Paper Submission Notification



Dear Provider:

Thank you for being a valued provider. As we've previously shared with you, Centene, which owns Peach State Health Plan, has purchased WellCare. Effective May 1, 2021, the integration of Peach State Health Plan and WellCare will be complete. If you currently submit paper submissions, we encourage you to submit electronically if you have the capability to do so. We will make every effort to get your professional (837P) and institutional (837I) electronic submissions to the correct payer. Paper submissions will not be able to be sent on your behalf between payers.

Explanation of Payments (EOP) are not necessary as paper attachments. We accept secondary claims electronically. The EOP information can be sent inside the institutional 837I or professional 837P electronic claim submission. Please see the detailed Coordination of Benefit (COB) guidance https://www.wellcare.com/Wellcare/Georgia/Providers/Medicaid/Claims/COB. Scroll to bottom of the page for Helpful Documents.

Note: To avoid paper submission rejections, you must mail to the appropriate payer's P.O. Box based on date of service guidance provided below.

Misdirected Paper Rejection Description: This is when your paper claim submission is incorrectly addressed to reach the correct payer's PO Box address. Please refer to the paper mailing guidance or to avoid further paper submission rejections, please submit electronically with the proper payer id.

DATE OF SERVICE GUIDANCE

Date of Service	Health Plan Name	Claim Type	Paper Claim Submission Mailing Address	Electronic Claim Submission Payer IDs
Before 05/01/2021	WellCare of Georgia, Inc. (Medicaid including PeachCare for Kids Planning for Healthy Babies)	Professional and Institutional	WellCare Health Plans Attn: Claims Department P.O. Box 31224 Tampa, FL 33631-3224	14163
On or after 05/01/2021	Peach State Health Plan (Medicaid including PeachCare for Kids Planning for Healthy Babies)	Medical Professional and Institutional	Peach State Health Plan Attn: Claims Department P.O. Box 3030 Farmington, MO 63640-3812	68069
On or after 05/01/2021	Peach State Health Plan (Medicaid including PeachCare for Kids Planning for Healthy Babies)	Behavioral Health Professional and Institutional	Peach State Health Plan Attn: Claims Department P.O. Box 6700 Farmington, MO 63640-3816	68068

INSTRUCTIONS ON HOW TO DETERMINE CORRECT PAYER FOR DATE OF SERVICE

- ► If billing a professional submission with services spanning the cut-over date (including dates of service before and after 05/01/2021), to avoid rejection please split the services into two separate claim submissions for the guidance outlined below:
 - » Professional (837P) service date for all claim lines is located in Loop 2400 (DTP*472*from-through~)
 - » FL-24a unshaded area on the CMS1500 02/12 paper form.
- ► If billing a professional or an outpatient bill type institutional submission, please use the **earliest From Date** in the claim submission for the guidance outlined below:
 - » Professional (837P) earliest service date in all claim lines is located in Loop 2400 (DTP*472*from-through~)
 - » FL-24a unshaded area on the CMS1500 02/12 paper form.
 - » Institutional statement date is located in Loop 2300 (DTP*434*from-through~)
 - » FL-06 of the UB-04 CMS-1450 paper form.
- ► If billing an institutional inpatient bill type submission, please use the From Date Institutional Statement Date in the claim submission for the guidance outlined below.
 - » Institutional statement date is located in Loop 2300 (DTP*434*from-through~)
 - » FL-06 of the UB-04 CMS-1450 paper form.

To assist you in upgrading your submission method from paper to electronic, please see the free EDI options and helpful provider resources available, included toward the bottom of the first page regarding electronic submissions under "HOW TO REGISTER FOR ELECTRONIC CLAIM SUBMISSIONS" section.

Sincerely,