



# Southwest Michigan

## BEHAVIORAL HEALTH

### Primer- Third Party Payers Coverage Additions

- Beginning October 1, 2022, SWMBH will require additional information from providers regarding third party coverage plans. Per new MDHHS reporting requirements SWMBH is required to submit the specific primary payor information for every claim/encounter. Therefore, the current coverage plans of “Commercial” and “SUD Commercial” will be discontinued and end dated 9/30/22. In addition, there will be an additional “Medicare Advantage Plan”. While we will not end date the existing “SUD Medicare” plan those consumers who have Medicare Advantage Plans will need to have their coverage updated to reflect that fact and away from the straight Fee For Service “SUD Medicare” plan. Providers/Users must enter the ACTUAL third-party payer insurance information into the Client Plans and Time Spans banner.
- Group and Insurer identifiers will be necessary as well as the addition of specific third party payer for all dates of services 10/1/22 and can be entered using the following set of instructions.

### Adding Coverage Plan(s)

1. Upon logging into the application, navigate to a Client Record: Client Plans & Timespans.
2. Select the ‘New’ coverage plan item from the toolbar 
3. Select the appropriate Plan from the drop down list in the Plan field.
4. User must enter the Group and Insurer identifiers in the respective fields, along with Plan, and 
5. If the Plan you are looking for is not included in the drop down list please contact [providersupport@swmbh.org](mailto:providersupport@swmbh.org) to have it added.

*Questions or Concerns?*

Contact [providersupport@swmbh.org](mailto:providersupport@swmbh.org) for more information!

**Client Plans**

General | Claim Information | Copayment | Monthly Deductible

**Plan**

Plan: [Dropdown] ⓘ

Insurance Type Code: [Dropdown]

Insured ID: [Text Box]

Medicare Beneficiary ID: [Text Box]

Group #: [Text Box]

Employer/ Group Name: [Text Box]

Contact Number: [Text Box]

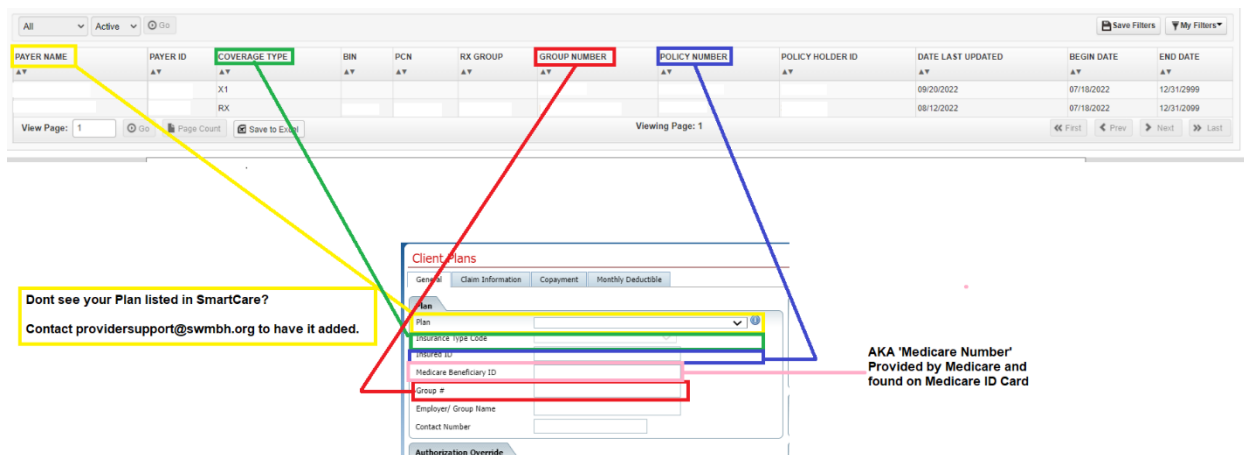
**Authorization Override**

Authorization is Required     No Authorization Required

**Comment**

The below diagram shows where in the CHAMPS eligibility screen to find the exact Plans and IDs needed and which field within the SWMBH SmartCare system they belong. Providers may also find this information on the member ID card for their primary insurance.

**CHAMPS/SmartCare Client Plans Crosswalk**



Once the Plan(s) has been added to the client’s Plan & Timespans, it will appear as a Payer for selection in the Third-Party EOB portion of a claim.

**Claim Entry Payment and Adjustment**

Save Close

	Payer	Payer Name	Allowed Amount	Previous Payment	Previous Adjustment	Group Code	Reason
X	▼					▼	▼
X	▼					▼	▼

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