

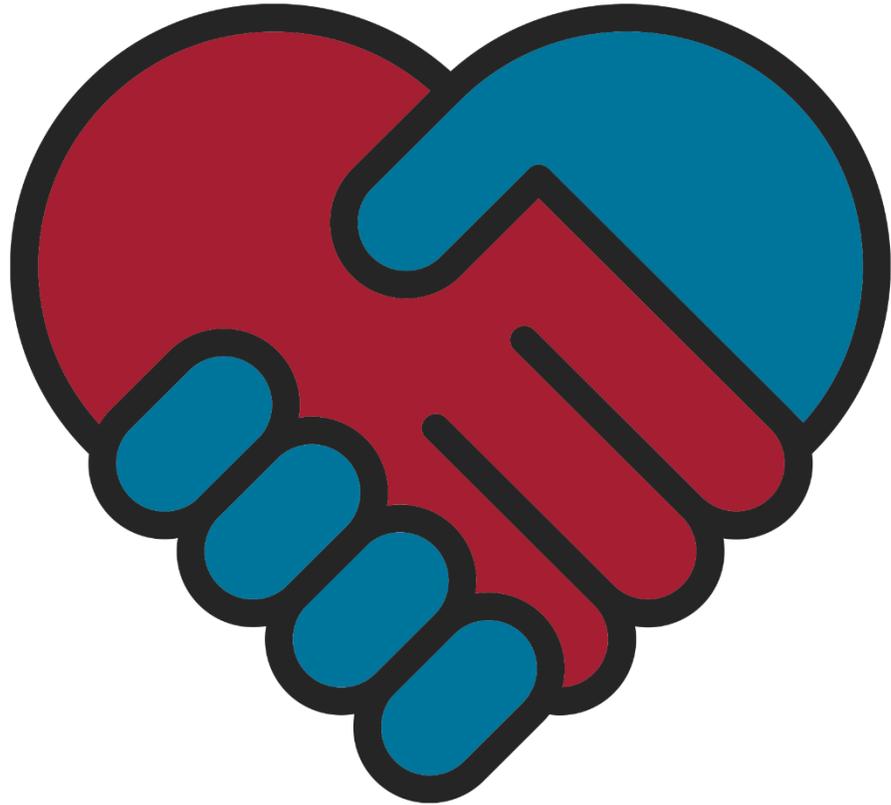


Centennial Home Visiting Program

Provider Network Operations



Our Purpose



At Presbyterian, we see firsthand the importance of collaboration and open communication between a health plan and providers.

To facilitate this essential partnership, our dedicated provider relationship teams and staff are ready and available to support you.

Together, we can provide the best experience for members and improve patient health across our network.



Contact Guide



Contact Guide

- Providers can access the Provider Services Contact Guide on Presbyterian's website at www.phs.org/ContactGuide
- Provider can also manually navigate to the contact guide on Presbyterian's website by clicking:
 - "Contact Us"
 - "Provider Services Contact Guide"
- In the contact guide, providers will find the relationship executive who is assigned to their facility based on their service county
- Relationship executive can answer questions related to various topics, including but not limited to billing, authorizations, and payments

PRESBYTERIAN Providers

SEARCH PHS.org myPRES Log In

OUR NETWORKS | AUTHORIZATIONS | CLAIMS | FORMULARIES | TOOLS & RESOURCES | **CONTACT US**

CONTACT US

Providers | Contact Us

NEWS & COMMUNICATIONS

Presbyterian Health Plan News & Updates

Find out about the newest staff and the latest technology, and all the other happenings at Presbyterian. [Learn More](#)

Contact Us

Contact us by phone

Provider Network Relationship Executives

The Provider Network Operation department actively reaches out to the network as provider advocates. They provide support and education about Presbyterian regarding contracting, claims, and more. Your assigned relationship executive and associate serve as your primary contact.

[Provider Services Contact Guide](#)

Provider Care Unit

Claims, Appeals & Grievance and Prior Authorization questions
(505) 923-5757 or 1 (888) 923-5757
Mon. – Fri., 8:00 a.m. to 5:00 p.m.





