



10/1/22 RBHA Implementation & 12/1/22 ACC System Migration What You Need to Know!

August 17, 2022

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Dear Care1st Providers, Office Staff and Billing Staff:

We have changes underway that we want to share with you. We will communicate these changes multiple times prior to the effective date. The following pages outline specifics and timelines.

Care1st currently administers physical and behavioral health services to approximately 85,000 AHCCCS Complete Care (ACC) members in the Northern Geographic Services Area (GSA). The Northern GSA includes Mohave, Coconino, Navajo, Apache, and Yavapai Counties.

Effective 10/1/22, we will begin serving as the Regional Behavioral Health Authority (RBHA) in the Northern GSA. We'll onboard approximately 6,000 AHCCCS RBHA members in the Northern GSA. These members will transition from the current RBHA, Health Choice, to Care1st. RBHA responsibilities include administering integrated physical and behavioral services to members living with serious mental illness (SMI), administration of the crisis system, and grant administration activities.

System Platform

Care1st will implement and operate the new RBHA business on Centene systems. These systems are different from the systems currently used for our existing ACC business. This will result in changes to how you work with Care1st. A few examples include:

- Different Payor ID for electronic claims submission / Different address for paper claims submission
- Different process for claim remittance advices
- Variety of new forms
- Different public facing website and provider portal (with enhanced capabilities)

We will migrate our ACC business to the same platform as the RBHA for dates of service 12/1/22 and after.

- **RBHA members dates of service on and after 10/1/22:** Northern GSA RBHA members will be transitioned onto the claim, prior auth and web portal platform of our parent company, Centene
 - This will result in *use of a different* claim submission address, payor ID, prior auth submission form and process, web portal, etc. than what you currently use for existing Care1st ACC members
 - Members will receive a new ID card from Care1st reflecting this information (see example below)
- **Existing Care1st ACC members dates of service through 11/30/22:** Continue to follow the current claim submission, prior auth submission and other existing processes used today. No change but different than what you will follow for the RBHA members until 12/1/22.
- **Existing Care1st ACC members dates of service on and after 12/1/22:** Care1st ACC members will be moved from the existing Care1st platform to the platform of our parent company, Centene. Claims submission, prior auth submission, etc. will then match the processes used for RBHA members
 - Members will receive a new Care1st ID card reflecting this change

Please review the details that follow and contact us at the numbers below if you have questions or would like talk to through anything we outline in this or subsequent communications.

Thank you!

Care1st Network Management

Ph 602.778.1800/866.560.4042 (Options in order: 5, 7)

Fax 602.778.1875/E-mail SM_AZ_PNO@Care1stAZ.com

Visit our website at www.care1staz.com

Looking for your assigned Provider Network Rep? On our website go to Providers > Provider Rep Contact Info

Claim Submission

Date of Service (DOS)	Line of Business	Claim Type	EDI Clearinghouse Payer ID	Paper Claims Mailing Address
DOS on or after 10/1/22 NEW	RBHA	Professional and Institutional	68069	Care1st Health Plan PO Box 8070 Farmington, MO 63640-8070
DOS through 11/30/22 NO CHANGE	ACC	Professional and Institutional	57116	Care1st Health Plan Claims Department PO Box 31224 Tampa, FL 33631
DOS on or after 12/1/22 CHANGE	ACC	Professional and Institutional	68069	Care1st Health Plan PO Box 8070 Farmington, MO 63640-8070

Additional Claim Submission Instructions - RBHA DOS ON AND AFTER 10/1/2022

RBHA Professional Services

- When billing a professional service with dates of service (DOS) spanning before and after 10/1/22, to avoid eligibility rejections, please split the services into two separate claim submissions.
- Also, if the 1st DOS on claim is prior to 10/1/22 the claim will be rejected, so please make sure the 1st DOS listed is 10/01/22 or after.
- Submit DOS prior to 10/1/22 to Health Choice and DOS 10/1/22 on and after to Care1st:
 - Professional (837P) service date for all claim lines is in Loop 2400 (DTP*472*from-through~) or in FL-24a the unshaded area on the CMS150002/12 paper form.

