# Welcome and Key Contacts

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### Welcome

Welcome to MedStar Medicare Choice, a provider-sponsored health plan established to serve the healthcare needs of Medicare beneficiaries in the MedStar Health service area.

We are a local health plan owned by MedStar Health, and we offer benefits and services to Medicare beneficiaries in Washington, DC, and the following Maryland counties: Baltimore City, Howard, Prince George's, and Harford. Our vision is to ensure that all of our patients get the right care every time they need it. MedStar Medicare Choice is committed to a physiciandriven, patient-centered philosophy that combines care, compassion and clinical excellence with a focus on service.

MedStar Medicare Choice offers three different types of plans for Medicare beneficiaries in the service area:

- MedStar Medicare Choice HMO for comprehensive coverage for Medicare members
- MedStar Medicare Choice Dual Advantage for members who have both Medicare and Medicaid coverage
- MedStar Medicare Choice Care Advantage for members with diabetes and/or chronic heart failure chronic conditions

MedStar Medicare Choice provides members with access to comprehensive and competitive medical benefits. It is built around the MedStar Provider Network, including MedStar physicians and hospitals, as well as key community clinical partners. As the region's largest healthcare provider, MedStar is committed to providing quality care focused on health and wellness.

Our goal is to work with you and others in the MedStar Medicare Choice Provider Network to make sure our members get regular preventive services and quality medical care and to reduce unnecessary medical procedures.

This document is intended to serve as the main resource for information about MedStar Medicare Choice and its services and claims processes, and to act as a reference for providers when questions arise. If certain situations require further explanation, providers should call:

Provider Services Monday through Friday, 8 a.m. to 5 p.m. 855-222-1042

### **Provider OnLine**

Provider OnLine is specifically designed for practitioners and providers affiliated with MedStar Medicare Choice. The portal allows quick and efficient access to claims, benefit and eligibility information for our members. In addition, providers can chat online with Provider Services by clicking the link at the bottom of the home page.

#### **Check Eligibility and Benefits**

The Provider OnLine portal allows member eligibility verification in one easy step. Simply enter the member's ID, last name and first name, then click "Search." Eligibility results for applicable dependents and subscribers display within seconds. The result details show the patient's specific benefits and effective date of benefits.

#### **Online Claim Submission**

The Provider OnLine portal offers a CST (Claims Submission Tool) that provides a complete Internet portal solution for services provided by MedStar Medicare Choice. Provider OnLine is a website that gives anyone with access the ability to view transactions. A portion of its function allows for claim submission via the web. All claims are entered or submitted in batches. A Submitter can be any type of user that has been configured to submit claims or other electronic inbound or outbound transactions.

#### Check the Status of a Claim

The claim inquiry search allows providers to search by member or claim information online to obtain real time claim status. Detailed CMS-1500and UB claim detail is supplied, including adjustment reasons, by clicking on the applicable claim from the search results. Providers who have questions on claims can compose an email to Provider Services on the claim detail screen directly.

#### **Direct Communication with Provider Services**

Save time by messaging or chatting online with Provider Services through the Provider OnLine portal. Communications are sent directly to the appropriate service area by selecting the applicable topic. Providers have the option to select topics such as, but not limited to, eligibility, authorization inquiry, claim inquiry or batch inquiry.

#### To register for the Provider OnLine, visit

https://secure.togetherforyourhealth.com/WebRequests/Requests/SecurityRequest.aspx?CLI ENT=000101&ID=000001&DIV=0001.

If you are a provider who already has access to Provider OnLine, feel free to visit **www.MedStarProviderNetwork.org** and follow the directions to log in.

For further information on the Provider OnLine portal, please contact Provider Services at **855-242-1042**.

### **Electronic Prior Authorization Submission**

MedStar Medicare Choice has the capability to accept prior authorizations submitted by providers electronically. Once submitted, providers are able to view the status of their request as well as make edits up until a decision has been rendered.

If you are interested in obtaining access to submit requests electronically, please contact MFC-ProviderRelations2@MedStar.net to request permission. Requests will continue to be accepted via phone and fax as well.

### **Internet Site**

The MedStar Medicare Choice plan website is located at www.MedStarProviderNetwork.org.

