

06/19/2020

Important Announcement - Update

Commercial Health Plan Integration

Scott and White Health Plan (SWHP) is transitioning to a new claims system in a phased approach that will affect Texas A&M (TAMU) and Health Plus members starting **7/01/2020**. All claims for date of service 7/01/2020 and after for TAMU and Health Plus members will be processed in the new claims system.

Administrative changes, starting 7/1/2020:

Paper Claims Filing

For dates of service 07/01/2020 and after, paper claims should be submitted to: Scott and White Health Plan PO Box 211342
Eagan, MN 55121-0800

• <u>Electronic Claims</u>

The Availity Payor ID will be 94999.

Electronic Funds Transfer (EFT)

New registration will be handled via Change Healthcare. Providers currently enrolled in EFT prior to 07/01/20 will **not** have to re-register with Change Healthcare.

Important Phone Numbers

The Health Services Department phone number for prior authorization requests is 866-384-3488. This may be a change for some providers.

Customer Service Number

The new Customer Service phone number for inquiries regarding TAMU and Health Plus members is 844-633-5325. Members will receive new ID cards that show the new phone number.

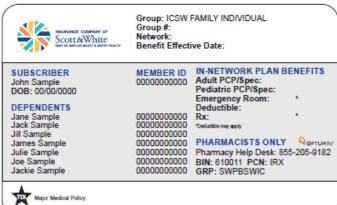
Provider Portals

The new provider portal address will be swhpprovider.firstcare.com. Members will receive new ID cards that show the new provider portal address. For members whose claims are not yet being processed in the new claims system, please continue to use portal.swhp.org/providerportal. You will receive notice as groups transition to the new claims system.

Provider Relations Contacts

Your Provider Relations Team can be located here: https://swhp.org/Portals/0/Files/Forms/ProviderNews/SWHP-Provider-Relations-Representative-Territory-Map.pdf

Sample TAMU ID Cards



00000000000

Scott&White

SUBSCRIBER

DOB: 00/00/0000

DEPENDENTS

Jane Sample

Jack Sample

Julie Sample

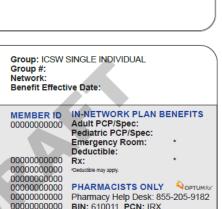
Joe Sample

Jill Sample James Sample

Jackie Sample

TDI Individual

John Sample



GRP: SWPBSWIC

FOR PROVIDERS

Electronic Claims: Availity: 94999

Paper Claims: Scott and White Health Plan PO Box 211342

Eagan, MN 55121 Prior Authorization: Visit the provider portal Fax: 800-626-3042

Phone: 866-384-3488 Provider Portal: swhpprovider.firstcare.com

Card Issue Date: 07/01/2020

FOR MEMBERS

Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed.

Important Information:

- In a medical emergency, call 9-1-1 or go to the nearest emergency facility
- Customer Service: 844-633-5325 (TTY/TDD: 7-1-1)
 24/7 Nurse Line: 877-505-7947
 Self-Service Portal: swhpmember.firstcare.com

- To avoid out-of-network costs and provider balance billing, find a provider at swhp.org

CUSTOMER SERVICE: 844-633-5325 - swhp.org

FOR PROVIDERS

Electronic Claims: Availity: 94999

Paper Claims: Scott and White

Health Plan PO Box 211342 Eagan, MN 55121

Prior Authorization:

Visit the provider portal Fax: 800-626-3042 Phone: 866-384-3488

Provider Portal: swhpprovider.firstcare.com

Card Issue Date: 07/01/2020

FOR MEMBERS

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Important Information:

- In a medical emergency, call 9-1-1 or go to the nearest emergency facility
- Customer Service: 844-633-5325 (TTY/TDD: 7-1-1)
- · 24/7 Nurse Line: 877-505-7947
- Self-Service Portal: swhpmember.firstcare.com
 To avoid out-of-network costs and provider balance
- billing, find a provider at swhp.org

CUSTOMER SERVICE: 844-633-5325 - swhp.org

Sample Health Plus ID Cards



Group: Standard HMO Rx Family P1 Ind

Network: Benefit Effective Date:

SUBSCRIBER John Sample DOB: 00/00/0000

DEPENDENTS Jane Sample Jack Sample Jill Sample 00000000000 James Sample Julie Sample 00000000000 Joe Sample 00000000000 Jackie Sample

IN-NETWORK PLAN BENEFITS MEMBER ID Adult PCP/Spec: Pediatric PCP/Spec: 00000000000

Emergency Room: Deductible: 00000000000

00000000000 PHARMACISTS ONLY Pharmacy Help Desk: 855-205-9182

BIN: 610011 PCN: IRX 00000000000 GRP: SWPBSWHP



HEALTH PLAN

Network: Benefit Effective Date:

SUBSCRIBER John Sample DOB: 00/00/0000

Scott &White

DEPENDENTS Jane Sample Jack Sample Jill Sample James Sample Julie Sample Joe Sample

MEMBER ID 00000000000

Group: Standard HMO NoRx Family P1 Ind Group #:

IN-NETWORK PLAN BENEFITS

Adult PCP/Spec: Pediatric PCP/Spec: Emergency Room: Deductible



Jackie Sample

FOR PROVIDERS

Electronic Claims: Availity: 94999

Paper Claims: Scott and White Health Plan PO Box 211342 Eagan, MN 55121

Prior Authorization: Visit the provider portal Phone: 866-384-3488

Provider Portal: swhpprovider.firstcare.com

Card Issue Date: 07/01/2020

FOR MEMBERS

Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed.

