

JHHC Converting to New Claims System

Effective Date (Tentative): Aug. 1, 2022 and Oct. 1, 2022

Health Plans Affected: Priority Partners, Johns Hopkins Employer Health Programs (EHP), and Hopkins ElderPlus

Type of Change: Claims Submission and Management System

Explanation of Change:

In an effort to transform and improve the efficiency of our processes, JHHC will convert to Facets, an industry standard claims submission and management system starting in Q3 of 2022. We expect the new system will be operational Aug. 1, 2022 for Priority Partners and on Oct. 1, 2022 for Johns Hopkins Employer Health Programs (EHP) and Hopkins ElderPlus. The Facets system will replace the MC400 system, and JHHC will be partnering with Cognizant for the administration of these claims.

What will change:

- If a provider is not submitting claims electronically, claims will only be accepted through the [HealthLINK](#) portal or through the postal system. JHHC will no longer accept claims via fax or email.
 - If mailing in claims, please use separate envelopes and mail to the unique address for each health plan, new claims address for Priority Partners, EHP, Hopkins ElderPlus noted below:
 - **Priority Partners:** P.O. Box 4228, Scranton, PA 18505
 - **EHP:** P.O. Box 4227, Scranton, PA 18505
 - **Hopkins ElderPlus:** P.O. Box 4077, Scranton, PA 18505
 - Do not submit claims for multiple health plans in the same envelope.
- Mailing address for paper submission of payment disputes:
 - **Priority Partners:** P.O. Box 4228, Scranton, PA 18505
 - **EHP:** P.O. Box 4227, Scranton, PA 18505
- Claims editing system will change from McKesson ClaimCheck to Optum CES.
- Member ID card changes
 - Member ID terminology will match Facets terminology.
 - Member ID cards will be updated with the new claims mailing address and Customer Service phone numbers.
 - PCP designation will display the individual provider, not the group/practice location.

What will remain the same:

- Electronic submission of claims, payor IDs for EDI claims submissions
- Submission of claims through the HealthLINK portal
- Existing process, address or fax number for electronic or paper submission of clinical appeals

- Web portal/electronic submission of payment disputes and clinical appeals through HealthLink will follow the same process for providers and be routed appropriately internally
- Fax number for paper submission of Priority Partners and EHP payment disputes

During the Transition:

Claim Submissions - claims will need to be split based on date of service (DOS):

- **EDI Submissions:**
 - No change to payor IDs
 - Availity will handle the split of claims based on DOS
 - Provider will receive two remits – one for DOS prior to cutover and one for DOS after cutover
- **Paper Submissions:**
 - Inpatient Claims
 - If admit date is prior to cutover, submit claims to current claims PO Box
 - If admit date is after cutover, submit claims to new PO Box
 - Outpatient/Professional Claims
 - DOS prior to cutover – submit claims to current claims PO Box
 - DOS after cutover – submit claims to new PO Box
 - Providers will receive two remits - one for DOS prior to cutover and one for DOS after cutover

Payment Disputes:

- **Paper Submissions:**
 - DOS prior to cutover – submit claims to current PO Box/portal
 - DOS after cutover – submit claims to new PO Box
- **Web Portal Submissions**
 - No change to process – submissions will be routed internally to Cognizant for processing if DOS is after cutover

Please be sure to make note of the new mailing addresses for paper claims and paper submission of payment disputes to ensure claims and payment disputes can be processed timely.