Physicians can find the following information on the website:

- Certificate of Coverage
- Provider Manual
- Provider information links to various other MedStar Medicare Choice documents for providers
- Utilization Management information including prior authorization requirements
- Pharmacy information including protocols and the formulary
- Behavioral Health resources
- Provider directory
- Provider newsletters
- Notice of Privacy Practices
- Quick Reference Guide including contact information for MedStar Medicare Choice
- Medical Management services and forms
- SNP Model of Care training
- RAF training video

### How to Use This Manual

This manual provides physicians, hospitals and other healthcare practitioners in the MedStar Provider Network with a succinct, easy-to-use guide to the MedStar Medicare Choice plan's business and medical management practices. When referencing the manual, please take special note of information that has been highlighted for your attention.

This chapter includes a list of key contacts. Throughout this manual, we also include important phone numbers and addresses, all of which are printed in **bold face type**.

MedStar Medicare Choice will update this manual and post revisions, as needed. The bottom of each page indicates the copyright date and the edition to indicate the timeliness of the information.

### **Key Contacts**

The following chart includes all of the important telephone and fax numbers listed in the MedStar Medicare Choice Plan provider manual. Before calling Provider Services, please have the following information available:

- Provider's Tax Identification Number (preferred),
- Provider's National Provider Number (NPI), or
- MedStar Medicare Choice provider number

Providers will be asked for the member's identification number and the phone number from which the call has been made.

| CONTACT  | CONTACT INFORMATION  |
|--|--|
| Member Services  | <b>855-222-1041</b><br>TTY: <b>711</b>   |
| <b>Provider Services</b><br>Eligibility inquiries, claims inquiries<br>and claims appeals information  | 855-222-1042   |
| MedStar Provider Relations<br>Notification of provider additions,<br>terminations and address changes;<br>contracting or credentialing inquiries<br>Please note: Claims inquiries cannot<br>be handled by the MedStar Provider<br>Relations department. Please call<br>Provider Services | 800-905-1722 (MD providers)<br>Fax: 855 600-3077<br><u>MFC-ProviderRelations2@medstar.net</u><br>(Practitioner inquiries)<br><u>MFC-Ancillary@medstar.net</u><br>(Ancillary inquiries)<br><u>MFC-ProviderDemographics@medstar.net</u><br>(Demographic updates)<br><u>msfc.credentialing@medstar.net</u><br>(Credentialing/Recredentialing inquiries) |
| Claims Submission Address<br>Electronic Submission   | MedStar Health Plan Claims<br>P.O. Box 1200<br>Pittsburgh, PA 15230<br>Payer ID 251MS  |
| Medical Management   |  |

| CONTACT   | CONTACT INFORMATION   |
|---|---|
| To obtain prior authorization or<br>assistance with patient<br>admissions/discharges  | <b>855-242-4875</b><br>Fax: <b>855-431-8762</b>   |
| <b>Pharmacy Help Desk</b> , includes prior authorization option   | 855-266-0712  |
| Pharmacy Under Medical Benefit:<br>Prior Authorization Requests and<br>Specialty Pharmacy<br>For medications covered under the<br>medical benefit | 855-266-0712<br>Fax: 855-862-6517<br><u>http://medstarprovidernetwork.com/medicare-<br/>choice/pharmacy-prior-authorization-forms</u> |
| MedStar Medical UM/Prior Auth<br>(Including Transplant)   | 855-242-4875  |
| <b>Care Advising</b><br>To speak to a Care Advisor  | Main Line: 855-959-4033, option 1   |
| MedStar Provider OnLine<br>For technical issues related to the<br>Provider Portal or to obtain login  | 855-222-1043  |
| MedStar Medicare Choice<br>Member Services  | <b>855-222-1041</b><br>TTY: <b>711</b>  |
| 24/7 Nurse Advice Line  | 855-242-4873  |
| Behavioral Health Services  | 800-230-4978<br>Claims: P.O. Box 30760<br>Salt Lake City, UT 84130-0760   |
|   | 877-811-3411  |

| CONTACT   | CONTACT INFORMATION   |
|---|---|
| MedStar Health Integrity Hotline<br>Call anonymously and without fear<br>of retribution if you identify or<br>suspect fraudulent activities or<br>behaviors |   |
| Avesis Dental   | MD Provider Services 833-241-4248<br>DC Provider Services 833-554-1013              |
| Avesis Vision   | MD Provider Services 833-241-4248<br>DC Provider Services 833-554-1013              |
| Transportation (DSNP and CSNP only)   | 855-859-1714  |
| OTC Health Solutions (over-the-<br>counter supplies) (DSNP Only)  | 866-628-2770<br>Monday through Friday, 9 a.m. to 5 p.m. EST<br>www.otchs.com        |
| Silver and Fit (fitness facilities)   | 877-427-4788<br>Monday through Friday, 9 a.m. to 9 p.m. EST<br>www.silverandfit.com |