

URAC Accreditation

great news!  
QCA Health Plan  
is URAC accredited.



QualChoice<sup>®</sup>  
HEALTH INSURANCE

Health Insurance Marketplace

QualChoice<sup>®</sup>  
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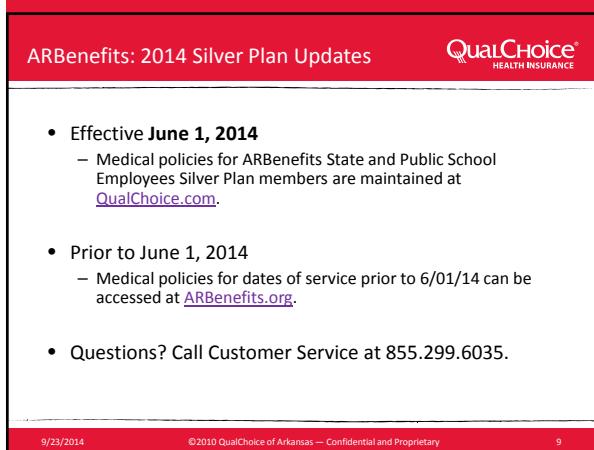
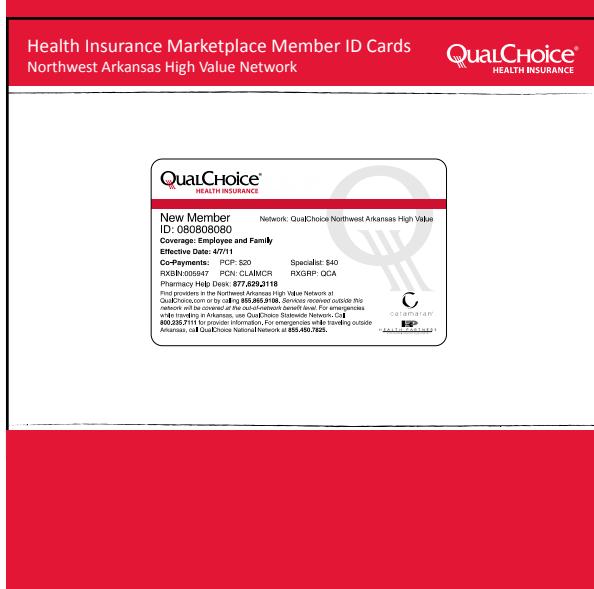
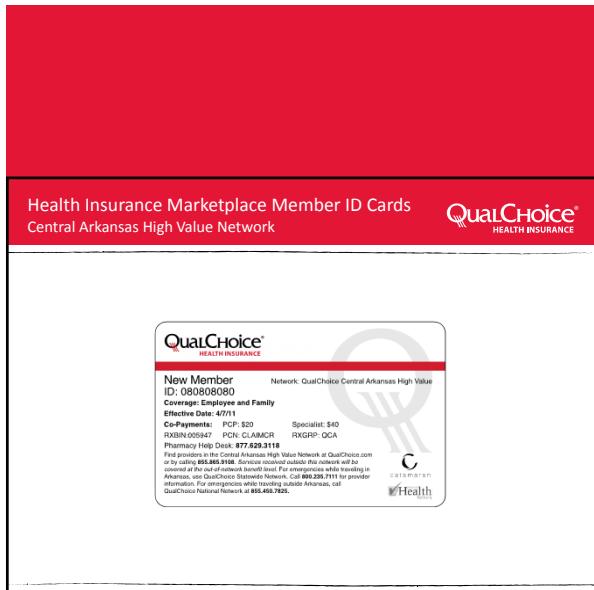
The Arkansas Insurance Department has issued this notice for plans purchased through the federal or state of Arkansas exchange:

- Member is responsible to pay any co-payments, coinsurance, or deductible related to any non-essential health benefit despite any participation in a federal or state government-run program offering subsidies or premium assistance
- Payments related to non-essential health benefits will not count toward the maximum out-of-pocket benefit.
- Member must pay the cost share (coinsurance) listed in Member's plan even if they are getting a government subsidy or help with paying their premiums.

Health Insurance Marketplace Member ID Cards  
Full QualChoice Network

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New Member  
ID: 080808080  
Coverage: Employee and Family  
Effective Date: 4/7/11  
Co-Payments: \$0-\$50  
Healthcare Network: QCA, QCA+QCA  
Phone Number: 877.429.3118  
Find providers in the QualChoice Statewide Network at QualChoice.com or by calling 855.855.3105. Services rendered outside the QualChoice Statewide Network are not covered by QualChoice. QualChoice does not provide services to individuals outside Arkansas. © QualChoice National Network at 855.855.3105. QualChoice.com. QualChoice is a registered trademark of QualChoice, Inc.



## ARBenefits: 2014 Silver Plan Updates

**• Effective July 1, 2014**

- ARBenefits requires notification of all newly diagnosed malignancies.
- Providers confirming the diagnosis of malignancy for members must call 877.815.1017, opt. 2.

**• Effective September 1, 2014**

- Certain medications require pre-authorization by EBRx when obtained from the pharmacy or administered in the physician's office.
- Dates of service on or after 9/01/14 will be denied by QualChoice if prior-authorization is not first obtained from EBRx. Call 866.564.8258.

## ARBenefits: 2015 Updates

**• Effective January 1, 2015**

- ARBenefits will require pre-certification of all outpatient oncology related treatments.
- Providers initiating new treatment regimens will be required to call 877.815.1017, opt. 2.

