Provider Claims and Reimbursement
Quick Reference Guide – Regions 3, 5 and 6

Key Points:

- **All services** require a prior authorization from TriWest Healthcare Alliance to prevent claims denials.
- Medical documentation must be submitted to TriWest, and claims must be submitted to WPS Military and Veterans Health (WPS MVH), TriWest’s claims processor.
- Claims should be submitted within 30 days after services have been rendered but never later than 180 days.
- Providers will collect no copays, cost-shares, or deductibles. Providers will be paid for all authorized care according to their Patient-Centered Community Care (PC3) contract or the Veterans Choice Program (VCP) terms and conditions.
- According to 38 C.F.R. 17.55 and 38 C.F.R. 17.56, payments made by TriWest on behalf of the Department of Veterans Affairs (VA) to a non-VA facility or provider shall be considered payment in full. Providers may not impose additional charges to TriWest or the Veteran for services that have been paid by VA.
- Providers may upload medical documentation and check the status of submitted claims by registering for a secure account on the TriWest Provider Portal at [www.triwest.com/provider](http://www.triwest.com/provider).

To find your Payer ID or Trading Partner ID for submitting electronic claims, please review the Clearinghouse Lookup tool on TriWest’s Provider-Billing page.

Follow These Steps to Submit Claims:

1. **Upload Medical Documentation to TriWest Provider Portal**
   - Register for a secure account on TriWest’s Provider Portal at [www.TriWest.com/provider](http://www.TriWest.com/provider) and upload medical documentation directly to TriWest. TriWest submits documentation to VA.
   - Documents up to 25 MB can be uploaded in PDF or TIF format.
   - For details on what types of medical documentation to include, as well as timeframes for submitting, review our Medical Documentation Quick Reference Guide.
   - If your practice is unable to access the Provider Portal, fax medical documentation to TriWest at 1-866-259-0311.

2. **Submit Claims to WPS MVH**
   - TriWest uses WPS MVH for all claims processing. After submitting medical documentation to TriWest, submit claims either electronically or via mail.

[View a map of PC3 and VCP Regions](#)
For claims or reimbursement questions, call WPS MVH: 855-722-2838, Option 3, Option 3.

Timely Filing:

- PC3 and VCP programs have a 180-day timely filing requirement. Providers must submit initial claims within this timeframe.
- For a claim appeal, providers have 90 days from the date of the denial/remittance advice to re-submit or appeal (details in the chart below).
- For a claim paying secondary to Other commercial Health Insurance (OHI), providers have 90 days from the date on the primary commercial payer’s remittance advice to submit a claim.

*Please note: As of April 2017, VA eliminated preliminary OHI submission requirement for PC3 and VCP. All claims should be submitted to TriWest as the primary payer. VA community care programs can never pay secondary to any government program, such as TRICARE, Medicare or Medicaid.*

*Claims denied for timely filing cannot be billed back to the Veteran or VA.*

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### Provider Reimbursement Details

<table>
<thead>
<tr>
<th>Provider Reimbursement Details</th>
<th>Details</th>
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<tbody>
<tr>
<td>VA-Authorized Care</td>
<td>No payment will be made to a provider for unauthorized services rendered to Veterans; services must be pre-authorized by VA and TriWest.</td>
</tr>
<tr>
<td>Provider Tools</td>
<td>For more information on billing and claims, please register for one of TriWest’s Billing Webinars. The enrollment form, along with TriWest’s Provider Handbook and additional tools, are available on <a href="#">TriWest’s Provider Portal</a> and on Availity.com. Providers can register for a secure account to allow for document uploads and downloads on TriWest’s Provider Portal at <a href="http://www.triwest.com/provider">www.triwest.com/provider</a>. Providing can check the status of submitted claims by logging into their secure account on the Provider Portal.</td>
</tr>
<tr>
<td>Reimbursement Methodologies</td>
<td>Reimbursement rates and methodologies are subject to change per VA guidelines. Provider reimbursement follows current Centers for Medicare and Medicaid (CMS) fee schedule and pays at the contractual allowed amount of this rate; If CMS does not define a rate, rate defaults to <a href="#">VA Fee Schedule</a>; this VA rate is established by a servicing VA medical center (VAMC). VAMC may establish rates for frequently billed codes with no Medicare rate, targeting the 75th percentile. If VA does not define a rate, rate defaults to the Usual and Customary Rate (UCR) defined by FAIR Health (<a href="https://www.fairhealth.org/">https://www.fairhealth.org/</a>); If no UCR is defined, providers are paid at the contractual percentage of reasonable billed charges.</td>
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[View a map of PC3 and VCP Regions](#)
### Payment in Full

