

Provider Network Update January 2016

McLaren Health Plan Medicaid Bid Results!

As you may know in the Spring of 2015, the Michigan Department of Health and Human Services (MDHHS) released a request for proposal (RFP) for Managed Care Plans to provide health care services to the Medicaid population. After many months of preparing documents and responding to the RFP, McLaren Health Plan is pleased to announce that we were awarded a contract with MDHHS to provide health care services to Medicaid Recipients in all 68 counties in Lower Michigan. This is a significant accomplishment, resulting in McLaren Health Plan being one of only three Health Plans who can serve the entire lower peninsula. We are excited to expand our service area and look forward to continued collaboration with our Provider Network.

MIChild Program Transitioning to a Medicaid Expansion Program

As a reminder, effective January 1, 2016, the Michigan Department of Health and Human Services (MDHHS) is transitioning members in the current MIChild program into the Medicaid program. These members will have received notification from MDHHS informing them of the changes and what to expect. Members who are McLaren Health Plan MIChild members will become McLaren Health Plan Medicaid members. They will have the same medical benefits as all other Medicaid beneficiaries, however MIChild members will also have dental benefits through the Healthy Kids Dental program.

Current MIChild beneficiaries that maybe required to switch health plans will be assisted by MIChild in choosing a health plan in their service area.

McLaren Health Plan MIChild members transitioning to Medicaid will have a new ID number January 1, 2016.

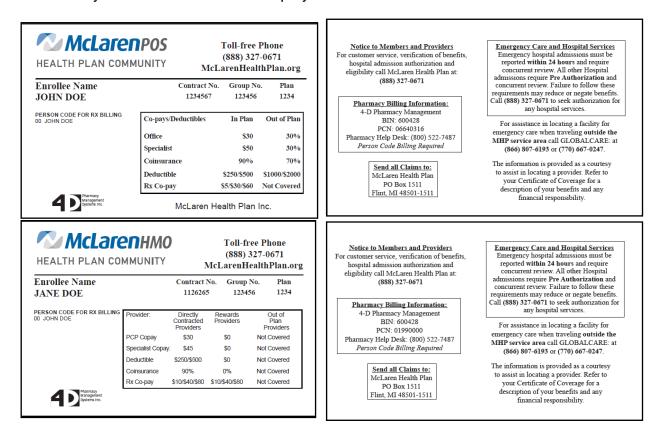
More information will be posted by MDHHS on the MIChild Provider website throughout this transition.

Reminder - McLaren Health Plan's Commercial HMO has a New Name: McLaren Health Plan Community

As a reminder, McLaren Health Plan is transitioning our Commercial HMO and POS lines of business to McLaren Health Plan Community (MHP Community). This transition will begin January 1, 2016 and take place over a two year time period. The transition of the Commercial business should be seamless to both our Providers and our Members, and will result in very few outward changes. The benefit packages that are currently offered to large groups, small groups and individuals (both on and off the

MHP20151215

Michigan Insurance Marketplace) will change very little except in name. **Most importantly, this transition will not change your participation status or your reimbursement arrangements**. For your convenience sample McLaren Health Plan Community Member ID cards are displayed below.



New CMS-Required Updates from Providers

Effective January 1, 2016, the Centers for Medicare and Medicaid Services (CMS) will require health plans to contact health care providers monthly to verify the provider's acceptance status (Primary Care Physicians only), demographic information such as office address, phone number, fax number, or office hours. This requirement is being implemented to improve information that is available to members in online Provider Directories. McLaren Health Plan will work with our Provider Network to confirm the accuracy of information that is available to members; however, it is imperative that you remember to inform McLaren Health Plan whenever a change in your availability occurs.

Referral Requirements Update

Effective February 1, 2016, McLaren Health Plan is implementing referral requirement changes/updates. Some highlights of the changes are:

- Chemotherapy: No preauthorization required
- Dialysis: No preauthorization required
- Spinal Cord Stimulators: Preauthorization required
- Specialty Medications/Injections: Codes updated
- Rhinoplasty/Septoplasty: Codes added

For a full list of CPT/HCPCS codes requiring preauthorization, please visit our website at www.MclarenHealthPlan.org.

Provider Contact Information Quick Reference Guide

To help improve communication and maintain the availability of important information to our Provider Network in a convenient reference guide, included in this mailing you will find the Provider Contact Information Quick Reference Guide. The Quick Reference Guide lists key phone contacts, key personnel, and other important information that you may use on a daily basis.

<u>Electronic Funds Transfer (EFT) and</u> Electronic Remittance Advice (ERA/835)

McLaren Health Plan is excited to announce the opportunity for our Providers who provide care to our Medicaid, Healthy Michigan Plan, and MlChild members the opportunity to receive EFT and ERA files. Included in this mailing is a copy of an introductory letter from our EFT/ERA vendor, Pay-Plus Solutions. The letter includes instructions on how to obtain enroll EFT/ERA applications.

At this time, the EFT and ERA are only available for the Medicaid, Healthy Michigan Plan, and MIChild lines of business; other lines of business will be added in the future.

