| PROVIDERS USING CAREBRIDGE | | | | | | |
|--|--|---|---|---|---|--|
| FFS State Plan, Aetna, UHC, WellCare | Provider creates invoice batch (1 invoice # is 1 claim) | HHAX submits visit file interface to CareBridge with invoice number for visits to be billed One Invoice Per Patient, Per Day, Per Service Code – could vary by payer | HHAX generates 837 claim file and submits to CareBridge | Does file pass validation? YES - Claims received in payer adjudication system NO - Rejected 999/277 - HHAX receives exceptions. Corrects and resubmits claim with original claim information. | Claim adjudicated and payment sent to provider | Remittance files generated and submitted to provider by pay |
| Amerigroup | Provider creates invoice batch in CareBridge system (1 invoice # is 1 claim) | | CareBridge generates and submits 837 to Amerigroup | Does file pass validation? YES - Claims received in payer adjudication system NO - Rejected 999/277 - CareBridge receives exceptions. Corrects and resubmits claim with original claim information. | Claim adjudicated and payment sent to provider | 835 Remittance file generated and submitted to provider by payer |
| Horizon | Provider schedules and confirms EVV compliant visits in CareBridge | | Provider submits claims directly to Horizon via provider portal or 837 or paper claim | Horizon processes claim after matching against visit data maintained by CareBridge | Does visit data support claim billed? YES - Claim adjudicated and payment sent to provider NO - Claim denial and EOB sent | 835 Remittance file generated and submitted to provider by payer |