HSD Registration



HSD Registration

Provider Enrollment

- All home visiting providers will enroll as a provider type 317 (Nurse Agency, Home Visiting, EPSDT Personal Care) with a specialty provider type 202 (Home Visiting Agency)
- In the Medicaid Portal, click “Provider Enrollment” and then click on “Enroll Online”
 - To enroll in a new provider type, use the “Create a New Application” box
 - To open or resubmit an application, use the “Reopen and Resubmit Your Returned Application” box
- For questions about HSD registration, please contact HSD directly

New Mexico Medicaid Portal

Home Contact Us Search GO

INFORMATION
Provider Information
FAQ

WEB REGISTRATION

PROVIDER ENROLLMENT
Enroll Online ←
Check Enrollment Status
Download Enrollment Application
Upload License Attachment

Provider Enrollment Application

COVID INFORMATION FOR PROVIDER ENROLLMENT

NM Medicaid is now accepting **TEMPORARY PROVISIONAL** applications for temporary provider enrollment during the Public Health Emergency. Provisional Enrollment is **temporary**, not to be used for permanent enrollment of New Mexico Medicaid providers. Provisional enrollment will end after the Public Health Emergency. The MAD Provisional Provider Participation Agreement (PPA) is intended for providers who are 1) providing COVID-19 related services to Medicaid recipients and 2) not currently enrolled in the New Mexico Medicaid program.

Providers may be required to include licensure or certification documentation with the Provisional enrollment applications.

If you are unsure if you or your organization are already enrolled in the New Mexico Medicaid program, please use the Provider Search tool to verify status. If you have any further questions or need assistance, please contact the Consolidated Customer Service Center (CCSC) at 1-800-299-7304.

Create a New Application ←
Please enter your email address and click CREATE
*Email: **Create**

Recall Your Existing Application
To recall an application that you have partially completed, enter your reference number and click RECALL
*Reference #: **Recall**

Forgot Your Reference Number?
If you have forgotten your reference number, please enter your email address below and click SUBMIT. The email address you submit will be validated against the one on file for you and your reference number will be sent to you by email.
*Email: **Submit**

Reopen and Resubmit Your Returned Application ←
To reopen a submitted application that has been returned for missing or incomplete information
*Reference #: **Reopen**



myPRES Provider Portal Access & Registration



myPRES Provider Portal Access & Registration

- The myPRES Provider Portal is a platform that hosts a variety of tools to simplify administrative tasks for providers. A few capabilities include:
 - Eligibility verification
 - Claims information
 - Payment tracking
 - Adjustment requests
 - Prior authorizations requests
- To access the portal's tools, providers must register for a myPRES provider account

The screenshot shows the myPRES Provider Portal website. The header includes the Presbyterian logo and 'Providers' text, a search bar, and navigation links for 'PHS.org' and 'myPRES Log In'. The main navigation menu lists 'OUR NETWORKS', 'AUTHORIZATIONS', 'CLAIMS', 'FORMULARIES', 'TOOLS & RESOURCES', and 'CONTACT US'. The main content area features a banner for 'UPDATE PROVIDER DIRECTORY' with the text 'The No Surprises Act requires provider directories to be verified every 90 days. Verify your data now.' and a sidebar titled 'Provider Portals' with links for 'myPRES Login', 'myPRES Provider Registration' (highlighted with a red arrow), and 'EpicConnect Login'. The sidebar also lists capabilities: 'Verify Member Eligibility', 'Check Claims Status', 'Submit an Inquiry', 'View Patient Medical Records', 'Manage Scheduling', and 'Manage Patient Accounting'.



myPRES Provider Portal Registration Form

- Fill in all fields of the myPRES Provider Registration form:
 - In the Account Type field, select “Facility”
 - In the Tax ID Number field, enter the facility’s tax ID number without any dashes
 - In the NPI field, enter the NPI number without any dashes
 - For the question that asks, “Is there an existing myPRES user in your office to approve this request,” select “Yes” and enter the email address ProviderNetworkLTC@phs.org
 - Click “Submit”

PRESBYTERIAN

myPRES

myPRES PROVIDER REGISTRATION

Get the latest health care documentation and details from Presbyterian Health Plan using myPRES. Register now to access information about claims, benefits, certifications, eligibility, deductibles, and more.