New Look for the McLaren Health Plan Website

McLaren Health Plan has updated the look of our website to improve functionality for our Providers and Members. The McLaren Health Plan website is located at www.MclarenHealthPlan.org. Visit our website and click on the *Provider* tab for useful information and helpful tools.



January 2016

Dear McLaren Health Plan Medicaid Provider:

We are pleased to introduce an exciting new electronic payment (ePayment) process which we are implementing with Pay-Plus® Solutions, Inc. (PPS). This alliance provides us with the latest in secure ePayment technology to accelerate and add efficiency to our claims payment process. Please note that effective January 1, 2016, McLaren Health Plan will be transitioning Medicaid Payments to Pay-Plus for ePayment issuance.

During the data analysis phase with Pay-Plus, it was discovered that you are currently receiving electronic payments from Pay-Plus. There are no additional set-up requirements or changes needed. Within the next several weeks, your McLaren Health Plan Medicaid claim payments will be delivered via your current Pay-Plus ePayment method: Select, Select+, or Direct ACH. Additionally, the correlating remittance information will be accessible via clearinghouse, secure FTP, or direct download from the Pay-Plus web portal.

If you would like to update your payment, remittance delivery, or notification options, please call Pay-Plus Customer Service at (877) 828-8770.

The Business Advantages of Pay-Plus Solutions:

- Streamlined claims processing with a standardized and simpler method to decipher detailed EOPs
- Consolidated payments from multiple Payers, resulting in less paperwork
- Eliminates bank deposits or lockbox fees. Fewer checks clearing your account may mean lower bank fees
- Import ePayment data for more accurate posting
- Enhanced security, as checks are not sent through the postal system where they may be lost or stolen

We hope that you are as excited about improving the claims payment process as we are. Together with Pay-Plus, we look forward to the opportunity to add efficiency and speed to the payment of your claims.

Sincerely,

McLaren Health Plan

payt) plus Solutions, Inc.





Provider Contact Information Quick Reference Guide

Department	Telephone Number	Fax Number
Customer Service/Provider Inquiry Available to assist you with claim, benefit, eligibility, authorizations, and coordination of benefit inquiries Hours: 7:30 – 5:30, Monday-Friday	(888) 327-0671	Toll Free: (877) 502-1567
Network Development • Please visit the MHP website to view the most up-to-date Network Development Coordinator Map and Provider Manual	(888) 327-0671	Flint: (810) 733-9651 Lansing: (517) 913-2659 Auburn Hills: (248) 484-4918
Medical Management Referral requests can be submitted electronically via the MHP website at www.McLarenHealthPlan.org/Providers/ Referrals Requests for Pre- Authorization	(888) 327-0671	Referrals and Medical Documentation: (810) 733-9647 All Other: (810) 733-9645
Quality Management/Member Outreach • Available to assist you with Gaps in Care reports, HEDIS reports, quality incentives, member outreach	(888) 327-0671	Flint: (810) 733-9653
Sales Department	(888) 327-0671	Flint: (810) 733-9596

Key Personnel	Contact Information	
Network Development Coordinator/Office Liaison: Please visit the MHP website to view the most up-to-date Network Development Coordinator Map for the Coordinator assigned to your office		
Kerry Johnson Network Development Administrator	Email: <u>Kerry.Johnson@mclaren.org</u> Phone: (517) 913-2621 Fax: (517) 913-2659	
Wendy Upthegrove Network Development Manager	Email: Wendy.Upthegrove@mclaren.org Phone: (810) 733-9662 Fax: (810) 733-9651	
Lisa Gerlach Customer Service Manager	Email: <u>Lisa.Gerlach@mclaren.org</u> Phone: (810) 733-9626 Fax: (877) 502-1567	
Jody Landon Director, Customer and Provider Services	Email: <u>Jody.Landon@mclaren.org</u> Phone: (810) 733-9507 Fax: (810) 733-9651	

Pharmacy Services	For Formulary information or medication prior authorization request forms, please visit our website at www.McLarenHealthPlan.org/Providers/Pharmaceutical Management E-prescribing is available for all lines of business through SureScripts®		
Provider Demo- graphic Changes	Contact Network Development at (888) 327-0671 or visit our website at www.McLarenHealthPlan.org/ www.McLarenHealthPlan.org/		
Provider Portal	The MHP Provider Portal is available to all Contracted MHP Providers. On the MHP Provider Portal, you can status claims, check member eligibility, and get your monthly member roster. If you are not currently registered, call Network Development today to register		
Claims	MHP receives EDI claims from our clearinghouse, ENS Optum Insight. Our Payer IDs for electronic claims are: • McLaren Medicaid/Healthy Michigan – 3883C • McLaren Health Plan Community (Commercial HMO) – 38338 • McLaren Health Advantage (PPO) – 3833A • McLaren Advantage (Medicare HMO) – 3833R • If you have the ability to submit claims electronically, you are expected to submit your McLaren Health Plan claims electronically		
Laboratory	For Medicaid and Commercial HMO – <u>Required</u> Lab Vendor is Joint Venture Hospital Lab (JVHL); (800) 445-4979		