

Provider eNews

November 2014

Welcome to Provider eNews!

Thank you for reading the debut issue of our Provider eNews! Of course, we can't have a great newsletter without a great title. Send your suggestions to providerinfo@healthyct.org.

We value our relationship with you and strive to make it as easy as possible to work with us. That's why we'll post a new issue of this newsletter every quarter to keep you up to date on what's happening at HealthyCT, including:

- The latest news and happenings
- Provider Manual updates
- Clinical policies
- And more!

We'll send you a fax when a new issue is posted, or, to get you the latest news even quicker, we're building our email database. If you'd like to be included, please send your email address to providerinfo@healthyct.org. Either way, you can view the latest and past issues on our website anytime.

Thanks again for providing high-quality care to our members. If we can ever be of assistance, please don't hesitate to contact us:

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HealthyCT One Year Later

It has been a little more than a year since we first opened our doors for business. On October 1, 2013, we sold our first policy and haven't looked back. So much has changed since then. Here are just a few highlights:

- Network Growth: Our network is over 15,000 providers and healthcare professionals and 30 of Connecticut's 31 acute care hospitals. We have one network for all of our plans, regardless of where they were purchased.
- Company Growth: HealthyCT has grown significantly and now stands at over 50 employees. We're all based out of our Wallingford office, including our leadership team. Being local gives us an in-depth knowledge of the Connecticut market and allows us to better serve you.
- Large Group Market: This past spring, we began to sell to the large group market (51+ employees). We've already found great success in this market, substantially increasing our membership.
- New 2015 Options: We've expanded our product portfolio for 2015 to include more choice in deductibles, copays and HSA-compatibility. Plus, we've introduced a Carryover Program to allow groups renewing in November or December to lock in 2015 coverage for possibly better benefits and a lower premium!

We couldn't have gotten this far without you! Thank you for serving our members, and we hope you'll continue to grow with us!

Check Out Our Expanded 2015 Product Portfolio

This year, we're enhancing our portfolio of plans to better meet the needs of Connecticut individuals and employers, including practices like yours!

Our 2015 product suite features a wider range of cost-sharing options such as deductibles and copays. We're also introducing many more Health Savings Account (HSA)-compatible options. In addition, we were approved for an average rate reduction, making our premiums more competitive.

With more choices and better rates, there may be a plan that meets your practice's needs — and budget. If you'd like to learn more about new and possibly better solutions, please call our Sales team at 1-855-458-4928 or contact your broker. You can also [click here](#) to check out and compare our plans.

Coming Soon: HCT Healthy Strides!

HCT Healthy Strides is our members' new, personalized health and wellness program. It's comprehensive. It's confidential. And it's available all day, every day, including holidays. The Healthy Strides program includes:

- An online health and wellness website with a wealth of information and simple, interactive programs, trackers and other tools to help members set and reach their goals.
- A nurse advice line that puts the answers to members' medical questions just a phone call away.

HCT Healthy Strides begins this week! Watch for more news and updates.

You Asked, We Listened! Upcoming Webinars

We recently asked for your ideas for a series of educational webinars. Based on your suggestions, we've scheduled the following sessions to educate you about our plan benefits, billing procedures, prior authorization and claims.

- November 5, 10:00am
- November 13, 2:00pm
- November 18, 2:00pm

To register, please click:
[https://
attendee.gotowebinar.com/
rt/365625585537850369](https://attendee.gotowebinar.com/rt/365625585537850369).

If you have questions,
please contact Maria
Murray at 203-303-2407.

Who are Provider Advocates and Provider Specialists?

Our Network Partnerships team includes Provider Specialists and Provider Advocates. These dedicated resources can help you with a number of your day-to-day functions.

Contact a Provider Specialist to:

- Get the status of your participating provider application
- Keep your practice up to date
 - To update your information in our Provider Directory, please send a fax to 203-774-5727
 - To expedite your request, please complete a [Provider Change Form](#)
- Request your Provider Welcome Kit

Contact a Provider Advocate to:

- Ask questions about your HealthyCT contract
- Learn about HealthyCT policies and guidelines
- Schedule an in-person orientation

To contact a Provider Advocate or Provider Specialist, please call 1-855-458-4928 and follow the prompts.

