

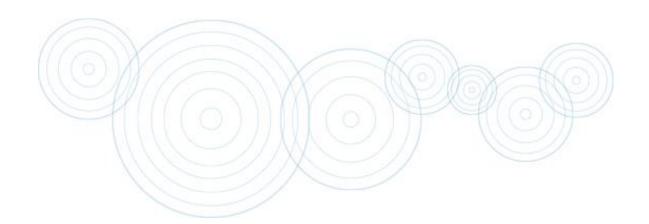


SECTION 1



INTRODUCTION AND HOW TO CONTACT US

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Welcome to Chinese Community Health Plan

Chinese Community Health Plan (CCHP) is a health maintenance organization (or HMO) delivering culturally sensitive, bilingual managed health care since 1986. Our service area includes the City and County of San Francisco County and northern San Mateo County.

CCHP is committed to serving our community and is devoted to delivering the highest quality health plan to the people and organizations we serve. We consider our health care providers as our customers and vital partners in serving our members.

CCHP is a California licensed Knox-Keene health plan and offers CCHP offers a variety of commercial products for small and large group employers as well as products for individuals. In addition, CCHP is contracted with the Centers for Medicare and Medicaid Services (CMS) to offer a Medicare Advantage HMO plan (Part C), a Medicare Advantage Special Needs Program (HMO SNP), and an integrated Medicare Advantage Prescription Drug Plan (Part D). CCHP's Senior Program (HMO) is for people with Medicare Parts A and B. CCHP's Senior Select Program (HMO SNP, Special Needs Plan) is for people with Medi-Cal and Medicare Parts A and B. Please refer to Section 3, Products and Benefits, for more information.

Purpose of the Manual

This manual is intended to provide CCHP participating physicians, allied health care providers and facilities with information necessary for serving and coordinating the care of Chinese Community Health Plan members.

CCHCA Contracted Providers

Physicians and other health care providers and facilities that provide services to CCHP members through their contract with Chinese Community Health Care Association (CCHCA) Medical Group should consult the CCHCA Provider Handbook.

In the event of any conflicts between this Manual and the CCHCA Physician Handbook or Provider Contract, the CCHCA Physician Handbook or Provider Contract shall govern. Any provision hereof that is in conflict with state or federal law is automatically amended to conform to such law.









How to Contact Us - Helpful Resources

Chinese Community Health Plan		Phone	Ext.
445 Grant Avenue, Ste. 700	Main Office	415-955-8800	
San Francisco, CA 94108			
Web site	www.cchphmo.com		
Verify Eligibility and Benefits			
Verify Member Eligibility & Benefits	www.cchphmo.com/eligibility_inquiry		
	Member Services	415-834-2118	
Member Services			
General Inquiries	Member Services	415-834-2118	
Request Language Assistance			
File a Member Appeal or Grievance	www.cchphmo.com/memberservices		
Provider Relations			
General Inquiries	Member Services	415-834-2118	
Request Username & Password for Web site	Provider Relations	415-955-8800	3289
Request Service Authorization Forms	Provider Relations	415-955-8800	3214
Request Referral Forms			3214
Provider Directories	www.cchphmo.com/cchp_physicians_hospitals	415-955-8800	3289
Notification of Changes in Information	Submit in writing to Contracts Associate	415-955-8800	3277
Claims			
Check Claims Status	www.cchphmo.com/claims	415-955-8800	3322
Claims General Inquiries	Member Services	415-834-2118	
Submit Electronic Claims	CCHP Capario Payer ID Number: 94302		
Submit Paper Claims	Claims Department 445 Grant Avenue, Suite 700 San Francisco, CA 94108		
Provider Disputes			
Provider Dispute Forms & Instructions	www.cchphmo.com/dispute_resolution	415-955-8800	3214
Submit a Provider Dispute Dispute must be submitted on Dispute Form	Provider Disputes 445 Grant Avenue, Suite 700 San Francisco, CA 94108		
Clinical Services			
Request Prior Authorization	Fax Service Authorization Form to: >	415-398-3669	FAX
Service Authorization Questions	UM Department	415-955-8800	3289
View Authorizations Online	www.cchphmo.com/eligibility_inquiry		
Pharmacy	· · · · · · · · · · · · · · · · · · ·		
Request Prior Authorization for RX	Senior & Senior Select: Navitus Health Solutions	866-270-3877	
•	Commercial Program: Nativus Health Solutions	866-333-2757	
Formulary Questions	CCHP Manager of Pharmacy	415-955-8800	3242
CCHP Formularies	www.cchphmo.com/formulary_pharmacy		
Pharmacy Directory	www.cchphmo.com/formulary_pharmacy		
Sales	www.cchphmo.com/prospective_members		
	Sales Department	415-955-8800	
Compliance			
Report Suspected Fraud, Waste or Abuse	Compliance Hotline – Confidential or	415-955-8810	
Report Privacy or Security Issue	CCHP Compliance Officer	415-955-8800	3253









Notification of Provider Information Changes

Any change in your provider information must be reported to Chinese Community Health Plan (CCHP) or Chinese Community Health Care Association Medical Group (CCHCA) in writing as soon as possible. Some examples of these changes include practice location, phone number, Tax Identification Number, claims payment address, hours of operation, status as open to newly assigned members (for Primary Care Physicians), affiliated or covering physicians, physician assistants and nurse practitioners. Please submit a written notice to the CCHP Contracts Department for CCHP contacts and to the CCHCA Department Assistant for CCHCA contracts.

If terminating your participation, you must submit a termination notice to CCHP or CCHCA in the time frames stated in the Chinese Community Health Plan or Chinese Community Health Care Association Agreement.

Providers with CCHP Contracts should notify the CCHP Contracts Associate.

CCHP Contracts Associate

Chinese Community Health Plan

445 Grant Avenue, Suite 700

San Francisco, CA 94108

Providers with CCHCA Contracts should notify the CCHCA Department Assistant.

CCHCA Department Assistant

Chinese Community Health Care Association

445 Grant Avenue, Suite 300

San Francisco, CA 94108

415-216-0088



