UnitedHealthcare Community Plan of Mississippi

FQHC/RHC Workshop

"Helping People Live Healthier Lives"



UnitedHealthcare Community Plan of Mississippi in Action 2016



- We actively engage with our members throughout the state
 - Computer giveaways
 - Heath fairs
 - Boys & Girls Clubs
 - Farm to Fork
 - Fre\$h Savings with AARP Foundation
 - City of Jackson Easter Egg Hunt co-sponsor
 - Fun Fest Wellness Event
 - 4-H Food Smart Families







Key Resources

UHCCommunityPlan.com

Key contact information, provider directory, plan details, claims filing, prior authorization procedures, and more

UnitedHealthcareOnline.com

Claim status, claim reconsideration request, claim submission, electronic payments, and more

Provider Services

MSCAN: 877-743-8734 ~ MS-CHIP: 800-557-9933

Provider Advocates

Staff of 7 field-based advocates

Network Management Team

866-574-6088 ~ <u>swproviderservices@uhc.com</u>

Emails, Faxes, and Mailings

As needed for any significant changes or updates



UnitedHealthcare® Community Plan

Key Online Resources



MississippiCAN 2016

Physician, Health Care Professional, Facility and Ancillary

Administrative Guide

Updated annually; available at UHCCommunityPlan.com

Doc#: 000903-02052016

UHCCommunityPlan.com



Mississippi | Spring 2016

practicematters

Provider newsletter for UnitedHealthcare Community Plan of Mississippi



For More Information

Call our Provider Services Center at 800-557-9933

Visit UHCCommunityPlan.com



Network Bulletin: June 2016

network bulletin

Important updates from UnitedHealthcare to health care professionals and facilities



enter

Monthly newsletter that alerts you to changes in policies or procedures; available at UHCOnline.com

United Healthcare respects the expertise of the physicians, health care professionals and their staff who participate in our network. Our



Provider Relations Service Model

Your Provider Advocate is an important resource. They can help make your interactions with us easier and more efficient.

Please follow the Provider Relations Service Model before contacting a Provider Advocate about claim payment decisions:

- 1. Check the status of a claim by logging on to UHCOnline.com
- 2.If you disagree with a claim payment decision, please contact the UnitedHealthcare Community Plan Provider Service Team:
 - MississippiCAN: 877-743-8734
 - Mississippi CHIP: 800-557-9933
- 3.Be sure to obtain a call **tracking number** for future reference. This is a 15-digit number beginning with a "C."
- 4.If the issue remains unresolved after 30 days, supply all relevant details to your Provider Advocate (i.e. copy of the claim, member name, member ID number, date of service, call tracking number)
- 5. Your Provider Advocate will work with our issue resolution team (PRISM) to determine the root cause and resolve your issue



Provider Relations Service Model

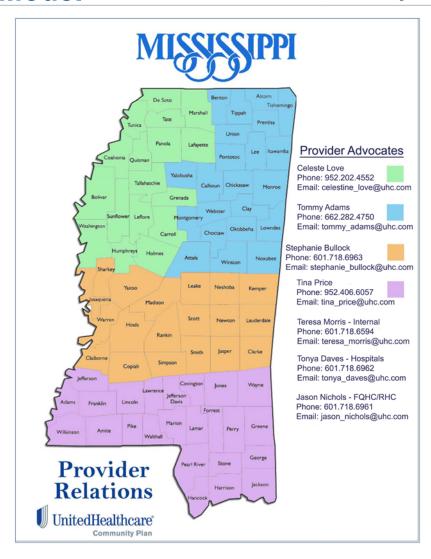
UnitedHealthcareOnline.com

UHCCommunityPlan.com

MSCAN Provider Services 1-877-743-8734

MS-CHIP Provider Services 1-800-557-9933

Network Contracting 1-866-574-6088 Option 1





Entering the Network

- 1. Apply for Provider Medicaid ID with MS Division of Medicaid
 - https://www.ms-medicaid.com/msenvision/downloadenrollPackage.do
 - Not required for CHIP participation
- 2. Complete credentialing application with CAQH
 - <u>www.CAQH.org</u> > CAQH ProView
 - 888-599-1771

Note that these initial steps do not directly involve UnitedHealthcare.



Entering the Network (cont.)

