VA Community Care Network

Claims Processing Guidelines

Key Points

- Department of Veterans Affairs (VA) Community Care Network (CCN) providers have options when filing a claim for health care services delivered to Veterans.
- VA CCN providers must submit claims to Optum within 180 days from the date of services for outpatient care or date of discharge for inpatient care.
- Claim must include the Veteran's social security number.
- Medical documentation must be sent directly to VA facility listed on the referral.

VA Claim Submission Guidelines

VA CCN providers must submit a claim on one of the following nationally-recognized claim forms:

- CMS 1500 or CMS 1450
  - Veteran's social security number in box 1a
  - Referral number in box 23
- UB-04
  - Veteran's social security number in box 60
  - Referral number in field 63A
  - Home health agencies and skilled nursing facilities using Outcome and Assessment Information Set (OASIS) put the 18-byte treatment authorization code in field 63B
- American Dental Association (ADA) claim form (dental claims only)
  - Veteran's social security number in box 15
  - Referral number in field 2

When submitting claims, keep in mind these applicable claims processing and filing requirements for VA CCN:

- Claims submitted that do not have the Veteran's social security number will be denied.
- Administrative charges submitted by the provider related to completing and submitting the applicable claim form, or any other related information, will be denied.
- Providers may not charge Veterans for missed appointments.
- Duplicate claims will be denied.
- Claims that are submitted for services that are not part of the Veteran's medical benefits package, as well as claims submitted for care that is not within the scope of the approved referral, will be denied.
- Claims submitted on unapproved claim forms will be rejected. Resubmitted claims on approved claim forms need to be submitted within the timely filing deadline of 180 days.
- Emergency claims submitted by a VA CCN provider without an approved retroactive referral will be denied.
- Out-of-network emergency providers need to submit health care claims directly to VA following VA claims submission procedures.
- Claims submitted that do not have an approved referral number will be denied.
- Claims must include a valid NPI number.
- Claims that are not submitted within 180 days from the date of service or date of discharge will be denied for passing the timely filing deadline.

For more details, refer to the VA CCN Provider Manual found at Optum VA Community Care Network portal vacommunitycare.com > I am a Provider > Training & Guides.

Filing a Claim

Electronic submissions are preferred.

- Electronic Data Interchange (EDI):
  - Payer ID for Medical and Dental – VACCN
- Community care providers may also submit online:
  - **Medical**: Go to vacommunitycare.com > I am a Provider > Medical/Behavioral Provider
  - **Dental**: Go to vacommunitycare.com > I am a Provider > Dental Provider

Follow the portal's directions to submit claims directly on the portal.

If electronic capability isn't available, VA CCN providers can submit claims by secure fax or mail.

- Medical
  - Mailing Address:
    VA CCN Optum
    PO Box 202117
    Florence, SC 29502
  - Secure Fax: 833-376-3047

- Dental
  - Mailing Address:
    Logistics Health Inc.
    Attn: VA CCN Claims

328 Front St S
La Crosse, WI 54601

- Secure Fax: 608-793-2143. Please specify VA CCN on the fax.

Claim Reconsiderations

Reconsideration is a formal process by which a VA CCN provider may request that Optum review a claim denied partially or in whole, or where a VA CCN provider believes payment was incorrect.

Where a claim is denied partially or in whole, a reconsideration request must be filed within 90 calendar days from the date of denial.

Where a claim has not been denied partially or in whole, but the VA CCN provider believes the claim has been incorrectly paid, the VA CCN provider must file a reconsideration request within 12 months after the claim was initially processed.

Send reconsideration requests to the address or fax number listed on the remittance advice. If unable to locate the address, please submit reconsideration request via mail or fax:

VA Community Care Network
Appeals and Grievance
Team MS-21
3237 Airport Road
La Crosse, WI 56403

Secure Fax: 877-666-6597

Tips to Receive Prompt Payments

As VA CCN is implemented in your area it is imperative registration and billing staff are aware of the appropriate third party administrator in order to bill and be paid quickly. Please share details with your staff.
On the VA CCN referral look for Affiliation: CCN1, 2 or 3 and Network: CC Network 1, 2, 3; depending on Region.

REFER ALL QUESTIONS RELATED TO THIS APPROVAL TO THE ISSUING VA OFFICE

Referring VA Facility: White River Junction VA Medical Center
Station Number: 405
Ordering Officer: Terri Doe
Telephone Number: 802-XXX-9363 ext 6060
Address: 163 Veterans Drive WHITE RIVER JUNCTION VT 05001
Referring Provider: LYNN DOE
Unique Consult No: 405_1674357
Program Authority: Authorized/Pre-authorized VA Referral (not otherwise specified)- 1703
Affiliation: CCN1
Network: CC Network 1

When you see this information on an approved referral the Veteran should be registered as VA CCN and the claim should be submitted to Optum (or LHI for Dental Providers) using EDI, secure fax, mail or provider portal. Sample:

REFER ALL QUESTIONS RELATED TO THIS APPROVAL TO THE ISSUING VA OFFICE

Referring VA Facility: White River Junction VA Medical Center
Station Number: 405
Ordering Officer: Terri Doe
Telephone Number: 802-XXX-9363 ext 6060
Address: 163 Veterans Drive WHITE RIVER JUNCTION VT 05001
Referring Provider: LYNN DOE
Unique Consult No: 405_1674357
Program Authority: Authorized/Pre-authorized VA Referral (not otherwise specified)- 1703
Affiliation: CCN1
Network: CC Network 1

More Information and Training

Providers participating in the VA CCN can find more information at vacommunitycare.com > I am a Provider > Training & Guides. VA CCN providers will find the Provider Manual and other resources, including:

- Claims training and tools
- Electronic Payments and Statements (EPS) enrollment information
- Instructions for submitting medical documentation to VA
- Resources and tools to view and manage referrals