

UCare healthlines

A newsletter for our providers

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If you have comments and/or suggestions for future content, please e-mail us at healthlines@ucare.org.

For more information and updates, please visit www.ucare.org.

Frank Gilbertson joins UCare as Provider Network Management Director

Frank Gilbertson joined UCare in November as Provider Network Management Director.

In this position, Gilbertson directs the activities of the Provider Network Management department. He oversees provider contracting, and the timely and efficient delivery of services and education to UCare's valued provider network in Minnesota and western Wisconsin.

Gilbertson and all Provider Network Management employees work closely with other UCare departments. Together they support expansion or new product implementation, contracts with associated service organizations, and the implementation of new clinical initiatives. Gilbertson reports to UCare's Senior Vice President of Operations, Laurie Dean.



Frank Gilbertson

"We are very pleased to welcome Frank and his considerable health care and contracting experience to UCare," says Dean. "Frank understands the myriad of challenges facing our valued providers and the health care industry overall. His considerable problem-solving skills will strengthen our ability to serve our provider group, whose clinics, care systems, and physicians provide high-quality care to our members."

Gilbertson has more than 15 years of experience in health care, provider relations, and accounting. Before joining UCare, he spent 11 years at Blue Cross Blue Shield of Minnesota (BCBSM), where he most recently was Senior Director, Provider Relations Planning. Prior to that, he was this area's Director, Metro Region. He also has held contract and accounting positions at HealthPartners, HealthEast Care System, and the University of Minnesota Hospitals and Clinics.

Gilbertson holds a Bachelor of Economics degree from the University of Minnesota, a Bachelor of Arts degree in Accounting from Augsburg College, a Master of Arts degree in Administration from Hamline University, and a Master of Business Administration degree from the College of St. Thomas. He currently is pursuing a Doctor of Education degree in Organizational Development from the University of St. Thomas.

"I am very impressed by the dedication of UCare employees to serving every member and providers," says Gilbertson. "I see wonderful opportunities here to strengthen our relationships and services to our provider partners. Indeed, 2009 will be a busy and productive year for all of us."

2007 Pay for Performance News

UCare's Pay for Performance (P4P) program paid **\$1,544,750** to clinics and care systems across Minnesota for their performance in key quality-of-health measurements achieved in 2007. The payments recognized and rewarded providers for superior or improved performance in measurable key areas for care delivered to UCare members of Minnesota Health Care Programs (MHCP) and UCare for Seniors Medicare Advantage plan.

Providers of all sizes who show superior or improved performance in key quality-of-health measurements for UCare members qualify for and receive UCare's Pay for Performance program rewards.

UCare made P4P payments totaling **\$1,025,050** to 60 percent of eligible care systems serving MHCP members. P4P payments of **\$519,700** also went to 31 percent of eligible care systems and independent clinics serving members of UCare for Seniors Medicare Advantage plan.

The top five clinics receiving P4P payments for **Medicaid** are:

- Allina
- University Minnesota Physicians
- Fairview Physicians Associates
- Children's Physician Network
- Neighborhood Health Care Network

Medicare P4P payments went to:

- Fairview Physicians Associates
- Physicians Service Network
- Aspen Medical Group
- HealthEast Care System
- North Clinic

UCare's P4P program Differs from Others

"UCare's Pay for Performance program differs from many other programs in two ways," said Barry Baines, M.D., UCare's Chief Medical Officer. "First, to our knowledge, no other major health plan's Pay for Performance program in Minnesota is available to providers of all sizes. We've learned that we can best serve our nearly 165,000 members by offering this opportunity to every provider in our provider network. It's an important way we encourage clinics and care systems large and small to deliver outstanding care that helps our members realize better outcomes and ideally, a better quality of life.

"Second," continues Dr. Baines, "most Pay for Performance programs only reward providers who meet a significant threshold in an 'all or none' fashion. UCare's program rewards systems that are above the 50th percentile threshold for our provider network. In addition, any clinic or care system that posts improvements over the previous year's performance will also be rewarded, although these payments are one-half of the payment of those clinics who are above the 50th percentile."

For our MHCP population, 2007 P4P payments were made based on the achievement of goals for:

- Two-year-olds up-to-date on immunizations (Combo 2).
- Blood lead testing.
- Diabetes care.
- Mammography.
- Colon cancer screening.
- Chlamydia screening.

