

Provider Check Up

FALL 2022



HPP Participating Providers Newsletter | Special Expansion Edition

Welcome to Health Partners Plans!

We are excited to expand our award-winning Medical Assistance program into your communities effective September 1, 2022. Partnering with our provider network is an important part of our success and furthers our mission to build healthier lives and stronger communities.

About Health Partners Plans

Health Partners Plans (HPP) is a not-for-profit health maintenance organization serving more than 291,000 members. We offer Medicaid, Medicare and Children's Health Insurance Program (CHIP) plans that include special benefits to improve the health and wellness of our members. We're also committed to boosting the health of our community through outreach, education and events.

We are excited to expand our Medical Assistance program into your community! Our Health Partners Medicaid plan will be available throughout the Commonwealth of Pennsylvania. This new expansion will include all five zones of Pennsylvania's Medical Assistance Program for the HealthChoices Physical Health Plans.

Impacted members have until August 16 to choose a new health plan or they will be auto-assigned a health plan by DHS. The new health plan assignments will take effect on September 1, 2022.

We look forward to working collaboratively with you and the other providers in our network to meet our members' needs and assure they receive the highest quality of care. We appreciate your support and are here to assist in answering any questions you may have regarding this procurement process. Please feel free to contact our Provider Services Helpline at **1-888-991-9023** (Monday - Friday, 9 a.m. - 5:30 p.m.)



Denise Napier
President and CEO
Health Partners Plans

Health Partners

<FIRSTNAME Q MEMBERLASTNAME>
ID: <999999999>
DOB: <99/99/9999>
PCP: <DR.> <FNAME LNAME>
<999-999-9999>
PROV #: <999999X9999999X>
RxBIN: 004336 RxPCN: MCAIDADV RxGroup: RX3892

Health Partners Plans

Use this card with you. Always call your Primary Care Provider (PCP) care. PCP or Health Partners participating specialist must arrange hospital care.
ES: Call 911 or go to the nearest Emergency Room. Call your as possible to arrange follow-up care.
ATIONS for help or questions, 24/7: Call 1-800-553-0784 454-8477).
Use the provider portal or call 888-991-9023 to verify eligibility. portal or call 866-500-4571 for admission notifications and prior ns. HOSPITAL MUST NOTIFY HEALTH PARTNERS PLANS WITHIN ESS DAYS OF HOSPITAL ADMISSION. Non-participating provider 6-500-4571 to pre-approve all non-emergency services. For other Call 888-991-9023. Pharmacies, call 866-841-7659. Send claims to: Health Partners Plans, PO Box 1220, Philadelphia, PA 19105-1220.

HPPlans.com HP-830EN-1266

**Thank you for being a
Health Partners Plans
participating provider!**

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Provider Resources

HPP is committed to providing you with the support and service you need to improve the health of our members and the communities where they live. Please see below for important HPP provider resources:



Provider Services Helpline: 1-888-991-9023

Medical provider: prompt 1
Pharmacies: prompt 2
Join the HPP provider network: prompt 3
Members: prompt 4

Quality Management: 1-855-218-2314

Member Relations:

Medicare: 1-866-901-8000
Medicaid: 1-800-553-0784
CHIP: 1-888-888-1211
TTY: 1-877-454-8477

Skilled Nursing Facilities and Rehabilitation:

215-991-4395
Fax: 215-991-4125



Credentialing Status, Correspondence & Enrollment:

Email: Credentialing@hpplans.com
Fax: 215-967-4473

Data changes:

Email: DataValidation@hpplans.com
Fax: 267-515-6650

Hospital/Facility Based Applications & Changes:

Email: ProviderData@hpplans.com
Fax: 215-967-9274



Refer Patients to Care Coordination:

215-845-4797
Email: ClinicalConnections@hpplans.com



Avesis (Dental): 1-800-327-4462

ECHO Health (Electronic funds transfer and remittance advice):

1-888-834-3511
www.echohealthinc.com

eviCore (Radiology authorizations, PT, OT, ST, medical oncology authorizations and other services):

1-888-693-3211

Davis Vision:

1-800-999-5431



Behavioral Health Services:

Medicare: 1-800-424-3706 (Magellan)
CHIP: 1-800-424-3702 (Magellan)
Medicaid (by county):
<https://www.dhs.pa.gov/HealthChoices/HC-Services/Pages/BehavioralHealth-MCOs.aspx>

Pharmacy Overview

Pharmacy Services oversees the operation and administration of the prescription benefit program for HPP members. This includes developing policies and procedures that meet all federal and state regulatory requirements, as well as accreditation standards. The department also monitors formulary compliance, coordinates prescription authorization activities, monitors utilization of services, and analyzes new pharmaceuticals. In addition, Pharmacy Services oversees the participation of those Health Partners (Medicaid) members assigned to the Recipient Restriction program. The program requires us to monitor and identify Medical Assistance recipients who improperly or excessively utilize Medicaid services. If you have any questions for our Pharmacy area, please utilize the below points of contact and online resources.

Pharmacy Department:

1-866-841-7659
Fax (Medicaid): 1-866-240-3712
Fax (Medicare): 1-866-371-3239

Recipient Restriction Program Information:

215-991-4094
Fax: 267-515-6651

Online, searchable and printable formularies are available at hpplans.com/formulary.

Pharmacy prior authorization request forms can be found at hpplans.com/providers/prior-authorization.



Claims Overview

Claims Service Claims Service is responsible for timely and accurate processing and payment of claims and resolving claims reconsiderations. Network providers enjoy quick payment of clean claims. The department partners with providers and other service departments to quickly resolve all claim processing inaccuracies and to streamline the administrative process.

