

Provider Update

Spring 2009



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Provider Relations
Option #2; Select #5
Fax: 573-441-2185

Medical Prior Authorization
Option #2; Select #3
Fax: 573-441-2198

Rx Prior Authorization
Option #2; Select #1
Fax: 1-866-207-6431

Claims Research
Option #2; Select #4
Fax: 573-441-2179

Member Services
Option #1; Select #3
Fax: 573-441-2199

Behavioral Health
Toll Free: 1-800-889-4073, Option #7
Fax: 1-866-543-2385



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Innovative Programs

Missouri Care believes we can best help members with complex health care challenges by integrating their behavioral and physical health care needs within a bio-psycho-social care management model. In 2004 Missouri Care brought behavioral health management "in house" rather than continuing to use a subcontractor. We recognized the importance of coordinating the behavioral health and physical health services available to our members. In 2009, we will enhance our services to improve collaboration among members, providers and healthcare systems to help members become more effective in managing their overall health.

The Model

The bio-psycho-social model focuses on member health and well-being using the critical components of behavior change, relationship building and engaging community and social systems that wrap around the member, to enhance member resiliency and self-efficacy. We start with assessing people as they present or are identified, evaluating them as "whole" beings by including all elements that may impact their health status. We then assign each person to an appropriate intensity of care management, and to a single staff person who will work closely with each member to manage all elements of their care.

Guiding Principles

- **Moving from disease focus to member focus:** Evaluating every member for physical, behavioral and social risks to their current and future health
- **Identifying and employing the most effective intensity of evidence-based, plan-covered systems and services:** Facilitating access to a continuum of services

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Preventive Care Toolkit for Providers

Have you ever used your last Healthy Child & Youth Screening form and wished you could quickly print a new one? Have you searched for information on Lead Screenings, Immunizations, Growth Charts, or Chlamydia Screenings and wished these resources were at your fingertips?

Missouri Care is continually looking for opportunities to provide resources to providers. To this end, Missouri Care developed the Preventive Care Toolkit. This toolkit equips providers with the information and resources they need to provide quality preventive health care to our members, your patients. Now available to you via CD or by visiting Missouri Care's website, you will be able to quickly locate and print resources at the click of a mouse.

Primary Care Providers will receive a toolkit CD in the mail. To access the Preventive Care Toolkit on the web, go to www.MissouriCare.com, click "Providers," then click, "Provider Resources." Thank you for the care you provide to our members, your patients, and to all of Missouri's children.



based on the intensity and complexity of each member's needs

- **Behavioral engagement for change:** Using a single point of contact to engage each member in a plan that addresses his/her critical physical, behavioral and social needs to promote resiliency, recovery and optimal self-management
- **Teaming with the member and care providers to enhance care outcomes:** Work as an interdisciplinary team that combines core competencies in physical and behavioral health within a systems framework to manage psycho-social complexity and challenging relationships with members and their families
- **Collaboration with plan sponsors to influence benefit design that supports our model:** Focus on coordinating and integrating fragmented services into a system of care that addresses each member's individual needs within the context of their family and cultural community.

What this means to you

Care management is a resource for both our members and their providers. We help members change their own health-related behaviors, and help providers by supporting more effective communication and coordination among all the services that are necessary for members to sustain better outcomes. Whenever you are working with a person who has complex health care needs that interfere with his/her ability to better manage their own health, consider the value of a bio-psycho-social approach to complex care management. Call us 1-800-322-6027.



Claims News

Electronic Resubmissions

Effective immediately, providers may now resubmit claims to Missouri Care electronically utilizing Loop 2300 Segment & Element CLM05-3 ("Claim Frequency Code") of an 837 Professional or Institutional claim. Providers can use either a claim frequency code of "7" to replace a prior claim or "8" to void/cancel a prior claim. Please note that claim resubmissions received more than 365 days after the date of service will be denied without review.

