

## Provider Claims Submission Quick Reference Guide

Participating physicians/providers must submit claims on the member's behalf.	
Claims filing timeline is one (1) year from the date of service or the receipt date of the primary payer's EOB.	
Paper Claims You can find these forms online at www.cms.gov:	Use a <b>CMS 1500</b> for physician and ancillary claims.
	2. Use a <b>UB04</b> for facility or hospital claims.
Paper Claims send to:	Kaiser Permanente – Claims Department P.O. Box 378021 Denver, CO 80237
Corrected Claims:	All corrected claims are required to fill out Box 22 on the CMS1500. If resubmitting claim please indicate 7(resubmission) in box 22 with the original claim number noted,
Electronic Claims Submission:	
How do I get set up for EDI claims submissions?	Change HealthCare at http://www.changehealthcare.com/ (payer ID: 94123) or RelayHealth at http://www.relayhealth.com/
	(payer ID: <b>RH0011</b> )
	If additional assistance is needed please



Who can I contact with questions about my claims or claims payment?

Contact our Claims Customer Service Center Monday-Friday, 8 a.m. – 4:30 p.m. and Saturday, 8 a.m. – noon at **808-432-5330 (Oahu) or Toll** 

Free at 1-800-651-2237

Fax: 1-808-432-5433 or online affiliate at: http://providers.kaiserpermanente.org/html/cpp\_hi/on lineaffiliate.html

<sup>1</sup> Kaiser Permanente Hawaii supports electronic claims submissions through Emdeon and Relay Health at this time.

We will support submissions through other clearinghouses / trading partners in the future.