All fields are required unless noted otherwise.

Account Type *
 ←

Tax ID Number * **NPI *** ←

Tax ID Number or Last 4 SSN National Provider Identification Number

Is there an existing myPRES user in your office to approve this request?
 Yes No

Approver Email *
 ←

Submit →





Updating Provider Directory Profile



Updating Provider Directory Information

- All providers are required to update or verify their directory profile information every 90 days to comply with the No Surprises Act
- Providers must have a myPRES provider account to update or verify directory profile information
- Providers must log into the myPRES platform to update and verify their directory information

The screenshot shows the Presbyterian Providers website. The main navigation bar includes a search box, a 'PHS.org' dropdown, and a 'myPRES Log In' button. Below the navigation bar are links for 'OUR NETWORKS', 'AUTHORIZATIONS', 'CLAIMS', 'FORMULARIES', 'TOOLS & RESOURCES', and 'CONTACT US'. The main content area features a large image of a doctor in a white coat holding a stethoscope. Overlaid on this image is a dark grey box with the text 'UPDATE PROVIDER DIRECTORY' and 'The No Surprises Act requires provider directories to be verified every 90 days. Verify your data now. >'. To the right of the main content is a red sidebar titled 'Provider Portals' which lists several options: 'Verify Member Eligibility', 'Check Claims Status', 'Submit an Inquiry', 'myPRES Login >', 'myPRES Provider Registration >', 'View Patient Medical Records', 'Manage Scheduling', 'Manage Patient Accounting', 'EpicConnect Login >', and 'Learn more about Provider Portals >'. Two blue arrows point to the 'myPRES Login >' button and the 'UPDATE PROVIDER DIRECTORY' text box.



Requesting Delegate Access

- Groups and facilities must identify a staff member as an authorized delegate to update and verify directory information on behalf of their office
- Groups and facilities can request delegate access for a staff member and obtain instructional guides, including a how-to video and FAQs, on Presbyterian's website under Tools & Resources or visiting www.phs.org/directoryupdate

PRESBYTERIAN Providers

SEARCH PHS.org myPRES Log In

OUR NETWORKS AUTHORIZATIONS CLAIMS FORMULARIES **TOOLS & RESOURCES** CONTACT US

TOOLS & RESOURCES

Providers | Tools & Resources | Provider Portals | **Update Provider Directory Profile**

PROVIDER PORTALS
• Update Provider Directory Profile
MEDICAL POLICY MANUAL
APPEALS & GRIEVANCES
REFERENCE & GUIDES
TRAINING & EDUCATION
HOSPITAL RESOURCES

Update Provider Direct

You can now update your provider directory profile in... by viewing the how-to video that walks you through the steps, or download a user guide based on your provider type.

How-to Video





Provider Manuals, User Guides and Training Materials



Accessing Provider Manuals, User Guides and Training Materials

- Providers can access provider manuals, user guides and training materials on Presbyterian's website at www.phs.org/providertraining
- Provider can also manually navigate to these resources on Presbyterian's website by:
 - Clicking "Tools & Resources"
 - Selecting "Training & Education" from the drop-down menu
 - Selecting either "Provider Manuals, Training & Outreach" from the navigation menu on the left **or** clicking "Learn more about Provider Manuals, Training & Outreach" on the main page

