



UNIVERSITY OF UTAH  
HEALTH PLANS

# PROVIDER CONNECTION

University of Utah Health Plans Provider Relations Publication



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Spring 2015

# PROVIDER CONNECTION

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University  
**HealthCare *Plus***  
Commercial

**Healthy *Premier***  
Commercial

**Healthy**   
Medicaid

**HealthyAdvantage *Plus***  
Medicare Advantage

**HealthyAdvantage**  
Medicare Advantage  
Special Needs Plan

# UNIVERSITY OF UTAH HEALTH PLANS WELCOMES NEW CEO

We are pleased to announce that Chad Westover, M.P.A., has accepted the position of University of Utah Health Plans CEO. Most recently Westover served as president of Molina Healthcare.

There aren't many people who have been around Utah health care plans as much as Westover. While at Molina Healthcare, he oversaw the health plan operations in Utah along with the implementation and execution of various strategic initiatives. He was responsible for the plan's financial efficiency and regulatory compliance.

"I'm excited to join a stellar group of people and help build out member-focused insurance products for our employees and for the community," said Westover, who earned his undergrad and Master of Public Administration at BYU.



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## CREDENTIALING POLICY CHANGE

On July 1, 2015 an update to the University of Utah Health Plans (UUHP) General Credentialing Policy will go into effect. In an effort to reduce excessive administrative time requirements and expense as a result of unmet credentialing deadlines, UUHP has adopted the following policy update:

1. Initial credentialing applications which haven't been returned six months from the date initiated will be archived, and the provider will be required to wait one year before reapplying for network participation.
2. Failure to return completed re-credentialing applications and required documentation within the timeframe noted in the application to meet a re-credentialing deadline will result in one of two options:
  - a. The file will be archived and the provider will be required to wait one year before reapplying for network participation.
  - b. The provider may complete a new initial credentialing application and pay a \$250 fee to UUHP to offset the duplication of credentialing costs.
  - c. UUHP can, on a case by case basis, waive the requirements of (2)(a) or (b) above to meet patient care needs within the network. A waiver in one case shall not create a precedent in any following case.

Your prompt response to all credentialing requests ensures continued participation in the UUHP networks, as well as uninterrupted service to your patients.

# CORRECTED CLAIMS SUBMISSION

A corrected claim is any claim that has a change to the original claim (e.g., corrections or changes to charges, diagnosis codes, procedures, dates of service, member name or ID number, etc.) We prefer that you submit claims in an electronic format, but will also accept corrected claims submitted on paper.

## Billing codes:

- 7 - Replace (replacement/correction of prior claim)
- 8 - Void (void/cancel prior claim)

## Electronic Submission of HCFA claims:

If you don't know where the 2300 loop or 2300 NTE ADD fields are in the form you use, contact your software vendor. If your software vendor has additional questions, direct them to call our EDI department at 801-587-2638 or 801-587-2639.

1. Enter Claim Frequency Type code (billing code) "7" for a replacement/correction, or "8" to void a prior claim, in the 2300 loop in the CLM05 03.
2. To ensure we process the claim accurately, add a note explaining the reason for the resubmission in loop 2300 NTE (segment) ADD (Qualifier). For example: NTE\*ADD\* (changed CPT)
3. Enter the original claim number in the 2300 loop in the REF\*F8\*.

The original claim number can be found on your electronic claims receipt confirmation reports, or on your electronic remittance advisement.

## Paper Submission:

1. Claims should be submitted with CC modifier in box 24 (D) of the CMS 1500 form and column 44 of the UB-04. This will notify us that this is a corrected or replacement claim, so the claims examiners will not deny it as a duplicate claim.
2. In box 19, add a note to indicate the reason for the resubmission. Examples: Changed CPT, added modifier, corrected EOB, etc.
3. If you are adding or changing clinical information on the claim, or need to submit the Primary Payer's EOB, attach the required documentation.
4. Mail the corrected claim to our claims processing address (University of Utah Health Plans, PO Box 45180, Salt Lake City, UT 84145-0180). There is no need to call or fax us to alert us to your correction.

University of Utah Health Plans does not recognize claims stamped "Corrected".

