

PROVIDER NEWSLETTER

Winter 2023

Thank you for all that you do to help our members!

QUEST IS PLEASED TO ANNOUNCE THE IMPLEMENTATION OF

PROVIDER PORTAL

Quest recently implemented an online provider portal called Tapestry Link. The portal gives providers the opportunity to submit claims electronically, as well as providing options to view claim status, eligibility*, and benefits* for Quest members.

Registration and a brief training are required; for more information or to request access to Tapestry Link, please email us at questtaplink@questbh.com.

PLEASE NOTE: To reduce our environmental impact, Quest will no longer accept paper claim forms after June 30, 2023.

* Quest recommends you contact us at 800-364-6352 for accurate verification of member eligibility and benefits prior to rendering services. *

Quest Behavioral Health has contracted with WellSpan Health to utilize Tapestry Link functionality. Tapestry Link is part of Care Link, which is provided through and supported by Epic and WellSpan Health. Site administrators and staff who are granted permissions will have access to view member information as it relates to Quest Behavioral Health only when using their Quest-assigned username and password. All references to WellSpan Health are strictly related to use of their Care Link platform. If you have any questions regarding Tapestry Link, please feel free to contact Quest at 800-364-6352 or questtaplink@questbh.com.

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ONLINE PROVIDER APPLICATIONS

Quest recently implemented online provider applications which replaces the provider application in PDF format. The online applications will expedite the credentialing process.

PLEASE NOTE: Quest will no longer accept PDF applications after June 30, 2023.

REQUIRED:

- PROVIDER NAME, LICENSE, DATE OF BIRTH AND EMAIL ADDRESS to forward online application.
- Each provider must establish an INDIVIDUAL SIGN ON AND PASSWORD. This information will be utilized again when the provider recredentials every three years.

ON-LINE APPLICATION INSTRUCTIONS:

- Fields displayed in RED are mandatory and must be answered.
 - Page arrows at top and bottom of each page Block with Page number in red requires information.
 - Once the required information is entered, the red box disappears.
- Each page may be accessed utilizing the arrows at the top and bottom of each page or by using the index on left side of application.
 - PLEASE NOTE: Page 19 and 20 on INITIAL APPLICATION must be accessed utilizing the arrows at the top and bottom of the page.
- Required documents MUST be attached PRIOR TO submitting the application
 - Documents may be attached utilizing the FAX OR ATTACH IMAGE button on the top of each page or the MENU drop down – Add Attachment
 - o Initial Application requires the following documents to be attached:
 - State license
 - Proof of malpractice coverage
 - Curriculum Vitae
 - W9
 - Certifications: Board Certification, CAADC, Trauma etc.
 - o Recredential Application requires the following documents to be attached:
 - State License
 - Proof of malpractice coverage
 - W9
- Additional pages Click to add more or Copy page button on the top of the page– will add an additional page after
 the current page.
- Fields encouraged to be completed:
 - o Page 2:
 - Provider NPI number
 - Ethnicity
 - LGBTQ+ (if applicable)
 - Provider Language
 - o Page 5:
 - Group NPI number
 - Office Hours
- Attestation Questions on Page 17 and 18
 - o Responding adversely to any of the Attestation Questions will open an Explanation Form to complete
 - o The provider is required to electronically sign in cursive font with the last four digits of their SSN and date
- Recredential Application please verify and correct the preprinted data and provide updates where appropriate.

QUEST BEHAVIORAL HEALTH

PO Box 1032 York, PA 17405

Phone: 800-364-6352 Fax: 717-851-1414

Administrative Hours: 8:00 AM – 5:00 PM Monday -Friday

Care Management Hours: 24 hours a day. 7 days a week

CLAIMS SUBMISSION:

Send EDI to Claimsbridge

Employee Assistance Program (EAP) Payor ID 10956

> Behavioral Health Payor ID 44219

CONTACT US:

Tapestry Link questtaplink@questbh.com

Claims claims@questbh.com

Provider Relations provider@questbh.com

Member Services membership@questbh.com

Quality Management qm@questbh.com

Sales Email sales@questbh.com

EAP CLAIM SUBMISSION

Claims for services provided to a Quest member through their EAP benefits MUST include the HJ MODIFIER in BOX 24D.

Please ensure EAP claims are submitted using the following information:

Electronic claim submission through a clearinghouse: Payer ID 10956

Paper claims submission (Available through June 2023)

Quest EAP PO Box 864 Arnold, MD 21012

AUTISM CLAIM SUBMISSION

Claims submitted for Autism services MUST include the FACILITY NPI in BOX 24J.

