

## **PROVIDER QUICK TIPS**



Medical Assistance (MA) Providers and Managed Care Organizations (MCOs)

Must Ensure Continuity of Care During HealthChoices (HC) New East Zone Expansion

As described in Provider Quick Tip #142, The ACCESS Plus Enhanced Primary Care Case Management program and the United Healthcare Community Plan Voluntary Physical Health (PH) managed care program will end effective February 28, 2013 in twenty-two counties of Northeast Pennsylvania, and MA recipients currently served by these programs will move to one of three new HC PH MCOs in the new HC New East Zone effective March 1, 2013. This means about 190,000 people will move from ACCESS Plus/Fee-For-Service (FFS) to HC PH-MCOs, and 16,000 people will move from United Voluntary MCO to a different HC MCO. NOTE: About 82,000 people in these counties will continue to receive their PH services through the traditional FFS program, and will not be eligible for HC and will not be required to choose a PH-MCO.

All providers enrolled in the MA program and all MCOs and counties under contract with MA must ensure continuity of care, as described in MA Bulletin (MAB) number <u>99-03-13</u>. This bulletin was issued to notify providers of the procedures to ensure the safe transition and continuity of care for MA recipients who are under a clinically appropriate course of treatment for a medical and/or behavioral health condition when they transfer from the FFS program to MCO, between MCOs and from an MCO to FFS. These procedures address:

- 1. continuity of prior authorized (PA) services for adults, and
- 2. continuity of "clinically appropriate course of treatment" plans for children and adults.

Providers of services to eligible MA recipients/enrollees are to follow the procedures relating to "Continuity of Prior Authorized Services Between Fee-for-Service and Managed Care Plans and Between Managed Care Plans for Individuals Under Age 21." These procedures can be found in attachments A through D of the MAB linked below to ensure continuation of PA services for adults and to ensure continuation of a clinically appropriate course of treatment for children and adults. To access these procedures in detail please click on the appropriate links below.

## MA Bulletin Search

## Bulletin Attachment(s):

- A. **Attachment A** Procedure for Continuity of Prior Authorized Services for Adults Transition from Feefor-Service to a Managed Care Organization <u>View</u>
- B. **Attachment B** Procedure for Continuity of Prior Authorized Services for Adults Transition from a Managed Care Organization to Fee-for-Service View
- C. Attachment C Procedure for Continuity of Prior Authorized Services for Adults Transition from an MCO to an MCO <u>View</u>
- D. **Attachment D** Procedure for Continuity of Care for Course of Treatment Services Not Requiring Prior Authorization for Adults Age 21 and Older and Children Under the Age of 21 <u>View</u>





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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 PROMISe Internet site at <a href="http://promise.dpw.state.pa.us/">http://promise.dpw.state.pa.us/</a> 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, providers 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.

The PH-MCOs' provider services telephone numbers and links to their websites can be found below:

HealthChoices New East Zone PH-MCOs	
AmeriHealth Caritas Northeast <a href="https://www.amerihealthcaritasnortheast.com/index.aspx">https://www.amerihealthcaritasnortheast.com/index.aspx</a>	866-546-7972
Aetna Better Health <a href="https://www.aetnabetterhealth.com/">https://www.aetnabetterhealth.com/</a>	866-903-0748
Geisinger Health Plan <a href="https://www.geisinger.org/health-plan/plans/ghp-family">https://www.geisinger.org/health-plan/plans/ghp-family</a>	800-876-5357
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

Thank you for your service to our Medical Assistance recipients.

The department values your participation.

Check the department's website often at: <a href="https://www.dhs.pa.gov">www.dhs.pa.gov</a>

