

Dear Community HealthChoices Provider,

All billing, rendering and service location provider information will be subject to up front editing against the PROMISe™ system. If PA Health & Wellness is unable to match the information on your claims to an active PROMISe™ enrollment, the claims will be rejected and a notice sent to the submitter.

This is in accordance with Pennsylvania Department of Human Services Medical Assistance Bulletin 99-18-11:

[http://www.dhs.pa.gov/cs/groups/webcontent/documents/bulletin\\_admin/c\\_284208.pdf](http://www.dhs.pa.gov/cs/groups/webcontent/documents/bulletin_admin/c_284208.pdf)

**Please follow these requirements for your claims:**

- 1. Include your “Other Provider ID” = 13-Digit PROMISe™ ID as outlined below.**
- 2. Review and update all enrolled PROMISe™ locations in your PROMISe™ account.**

CMS 1500 (2/12)		
<b>17a</b>	<b>ID NUMBER OF REFERRING PHYSICIAN</b>	Required if field 17 is completed. Use G2 qualifier for 13-Digit PROMISe™ ID.
<b>24 J Shaded</b>	<b>NON-NPI PROVIDER ID#</b>	Enter the 13-digit PROMISe™ ID registered for the Rendering Service Provider and location.
<b>32b</b>	<b>OTHER PROVIDER ID</b>	REQUIRED if the location where services were rendered is different from the billing address listed in field 33.
<b>33b</b>	<b>GROUP BILLING OTHER ID</b>	Enter the 13-Digit PROMISe™ ID for Billing Provider registered location
UB-04/CMS 1450 (2/12)		
<b>76</b>	<b>ATTENDING PHYSICIAN</b>	G2 – Provider 13-Digit PROMISe™ ID
<b>77</b>	<b>OPERATING PHYSICIAN</b>	G2 – Provider 13-Digit PROMISe™ ID
<b>78 &amp; 79</b>	<b>OTHER PHYSICIAN</b>	G2 – Provider 13-Digit PROMISe™ ID

**Claims with missing or invalid required field information will be rejected or denied.**

PA Health & Wellness will match the information on the claim with the information registered in the State of Pennsylvania’s PROMISe™ system. PA Health & Wellness will verify that each provider is enrolled using the 13-digit PROMISe™ ID number from your claim (see Billing Manual for requirements). If the claim is missing this required data, we will use the NPI number, and when appropriate, the taxonomy and the provider’s nine-digit zip code (Zip+4) on the claim, to identify the provider’s PROMISe™ ID number and service location enrollment.



**What if I need to make an update or change to my billing information?**

Please notify PA Health & Wellness 30 days in advance of changes to your billing information. You will need to submit this information to us by using a W-9 form. Any changes to a Provider's TIN and/or address **cannot be accepted** when submitted via a claim form. It is important that your **billing information is accurate and up-to-date** in our files so that you receive timely payment.

**Contact Us!** Provider Relations Representatives can assist with updating your billing information. If you have any additional questions, please contact our Provider Services team at (844) 626-6813. You can also reach us at [PHWProviderRelations@PAHealthWellness.com](mailto:PHWProviderRelations@PAHealthWellness.com).

We look forward to working with you and serving Community HealthChoices Participants in Pennsylvania.

Sincerely,

A handwritten signature in black ink that reads "Dennis P. Moody".

Dennis P. Moody  
Vice President, Network and Strategic Initiatives  
PA Health & Wellness

**Thank you for partnering with PA Health & Wellness.**