the VA Fee Program payer IDs which include:

- 12115 for submission of medical claims
- 12116 for submission of dental claims
- 00231 for submission of any inquiry transaction

Where to Mail a Paper Claim?

Submitting claims electronically may help community providers receive payment faster and reduce administrative costs.

If you are unable to file a claim electronically, please complete the appropriate form (original CMS 1500 and/or CMS 1450 (UB-04) and provide the codes for the treatment rendered just as you would when completing a Medicare claim. Contact the facility indicated in the authorization for further instruction on where to mail paper submissions.

For Detailed Instructions

For information on authorizations, call the number indicated on your authorization letter/form.

OR

For information on claims payments, visit <u>http://www.va.gov/PURCHASEDCARE/programs/providerinfo/provider_info_claimsPay.asp</u>.

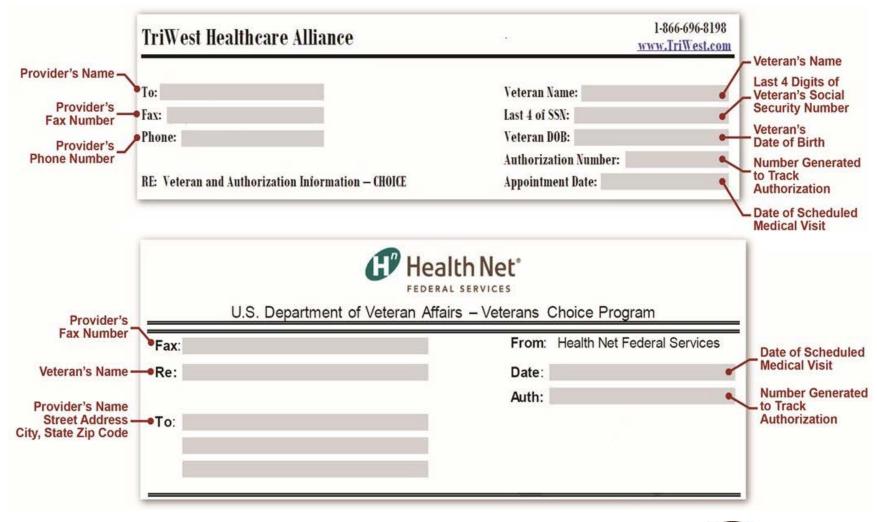
To Contact Us

Find and contact your local medical center, visit http://www.va.gov/directory/guide/division.asp?dnum=1



AUTHORIZATION FORMS

APPENDIX A: VCP/PC3 AUTHORIZATION FORMS





Veterans Health Administration

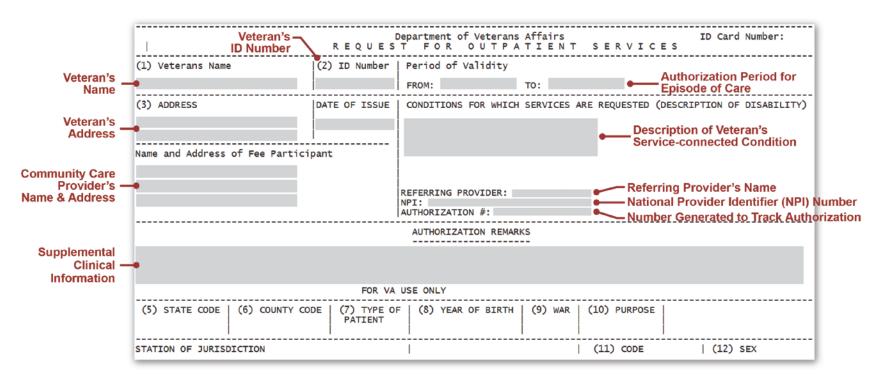


APPENDIX B: VCP PROVIDER AGREEMENT AUTHORIZATION FORM





APPENDIX C: TRADITIONAL VA COMMUNITY CARE AUTHORIZATION FORM



Outpatient Care VA Form 10-7079





Inpatient Care VA Form 10-7078