A modifier is required in **BOX 24D**

BCBA/BCBA-D = AH LBS/MT – AJ or HO RBT/BT – HN TSS – HM

The authorization number should be provided in Box 23
Services should be billed according to what was authorized.

BOXES 32 and 32a requires service facility location and place of service NPI

BOXES 33 and 33a requires billing provider information and NPI.

PSYCHOLOGICAL AND NEUROPSYCHOLOGICAL AUTHORIZATIONS

All Quest in-network psychologists and neuropsychologists, please remember to submit all psychological/neuropsychological testing Authorization Requests

no less than two (2) business days before the scheduled testing.

If you are unable to do so for a specific case, please contact Quest Care Managers via email questcaremanagement@questbh.com or call 800-364-6352 and ask for Care Management

CLAIMS STATUS INQUIRIES

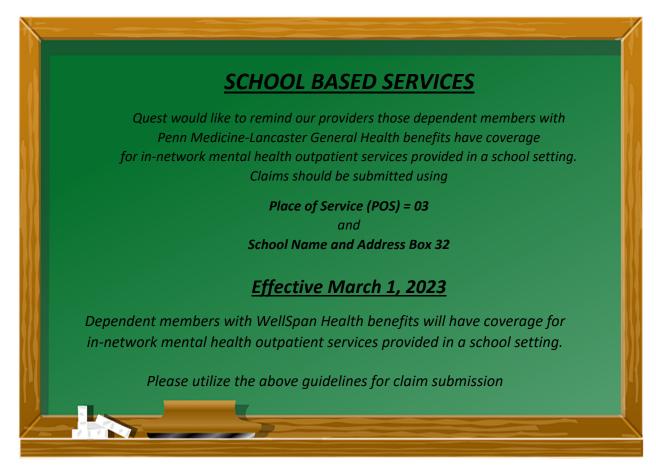
Many of our providers use external billing services for handling claim status inquiries and follow-up. Quest is experiencing an increase in volume from billing services requesting status on claims that have been processed, paid, and settled.

To ensure efficiency, we remind providers to share EOPs with their billing services, as they provide details on member responsibility and amount paid.

PLEASE NOTE: Quest will not reproduce EOPs, as this is duplicative and resource intensive.

Quest is requesting that providers and external billing services sign up for Tapestry Link to check the status of claims. This allows our Member Services team to focus on assisting members in need of care. If a call to Quest Member Services is needed, please be aware that our staff will provide claim status for a maximum of three (3) claims per call.

Claim status inquiries can also be submitted via email to claims@questbh.com or through our website at www.questbh.com. Select Providers, Forms and Documents, Claim Status Inquiry.





ARE YOU LOOKING FOR ADDITIONAL OPPORTUNITIES?

Quest Behavioral Health is searching for

CRITICAL INCIDENT STRESS MANAGMENT (CISM) RESPONDERS and STAFF DEVELOPMENT TRAINERS

Quest provides Critical Incident Stress Management (CISM) services, as well as Staff Development Trainings (e.g., Stress Management, Grief Recovery, Team Building) to our EAP employer groups.

For more information on becoming a provider for either of these services, please contact Dr. Tad Santos via email tsantos@questbh.com or call 800-364-6352.



BENEFITS INQUIRIES

Our Member Services staff is available Monday through Friday, 8:00 AM – 5:00 PM to assist providers with confirming eligibility and benefits coverage.

Benefit and eligibility inquiries can also be submitted via email to membership@questbh.com or through our website at www.questbh.com. Select Provider: Forms and Documents: Membership Eligibility and Benefit Request.

PLEASE NOTE: When contacting Quest for inpatient residential services, a revenue code must be provided prior to our staff quoting benefits to ensure accuracy. We are unable to quote benefits for these services without a revenue code.





Please notify us PROVIDER RELATIONS DEPARTMENT by email

provider@questbh.com

or

800-364-6352

BILLING UPDATES

Are you changing Tax ID from SSN to EIN number? Is your solo practice changing to a group practice?

Are you changing billing address?

REMINDER: The billing address must be updated on a claim. Our billing system will not update the billing address until the address is received on a claim.

Even if the billing address is updated on a claim – you still MUST notify us to update the information in our billing system.

CYBER LIABILITY INSURANCE

Quest encourages all providers to carry cyber liability insurance with limits not less than \$15,000 per data breach for outpatient providers and \$1,000,000 per data breach for higher level of care and facility providers. Although not required at this time, providers are encouraged to add this layer of protection.

APPOINTMENT AVAILABILITY

Are you accepting new clients?

Are you operating on a wait list?

Do you not have appointment availability for an estimated time?

TERMINATION FROM PRACTICE

Are you leaving an in-network practice?

Are you opening a solo practice?

Are you leaving the Quest network?