



NJ Hospital Association Updates March 6, 2018

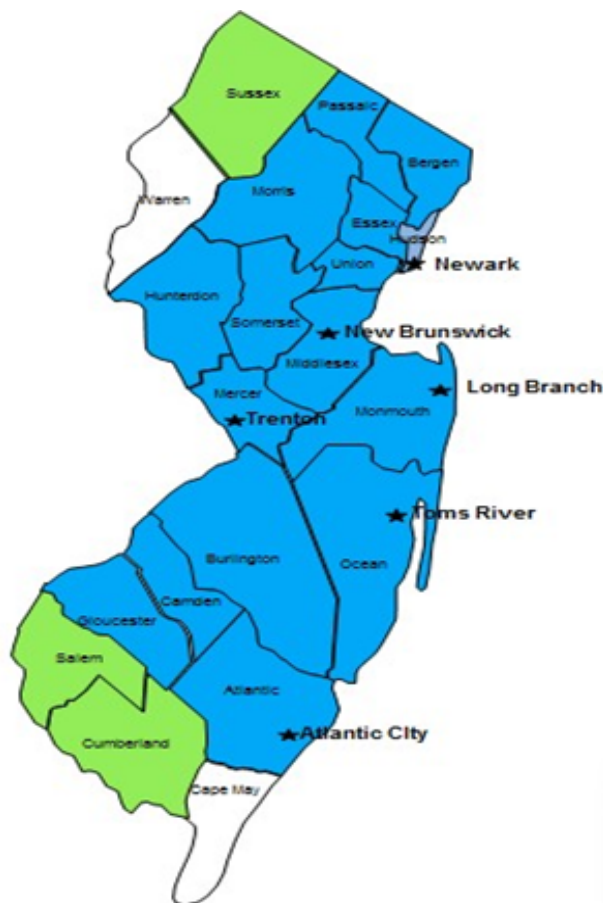


2018 New Jersey DSNP Market Overview



Dual Special Needs Plan

H3113-005 Service Area



- Current Footprint H3113-005
- Expansion H3113-005

Market Landscape*

Estimated Full Dual Eligibles	205,675
Total Dual Enrollees All Plans	22,873
Total UHC Enrollees	11,588
DSNP Penetration All Plans	11.1%
Estimated Dual Eligibles w/ out DSNP	182,802
Eligibles in Expansion Area	9,476

MARKET HIGHLIGHTS



- 3 new expansion counties for 2018
- Increased Catalog Credit benefit
- Increased OTC Product Retail Debit Card benefit
- Added Meal Program




* As of 6/1/2017

Plan designs and service areas described in this document are pending government approval and are subject to change. Benefits reflect pending in-network cost sharing. Other limitations and exclusions may apply. Confidential property of UnitedHealth Group. For Agent use only. Not intended for use as marketing material for the general public. Do not distribute, reproduce, edit or delete any portion without the express permission of UnitedHealthGroup. ©2017 UnitedHealthCare Services, Inc.

UHC Community Plan Dual Complete ONE ID Card




UnitedHealthcare® | Community Plan
 Health Plan (80840) 911-86047-08

UnitedHealthcare Dual Complete ONE

UHC Medicare ID: 9999999999 **Group Number: NJDUALCM**

Member:
 Subscriber Brown
UHC Medicaid ID: 9999999999 **Payer ID: 86047**
PCP Name:
 Provider Brown
PCP Phone: (999)999-9999

MedicareRx
 Prescription Drug Coverage

Rx Bin: 610097
Rx Grp: MPDACUNJ
Rx PCN: 8500

Copay: No Copays

Dental Benefits Included **UnitedHealthcare Dual Complete ONE(HMO SNP)**
 H3113 PBP# 005


In an emergency go to nearest emergency room or call 911. Printed: 09/21/17

Preauthorization not required for emergency care

For Members Website: www.UHCCommunityPlan.com

Customer Service:	1-800-514-4911	TTY 711
NurseLine:	1-877-440-9407	TTY 711
Behavioral Health:	1-800-514-4911	TTY 711
Dental:	1-800-514-4911	TTY 711