Health Partners Plans is required by State and Federal regulations to capture specific data regarding services rendered to its members. All billing requirements must be adhered to by the provider to ensure that required data is captured, and that claims are processed in an accurate, timely manner. These billing instructions can be found in Chapter 11 of HPP's Provider Manual.

Initial Claims Submissions*

Health Partners Plans Payer ID: 80142

Mailing Address:

Health Partners Plans

P.O. Box 981744

El Paso, TX 79998-1744

**HPP recommends electronic claims submissions.*

Claim Filing Deadlines: Health Partners Plans allows 180 calendar days from the date of service or discharge date to submit and have accepted a valid initial claim.

Third-party resource claims must be submitted within 60 calendar days of the initial determination notification from the primary carrier.

Claims Support: Claim status can be confirmed by calling the Provider Services Helpline at **1-888-991-9023** or by accessing HP Connect at HPPlans.com/ProviderPortal.

Electronic Data Interchange (EDI) Support:
EDI@hpplans.com

Claims Appeals: Claims are eligible for appeal within 180 calendar days from the date of the Explanation of Payment (EOP) advising of the adjudication decision. Claim appeals may be submitted by accessing HP Connect at HPPlans.com/ProviderPortal or mail to:

Claims Reconsiderations Health Partners Plans

Attn: Claims Reconsideration

901 Market Street,

Suite 500

Philadelphia, PA 19107

Electronic Funds Transfer and Remittance Advice:
ECHO Health

1-888-834-3511

www.echohealthinc.com

Clinical Resources Overview

HPP has staff and programs to help our members achieve their health goals while promoting self-management skills. Care Coordination services are designed for adults and children with multiple disabilities, including physical and behavioral care needs.

HPP's staff can address members' SDOH needs, as well. Our care coordinators and member relations representatives use [Find Help](#), an online directory of local resources and support organizations, to help members find the resources they need.

Our data supports that members in active care coordination have a higher use of appropriate services, reduced ER visits and hospitalizations, and are more likely to follow through with their practitioners' recommendations.

Our Medicaid and CHIP programs include:

Baby Partners: Our maternity program that assists moms-to-be, from prenatal to post-delivery, and connects the newborn to the important first well-child visit.

Complex Care Coordination: Services designed for adults and children with multiple comorbidities, including physical and behavioral care needs.

Special Needs Unit: Links members, physicians, agencies, community services and staff at Health Partners Plans.

Healthy Kids: For children and young adults up to age 21, Healthy Kids provides assistance with lead screening follow ups and links to preventive care services, such as dental care and immunizations.

You can refer any of your patients for care coordination support by calling our Clinical Connections team at **215-845-4797** or email ClinicalConnections@hpplans.com. We will reach out to these members for the appropriate programs.

Utilization Management Overview

The Medical Management department works in conjunction with our medical providers to determine medical necessity, cost effectiveness, and conformity to evidence-based medical necessity criteria so that members receive optimal use of their benefit plans. We are committed to providing our members with the most appropriate medical care for their specific situations. To achieve this goal, our medical management decisions are based on medical necessity, appropriateness of care and whether an item is medically necessary or considered a medical item. For additional information on prior authorization guidelines and medical necessity requirements, you may review Chapter 7 of HPP's Provider Manual at hpplans.com/provider-manual or visit our website at hpplans.com/providers/prior-authorization.

Requests for prior authorizations must be submitted through our provider portal, HP Connect. Visit www.hpplans.com/webinars to register.

If you have any questions our Medical Management staff is available by phone at **1-866-500-4571**.

Ancillary Services (DME, home health, non-emergent transportation): prompts 2, 2

Inpatient/Outpatient Services (prior authorizations): prompts 2, 3

Non-Par Service Requests: prompts 2, 4

Physician Peer-to-Peer Hotline: prompts 2, 1

Provider Orientation Webinars

HPP hosts provider orientation webinars, which are educational sessions designed to connect you with important staff at HPP, including management groups from our contracting, credentialing and provider relations teams.

We encourage providers (PCPs and specialists), office managers and billing staff to attend an orientation webinar.

Please visit www.hpplans.com/webinars for more information and to register for an upcoming session.



Meet Your Network Market Managers

HPP has established a team of Network Market Managers to service you, our in-network providers, in our new expansion zones.

Our Network Market Managers are primarily focused on building and fostering productive, long-term, collaborative relationships while serving as the main point of contact for assisting our contracted physician, hospital and ancillary providers with issue resolution specific to claims, utilization management, data corrections and other operational areas. While we continue to build out this team, we wanted to introduce you to those who are in place and ready to support your needs. Meet them below:

Mindy Ball

Network Market Manager, Northeast Zone



mball@hpplans.com



215.845.4304

Barbara Malafi

Network Market Manager, Lehigh Capital Zone



bmalafi@hpplans.com



215.845.4988



For our Southeast Zone readers, you will continue your relationships with your existing provider relations contacts, who will continue to ensure you receive an outstanding customer experience.



Helpful Links

HPP Links

- [Provider News](#)
- [Provider Webinars](#)
- [Provider Manual](#)
- [Eligibility and Claims](#)
- [Formularies](#)

Provider Portals

- HP Connect powered by HealthTrio (Eligibility, Claims, Reports, Claims Appeals and Authorizations).
[HP Connect - Log in](#)
- HealthTrio Helpdesk: connect@healthtrio.com or **1-877-814-9909**

DHS Links

- [Health Choices Selection Page](#)
- [Health Choices Communications Toolkit](#)