



Hawaii | Spring 2017

# practice**matters**



**For More Information**

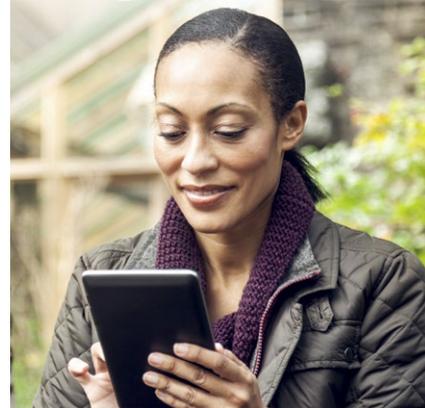
Call our Provider Services Center at **888-980-8728**

Visit **[UHCCommunityPlan.com](http://UHCCommunityPlan.com)**

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We hope you enjoy the spring edition of Practice Matters. In this issue, you can read about the new and enhanced Link apps, UHC On Air, QUEST Integration and Dual Complete Plan changes, and more.



Important information for health care professionals and facilities

## New and Enhanced Link Apps

We're introducing many enhancements to Link, your gateway to UnitedHealthcare's online tools. The following chart shows some of the upcoming changes:

App	Description	Availability
claimsLink	This new and improved app is replacing Claim Status and Claim Reconsideration on UnitedHealthcareOnline.com and the Claims Management and Claims Reconsideration apps on Link.	Launching in phases; we began to launch the app at the end of March. All users should have access to the new app by the end of May.  claimsLink training webinars are offered on <b>Tuesdays</b> at 2 p.m. and <b>Wednesdays</b> at noon Central Time through May 17. After May 17, a new registration link will be available on UnitedHealthcareOnline.com > Quick Links > <b>Training &amp; Education</b> . Sessions will be offered every other week. Video: <b>Introducing claimsLink</b> claimsLink <b>Overview</b> claimsLink <b>QRG</b>
Claims Submission	This new app allows you to submit individual institutional claims with attachments to UnitedHealthcare.	Available soon. Batch and professional claim submission will be added later.
My Practice Profile	This updated app lets you view and update your care provider demographic and practice data online. You can also use My Practice Profile to complete your quarterly attestation to the accuracy of your demographic information.	The phased launch continues and more functionality is being added.  Video: <b>My Practice Profile and Data Attestation</b>  Refer to our <b>quick reference guide</b> for information about using this app.
PreCheck MyScript	This new app will make it easy to run a trial claim to get real-time prescription coverage detail.	Launching this summer.
Prior Authorization and Notification	The new version of the app will have a redesigned user interface that gives you access to your prior authorization/notification functions within a single app that's easier to use.	Launching in phases; starting this summer. For more information, refer to the article on p. 6.
referralLink	This new and enhanced app replaces Referral Submission on UnitedHealthcareOnline.com and the referral functionality from the Eligibility & Benefits app.	Launching this summer.

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## Important information for health care professionals and facilities

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Please watch your email inbox for more information about Link. You can add [esolutions@providernews.uhc.com](mailto:esolutions@providernews.uhc.com) to your contact list to make sure the emails reach you. You also can check and update the email address in your profile by taking these steps:

1. Sign in to [UnitedHealthcareOnline.com](http://UnitedHealthcareOnline.com).
2. Select the UnitedHealthcare Online app from your Link dashboard.
3. Click My Profile on the upper right corner of the screen.
4. Update your Business Email on the Manage My Account page.
5. Click Save.

### Learn More

- New Link training videos are available on demand. Open the UHC On Air app from your Link dashboard and go to UHC News Now > Provider Self-Service.
- Information about Link is also available at [UnitedHealthcareOnline.com](http://UnitedHealthcareOnline.com) > Quick Links > [Link: Learn More](#).
- If you have questions, please call the UnitedHealthcare Connectivity Help Desk at **866-842-3278**, option 3, 7 a.m. – 9 p.m. Central Time, Monday through Friday.

## Communication between PCPs and Specialists Is Key to Well-Coordinated Care

Primary care physicians (PCPs) and specialists have shared responsibility for coordinating care and communicating essential patient information to each other. Lack of communication can negatively affect quality patient care.

