



A proud partner in Iowa's *hawk-i* program



practice matters

Important information from UnitedHealthcare for physicians and other health care professionals and facilities serving UnitedHealthcare *hawk-i* members

Clinical Resources

Routine Vision Vendor Change for *hawk-i* Members

Effective Jan.1, 2012 the vision vendor for the UnitedHealthcare *hawk-i* plan in Iowa changed from Spectera (OptumHealth Vision) to Block Vision. Block Vision has been managing vision and eye care benefits since 1990 and currently serves over three million members nationwide.

There are no changes to member benefits or services. Routine eye exams, materials and some minor medical-related eye visits will now be processed by Block Vision.

The National Registry of Evidence-based Programs and Practices: A Clinical Resource

As there is an increasing number of health homes and other opportunities for practitioners to prevent, identify, and treat (when appropriate) mental health and substance use conditions, resources to support clinicians to do that also grows. The Substance Abuse and Mental Health Services Administration's (SAMHSA) National Registry of Evidence-based Programs and Practices (NREPP) catalogues interventions used for prevention or treatment of mental health and substance use (MH/SU) conditions. This online searchable resource contains more than 200 interventions that are reviewed and rated by independent reviewers. This registry relies on a self nominating system and intervention summaries are added regularly. There is a current open call to researchers and intervention developers through February 2012 for submission of interventions. If you would like to learn more about submitting interventions on the

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Call our Provider Service Center at 888-650-3462



Visit uhcommunityplan.com

NREPP's submission page, information is located at www.nrepp.samhsa.gov/ReviewSubmission.aspx.

Treatment information you will find on the NREPP

The NREPP lists an “intervention summary” for every treatment it reviews. Intervention summaries include:

- General intervention information
- The research outcomes reviewed
- Ratings on research quality
- Ratings on dissemination material
- Reviewed studies and materials
- Contact information to obtain more information about implementation or research

How can the NREPP be useful to you in your practice?

The NREPP promotes informed decision making.

- The summaries can help determine if an intervention meets client needs
- Contact information allows you to ask the intervention developer for more information

The NREPP provides a list of potential questions to support a pre-implementation discussion. The NREPP also rates the quality of research supporting outcomes and accessibility of training. SAMHSA cautions that these ratings do not reflect effectiveness of the interventions and advises users of the registry to carefully consider the Key Findings within the intervention summaries. Further, SAMHSA reminds users of the site that the registry is not exhaustive nor does inclusion carry any endorsement by SAMHSA.

Wellness Recovery Action Plan

One example of an intervention recently added to the registry is Wellness Recovery Action Plan or WRAP®. This typically time-limited, group intervention strategy for adults, developed by Mary Ellen Copeland, Ph.D., has the following goals according to the NREPP registry:

- Teach participants how to implement the key concepts of recovery (hope, personal responsibility, education, self-advocacy, and support) in their day-to-day lives
- Help participants organize a list of their wellness tools--activities they can use to help themselves feel better when they are experiencing mental health difficulties and to prevent these difficulties from arising
- Assist each participant in creating a psychiatric advance directive that guides the involvement of family members or supporters when he or she can no longer take appropriate actions on his or her own behalf
- Help each participant develop an individualized post-crisis plan for use as the mental health difficulty subsides, to promote a return to wellness.

The full report covers more information about implementation, studies considered, availability of information and materials. This peer-based program helps consumers develop their own personalized plan for managing wellness and getting health needs met using individual strengths and accessing support available from significant others and within the mental health care system. Visit SAMHSA's NREPP web site for more information about WRAP.

Take Action

Clinical Practice Guidelines

Clinical Practice Guidelines (CPG) are available through **UHCCCommunityPlan.com**. Click on Iowa as the state and there will be a link to the currently approved CPG or you may call 888-650-3462 for a copy.



Take Note

Member Rights and Responsibilities

Just a reminder, the UnitedHealthcare Community Plan Member Rights and Responsibilities can be found in the Provider Manual. The Provider Manual is located at **UHCCCommunityPlan.com**. Member Rights and Responsibilities are distributed to new members upon enrollment and annually thereafter.

e-Business Updates

Submitting Claims Electronically

Did you know by converting 10,000 paper claims, remittance advice and reimbursements to electronic transmittal (EDI, EFT, and ERA) we could:

- Save 3,729 pounds of paper
- Eliminate 148,389 pounds of greenhouse emissions (equivalent to 1,726 new trees grown for 10 years or 20,451 square feet of forest conserved)
- The average practice can save thousands of dollars per year by converting to electronic transmission

*Source : www.payitgreen.org

Getting Started with EDI is simple

To submit claims electronically: have your office software vendor or clearinghouse make

connection to UnitedHealthcare's clearinghouse OptumInsight.