RBHA Institutional Outpatient Bill Type and Non-DRG Services

- When billing dates of service spanning before and after 10/1/22, to avoid eligibility rejections, please split the services into two separate claim submissions.
- Also, if the 1st DOS on the claim is prior to 10/1/22, the claim will be rejected; please make sure the 1st DOS listed is 10/01/2022 or after.
- When billing services with an outpatient bill type or non-DRG institutional services, please use the earliest "From Date" in the claim submission.
 - Institutional statement earliest service date is in Loop 2300 (DTP*434*from-through~) or in FL-06 of the UB-04 CMS-1450 paper form.

RBHA Institutional Inpatient DRG Services

- When billing institutional inpatient DRG services please use the 'Through Date Institutional' statement date located in Loop 2300 (DTP*434*from-through~) or FL-06 of the UB-04 CMS-1450 paper form.
- Should the admission date and discharge date span the 10/1/22 cutover date, AHCCCS requires that the "From Date" be sent as the subscriber's earliest effective date with the payer responsible for the claim based on the date of discharge.
- Also, if the 1st DOS on the claim is prior to 10/1/22, the claim will reject; please make sure the 1st DOS listed is 10/1/22 or after.

Additional Claim Instructions – ACC DOS THROUGH 11/30/22

NO CHANGE

Additional Claim Instructions – ACC DOS ON AND AFTER 12/1/22

ACC Professional Services

- When billing a professional service with dates of service (DOS) *spanning before and after 12/1/22*, to avoid processing rejections, please split the services into two separate claim submissions.
- Also, if the 1st DOS on claim is prior to 12/1/22 the claim will be rejected, so please make sure the 1st DOS listed is 12/01/22 or after.
- Submit DOS prior to 12/1/22 to Payer ID 57116 or 14163 or the Tampa address, and DOS 12/1/22 on and after to Payer ID 68069 or the Farmington address:
 - Professional (837P) service date for all claim lines is in Loop 2400 (DTP*472*from-through~) or in FL-24a the unshaded area on the CMS1500 02/12 paper form.

ACC Institutional Outpatient Bill Type and Non-DRG Services

- When billing dates of service *spanning before and after 12/1/22*, to avoid processing rejections, please split the services into two separate claim submissions.
- Also, if the 1st DOS on the claim is prior to 12/1/22 to Payer ID 68069 or Farmington address, the claim will be rejected; please make sure the 1st DOS listed is 12/01/2022 or after.
- When billing services with an outpatient bill type or non-DRG institutional services, please use the earliest “From Date” in the claim submission.
- Submit DOS prior to 12/1/22 to Payer ID 57116 or 14163 or the Tampa address, and DOS 12/1/22 on and after to Payer ID 68069 or the Farmington address:
 - Institutional statement earliest service date is in Loop 2300 (DTP*434*from-through~) or in FL-06 of the UB-04 CMS-1450 paper form.

ACC Institutional Inpatient DRG Services

- When billing institutional inpatient DRG services please use the ‘Through Date Institutional’ statement date located in Loop 2300 (DTP*434*from-through~) or FL-06 of the UB-04 CMS-1450 paper form.
- Also, if the 1st DOS on the claim is prior to 10/1/22, the claim will reject; please make sure the 1st DOS listed is 10/1/22 or after.
- Submit DOS prior to 12/1/22 to Payer ID 57116 or 14163 or the Tampa address, and DOS 12/1/22 on and after to Payer ID 68069 or the Farmington address.

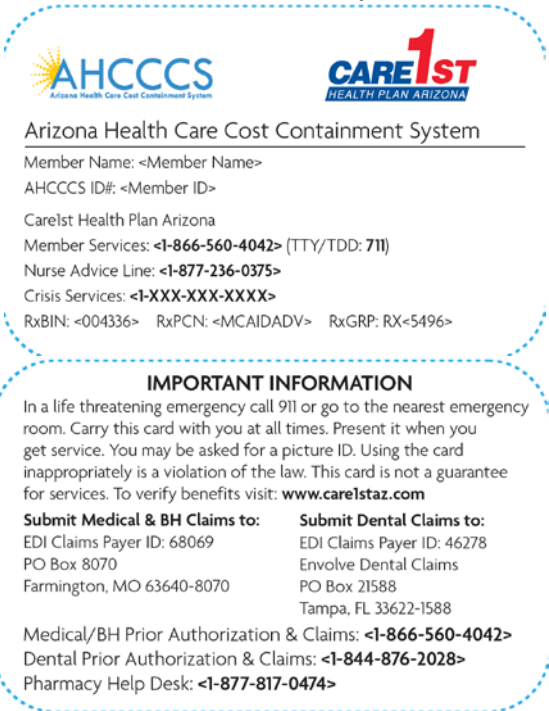
Website and Provider Portal www.care1staz.com

