2014 Tennessee Healthcare Financial Management Conference



Agenda

- UnitedHealthcare and UnitedHealthcare of the River Valley (Commercial)
- UnitedHealthcare Community Plan and Dual Complete Preferred
- Medicare Complete and AARP
- Provider Tools and Resources





UnitedHealthcare Commercial Plans

UnitedHealthcare





- Self-service available at www.unitedhealthcareonline.com
- *Our online portals are the most secure method for transmitting Protected Health Information (PHI)

Available 24hrs a day, recommended FIRST action



•Self-service via the United Voice Portal (our interactive voice response (IVR) system) at 877-842-3210



 Assisted service from your dedicated Provider Advocate





Outpatient Services

- Obtain an authorization/notification online at www.unitedhealthcareonline.com
- Call 1-877-842-3210 and follow the prompts for obtaining an authorization/notification

Radiology and Cardiology Services

- Obtain an authorization/notification online at www.unitedhealthcareonline.com
- Call 1-866-889-8054 and follow the prompts for obtaining an authorization/notification





<u>Pharmacy Services Optum Rx (formerly handled by Medco)</u>

- Obtain an authorization online at www.unitedhealthcareonline.com
- Call 1-877-842-3210 and follow the prompts for obtaining an authorization, including specialty drugs

Claims Submission



Paper Claims Submission

UnitedHealthcare P.O. Box 740800 Atlanta, GA 30374-0800

Electronic Claims Submission

- Payer ID 87726
- EDI Support Services by telephone at: 1-800-842-1109
- Report EDI issues at <u>www.unitedhealthcareonline.com</u> by completing the <u>EDI Issue Reporting Form</u>

Electronic Payments and Statements (EPS)

• EPS Support Services-1-866-842-3278, option 5





Claims Payment Reconsideration Requests

- Go online and submit a claim review request: www.unitedhealthcareonline.com
- Submit claim with necessary documentation using the Optum Cloud tool via the provider portal
- Call Customer Service at 1-800-224-6602
- Send a copy of the claim, supporting documentation, and the Claims Reconsideration Form to the claims address on the back of the member's card





Claims Appeal

- To be submitted after filing a Claims Reconsideration and dissatisfied with the outcome
- Send a copy of claim and supporting documentation needed for the appeal to:

UnitedHealthcare

Provider Appeals

P.O. Box 30559,

Salt Lake City, UT 84310-0575

UnitedHealthcare of the River Valley





 Self-service available at www.uhcrivervalley.com

*Our online portals are the most secure method for transmitting Protected Health Information (PHI).



•Self-service via the United Voice Portal at 1-800-224-6602

- Pharmacy at 1-800-903-6224
- Mental Health at 1-800-867-6758

Prior Authorization UHCRV



DME at 1-800-224-6602, Fax at 1-888-242-9078

Home Health at 1-800-369-2704-Option 5,
 Fax at 1-800-340-2184

Inpatient Admission at 1-800-224-6602, Fax at 1-800-880-5403

Claim Submission



Paper Claims Submission

UnitedHealthcare Community Plan PO Box 5230 Kingston, NY 12402-5220

Electronic Claims Submission

- Payer ID 95378
- EDI Support Services by telephone at: 1-866-509-1593
- EDI Support Services by email at: uhcrv_edi_support@uhc.com



Claims Reconsideration

Claims Payment Reconsideration Requests

- Go online and submit a claim review request: www.uhcrivervalley.com
- Call Customer Service at 1-800-224-6602
- Send a copy of claim and supporting documentation needed for reconsideration to:
 - UnitedHealthcare of the River Valley Payment Reconsideration 3800 Avenue of the Cities, Suite 200 Moline, IL 61265



UnitedHealthcare Community Plan and Dual Complete Preferred (SNP)

Provider Service Model





•Self-service available at www.uhccommunityplan.com

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Available 24hrs a day, recommended FIRST action



•Self-service via the United Voice Portal (our interactive voice response (IVR) system) at 800-690-1606



 Assisted service from your dedicated Provider Advocate

Prior Authorization



Medical/Behavioral Health

-Phone: 800-690-1606 (Medical Management prompt)

-Online: Community Plan Online at uhccommunityplan.com

-Medical Fax: 800-743-6829

-BH Fax: 888-785-1434 (Middle TN)

877-614-7141 (East TN)

866-359-3770 (West TN)

- Authorization must be requested and authorized prior to the services being rendered to be considered for payment.
- Retro Authorizations are not accepted through prior authorization department
- Milliman Care Guidelines UM Criteria can be found at: http://www.careguidelines.com/products/index.htm
- Additional criteria (including BH) can be found at: http://www.uhccommunityplan.com