According to 38 C.F.R. 17.55 and 38 C.F.R. 17.56, payments made by VA to a non-VA facility or provider shall be considered payment in full. Accordingly, the facility or provider, or the agent for the facility or provider may not impose any additional charge for any services for which payment is made by VA to either TriWest or the Veteran beneficiary.

### Copays, Cost-Shares and Deductibles

- Providers will collect no copays, no cost-shares, no deductibles.
- Providers are paid 100% of the allowed amount for authorized care according to their PC3 contract or VCP agreement.

### Claims Appeals and correspondence

- Submit appeals and correspondence in support of a claim via mail to: WPS MVH-VAPCCC, PO Box 14491, Madison, WI 53708-0491.
- Appeals must be submitted within 90 days of receipt of the Explanation of Benefits or Remittance Advice.

### Claims Submission on Paper

- Paper claims should be submitted by mail to: WPS MVH-VAPCCC, PO Box 7926, Madison, WI 53707-7926.
- Do not submit medical documentation to WPS MVH along with claims. WPS MVH cannot transmit these to either TriWest or VA.
- Paper claims submitted on non-compliant forms, or which are hand-written and cannot scan cleanly, may be rejected by WPS MVH.
- To minimize OCR errors, use a 10-point Courier or Courier New 10 mono-space font with a 10-pitch setting. Don’t mix fonts or use italics, script, percent signs, question marks, or parentheses.
<table>
<thead>
<tr>
<th>Electronic Transaction Trading Partners: Clearinghouses, Billing Services</th>
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<tr>
<td>Providers may submit electronic claims via any software, clearinghouse or billing service which is a WPS Health Solutions approved Trading Partner for PC3 and/or VCP electronic claims submission.</td>
</tr>
<tr>
<td>Availity's Basic Clearinghouse option allows providers to submit claims without an additional charge to the provider. Register for a free account at <a href="http://www.availity.com">www.availity.com</a>.</td>
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<tr>
<td>A list of <strong>Trading Partner IDs</strong> is available from WPS Health Solutions at: <a href="https://wpshealth.com/resources/files/edi-va-connection.pdf">https://wpshealth.com/resources/files/edi-va-connection.pdf</a> and on TriWest's Provider-Billing page in our Clearinghouse Lookup tool: <a href="https://vapccc.triwest.com/PCCCWeb/index.html#/provider-billing">https://vapccc.triwest.com/PCCCWeb/index.html#/provider-billing</a>.</td>
</tr>
<tr>
<td>A list of <strong>Payer IDs</strong> is available from WPS Health Solutions at: <a href="http://www.wpshealth.com/resources/provider-resources/edi/index.shtml">http://www.wpshealth.com/resources/provider-resources/edi/index.shtml</a> and on TriWest's Provider-Billing page in our Clearinghouse Lookup tool: <a href="https://vapccc.triwest.com/PCCCWeb/index.html#/provider-billing">https://vapccc.triwest.com/PCCCWeb/index.html#/provider-billing</a>.</td>
</tr>
<tr>
<td>If you cannot find your clearinghouse in the links above, please contact them to verify they submit claims to WPS Health Solutions for these Veteran programs.</td>
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<tr>
<td>WPS Health Solutions also offers PC-Ace Pro32, a proprietary software that creates a patient database and allows your office to submit electronically to WPS MVH. Visit <a href="https://wpshealth.com/resources/provider-resources/edi/software.shtml">https://wpshealth.com/resources/provider-resources/edi/software.shtml</a>.</td>
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<tr>
<td>For additional training on electronic transactions and enrollment, please review TriWest's tutorial on Electronic Transactions Enrollment.</td>
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<tr>
<th>Missing Claims</th>
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<tr>
<td>You can verify receipt of claims, confirm that the claim is in process and check on status via TriWest's secure Provider Portal.</td>
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<tr>
<td>For electronic claims, please allow up to two weeks for the receipt status to register in the WPS MVH and TriWest systems.</td>
</tr>
<tr>
<td>For paper claims, please allow up to three weeks for a receipt status to register in the WPS MVH and TriWest systems.</td>
</tr>
<tr>
<td>Do not submit any claim forms that have been handwritten. This can create errors and cause a claim to reject out of the system.</td>
</tr>
<tr>
<td>If you have had paper claims reject out of the system or showing no status in the Provider Portal, please ensure that you are submitting claims with:</td>
</tr>
<tr>
<td>A 10-point font with a 10-pitch setting works best with the newest paper forms;</td>
</tr>
<tr>
<td>Courier or Courier New 10-point mono-space font for cleanest scans;</td>
</tr>
<tr>
<td>No mixed fonts, italic/script fonts percent signs, question marks, or parentheses.</td>
</tr>
<tr>
<td>Claims for TRICARE, submitted in error to TriWest, will be rejected or denied. This is a commonly seen error.</td>
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Pre-Enroll for Electronic Data Interchange (EDI); Electronic Remittance Advice (ERA); Electronic Funds Transfer (EFT) Transactions

