NURSING FACILITY QUICK REFERENCE GUIDE

Cigna-HealthSpring STAR+PLUS





PROVIDER SERVICES:

Claims Status, Eligibility, Benefit Questions and PCP Assianment.

Provider Service Representatives

1-877-653-0331 Monday to Friday 8 a.m. to 5 p.m., Central Time

Automated Eligibility Verification Line

1-866-467-3126

Member Service Representatives

1-877-653-0327 Monday to Friday 8 a.m. to 5 p.m., Central Time

Email demographic changes and change of ownership to:

STARPLUSproviderrelations@healthspring.com

PROVIDER PORTAL

Link:

https://starplus.hsconnectonline.com/login

The Provider Portal allows 24-hour access and is an interactive site where participating Providers may:

- Verify Member eligibility and PCP
- Submit claims
- Check individual claim status or by batch
- Request authorizations
- Check authorization status
- Print duplicate Explanations of Payments
- · Verify Member's Service Coordinator

ADD ON SERVICES:

Nursing Facility Add-on Services are the services that are provided in a Nursing Facility setting are not included in the Nursing Facility Unit Rate, includina

- Emergency dental services
- Physician-ordered rehabilitative services
- Customized power wheel chairs
- Augmentative communication devices

Note: Outside Vendors must follow authorization requirements and request prior to non-emergent services being rendered

UNIT RATE SERVICES

Nursing Facility provides services under the Unit Rate. This means the types of services included in the DADS daily rate for nursing facility providers, such as room and board, medical supplies and equipment, personal needs items, social services, and over-the-counter drugs.

SERVICE COORDINATION:

Cigna-HealthSpring offers Service Coordination for STAR+PLUS Members in an effort to work collaboratively with Nursing Facilities & Members to assess Member health needs, collaborate in the creation of a plan of care, organize delivery of acute healthcare services, monitor progress toward Member's individual health goals. In addition, Service Coordination assists the Nursing Facility with discharge planning or changes in level of care and assists the Nursing Facility by reminding Members of his/her responsibility to remit applied income to the facility.

To reach a Service Coordinator

Call 1-877-725-2688

TO REQUEST PRIOR **AUTHORIZATION FOR ADD-ON SERVICES:**

Fax a Prior Authorization Form to:

Nursing Facility -1-877-809-0787

Request Prior Authorization through the secure Provider Portal:

https://starplus.hsconnectonline.com/login

Note: If a paper Prior Authorization Form is preferred to submitting through the portal, the Prior Authorization Forms may be found on Cigna-HealthSpring STAR+PLUS Provider website at http://starplus.cignahealthspring.com

Prior Authorization for Add-On Services:

Standard In Network:

Determination within 3 business days

Out of Network:

Determination within 5 business days

Expedited:

Call 1-877-725-2688 and follow prompts for "providers"

Admissions:

Providers must notify us of admissions, changes in level of care, and adverse event, ER visit within one business day.

Pharmacy services:

http://starplus.cignahealthspring.com/SPPharmacy

Pharmacies are contracted through Catamaran



CLAIM FILING TIPS:

- Participating Providers must submit claims within three hundred and sixty-five (365) days from the date the services were rendered for Nursing Facility unit rate services.
- Add-on Services claims must be sent to Cigna-HealthSpring within ninety-five (95) days from the date the covered service was rendered.
- Cigna-HealthSpring is required to process clean claims within 10 days of receipt for Nursing Facility unit rate services. Add-On Service claims are paid within 30 days.
- Providers should not collect payment from or bill Cigna-HealthSpring Members for covered services, with the exception of applied income.
- Submit claims for one Member and one Provider per claim form. Unit rate billed separate from Add-on services.
- Multiple visits rendered over several days should be itemized by date of service. If there is a break in consecutive days, bill the dates as rendered on a separate line.
- Avoid using unlisted procedure codes when possible. Submit unlisted codes only after receiving prior authorization for the specific code

THERE ARE 3 WAYS TO FILE A CLAIM WITH CIGNA-HEALTHSPRING:

- Electronically (Payer id# 52192): Via 1
 of the following Cigna-HealthSpring
 claims clearinghouses: (1) Emdeon,
 (2) Payer Path, or (3) Availity.
- Via Secure Provider Portal: https://starplus.hsconnectonline.com
- Via TMHP State's website: http://www.tmhp.com/

3 WAYS A PROVIDER MAY APPEAL A PREVIOUSLY PROCESSED CLAIM:

Fax the appeal to Cigna-HealthSpring at 1-877-809-0783.

Electronically via HSConnect

Mail the appeal to:

Cigna-HealthSpring Appeals and Complaints Department PO Box 211088 Bedford, TX 76095

Appeals or requests for reconsideration must be made within 120 days from the date of the Explanation of Payment (EOP).

Acknowledgment letter for appeals are sent within 5 business days of receipt. Appeals will be resolved within thirty (30) calendar days.

IMPORTANT CONTACTS:

Long-term Care Ombudsman contact:

1-800-252-2412

Maximus (Medicaid Enrollment):

1-800-964-2777

Medicaid Managed Care Helpline:

1-866-566-8989

Medicaid Managed Care Helpline TDD:

1-866-222-4306

Managed Transportation Organizations (MTO):

Hidalgo SDA and MRSA Northeast SDA

1-877-633-8747.

Tarrant SDA 1-855-687-3255

Texas Department of Family & Protective Services (TDFPS):

1-512-438-4800

Provider Pharmacy Website:

http://www.txvendordrug.com/pdl/

UNIT RATE

Complete the 3618 or 3619 forms with MDS Assessments and submit to TMHP LTC Online Portal

- Room and board
- Medical supplies and equipment
- · Personal needs items
- Social services
- Over-the-counter drugs



Claims billed to Cigna-HealthSpring by Nursing Facility

ADD-ON SERVICES

Billing Provider: Complete and submit Cigna-HealthSpring Authorization Form

- Emergency dental services
- Physician-ordered rehabilitative services
- Customized power wheel chairs
- Augmentative communication devices



Claims billed to Cigna-HealthSpring for therapy services provided by Nursing Facility or their subcontractors.

Claims billed to Cigna-HealthSpring for services provided by a Cigna-HealthSpring in-network provider