



## NHC ADVANTAGE PLAN PROVIDER BILLING GUIDE

NHC Advantage HMO SNP is a Medicare Advantage Institutional Special Needs Plan designed to improve the care for the residents living in one of our contracted Nursing Centers. Our Members are all institutionalized Medicare beneficiaries who live in a Nursing Home for 90 days or longer.

We are a provider-owned plan with a commitment to our Members and the network of physicians, hospitals, and other healthcare professionals who take care of our Members. Let us know if you see things that we are doing well, have ideas for improving our plan, or notice areas where we need to do better.

If you would like to become a NHC Advantage plan provider, please reach out to the customer service number listed below or your plan representative and we will be happy to send you our Provider Agreement and Credentialing Packet.

### **Have Questions?**

Phone: 844-854-6886

Fax: 833-610-2390

Web: [www.nhcadvantageplan.com](http://www.nhcadvantageplan.com)

### **Claims Submission**

NHC Advantage strongly encourages providers to submit claims electronically and to check the status of claims electronically. While NHC Advantage prefers electronic submission of claims, both electronic and paper claims are accepted.

Providers will need to sign up to submit claims electronically and for electronic remittance. Once enrolled, providers can submit claims directly through our clearinghouse or through their current system and receive payments electronically. Providers can contact customer support at 800-356-0092 or visit SSI Claimsnet website via the website address below.

Website address: <https://thessigroup.com/>

Information is also available on the Providers & Partners page of the NHC Advantage website at [www.nhcadvantageplan.com](http://www.nhcadvantageplan.com).

For those providers submitting paper claims, all completed claims forms should be forwarded to the address noted below:

NHC Advantage

PO Box 21593

Eagan, MN 55121

### **Timely Filing**

NHC Advantage requires providers submit all claims within twelve months from the date of service.

Claim Format Standards Standard CMS required data elements must be present for a claim to be considered a clean claim and can be found in the CMS Claims Processing Manuals. The link to the CMS Claims Processing Manuals is:

<https://www.cms.gov/manuals/downloads/clm104c12.pdf>.

For other questions, please refer to [www.nhcadvantageplan.com](http://www.nhcadvantageplan.com).



**Physician Responsibilities**

You must treat NHC Advantage customers the same as all other patients in your practice, regardless of the type or amount of reimbursement. You may not balance bill a customer for providing services that are covered by NHC Advantage. This excludes the collection of standard copays. You may bill a customer for a procedure that is not a covered benefit if you have followed the appropriate procedures outlined in the Claims section of Provider Manual.

**Provision of Healthcare Services**

Participating providers shall provide health care services to all customers, consistent with the benefits covered in their policy, without regard to race, ethnicity, national origin, religion, sex, age, mental or physical disability or medical condition, sexual orientation, claims experience, medical history, evidence of insurability (including conditions arising out of acts of domestic violence), genetic information, source of payment, or any other bases deemed unlawful under federal, state, or local law.

Participating providers shall provide covered services in a culturally competent manner to all customers by making a particular effort to ensure those with limited English proficiency or reading skills, diverse cultural and ethnic backgrounds, and physical or mental disabilities receive the health care to which they are entitled.

Examples of how a provider can meet these requirements include but are not limited to: translator services, interpreter services, teletypewriters or TTY (text telephone or teletypewriter phone) connection.

NHC Advantage offers interpreter services and other accommodations for the hearing-impaired. Translator services are made available for non-English speaking or Limited English Proficient (LEP) customers. Providers can call NHC Advantage customer service at 844-854-6886 to assist with translator and TTY services if these services are not available in their office location.

<b>Getting started as a provider in NHC Advantage</b>	
<p><b>STEP 1:</b>  <a href="#">Sign up for Electronic Billing and Payment</a></p>	<p>You can submit claims directly through our clearinghouse or through your current system and receive your payments electronically, but you need to sign up!</p> <p>Download a companion guide and sign-up form at: <a href="https://thessigroup.com/">https://thessigroup.com/</a></p> <p>Our Payer ID is:  <b>NHC Advantage - NHC01</b></p>
<p><b>STEP 2:</b>  <a href="#">Setup your office staff on our Provider Portal</a></p>	<p>NHC Advantage has a Provider Portal that allows you to submit authorization requests, inquire on the status of an authorization or claim, and verify member eligibility/benefit utilization.</p> <p>Get connected here: <a href="https://planprovportal.align-360.com/ez-net60NHC/login.aspx">https://planprovportal.align-360.com/ez-net60NHC/login.aspx</a></p>
<p><b>STEP 3:</b>  <a href="#">Understand our Authorization Process</a></p>	<p>Prior authorization is designed to promote the utilization of medically necessary services, to prevent unanticipated denials of coverage, to ensure that participating providers are utilized, and that all services are provided at the appropriate level of care for the member’s needs. Primary Care Physicians and Nurse Practitioners are actively involved with all referrals and treatment recommendations and should be notified of recommendations prior to submitting requests for prior authorization.</p> <p>A complete list of services that require authorization can be found on the website here: <a href="https://nhcadvantageplan.com">NHC Advantage Authorization/Referral Chart (nhcadvantageplan.com)</a></p>



**STEP 4:**  
Learn More!

The NHC Advantage Provider Manual is an easy reference document for all things related to the Plan - Member Rights, Provider Responsibilities, Claims Payment, Appeals and Grievances, Utilization Review, and more.

Read the manual and Print a copy for your office here: [2020 NHC Provider Manual \(nhcadvantageplan.com\)](https://nhcadvantageplan.com)

**Please contact us with your questions: 1-844-854-6886**