On 10/1/22 we will launch a new website using our existing www.care1staz.com domain name to support our new RBHA business. Because our RBHA and ACC business will be on different systems until 12/1/2022, we need to provide access to our current website to support our ACC business and our new website to support our new RBHA business. On 10/1/22 the new www.care1staz.com will be launched to support our new RBHA business. The new site will have a clearly labeled button, prominent on the home page, that will take you back to the current website for content specific to our ACC business (including the provider portal) being operated on legacy Care1st systems.

Once both the RBHA and ACC business is on the same system (12/1/2022), the new www.care1staz.com website will support both RBHA and ACC business and we will continue to provide access to the old provider portal for ACC claim information for DOS prior to 12/1/22.

The table below provides details, comments, and instructions for key areas/topics by line of business and effective date:

Topic	Line of Business	Effective Date	Details/Comments/Instructions
Website / Provider Portal	RBHA	DOS 10/1/22 & after	Our new website will be accessed through the current domain, www.care1staz.com to support our new RBHA business on Centene platforms. <i>Registration instructions for the new secure provider portal are forthcoming.</i>
	ACC	DOS through 11/30/22	On 10/1/22, the new www.care1staz.com site will have a clearly labeled button, prominent on the home page, that will take you back to the current website for content specific to our ACC business (including the provider portal) being operated on legacy Care1st systems.
	ACC	DOS 12/1/22 and after	On 12/1/22, the new www.care1staz.com website will support both the RBHA and ACC business and we will continue to provide access to the old provider portal for ACC claim information for DOS prior to 12/1/22.

Topic	Line of Business	Effective Date	Details/Comments/Instructions
EFT/835 (Electronic Remittance Advices)	RBHA	DOS 10/1/22 & after	EFT/835 (Electronic Remittance Advice): Payspan Health® You must register. Please begin now! Separate instructions are further down
	ACC	DOS through 11/30/22	NO CHANGE
	ACC	DOS 12/1/22 and after	See RBHA row above. You only need to register once. If you register for RBHA you will be ready for the ACC change for DOS 12/1/22 and after
Formulary (Preferred Drug Lists)	RBHA	DOS 10/1/22 & after	The Preferred Drug Lists will be available on our website www.care1staz.com beginning on 10/1/22.
	ACC	DOS through 11/30/22	NO CHANGE. Use the existing Preferred Drug List available on our website www.care1staz.com
	ACC	DOS 12/1/22 and after	The Preferred Drug List will be available on our website www.care1staz.com beginning on 12/1/22.
Lab Services	RBHA	DOS 10/1/22 & after	Sonora Quest is our exclusive lab partner
	ACC	DOS through 11/30/22	NO CHANGE. Sonora Quest is our exclusive lab partner
	ACC	DOS 12/1/22 and after	NO CHANGE. Sonora Quest will remain our exclusive lab partner
Member ID Card	RBHA	DOS 10/1/22 & after	<p>Integrated SMI Members will receive a new ID card from Care1st ID Cards will be mailed in early October</p>  <p>Arizona Health Care Cost Containment System</p> <p>Member Name: <Member Name> AHCCCS ID#: <Member ID></p> <p>Care1st Health Plan Arizona Member Services: <1-866-560-4042> (TTY/TDD: 711) Nurse Advice Line: <1-877-236-0375> Crisis Services: <1-XXX-XXX-XXXX></p> <p>RxBIN: <004336> RxBIN: <MCAIDADV> RxGRP: RX<5496></p> <p>IMPORTANT INFORMATION</p> <p>In a life threatening emergency call 911 or go to the nearest emergency room. Carry this card with you at all times. Present it when you get service. You may be asked for a picture ID. Using the card inappropriately is a violation of the law. This card is not a guarantee for services. To verify benefits visit: www.care1staz.com</p> <p>Submit Medical & BH Claims to: EDI Claims Payer ID: 68069 PO Box 8070 Farmington, MO 63640-8070</p> <p>Submit Dental Claims to: EDI Claims Payer ID: 46278 Envolve Dental Claims PO Box 21588 Tampa, FL 33622-1588</p> <p>Medical/BH Prior Authorization & Claims: <1-866-560-4042> Dental Prior Authorization & Claims: <1-844-876-2028> Pharmacy Help Desk: <1-877-817-0474></p>
	ACC	DOS through 11/30/22	NO CHANGE
	ACC	DOS 12/1/22 and after	Members will receive a new ID card from Care1st. See picture above in RBHA section
Topic	Line of Business	Effective Date	Details/Comments/Instructions