3. Contact UHC Credentialing to request participation in MSCAN and/or CHIP

- 877-842-3210
- Enter Tax ID and select 'Other Professional Services'
- 4. Disclosure of Ownership forms
 - 3. <u>www.uhccommunityplan.com</u> > Provider Forms
 - 4. Online submission or mail/fax/email
 - State requirement delegated to CCO
- 5. Contract will be sent once credentialing and disclosures are completed/approved
 - Questions can be directed to Network Management at 1-866-574-6088
 - Demographic forms/info can be sent to:
 - Fax: 855-773-3156
 - email HPDemo@uhc.com
- 6. Sign and return contract
- 7. UHC will send final copy to provider once loaded

The Disclosure of Ownership and Control

fregulation (42 CFR Part form is a federal

Medicaid health care participate in state
Managed Care Organization (MCO) and a

State Medicaid agency.



Re-credentialing

- Re-credentialing is conducted every 3
 years in compliance with NCQA standards
 and to ensure professional qualifications
 remain valid and current
- UHC begins outreach efforts several months in advance of re-cred date.
 - Needed action is specified in the letter.
 - If provider takes no action, additional letters will continue to be sent.
 - If re-cred date is reached and no provider action has taken plan, termination processes will begin.



FQHC and RHC Policies





FQHC and RHC

Encounters

- Place of service 50 and 72
- 4 distinct encounters per day (acute exception)
- Designated provider types

MD/DO

PA

APN

DMD/DDS

OD

LCSW/Psychologist

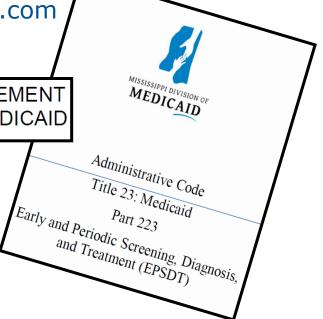
Early & Periodic Screening, Diagnosis and Treatment



- Must be registered with DOM
- 15 point clinical requirements
- Periodicity adherence
- Bill correctly to indicate EPSDT svcs
- Kenisha Potter, EPSDT Coordinator
 601-718-6609 or Kenisha_potter@uhc.com

Cool Kids

PROGRAM PROVIDER AGREEMENT MISSISSIPPI DIVISION OF MEDICAID





Claim Denials

Description	% of Total Denied
Duplicate Claim	11.11%
Terminated Member	9.24%
Send Primary Carriers EOB	7.75%
Submitted After Filing Limit	7.50%
Invalid place of service	7.40%
Provider Medicaid ID not on file	3.10%
Unknown member	2.30%
Non-covered service	1.80%
Claim date precedes subscriber eff dt.	1.30%
Procedure code requires a modifier	1.20%





Check Eligibility and Assigned PCP

To check member eligibility

- Medicaid's Envision website: msmedicaid.acs-inc.com
- UnitedHealthcareOnline.com > Patient Eligibility & Benefits
- Call UnitedHealthcare Community Plan Provider Services
 - MississippiCAN: 877-743-8734
 - Mississippi CHIP: 800-557-9933

To verify PCP affiliation, please call Provider Services

- PCP Assignment is a requirement for each member
- A preferred PCP is identified for each member either through member self-selection or auto-assignment
- PCPs are identified on member ID cards
- Members can request a PCP change at <u>any time</u> and receive a new member ID card



Claims Filing

Electronic vs. Paper

- •Electronic claims can help reduce errors and shorten payment cycles.
- •Learn more about electronic claims submission at UnitedHealthcareOnline.com > Tools & Resources > EDI Education for Electronic Transactions or call 800-842-1109.
- •If a claim must be submitted on paper, please use the following address:

UnitedHealthcare

P.O. Box 5032

Kingston, NY 12402-5032

Format

- •All claims must be submitted using the standard CMS-1500, CMS-1450/ UB04 or respective electronic format.
- •Please include all appropriate secondary diagnosis codes for line items.

