



# UnitedHealthcare Community & State

2024 IHCP Roadshow

Current Initiatives

Presented by UHC

United  
Healthcare®

# Agenda

- UHC Service Lines
- UHC Provider Portal
- Live Chat
- Claim Dispute Process
- Claim Updates
- Indiana PathWays for Aging Provider Orientation



# Our Service Lines

❖ UnitedHealthcare



Resources for physicians, administrators and healthcare professionals

❖ Optum Behavioral Health



❖ March Vision



❖ UnitedHealthcare Dental



# UHC Provider Portal

- Verify member eligibility and confirm benefits
- Estimate and manage claims and payments
- Start and check prior authorizations
- Verify, submit and search referral requests
- Manage prescriptions
- Manage your preferences
- Verify, update and attest to provider demographic data
- View your workflow at a glance and take action
- Access letters online
- Get help with the credentialing and contracting process
- Live Chat

[UnitedHealthcare Provider Portal resources |  
UHCprovider.com](https://UHCprovider.com)



# UHC Provider Portal – Individual Health Record (IHR)

All providers are encouraged to utilize the IHR. The IHR provides a snapshot of a member's most current pertinent information for efficient treatment.

- Care Team – Practitioners
- Immunizations
- Test/Exams/Assessments
- Medications
- Care Team – Organizations
- Visit History
- Surgical History
- Health Conditions



# UHC Provider Portal – CommunityCare Notifications



## Health care professional notifications

In CommunityCare you can opt in to receive email notifications for your patients. These notifications include, but are not limited to, admission, discharge and transfer notifications. By opting in for UnitedHealthcare Community Plan members you will receive a daily email summary of activities for all your UnitedHealthcare Community Plan of Indiana members. To opt in, access the Population Health tab in CommunityCare and select the Email Notifications check box:



[CommunityCare Provider Portal User Guide \(chameleoncloud.io\)](https://chameleoncloud.io)



# UHC Provider Portal – CommunityCare Care Plan

How to view care plan

- Select the **My Members** tab
- Select the blue hyperlink under the member's last name
- Select the **Activity Record** tab
- Select the **Activity Summary** tab
- The assessments and care plans are viewable under **Script Activity**



# UHC Provider Portal – CommunityCare Care Coordination



- To notify us of a member who would benefit from additional care coordination support:
- **Call:** Provider Services at **877-610-9785**
- **Online referral:** Using Community Care, from the **Population Health** tab:
  - Select the **My Members** tab
  - Right click on the 3-bullet icon to the left of the member's name
  - Select **Add Activity**
  - **Add Activity** for: Care Staff
  - **Type:** Scheduled
  - **Activity Type:** Referral – Care Management
  - **Priority:** High/Medium/Low, as applicable
  - **Contact Type:** Telephone Member
  - **Enter Comments/Reasons:** Provide a description of the member's care coordination support needs.
  - Leave all other options as the default option
  - Select **Add and Close**





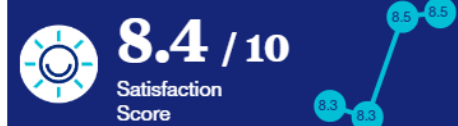
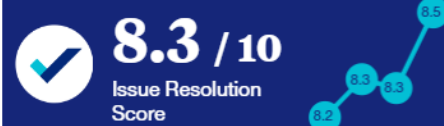


## Notification of behavioral health visits

- Select the **My Members** tab
- Right click on the 3-bullet icon to the left of the member's name
  - If you are unable to select this icon, you need to complete a Release of Information to view the member's information
- Select **Add Appointment**
- **Care Team:** Enter your name or leave as "Select".
- **Appointment Type:** Select applicable appointment type.
- **Appointment Reason:** Enter diagnosis reason driving appointment need.
- **Appointment Date:** Select date.
- **Notes:** Include information regarding the member's treatment plan, medications and other pertinent information.
- **Provider Details:** Complete with the treating provider's information.
- Select **Add**



# Live Chat



- Claims
- Eligibility & benefits
- Prior authorization
- Credentialing
- Technical support

## How and where to access chat

To sign in to the portal, go to [UHCprovider.com](https://UHCprovider.com) and click Sign In at the top-right corner. Then, enter your One Healthcare ID.

Have a team member who doesn't have a One Healthcare ID yet? Have them go to [UHC Provider Portal](#) to get started.

After signing in to the portal, chat can be accessed on the Contact Us page, 8 a.m.– 8 p.m. EST, Monday–Friday.

The Net Promoter Score listed above is a result from surveys based on the interaction the user had with Live Chat.



# Claim Dispute Process

- Claim Reconsideration
  - Include enough information to explain why the claim denied incorrectly or paid at the wrong rate. A [claim reconsideration form](#) should always be the first action regarding a claim denial or underpayment.
- Live Chat
  - UHC has dedicated chat advocates available on the portal to assist with claim inquiries, reconsideration clarification, benefit & eligibility questions and authorization challenges.
- Provider Advocate
  - We have dedicated provider advocates to assist with getting a claim review escalated if the reconsideration does not correct the issue.
- Claim Dispute
  - Must be submitted within 60 calendar days from the upheld claim reconsideration.
- In-network Formal Provider Grievance
  - Must be submitted within 120 calendar days from the upheld dispute (must include additional or new information).

Note: Medical providers and behavioral health providers request claim reconsiderations through the primary portal tool for each area.