Electronic Claims Submission

If you're not already submitting your claims electronically, please take a moment to connect with us.

To electronically enroll in electronic claims submission:

- Visit <http://www.acs-inc.com/edirect>
- Select "Claims Gateway" then "Claims Payer List"

Please have the following information available when you enroll. Or contact your clearinghouse to get started.

- Payer ID or Carrier Code: 77180
- EDI Phone Support: 800-952-0495
- Or Email Support:
edicommericalsupportteam@xerox.com



Information at the Click of a Mouse

Our website, www.healthycyct.org, is loaded with information and resources you need to serve our members. For example, our Provider Resources page has our Provider Manual, Prior Authorization Requirements, a Quick Reference Guide and more.

Our secure Provider Portal has even more great features, including our new claims lookup tool, member eligibility and more. You'll need to log into this section with a user name and password. To get started, have your HealthyCT ID number available (this was on the Profile Sheet in your Provider Welcome Kit).

If you can't find your ID number or need help registering, please call Provider Services at 1-855-208-1641. We're adding new features, so register today! Visit www.HealthyCT.org/providers.

You also can use our telephone IVR system at 1-855-208-1641 to confirm patient eligibility, copays, claims or payments. Please be sure to have your NPI number ready.

High-Dollar Radiology Requires Prior Authorization

We manage high-dollar radiology, including nuclear cardiology testing at HealthyCT. We don't delegate this responsibility to a vendor.

Please note these services require prior authorization. To obtain approval, please complete the [authorization form](#) and fax it to Medical Management at 1-855-817-5696.

To confirm a service requires prior authorization, please refer to the complete list:

<http://www.healthycyct.org/files/providers/resources/Prior%20Authorization%20Requirements.pdf>



In-Network Lab and Pathology Providers

As you know, referring your patients' specimens to participating network facilities helps them receive the highest level of benefits and avoid unnecessary out-of-pocket costs. Quest Diagnostics and our participating hospital/hospital-affiliated laboratories and pathology groups provide in-network services for our members.

Provider Manual Updates

We recently updated our Provider Manual and posted it on our website's [Provider Resources](#) page.

The new information includes:

- Sample ID cards
- DME information
- Benefit exclusions and limitations
- Modifier updates and additions
- Formulary changes for large group members
- Quick Reference Guide revisions

As always, if you have any questions about any of the information contained in the Provider Manual, please call a Provider Advocate at 1-855-458-4928.

Important Clinical Updates

Our Utilization Management/Medical Policy Committee approved and adopted policies for the below conditions. These services are covered when medically necessary under all plans unless otherwise specified.

HealthyCT Medical Policies

- Gender Dysphoria
- BRCA Testing
- Genetic Testing for Hereditary Colorectal Cancer
- Cardiac Risk Assessment Laboratory Tests
- High-Resolution Anoscopy for Evaluation of Anal Lesions

Clinical Practice Guidelines:

- Diabetes: American Diabetes Association (ADA)
- Asthma: National Heart Lung and Blood Institute (NHLBI)
- Depression: Institute for Clinical System Improvement (ICSI)
- ADHD: American Academy of Pediatrics (AAP)

Preventive Services

- United States Preventive Services Task Force (USPSTF) A and B Recommendations

You can view all policies, including pharmacy, on our secure provider portal at <https://healthyct.alderaplatform.com/>. Please note, you'll need to log in with a user name and password.

Complex Case Management and Disease Management Programs

Information regarding our Complex Case Management and Disease Management Programs are included in the Provider Manual. To initiate a referral, please call or fax the Utilization Management Department at 1-855-458-4928 or 1-855-817-5696 respectively.



Focus on Behavioral Health

Behavioral health is a key component of a person’s complete healthcare profile. That’s why we’ve integrated medical care and behavioral healthcare. For example, we built our own behavioral health network to make it easier for you and your patients to more easily obtain the necessary care. Many plans even have the same co-pay for behavioral health and PCP visits. Most outpatient services don’t require prior authorization — please refer to our online [prior authorization list](#) or Provider Manual for more details.