The screenshot displays the Presbyterian Providers website interface. At the top, the navigation bar includes "OUR NETWORKS", "AUTHORIZATIONS", "CLAIMS", "FORMULARIES", "TOOLS & RESOURCES", and "CONTACT US". The "TOOLS & RESOURCES" menu is open, showing options like "PROVIDER PORTALS", "MEDICAL POLICY MANUAL", "APPEALS & GRIEVANCES", "REFERENCE & GUIDES", "TRAINING & EDUCATION" (highlighted with a red arrow), and "HOSPITAL RESOURCES". Below this, the "Training & Education" section is visible, featuring a sub-section "Provider Manuals, Training & Outreach" (highlighted with a red arrow) and a link "Learn more about Provider Manuals, Training & Outreach" (highlighted with a red arrow). The "Presbyterian ECHO" section is also present, with a link "Learn more about Project ECHO".





Accessing Provider Manuals, User Guides and Training Materials

- From the “Provider Manuals, Training & Outreach” page, providers can:
 - Access a several provider manuals and user guides
 - View a variety of training materials and upcoming training opportunities

PRESBYTERIAN Providers

SEARCH PHS.org myPRES Log In

OUR NETWORKS | AUTHORIZATIONS | CLAIMS | FORMULARIES | TOOLS & RESOURCES | CONTACT US

TOOLS & RESOURCES

Providers | Tools & Resources | Training & Education | **Provider Manuals, Training & Outreach**

- ▶ PROVIDER PORTALS
- ▶ MEDICAL POLICY MANUAL
- ▶ APPEALS & GRIEVANCES
- ▶ REFERENCE & GUIDES
- ▼ TRAINING & EDUCATION
 - **Provider Manuals, Training & Outreach**
 - Presbyterian ECHO
- ▶ HOSPITAL RESOURCES

Provider Manuals, Training & Outreach

Presbyterian is dedicated to building strong relationships with its contracted healthcare providers and practitioners. We offer training programs and information to keep up-to-date with current policies and procedures. Here you will find helpful tools designed to help with day-to-day interactions with members.

If you have any questions, contact your Provider Network Management Relationship Executive.

Manuals for Physicians, Practice Managers and Staff

- ▶ Universal Practitioner and Provider Manual (i.e., All Lines of Business) ▶
- ▶ Centennial Care Practitioner and Provider Manual ▶
- ▶ myPRES Prior Authorization User Manual ▶
- ▶ Presbyterian Code of Conduct ▶
- ▶ myPRES Provider Portal User Guide ▶
- ▶ Presbyterian Individual and Family Plans and Networks Guide ▶

Provider Trainings

- ▶ UPCOMING PROVIDER EDUCATION CONFERENCES AND WEBINARS
- ▶ PRESBYTERIAN DUAL PLUS (HMO D-SNP) TRAINING
- ▶ BEHAVIORAL HEALTH PROVIDER TRAININGS
- ▶ CENTENNIAL CARE TRAINING
- ▶ CRITICAL INCIDENT REPORTING TRAINING
- ▶ CULTURAL SENSITIVITY COMPETENCIES OFFERED ONLINE
- ▶ HEALTH EQUITY TRAINING COURSES
- ▶ GENERAL MEDICARE COMPLIANCE TRAINING FOR FIRST TIER, DOWNSTREAM AND RELATED ENTITIES (FDRS)
- ▶ HEALTHCARE PROVIDER COMPLIANCE VIDEOS AND PODCASTS

BACK TO TOP

Presbyterian Health Plan News & Updates
Find out about the newest staff and the latest technology, and all the other happenings at Presbyterian. [Learn More ▶](#)

Become a Presbyterian Health Plan Contracted Provider
We are committed to efficient and effective service to make healthcare administration work for you. Let's transform healthcare together. [Learn More ▶](#)





Provider Communications



Provider Communications

- Providers can access Presbyterian’s provider newsletter, Network Connection, and other provider communications on Presbyterian’s website at www.phs.org/providercommunications.
- Provider can also manually navigate to these resources on Presbyterian’s website by:
 - Clicking “Contact Us”
 - Selecting “News & Communications” from the drop-down menu
- These communications help keep providers informed of regulatory requirements and new or updated processes
- Providers can also sign up to receive these communications via email by clicking “Sign Up Now” in the blue “Stay Connected” box