Relevant information from the PCP to the specialist should include the patient's history, diagnostic tests and results, and the reason for referring the member to the specialist for a consultation. The specialist is responsible for timely communication of the results of consultations to the PCP, and ongoing recommendations and treatment plans.

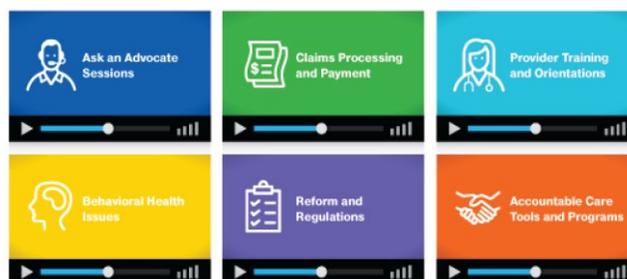
Well-coordinated care starts with a regular exchange of information between health care providers to give the patient the highest quality care and care management.

## UHC On Air

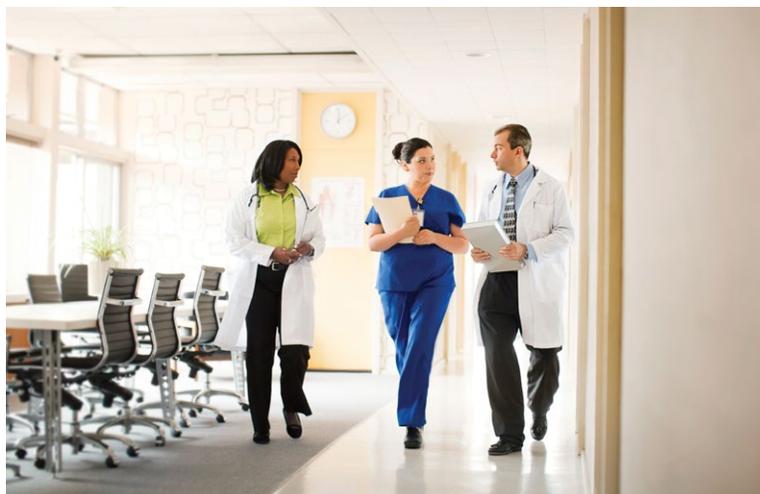
On May 1, 2017, UHC On Air was introduced to care providers who serve UnitedHealthcare members in Hawaii. Log in to [Link](#) and click UHC On Air to view a variety of topics offered in other news channels across the country.

### What is UHC On Air?

UHC On Air is on-demand programming and live broadcasting that gives you the opportunity to listen in or interact with speakers regarding topics related to doing business with UnitedHealthcare. Here are a just a few topics you'll see available:



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**Important information for health care professionals and facilities**

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We're continually working to create more programming for UHC On Air so that you can watch and learn at any time that is convenient for you from your smart device or computer. We encourage you to check it out.

## Reminder about QUEST Integration and Dual Complete Plan Changes

On Jan. 1, 2017, UnitedHealthcare Community Plan's QUEST Integration and UnitedHealthcare Dual Complete<sup>®</sup> Plan, our Dual Special Needs Plan (DSNP) in Hawaii, transitioned to a new enrollment and claims payment system. Following are reminders of some of these changes:

- **New Member Identification Cards**

QUEST Integration members received a new member ID card. The only change to this new ID number is that it contains the full 10-digit Hawaii State Medicaid ID number instead of the previous 9-digits. The additional digit is a "0" in the front of the rest of the number. Members with coverage under UnitedHealthcare Dual Complete also received a new ID number with their new member ID card. This new number is different than the number they had previously.

Please use these new numbers for all claims submissions and eligibility searches for dates of service in 2017.

- **Dedicated DSNP Provider Services Phone Number**

A new dedicated phone number for Dual Special Needs Plan Care Providers is available at 866-622-8054.

- **Electronic Remittance Advice Payer ID Number**

Electronic Remittance Advice (ERA) Payer ID number changed to 04567. For dates of service prior to Jan. 1, 2017, please continue to use your current ERA Payer ID number. **This is only for the ERA not**



**EDI.** If you submit claims electronically and are paid electronically, the payer ID did not change – continue to use 87726.