Pay-To Selection

Effective March 20, Missouri Care plans to implement changes in its claims system to make provider pay-to selection more efficient and accurate by utilizing the Billing/Pay-to Provider NPI fields of the CMS 1500 and 837 Professional claim formats. If you have not already submitted organizational NPIs for your clinic, facility, or other pay-to entity to Missouri Care, please do so at your earliest convenience. NPIs and other demographic updates may be faxed to the Provider Relations Department at 1-866-946-1105.



Secure Web Portal Upgrade

Missouri Care will be upgrading to a new version

of our secure web portal effective March 30, 2009. While the site will have a new look and feel, the ability to look up claims status, paid remittance advices, member eligibility, and PCP panel rosters remains the same. The new version of the web portal also adds the ability to download search results and will serve as the platform for a roll out of on-line authorization submission and search capabilities later this year.

Provider usernames and passwords will remain the same. However, after the upgrade your browser will no longer auto populate these during log on; instead, you will need to manually enter your username and password the first time you log into the upgraded web portal. Also, you may need to re-save the link to the web portal in your Favorites. As

always, you will be able to access the secure web portal via the Missouri Care homepage www.MissouriCare.com.

If you have forgotten your username and/or password, or if you would like to register to become a web portal user, please contact your provider relations representative at 1-800-322-6027.

First Quarter 2009 Fee Schedule Updates

Missouri Care is currently in the process of loading updates to the 1st Quarter 2009 MO HealthNet fee schedule into our claims system, with a targeted completion date of April 3, 2009. As usual, once the system update is completed, Missouri Care will reprocess affected claims for dates of service in the first quarter.

Please note that two major modifier changes were instituted by MO HealthNet with a retro-effective date back to Jan. 1.

- First, modifier 21 (prolonged evaluation and management service) has been deleted from the 2009 CPT medical code set. Therefore, full well-child (EPSDT/HCY) screenings should no longer be billed with the 21EP modifier combination, but with the EP modifier alone. Please refer to MO HealthNet Provider Bulletin Volume 31 Number 49 for full details. Those well-child visits already billed to and paid by Missouri Care will not be recouped, but once the new fee schedule updates are loaded, claims billed with a 21 modifier will be denied.
- Second, modifier RP (replacement and repair) has been deleted from the 2009 HCPCS medical code set. Therefore, providers should no longer bill DME repair items with this modifier, but should use modifier RB (replacement of a part of DME furnished as part of a repair) instead. Those DME repair items already billed to and paid by Missouri Care will not be recouped, but once the new fee schedule updates are loaded, claims billed with an RP modifier will be denied.

Lead Poisoning Prevention

Childhood lead poisoning prevention services include screening, diagnosis, treatment, and follow-up as indicated. The state MO HealthNet division requires providers to follow current Centers for Medicare and Medicaid Services (CMS) guidelines for EPSDT services and Centers for Disease Control (CDC) guidelines for Screening Young Children for Lead Poisoning and Managing Elevated Blood Lead Levels Among Young Children.

Guidelines may be accessed at:

- www.cms.hhs.gov/MedicaidEarlyPeriodicScrn
- www.cdc.gov/nceh/lead/publications/pub_Reas.htm

Missouri Care has undertaken several initiatives to increase awareness among parents and physicians of the dangers of lead poisoning and to promote blood lead testing for all Missouri Care children at 12 and 24 months of age.

We have distributed a Preventive Care Toolkit which includes a section on Lead Screening and Testing. We will continue to distribute these toolkits, which provide information about EPSDT requirements, Chlamydia, and Immunizations as well as other useful forms and information, to providers. The Toolkit is also located on our website: www.MissouriCare.com and includes the HCY/EPST Lead Risk Assessment Guide.

In addition to working with providers to increase the lead testing rates, we are also educating members through our on-hold messaging system, by distributing materials at health fairs, and through our member newsletter on the importance of being tested for lead poisoning.

If you would like additional information on lead testing and/or lead poisoning, please contact Christina Schmidl, quality coordinator, at 573-441-2145.