For Providers : UHCCommunityPlan.com **1-888-362-3368**
For Dental Providers: www.uhcproviders.com **1-800-508-4881**
Medical Claims: PO Box 5250, Kingston, NY 12402-5250


CP

Pharmacy Claims: OptumRX, PO Box 29045, Hot Springs, AR 71903
For Pharmacists: 1-877-889-6510 *Medicare ID must be used to submit Rx claims

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Latest UnitedHealthcare Provider News

02/01/2018 - Commercial Medical Policy Update Bulletin: February 2018

03/01/2018 - Commercial Medical Policy Update Bulletin: March 2018

02/01/2018 - Commercial Medical Policy Update Bulletin: February 2018


Last Modified | 03.01.2018

This bulletin provides complete details on recently approved, revised, and/or retired UnitedHealthcare Commercial Medical Policies, Medical Benefit Drug Policies, Coverage Determination Guidelines (CDG), Utilization Review Guidelines (URG), and/or Quality of Care Guidelines (QOCG).


Link users are seriously fast.


The average Link transaction can be completed **in less than one minute** compared to an average phone call of six and a half minutes or more.




 eligibilityLink


*Required


*Confirm Payer Name (Insurance Company)/Payer ID 

UnitedHealthcare - 87726 

* Member ID

* Date of Birth 

First Date of Service 

Last Date of Service 

If a date range is not entered, current date will be used.

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Health Plans by State

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New Jersey Health Plans

UnitedHealthcare provides a range of health care alternatives designed to meet the needs of our members. With our broad network of contracted care providers, health care services come from local physicians and hospitals that many plan members know and trust. Not all health care providers in a given state participate in all plans.

Commercial

[View Offered Plan Information](#)

Medicaid (Community Plan)

[Go to UHCCommunityPlan.com](#)

Medicare

[View Offered Plan Information](#)

UnitedHealthcare Administrative Guides

Comprehensive guides that allow you and your staff to find important information for topics such as processing a claim and prior authorizations, as well as protocol information for health care providers.

[View available administrative guides and manuals >](#)

UnitedHealthcare Community Plan New Jersey Providers



What can we do to make the UnitedHealthcare Provider Manuals better for you? [Click here](#) to provide feedback.

Please select the state where you practice. New Jersey Continue State Search

Provider Information	<h2>UnitedHealthcare Community Plan New Jersey Providers</h2> <p>You don't have time to spare: that's why we put all the documents you need in one place. Use the navigation items on the left to find what you're looking for fast.</p> <h3>Contact Us</h3> <h4>Claims Addresses</h4> <p>Medicaid and NJ Familycare UnitedHealthcare Community Plan P.O. Box 5250 Kingston, NY 12402-5250 Payer ID: 86047</p> <p>UnitedHealthcare Dual Complete ONE UnitedHealthcare Dual Complete® ONE P.O. Box 5250 Kingston, NY 12402-5250 Payer ID: 86047</p> <h4>Claims Appeal Address</h4> <p>Part C Appeals and Grievance Department UnitedHealthcare Community Plan Attn: Complaint and Appeals Department P.O. Box 31364 Salt Lake City, UT 84131-0364</p> <p>Part D Appeals and Grievance Department Attn: CA124-0197 P.O. Box 6106 Cypress, CA 90630-9948</p>
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Bulletins	
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Claim Reconsideration and Appeals	
Clinical Practice Guidelines	
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Electronic Data Interchange (EDI)	
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Provider Education	
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Reimbursement Policy	

National Drug Code (NDC) Requirement Policy



All Lines of Business -

Effective for claims with a date of service on or after **Jan. 1, 2017**, the National Drug Code (NDC) Requirement reimbursement policy will apply.

Claims submitted for reimbursement for drug-related codes must include the NDC number, quantity and the unit of measure for the plans below :

- UHC Commercial
- UHC Medicare Advantage
- UHC Community Plan

NDCs are the industry standard identifier for drugs and provide full transparency to the medication administered. Requiring the NDC will allow us to differentiate and target drugs that share the same HCPCS code for drug preferences and allow us to identify billing errors and improve reimbursement processes

National Drug Code (NDC) Requirement Policy



The NDC requirement applies to:

- Paper claim form CMS-1500.
- Electronic Data Interface (EDI) transaction 837P

When billed for drug-related services:

- (HCPCS) codes and drug-related
- (CPT) codes.

