



NORTH EAST MEDICAL SERVICES

東北醫療中心

NEMS MSO Provider Newsletter

Quarter 3: September 2025

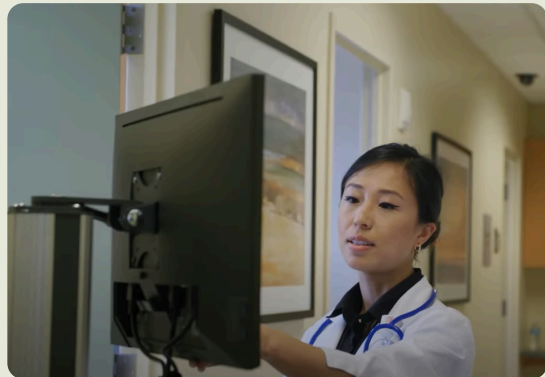
The Latest Updates for NEMS Medical Group!

What's Inside:

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- Annual Preventative Visits
- 2026 Claim Reimbursement Requirements
- Submission Address for Refunds and PDRs
- Telehealth Billing: POS 02 Reimbursed at CMS Facility Rate
- New COVID 19 Testing Requirement
- Medi-Cal Pediatric Programs

Provider Resource Links:

NEMS EZ-NET Provider Portal
Network Provider Update Form
NEMS MSO Contact Information
Interpretation Services



Submit Authorizations via NEMS EZ-NET Provider Portal

Required: Submit Authorizations in EZ-NET Portal Starting 11/1/25

NEMS MSO is preparing to transition to a new payer system. To ensure a smooth transition, all contracted providers must submit Treatment Authorization Requests (TARs) electronically through the **NEMS EZ-NET Provider Portal** starting November 1, 2025

Please note that manual submissions via fax may cause processing delays and may not be supported under the new system.

How to Access the NEMS EZ-NET Provider Portal

- Portal Link: <https://eznet.nems.org/EZ-NET60/Login.aspx>

- **New Users:** If you are not yet registered, please complete the [Provider Portal User Access Form](#) and email it to MSOEDI@nems.org.
- Each individual in your practice must have their own login credentials. Accounts should not be shared.

Training and Support

If you're new to the Provider Portal, or if you need a reminder, please click on the links below for step-by-step guides. If you need additional support, please reach out to provider.relations@nems.org.

- [Accessing Explanation of Benefits \(EOBs\)](#)
- [Searching Member Eligibility](#)
- [Submitting an Authorization](#)
- [Checking Authorization Status](#)
- [Checking Claims Status](#)

We appreciate your partnership as we move toward a more efficient and streamlined authorization process.

Reminder: In a continuing effort to safeguard patient's information, we do not provide claim or authorization status requests by phone or email. Please use the NEMS MSO EZ-NET Provider Portal to securely access this information.

Annual Preventative Visits

Remind Your Patients to Complete Their Annual Preventive Visits

Only 3 more months left in 2025! Please remember to reach out to your patients who have not yet completed their annual preventive visit. These visits are vital for closing care gaps, such as:

- Monitoring and controlling diabetes
- Managing high blood pressure
- Conducting cancer screenings, e.g., colorectal, breast, cervical
- Screening for depression and following up on positive results
- Supporting overall wellness

Annual preventive visits help patients better manage their health and detect potential issues early, leading to more effective care and improved outcomes.



2026 Claim Reimbursement Requirements

Important Claim Reimbursement Updates Effective January 1, 2026

The California Department of Managed Health Care (DMHC) has released updated claim reimbursement and processing guidelines based on [Assembly Bill \(AB\) 3275](#).

Here's what you need to know:

- **30-Day Payment Requirement:** Clean claims must be reimbursed within **30 calendar days of receipt**.
- **Written Notice for Denials:** Payers must notify providers in writing **within 30 days** if a claim (or part) is denied or contested.
- **Timely Reprocessing:** Once missing info is received on an incomplete claim, plans have **30 days** to make a payment decision.
- **Interest Penalties:** Late payments will accrue **15% annual interest**, plus an **additional \$15 or 10% of interest owed** if not paid automatically.

NEMS will apply these updates to claims received with a date of service of 1/1/2026 and after. These changes aim to improve transparency and timeliness in claim processing and protect both providers and members from unnecessary delays.

Submission Address for Refunds and PDRs

Important Reminder:

Please ensure that all refund checks and Provider Dispute Resolutions (PDRs) are mailed directly to the following address:

NEMS MSO
1710 Gilbreth Road

Submissions sent to any other address will **not** be received or processed. Timely and accurate submission to the correct location helps avoid delays in processing.

Telehealth Billing: POS 02 Reimbursed at CMS Facility Rate

Place of Service (POS) 02 for Medicare Advantage Member Claims is Reimbursed at Facility Rate

NEMS MSO follows CMS guidelines regarding payment differences based on the site of service under the Medicare Physician Fee Schedule (MPFS). Certain procedures have different reimbursement rates depending on whether they are performed in a facility or non-facility setting. The Place of Service (POS) code used on the claim must accurately reflect where the member received face-to-face services and determines whether the facility or non-facility rate applies.

For telehealth services billed with **POS 02**, reimbursement will follow the **facility rate**, consistent with CMS policy.

For more details, please refer to Page 15 of the CMS Claims Processing Manual here.

New COVID 19 Testing Requirement

Effective July 2, 2025, Prior Authorization is Required for COVID 19 Testing Completed at Outside PCP or Non-Contracted Lab

Beginning **July 2, 2025**, NEMS MSO requires prior authorization for any COVID-19 laboratory testing that is done **outside of a member's primary care provider's office or a contracted laboratory**. If a member needs a PCR COVID-19 test, please refer them back to their PCP's office or submit the specimen to a contracted laboratory. For a list of our contracted laboratories, please visit our Provider Directory at <https://nemsmso.org/doctor-directory/>

Medi-Cal Pediatric Programs

Training Materials Available!

Medi-Cal Managed care providers should annually review the pediatric programs available for beneficiaries. Please see below for a summary of these programs and review the **training materials** on the NEMS MSO website.

Comprehensive Perinatal Services Program (CPSP): CPS provides health services to low-income pregnant and postpartum women, aiming to improve health outcomes and reduce disparities in underserved communities. Services include prenatal care, nutritional counseling, and mental health support. For more information visit **CDPH CPSP**.

California Children's Services (CCS): CCS offers medical care for children under 21 with physical disabilities and chronic conditions, improving health outcomes and quality of life. It covers diagnosis, treatment, rehabilitation, and financial assistance. For more information visit **DHCS CCS**.



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