

Questions? Call Shannon Glass, 317.575.7505

Claim Submission for Advantage

*Please mail all claims to: **Suburban Health Organization**
PO Box 502530
Indianapolis, IN 46250

Claims Must Be Billed Within 120 Days for SHO/CMO/St. Joseph. Follow-up on claims at least every 180 days.

If a clean claim is not submitted within 120 days of the date of service, the claim will be denied. If the claim was submitted timely, but CMCS did not receive the claim, please provide proof of filing the claim with the subsequent claim submission.

Follow-up on all claims must be done at least every 180 days to be considered for a payment or an adjustment.

Electronic Claim Submission

Suburban Health Organization is currently able to accept electronic claims for M•Plan and Advantage members from McKesson, RealMed, E-Health, and Emdeon (formerly known as WebMD). In order to submit claims electronically to Suburban, please enroll by calling the EDI enrollment coordinator at (800) 352-7502, or emailing EDICoordinator@cmcs-indy.com.

Refund Checks for Advantage

Mail to: **Suburban Health Organization**
PO Box 502530
Indianapolis, IN 46250

*Please enclose a copy of the EOP or a letter with the member's name, date of service, provider, claim number, and an explanation of your request along with the refund check.

Eligibility Verification, Benefit Questions

Prior authorization approvals are only for medical necessity and do not guarantee payment. For eligibility and benefit questions contact:

Advantage Member Services 317.573.6228 or 800.553.8933

Contact Information

Medical Management/UR

317.570.9999 or 866.482.5254
(Fax) 317.570.6820 or 866.482.3482

CMCS Customer Service

317.596.5929 or 866.873.4516
(Claims questions) (Fax) 317.570.6822

To check claim status online, please visit www.cmcs-indy.com and click on "Online Provider Claim Status Inquiry".

Effective March 5, 2007, REFERRALS to a Specialist to any SHO PHO network is no longer required. Prior authorization is required for an out of network provider. ie. Clarian Specialist

A specialist cannot refer to another specialist. If a referral to another specialist is required, the PCP must be contacted.

Prior Authorization Requirements

The physician who is ordering the test or services is responsible for obtaining prior authorization. If the patient is seeing a specialist, it is the specialist's responsibility to obtain prior authorization. Please use the Inpatient/Outpatient **Prior Authorization Form**. Please refer to the complete list of the outpatient surgeries, outpatient services, and procedures by code that requires prior authorization on our website at www.suburbanhealth.com

You may call Medical Management at 317.570.9999 or 866.482.5254 or fax to 317.570.6820 or 866.482.3482. **Reminder**, Medical Management response policy allows 24 hours to respond to urgent requests and 48 for non-urgent requests.

Biotech/ JCode Authorization requirements

Authorization for Advantage members can be obtained by calling Suburban Health Organization at 317.570.9999 or 866.482.3482. A copy of the Biotech/Jcodes authorization requirements can be found at www.suburbanhealth.com under forms.

SuburbanHealth Organization

Ancillary Network Providers

Ancillary providers will follow the prior authorization requirements located on the provider website, www.suburbanphysician.org. Click on forms to obtain the complete listing.

Emergency Room and Urgent Care Prior Authorizations No longer required effective March 5, 2007

Laboratory and Radiology

- **SHO Networks:** For services not performed in your office, you must use your network PHO hospital. For Services not available at your network PHO hospital, contact Medical Management.
- **CMO Network:** For Lab, use Mid-America Clinical Laboratories or an in-network CMO Hospital. For Pathology, use Cytology Pathology Services, MACL, Ameripath or the in-network CMO hospital. For Radiology, use Northwest Radiology or an in-network CMO hospital.
- **St. Joseph Network:** For Lab, use St. Joseph Hospital or Mid-America Clinical Laboratories. For Pathology, use St. Joseph Hospital, Cytology Pathology Services, or Mid-America Clinical labs. For Radiology, use St. Joseph Hospital. For MRI or PET scans, use Imaging Center of North Central Indiana.

Mental Health – Patients may self refer.

For Advantage: Midwest Behavioral Health Network 800.223.6246

Provider Demographic Changes

Written documentation is required for the following changes:

- *Office address, phone number, or fax number changes
- *Billing address and tax id changes
- *Dismissal of a member
- *Termination of a provider: PCP 90 day notice
SPC 60 day notice
- *Adding an additional practice location
- *Adding an additional billing corporation
- *Adding an additional physician to your practice interested in joining Suburban Health Organization
- *For PCPs, any panel status changes
- *Any extended leave that requires a covering physician

Please mail to: **Suburban Health Organization**
Attn: Provider Network Management
2780 Waterfront Parkway, East Drive, Ste. 300
Indianapolis, IN 46214

St Vincent Physician to Physician Referral Line:

Call the Physician to Physician line for non-emergent outpatient appointment access.

The Adult and Pediatric Referral line: 1.866.STV-DOCS