

Behavioral Health

Effective 3-1-18

HOOSIER HEALTHWISE

HEALTHY INDIANA PLAN (HIP)

<p>CUSTOMER SERVICE, PROVIDER RELATIONS AND TRANSPORTATION</p> <p>Transportation information as listed</p>	<p>1-800-356-1204 or 317-630-2831 Transportation: Members must call customer service at least two business days before the doctor's appointment between 8 a.m.–8 p.m., Eastern Standard Time, Monday through Friday. MDwise does not cover trips to the pharmacy. Monday–Friday. Members must have:</p> <ul style="list-style-type: none"> • Member identification number • Date and time of doctor's appointment • Clinic address and phone number • Total number of passengers • Time appointment will end 	<p>1-800-356-1204 or 317-630-2831 Transportation available for HIP State Plus, HIP State Basic and all pregnant HIP members. 8 a.m. - 8 p.m. Eastern Standard Time, Monday through Friday. MDwise does not cover trips to the pharmacy. Monday–Friday. Members must have:</p> <ul style="list-style-type: none"> • Member identification number • Date and time of doctor's appointment • Clinic address and phone number • Total number of passengers • Time appointment will end
<p>BEHAVIORAL HEALTH RESOURCES</p>	<p>MDwise.org/behavioralhealth</p>	<p>MDwise.org/behavioralhealth</p>
<p>CONTRACTING & CREDENTIALING</p>	<p>MDwise 1200 Madison Ave. Suite 400 Indianapolis, IN 46225 1-800-356-1204 prenrollment@mdwise.org</p>	<p>MDwise 1200 Madison Ave. Suite 400 Indianapolis, IN 46225 1-800-356-1204 prenrollment@mdwise.org</p>
<p>ELIGIBILITY</p> <p>It is the provider's responsibility to check eligibility of each member prior to providing services.</p>	<p>For online member eligibility lookup use the Provider Healthcare Portal or visit myMDwise provider portal.</p> <p>Before providing services, it is necessary to confirm:</p> <ul style="list-style-type: none"> • Is the member eligible for services today? • In what IHCP Plan are they enrolled? (Hoosier Healthwise, Traditional Medicaid, HIP or Presumptive Eligibility (PE)) • If the member is in Hoosier Healthwise, what MCE are they assigned? (MDwise, Anthem, MHS, CareSource) • If the member is enrolled in Hoosier Healthwise, what services are they eligible to receive? (Package A or C) • Does the member have primary health insurance other than Medicaid? 	<p>For online member eligibility lookup use the Provider Healthcare Portal or visit myMDwise provider portal.</p> <p>Before providing services, it is necessary to confirm:</p> <ul style="list-style-type: none"> • Is the member eligible for services today? • In what IHCP Plan are they enrolled? (Hoosier Healthwise, Traditional Medicaid, HIP or Presumptive Eligibility (PE)) • If the member is in HIP, what MCE are they assigned? (MDwise, Anthem, MHS, CareSource) • If the member is with MDwise, what delivery system are they assigned to? • Does the member have primary health insurance other than Medicaid?
<p>QUICK CONTACT GUIDE</p> <p>MDwise.org/quickcontact</p>	<p>Once you have checked eligibility and have determined what Medicaid program and MDwise delivery system the member is in, use the Quick Contact Guide to find:</p> <ul style="list-style-type: none"> • Phone number and fax number for prior authorization • Claims address or payer ID 	<p>Once you have checked eligibility and have determined what Medicaid program and MDwise delivery system the member is in, use the Quick Contact Guide to find:</p> <ul style="list-style-type: none"> • Phone number and fax number for prior authorization • Claims address or payer ID
<p>PRIOR AUTHORIZATION REQUIREMENTS</p> <p>Out-of-network providers are required to obtain prior authorization for all services.</p>	<p>INPATIENT PSYCHIATRIC CARE MDwise Hoosier Healthwise (HHW)/Healthy Indiana Plan (HIP) do not require Prior Authorization for in-network providers for the following service: For out of network, non-contracted providers all behavioral health services require prior authorization.</p> <p>Observation Stays 99217-99220, 99224-99226 and 99234-99236.</p> <p>Prior authorization is required for any psychiatric admission, including admissions for substance abuse.</p> <p>Complete 1261 A form within 14 days of phone authorization. This is a state requirement and will not effect prior authorization or claims payment.