



ATTENTION BAYOU HEALTH PLANS

Emergency Ambulance Claims Incorrectly Paid by Fee For Service Medicaid (Molina)

DHH has identified paid Fee for Service Emergency Ambulance claims that must be administratively corrected due to a member's linkage to a Bayou Health Plan (BYU). These Emergency Ambulance claims are for dates of service between February 1, 2015 and November 30, 2015.

On the March 15, 2016 check-write, Molina will void these claims. These voided claims will appear on the RA with a BYU Plan specific edit code (EOB). The BYU Plan specific edit code contains the name of the BYU plan for which the member was linked on the claim date of service.

Once voided, ambulance providers will need to resubmit the effected claims to the appropriate Bayou Health Plan.

To obtain consideration for payment, providers **must** submit claims to the Bayou Health Plan **no later than 90 days from the date the claim is voided.**

Bayou Health Plan Specific EOB:

- 870** – Submit claim to Aetna Better Health of Louisiana
- 875** – Submit claim to United Healthcare of Louisiana-Prepaid (UHC)
- 880** – Submit claim to Amerihealth Caritas Louisiana (ACLA)
- 881** – Submit claim to Amerigroup of Louisiana (AMG)
- 886** – Submit claim to Louisiana Healthcare Connections (LHC)

Please visit your Bayou Health Plan's website for more, plan specific, information:

- **ACLA** - <http://www.amerihealthcaritasla.com/provider/communications/faxes/index.aspx>
- **Aetna** - <http://www.aetnabetterhealth.com/louisiana/providers/>

- **AMG** - <https://providers.amerigroup.com/pages/LA.aspx>
- **LHC** - <http://www.louisianahealthconnect.com/files/2016/01/Transportation-Claim-Error-Provider-Notice-Emergency-Ambulance-FINAL.pdf>
- **UHC** - <http://www.uhccommunityplan.com/health-professionals/la/provider-bulletins.html>

Should you have questions related to the upcoming voids and resubmissions, please contact your Bayou Health Plan or Molina Providers Relations at 1-800-473-2783.