## Correction timelines:

**Follow-up is required within one year of the date of service**, including resolving all claim discrepancies. Corrected or augmented information received after that date will be automatically denied as the provider's responsibility. Negligence by the provider's staff does not justify an exception to this policy.

**When another payer makes or recovers payment near or after our filing limit**, you have 90 days from the date on the EOB to submit the claim to us.



# NEW PROVIDER RELATIONS AND CONTRACTING STAFF

The Provider Relations and Contracting team at University of Utah Health Plans continues to expand! We have two new Provider Relations Coordinators, Vickie Jenkins and Erica Delong. We are excited to have these two additions to our team.

For assistance, please contact our Provider Relations Coordinators at:  
provider.relations@hsc.utah.edu or 801-587-2838.

We have also defined the Provider Contracting Executive's territories and responsibilities to better assist your offices.

**Sandra Campbell,**  
**Provider Consultant**  
sandra.campbell@hsc.utah.edu  
801-587-2943

**Todd Randall,**  
**Provider Consultant**  
todd.randall@hsc.utah.edu  
801-587-2774

## **Provider Relations and Contracting responsibilities for:**

- Professional Providers including Physicians, Practitioners, Physical Therapy Providers, Chiropractic, Behavioral Health Providers, Audiologists, Podiatrists, Optometrists, Dentists:  
Any location south of 5300 South in Salt Lake County and Utah County.
- HCA MountainStar Hospital System
- HCA Physicians
- IASIS Hospitals
- Physician Group of Utah (PGU)
- Independent Hospitals
- Ambulatory Surgical Centers
- Durable Medical Equipment Companies
- Pathology Labs
- Anesthesia Groups

## **Provider Relations and Contracting responsibilities for:**

- Professional Providers including Physicians, Practitioners, Physical Therapy Providers, Chiropractic, Behavioral Health Providers, Audiologists, Podiatrists, Optometrists, Dentists:  
Any location north of 5300 South in Salt Lake, Box Elder, Weber, Davis, Summit, Wasatch and Tooele counties.
- Shriners Hospital
- Intermountain Health Care
- Mountain West Medical Center
- Dialysis Centers
- Home Health, Hospice
- Skilled Nursing Facilities
- Ambulance Companies
- Interpreting Agencies
- LTACS



## IMPORTANT INFORMATION REGARDING YOUR CLAIMS PAYMENTS

Beginning April 2, 2105, instead of receiving paper check payments with your Explanation of Benefits (EOB) you will begin receiving Virtual Card payments from University of Utah Health Plans. The virtual card payment includes all the information necessary to collect the payment using your current Point of Sale (POS) terminal. The payment is similar to how you manually key in patient payments today. Be sure to enter the payment information for the full amount of the card's value and prior to the expiration date on the card. Please note: Your standard merchant fees will apply.

You also have the option of receiving your payments via Electronic Funds Transfer (EFT). A Provider must obtain a UHIN Trading Partner number to receive EDI Transactions from the University of Utah Health Plans. A Provider must be enrolled with the 837 to receive the 835 and EFT transaction. The 835 and EFT transactions are linked together by the Billing Provider NPI and a Provider must enroll in both transactions. To enroll, please complete the University of Utah Health Plans 835 and EFT Authorization Agreement Form. The forms can be found on our website or by clicking the links below.

If you have EDI questions, please contact us.

### EDI Support

Phone: 801-587-2638 or 801-587-2639

Fax: 801-281-6121

Email: [uuhpEDI@hsc.utah.edu](mailto:uuhpEDI@hsc.utah.edu)

## INCENTIVES FOR HEALTH SCREENINGS

UUHP is excited to announce the launch of preventive care reminder programs for our Healthy U members. We are sending reminder letters to Healthy U members who are missing Well Child Checkups, Mammograms, Pap Smears & Chlamydia testing. Members qualify for a \$10 gift certificate for completing these preventive services. We are asking our members to take the incentive form to their appointment and have their provider sign it.

## QUALITY IMPROVEMENT PROGRAM & WORKPLAN

The University of Utah Health Plans has a Quality Improvement team that is dedicated to the quality of our programs and customer service.

To access our workplan please visit our website.

