



Important Information: Claim Processing Updates for Inpatient Facility Claims

At Alameda Alliance for Health (Alliance), we value our dedicated provider partner community. We are committed to reviewing our processes to improve and better serve our provider network. We have an important update we want to share with you.

Upcoming Changes to our Claims Processing Procedure

We are making technical updates to improve the function of our claims payment system. These updates will improve the accuracy and efficiency of our provider payments.

Short-Term Impact

While we work to implement these improvements, we will employ a temporary manual workaround in our claims processing function.

Beginning Saturday, March 1, 2025, the Alliance's interim solution will involve:

- Manual review of certain elements in our authorization and claims processing platforms for inpatient facility claims (for claims billed on a UB-04 or submitted electronically as an 837i).
- This will improve the payment accuracy of inpatient facility claims to be in alignment with authorization processes to ensure claims are being processed and paid as authorized.
- Claims will continue to be processed according to regulatory compliance turnaround timeframes.
- This change does NOT currently impact outpatient facility claims.
- This change does NOT currently impact professional claims (for claims billed on a CMS 1500 form or submitted electronically as an 837p).

Long-Term Impact

The manual review of inpatient facility claims is temporary and will continue until system enhancements are complete. We are currently working with our claims system vendor to implement system changes to alleviate the need for manual review.

Our Commitment to You

We understand the importance of timely reimbursements to your facility. Rest assured that our team is working diligently to minimize any disruptions, and we will continue to process claims as quickly as possible during this transition period.

Reminders for Providers

- Continue to submit claims accurately and timely as you normally would.
- Ensure that claims are billed in alignment with the approved authorization stay levels, when applicable.
- Disputes regarding a processed and finalized claim can be submitted using the Alliance Provider Dispute Resolution (PDR) Form and submitted electronically through our Provider Portal or by mail. A copy of the form is available on our website at www.alamedaalliance.org/providers/billing/claims.

We appreciate your patience and understanding as we continue to work to improve our systems and payment processes. Ultimately, this project will lead to a more efficient and accurate claims processing system.

For more billing information, please visit www.alamedaalliance.org/providers/billing.

Thank you for your continued partnership in providing high quality care to our members and the community.

Questions? Please call the Alliance Provider Services Department
Monday – Friday, 7:30 am – 5 pm
Phone Number: **1.510.747.4510**
www.alamedaalliance.org