



Frequently Asked Questions (FAQs) For PrEP-AP Network Providers Pre-Exposure Prophylaxis Assistance Program (PrEP-AP)

1) What clinical services are covered by PrEP-AP and what are the reimbursement rates for services?

PrEP-AP will pay for all PrEP-related medical services identified in the list of Allowable Pre-Exposure Prophylaxis (PrEP) Related Medical Services <u>linked here</u>. PrEP-AP Network Providers will be reimbursed at the current national Medicare reimbursement rate.

2) What is the process for joining PrEP-AP Provider Network?

Clinical providers interested in joining PrEP-AP Provider Network can fill out a Clinical Provider Application <u>linked here</u> and return it by email to <u>PrEPSupport@cdph.ca.gov</u>. An Office of AIDS staff member will use the answers provided in the application to assess whether your location is eligible to join the PrEP-AP Provider Network.

3) Who is Pool Administrators Inc. (PAI)?

PAI is the Medical Benefits Manager for the PrEP-AP and processes all payments for PrEP-related medical claims on behalf of PrEP-AP.

4) How many days do providers have to bill PAI?

Providers will have 180-days to directly bill PAI or the designated medical claims clearinghouse for allowable PrEP-related medical services. Claims sent past 180 days will be denied.

- 5) How long does PAI have to pay a claim? Once a bill is received, PAI will have 90-days to remit payment.
- 6) How does a provider follow-up on a medical claim? All inquiries regarding medical claims should be directed to PAI at: 1-877-495-0990, Monday through Friday, from 8:00am – 5:00pm





7) How do providers submit a claim to PAI?

- A. Paper claims must be submitted via CMS-Form 1500 to PAI through either of the following methods:
 - Mail: PAi-CDPH, 628 Hebron Avenue, Suite 502, Glastonbury, CT 06033
 - Fax: 860-724-4599
 - Email: <u>CDPHPrEP@pooladmin.com</u>
- B. Electronic claims must be sent to the designated medical claims clearinghouse with PAI's payer ID via an 837p electronic claim transaction file.
- 8) How do I submit a claim for a sexually transmitted infection (STI) test conducted at multiple anatomic sites?

Where no unique CPT codes exists, claims for STI testing conducted at *multiple anatomic sites* must list the corresponding CPT code as separate line items with modifier 59.

9) How do I submit a claim for physician-administered medications? Claims for physician-administered medications are restricted to approved single dose medications on the PrEP-AP formulary. Please reference the Physician Administered Medication policy document <u>linked here</u> for more information.