



New Provider Orientation

Integrated-ActivHealthCare
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Website Basics

The I-AHC website, www.I-AHC.net, is your source for the most current information. At www.I-AHC.net, you will find:

- Current information and news
- Provider Locator
- Fee schedules
- Term summary sheets
- Network resources
- EDI information
- Contacts
- Frequently asked questions, links, and much more

The top menus provide links to other pages throughout the website. The Provider and CA's Corner top menus allow the member to obtain additional information relevant to their practice.

Home Page and Menus

Why Choose I-AHC?
Credentialing
Network Resources
Frequently Asked Questions
News

How to File a Claim
Check on Claim Status
Frequently Asked Questions
Network Resources



In addition to the top menu choices, you may also link to other pages from the side menu.

- Credentialing
- Marketing
- Network Resources
- Benefits of Chiropractic

Provider Login

When a provider or CA selects Network Resources from the top or side menus, the provider login will be displayed.

If you have a password, enter your registered email and password in the space on the right. If you have not previously registered, you may register for a password where indicated. Passwords are case sensitive.

Provider Login

Please enter your email and password provided by Integrated-ActivHealthCare to access Term Summary Sheets.

If you have not been provided with a password, please register [here](#)

Email:

Password:

Passwords are case sensitive.

Login

[Click here](#) if you have lost your password.

Network Resources

→ Credentialing/QA Program

→ Network Affiliations

→ Employer Lists

→ Term Summary Sheets

→ Fee Schedules

→ EDI Information

→ Provider/CA Manual

→ Training

→ Frequently Asked Questions

→ News

Once you have logged in, the menu on the left appears.

Click on the links to view the desired information.

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Integrated-ActivHealthCare Term Summary Sheet

Network:	SAMPLE
Product:	PPO
Payor:	Various Payors and TPA's
Effective date:	January 1, 2007
Withhold percentage:	_____ % To Network (Based upon allowed charges)
PCP Referral:	Follow Instructions on Beneficiaries' ID Card
Utilization Management:	Varies By Plan-Follow Instructions on Beneficiaries' ID Card
Eligibility Verification:	Call Number Listed on Beneficiaries' ID card
Co-Payment Collection:	Collect Co-Payment or Deductible (As Indicated) on ID Card at time of service
Reimbursement Terms:	Group Health: _____ % of area Medicare fee schedule RBRVS Workers Compensation: _____ % off the applicable state's current Worker's Comp fee schedule; or _____ % off the Provider's usual billed charges, or the Health Benefits rate, whichever is less
Claims Filing:	File Claim Along With A Copy Of The Patient's Insurance Card To: Integrated-ActivHealthCare P.O. Box 969 Litburn, GA 30048

PLEASE ATTACH TO YOUR INTEGRATED-ACTIVHEALTHCARE CONTRACT

This document is a summary only of certain aspects of the Payor Contract in question. A copy of the Payor Contract can be made available upon written request to Integrated-ActivHealthCare by Provider. Pursuant to Sections 2F and/or 2I of the Provider Agreement, Provider agrees to be bound by the terms and conditions of the Payor Contract in question.

2006 Sample Group Health Fee Schedule

CPT Code	Network Affiliate A	Network Affiliate B	Network Affiliate C	Network Affiliate D
72040	60.00	49.00	42.00	75.00
72050	110.00	72.00	60.81	120.00
72070	75.00	50.00	43.72	82.50
72100	75.00	52.00	45.03	82.50
72110	130.00	72.00	61.67	112.50
97010	20.00	15.00	13.52	13.00
97012	20.00	25.00	23.19	29.25
97014	20.00	20.00	19.08	22.75
97022	20.00	18.00	24.62	29.25
97024	20.00	15.00	13.52	19.50
97032	22.00	20.00	22.76	29.25
97035	22.00	16.00	17.05	26.00
97110	20.00	30.00	29.94	
97112	20.00	28.00	32.92	
97140	20.00	31.00	34.13	
98940	31.00	37.00	32.89	52.00
98941	38.00	47.00	44.34	59.80
98942	48.00	57.00	57.14	67.60
98943	29.00	30.00	34.00	
99203	80.00	81.00	107.33	91.00

- Network Affiliate E = 85% of Billed Charges
- Network Affiliate F = 160% of Medicare (based on state of Georgia)(SC area only)
- Network Affiliate G = 95 % of 2005 Medicare (based on state where services rendered)
- Network Affiliate H = 110 % of Medicare (based on state where service rendered)
- Network Affiliate I = 80% of Billed Charges
- Network Affiliate J = 90% of Billed Charges
- Network Affiliate K = 125 % of Medicare (based on state where services rendered)

Note: This is a partial list of actual Fee Schedules for some of the Network Affiliates. Schedules do not take admin fees into consideration.

Network Affiliates

Claims for the following networks should be:

- sent electronically with AHCØ2 prefix if you are enrolled with Office Ally through Integrated-ActivHealthCare, **OR**
- mailed to P.O. Box 969, Lilburn, GA 30048



American PPO



Memorial Health Partners



Atlantic Integrated Health, Inc.



MultiPlan



Beech Street Corp. (A Viant Company)



National ChoiceCare



CorVel Corporation



Coventry National Network



NovaNet



Evolutions Healthcare Systems, Inc.



National Providers Network



First Health Network (Coventry owned)




Procura Management (fka QRS)

Network Affiliates

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	Focus (Coventry owned)		SouthCare (Coventry owned)
	Fortified Provider Networks		The Covenant Companies
	Galaxy Health Network		The Initial Group
	Health One Alliance		Three Rivers Provider Network
	Integrated Health Plan		TLC Advantage
			University Health Link
	Mail Handlers Benefit Plan (see Coventry National Network)		USA Managed Care
	MedAvant / NPPN / Plan Vista		

Claims for the following networks should be sent to the payer listed on the insurance card **without** the AHCØ2 prefix:

	Employers Health Network		Prime Health Services
	Employers Choice Network		WellPath, Inc. (South Carolina only)

Claims Processing

Correct completion of the CMS-1500 and I-AHC claims is critical to accurate and prompt claim processing.

There are two methods of submitting your I-AHC claims:

- Your I-AHC claims may be mailed as a paper claim. Information on how to complete these claims is available at www.I-AHC.net, CA's Corner, How to File a Claim.
- You may also enroll in the EDI processing to electronically submit your claims with no monthly fees. More information is available at www.I-AHC.net, Network Resources, EDI Information.

Print Documentation

We recommend that you print the Provider/CA manual and the term summary sheets to have available as a reference.

Check the website regularly since it is your most up-to-date source of information.

Communication

Please keep us informed of changes in your contact information.

We will contact you via newsletters, e-mails, and mailings.