



Simpra Billing Training

Updated July 2019



Claims Processing



- 1. Claims are processed using a system certified by Medicare.**
- 2. We use the same fee schedule and payment algorithms as Original Medicare.**
- 3. The Deductibles, Coinsurance and Copays work exactly like Medicare.**
- 4. There is NO Sequestration deduction for In-Network Providers.**
- 5. Your Part A SNF claims will be processed using RUGS.**
- 6. Maintain your MDS processes exactly as you do today!**

Simpra Advantage follows all Medicare guidelines in regard to timely filing requirement (12 months from date of service)

Cannot bill future dates of service

Bill Simpra Advantage as you would bill Medicare in 30 day increments

Acceptable claim forms:

CMS 1500 for Professional Claims

UB04 for Facility Claims

Claims Submissions

Electronic:

You can submit claims directly through our clearinghouse or through your current system and receive your payments electronically, but you need to sign up!

Notify your Claims Clearinghouse that you will be billing Simpra Advantage and our clearinghouse is ExchangeEDI.com

Our Payer ID is: SIM01

Paper:

Send Paper Claims to:

Simpra Advantage

PO Box 908

Addison, TX 75001-0908

EZNet

Go to <https://planprovportal.align-360.com/ez-net60Simpra/login.aspx>

The Provider Portal allows Providers access to:

- 1) Submit Authorization and Claim Requests directly into the Claims Processing System
- 2) Inquire on the Status of an Authorization and Claim
- 3) Verify Member Eligibility
- 4) Look up Procedure Codes, Diagnosis Codes and Other General Reference Information

Training Webinar

<https://planprovportal.align-360.com/ez-net60SIMPRA/ConfigFiles/Training%20presentation.mp4>

Step by Step instructions on setting up your access and navigating the functions within EzNet.

Simpra Call Center:

1-(844) 637-4770

Option 1 Member

Option 2 Enrollment

Option 3 Utilization Management

Option 4 Provider Services

Option 5 Provider Enrollment

Payments

Payments are made every 2 weeks.

- 835s, RAs and Payments will be sent within 30 days of claim received date per Medicare requirements for all claims paid or denied with explanation of status
- Explanation of Benefits will be provided to all members

Authorizations Required for:

Authorization and Referral Chart

A:Authorization required; R:Referral required; N:No Authorization or referral required; Blank:N/A; *: See notes	Simpra Advantage ISNP
Inpatient Hospital Acute	A
Inpatient Hospital Psychiatric	A
SNF	A
Cardiac/pulmonary Rehabilitation Services	A
Partial Hospitalization	A
Home Health Services	A
Chiropractic	A
Occupational Therapy Services	A
Specialist	N
Mental Health Services	A
Podiatry	N
Other Healthcare Professionals	A & R
Psychiatric Services	N
Physical Therapy and Speech Pathology	A
Outpatient Diag. Procs/Tests/Labs	A
Outpatient Diag./Therapeutic Radiology	A
Outpatient Hospital	A

Authorization and Referral Chart

A:Authorization required; R:Referral required; N:No Authorization or referral required; Blank:N/A; *: See notes	Simpra Advantage ISNP
ASC	A
Outpatient Substance Abuse	A
Outpatient Blood Services	N
Ambulance-Non-medical emergency	A
Transportation	
DME	A
Prosthetics/Medical Supplies	A
Diabetic Supplies/Services	N
Dialysis	A
Kidney Disease Education	N
Glaucoma Screening	N
Diabetes Self-Management Training	N
Other Preventative Services	N
Certain Medicare Part B Drugs	A
Preventative Dental	
Comprehensive Dental	A
Eye Exams	N
Eyewear	N
Hearing Exams	N
Hearing Aids	N
Certain Prescription Drugs	A