# Claim Updates

**Effective 5/1/2024 UHC requires the billing provider's taxonomy code be entered onto all claims.**

Next steps:

- Work with your EDI Clearinghouse and billers to ensure they include billing provider taxonomy on all claims.
- Claims submitted May 1, 2024 and after will reject instead of entering into our claim system.
  - Allows providers to submit clean claims at the beginning of the process as opposed to correcting things later through the claims journey.
- After July 2024 a report of claims at risk of recoupment will be provided to providers.
  - These claims incorrectly matched in our system due to lack of billing provider taxonomy causing claim to pay initially but fail at the encounter.
  - Submit corrected claims within 90 days of this notification in order to not have the claim/s be recouped.



# Claim Updates Matching Criteria

## National Provider Identifier and One-to-One Match

The National Provider Identifier (NPI) is the standard, unique identifier for healthcare providers and is assigned by the National Plan and Provider Enumeration System (NPPES).

All healthcare providers must bill using their NPI on all claims. Only atypical, nonhealthcare providers can bill using their IHCP Provider ID.

The NPI must crosswalk to one IHCP Provider ID or the claim will be denied. Three data elements are used for the standard NPI crosswalk, to establish a one-to-one match:

- Billing NPI
- Billing taxonomy code
- Billing **service location** ZIP Code+4 on file in CoreMMIS



# PathWays For Aging Provider Orientations Medical

- Tuesday, June 4, 2024, 2:00 PM
- Thursday, June 6, 2024, 9:00 AM
- Tuesday, June 11, 2024, 1:00 PM
- Friday, June 14, 2024, 10:00 AM
- Monday, June 17, 2024, 11:00 AM
- Thursday, June 20, 2024, 1:00 PM
- Tuesday, June 25, 2024, 1:00 PM
- Thursday, June 27, 2024, 1:00 PM
- Monday, July 1, 2024, 10:00 AM
- Wednesday, July 3, 2024, 1:00 PM
- Tuesday, July 9, 2024, 2:00 PM
- Thursday, July 11, 2024, 9:00 AM



# Pathways For Aging Provider Orientation Behavioral Health

## Behavioral Health Orientation Webinars

Training will include a variety of topics:

- Integration of Behavioral Health
- Coordination of Care
- Substance Use Disorder and Opioid Treatment
- Contracting with Optum
- Provider Responsibilities
- Coding, Billing and Reimbursement
- Appeals and Complaints

## Webinar Dates *All trainings are EST*

Friday, June 7, 2024 4:00 PM

Tuesday, June 11, 2024 1:00 PM

Friday, June 21, 2024 4:00 PM

Tuesday, June 25, 2024 1:00 PM

Friday, July 5, 2024 3:00 PM

Tuesday, July 9, 2024 2:00 PM

Tuesday, July 16, 2024 3:00 PM

Friday, July 26, 2024 4:00 PM



# Your Medical Network Provider Advocate Team

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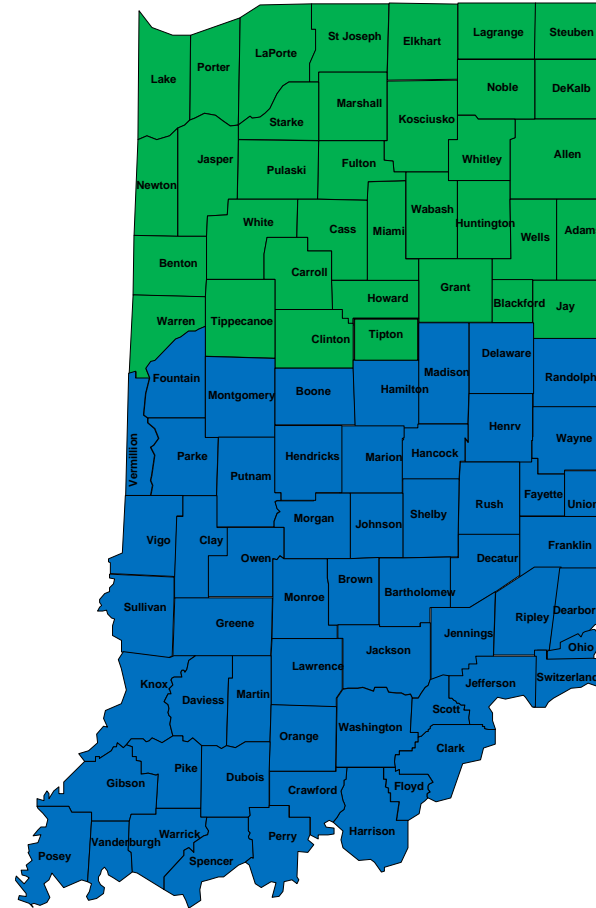


# Your Optum Behavioral Health Advocate Team

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# Your March Vision Advocate

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# Provider Reference Appendix



## Provider Service Line Website Links

- United Health Community Plan (Medical): [www.uhcprovider.com/INcommunityplan](http://www.uhcprovider.com/INcommunityplan)
- UHC Dental: [www.uhcdentalproviders.com](http://www.uhcdentalproviders.com)
- MarchVision: [www.marchvisioncare.com](http://www.marchvisioncare.com)
- Optum Behavioral Health: [Provider Express - Indiana Medicaid](#)



# Questions And Answers

Thanks for Attending Today's Session