- **QUEST Integration and DSNP Paper Claim Submissions**

For claims with dates of service on or after Jan. 1, 2017, send medical paper claims to:

UnitedHealthcare Community Plan  
P.O. Box 31365  
Salt Lake City, Utah 84131-0365

- **DSNP Appeals and Grievance Address**

For claims with dates of service on or after Jan 1, 2017, send appeals to:

UnitedHealthcare  
Attn: Appeals and Grievance Department  
P.O. Box 6103 MS CA124-0157  
Cypress, CA 90630-9998

Please continue to mail appeals with dates of service prior to Jan 1, 2016, to the current mailing address.

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## Important information for health care professionals and facilities

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- **Primary Care Provider Panel Rosters**

The PCP panel roster reports will no longer be mailed. Instead, QUEST Integration care providers will be able to access them through [UnitedHealthcareOnline.com](http://UnitedHealthcareOnline.com) > Tools & Resources > Reports. You'll use your Optum ID to access them. If you don't have an Optum ID, select "New User" to complete registration. After logging on, you can access the PCP Panel Reports from the Reports page. Select "PCP panel roster" as a report type.



If you have questions, please contact your Provider Advocate or call Provider Services at 888-980-8728.

## Early Periodic Screening Diagnostic and Treatment Services

Children under age 21 on QUEST Integration are automatically enrolled in the Early Periodic Screening Diagnostic and Treatment (EPSDT) program. They can get early screening for medical, dental and behavioral health conditions and be treated for conditions detected through EPSDT benefits. Children under 21 on Medicaid who live in foster homes or community residences also are automatically enrolled in the EPSDT program and can get services.

All medically necessary EPSDT services are available to members under 21. Services may include:

- Well child exams from birth through age 20. Screenings may include hearing, vision, developmental (starting at 9 months), autism (starting at 18 months), depression (starting at age 11) or other behavioral health concerns. They can assess tuberculosis and lead risk, and include blood screening, vaccines and education. Referrals to specialists or further treatment may be medically necessary. Children should have exams at these ages and intervals:

- 14 days
- 1, 2, 4, 6, 9, 12, 15, 18 and 24 months
- three visits between age 3 and 5
- two visits between age 6 and 9
- three visits between age 10 and 14
- two visits between age 15 and 18
- one visit between age 19 and 20

- Intensive Behavioral Therapies such as Applied Behavioral Analysis (ABA) services for members with an Autism Spectrum Disorder (ASD) diagnosis.
- Members age 6 months through 20 years can receive comprehensive dental services coordinated by Community Case Management Corporation. They also can receive routine dental care, including exams twice a year, X-rays, and preventive care and treatment. Benefits do not include orthodontic care. Off-island transportation is available upon approval.
- Any services approved as medically necessary by the health plan.



## Behavioral Health Services for Youths with Autism

Children under age 21 who have autism may receive Applied Behavior Analysis (ABA) or other covered services if needed and suggested by their care provider. This includes screening, evaluation, making a treatment plan and starting services.

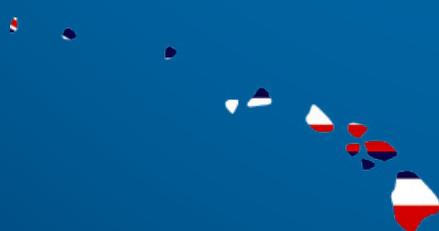
Primary care providers can do screenings for children who do not have an autism diagnosis, and children may also get ABA services until a diagnosis is made.

If a child already has a diagnosis of autism, they may be able to start ABA services without having to get diagnosed again. We'll work with you to find the best services for them. All autism services will need to be approved before they can start. The care provider contacts the appropriate Optum Behavioral Health Care Advocate to request authorization or call Provider Services at 888-980-8728.

## Member Rights and Responsibilities

UnitedHealthcare Community Plan's Member Rights and Responsibilities can be found in the Provider Manual at [UHCommunityPlan.com](http://UHCommunityPlan.com) > For Health Care Professionals > Hawaii > Manuals and Forms. Member Rights and Responsibilities are distributed to new members upon enrollment. On an annual basis, members are referred to their handbook to review their Member Rights and Responsibilities.





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Practice Matters is a quarterly publication for physicians and other health care professionals and facilities in the UnitedHealthcare network.

