A wise choice for you and your family.

MDwise 2nd Quarter IHCP Workshop

June 2014
• Working with difficult patients
• Adding a Provider to a Right Choices Member’s lock in list
• ICD 10
• New CMS 1500
• ACA Payment Checks
• Care Select update
• MDwise webportal
• Delivery System contacts
• Marketplace vs. Medicaid
About MDwise

• MDwise is a local, not-for-profit company serving Hoosier Healthwise, Care Select and Healthy Indiana Plan (HIP) members. We have been giving the best possible health care to our neighbors since 1994. In fact, we only take care of families living in Indiana. Our services are provided to more than 280,000 members in partnership with over 1,400 primary medical providers.
Working With Difficult Patients

• Time-consuming
• No-call/No-show
• Noncompliant with plan of care
• Exhausting
• Poor listener
• Scene-making (crying/yelling)
•Demanding
• Frustrating to the whole office, from appointment desk to check-out window, and the phone nurse and after-hours line between appointments
The difficult patient, who they are…

- Demander/Manipulator
- Help Rejecter
- Noncompliant
- Dependent Worrier/Frequent Flier/Somatic Complainer

Hull & Broquet; Simmons Staff
Strategies for working with difficult members

• Don’t take it personally.
• Acknowledge the patient’s feelings.
  – Use empathy and let the member know you’re listening.
• Work on your own communication skills.
  – Would your family member, with no medical training, understand what you just explained to your difficult patient?
• Set clear professional boundaries with the patient.
  – Remain firm when these boundaries are challenged.
• Set office standards (if applicable).
  – All providers in the office follow the same guidelines and they are applied to all patients.
Identify other issues that may be contributing to a “difficult” demeanor

- Check in with your front office staff.
- Become comfortable assessing for embarrassing issues.
- Assess/Acknowledge the patient’s pain level.
- Identify the patient’s strengths/coping skills.
- Change the focus of the conversation from illness to strength.
• Assess for behavioral health issues
  – PHQ-2 and PHQ-9 are fast, easy depression screens
    1. Over the past 2 weeks, how often have you been bothered by having little interest in doing things?
    2. Over the past 2 weeks, how often have you been bothered by feeling down, depressed or hopeless?
      – Not at all (0 points)
      – Several days (1 point)
      – More than half the days (2 points)
      – Nearly every day (3 points)
    – Total score of 3 or more from these two questions indicate that the rest of the PHQ-9 should be completed to assess for depression.
Refer the member for Care Management!

Use the online referral form at mdwise.org
Refer the member for Care Management

MDwise Customer Service: 1-800-356-1204
• Talk to a Customer Service Representative about referring your patient for Care Management.

Right Choices Program
• Phone: 317-822-7499
• Fax: 317-822-7500
Flow Chart for Managing Difficult Patient-Physician Relationships

Fig. 1 These flowcharts depict a three-tiered approach to managing a difficult physician-patient relationship. This approach categorizes the types of problems encountered in a practice into three tiers. Tier 1 behaviors include a patient missing five appointments in 6 months or a patient using abusive language while talking with a staff member. Tier 2 behaviors include a continuation of issues identified in tier 1, or any actions that staff perceived as threatening. Tier 3 behaviors include a continuation of issues identified in tier 2, or any violent or potentially illegal actions.


Once a member has been placed on the RCP, written notification is sent to the PMP, lock-in hospital, and lock-in pharmacy including an outline of each provider’s individual roles as lock-in providers.

The PMP plays a key role in coordinating the member’s care and guiding the member toward appropriate utilization.

Specialists can only be added to/removed from a member’s RCP profile if approved in writing by his/her assigned PMP.

– PMPs are encouraged to periodically review their members’ lock-in lists. This can help avoid situations where the member has access to multiple providers not necessary for his/her treatment plan.
Referrals must be dated and signed by the member’s assigned PMP (electronic signatures and signature stamps are acceptable).

Referrals must include the member’s name and RID as well as the specialist’s full name, NPI (if available), and preferably specialty type to assist in care management coordination.

It is preferable for the referral to be written on the office stationary or prescription pad of the PMP.

Please include the length of time the referral is for, maximum is one year.

Emergency add-ons can be approved, contact MDwise customer service if this is needed.

Fax to referrals to MDwise RCP FAX: 317-822-7500
• Self-referral services do not have to be added to a member’s RCP list, UNLESS there is a chance that the member will receive prescriptions from the provider.
  – If a provider is not on the members lock-in list, prescriptions will be denied until written approval to add the provider is received from the PMP
ICD-10 Update

• MDwise continues to move forward with our ICD 10 readiness preparations even with the one year delay in implementation.

• This spring and summer we will be doing shadow claims and end to end testing with all of our vendors.
New CMS 1500 Forms

- Please note that all 1500 claims must now be submitted in the new CMS 1500 format.

- Claims not submitted in the new format will be rejected by our claims systems.
• MDwise has been paying out the ACA enhanced rate payments to primary care physicians who attested with the state.

