



Part I Section 2

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Contacting Chinese Community Health Care Association

Please contact Chinese Community Health Care Association Administration for matters relating to:

- CCHCA physician membership,
- Questions about CCHCA policies and guidelines or information in this Handbook,
- Notification of changes to your provider information, including changes in office locations, tax ID number, billing address or telephone numbers,
- Notification regarding mid-level practitioners, locum tenens or covering physicians,
- Requesting a username and password for the physician intranet at www.cchca.com
- Inquiries about electronic health records implementation, and
- Other matters relating to your CCHCA physician membership.

445 Grant Avenue, Suite 300, San Francisco, CA 94108
Main Phone: 415-216-0088 FAX: 415-216-0092

CCHCA Departments			Phone	
Provider Relations		Provider.Relations@cchca.com	415-216-0088	Option 1
Health Information Technology		HITSupport@cchca.com	415-216-0080	Option 3
Accounting		Accounting.Dept@cchca.com	415-216-0088	Option 4
Central Billing Division		CBD@cchca.com	415-216-0088	Option 6
Compliance Hotline		Cathy.Chan@cchca.com	415-216-0095	
Physician Membership Administration			Phone	Ext.
CCHCA Physician Membership Inquiries			415-216-0088	0
Notification of Changes (Address, Phone, Tax ID Numbers, Billing Address, etc.)			415-216-0088	0
Notification of Locum Tenens or Covering Physicians			415-216-0088	0
CCHCA Physician Handbook		www.cchca.com		
CCHCA Physician Directory		www.cchca.com		
CCHCA Newsletters		www.cchca.com		
Fraud, Waste, Abuse Training		www.cchca.com		
CCHCA Compliance Handbook and policies		www.cchca.com		

www.cchca.com – What’s on the CCHCA Web site?

Physicians may currently access a variety of physician membership and administrative information on CCHCA by visiting our website at www.cchca.com. The site offers information on CCHCA in-network physicians the CCHCA Physician Handbook, monthly newsletters, health resources for patients, ICD-10 code & CPT code lookup, CCHCA involvement with community organizations, CCHCA Annual Community Grants Program and CCHCA compliance Handbook and policies.



Access to 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 Changes, including Locum Tenens and Covering Physicians

Physicians must provide CCHCA with 120 days written notice of changes in status including the names of Locum Tenens Physicians and Covering Physicians. Please Fax or mail written notice to CCHCA at the fax number and address listed above. Please notify CCHCA in writing of changes of address, phone numbers and related information with as much advance notice as possible.

Mid-level Practitioner's Services

Physicians who employ mid-level practitioners such as nurse practitioners, physician assistants, or those who have licensed providers like physical therapists, optometrists, etc., must adhere to the following requirements:

1. All mid-level practitioners and/or licensed providers rendering care to CCHCA patients must be credentialed.
2. Services provided by mid-level practitioners or licensed providers must be billed using their individual National Provider Identifier (NPI) number.
3. 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 names and license numbers of health professionals employed by CCHCA physicians. To ensure CCHCA is compliant in this area, please make sure that all health professionals in your office have been credentialed. If you are not sure whether all health care practitioners in your office have been credentialed, please contact CCHCA.

Notification of Contract Termination – Resignation from CCHCA

Physicians who want to terminate their CCHCA Medical Service Agreement must provide CCHCA with 120 calendar days advance written notice. 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 Medical Group. Such notice is required to allow timely notification of Health Plan Members to assist them in transitioning care to another in-network physician, and 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.

To submit your resignation and terminate your Medical Service Agreement, please fax or mail a written notice, at least 120 days in advance of the termination date to CCHCA.



CCHCA’s Third Party Administrator: CCHP

As your Medical Group, CCHCA provides many resources that are made available to you to help you succeed at your practice. CCHCA currently delegates specific functions to CCHP. CCHP acts as our Third Party Administrator (TPA) in areas such as Member Services, Utilization Management & Authorizations, Claims & Billing, and Provider Disputes. These functions are performed by CCHP **ON BEHALF** of CCHCA.

It is very important for you to understand the organization and how to access these resources when you need assistance. You can refer to the contact information that is listed below:

Responsibilities delegated to our TPA (CCHP):

Member Services		Phone	Ext.
General Questions	Member Services	415-834-2118	
Claims & Billing			
Check Claims Status / Inquiries	https://www.cchphealthplan.com/cchp-providers-eligibility-inquiry	415-955-8800	3322
Submit Electronic Claims	Clearinghouse: Emdeon one Payer ID Number: 94302		
Submit Paper Claims	Claims Department/CCHCA 445 Grant Avenue, Suite 700 San Francisco, CA 94108		
Provider Disputes			
Obtain Provider Dispute Forms and Instructions	www.cchca.com	415-955-8800	3215
Submit a Provider Dispute	Provider Disputes/CCHCA 445 Grant Avenue, Suite 700 San Francisco, CA 94108	415-955-8800	3215
Disputes must be submitted using Dispute Form			
Prior Authorization			
Request Prior Authorization	Fax Service Authorization Form to: >	415-398-3669	FAX
Service Authorization Questions	UM Department **	415-955-8800	3289
View Authorizations Online	https://www.cchphealthplan.com/cchp-providers-eligibility-inquiry		

** Providers may contact the UM Department for information regarding Utilization Management at 415-955-8800 or toll-free at 888-775-7888. The UM Department is available Monday through Friday, between 8:30AM to 5:00PM.



Contacting CCHCA Contracted Health Plans

As a participating physician of CCHCA, the following is a list of the contracted health plans and programs that you will be affiliated with through our medical group.

Member eligibility should always be verified by all physician offices. The membership card is not necessarily proof of eligibility. **Because member eligibility and co-payments are subject to change, physician offices should contact the applicable health plan directly to get the most updated information on member eligibility, benefits, or co-payments.** All health plans offer online eligibility verification on their Websites. Physician offices should contact the health plans for information on accessing online eligibility and benefits.

Verify Member Eligibility and Benefits	Web site	Phone
Aetna Members	www.aetna.com	800-624-0756
Anthem Blue Cross HMO Commercial Members	www.anthem.com	800-677-6669
Anthem Blue Cross Medi-Cal Members		800-407-4672
Blue Shield Members	www.blueshieldca.com	800-676-2583
Chinese Community Health Plan Members	www.cchphealthplan.com	415-834-2118
Health Net Members	www.healthnet.com	800-336-4230
UnitedHealthcare Members	www.uhcwest.com	800-542-8789
San Francisco Health Plan Members	www.sfhp.org	415-547-7810