

# VA CCN Optum Billing Information

If a patient arrives as a walk-in, confirm that a valid VA referral number is on file before proceeding.

If no VA referral is available, the patient will need to contact the VA to obtain approval before proceeding.

**CARRIER NAME IN FUJI: VA CCN OPTUM**

**CODE IN FUJI: RE014**

- This is always the **primary** insurance, never secondary
- Do not add any additional insurance to the order. VA must be the **only** insurance listed for proper billing.

CARRIER			CLOSE
Name	Code	Address	
VA CCN OPTUM	RE014	PO BOX 202117, FLORENCE, SC, 29502-2117	

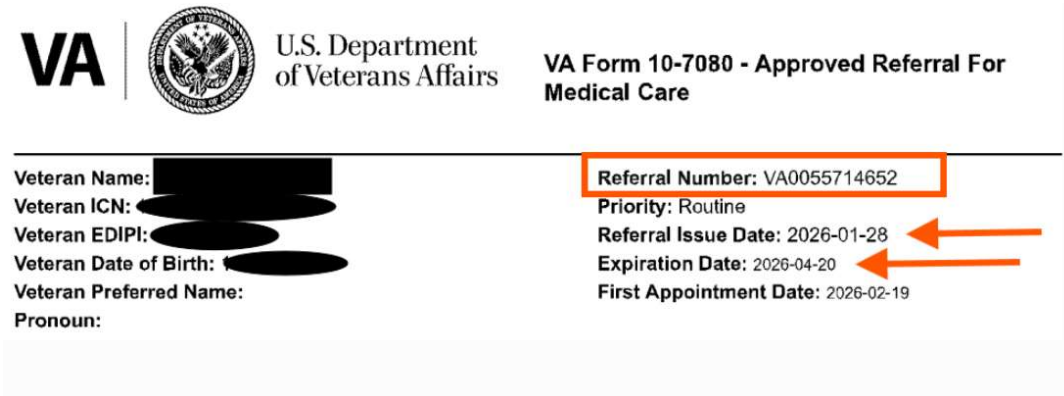


## **ID Requirements:**

- Use the **10-digit EDIPI** as the ID number.
- Do not use words, spaces, dashes, or special characters (e.g., “#”, “ICN”).

## Front Desk Workflow:

- VA Referral – Low-End Modalities (X-ray, Ultrasound, Mammography, Diagnostic Mammo, Dexa)- All low-end studies require a VA referral number.



VA | U.S. Department of Veterans Affairs | VA Form 10-7080 - Approved Referral For Medical Care

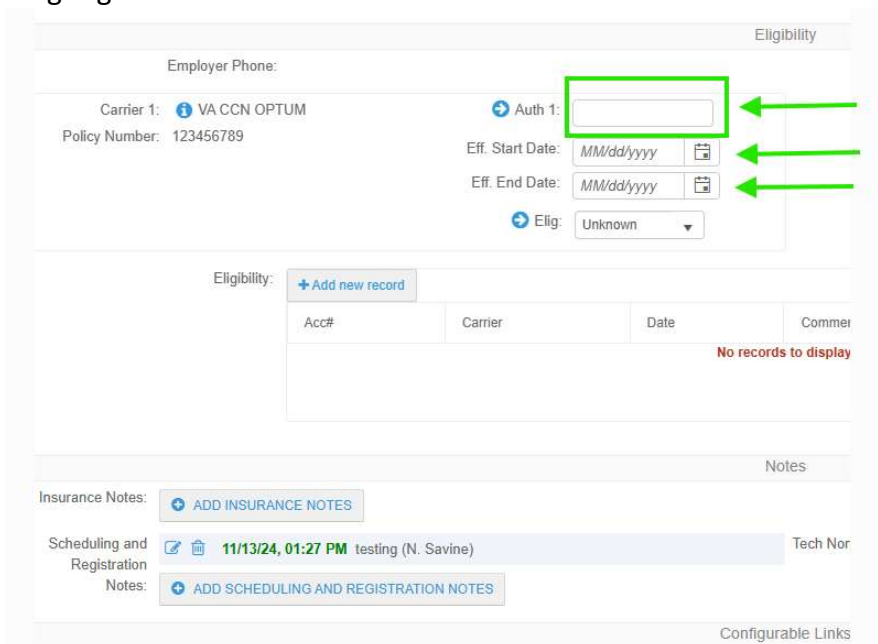
Veteran Name: [REDACTED] Referral Number: VA0055714652  
Veteran ICN: [REDACTED] Priority: Routine  
Veteran EDIPI: [REDACTED] Referral Issue Date: 2026-01-28  
Veteran Date of Birth: [REDACTED] Expiration Date: 2026-04-20  
Veteran Preferred Name: First Appointment Date: 2026-02-19  
Pronoun:

## Front Desk Chart Prep:

- Confirm all VA paperwork is scanned into the chart.
- Enter the referral/Auth number and effective Start and End dates as shown below.

## Registration:

- If the referral number was not entered during chart prep for **low end** modalities, the front desk will enter it during registration.