## DID YOU KNOW PRETERM BIRTH IS NOT JUST A BABY ISSUE?

Preterm birth is not just a baby issue, it is a FAMILY issue. With this in mind, the University of Utah has developed “What to Expect after Preterm Birth: A Guide for Families”. The guide helps answer three central questions for families:

1. Why did this happen?
2. What are our chances of it happening again?
3. What can we do to reduce our chance of another preterm birth?

The Preterm Birth Guide is an important resource for families and healthcare providers.

Erin A. S. Clark, MD  
Assistant Professor, Maternal Fetal Medicine



## U BABY NURSE CARE MANAGERS

The U Baby Program has Care Managers who collaborate with Dr. Erin Clark following the Strong Start initiative to reduce the overall rate of preterm birth. The role of the Care Manager is to identify and enroll pregnant women with an increased risk of a preterm birth into the program.

### The Care Manager's Role:

- Recommend and follow through with evidenced based clinical interventions.
  - Hydroxyprogesterone (Makena).
  - MFM Consultation for high risk members.
- Connect members with resources.
  - Pregnancy and birthing classes, WIC referrals, and other services as needed.
  - Smoking cessation, nutrition services, and home health services.
- Help navigate health care system.
- Collaborate with Care Team to develop a treatment plan with member.
- Continually assess risk and follow up as needed.



# CHEC INFORMATION

## Does Healthy U offer health care for children (CHEC)?

Yes. If members have Traditional Medicaid, there is a special program for children called CHEC (Child Health Evaluation and Care). The CHEC program is for Healthy U children (up to age 20). Children need to have regular tests to make sure they are growing the way they should. This means checking for eyesight, hearing, speech, and other health problems. Regular and early testing can help treat problems before they get too bad. There are a lot of health services and treatments that Healthy U will pay for children that are not covered for adults.



## What does the CHEC program offer?

- Complete Well Care exams for infants, children, teenagers, and young adults up to age 20.
- Immunizations (shots).
- Medical tests to make sure

- your children are healthy.
- Education to help members learn about their child's health needs and how they grow.
- Reminders from Healthy U if a child misses a yearly exam.
- Extra services for children with special health care needs.

## What if a child has special health care needs?

If a child has diabetes, autism or another serious problem, he or she may have special needs. Caring for a child with special needs can be very hard. Members can call the Healthy U Care Managers at 888-271-5870, option 2 for assistance.

# MEMBER PROGRAMS

## Car Seat Program

University of Utah Health Plans is leading the way in safety. We have partnered with SafeKids Utah to offer our eligible members car seats at low or no costs. Members are encouraged to contact the University of Utah Health Plans Care Management Team at 801-587-6480, option 2 to get started.

## Cell Phone Program

Healthy U Medicaid members can get a free cell phone plus:

- 250 free monthly minutes
- 250 free text messages
- Free to talk 24 hours a day, 7 days a week
- Extra minutes are available at a low price through SafeLink Wireless

Interested members should contact our Customer Service at 801-587-6480. Cell phones and services are provided through SafeLink Wireless in accordance with the Lifeline Assistance Program.





## 2015 PROVIDER COMMUNITY EDUCATION FAIRS

Mark your calendars for the 2015 Community Education Fairs – bigger and better than ever! There will be topics for just about every interest. Important favorites like privacy and security and the Payer Panel will be back, along with timely new topics. Get ready for ICD-10 with a suite of classes for different readiness levels and needs, including a ground-floor ICD-10 overview, an “ask the experts” session, and an overview of ICD-10 changes to injury coding. Come for the exciting educational sessions; stay for great networking opportunities, face time with vendors, and fantastic prizes!

Don't miss out on this chance to catch so much expertise under one roof!

## HEALTHY ADVANTAGE PLUS HMO

University of Utah Health Plans and Molina Healthcare have partnered to deliver a Medicare Advantage Plan for 2015. Healthy Advantage Plus HMO is a Medicare Advantage product serving Davis, Salt Lake, Weber and Utah counties.