Prior Authorizations (PAs)	RBHA	DOS 10/1/22 & after	HealthChoice is sharing all <i>open</i> (unused) PAs with Care1st. Care1st will honor these through the expiration date or 12/31/22, <i>whichever comes first</i> .
PAs - Outside Partners	RBHA	DOS 10/1/22 & after	<p>Although the Care1st PA Team is responsible for most PAs, Care1st will work with outside partners for review of PA for certain services. Those partners, listed below, will also honor the open Health Choice PAs through expiration or 12/31/22, whichever comes first.</p> <ol style="list-style-type: none"> 1. Complex imaging, MRA, MRI, PET, and CT: NIA. NIA will honor open PAs through expiration or 12/31/22, whichever comes first. https://www1.radmd.com/radmd-home.aspx (800) 327-0641. 2. Dental Services: <i>Envolve Dental</i>. Envolve Dental will honor open PAs through expiration or 12/31/22, whichever comes first. https://dental.envolvehealth.com/ (844) 876-2028. 3. Orthopedic Procedures: <i>Turning Point</i>. Although Turning Point reviews requests, the PAs will be entered into the Care1st system for claims payment. Open Health Choice PAs for these services will be honored through expiration or 12/31/22, whichever comes first http://www.tpshealth.com/ (480) 865-2486.
	ACC	DOS through 11/30/22	NO CHANGE. Follow the same process you follow today.
	ACC & RBHA	DOS 12/1/22 and after	See RBHA section above PLUS [NEW]: Oncology/Supportive Drugs: <i>New Century Health</i> . Open PAs will be honored through expiration or 12/31/22, whichever comes first. New oncology/supportive drug requests should be submitted to New Century Health directly https://my.newcenturyhealth.com (877) 624-8601