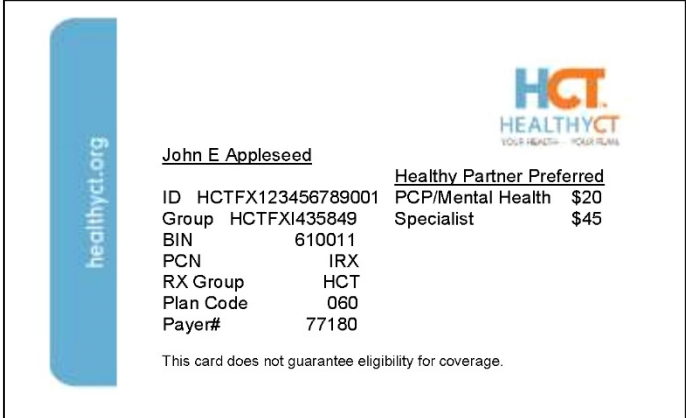
Applied Behavioral Health Analysis

Applied Behavioral Analysis services should be submitted with the following codes: H0031, H0032, H2012, H2019, H2014 along with the appropriate modifier:

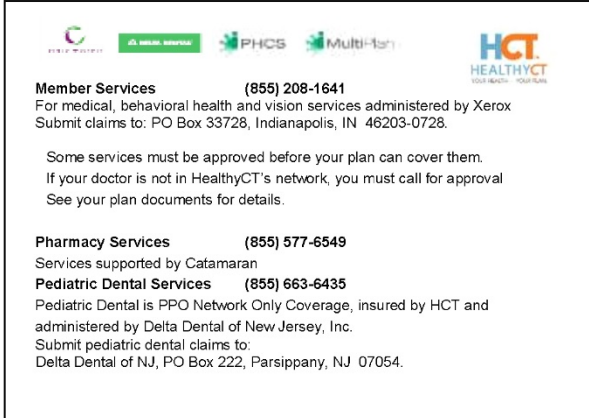
- HP = Doctoral level (board-certified behavioral analyst)
- HO = Master’s degree level (board-certified behavioral analyst)
- HN = Bachelor’s degree level (board-certified assistant behavioral analyst)
- HM = Less than bachelor’s degree level (non-certified support staff)

Please note, these codes require prior authorization and treatment plans – please complete the [online form](#) and fax to our Medical Management team at 1-855-817-5703.

Get to Know Our ID Cards



The front of the ID card features the HealthyCT logo at the top right. Below it, the cardholder's name "John E Appleseed" is printed. To the left of the name is a vertical blue bar with "healthyct.org" written vertically. Below the name, the cardholder's ID number "HCTFX123456789001" is listed, followed by "Group HCTFXI435849", "BIN 610011", "PCN IRX", "RX Group HCT", "Plan Code 060", and "Payer# 77180". To the right of the ID number, the cardholder's specialty "PCP/Mental Health" and rate "\$20" are listed, followed by "Specialist" and "\$45". At the bottom, a disclaimer states "This card does not guarantee eligibility for coverage."



The back of the ID card features logos for various providers at the top: "PHCS", "MultiPlan", and "HCT HEALTHYCT". Below the logos, the "Member Services" section lists the phone number "(855) 208-1641" and states "For medical, behavioral health and vision services administered by Xerox. Submit claims to: PO Box 33728, Indianapolis, IN 46203-0728." It also includes a note: "Some services must be approved before your plan can cover them. If your doctor is not in HealthyCT's network, you must call for approval. See your plan documents for details." The "Pharmacy Services" section lists the phone number "(855) 577-6549" and states "Services supported by Catamaran." The "Pediatric Dental Services" section lists the phone number "(855) 663-6435" and states "Pediatric Dental is PPO Network Only Coverage, insured by HCT and administered by Delta Dental of New Jersey, Inc. Submit pediatric dental claims to: Delta Dental of NJ, PO Box 222, Parsippany, NJ 07054."

ID Card Legend

Located in Member ID#:

- NX = ON Exchange
- FX = OFF Exchange
- ### = Last 3 digits represent individual person identifier

Located in the Group ID#:

- I = Individual/Family
- S = Small Group
- P = SHOP (small group health options plan)
- L = Large Group