The screenshot shows the Presbyterian Providers website. At the top, there is a navigation bar with the Presbyterian logo and the word "Providers". To the right of the logo is a search bar and two buttons: "PHS.org" and "myPRES Log In". Below the navigation bar is a horizontal menu with the following items: "OUR NETWORKS", "AUTHORIZATIONS", "CLAIMS", "FORMULARIES", "TOOLS & RESOURCES", and "CONTACT US". A red arrow points to the "CONTACT US" item, which has a sub-menu item "NEWS & COMMUNICATIONS" highlighted. Below the navigation bar is a large banner with the text "CONTACT US" and a background image of a landscape. Below the banner is a breadcrumb trail: "Providers | Contact Us | News & Communications". To the right of the breadcrumb trail are three social media icons: Facebook, Twitter, and LinkedIn. Below the breadcrumb trail is a section titled "News & Communications" with a dropdown arrow. Underneath this section is a link for "eNews Registration for Providers". Below this is a section titled "Presbyterian Health Plan News & Updates" with a photo of a woman in a blue surgical cap and a red banner. Below the photo is a short paragraph of text and a "Learn More" link. Below this is a section titled "Become a Presbyterian Health Plan Contracted Provider" with a photo of a man in a blue shirt and a red banner. Below this is a section titled "STAY CONNECTED" with a blue background and a white envelope icon with an @ symbol. Below the envelope icon is a short paragraph of text and a "Sign Up Now" link with a red arrow pointing to it. Below this is a section titled "PAST ISSUES AND COMMUNICATIONS" with a short paragraph of text.



Program Referrals



Program Referrals

- The Centennial Home Visiting program focuses on prenatal, postpartum and early childhood development. It includes:
 - Up to four state-designated counties
 - Nurse-family partnerships
 - The parent educator delivery model (i.e., Parents as Teachers)
 - Prenatal, postpartum and infant/early childhood development services
- Presbyterian is intentional about providing program information to our members. This includes:
 - Our Presbyterian Customer Service Center (PCSC) provides education at the time of enrollment
 - Our Outreach Clinical Support team provides education when administering a Health Risk Assessment
 - Our care coordinators provide education during ongoing care coordination activities
- Program referrals are generated when a member expresses interest in the program. We use a round-robin assignment by county



- For assistance with a referral, email CHVMailbox@phs.org
- If the member is engaged in care coordination, the care coordinator's contact information will be included with the referral



Authorizations



Authorizations

- Providers can access information about authorizations, including the Prior Authorization Guide and Prior Authorization Request Form, on Presbyterian's website at www.phs.org/providers/authorizations
- Provider can also manually navigate to these resources on Presbyterian's website by clicking "Authorizations"
- Provider can submit prior authorization requests via fax or online through the myPRES Provider Portal

PRESBYTERIAN Providers

SEARCH PHS.org myPRES Log In

OUR NETWORKS AUTHORIZATIONS CLAIMS FORMULARIES TOOLS & RESOURCES CONTACT US

AUTHORIZATIONS

Providers | Authorizations

Is Prior Authorization Required?

You can check to see if behavioral or medical prior authorization is required. [Get started](#)

Is Pharmacy Prior Authorization Required?

You can use our SureScripts tool to see if pharmacy prior authorization is required. [Get started](#)

Authorizations

Certain specialized services and prescription drugs require a prior authorization or inpatient notification before being rendered to patients and members. Prior authorizations and inpatient notifications ensure that patients are receiving the right amount of medically necessary care in the right setting for the insurance plan for which they're enrolled.