Website: **www.enshealth.com**

Phone number: 800-341-6141

UnitedHealthcare Community Plan Payer ID for Iowa *hawk-i: 95378*

Contact our EDI Department to learn about no cost solutions for EDI

UnitedHealthcare Community Plan EDI Support Services

Phone number: 800-210-8315

Email: ac_edi_ops@uhc.com

Website: **UHCCCommunityPlan.com**

Receive Payment for Claims Electronically (EFT)

EFT is safe, secure, efficient, and more cost effective than paper claim payments. You can find the EFT enrollment form on our website, **if you would like to save money and time, enroll today!**



Receive Remittance Advice Electronically (ERA)

To enroll in ERA contact your software vendor and/or clearinghouse

COB (Secondary) EDI Claims Submissions are Preferred Electronically

- Please refer to the 837 Companion Guide located on our website, call our EDI Support services at 800-210-8315 or email us at ac_edi_ops@uhc.com. We will be happy to assist with setup
- Do not send paper claim backup for claims that have already been submitted electronically

Electronic Claim Submission Tips

- Include your tax identification number (TIN) along with your NPI number
- Member ID Numbers are required
- The Payer ID number indicates where clearinghouses should direct their claims

Carrier Tables and Payer ID Set-up

- Set your computer system payer tables to generate electronic claims instead of paper claims
- Make sure that payer spelling and setup are consistent. Set them as electronic versus paper
- Confirm that new patient records and additional payer listings created by front desk staff are set to be sent electronically
- Contact your software vendor or clearinghouse with any questions you may have concerning the placement of information on your computer/practice management system

Managing Your Clearinghouse Reports

- You should receive two sets of reports for every claim batch transmitted:
 - Clearinghouse acknowledgement - claims accepted and/or rejected by the clearinghouse
 - Payer acknowledgement- claims accepted and/or rejected by the payer
- Rejected claims must be corrected and re-transmitted electronically. Do not resubmit these claims via paper. Claims will only be rejected if there is something incorrect on the claim. Resubmitting a claim via paper will not correct the issue and may delay processing time.

How to Avoid Rejections

- The majority of rejected claims are the result of an eligibility issue such as:

- Subscriber/subscriber ID not found
- Coverage has been cancelled
- Conducting an eligibility check on the patient helps avoid most rejections
- Some claims might be rejected due to a provider mismatch. To ensure correct matching of the provider, ensure that you are submitting with the tax ID number as well as the NPI number **only** omitting the legacy/provider ID number
- Rejected claims must be corrected and re-transmitted electronically. Do not resubmit these claims via paper. Claims will only be rejected if there is something incorrect on the claim. Resubmitting a claim via paper will not correct the issue and may delay processing time

Effectively Manage Re-bills

- Make sure you set your re-submissions/re-bills to be sent electronically. Most systems have automatic claim re-bill capabilities that resend claims every 30 to 60 days if payment has not been posted
- Do not send paper claim backup for claims that have already been sent electronically

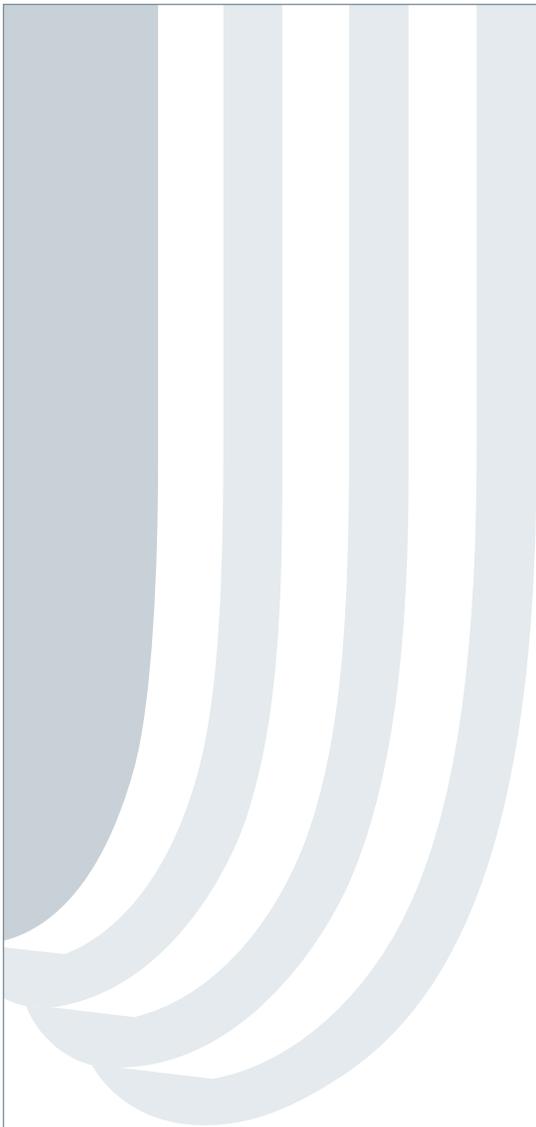
Pharmacy Updates

UnitedHealthcare Community Plan Preferred Drug List Updates

The UnitedHealthcare Community Plan Preferred Drug Lists (PDL) are available on each plan's website at

UHCCommunityPlan.com. For the most up-to-date information please visit our site, which also includes recent Pharmacy and Therapeutics Committee decisions related to PDL additions, PDL deletions and PDL modifications.

Complete PDL information is also accessible through the Epocrates Formulary tool at **www.epocrates.com**.



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



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