

Claims

Claim Filing Process

Northwood claims for Health New England members may be submitted electronically or on a CMS 1500 (paper) claim form.

Paper Claims: Paper claims must be fully completed and include:

- Northwood's authorization number
- Health New England Plan ID #
- Remittance advice for secondary claims (do not staple)
- Manufacturer's name, description, and product number documented in Box 19 of the CMS claim form for not otherwise classified (NOC) items (Manufacturer's Invoice attached if not submitted during authorization.)
- Do not fold, staple or write on paper claims

Send paper claims (CMS 1500) to:

Northwood, Inc.
Attn: Health New England Claim
P.O. Box 510
Warren, MI 48090-0510

Electronic Claims: Electronic claims must be completed according to HIPAA 837 transaction requirements detailed on Northwood's website at www.northwoodinc.com.

Electronic Funds Transfer: Electronic funds transfer (EFT) is available; please visit the Northwood website at www.northwoodinc.com to sign up.

Claims submitted without the required information will be rejected and must be resubmitted within the claim filing limitation timeframe.

Northwood Provider Manual - Section V: For more detailed information regarding Claims, please see Section V of the Northwood Provider Manual for the Health New England Program.

NORTHWOOD SERVICES FOR HEALTH NEW ENGLAND PROGRAM MEMBERS



DME • P&O • Medical Supplies

Northwood provider inquiry hours are Monday through Friday, 8:30 a.m. to 5:00 p.m. EST. After hours and on weekends, Northwood staff are on-call and can be reached for emergencies at:

1-877-807-3701



Northwood

P.O. Box 510
Warren, MI 48090
Phone: 1-877-807-3701
Fax: 1-877-552-6551



Northwood

1-877-807-3701

**Provider Reference
Guide For:**

**Durable Medical
Equipment,
Prosthetics,
Orthotics and
Medical Supplies
Program**



Health New England

www.northwoodinc.com

Health New England and Northwood

Health New England and Northwood have entered into a partnership to arrange for quality, cost-effective durable medical equipment, prosthetics, orthotics and medical supplies (DMEPOS) for Health New England members.

How To Request An Authorization



ONLINE

www.northwoodinc.com

Northwood providers must utilize Northwood's online provider portal to submit authorization requests for prescribed durable medical equipment,* prosthetic, orthotic and medical supply services.

Go online at <https://providerportal.northwoodinc.com>. To request access to the portal, please contact Northwood or visit <https://providerportal.northwoodinc.com/FormsAndDocumentation/Documentation.aspx>.

*Providers needing authorizations for CPAP/BiPAP supplies, please continue to contact eviCore.

FAX

1-877-552-6551

Authorization requests from **non-participating** providers may be faxed to Northwood. An authorization request form is available online at www.northwoodinc.com. Go to 'Providers' and click on the Health New England program tab.

Please fax the completed form to Northwood at the number above. It will be processed during regular business hours. If you need immediate service, please contact Northwood at 1-877-807-3701.

PHONE

1-877-807-3701

Providers may also contact Northwood to request an authorization by phone for urgent/emergent requests (i.e. hospital discharge).

To assist with a speedy authorization process, please have all necessary information available - see 'Information Needed to Obtain an Authorization'.

Authorization Required

Authorization is necessary for all Health New England members requiring:

- Durable Medical Equipment
- Prosthetics
- Orthotics
- Medical Supplies

Authorizations are performed Monday through Friday, 8:30 a.m. to 5:00 p.m. EST. Urgent/emergent authorization requests do not need to be prior authorized. However, these requests must be submitted to Northwood within the next two (2) regularly scheduled business days.

Information Needed to Obtain an Authorization

To assist with submitting an authorization request online, it is essential to have the following information available:

- Provider ID Number
- Member Name/Address/Telephone
- Member Contact/Telephone
- Member Date of Birth
- Referral Source/Telephone
- Member's Health New England ID #
- Other Insurance Information (if any)
- Diagnosis - ICD-10-CM Code and Description
- Date of Service
- Referring Physician
- Level II HCPCS Code
- Description of Product/Service
- Manufacturer's Invoice for NOC/IC Codes
- Service Type (Purchase or Rental)/Modifiers
- Quantity
- Duration of Need

Northwood Provider Manual - Section II: For more detailed information regarding Authorization, please see Section II of the Northwood Provider Manual for the Health New England Program.

Authorizations

Routine Authorization

Northwood's Benefit Coordinators will be the provider's initial contact for requesting an authorization. If the request and related equipment/service meet criteria for diagnosis, quantity, standard equipment, etc., an authorization will be issued and electronically faxed to the provider for their records. A Northwood authorization number is required on claim submission.

If the requested product/service cannot be authorized by Northwood's Benefit Coordinators because it does not immediately meet criteria, it will be sent to Northwood's Case Review department.

Case Review and Denials

Cases that cannot be authorized routinely will be sent to Northwood's Case Review department. Northwood's Case Review team will gather necessary documentation to determine whether an authorization can be granted. If after gathering pertinent medical information a determination can be made to authorize the product/service, Northwood will contact the provider with the authorization number and an electronic authorization notification. If Case Review is unable to authorize the product/service, even after receiving additional information, the case will be reviewed by Northwood's Medical Director. If Northwood's Medical Director determines that the requested equipment/service does not meet medical criteria, Northwood will issue a denial to the provider and member.

Appeals

If a member or member's authorized representative would like to file an appeal of a medical necessity decision, please contact Health New England. To resolve problems, call Health New England Member Services at:

Commercial: 800-310-2835
Medicare: 877-443-3314
Medicaid: 800-786-9999

Providers who need to file a provider appeal (for claims or administrative denials) may contact Northwood at 1-877-807-3701 or access the Claim Status form online at www.northwoodinc.com under the Provider tab.