</p> <p>Emergency admissions that require authorization must be reported to the MDwise delivery system medical management department within 48 hours of admission. If the end of the 48 hour period falls on a weekend or legal holiday, emergency admissions must be reported on the next business day after the weekend of the holiday.</p> <p>See Quick Contact Guide with behavioral health information at MDwise.org/quickcontact</p> <p>RESIDENTIAL SUBSTANCE USE DISORDER Residential Treatment H0010 and H2034 - Require Prior Authorization.</p> <p>OUTPATIENT THERAPY Diagnostic Evaluation: A maximum of two outpatient units per member, per rolling 12-month period is allowed without prior authorization when a member is separately evaluated by a physician/HSPP/CNS/APN and a midlevel provider. 90791, 90792.</p> <p>Therapy: Members can receive outpatient therapy sessions without prior authorization per contracted billing provider. All other codes require prior authorization.</p> <p>Covered Codes: 90832, 90833, 90834, 90836, 90837, 90846, 90847, 90849, 90853, 96151–96155. Prior authorization is required for Applied Behavioral Analysis therapy.</p> <p>Opioid Treatment Program H0020/H0020 UA - Does not require prior authorization for approved OTP contracted providers.</p> <p>Evaluation and Management: MDwise Hoosier Healthwise (HHW)/Healthy Indiana Plan (HIP) do not require Prior Authorization for in-network providers for the following services: Evaluation & Management 99201-99205, 99211-99215. Psychotherapy add-on code 90838 (60 minutes) for contracted billing providers.</p> <p>Partial Hospitalization (PHP) CPT code H0035 requires prior authorization.</p> <p>Intensive Outpatient Program (IOP) requires prior authorization. CPT codes for facilities that bill on a UB-04 use 90899 with Rev code 905 for Psychiatric IOP and 906 for Substance Abuse IOP. Professional offices use CPT code S9480 for Psychiatric IOP and H0015 for Substance Abuse IOP. No Rev. code for professional services. Must be facilitated by a Masters or above level therapist.</p> <p>Submit OTRs to the member's delivery system medical management department (see Quick Contact Guide at MDwise.org/quickcontact). Note: Refer to BR 201807 for appropriate revenue codes to use in an outpatient setting.</p>	<p>INPATIENT PSYCHIATRIC CARE MDwise Hoosier Healthwise (HHW)/Healthy Indiana Plan (HIP) do not require Prior Authorization for in-network providers for the following service: For out of network, non-contracted providers all behavioral health services require prior authorization.</p> <p>Observation Stays 99217-99220, 99224-99226 and 99234-99236.</p> <p>Prior authorization is required for any psychiatric admission, including admissions for substance abuse.</p> <p>Emergency admissions that require authorization must be reported to the MDwise delivery system medical management department within 48 hours of admission. 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<p>GRIEVANCE/ APPEALS CLAIM DISPUTE PROCESS AND TIMELINE</p>	<p>MDwise Hoosier Healthwise P.O. Box 441423 Indianapolis, IN 46244-1423 Attention: Grievances & Appeals 60 days from the date on the EOP/EOB</p> <p>Claims Dispute: cdticket@mdwise.org or mail to: MDwise Hoosier Healthwise MDwise, INC Disputes due within 60 Days from the date on the EOP/EOB ATTN: Claim Dispute Team P.O. Box 441423 Indianapolis, IN 46225</p>	<p>MDwise Healthy Indiana Plan (HIP) P.O. Box 44236 Indianapolis, IN 46244-0236 Attention: Grievances & Appeals 60 days from the date on the EOP/EOB</p> <p>Claims Dispute: cdticket@mdwise.org or mail to: Healthy Indiana Plan MDwise, INC Disputes due within 60 Days from the date on the EOP/EOB ATTN: Claim Dispute Team P.O. Box 441423 Indianapolis, IN 46225</p>
<p>PHARMACY PRIOR AUTHORIZATION</p>	<p>Pharmacy Benefit Manager (PBM): MedImpact MedImpact Phone: 1-844-336-2677 MedImpact PA Fax: 1-858-790-7100 The pharmacy formulary "Find a Drug" search tool, pharmacy PA forms, and pharmacy PA quick reference guides are available at: mdwise.org/for-providers/pharmacy-resources</p>	<p>Pharmacy Benefit Manager (PBM): MedImpact MedImpact Phone: 1-844-336-2677 MedImpact PA Fax: 1-858-790-7100 The pharmacy formulary "Find a Drug" search tool, pharmacy PA forms, and pharmacy PA quick reference guides are available at: mdwise.org/for-providers/pharmacy-resources</p>
<p>CLAIM FILING LIMIT</p>	<p>90 Days</p>	<p>90 Days</p>