Medical

- [Prior Authorization Guide](#)
- [Intel Connected Care Prior Authorization Grid](#)
- [Prior Authorization Request Form](#)
- [VBID Transitional Services Request Form](#)
- [VBID Fact Sheet and FAQs](#)
- [Referral Form: Care Coordination/Case Management/Disease Management](#)
- [Notice of Medicare Non-coverage Form](#)
- [Notice of Medicare Non-coverage Form \(Spanish\)](#)
- [Notice of Medicare Non-coverage Presbyterian Dual Plus Form](#)
- [Important Information Regarding Your Hospice Services, Presbyterian Senior Care \(HMO\) Plans 1, 2 and 3 only](#)

Fax completed Prior Authorization form to Presbyterian at:

- Prior Authorization (505) 843-3047
- Inpatient Utilization Management (505) 843-3107
- Home Health Care (505) 559-1150
- UNM Prior Authorization (505) 843-3108

- OR -

[Complete and submit Prior Authorization online](#)





Appeals & Grievances



Appeals & Grievances

- Providers have the right to file an appeal if they:
 - Are dissatisfied with a decision made by Presbyterian to:
 - Terminate, suspend, reduce or not provide approved services to a member
 - To deny payment for services
 - Disagree with any policy or adverse action made by Presbyterian
- If a provider is dissatisfied with any of Presbyterian's general operations, they may file a grievance
- Providers can access appeals and grievance information, including the Appeals and Grievances Request Form, by:
 - Clicking "Tools & Resources"
 - Selecting "Appeals & Grievances"
 - Clicking "Appeals and Grievances Form"

The screenshot shows the Presbyterian Providers website. At the top, there is a search bar and links for PHS.org and myPRES Log In. The main navigation menu includes: OUR NETWORKS, AUTHORIZATIONS, CLAIMS, FORMULARIES, TOOLS & RESOURCES, and CONTACT US. The TOOLS & RESOURCES dropdown menu is open, showing options: PROVIDER PORTALS, MEDICAL POLICY MANUAL, APPEALS & GRIEVANCES (highlighted with a red arrow), REFERENCE & GUIDES, TRAINING & EDUCATION, and HOSPITAL RESOURCES. Below the navigation, the breadcrumb trail reads: Providers | Tools & Resources | Appeals & Grievances. The main content area has a heading "Appeals & Grievance" and a sub-heading "Appeals and Grievances Form" (highlighted with a red arrow). The text explains that Presbyterian welcomes feedback and provides information on how to file an appeal or grievance. A red arrow points to the "Appeals and Grievances Form" link at the bottom of the page.



Claims and Payment



Submitting Claims

- Providers can submit claims to Presbyterian electronically or by mail
- To submit claims electronically, registration is required
- Providers can register to submit claims electronically on Presbyterian’s website by:
 - Clicking “Claims”
 - Expanding the “Submitting Claims Electronically” menu
 - Clicking “Access Fast Claim now”
 - Click “Continue” on the dialogue box that appears to inform you that you are leaving Presbyterian’s website and you will be redirected to the Claim MD to complete the Fast Claim (i.e., Claim MD) enrollment form

PRESBYTERIAN Providers

SEARCH PHS.org myPRES Log In

OUR NETWORKS | AUTHORIZATIONS | **CLAIMS** | FORMULARIES | TOOLS & RESOURCES | CONTACT US

CLAIMS

Providers | Claims

Claims

Learn more about the options available to provide quick and accurate claims processing at Presbyterian.

- + ELECTRONIC PAYMENT - PRESBYTERIAN EPAYMENT CENTER
- **SUBMITTING CLAIMS ELECTRONICALLY**

Electronic claims transmission (ECT) saves time and money and helps make the claims process as efficient as possible. Here are some other benefits of submitting claims electronically:

- The average time to process and electronic claim is seven days, compared to 14 days for paper claims.
- You save the cost of postage and paper when you submit electronically.
- Your office receives a quicker confirmation of claims receipt and integrity of the data.
- There is a higher percentage of claims accuracy, resulting in faster payment.

Fast Claim is designed to accommodate lower volume claim submitting practices that would like to submit claims electronically directly to Presbyterian at no cost. For questions, contact your relationship executive.

To learn more about ECT, please refer to the Claims Section of the Provider Manual or contact your Provider Network Management relationship executive.