For UCare for Seniors Medicare Advantage members, payments were made based on the achievement of goals set for:

- Mammography.
- Diabetes care.
- Cardiovascular Disease Care: LDL cholesterol screening.

2008 P4P Program Adds Preventive Elements

UCare's P4P program for 2008 for MHCP members contains many elements from the 2007 program and adds several items in children and women's preventive services. Additionally, UCare will reward performance that demonstrates good control of blood sugar, blood pressure, and cholesterol for members with diabetes.

For Medicare Advantage members, UCare will reward performance that demonstrates the control of blood sugar, blood pressure, and cholesterol for members with diabetes, and cholesterol and blood pressure control for patients with heart disease.

UCare will continue to recognize and reward superior performance and improvements by MHCP and Medicare providers of all sizes.

News and Notes

Interactive Voice Response System Now in Place

UCare has upgraded our communication resources with a new Interactive Voice Response (IVR) system that will provide more efficient customer service to our valued provider network.

Simply use your touch-tone phone to enjoy easy, 'round-the-clock access and answers to the two most common issues providers ask about: member eligibility, and claim status.

For quick service of **eligibility inquiries**, have the individual's personal member identification (PMI) or UCare member ID number and their date of birth ready.

For quick service on **claim status inquiries**, have your NPI number, UCare member ID, and the claim date of service information ready.

If you have any difficulties when using this system, please let us know by calling the Provider Assistance Center's phone number 612-676-3300, or 1-888-531-1493 (toll free).

Credentialing Reminder for Urgent Care Providers

Effective Jan. 15, 2009, Urgent Care Providers must be credentialed.

Please send all credentialing applications and credentialing forms to our dedicated fax number: **612-884-2184**.

More information about credentialing is available in Chapter 17 of your UCare Provider Manual. We encourage you to review for valuable information about provider credentialing, submission information for credentialed and non-credentialed providers, the credentialing process, and the UCare Provider Credentialing Information grid.

Direct any questions or concerns about this request, with an e-mail to this dedicated address: credentialinginfo@ucare.org.

Enhancement Made to Claim Editing System

On Nov. 1, 2008, UCare improved our claim editing system. We added a feature that enables us to identify potentially incorrect coding relationships on submitted claims. This enhancement will help us improve our delivery of cost-effective health care for our members.

January 2009 Webex Teleconference Presentation Schedule

This month, UCare is offering special Webex Teleconference presentations which combine web-based Internet technology and teleconference services. There is no fee to view these presentations, and no travel is required.

[Click here](#) to view the entire set of presentations. Or, visit us online at www.ucare.org. Then select "Providers" and "Webex" to view the current schedule.

Once you've made your selection, then register for a WebEx TeleConference Presentation. Here's how:

1. RSVP to webex@ucare.org (please include session date, time, and title in the subject line).
2. You will receive a confirmation e-mail with your login.
3. Go to <http://www.webmeeting.att.com> on selected session date and time to login and attend.

Registered session participants receive an e-mail with log-in meeting number and code information. At the time of the presentation, participants log into AT&T Teleconference Services to view the presentation and then call the teleconference number provided to listen.

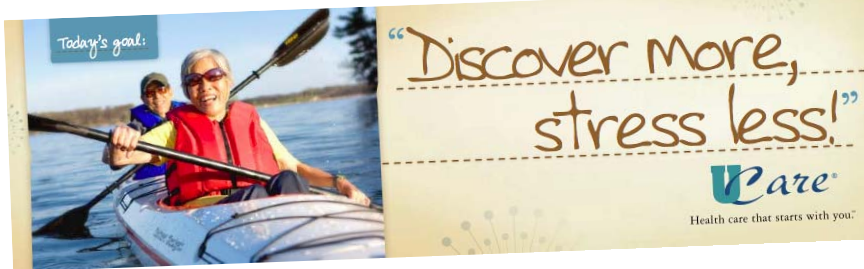
UCare for Seniors Adds Three More Wisconsin Counties to Service Area

UCare's *UCare for Seniors* Medicare Advantage product has expanded further into western Wisconsin with the addition of Iowa, Juneau, and Sauk counties in the southwestern corner of the state.

