

## **Provider Update Summary April / May 2008**

**UnitedHealthcare:** Rolisa Lewis (Jensen) distributed the March 2008 Network Bulletin. The bulletin noted that the OB Ultrasound policy for both UHC and Share Advantage, has been retired as of March, 2008.

Rolisa pointed out new Medicare payment (Secure Horizons) claim mailing addresses from San Antonio to Salt Lake City, which are listed in the Network Bulletin, as well as on member's 2008 ID cards. Remember, that UniNet does not participate in any Medicare Advantage plans at this time.

Rolisa directed all to the UHC website to access the new Administration Guide, effective 4/1/08. Not all items will apply to the UniNet contract. Please call Provider Relations at 255-0049 with questions.

She reminded the group that as of 5/23/08, NPI numbers are required for claim filing. Lastly, Rolisa said that the reimbursement policy revisions to the Contrast Materials policy have been pushed back to the 3<sup>rd</sup> Quarter of 2008.

Rolisa Lewis can be contacted at 402-445-5619 or [rolisa\\_jensen@uhc.com](mailto:rolisa_jensen@uhc.com).

**Share Advantage / Americhoice:** LeAnn Ortmeier presented the group with a new contact list. She also distributed Provider Bulletin No. 08-04, dated 2/11/08, from the Nebraska Department of Health and Human Services. This bulletin clarified Medicaid coverage for "an Ineligible Mother of an Eligible Unborn Child" as it directly relates to pregnancy / OB services. Share Advantage has not yet changed their policy to reflect this and will continue to cover non-OB care services for these mothers.

LeAnn said the February policy, outlining which services required prior notification, has been recanted as of April, 2008. They will not require prior notification on MRIs and MRAs. Prior notification is now only needed after the 6<sup>th</sup> visit on Physical, Occupational and Speech Therapy.

LeAnn also handed out a new Prior Authorization Fax Request Form for use.

LeAnn Ortmeier can be contacted at 402-445-5515 or [LeAnn\\_S\\_Ortmeier@uhc.com](mailto:LeAnn_S_Ortmeier@uhc.com)

**Blue Cross Blue Shield of Nebraska:** Rexann Legler, RN, and Stacey Keast, RN, from the Care Coordination Department, reviewed the new pre-authorization process for services requiring medical review determination. The Pre-Authorization and Pre-Certification departments have been rolled into one combined department to improve efficiency and turnaround time. Their goal is to provide at least a 72 hour turn around for these requests. They've implemented automated letters providing either an approval or denial, but not going into full benefit allowances. If this information is needed, they suggest you call Provider Services after receiving your approval. BCBSNE has updated the Pre-Authorization forms with new addresses, phone, and fax numbers which will get the form directly into their department. The group was asked to shred the old forms and begin using this new form which can be found on the BCBSNE website.

**Coventry:** While representatives from Coventry did not participate at this meeting, Carol Fouch reviewed some points of interest. Coventry's Fax Blast of 4/11/08 said they were going to start monitoring compliance with the Medical Records Standards beginning in the Fall of 2008 on 50 randomly selected Primary Care Physician clinics with 100

members or more. This document, which was distributed, included Medical Record Standards and a copy of scoring tools that will be used.

Coventry had previously issued a new Preauthorization Guide for services requiring pre-authorization. However, UniNet was still in negotiations with Coventry regarding details on this list. Those providers contracted with Coventry through UniNet, should revert back to the pink 6/1/2006 Requirement list, handed out in this update.

**Alegent Health Business Office:** Holly Hewson, Jill Clark, and Amy Atkins from the Alegent Health Business Office shared with the group new policies they were implementing at all Alegent Hospital sites regarding upfront collections. They began the process of educating consumers on what Alegent Health health insurance covered and the patient responsibility. Upfront collections began at the point of service in the emergency department. Consumer education extended to diagnostic and outpatient procedures, where the patient was notified days before the date of service. Patients were urged to pay co-pays and deductibles prior to discharge. Through the use of “My Cost,” fees for services can be discussed with self-pays before services are rendered, where financial assistance can be arranged. While these hospital representatives acknowledged that provider’s offices have already been involved in these types of benefit education and co-pay collections, they wanted to be able to work together to reach a more efficient outcome.

**UniNet:** Melanie Surber explained the mission of UniNet, and that services include not only contracting and credentialing, but also clinical initiatives. She said eventually all physicians will be involved in a quality initiative with UniNet. Currently UniNet offers disease management services for Diabetes, Heart Failure and COPD. These are telephonic services offered by UniNet nurses, free of charge to patients of UniNet providers. UniNet also has a Spanish - speaking nurse available for these disease management services. Other specialty work groups, comprised of physicians, are designing programs for the future.

The UniNet website has been upgraded recently to offer and record educational courses required for providers. There will be additional patient handout items posted here in the future.

Carol Foutch reminded the group that the physician Fee Schedules for all payors were updated April 1, except for PHCS (Private Healthcare Systems) which will be updated in July, and Midlands Choice, which will be updated in October. She directed all to request an allowance comparison via email to either Cheri Kowal or herself, including the CPT codes you want reviewed and your charge for each procedure.

Carol distributed a flier regarding a UniNet Educational Class on Modifier Usage, scheduled for June 4<sup>th</sup> at the Bergan Professional Center, 2<sup>nd</sup> floor, Rooms A & B. You can reserve your space by returning this reservation to UniNet. Space is currently full – but there will be another session offered this summer.

Lastly, Carol reminded all that Great West Life had been purchased by Cigna. All remains the same for now. Changes will be reported as they develop.

Cheri Kowal distributed a booklet including sample Identification Cards from BCBSNE, Choice Care/Humana, Coventry (including Plan M), Interplan Health/Accountable, PPO USA, PHCS – Private Healthcare, UnitedHealthcare and Share Advantage, encouraging all to review. While the booklet does not include Midlands Choice cards because they are generated by over 100 different payors, they should be identifiable with the Midlands Choice logo on the front. The booklet also does not include any Medicare Advantage cards, as UniNet does not contract with them. However, these should include the words, “Medicare Advantage” on them.

Cheri also pointed out the recent visibility of discount cards, such as Valuepoint, offered by Multiplan. These are not insurance products, and there is no insurance claim filing. If you elect to participate, you call the phone number on the ID card for the allowance and the patient is required to pay this amount at the time of service. Some providers have been receiving letters from Multiplan soliciting participation in this program. However, the letter states if you do not respond, Multiplan will assume the provider is a willing participant. This is **not** a contract through UniNet.