Presbyterian Provider Manual

Access Fast Claim now

Presbyterian Health Plan News & Updates

Find out about the newest staff and the latest technology, and all the other happenings at Presbyterian. [Learn More](#)

Become a Presbyterian Health Plan Contracted Provider

We are committed to efficient and effective service to make healthcare administration work for you. Let's transform healthcare together. [Learn More](#)





Complete Fast Claim Enrollment Form

- Once providers fill in the Claim MD Fast Claim enrollment form, click “Enroll”
- After submitting the enrollment form, providers will receive an email with a user ID and password that they can use to log in to their Fast Claim account
- Providers can log into Fast Claim by navigating back to this page using the step previously provided or they can enter the following address in their web browser: www.claim.md/phs

PRESBYTERIAN

Fast Claim - Enrollment

Provider/Facility Name

Address 1

Address 2

City

State

Zip

NPI

Tax ID

Your Name

Your Phone

Your Email

Welcome to Presbyterian Health Plan's new direct claim entry system called *Fast Claim*!

Fast Claim takes the hassle and expense out of electronic claim submission. With *Fast Claim*, providers can submit directly to Presbyterian Health Plan in a simple and easy to use format. Enrollment only takes minutes. Save time and money and begin submitting claims electronically today through *Fast Claim*!

Existing User Login

User ID:

Password:

[\[Forgot Username\]](#) [\[Forgot Password\]](#)

Tutorials

- [How to Create a Claim. - 2min Tutorial](#)

Powered by

CLAIM MD





Presbyterian ePayment Center

- The Presbyterian ePayment Center offers a payment management solution to:
 - Eliminate paper checks and explanations of payment
 - Accelerate payments with electronic funds transfer that are directly deposited in a provider's existing bank account
 - Receive fully reconciled remittances electronically
 - Receive automated clearinghouse (ACH) claim payments and coordinate the delivery of 835 files from a selection of clearinghouses at no cost to contracted providers
- Providers can access information about the Presbyterian ePayment Center, including information about registration, on Presbyterian's website by:
 - Clicking "Claims"
 - Expanding the "Electronic Payment – Presbyterian ePayment Center" menu
- For questions, please contact our ePayment Client Services team at 1-855-774-4392 or Help@ePayment.Center

The screenshot shows the Presbyterian Providers website. At the top, there is a navigation bar with the Presbyterian logo and the word "Providers". To the right of the logo is a search bar and two buttons: "PHS.org" and "myPRES Log In". Below the navigation bar is a horizontal menu with the following items: "OUR NETWORKS", "AUTHORIZATIONS", "CLAIMS", "FORMULARIES", "TOOLS & RESOURCES", and "CONTACT US". A red arrow points to the "CLAIMS" menu item. Below the navigation bar is a large banner image with the word "CLAIMS" in large white letters. Below the banner, there is a sub-navigation bar with "Providers" and "Claims" links, and three social media icons. On the left side of the page, there is a "Presbyterian Health Plan News & Updates" section with a photo of a woman in a blue surgical cap and a "Learn More" link. On the right side, there is a "Claims" section with a sub-header "Claims" and a paragraph: "Learn more about the options available to provide quick and accurate claims processing at Presbyterian." Below this is a grey bar with a minus sign icon and the text "ELECTRONIC PAYMENT - PRESBYTERIAN EPAYMENT CENTER". A red arrow points to this bar. Below the grey bar, there is a paragraph: "Presbyterian offers electronic remittance advice/electronic funds transfer (ERA/EFT) transactions at no charge to contracted medical providers. Providers may enroll in Presbyterian's electronic payment (ePayment) portal by visiting the following link." Below this paragraph is a link "Online Registration" with a right-pointing arrow icon. A red arrow points to this link. Below the link is another paragraph: "Should providers have any questions about this service, or should they require additional assistance, they may contact our ePayment Client Services team at 1-855-774-4392 or by email at Help@ePayment.Center". Below this paragraph is a link "More information about how to register" with a right-pointing arrow icon. A red arrow points to this link.