Employer Phone: Eligibility

Carrier 1: VA CCN OPTUM  
Policy Number: 123456789

Auth 1: [REDACTED]  
Eff. Start Date: MM/dd/yyyy  
Eff. End Date: MM/dd/yyyy  
Elig: Unknown

Eligibility: + Add new record

Acc#	Carrier	Date	Commer
No records to display			

Notes

Insurance Notes: + ADD INSURANCE NOTES

Scheduling and Registration: 11/13/24, 01:27 PM testing (N. Savine) Tech Nor

Notes: + ADD SCHEDULING AND REGISTRATION NOTES

Configurable Links

- VA Authorization – High-End Modalities (CT, MRI, Nuclear Medicine, PET, Biopsy, etc.): The **AMI PARS** team will enter the authorization/referral number for high-end studies before completing the pre-cert task.

**Verify the Referral Is Assigned to Our Location**

The approval must list:

- AMI or AMI Atlanticare under *Initial Community Care Provider/Facility*, OR
  - If not listed as the initial provider, AMI/AMI Atlanticare must be listed as the Additional Provider.
- ❖ If not listed as the initial provider, AMI/AMI Atlanticare must be listed as the **Additional Provider**.

Example: when AMI or AMI Atlanticare under *Initial Community Care Provider/Facility*

**Initial Community Care Provider/Facility:** ATLANTIC MEDICAL IMAGING PROF FEES  
**Initial Provider Location:** ATLANTIC MEDICAL IMAGING PROF FEES-44 E JIMMIE LEEDS RD ; STE 101, GALLOWAY, NJ, 08205-19320000X  
**Provider Name (if known):** ATLANTIC MEDICAL IMAGING  
**Provider Phone:** 866-282-7905  
**Provider Fax:** 732-240-3795  
**Community Provider NPI:** 1396771556  
**Caregiver type:**  
**Caregiver Details:**

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**Initial Community Care Provider/Facility:** AMI ATLANTICARE  
**Initial Provider Location:** AMI ATLANTICARE-219 N WHITE HORSE PIKE, HAMMONTON, NJ, 08037-2085R0202X  
**Provider Name (if known):** AMI ATLANTICARE  
**Provider Phone:** 866-282-7905  
**Provider Fax:** 609-652-8258  
**Community Provider NPI:** 1275762023  
**Caregiver Type:** Veteran does not rely on a caregiver  
**Caregiver Details:**

**OR**

- ❖ If not listed as the initial provider, AMI/AMI Atlanticare must be listed as the **Additional Provider**.

Appointments/Providers Assigned to the Referral

Provider/Facility Name	Provider/Facility Location	Appt Date	Appt Time	Telephone #	Fax #
ATLANTIC MEDICAL IMAGING PROF FEES NPI 1396771556	ATLANTIC MEDICAL IMAGING PROF FEES-44 E JIMMIE LEEDS RD ; STE 101, GALLOWAY, NJ, 08205-19320000X	2026-02-10	09:30 EST	866-282-7905	732-240-3795
AMI ATLANTICARE NPI 1275762023	AMI ATLANTICARE-219 N WHITE HORSE PIKE, HAMMONTON, NJ, 08037-2085R0202X	2026-02-19	13:00 EST	866-282-7905	609-652-8258

Additional Service Information

Appointments/Providers Assigned to the Referral

Provider/Facility Name	Provider/Facility Location	Appt Date	Appt Time	Telephone #
PAGNANI BRAGA KIMMEL URO ASSOC NPI 1538116660	PAGNANI BRAGA KIMMEL URO ASSOC-106 COURT HOUSE S DENNIS RD STE 201, CAPE MAY COURT HOUSE, NJ, 08210-20880000X	2022-12-15	14:15 EST	609-465-4404
ATLANTIC MEDICAL IMAGING NPI 1396771556	ATLANTIC MEDICAL IMAGING-65292023-01-12 BLACK HORSE PIKE, EGG HARBOR TOWNSHIP, NJ, 08234-261QR0200X	2023-01-12	17:00 EST	609-677-9729

## Helpful Tips:

### General Requirements:

- Always ensure a valid VA referral/authorization is on file before the patient is seen.
- **VA CCN Optum must always be listed as the primary and only insurance on the order.**
- Do not add any secondary insurance to VA orders.
- VA patients do not have traditional insurance cards — they only have VA benefit cards.

### Documentation & Scanning:

- Scan all VA paperwork under Authorization or Referral in FUJI/RIS.
- Every VA study billed to VA must have an authorization or referral number entered in the Auth 1 field in FUJI.
- This applies to all exams, including IR exams scheduled and completed in FUJI.
- Ensure scanned VA documents are legible and attached to the correct exam.

### Referrals & Support:

- If a referral is needed, contact your Front Desk Lead — all FD Leads have access to the VA website.
- For missing, unclear, or expired VA paperwork, escalate to your FD Lead immediately.

### Reschedules:

- When a VA patient is rescheduled, verify that the new appointment date falls within the valid referral/authorization date range.
- If the date falls outside the approved window, a new VA referral must be obtained.

### Important Rule:

- AMI does not accept any Urgent Care VA patients (per VA guidelines).