## ARBenefits: 2015 Updates



- QualChoice will administer plans for state and public school retirees with a Medicare-eligible family member.
- Health Advantage will administer ASE/PSE Plans in 2015 to active employees and pre-Medicare retirees.
- The Silver Plan currently administered by QualChoice will **no longer exist**.

## Arkansas Healthcare Payment Improvement Initiative



- Reports for hip, knee, perinatal, cholecystectomy episodes can be located on AHIN (Advanced Health Information Network)
- Providers can log into AHIN to download their historical report.
- Contracted providers must sign an episode payment amendment in order to be eligible for gain sharing.

### Episodes In Development:

- Lumbar fusion
- Colonoscopy

## Comprehensive Primary Care Initiative



QualChoice is participating in the **Comprehensive Primary Care (CPC)** Initiative. It is one of seven four-year multi-payer initiatives aimed at strengthening PCP practices' critical role in promoting health, improving care, and reducing overall health care costs.

### For Participating CPC Providers:

- Attribution reports distributed first week of the month for the previous month. Quality and cost reports distributed quarterly.
- All reports sent by secure email to the practice contact name.
- Payments made quarterly.
- Payment made by the 15<sup>th</sup> of the month for the previous quarter.
- Payments mailed with paper check.

## Quality Initiatives



## Quality Initiatives



How will the Arkansas state initiatives such as the PCMH and the HIX obtain quality data?

**Administrative Data:**  
Obtained from our claims database

**Hybrid Data:** Obtained from our claims database and medical record reviews

**Survey Data:** Obtained from member and provider surveys

## Appeals



- All participating providers have a right to request reconsideration of any payment/non-payment determination made by QualChoice.
- A *Request for Reconsideration* form must be submitted within the contracted time frames stated in the Provider Agreement.



## Appeal Time Frames



Contracted time frames in your Provider Agreement supersede time frames in the online Provider Manual.

Type of Claim Dispute	Time Frame to Submit
Claim dispute over timely filing requirements	See Provider's Agreement
Claim dispute over contracted rate	180 days from the date on the original RA
Claim dispute over CPT Codes	180 days from the date on the original RA
Claim denied - failure to obtain pre-authorization	60 days from the date on the original RA
Claim dispute over medical determinations	See Appeal for Medical Determinations

The QualChoice Health Insurance logo is located in the top right corner of the slide. It features the brand name 'QualChoice' in a bold, black, sans-serif font, with 'HEALTH INSURANCE' in a smaller, all-caps font below it. To the left of the text is a stylized 'Q' icon composed of several short, diagonal lines.

Provider eNews – Quality Results

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- **Quarterly Provider e-Newsletter:**  
*Quality Results*
- **Provider Action e-Alerts**

Newsletter and Action Alerts offer:

- ✓ Medical Policies — new, amended
- ✓ New program announcements
- ✓ Network activities
- ✓ Healthcare Reform updates



Medical Policies

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- New and amended medical policies electronically accessible in *Quality Results*
- Procedure descriptions, what's changed, and effective dates outlined in detail.

NEW POLICIES	APPLICABLE DATE
B800 Breast Cancer Prophylaxis	08/01/2014
B800 Pediatric Services	08/01/2014
B800 Acute Respiratory Rehabilitation	02/01/2014
B800 Inpatient or Short-Stay Hospital Rehabilitation	02/01/2014

AMENDED POLICIES	WHAT CHANGED	APPLICABLE DATE
B800 Therapy	Additional diagnosis added to criteria	08/01/2014
B800 Inpatient Facilities	Revised pre-authorization	08/01/2014
B800 Hemodialysis (Dialysis)	Requires pre-authorization	07/01/2014
B800 Vision Therapy		07/01/2014
B800 Cardiopulmonary (Respiratory)		06/01/2014
B800 Tendon		06/01/2014
B800 Adhesive		06/01/2014
B800 Physical & Occupational Therapy Services		07/01/2014
B800 Lymphedema		06/01/2014
B800 30072 (Inhalers)		06/01/2014

Medical Policies

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Search for a medical policy by entering a keyword, policy number or code.



## In Network Lab Reminder



Referring lab/pathology services to an **out-of-network** laboratory or pathology group causes patients to pay significantly more for these services.

When services are not available through an in-network laboratory, participating providers can submit an **Out-of-Network Authorization Request Form** prior to services.

## In-Network National Reference Laboratories



- LabCorp of America
- Quest Diagnostics Inc.
- Genoptix
- Dianon Systems Inc
- Medical Diagnostic Laboratories
- Millennium Laboratories, LLC
- Esoterix Genetic Laboratories, LLC
- Ameritox, LTD
- Alere Toxicology Services, Inc

## OON Reference Laboratories

Reference labs **not** in the QualChoice Network

- Berkeley HeartLab
- Bostwick laboratories
- Capital Toxicology
- Genomic Health Inc.
- Genova Diagnostics
- Genzyme Genetics
- *Myriad Genetic Laboratories*
- Prometheus Labs
- US Labs
- Veracyte

## Electronic Funds Transfer (EFT)



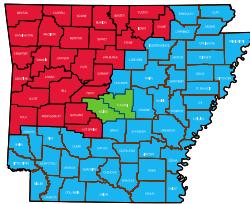
## Electronic Funds Transfer (EFT)

- Fast, confidential and secure claims payments deposited directly into one or more designated bank accounts
- **Required for participating providers** and available to non-participating providers

## To Enroll

Call: Alegeus Technologies at **877.389.1160**  
 Email: [WCO.Provider.Registration@alegeus.com](mailto:WCO.Provider.Registration@alegeus.com)  
 Website: [provider.net.adminisource.com](http://provider.net.adminisource.com)

## Provider Relations Representatives



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## Questions?