Billing Information



Billable Codes

The codes identified on the right are billable for reimbursement when claims are submitted with taxonomy code 163WH0200X, according to the New Mexico Human Services Department (HSD) [Letter of Direction #1-1](#), “Guidance for CHV Program Implementation, Statewide.”

PROCEDURE CODES:

The provider type 317 will bill on the professional claim type using the approved procedure codes and modifiers as well as ICD diagnosis codes listed below to identify the services rendered. Three different procedure codes will be used to distinguish between the three service types. For each of the procedure codes, modifiers will be used to indicate whether the visit is performed by a nurse under the NFP model or by a non-nurse home visitor under the PAT model. The current reimbursement rate for each code is listed after each code.

Prenatal Home Visit

H1005 Prenatal care, at-risk enhanced service package (include management, coordination, education, follow-up home visit)

| | | |
|----------|-------------------------------|----------|
| H1005 U1 | Nurse Home Visitors (NFP) | \$314.94 |
| H1005 U2 | Non-Nurse Home Visitors (PAT) | \$244.02 |

ICD Code Z34.9: Encounter for supervision of normal pregnancy, without the fifth digit to signify the pregnancy trimester

Postpartum Home Visit to be billed on a parent’s claim:

S5111 Home Care Training, Family per session

| | | |
|----------|-------------------------------|----------|
| S5111 U1 | Nurse Home Visitors (NFP) | \$314.94 |
| S5111 U2 | Non-Nurse Home Visitors (PAT) | \$244.02 |

ICD Code:

Z39.2 Encounter for routine postpartum follow-up (NFP)

Z32.3 Encounter for childcare instruction (PAT)

Infant Home Visit to be billed on an infant/child’s claim:

S9445 Patient Education, non-physician provider, individual, per session

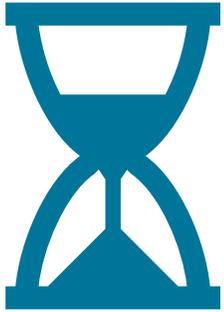
| | | |
|----------|-------------------------------|----------|
| S9445 U1 | Nurse Home Visitors (NFP) | \$314.94 |
| S9445 U2 | Non-Nurse Home Visitors (PAT) | \$244.02 |

ICD Code Z76.2: Encounter for healthy supervision and care of other healthy infant and child





Avoiding Common Billing Errors and Claim Denials



Timely Filing

- To avoid a denial due to timely filing, all clean claims must be submitting within 90 days from the date of services
- Claims submitted after 90 days from the date of service will result in a denial due to timely filing and proof of filing a timely clean claim will be required to process the claim
- Providers will have one year (12 months) from the date of service to submit a corrected claim (i.e., any initial clean claim that was already received and processed)



Incorrect Billing

- To avoid incorrect billing, fill out all areas on the claim form and always ensure the following are correct:
 - Name
 - Date of birth
 - Subscriber ID **for the correct line of business**
 - Taxonomy code



Resource Links



Resource Links

- **Authorizations:** www.phs.org/providers/authorizations.
- **Claims:** www.phs.org/providers/claims
- **Fast Claim (Claim MD):** www.claim.md/phs
- **HSD Registration:**
<https://nmmedicaid.portal.conduent.com/webportal/enrollOnline?lastNodeClicked=801>
- **HSD Managed Cared Policy Manual:** www.hsd.state.nm.us/wp-content/uploads/2020/12/Centennial-Care-Managed-Care-Policy-M.pdf
- **Letter of Interest:** www.phs.org/providers/our-networks/health-plan/Pages/letter-of-interest.aspx
- **myPRES Registration:** www.phs.org/mypres
- **myPRES Provider Portal User Guide:**
https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=pe_00064985
- **Presbyterian ePayment Center Registration:** <https://presbyterian.epayment.center/registration>
- **Presbyterian Provider Manuals:** www.phs.org/providermanual





Questions?