PROVIDER Bulletin

March 18, 2024

This Provider Bulletin applies to the lines of business and provider types checked below:

☒ **PHP (Medicare)** ☒ **Primary Care Physicians** ☒ **Specialists**
☒ **PHC (Medicaid)** ☒ **Hospitals** ☒ **Ancillary** ☒ **AHF Grants**

INFORMATIONAL

Change Healthcare: Electronic Claims Submission Update - Optum iEDI
Flexibilities to Ensure Delivery System Stability Following Cyberattack

PHP (Medicare Advantage), PHC California (Medi-Cal Managed Care Plan) and Ryan White Grants administered by the AIDS Healthcare Foundation (AHF) were affected by the Change Healthcare (CHC) outage impacting our electronic claims clearinghouse and electronic payment vendor. As of March 15, 2024, we have established an alternate electronic claim submission pathway through Optum Insight iEDI clearinghouse and can now accept electronic claim submissions. This applies to the following payer IDs:

- 95411 – Institutional, Professional, and Dental
- 95422 – Institutional, Professional
- 95433 – Institutional, Professional, and Dental

Providers who submitted claims directly to Change Healthcare can transition to claim submissions to Optum Insight EDI by either contacting their Optum account team or work with their revenue cycle partners. For more information, please see: [Optum Intelligent Electronic Data Interchange (iEDI) - UnitedHealth Group](#)

Providers who submitted claims through a different clearinghouse will most likely be able to resume submissions as Optum notifies its partners to route claims for PHP and PHC California through Optum Insight iEDI. However, providers are encouraged to check with their clearinghouse or other revenue cycle vendor that your claims for PHP and PHC California (Payer ID's 95411, 95422, and 95433) are being routed to Optum Insight iEDI, and should monitor your claim submissions for payer acknowledgements.

Claim Submissions/Resubmissions

Providers should re-submit any claims sent between February 19, 2024 and March 14, 2024 for which they have not yet received a rejection or acknowledgement with one of the following claim status codes:

- A1:19:PR – Acknowledgement/Receipt – Payer Acknowledges Receipt
- A1:20 – Acknowledgement/Receipt – Claim Accepted for Processing
- Any Rejection Status with Claim Status Category Codes A6 (Acknowledgement/Rejected for Missing Information), A7 (Acknowledgement/Rejected for Invalid Information), A8 (Acknowledgement/Rejected for Relational Field Error)

Electronic Payments and Remittance Advice

AIDS Healthcare Foundation is still working with Optum/Change Healthcare to establish a direct connection with ECHO Health, an Optum/Change Healthcare partner that was not affected by this outage. Currently, providers can still access payments and remittances for payments made prior to 2/21/2024 at the ECHO Health portal: providerpayments.com. We expect electronic payments through ECHO Health to be re-established soon, but have issued payments via paper checks in the interim.

We understand that this outage is impacting your practice. We appreciate your patience and understanding during this unprecedented disruption. ***our plan specific web pages (found below) regularly for updates, or reach out*** if you have any questions concerning this communication or need additional information concerning this requirement, please contact the Provider Relations department for further assistance (CAPR@aidshealth.org).

PHP Claims Submission and Status webpage: php-ca.org/for-providers/claims

PHC California Claims Submission and Status webpage: phc-ca.org/providers/claims

Thank you