



## **Section 2 - Contacting CCHCA**

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## Contacting CCHCA

**Administrations Office:** 445 Grant Avenue, Suite 300, San Francisco, CA 94108

**Provider and Member Relations Office:** 823 Jackson St., San Francisco, CA 94133

**Main Phone:** 415-216-0088

**Fax:** 415-216-0092

Please contact CCHCA Administration for matters relating to:

- CCHCA physician membership
- Notification of changes to your provider information, including changes in office locations, tax ID number, billing address or telephone numbers
- Questions about CCHCA policies, guidelines or information in this Handbook
- Notification regarding mid-level practitioners, locum tenens or covering physicians
- Requesting login information for the CCHCA’s Provider Portal
- Inquiries about electronic health records (EHR) implementation

CCHCA Departments		Phone	
Provider Relations	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
Member/Patient Relations		415-216-0088	Option 2
Member/Patient Eligibility		415-216-0088	Option 3
Utilization Management		415-216-0088	Option 4
Claims		415-216-0088	Option 5
Accounting	<a href="mailto:Accounting.Dept@cchca.com">Accounting.Dept@cchca.com</a>	415-216-0088	Option 6
Health Information Technology	<a href="mailto:HITSupport@cchca.com">HITSupport@cchca.com</a>	415-216-0088	Option 7
Central Billing Division	<a href="mailto:CBD@cchca.com">CBD@cchca.com</a>	415-216-0088	Option 8
Human Resources	<a href="mailto:Human.Resources@cchca.com">Human.Resources@cchca.com</a>	415-216-0088	Option 9
Compliance Hotline	<a href="mailto:Cathy.Chan@cchca.com">Cathy.Chan@cchca.com</a>	415-216-0095	

Common Inquiries / Topics		Phone	Ext.
CCHCA Physician Membership	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
Notification of Practice Changes	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
Changes to Locum Tenens or Covering Physicians	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
CCHCA Physician Handbook	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
CCHCA Physician Directory	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
CCHCA Newsletters	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 1
Fraud, Waste, Abuse Training	<a href="mailto:Provider.Relations@cchca.com">Provider.Relations@cchca.com</a>	415-216-0088	Option 9
CCHCA Compliance Handbook and Policies	<a href="mailto:Cathy.Chan@cchca.com">Cathy.Chan@cchca.com</a>	415-216-0095	



## **CCHCA Website ([www.CCHCA.com](http://www.CCHCA.com))**

Physicians may access a variety of information on CCHCA’s website at [www.CCHCA.com](http://www.CCHCA.com). The site offers information on CCHCA in-network physicians (through our online directory) and health resources for patients. CCHCA also provides access to a provider portal that provides information on certain sections in the website requires a username and password. To obtain a username and password, please contact CCHCA Provider Relations.

## **Notification of Physician Status and Practice Changes (including notification for Locum Tenens and Covering Physicians)**

Please notify CCHCA in writing regarding changes of address, phone numbers and related information with as much advance notice as possible. Physicians must provide CCHCA with written notice for any changes in status and practice changes 120 days prior to the effective date of changes. This include any changes to Locum Tenens Physicians and Covering Physicians. Please fax or mail written notices to CCHCA at the fax number or address listed under the “Contacting CCHCA” section.

## **Notify CCHCA of Mid-Level Practitioners in Your Practice**

Mid-level Practitioners are defined as and include the following certifications:

- Certified Nurse Practitioner
- Physician Assistant
- Certified Nurse Midwife
- Advance Practice Nurse
- Clinical Mental Health Nurse Specialist
- LCSW
- Certified Clinical Nurse Specialist
- Audiologist
- Physical Therapist
- Occupational Therapist
- Speech Therapist
- Psychologist
- Psychiatric Nurse
- MFCC
- Optometrist

Physicians who employ mid-level practitioners must adhere to the following requirements:

- All mid-level practitioners and/or licensed providers rendering care to CCHCA patients must be report to CCHCA and complete CCHCA’s credentialing process.
- Supervising physicians must complete and submit a Supervisory Agreement indicating the scope of work that will be carried out by the mid-level practitioner.
- Services provided by mid-level practitioners or licensed providers must be billed using their individual National Provider Identifier (NPI) number.
- Only services provided by a CCHCA physician can be billed under the physician’s name and NPI.



The credentialing process includes a request for the name(s), license number(s), and the completion of a Credentialing Application for Mid-level Practitioners employed by CCHCA physicians. If you are not sure whether a practitioner in your office has completed CCHCA’s credentialing process, please contact CCHCA’s Provider Relations Department.

**Notification of Contract Termination or Resignation**

Physicians who want to terminate their CCHCA Provider Agreement **must provide CCHCA with 120 calendar days advance written notice prior to the effective date of the termination.** This includes physicians who are retiring or closing their practices. The 120 days advance notice allows CCHCA to notify contracted health plans of a physician’s termination from CCHCA’s network and will allow health plans to notify patients assist them in transitioning care to another in-network physician or to ensure that those who may be eligible to continue receiving care from the terminating provider for a designated period of time are notified in accordance with state law. Notice of resignation or termination of your Provider Agreement, must be faxed or mailed to CCHCA at the fax number or address listed under the “Contacting CCHCA” section.

**CCHCA’s Management Services Organization (MSO)**

CCHCA currently delegates specific functions to Excel MSO, LLC. On behalf of CCHCA, Excel MSO, LLC acts as our Management Services Organization (MSO) in areas such as:

- Utilization Management (UM)
- Authorizations
- Claims Processing,
- Provider Disputes
- Credentialing

It is very important to understand the relationship between CCHCA and Excel MSO, LLC as the MSO may reach out to your practice for issues related to the delegated functions mentioned above. Additional information regarding how to contact our MSO will be explained in following sections of this handbook.

**Contacting CCHCA Contracted Health Plans for Patient Eligibility**

Member eligibility should always be verified by all physician offices prior to providing medical services. A patient’s insurance ID card is not necessarily proof of eligibility, and benefits/copayments may vary. All health plans also offer online eligibility verification on their Websites. The following is a list of the contracted health plans you will be affiliated with through our medical group. Physician offices may contact the health plans for information on accessing online eligibility and benefits.

Verify Member Eligibility and	Website	Phone
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<b>Benefits</b>		
San Francisco Health Plan (SFHP)	<a href="http://www.sfhp.org">www.sfhp.org</a>	415-547-7818