

### United Healthcare (UHC) Meeting 2-25-16

Attendees: Steve Johnson, UHC Executive Director, Erica Bang-UHC Director of Network Services, Kristie Oliver-Coalition for Family & Children's Services Executive Director, Amber Rand-Orchard Place PMIC Vice President

### Coalition Board of Directors Meeting 3-2-16

Attendees for United Healthcare: Steve Johnson, UHC Executive Director, Lori Moncherry and Steve Inzerello, Network Managers (Central Region)

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**Staff:** There are 12 field care advocates that will help with the 3-5% of children and adults that are struggling and isolated.

**Website:** <https://www.providerexpress.com/content/ope-provexpr/us/en.html>

- Provider Express is the better website to use for behavioral health resources instead of the United Healthcare website for Iowa. This other website is designed for providers. It holds behavioral health specific trainings that are archived webinars as well as a more detailed provider manual. Also holds Portal to update provider information.
- **UHOnline website**-connects to Link. Place to submit claims, prior auths for pharmacy or procedures, look up member eligibility, and check on member ID card. This is the website designed for members.
- **Utilization Management Guidelines**-Look at level of care guidelines. They can be found under Clinical Resources on Provider Connect Website.  
<https://www.providerexpress.com/content/ope-provexpr/us/en/clinical-resources.html>

#### **Behavioral Health Intervention Services**

- **BHIS authorizations required or not**-No authorization will be required. Have an ALERT system which provides utilization data based on claims. Will look at utilization spikes and will trigger outliers for additional review.

#### **Drugs & Prescriptions**

- **UHC is considering not allowing off label prescribing use**-this was reported by Dr. Collins from APA website this week. UHC following Medicaid drug formulary. If they want to not follow the IME formulary, then must get state approval to not follow or make it more restrictive.
- **IME Drug Formulary used for first 6 months, then what?**-Steve unable to answer this or know if all three MCOs will be required to use the same list in the future.

### Psychiatric Medical Institution for Children

- **Will they have a DHS/JCS referral function, similar to the Chris Willaby set-up at Magellan?**-No they are not planning on having such a process. The providers must be the one who do the initial authorizations for services, cannot be done by anyone else. The Health Plan (United) considers the provider the expert not the placing agency (JCO, DHS).
- **Psychiatrist must be the one completing certificate of need**-False Rumor. PMIC code only requires a MD or DO to complete certificate of need. UHC would have to get federal approval to change code-highly unlikely.
- **What is timeline for authorization turn-around response?**-24 hours for pharmacy, immediate for PMIC auths as it will be done on phone
- **Prior authorization forms for PMIC**-no form necessary, will be done via phone. There is a form you can submit online via their website but this just places you in the queue. It is not necessary since calling in also places you in the queue. Intention is for reviews to take no longer than 15 minutes on phone. Steve is following up to get information on types of information to have ready for auth calls, similar to what Magellan provided to train our therapists on the process.
- **Utilization Management Department** is based in Davenport. They are handling PMIC and hospital initial authorizations and any team member can handle these calls. Department is heavily staffed and the intention is to have every call answered within short time frame (5 minutes or less). Intention is not to play phone tag with providers. Steve needs notified if calls are not being answered within 5 minute timeframe. The calls themselves should take 15 minutes or less.

Concurrent reviews will be done with 1-2 team members dedicated to our program. Will get to know the reviewers in order to develop relationships with them. This will also be done via phone.

- **What is the frequency requirement for psychiatric visits and therapy contacts for PMIC?**-are requiring the minimum requirements per federal and state regulations, such as once per month with psychiatrist. Steve is checking to see if will require anything more frequent.
- **What is typical length of time for PMIC initial and concurrent authorizations?**-Steve checking on this as he did not know the answer.

- **Will doc-to-doc reviews be done with local physicians or out-of-state?**-Physicians are contracted and will likely be out of state. The Iowa location does have a medical director as well as a psychiatrist working with the Iowa group.
- **Where does PMIC send discharge information to and what needs to be provided?**-Need to provide discharge status (successful, home, hospital, shelter, detention, etc.), current medications and aftercare services (med mgmt., therapy, BHIS, IHH, etc). Steve checking to see how to communicate this-phone call, place to leave VM, email?
- **Will UHC allow for a non-PCP to provide physicals and routine medical care when child is placed at PMIC, group care or foster family and unable to access their assigned PCP?**-Steve checking on this as he did not know answer.

### Wraparound Services

- **Will 1:1 service be authorized?**-They will receive Magellan and IME authorization info on any clients with H022 codes with auth end dates. Each case will be examined individually to determine its future merit. Unsure if they will have a process in place for this function. Kristie recommended a workgroup to explore issue further.

### Integrated Health Homes

- **Will IHH require auth?**-No it will not. Will follow IME requirement excluding ADHD-only clients. Will simply submit a member information form.
- **Transformation Department:** IHH will be overseen by United Transformation Dept. The goal is to transition from fee for service model to managing their population
- **Payment:** IHH will be paid by spreadsheet – not claims
  - a. **Quality Bonus:** For 1<sup>st</sup> year – beginning April 1<sup>st</sup>.
- **U of Iowa Evaluation of IHH:** Steve recommended reading the July 2015 University of Iowa Evaluation of Integrated Health Homes:  
[http://ir.uiowa.edu/cgi/viewcontent.cgi?article=1116&context=ppc\\_health](http://ir.uiowa.edu/cgi/viewcontent.cgi?article=1116&context=ppc_health)

### Billing & Credentialing

- Erica recommends using a clearinghouse for billing claims as it will be much easier. There is a claims webinar on Provider Express website she recommended viewing.
- Reminder-can use providers who are not credentialed with UHC on April 1<sup>st</sup>, such as Dr. who is not contracted, but they will only receive 90% of the payment rate. Can continue to use them for 6 month period of time.

- **Value Based Purchasing:** Providers should start seeing information on this in the summer. There will be a workgroup.

### **Incident Reports**

- **Same incident form has been developed and will be used by all 3 MCOS**-this applies to Hab Services, unsure about whether or not it applies to PMIC or others. We recommended they just use one form that can be used by all providers for all 3 MCOS and just have service specific areas on the form as needed.

### **Contracting**

A provider is not contracted with United until they receive their welcome letter – which is their signed contract.