- Providers MUST enroll with WPS Health Solutions for EDI, ERA and EFT transactions. This is a dual enrollment in addition to any enrollment with your clearinghouse or Availity. Electronic claims may drop to paper at the clearinghouse level without pre-enrollment.
- Providers must enroll for each type of transaction (EDI, EFT, ERA) and for each type of insurance program or Region (Region 3, 5A, 5B, or 6).
- Providers must know the Trading Partner ID for their clearinghouse or billing service in order to enroll.
- Enroll online: https://edi.wpsic.com/edir/home.
- Providers can view walk-through tutorials on the pre-enrollment process produced by WPS and by TriWest.
- TriWest Tutorial: https://vimeo.com/269242768/a4f8c87376.
- Providers can contact the WPS EDI Helpdesk with additional questions or updates to EDI data.
- Email: EDI@wpsic.com or Phone: 1-800-782-2680, Option 1.

Recoupment

- When VA, TriWest or WPS identifies an overpayment, a recoupment is established. A letter is mailed to the billing address of the practice or facility. If the overpayment is returned by the provider within 30 days in accordance with "Returning Incorrect Payments," the recoupment case is closed. To ensure the recoupment is credited to the correct case, include a copy of the original recoupment letter with the remittance.
- If there is an overpayment balance remaining, TriWest will offset it against current and future claims as necessary.

Returning Incorrect Payments

- If you receive an overpayment for a claim, return it to WPS.
- To ensure the refund is credited to the correct claim when returning payments, include a copy of the provider remittance advice or ERA.
- If one of these documents is not available, include the claim number, the last four digits of the Veteran’s social security number or Veteran’s Electronic Data Interchange Patient Identifier (EDIPI), the eligible Veteran’s name, refund calculation and any other pertinent information.
- Send returned payments to: WPS MVH-VAPCCC, PO Box 14491, Madison, WI 53708-0491.

For additional billing training for VCP and PC3 programs, please register for a webinar or download our Handbook or one of our Quick Reference Guides from TriWest’s Provider Portal or from TriWest’s Payer Space on Availity.

View a map of PC3 and VCP Regions