



ISSUE DATE May 25, 2012	EFFECTIVE DATE July 1, 2012	NUMBER 99-12-05
SUBJECT HealthChoices Physical Health Managed Care Expansion		BY  Vincent D. Gordon, Deputy Secretary Office of Medical Assistance Programs

PURPOSE:

The purpose of this bulletin is to notify all Medical Assistance (MA) enrolled providers that:

1. The Department of Public Welfare (Department) is expanding the HealthChoices mandatory managed care program to include seven counties where ACCESS Plus currently operates; and
2. ACCESS Plus will cease to operate in those seven counties effective June 30, 2012; and

The bulletin also provides contact information for the Physical Health Managed Care Organizations (PH-MCOs) serving recipients in the affected counties in order to become a network provider with one or more of the PH-MCOs.

SCOPE:

This MA Bulletin applies to all providers enrolled in the MA Program who render medical services to MA recipients who reside in the following seven counties: Bedford, Blair, Cambria, Franklin, Fulton, Huntingdon, and Somerset.

BACKGROUND/DISCUSSION:

To further the Department’s goal of improving MA recipients’ access to high quality health care, while managing health care costs, the Department is expanding the HealthChoices mandatory managed care program. HealthChoices is the program through which the Commonwealth uses Physical Health Managed Care Organizations (PH-MCOs) to deliver and coordinate physical health services for most MA recipients. The HealthChoices program currently serves approximately 1.2 million Pennsylvanians in 25 counties in the Southeast, Southwest, and Lehigh-Capital geographic zones. HealthChoices PH-MCOs have

<p>COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:</p> <p>The appropriate toll free number for your provider type</p> <p>Visit the Office of Medical Assistance Programs Web site at http://www.dpw.state.pa.us/provider/healthcaremedicalassistance/index.htm</p>

received national recognition for their success in providing access to care, care coordination, service quality and health outcomes.

PROCEDURE:

On July 1, 2012, Bedford, Blair, Cambria and Somerset Counties will be incorporated into the existing HealthChoices Southwest Zone; and Franklin, Fulton and Huntingdon Counties will join the existing HealthChoices Lehigh-Capital Zone. The ACCESS Plus Enhanced Primary Care Case Management program will end in these seven counties on June 30, 2012. Newly eligible recipients will not be enrolled in ACCESS Plus beginning June 1, 2012 and will receive services through the Fee for Service (FFS) delivery system until the July 1, 2012, managed care effective date.

Open enrollment of recipients began May 11, 2012, and will end June 14, 2012. Enrollment packets were mailed beginning May 10, 2012, informing members of their PH-MCO options. Members who do not choose one of the MCOs operating in their area during open enrollment will be automatically assigned to an MCO. Members in Bedford, Blair, Cambria, Fulton and Somerset counties who are already enrolled in voluntary managed care do not have to take any action if they wish to remain with their current PH-MCO. Voluntary managed care members also have the option to change to any PH-MCO available in their geographic zone. HealthChoices recipients can initiate a change in PH-MCOs at any time and are not limited to the open enrollment period.

In the Southwest zone, MA recipients will have the choice of enrolling with: Coventry Cares, Gateway Health Plan, United Healthcare Community Plan of PA or UPMC for You. In the Lehigh-Capital zone, MA recipients will have the choice of enrolling with Aetna Better Health, AmeriHealth Mercy Health Plan, Gateway Health Plan, United Healthcare Community Plan of PA or UPMC for You.

MAXIMUS, an independent enrollment assistance broker contracted by the Department, enrolls MA recipients with PH-MCOs in both the Southwest and Lehigh-Capital zones. MAXIMUS provides MA consumers with information about the PH-MCOs in their geographic area and also assists MA consumers in choosing a PH-MCO and primary care provider (PCP). MAXIMUS operates a call center at 1-800-440-3989 to assist consumers with making their selections. In addition, MA consumers may research the various PH-MCOs available in their area, enroll with a PH-MCO, and select a PCP through the enrollment broker website at <http://www.enrollnow.net>.

The PH-MCOs will contract with some of the existing MA-enrolled primary care physicians (PCPs), hospitals and other medical service and equipment suppliers as well as recruit new qualified MA providers in the area. To serve MA recipients who are currently enrolled in the ACCESS Plus Program, providers will need to join the network(s) of the HealthChoices PH-MCOs serving their area. Provider contact information for the PH-MCOs can be found in the chart below.

Call the Corresponding Provider Services Department(s) Below to Join

HealthChoices Lehigh-Capital Zone PH-MCOs	
PH-MCO	Provider Phone
Aetna Better Health http://www.aetnabetterhealth.com/	866-638-1232
AmeriHealth Mercy Health Plan http://www.amerihealthmercy.com/	800-521-6007
Gateway Health Plan http://www.gatewayhealthplan.com/	800-392-1145
United Healthcare Community Plan of PA http://www.uhc.com/	800-414-5349
UPMC for You http://www.upmchealthplan.com/	866-918-1595

HealthChoices Southwest Zone PH-MCOs	
PH-MCO	Provider Phone
Coventry Cares http://www.mycoventrycares.com/	866-903-0748
Gateway Health Plan http://www.gatewayhealthplan.com/	800-392-1145
United Healthcare Community Plan of PA http://www.uhc.com/	800-414-5349
UPMC for You http://www.upmchealthplan.com/	800-286-4242

To Enroll as an MA Provider Call the Department's Provider Enrollment Number

Provides assistance regarding MA enrollment processes, MA enrollment file maintenance and general MA enrollment questions	1-800-537-8862 Hours of operation: Monday – Friday, 8 AM-4:30 PM
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Some MA recipients continue to access health care through the FFS delivery system, even though they reside in the HealthChoices Zones. These MA consumers are not enrolled in the HealthChoices PH-MCOs and continue to use their ACCESS cards to obtain MA covered services.

Additionally, most MA consumers experience a two-to-four week period between their initial MA eligibility determination and the effective date of their enrollment in the PH-MCO (this

period of time is commonly referred to as the FFS eligibility window). Providers who currently participate in one or more of the PH-MCO's provider networks, are required to see HealthChoices recipients during this FFS window as part of the provider agreement. Please refer to MA Bulletin 99-07-17, "Continued Existence of the Fee-For-Service (FFS) Delivery System in HealthChoices Zones and Use of ACCESS Cards", for additional information about recipients residing in HealthChoices Zones who are in the FFS delivery system.

Prior to rendering any service, providers should verify MA recipient eligibility and delivery system enrollment status. Providers may access the Eligibility Verification System (EVS) by utilizing the Provider Electronic Solutions software, the provider's own certified software, or through the Internet at <http://promise.dpw.state.pa.us/> using the patient's social security number and date of birth (mmddyyyy) or their last name, first name and date of birth. If those access methods are not available, the provider can access the EVS through the Automated Voice Response System (telephone) by calling 1-800-766-5387 and entering the MA recipient's social security number and date of birth.

Providers should refer to MA Bulletin 99-03-13, "Continuity of Care for Recipients Transferring Between and Among Fee-for-Service and Managed Care Organizations" and MA Bulletin 99-96-01 "Continuity of Prior Authorized Services between Fee-for-Service and Managed Care Plans for Individuals Under Age 21", for information regarding continuity of care requirements.