Important Information:

- In a medical emergency, call 9-1-1 or go to the nearest emergency facility.

 • Customer Service: 844-633-5325 (TTY/TDD: 7-1-1)

 • 24/7 Nurse Line: 877-505-7947

- Self-Service Portal: swhpmember.firstcare.com
- · To avoid out-of-network costs and provider balance billing, find a provider at swhp.org

CUSTOMER SERVICE: 844-633-5325 - swhp.org

FOR PROVIDERS

Electronic Claims: Availity: 94999

Paper Claims: Scott and White Health Plan PO Box 211342 Eagan, MN 55121

Prior Authorization: Visit the provider portal Fax: 800-626-3042 Phone: 866-384-3488

Provider Portal: swhpprovider.firstcare.com

Card Issue Date: 07/01/2020

FOR MEMBERS

Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed

Important Information:

- In a medical emergency, call 9-1-1 or go to the nearest
- emergency facility.
- Customer Service: 844-633-5325 (TTY/TDD: 7-1-1) 24/7 Nurse Line: 800-724-7037
- Self-Service Portal: swhpmember.firstcare.com
- . To avoid out-of-network costs and provider balance
- billing, find a provider at swhp.org

CUSTOMER SERVICE: 844-633-5325 - swhp.org



Group: Standard HMO NoRx Single P1 Ind Group #:

Network: Benefit Effective Date:

SUBSCRIBER John Sample DOB: 00/00/0000

DEPENDENTS Jane Sample Jack Sample Jill Sample James Sample Julie Sample Joe Sample Jackie Sample

MEMBER ID IN-NETWORK PLAN BENEFITS 000000000000 Adult PCP/Spec: Pediatric PCP/Spec:

Emergency Room: Deductible: 0000000000 00000000000 000000000000

00000000000 00000000000 00000000000 FOR PROVIDERS

Electronic Claims: Availity: 94999

Paper Claims: Scott and White Health Plan PO Box 211342 Eagan, MN 55121

Prior Authorization: Visit the provider portal Fax: 800-626-3042 Phone: 866-384-3488

Provider Portal: swhpprovider.firstcare.com Card Issue Date: 4 07/01/2020

FOR PROVIDERS

Electronic Claims:

Availity: 94999

Paper Claims: Scott and White

PO Box 211342

Eagan, MN 55121

Fax: 800-626-3042

Provider Portal:

Card Issue Date:

07/01/2020

Prior Authorization:

Visit the provider portal

Phone: 866-384-3488

swhpprovider.firstcare.com

Health Plan

FOR MEMBERS

Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed.

- Important Information:
 In a medical emergency, call 9-1-1 or go to the nearest emergency facility.

 Customer Service: 844-633-5325 (TTY/TDD: 7-1-1)
- 24/7 Nurse Line: 877-505-7947

CUSTOMER SERVICE: 844-633-5325 - swhp.org

 Self-Service Portal: swhpmember.firstcare.com
 To avoid out-of-network costs and provider balance billing, find a provider at swhp.org

IDI Individual



Group: Standard HMO Rx Single P1 Ind

Group #: Network:

Benefit Effective Date:

SUBSCRIBER DOB: 00/00/0000

DEPENDENTS

Jane Sample Jack Sample Jill Sample James Sample Julie Sample Joe Sample Jackie Sample

00000000000 Adult PCP/Spec:

00000000000 Rx: 00000000000 00000000000 00000000000 00000000000

MEMBER ID IN-NETWORK PLAN BENEFITS

Pediatric PCP/Spec: Emergency Room: Deductible:

GRP: SWPBSWHP

PHARMACISTS ONLY OPTUMRS
Pharmacy Help Desk: 855-205-9182 BIN: 610011 PCN: IRX

Individual

FOR MEMBERS

Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed.

Important Information:

- In a medical emergency, call 9-1-1 or go to the nearest emergency facility. Customer Service: 844-633-5325 (TTY/TDD: 7-1-1)
- 24/7 Nurse Line: 877-505-7947
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- · To avoid out-of-network costs and provider balance billing, find a provider at swhp.org

CUSTOMER SERVICE: 844-633-5325 - swhp.org