Claims Submission



Paper Claims Submission

UnitedHealthcare Community Plan PO Box 5220 Kingston, NY 12402-5220

Electronic Claims Submission

- Payer ID 95378
- Clearinghouse is ENS Health (www.enshealth.com)
- EDI Support Services by telephone at: 800-210-8315 option #1
- EDI Support Services by email at: ac_edi_ops@uhc.com

Claims Submission



Timely Filing Guidelines

- TennCare claims for services must be submitted by 120 days from date of service or claim will be denied for timely filing
- Retro Eligible Members, 120 days begins at time
 TennCare notifies health plan of a member's eligibility
- If member has primary insurance coverage, must submit claim within 120 days of the primary EOB
- Corrected claims must be resubmitted within 120 days of processed date
- May request payment reconsideration/provider dispute within 365 days of a partially or totally denied claim

Claim Reclamation



- Reclamation refers to situations where UHCCP has recovered a
 payment that was made on a claim that should have been submitted to
 an enrollee's third party insurance prior to being submitted to UHCCP.
- Provider should call 1-800-727-6735 or fax the information to 248-733-6019. Providers should have the following information available when they call, or included if they fax in a request where another carrier is involved:
 - *EOB on hand or included from the other Carrier
 - *The name of the other Carrier
 - *Date of the check issued by the other carrier
 - *Dollar amount of the check submitted by the other carrier
- Once complete information is received, an inquiry will be submitted and research will be conducted to verify the request and determine if payment is due back to the provider.



UHCCP Readmission Policy

- Implemented January 1, 2014
- Acute care admissions which occur within 30 days- of another acute care admission with the same or similar diagnosis- will require a medical record review on a post service/prepayment basis.
- If a readmission undergoes clinical review because of a potential quality issue, the claim may be denied. Please note that if the claim is denied in full or part, providers cannot balance bill the member for a denied claim.



Medicare Complete and AARP

Medicare Complete & AARP





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Paper Claims Submission

UnitedHealthcare P.O. Box 31350 Salt Lake City, UT 84131-0350

- Electronic Claims Submission
 Payer ID 87726
- EDI Support Services by telephone at: 1-800-842-1109
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Claims Reconsideration



Claims Payment Reconsideration Requests

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Provider Tools and Resources

Provider Services





If your issue has not resolved after **30 business days**, please send inquiries the **UnitedHealthcare Provider Relations** email address at **UHC_TN_Outreach@uhc.com.** Please include the below information so your issue can be escalated to the appropriate area:

- *Member Name
- *Member ID
- *Tax ID
- *Name of Provider
- *Date(s) of Service
- *Your full name, phone number, e-mail address
- *Tracking/Reference number
- *Brief description of issue

Provider Services



Network Management Phone Team

- Contracting Question
- Copy of Fee Schedule
- Demographic Changes
- Credentialing Status
- Disclosure Assistance





• Contact the team by calling 1-866-574-6088. (This is **NOT** an avenue for claims resolution.)



Contact the team via email at swproviderservices@uhc.com.

UPNN



<u>UnitedHealthcare Provider News Network (UPNN)</u>

- Live Web Broadcast of various Provider Educational Programs
- Broadcast sessions for all lines of business:

(ie. ICD-10, PPACA Rate increase, View 360, Premium

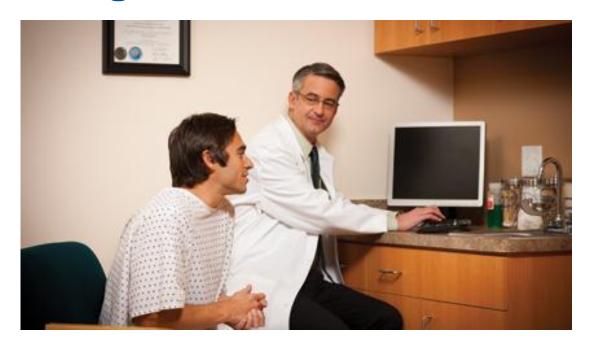
Designation, Dual Complete Crossover Claims, Claims

Submission Guidelines, Prior Authorization, etc.)

- Register for UPNN at <u>www.uhccommunityplan.com</u> under menu option Provider Education
- Once registered you will receive notifications of upcoming Webcasts and reminders of your registration