Topic	Line of Business	Effective Date	Details/Comments/Instructions						
PAs	RBHA	DOS 10/1/22 & after	<p>What if I don't have an existing open PA and am providing a service 10/1/22 and after to a former Health Choice member, now Care1st member?</p> <ul style="list-style-type: none"> If you are not a participating (non-par) provider with Care1st, like all non-par providers, a PA is required for all services. You may submit a PA request via fax <table border="1"> <tr> <td>BH Inpatient / Outpatient</td> <td>(833) 592-1301</td> </tr> <tr> <td>Medical PA</td> <td>(833) 618-1979</td> </tr> <tr> <td>Inpatient/SNF</td> <td>(833) 618-2174</td> </tr> </table> If you are a participating (par) provider with Care1st, you should determine if a PA is needed before providing the service by using our Pre-Auth Check Tool on our web site www.care1staz.com beginning on 10/1/22. If a PA is needed, you may submit a request via fax (see bullet 1 above for fax numbers). 	BH Inpatient / Outpatient	(833) 592-1301	Medical PA	(833) 618-1979	Inpatient/SNF	(833) 618-2174
	BH Inpatient / Outpatient	(833) 592-1301							
	Medical PA	(833) 618-1979							
Inpatient/SNF	(833) 618-2174								
ACC	DOS through 11/30/22	NO CHANGE. Follow the same process you use to obtain PA today							
ACC	DOS 12/1/22 and after	<ul style="list-style-type: none"> Open (unused) PAs will be moved from the current claims system to the new system New PA requests may be submitted via fax <table border="1"> <tr> <td>BH Inpatient / Outpatient</td> <td>(833) 592-1301</td> </tr> <tr> <td>Medical PA</td> <td>(833) 618-1979</td> </tr> <tr> <td>Inpatient/SNF</td> <td>(833) 618-2174</td> </tr> </table> 	BH Inpatient / Outpatient	(833) 592-1301	Medical PA	(833) 618-1979	Inpatient/SNF	(833) 618-2174	
BH Inpatient / Outpatient	(833) 592-1301								
Medical PA	(833) 618-1979								
Inpatient/SNF	(833) 618-2174								
PA Form Location	RBHA	DOS 10/1/22 & after	Updated PA Form(s) will be located on our website www.care1staz.com beginning on 10/1/22.						
	ACC	DOS through 11/30/22	NO CHANGE. Continue to use the same form you use today and submit exactly as you do today						
	ACC	DOS 12/1/22 and after	Use the same Prior Auth Form used for RBHA members that will be located on our website www.care1staz.com beginning on 10/1/22						
PA Guidelines	RBHA	DOS 10/1/22 & after	Our Pre-Auth Check Tool identifies PA requirements by code and will be available on our website www.care1staz.com beginning on 10/1/22.						
	ACC	DOS through 11/30/22	NO CHANGE. Use the existing Prior Auth Guidelines available on www.care1staz.com						
	ACC	DOS 12/1/22 and after	Our Pre-Auth Check Tool identifies PA requirements by code and will be available on our website www.care1staz.com beginning on 12/1/22.						

Topic	Line of Business	Effective Date	Details/Comments/Instructions
Pharmacy BIN, PCN and Group number	RBHA	DOS 10/1/22 & after	BIN: 004336 PCN: MCAIDADV Group# RX5496
	ACC	DOS through 11/30/22	NO CHANGE. BIN: 004336 PCN: MCAIDADV Group#: RX8897
	ACC	DOS 12/1/22 and after	[NEW] BIN: 004336 PCN: MCAIDADV Group#: RX5496
Pharmacy Email Box	RBHA	DOS 10/1/22 & after	care1stpharmacy@care1staz.com Email box is available for questions on the Preferred Drug Lists or in office injectables (bio-pharmacy) requests)
	ACC	DOS through 11/30/22	care1stpharmacy@care1staz.com Email box is available for questions on the Preferred Drug Lists or in office injectables (bio-pharmacy) requests)
	ACC	DOS 12/1/22 and after	care1stpharmacy@care1staz.com Email box is available for questions on the Preferred Drug Lists or in office injectables (bio-pharmacy) requests)
Pharmacy PAs	RBHA	DOS 10/1/22 & after	Health Choice is sharing open pharmacy PAs with Care1st. Care1st will honor open pharmacy PAs through expiration or 9/30/23, <i>whichever comes first</i> . In office injectables (bio-pharmacy) will be honored through expiration or 12/31/22, <i>whichever comes first</i>
Pharmacy PA Form	RBHA	DOS 10/1/22 & after	Updated PA Form(s) will be located on our website www.care1staz.com beginning on 10/1/22.
	ACC	DOS through 11/30/22	NO CHANGE. Continue to use the same form you use today and submit exactly as you do today.
	ACC	DOS 12/1/22 and after	Use the updated PA Form(s) that will be located on our website www.care1staz.com beginning on 12/1/22
Pharmacy PA Submission	RBHA	DOS 10/1/22 & after	<ul style="list-style-type: none"> Pharmacy PA request for a DOS 10/1/22 and after submit request electronically via Cover my Meds link: https://www.covermymeds.com/main/prior-authorization-forms/ or fax PA request to 602-778-8387 For in office injectables (bio-pharmacy) fax PA request to 883-417-0447
	ACC	DOS through 11/30/22	NO CHANGE. Continue to follow the same process you follow today for pharmacy PA requests and in office injectables (bio-pharmacy) drug PA requests
	ACC	DOS 12/1/22 and after	<ul style="list-style-type: none"> When submitting pharmacy PA request for a DOS 12/1/22 and after submit request electronically via Cover my Meds link: https://www.covermymeds.com/main/prior-authorization-forms/ or fax PA request to 602-778-8387 For in office injectables (bio-pharmacy) PA requests through the medical benefit fax PA request to 883-417-0447.