Lead facts

- The state of Missouri requires blood lead screening for all Medicaid children at 12 and 24 months of age and for any child who is under 72 months of age with no documented test.
- 80% of Missouri children with blood lead levels of 20 mg/dL or greater in 2004 were enrolled in Medicaid or Medicaid eligible.
- Missouri is the number one lead-producing state in the United States.
- Currently, 12 out of 28 counties in Missouri Care's service area are considered high-risk for lead poisoning.

2009 HEDIS Medical Record Review Coming to Your Office

Missouri Care Health Plan began its annual HEDIS medical record review in March. HEDIS (Healthcare Effectiveness Data and Information Set) is a standardized system developed by the National Committee for Quality Assurance (NCQA) used to measure a Managed Care Organization's (MCO) annual performance, particularly in preventive care services and services to patients with chronic care conditions. The goal is to give consumers the ability to compare MCOs and to provide information to the MCOs to help them target and measure the impact of their quality improvement initiatives.

Data are obtained through administrative collection from claims and through medical record review. A Missouri Care reviewer may be contacting your office to schedule a site visit to review members' medical records. This visit generally takes only a few hours to a day depending on the number of records at your office to review. If fewer than ten records are needed, the reviewer may ask that certain information from the medical record such as immunizations, well-child visit notes or prenatal and postpartum visit notes be faxed to our office.

Last year's medical record review was very successful because of the cooperation of our provider offices. Thank you for your assistance. We look forward to working with you and your staff on another successful HEDIS review. If you have any questions, please contact Mark Kapp, quality management nurse, at 573-441-2110

Pregnancy Risk Screening and Notification

Physicians performing obstetrical care must notify Missouri Care by completing and faxing to 1-866-946-2052 the **Pregnancy Risk Screening and Notification form** within two (2) business days of the initial visit of Missouri Care members. Missouri Care will then issue an authorization number required for reimbursement.



The Pregnancy Risk Screening and Notification form serves two purposes: the first as a global authorization for prenatal, delivery and postpartum care; the second as identification of risks for case management. Missouri Care

provides prenatal case management services for at-risk pregnant women. The Case Manager's ability to impact outcomes is dependent upon early submission of the Pregnancy Risk Screening and Notification form by the providers.

Authorizations associated with any Pregnancy Risk Screening and Notification forms received outside two (2) business days following the initial visit will not be backdated to the date of the initial visit. Instead, the effective date of the authorization will reflect the actual date of receipt of the completed form.



Missouri CareSM
HEALTH PLAN

2404 Forum Boulevard
Columbia, MO 65203

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Did You Know?

Did you know Missouri Care will reimburse their members for mileage from their home to their provider appointment and back home? Missouri Care will pay \$0.30 per mile to members who keep their appointments.



It's so easy; here is all the member needs to do:

- Call the transportation toll free number at 1-800-695-5791
- Supply the transportation provider with:
 - Missouri Care ID number
 - Current address and phone number
 - Date and time of appointment
 - Name, address and phone number of medical provider or facility
- Tell the transportation provider they will be driving themselves or give the name of the person who will be driving them

After the appointment, the transportation provider will call the medical provider or facility and make sure the member was seen. Once this is confirmed, the member or the person who drove the member will receive a check in about two weeks.

No forms to fill out, no mileage to keep track of, just a phone call at least a day before the appointment.

CAQH Application

Effective Jan. 31, 2009 the State of Missouri adopted the Council of Affordable Quality Healthcare (CAQH) Universal Provide Data Source form (UCDS), which must be used by all health carries for all credentialing activity. CAQH is a nonprofit collaboration between healthcare plans and providers that seeks to reduce the administrative burden for healthcare providers and their office staff while providing better quality and healthcare access for patients.

The CAQH application form is located on Missouri's Department of Insurance, Financial Institutions, and Professional Registration's (DIFP's) website: www.insurance.mo.gov

- Users will then scroll to 'Industry' – click on 'Forms' then scroll to HMO/Managed Care.
- Click on HMO Credentialing – under Standard Credentialing Form are links to the CAQH application plus additional information regarding the CAQH application.

For additional questions, please contact your Provider Relations Representative at 573-441-2100 or Molly White at the State 573-526-4106.