View360[™] Collaboration to Ensure Optimal Health Management



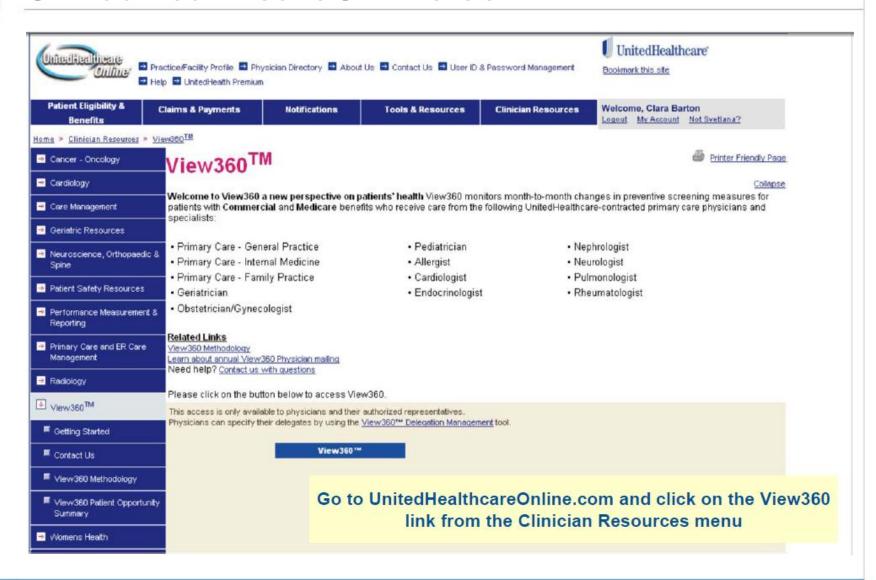




- Track month-to-month changes in patient care opportunities for up to 49 quality measures
- See when each test or procedure was last done and when it is next due
- Access up to three years of UnitedHealthcare patient care history including:
 - Procedures billed on behalf of the patient
 - Prescriptions filled by the patient and billed to UnitedHealthcare
 - Lab work performed and lab results (when available)
 - Patient's extended care team

Access View360™ From UnitedHealthcareOnline.com





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Optum Cloud Dashboard CONNECT. EXCHANGE. EVOLVE.





Optum Cloud Dashboard

UnitedHealthcare is taking another step forward in helping to ease our providers' administrative burden with the addition of new features and functions on **Optum Cloud Dashboard, a cloud-based website**. Through our strategic partnership with Optum, a leader in innovative health care technology solutions, you will be able to submit claims with attachments through Optum Cloud Dashboard, easing your administrative burden.

It will be available for the following:

- UnitedHealthcare Commercial
- Medicare Solutions
- Oxford
- UnitedHealthcare West and
- UnitedHealthcare Community Plan (2nd Qtr. 2014)

The claim reconsideration application is not yet available for:

- TRICARE West
- UnitedHealthcare Plan of the River Valley, Inc. (Commercial and Community Plan)
- UnitedHealthcare Community Plan of the District of Columbia, Kansas, Louisiana, Michigan and Nevada claims.

Optum Cloud Dashboard is an Optum product, however, the applications within it are developed by and branded UnitedHealthcare.

Confidential Property of UnitedHealth Group. Do not distribute or reproduce without express permission of UnitedHealth Group

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Provider Managed Security United Healthcare

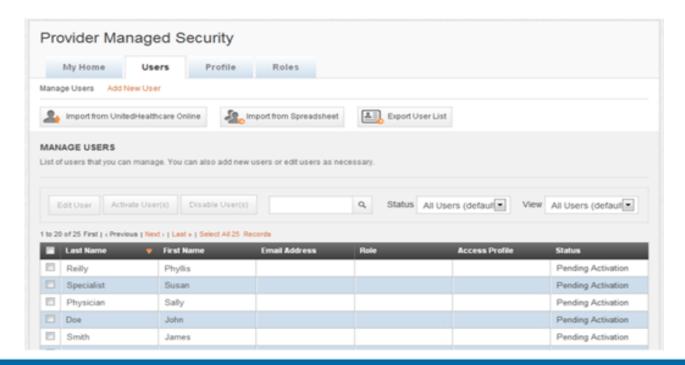


The provider managed security app is the central location for UnitedHealthcareOnline.com password owners and ID administrators to manage Optum Cloud Dashboard user access.

Users- View, add or edit who can access **Optum Cloud** Dashboard

Roles - What transactions a user can perform

Profiles - Assign and edit which TINs, specialties or physicians/health care professionals a user may access



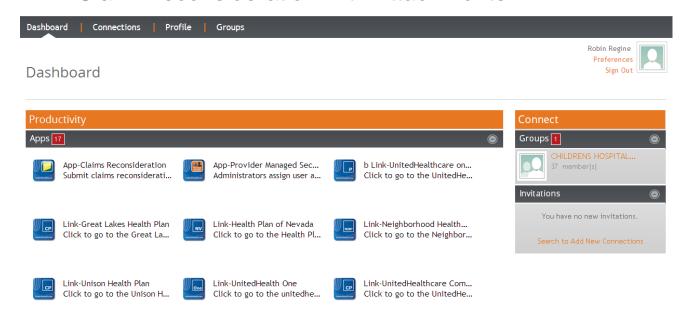


Features & Functionality

Additional features and functionality will be added to Optum Cloud Dashboard.