Timely Filing

•Claims must be filed within six months from the date of service (MSCAN & CHIP)



Prior Authorization

Prior Authorization

- Call 866-604-3267 (Mon-Fri, 8am-5pm; or 24/7 for emergencies)
- Fax prior authorizations to 888-310-6858
- Online: UnitedHealthcareOnline.com > Notifications/Prior Authorizations
- For a complete list of services requiring prior authorization, go to UHCCommunityPlan.com > For Health Care Professionals > Mississippi

Radiology/Cardiology Prior Authorization

- eviCore manages our Rad/Card prior authorization process
- Tools and resources are available on:

UHCCommunityPlan.com > For Health Care Professionals > Mississippi > Radiology UHCCommunityPlan.com > For Health Care Professionals > Mississippi > Cardiology

- Request and verify prior auth with eviCore the following ways:
 - Online at UHCCommunityPlan.com
 - Phone: 866-889-8054Fax: 866-889-8061

Dental Prior Authorization

- Online via the provider web portal at www.uhcproviders.com
- Electronic submission via payer ID GP133
- By mail to: P.O. Box 1391 Milwaukee, WI 53201

Non-par providers should

Non-par providers seek authorization

always seek are dering service.



Inpatient Management

Admission & Birth Notifications* (non-emergent)

Verify Eligibility:

 Log on to the Medicaid Envision website at: www.ms-medicaid.com/msenvision

 Log on to the secure provider portal at: www.unitedhealthcareonline.com

Contact UHC Provider Services: 877-743-8734

Notify a Care Manager:

Call: 866-604-3267Fax: 888-310-6858

Utilization Management/Case Management

- Call 877-743-8731 (Mon-Fri, 8am-5pm; or 24/7 for emergencies)
- Staff can assist with routine prior authorizations, admissions, discharges and coordination of members' care

^{*}This does not replace any Medicaid requirement. Please continue to utilize the Newborn Enrollment Form.

UnitedHealthcare Community Plan

Pharmacy

Preferred Drug List (PDL) is defined by the Division of Medicaid and updated quarterly

- Access the PDL through Medicaid or at UHCCommunityPlan.com > For Health
 Care Professionals > Mississippi > Pharmacy Program.
- Definitions for prior authorization, quantity level limits, step therapy, and specialty medications can be found in the PDL.

Requesting Prior Authorization for non-preferred medications or for those requiring prior authorization (turnaround time is typically < 24 hours)

Phone: 800-310-6826

Fax: 866-940-7328 (Forms can be found at the website above)

An Emergency 3-Day Supply is available for immediate need of a new nonpreferred medication or a medication requiring prior authorization

Direct communication is provided to network pharmacies on how to process

Pharmacy Network Finder under Find a Pharmacy link on website
Medical Injectables most commonly given in provider-based settings are processed as medical claims.

Rx Provider Services: 877-842-3210



Disagree With a Decision?

<u>Claims</u>

Provider Services

1-877-743-8734

Website

UHCOnline.com

Reconsideration

Within 90 days of determination

Appeal

Within 30 days of determination

State Hearing

Within 30 days of UHC appeal determination

Prior Auth/UM

Peer-to-peer

Within 14 days of determination or 3 days post-discharge

Concurrent Review

Within 14 days of determination or 3 days post-discharge

Appeal

Within 30 days of determination

State Hearing

Within 30 days of UHC appeal determination



Behavioral Health

Contracting, Credentialing And Claims:

Michael Strazi

612-632-5727 michael.strazi@optum.com

Rusty Palmer

651-495-5298 james.palmer@optum.com

Fax: 877-331-5852



Care Advocates: 1-800-404-6789

Phone: 1-800-404-6789 Brenda Waldrop x67698 Brian Galloway x67821 Carmen Taylor x67170 Christina Cook x65607 Kami Stevens x67439 Karen Atkinson x67819 Lakesia Ollie x67714 Leigh Matthews x67818 Lesa McGillivray x67817 Myrtis Austin x67104 Pam Hogan x67101 Rilecia Swayze x67820 Sam Gillam x67118 Shira Brownell x67107 Star Swan x67115 Susan Cox x67113 Tammy Gibson x67173 Dwyla Wilson- MS CHIP (Statewide) x67112 **FCA Physical Locations**





<u>Dental</u> <u>Advocate Deborah Vogt</u>

www.uhcproviders.com 1-800-508-4862

Prior Authorization and COC:

- Online via the provider portal
- By mail to: P.O. Box 1391 Milwaukee, WI 53201

W

Vision Advocate Marne McCann

MarnMc@vsp.com <u>www.vsp.com</u> 1-800-852-7600, x-3376

Prior Authorization and Claims:

- Ph 1-800-852-7600
- Fx 1-916-463-3982



Questions?



Provider Services

MSCAN: 877-743-8734

MS-CHIP: 800-557-9933

Thank you!