Some benefit highlights of this new plan include:

- Premium \$0
- ER Visits \$50 Co-pay
- Urgent Care \$35 Co-pay
- Outpatient Services \$225 Co-pay
- Lab Fees \$5 Co-pay
- Monthly Allowance for Over-the-Counter Medications and Supplies \$15
- Monthly Gym Membership Reimbursement \$20
- Worldwide Emergency Coverage

HealthyAdvantage *Plus*

Healthy Advantage Plus  
Member: John G Public  
Member #: 1509999999991  
Issue ID: 99999

PCP: SAMPLE MEDICAL CENTER WHICH IS A LONG NAME WITH FQHC  
PCP Tel: (864)733-3336

Medical Copays:  
Office Visits: \$ 5  
Specialist Visits: \$ 40  
Urgent Care: \$ 35  
ER Visits: \$ 50

ROBIN: 004336  
R/PCN: MFC00ADV  
R/Grp: RX9999  
ROID: 150999999999991

Medicare  
Part C (Medicare Advantage Plan)

Issued Date: 1/16/2015 HMO28-007

Submit Claims To:  
Molina Healthcare  
PO Box 45150, Salt Lake City, UT 84145 Please call Member Services (see above).  
Pharmacy:  
7050 Union Park Center, Suite 200, Midvale, UT 84047  
Please call Member Services (see above).

[www.uhealthplan.utah.edu/healthy\\_advantage.html](http://www.uhealthplan.utah.edu/healthy_advantage.html)

Summary of Benefits and Provider Directories can be found by clicking on the link below.

Prior-Authorization for Healthy Advantage Plus is administered through Molina Healthcare. The list of services that require prior authorization can be found by clicking the link below.

## NEW FAX NUMBER FOR UNIVERSITY OF UTAH HEALTH PLANS

Last May, University of Utah Health Plans updated its fax number to 801-281-6121. We will discontinue the use of fax number 801-587-6433. Please change your systems and directories to the new number 801-281-6121 just as soon as possible to minimize any faxing problems.

## CULTURAL DIVERSITY SENSITIVITY EDUCATION

University of Utah Health Plans (UUHP) strives to improve the quality of health care for multicultural populations by ensuring that all services are available, accessible, and provided to members in a culturally and linguistically appropriate manner.

UUHP collects and tracks the member's primary language in the claims system. UUHP requires all employees to attend cultural competence awareness training annually. UUHP tracks languages that make up 5% or more of the enrolled population, and provides materials for this population in their primary language. UUHP provides translations services to all members as needed.

## TIMELY FILING

### CLAIMS:

- When Medicaid is primary, or secondary to a Commercial plan:
  - 365 days from the date of service (DOS)
- When Medicaid is secondary to Medicare:
  - 180 days from Medicare's claims adjudication date (found on the Medicare Explanation of Benefits (EOB))

### APPEALS

- "Clinical" appeals (no claims yet - appealing the outcome of a pre-service review)
  - 30 days from the Notice of Action letter (our review denial)
- "Non-Clinical" appeals (appealing the processing of a claim)
  - 90 days from our EOB

### CORRECTIONS / REQUESTS FOR ADJUSTMENT

- When Medicaid is primary, or secondary to a Commercial plan:
  - 365 days from the date of service (DOS)
- When Medicaid is secondary to Medicare:
  - 180 days from Medicare's claims adjudication date (found on the Medicare Explanation of Benefits (EOB))



## NPI BASICS

The National Provider Identifier (NPI) is a unique, ten-digit identifier that the Centers for Medicare & Medicaid Services issued to all health care providers based on the Health Insurance Portability and Accountability Act of 1996 (HIPAA). All covered entities under HIPAA must obtain an NPI.

There are two types of NPIs

- Type 1 identifies individual practitioners.
- Type 2 identifies organizations.

University of Utah Health Plans follows all of the HIPAA rules and regulations. HIPAA requires the correct NPI on claim forms. If the NPI is missing, or if the NPI is located in the wrong location on the form, those claims will deny.

For more information on claims submission and the proper use of NPIs, please visit our website by clicking the link below.

## HEALTHY U HYSTERECTOMY ACKNOWLEDGEMENT FORM

Effective October 1, 2014, the Utah Medicaid Hysterectomy Acknowledgement Form has been updated and is available on the Utah Medicaid Website.

Claims for hysterectomy services will not be paid until this form is completed in full and received by Healthy U. Please provide copies for the patient and for your files.