If you do not include the NDC with your claims submission, your claim may be denied and you will be notified through a Provider Remittance Advice (PRA) to resubmit the claim with the NDC information

Behavioral Health Integration

Change in NJ FamilyCare (NJFC) Health Plan Benefit Coverage effective July 1, 2018

- MCO will begin ownership of:
 - all SUD (Substance Use Disorder) services including but not limited to hospital based services, outpatient SUD services, SUD IOP, partial care, residential, ambulatory withdrawal management services and MAT for **MLTSS, DDD and FIDE SNP**
 - all admissions to a general acute hospital (including admissions to a psychiatric unit) for **ALL MCO enrolled individuals**. These changes are NOT limited to MLTSS, FIDE SNP and DDD.

Notification/Prior Authorization Requirements

Certain Procedures to Expand to New Jersey – Effective April 1, 2018

- For dates of service on or after April 1, 2018, we're expanding notification/prior authorization requirements for certain services to be covered in certain sites of care to include UnitedHealthcare Commercial members in New Jersey
- Dermatologic: 10120 ,10140 ,11400- 11404 ,11406, 11420 -11424, 11426 ,11442
- Gastroenterology: 45300 ,45330 ,46922
- General Surgery: 19000
- Neurologic: 62270, 62320- 62323 ,64633 ,64635
- Muscular/Skeletal: 27096 ,64479 ,64483 ,64490, 64493 ,64520
- Obstetrics/Gynecology: 57460
- Respiratory: 31579
- Urology: 55250
- Vascular: 36473, 36475, 36478

****For more information, please go to UHCprovider.com/policies > Protocols > Notification Prior Authorization Requirement for Certain Office-Based Procedures to be Covered in Other Sites of Service.**

Notification/Prior Authorization Requirements

- Carpal Tunnel: 64721
- Cataract: 66821, 66982 ,66984
- Cosmetic and Reconstructive: 13101 ,13132 ,14040, 14060, 14301, 21552, 21931
- Ear, Nose and Throat: 21320, 30140 ,30520, 69436, 69631
- Gynecology: 57522, 58353, 58558 ,58563 ,58565
- Hernia Repair: 49505 ,49585, 49587, 49650 ,49651, 49652 ,49653, 49654, 49655
- Liver Biopsy: 47000
- Ophthalmology: 65426 ,65730 ,65855 ,66170, 66761 ,67028 ,67036 ,67040 ,67228 67311, 67312
- Tonsillectomy & Adenoidectomy: 42820, 42821, 42825, 42826, 42830
- Upper & Lower Gastrointestinal Endoscopy: 43235 ,43239 ,43249, 45378, 45380 45384, 45385
- Urology: 50590 ,52000 ,52005 ,52204 ,52224, 52234 ,52235 ,52260 ,52281, 52310
- 52332, 52351, 52352 ,52353 ,52356 ,54161 ,55040 ,55700 ,57288
- Miscellaneous: 20680

NJ Incarcerated Individuals - Claim **Recovery** Project



IMPORTANT REMINDER

- Managed Care Organizations (MCOs) are not responsible for services or claim payments for a member during a period of County or State incarceration
- All inpatient hospitalization charges shall be submitted to Molina using the inmate's Medicaid ID number. Questions? [Molina Medicaid Provider Services: \(800\) 776-6334](tel:8007766334)
- Provider Newsletter (**February 2015, Volume 24 No. 15**) provides clarification

THE IMPACT

- Working jointly with the State, it has been determined that UHC Community Plan made claim payments for incarcerated members in error
- To correct this, UHC Community Plan must adjust the impacted claims to retract erroneous payments. The State can then be billed
- Impacted providers will receive a notice identifying impacted claim(s)
- We anticipate the adjustments to be initiated in April

THANK YOU !!