• We have sent out all of the ACA enhanced rate payment checks for 2013 and going forward will be making payments on a quarterly basis to providers.

• If you need payment details for an enhanced rate check you received please contact MDwise provider relations.
• MDwise is excited to announce that we have been once again chosen to be a Care Management Organization for the Care Select program.

• We are collecting new addendums from all of our Care Select primary care physicians. Please contact a MDwise provider relations representative about continuing your participation as a Care Select primary care physician.
Welcome Providers

Welcome to the MDwise network. We value your participation and hope to keep you informed by providing easily accessible resources and updates here. Information about MDwise guidelines, requirements, and policies and procedures can be found in the provider manual.

MDwise Quick Contact Guides
View our comprehensive quick contact guide that includes delivery system contact information for Hoosier Healthwise, Healthy Indiana Plan, and Indiana Care Select.

Click here for the MDwise Marketplace quick contact guide with contact information for MDwise Marketplace claims, pharmacy services, provider services, and more.

News and Announcements

April 2014
New Web Resource Guide for Care Select Providers

In February 2014, MDwise was selected by the State of Indiana to continue to serve as a Care Management Organization for the Indiana Care Select Program. Indiana Care Select is comprised of these two components: Care Management and administration of the Indiana Chronic Disease Management Program.

Care Select providers, use the Care Select MDwise Web Resources Guide to find helpful information.
Welcome to myMDwise

Welcome to the MDwise network. We value your participation and hope to keep you informed by providing easily accessible resources and updates here.

IHCP/Medicaid Programs

- MDwise Member Eligibility
- MDwise Member Claims
- HIP Cost Estimator Tool
- Provider Claims Help

MDwise Marketplace

- Eligibility/Claims
- Patient Roster
• On the homepage click “MDwise Member Claims” under IHCP/Medicaid Programs

• Providers can search for MDwise Medicaid claims by member RID, date range, or claim number
Claim Inquiry

- To perform a "Quick Search" - choose a point from the list and select a member from the drop down choices. Click on "Search".
- To perform a "Date Range Search" - choose the 'from.' and 'to.' time frame from the drop down choices and select a member from the drop down choices. Click on "Search".
- To perform a "Claim Number Search" enter up to 10 claim numbers, press 'enter' after each claim number. Click on "Search".

**Date Range Search:**

- Insurance Company/Benefits Administrator: Make a Selection
- Member ID: Lookup Member ID
- Date of Service: --- --- --- --- --- --- --- --- ---

**Patient Search:**

- Insurance Company/Benefits Administrator: Make a Selection
- Member ID: Lookup Member ID
- Date of Birth: --- --- --- --- --- --- --- --- ---

**Claim Number Search:**

- Insurance Company/Benefits Administrator: Make a Selection
- Claim Number(s): Enter up to 10 Claim Numbers (one per line)

Search
myMDwise Webportal

• Providers can only view the claims that correspond to their Tax ID provided when creating an account.

• On the myMDwise webportal providers have the additional capability to view the eligibility information for all MDwise members.
• Providers can view our updated delivery system provider relations contact sheet at MDwise.org
## MDwise Provider Relations Contact List

### Corporate Provider Relations Department
- **Chris Yann**, Director of Provider Relations, 317-822-7220, chrisy@mdwise.org
- **Peter Baker**, Provider Relations Manager, 317-822-7240, peterb@mdwise.org
- **Karin Oast**, Provider Relations Supervisor, 317-822-7278, karino@mdwise.org
- **Ron Olsson**, Senior Provider & Community Strategist, 317-822-7247, ronolsson@mdwise.org
- **Marvin Davis**, Provider Relations Representative, 317-822-7207, marvin.davis@mdwise.org
- **Mary Edwards**, Provider Relations Representative, 317-822-7210, mary.edwards@mdwise.org
- **Katherine Hallock**, Provider Relations Representative, 317-822-7204, kathalock@mdwise.org
- **Jacqui Harris**, Service Manager, 317-822-7214, jacqui@mdwise.org

### Network Improvement Department
- **Laura Trunzo**, Network Improvement Manager, 317-822-7242, lautr@mdwise.org
- **Jordan Math**, Network Improvement Representative, 317-822-7243, jordanmath@mdwise.org
- **Christine Nix**, Network Improvement Representative, 317-822-7244, christinem@mdwise.org