## MODIFIER 25 REIMBURSEMENT FOR HEALTHY U

Modifier 25 is to be used with Evaluation and Management (E&M) codes to identify significant and separately identifiable services by the same physician on the same day of the procedure or other service. The submission of modifier 25 appended to an E&M code indicates that documentation is available in the patient's records for review upon request - that will support the significant and separately identifiable nature of the E&M service.

Effective March 1, 2015, Modifier 25 will be recognized for E&M codes for new patients (99201-99205, 99381-99387), Emergency Department (99281-99285), and Critical Care patients (99291-99292) and will be allowed at the full E&M contracted allowed amount.

In addition, Effective March 1, 2015, Modifier 25 will be recognized for E&M codes for established patients (99211-99215, 99391-99397) and will be allowed at 40% of the E&M contracted allowed amount.

Modifier 25 billed with all other E&M procedure codes will continue to be denied on our Healthy U plan.

As a reminder, do not append modifier 25 to the E&M code if CCI code combination rules do not require it. Additional edits to procedure and modifier codes may still apply.

## NOTIFICATION OF CHANGES TO YOUR PRACTICE

In order to keep our provider files and directories current, please remember to promptly submit changes to us in writing if:

- A provider leaves or joins your clinic or practice.
- You have a change to your organization's physical/billing address, phone number, tax identification number or National Provider Identifier number.

Please fax changes to 801-281-6121, attention Provider Relations Coordinator, or send by email to: [provider.relations@hsc.utah.edu](mailto:provider.relations@hsc.utah.edu).

If you have questions, contact Provider Relations at 801-587-2838 or Customer Service at 801-587-6480, option 1.

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## HEDIS IS COMING! HEDIS IS COMING!

Healthcare Effectiveness Data & Information Set (HEDIS) is a key component of University of Utah Health Plans (UUHP) quality program. We are required to report HEDIS performance measure results on our Medicaid population.

Your provider agreement requires that you participate in quality improvement activities such as HEDIS. You must provide medical records without a signed release and free of charge for these purposes.

### **What measures are we tracking?**

UUHP will review medical records on the following measures: Diabetes A1c, Eye Exam, Hypertension, Pap Smear testing, HPV, Prenatal Care, Well Child Checkups, and Immunizations.

Our Quality Improvement team may be contacting your office to request medical records for HEDIS Review





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We hope you have enjoyed the University of Utah Health Plans Provider Connection Newsletter. We look forward to keep providing you the most timely and useful content. If you have suggestions or success stories you would like to share, please contact us.

The information that is contained in this newsletter does not guarantee benefits or change contractual status. If you have questions about benefits or claims issues, please call Customer Service at 801-587-6480 or toll free 888-271-5870.

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## WEBSITE & ELECTRONIC SUPPORT

Please visit our website: [uhealthplan.utah.edu/for\\_providers](http://uhealthplan.utah.edu/for_providers) for additional resources and access to:

- Providers Updates Interchange (EDI)
- Provider Manual Info
- Provider Newsletters ...And much more
- University of Utah Health Plans Updates
- Electronic Data

## HAVE EDI QUESTIONS? EDI SUPPORT:

 801-587-2638 or 801-587-2639

 801-281-6121

 [uuhpedi@hsc.utah.edu](mailto:uuhpedi@hsc.utah.edu)

Utah Health Information Network (UHIN):  
801-466-7705 | [uhin.org](http://uhin.org)

Email provider changes to:  
[provider.relations@hsc.utah.edu](mailto:provider.relations@hsc.utah.edu)

## PROVIDER CUSTOMER SERVICE NUMBERS

Customer Service 801-587-6480, Option 1  
Toll Free/Out of Salt Lake: 888-271-5870  
Fax: 801-281-6121

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Claims/Eligibility 801-587-6480, Option 1

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Care Mgmt. Utilization Review 801-587-6480, Option 2  
Fax: 801-281-6121

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Provider Relations 801-587-2838  
[provider.relations@hsc.utah.edu](mailto:provider.relations@hsc.utah.edu)

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EDI Support 801-587-2638  
[uuhpedi@hsc.utah.edu](mailto:uuhpedi@hsc.utah.edu)

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Provider Credentialing 801-587-2769