

Corporate Health Services (CHS) Plans – Network Rental

Corporate Health Services (CHS) groups are large, self-insured employer groups that have entered into a “rental” arrangement with BCBSAZ that allows their employees access to the BCBSAZ statewide PPO provider network. Under CHS agreements, BCBSAZ provides network access and claim pricing only (i.e., BCBSAZ does not provide administrative or claim payment services). No network access is available from Blue Cross Blue Shield plans outside of Arizona.

The group, not BCBSAZ, handles all other administrative services for the benefit plans and assumes all financial risk with respect to claims. Most CHS groups have opted to use a third-party administrator (TPA) for the administrative functions, including verification of eligibility and benefits, prior authorization, claim processing, medical records requests, and appeals and grievances.

Benefits for CHS groups are likely to vary from BCBSAZ standard benefits.

Provider requirements

The group’s TPA handles all administrative functions except claim pricing. Providers are required to:

1. Comply with the group’s specific benefit plan and all policies and procedures set forth by the group’s TPA
2. Reference the current member ID card and use the BCBSAZ-assigned group number on all claims
3. Submit all claims to BCBSAZ and set up the TPA as the payer for claim reimbursement
4. Send all requested records and other correspondence directly to the TPA

This table illustrates that except for claim submission, the group’s TPA is your point of contact:

ADMINISTRATIVE FUNCTION	GROUP'S TPA	BCBSAZ	NOTES
<i>BCBSAZ PPO provider network access in Arizona</i>		✓	<i>Rental arrangement</i>
Benefit plan design	✓		
Secure provider portal	✓		Eligibility, benefits, claims
Member ID cards (includes BCBSAZ-assigned group #)	✓		TPA contact information
Member eligibility and benefits	✓		TPA website or phone
Medical policy	✓		
Utilization management	✓		
Prior authorization requirements and requests	✓		Check ID card back
<i>Claim submission (for pricing only)</i>		✓	<i>BCBSAZ EDI: 53589 Include BCBSAZ-assigned group number on claims</i>
<i>Claim adjustments (for pricing only)</i>		✓	
Claim adjudication according to the plan benefits	✓		
Coordination of benefits, including Indian Health Services	✓		
Records requests	✓		Send directly to TPA
Claim status	✓		TPA website or phone
Claim payment and remittance advice	✓		Set up the TPA as payer
Appeals/grievances	✓		TPA website or phone
Customer service	✓		TPA website or phone

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Accessing CHS/TPA information

To support providers, BCBSAZ maintains a “CHS Group/TPA Information” list and search tool on the secure provider portal at azblue.com/providers in “Practice Management > Eligibility & Benefits > CHS Group Information.” It includes the BCBSAZ-assigned group number as well as the TPA’s secure portal and contact information.

Claim processing (after pricing)

The CHS group’s TPA is the payer for CHS group member claims. The TPA handles all claim processing, including investigation of other party liability, verification of eligibility, application of benefits, claim payments, and claim status information.

The TPA may apply more claim edits (in addition to any initial edits applied by BCBSAZ), such as procedure unbundling, and separate billing for incidental procedures and mutually exclusive procedures.

Include the BCBSAZ-assigned group number on all claim submissions

The CHS group’s TPA issues the member ID cards. The BCBSAZ-assigned group number is required to be displayed on the front of the card, indicating that the group has access to the BCBSAZ network. The format used for the BCBSAZ group number is three letters followed by three numbers (i.e., ABC123).

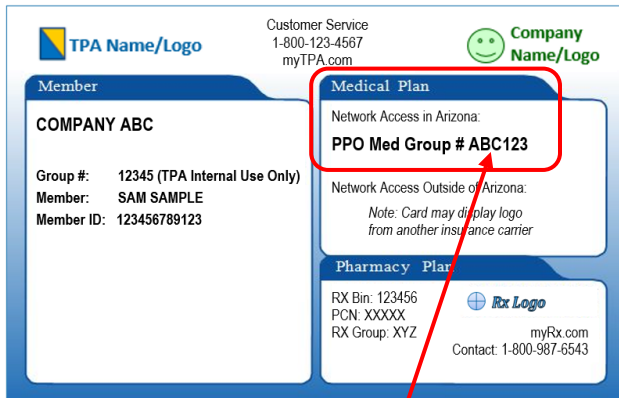
Note: The TPA may assign another group number for internal tracking purposes. Do *not* use this group number on the claim. Use only the BCBSAZ-assigned group number.

To prevent claim processing delays and PHI breaches, take extra care when keying the group and member ID numbers. For example, if a zero (0) is incorrectly entered as a letter “O” or a “D,” the claim may be misrouted, resulting in payment delays and PHI breaches. The BCBSAZ-assigned group number is displayed on the front of the member ID card, as shown in the sample below.

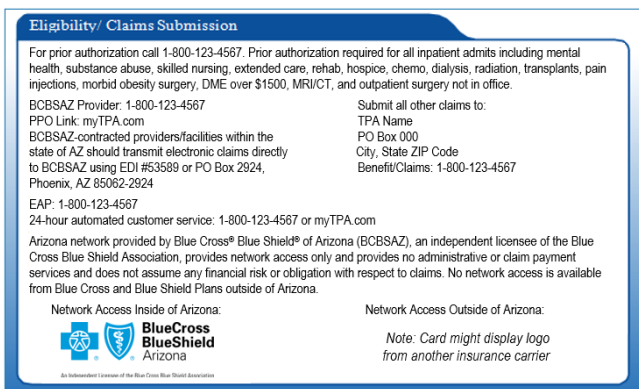
Sample CHS group member ID card

The sample below is for illustrative purposes only. CHS ID card designs vary by employer group. The BCBSAZ logo is displayed on the back of the card.

Card front



Card back



Be sure to include the BCBSAZ-assigned group number (three letters followed by three numbers) on all claim submissions.