How to Register with Payspan for EFT/835/Electronic Remittance Advices Please, please, register for PaySpan now! Don't wait! We want your EFT payments to continue seamlessly. Registration is a single process that enrolls you for both electronic payment and Electronic Remittance Advice (ERA) at the same time.

The following is needed to register:

1. Registration Code (details below)
2. Personal Information, i.e., practice admin
3. Account Setup, i.e., TIN, GNPI, Bank Account Info
4. Verification of Your Information

Registration Code details: (3 ways to obtain request Reg Code)

Link: <https://www.payspanhealth.com/RequestRegCode/>

1. Complete "Web Registration Code Request" and you will receive a REG CODE via email
2. Request Reg Code by sending email to:
 - providersupport@payspanhealth.com and request available registration codes and include TIN, Health Plan name, and your contact information (name, title, phone number)
3. Call Payspan at 877-331-7154, Option 1 – Monday thru Friday 8:00 am to 8:00 pm ET

After you register for electronic payments (EFT), you will:

1. Receive a deposit of less than one dollar from Payspan within a few business days
2. Contact your financial institution to obtain the amount
3. Login in to Payspan
4. Click *Your Payments*
5. Click the *Account Verification* link to activate your account
6. The deposit doesn't need to be returned to Payspan

Options for Remittance Viewing and Receipt

You have several options for viewing and receiving remittance details. Payspan will match your preference for remittance information, with the following options:

- HIPAA-compliant datafile that can be downloaded directly to your practice management or patient accounting system
- Electronic remittance advice presented online and printed in your location

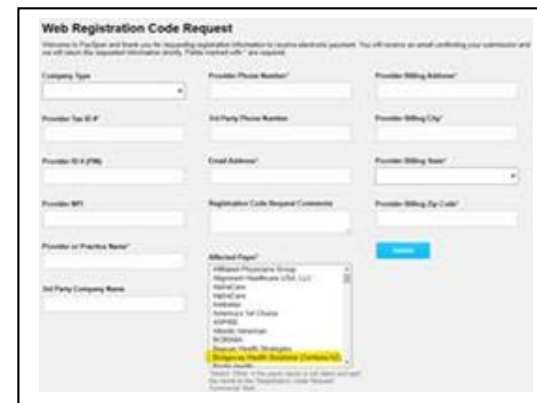
If you are already registered with Payspan for another health plan follow the steps below to register codes to your existing Payspan account

1. Go to www.payspanhealth.com and login to your account
2. Click *Your Payments*
3. Once on the 'Your Payments and Remits' page; to the left of the page select the 'Reg Codes' button under the 'Manage' section.
4. On the right select 'Add New Reg. Code'.
5. Enter the Registration Code, Provider Identification Number (PIN)
6. Tax Identification Number (TIN).
7. Click *Start Registration* and follow the remaining steps.

Once your registration codes are activated, please allow up to 24 hours to access EOPs on the Payspan Portal.

For additional assistance, click the following link to access a list of commonly asked questions at <https://www.payspanhealth.com/nps/Support/Index> or contact Payspan via email at providersupport@payspanhealth.com or by phone at (877) 331-7154, Option 1.

BROWSERS: Use the Payspan portal with Google Chrome, Mozilla Firefox, or Microsoft Edge

The image shows a screenshot of a web form titled "Web Registration Code Request". The form contains several input fields for registration details, including "Provider Type", "Provider Phone Number", "Provider Billing Address", "Provider Tax ID", "Add Party Phone Number", "Provider Billing City", "Provider EIN (FE)", "Email Address", "Provider Billing State", "Provider NPI", "Registration Code Request Comments", "Provider Billing Zip Code", "Provider or Practice Name", and "Add Party Company Name". There is a "Submit" button at the bottom right. A dropdown menu is open, showing a list of "Allowed Plans" with "Blue Cross Blue Shield of Michigan" highlighted in yellow. The form also includes a small disclaimer at the top.