The initial roll out includes the following applications (apps):

- Provider Managed Security
- Claim Reconsideration with Attachments





UnitedHealthcare*

Feedback & Future Apps

"We love [it]. Issues were taken care of in a very timely manner, the portal reduced communication stressors by enabling me to see the "Action" taken and comments made by the processor. The scanning feature is a must have and you have a HUGE leg up on your competitors as far as working denials!!"

"Why would any provider not use this? It's so easy and much quicker to submit reconsiderations. It saves time and paper...It is easier to check the status as well."

Next Generation Applications (apps)



Scheduling & Registration app

A single source to obtain customizable benefit and eligibility information, streamline authorization process and summarize a patient's financial responsibility.



Claims Management app

An accounts receivable tool to view all UnitedHealthcare transactions and increase transparency of claim outcomes. Electronic reconsiderations and refunds will be available with this app.



SAVE TIME

Studies show that online claim reconsiderations take an average of 60 percent less time than paper submissions.



SAVE MONEY

Spend less on postage, paper and printing by submitting reconsiderations online.



REDUCE CALLS

Our pilot showed that using the electronic claim reconsideration with attachment app reduced the need for a follow-up phone call by 37 percent.



Registration Process

Password Owners and ID Administrators will register by logging on and visiting UnitedHealthcareOnline.com > User ID & Password

After registering, Password Owners and ID Administrators will initiate registration for others in their organization.

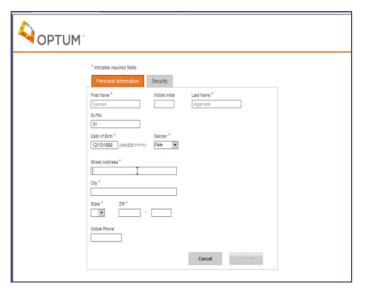
Management > Optum Cloud Dashboard

For assistance, please contact the Optum Cloud

Dashboard Help Desk: Phone: 855-819-5909

Email: OptumCloudSupport@optum.com







ICD-10 Readiness & Resources



I don't know if you know this, but I'm kind of a big deal....



ICD-10 Scope

ICD-10-CM: Replaces ICD-9 Diagnostic Codes

ICD-10-CM will be used to identify diagnosis codes in all health care settings.

ICD-10-PCS: Replaces ICD-9 **Procedure** Codes

ICD-10-PCS will be used for facility reporting of hospital inpatient services.

<u>Diagnosis Code Set</u> Clinical Modifications (ICD-10-CM)

Procedure Code Set
Procedure Coding System (ICD-10-PCS)

No impact on the existing outpatient procedure coding systems.

CPT and HCPCS coding will still be used for physician and professional services and procedures performed in outpatient facilities, including hospital outpatient departments.

Transition at a High Level



ICD-9			ICD-10
13,500 Diagnosis Codes 4,000 Procedure Codes	Increase in th Number of	 	69,000 Diagnosis Codes 71,000 Procedure Codes
Angioplasty 39.50 (1 code)	Procedure Cod	e Example	Angioplasty 047K047 Specifying body part, approach and device (854 different codes)
Pressure Ulcer Codes 707.00-707.99 Showing location, but not depth (7 codes)	Diagnosis Code	Example	Pressure Ulcer Codes L89.131 Specific location, depth, severity, occurrence (125 different codes)
Indicated through notes and other methods	No Equivalent I	CD-9 Code	Y71.3 Surgical instruments, materials and cardiovascular devices associated with adverse incidents
89.8 Autopsy	No Equivalent IO	CD-10 Code	**No equivalent ICD10 code

*Source: American Academy of Professional Coders: http://www.aapc.com/ICD-10/icd-10.aspx
**Source: CMS: ICD-10 CM/PCS An Introduction

***Source: CMS: General Equivalence Mappings

UnitedHealthcare's ICD-10 Resources



Outreach will be an important tool in strengthening the payer-provider partnership.

Communication Material/Pathway Suggestions:

- Websites
 - For example the UnitedHealthcare ICD-10 website

Site Path:

- UnitedHealthcareOnline.com → Tools & Resources → Health Information Technology → HIPAA 5010 & ICD-10

•Free On-Demand Training

- Webinars
- Provider Town Halls/Education sessions
- Documentation Audits Webinars Geared toward Physicians Targeted for 2013
- Free Industry Informative Materials
 - FAQs
 - Blogs
 - Whitepapers
- Newsletters, Bulletins
 - Take advantage of existing provider communication vehicles
- General Questions Mailbox: <u>ICD10questions@uhc.com</u>

Thank You

Any Questions?

For additional information regarding the materials covered during today's presentation please contact us at: uhc_TN_outreach@uhc.com for further assistance.