### Central Indiana

<table>
<thead>
<tr>
<th>Contact (for Market Healthcare and MHP)</th>
<th>Phone</th>
<th>Fax</th>
<th>Email</th>
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<tbody>
<tr>
<td>Melissa Schmidt, Wilson, Senior Provider Relations Administrator, Network Management</td>
<td>317-963-9675</td>
<td>317-963-9602</td>
<td><a href="mailto:melissas@mdwise.org">melissas@mdwise.org</a></td>
</tr>
<tr>
<td></td>
<td>317-963-9626</td>
<td></td>
<td><a href="mailto:johnnyj@mdwise.org">johnnyj@mdwise.org</a></td>
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<tbody>
<tr>
<td>Rachel Bullock, Provider Relations Representative</td>
<td>317-575-7115</td>
<td>317-575-7107</td>
<td><a href="mailto:rbullock@mdwise.org">rbullock@mdwise.org</a></td>
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<tr>
<td>Suzanne Svec, Market Healthcare and Network Individually PPOs</td>
<td>317-800-5126</td>
<td>317-800-0214</td>
<td><a href="mailto:suzanne.svec@mdwise.org">suzanne.svec@mdwise.org</a></td>
</tr>
<tr>
<td></td>
<td>317-800-5127</td>
<td>317-800-0214</td>
<td><a href="mailto:suzanne.svec@mdwise.org">suzanne.svec@mdwise.org</a></td>
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### Northeastern Indiana

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<tbody>
<tr>
<td>Wendy McConnell, Provider Relations Manager</td>
<td>260-373-9003</td>
<td>260-373-9003</td>
<td><a href="mailto:wendymcconnell@poolwise.com">wendymcconnell@poolwise.com</a></td>
</tr>
<tr>
<td>Carla Fuller, Provider Relations Representative</td>
<td>260-373-9008</td>
<td>260-373-9008</td>
<td><a href="mailto:carlafuller@poolwise.com">carlafuller@poolwise.com</a></td>
</tr>
<tr>
<td>Virginia Grieve, Provider Relations Administrator</td>
<td>260-373-9007</td>
<td>260-373-9007</td>
<td><a href="mailto:virgiagrieve@poolwise.com">virgiagrieve@poolwise.com</a></td>
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<tbody>
<tr>
<td>Mike Potter, Provider Relations Manager</td>
<td>574-283-9752</td>
<td>574-283-9750</td>
<td><a href="mailto:mikedpotter@poolwise.com">mikedpotter@poolwise.com</a></td>
</tr>
<tr>
<td>Cindy Brubaker, Provider Relations Representative</td>
<td>574-283-5902</td>
<td>574-283-5910</td>
<td><a href="mailto:cindybrubaker@poolwise.com">cindybrubaker@poolwise.com</a></td>
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### Medicaid vs. Marketplace

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<tr>
<th>MDwise</th>
<th>HHW, HIP, and Care Select</th>
<th>MDwise Marketplace</th>
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<tbody>
<tr>
<td>Medicaid programs</td>
<td>Commercial Insurance (HMO)</td>
<td></td>
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<tr>
<td>Eligibility determined by the Division of Family Resources (caseworkers)</td>
<td>Eligibility determined by the Federal Government (Healthcare.gov)</td>
<td></td>
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<tr>
<td>Check member’s eligibility status on web interchange</td>
<td>Check member’s eligibility status on myMDwise provider webportal</td>
<td></td>
</tr>
<tr>
<td>Member ID number is 12 digits, begins with a 1 and ends with a 99</td>
<td>Member ID number is 10 digits and begins with zeros</td>
<td></td>
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<tr>
<td>Assigned a PMP</td>
<td>Assigned a PMP</td>
<td></td>
</tr>
<tr>
<td>Assigned one of eight delivery systems (HHW/HIP patients only)</td>
<td>Assigned one of three delivery systems (Select Health, IU Health, Hoosier Alliance)</td>
<td></td>
</tr>
<tr>
<td>MDwise HHW, HIP, Care Select</td>
<td>MDwise Marketplace</td>
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<tr>
<td>----------------------------------------------------------------------------------------------</td>
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<tr>
<td>Provider in a different delivery system than the member cannot see member without a prior authorization (except for self referral providers)</td>
<td>Provider in a different delivery system than the member can see the member, but member will pay a higher co-payment</td>
<td></td>
</tr>
<tr>
<td>Prior authorizations are sent to the delivery system of the member</td>
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<tr>
<td>Pharmacy benefits and formulary through Catamaran</td>
<td>Pharmacy benefits and formulary through MDwise vendor PerformRx</td>
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Medicaid vs. Marketplace

• Marketplace Member Card

MDwise Marketplace

Delivery System: Name of system

Health Plan: plan digits • Subscriber ID: 0000000000
Subscriber name: John Doe 0000000000
Spouse/dependents:
  Jillian Doe 0000000000
  Jack Doe 0000000000
  Joe Doe 0000000000

Tier 1 PMP/PCP: $X • Specialist: $X • Urgent Care: $X • ER: $X
Tier 2 Specialist: $X • Urgent Care: $X • ER: $X

Customer Service for Members and Providers:
1.855.417.5615, TTY/TDD: 1.800.743.3333

MDwiseMarketplace.org
Thank you for seeing our members!

Contact information:

- Marvin Davis mdavis@mdwise.org
- Meredith Edwards meedwards@mdwise.org
- Jacquie Marsalis imarsalis@mdwise.org
- Matthew McGarry mmcgarry@mdwise.org