



2023 Provider Claims Frequently Asked Questions

Provider Claims FAQ - Table of Contents:

| | |
|--|--------|
| 1. What if I cannot locate a claim under Claims Tab in Provider Portal? | Page 2 |
| 2. How do I check if new claim/corrected claim or medical records has been received at SCAN | Page 2 |
| 3. What if unable to locate a member in Provider Portal under Eligibility Tab? | Page 2 |
| 4. What is the timeline if claim reflects Pended status under Claims Tab in Provider Portal? | Page 2 |
| 5. What if I need more payment details than reflected under Claims Tab in Provider Portal? | Page 2 |
| 6. How do I submit a check tracer or request a copy of cashed check? | Page 3 |
| 7. What are the Payment Methods that SCAN offers? | Page 3 |

1. What if I cannot locate a claim under Claims Tab in Provider Portal?

Guidance on Next Steps

SCAN's [Provider Portal](#) allows providers to gain immediate access to claim status. Also, providers can refer to Provider Portal under **Eligibility Tab** in the "Address to Submit Claims" field to confirm responsible entity for processing of a claim.

- If it reflects a delegate's name and address, provider should contact delegate for status of claim.
- If it reflects SCAN, and provider mailed to SCAN's address, then allow fourteen (14) calendar days for claim (from date of submission) to reflect in Provider Portal.
 - If claim is not reflected in the Provider Portal, check your rejection reports from clearinghouse(s).

2. How do I check if new claim/corrected claim or medical records has been received at SCAN?

Guidance on Next Steps

- **Claims** – Refer to question #1 on this FAQ "[What if I cannot locate a claim under Claims Tab in Provider Portal?](#)" for check status on new or corrected claim.
- **Medical Records** - (Non-contracted providers) Medical records will be reviewed, and determination made within thirty (30) calendar days from receipt at SCAN.

3. What if unable to locate a member in Provider Portal under Eligibility Tab?

Guidance on Next Steps

- If after checking SCAN's Provider Portal and you cannot locate a member, please contact the member to
 - Request copy of Member's ID Card or
 - Confirm SCAN ID# or
 - Confirm Member's Full Name and Date of Birth

4. What is the timeline if claim reflects Pended status in Provider Portal?

Guidance on Next Steps

Refer to the below payment timelines for processing (starts from receipt date)

- Thirty (30) calendar days for a clean claim from a non-contracted
- Sixty (60) calendar days for a clean claim from contracted provider
- Thirty (30) calendar days for an unclean claim from a non-contracted provider once complete information is received
- Forty-five (45) calendar days for Medi-caid claims in CA

5. What if I need more payment details than reflected on Provider Portal?

Guidance on Next Steps for Provider to Take

Providers should reach out to ECHO Health to obtain

- Detailed explanations for each SCAN Health Plan payment you receive to review online

To register on the ECHO Health Portal, go to <http://www.providerpayments.com>

- You will need to provide your tax identification number along with an ECHO draft number and amount number from a payment issued by ECHO.

6. How do I submit a check tracer or request copy of cashed check?

Guidance on Next Steps

Check tracers, copies of cashed checks or Remittance Advice (RAs) can be obtained through ECHO Health at <http://www.providerpayments.com>

7. What is the Payment Methods that SCAN offers?

Guidance on Next Steps

1. **Electronic Funds Transfer (EFT)/Automated Clearing House (ACH):** Automatic direct bank account deposits
 - You may sign up for EFT payments by accessing the website <https://view.echohealthinc.com/EFTERADirect/SCAN/index.html>
2. **Virtual Card (vCard):** Virtual Visa Debit Transaction ([Default Enrollment](#))
 - Your office will receive fax notifications, **each containing a virtual credit card with a number unique to that payment transaction included with Remittance Advice.**
 - Once the number is received, you enter the code into your office's credit card terminal to process payment as a regular card transaction.
 - The first attempt to receive a vCard is by fax, if unsuccessful then by mail. At this time, vCards cannot be emailed for security purposes.
3. **Mailed Paper Checks**
 - To receive paper checks and paper EOPs, you must opt out of the vCard Services by contacting Echo Health at 1-888-492-5579, after your initial virtual card payment is received.
4. **Medical Payment Exchange (MPX)**
 - MPX is specifically targeted to providers who have never enrolled for ACH and opted-out vCard. The Provider is notified of a payment via email and can receive/access ePayments and EOPs simultaneously reducing the need for support when locating payments.
 - To sign up, simply navigate to <https://my.echecks.com/medicalpayments> and follow the prompts to create an account.
 - You will need your Tax ID number, the enrollment code you received, then tell us a little about yourself, review and agree to the terms, and you're done!
 - Contact MPX support if you have any questions at **888-471-3920 and MPXsupport@mpx.com**
 - Provider has the flexibility to select one of three ePayment options (eCheck, vCard or ACH) upon receiving email payment notification. EOP is simultaneously sent with Payment. Print checks anytime/anywhere using any paper or printer. No waiting for mailed payments or need to notify of updated billing address to prevent lost payments.