This action enlarges the western Wisconsin service area to 26 counties. In January 2008, *UCare for Seniors* first grew from statewide availability in

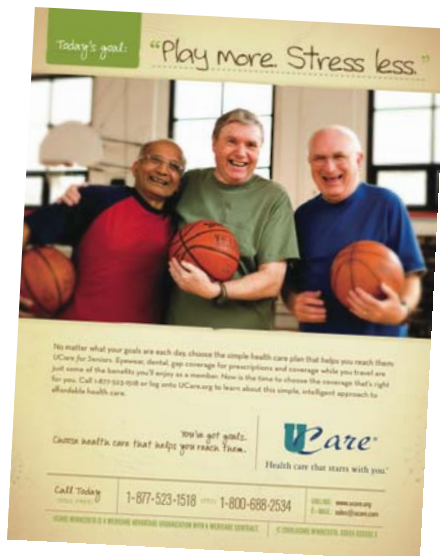
Minnesota to enrolling Medicare-eligible Wisconsin residents in Ashland, Barron, Bayfield, Buffalo, Burnett, Chippewa, Crawford, Douglas, Dunn, Eau Claire, Grant, Jackson, La Crosse, Monroe, Pepin, Pierce, Polk, Richland, Sawyer, Trempealeau, St. Croix, Vernon, and Washburn counties.

UCare for Seniors is one of the leading Medicare Advantage plans in Minnesota and, after the Annual Enrollment Period that just ended Dec. 31, 2008, has nearly 60,000 members.



“We are very pleased to be able to serve Medicare beneficiaries in western Wisconsin who are looking for Medicare coverage with the benefits available in a comprehensive, affordable health plan like *UCare for Seniors*,” said Nancy Feldman, *UCare*’s President and Chief Executive Officer. “Our provider relationships with high-quality Wisconsin clinics and care systems like Mayo Health System are attracting enrollees looking for a great health plan that lets them keep their physician or establish new physician relationships.”

As in Minnesota, three levels of comprehensive coverage (Classic, Value, and Value Plus), an extensive network of leading providers and care systems, and worldwide emergency coverage and urgent care are offered in *UCare*’s Wisconsin service area. The *UCare for Seniors* Classic Plan includes hospital and medical coverage, as well as Medicare prescription drug coverage (Part D) and coverage for eyewear, hearing aids, and preventive dental care. The *UCare for Seniors* Value Plan offers comprehensive hospital and medical coverage at a lower monthly premium than the Classic level. The Value Plus plan offers all the Value plan coverage benefits, plus Part D coverage. Benefit and



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premium information can be found at www.ucareforseniors.org

Medicare beneficiaries already enrolled in a Medicare Part D plan have one more opportunity to switch Part D plans in 2009. They may make this change during the Open Enrollment Period from Jan. 1–Mar. 31, 2009, with some limitations.

As an independent, nonprofit health plan, *UCare* is dedicated to serving its members on government programs, not shareholders and investors. In 2008, The Centers for Medicare & Medicaid Services (CMS) ranked *UCare for Seniors* in the top 13 percent of all Medicare Advantage plans nationwide for outstanding performance.

Minnesota Law Mandates Electronic Health Care Transactions in 2009

Minnesota State Statute, section 62J.536, requires all health care providers, payers, and group purchasers to exchange eligibility requirements, claims, and remittance advice electronically using a standard format.

This mandate is particularly important to providers who currently submit and receive paper claim transactions.

Below are three types of electronic transactions and effective dates:

Eligibility inquiry and response (270/271)

Rule promulgated: Jan. 12, 2008
Rule in effect: Jan. 14, 2009

Health care claim (837P, 837I, and NCPDP 5.1)

Rule promulgated: July 15, 2008
Rule in effect: July 15, 2009

Payment/remittance advice (835)

Rule promulgated: Dec. 1, 2008
Rule in effect: Dec. 15, 2009

The Minnesota Department of Health (MDH) consulted with the state’s Administrative Uniformity Committee (AUC) to develop uniform standard companion guides for such transactions. These guides will standardize the process for checking eligibility,

submitting claims, and receiving remittance advices in an electronic format for providers.

Additionally, guides have been developed for providers and payers to plan, program, and accommodate these electronic transactions. The AUC website <http://www.health.state.mn.us/auc/>. It provides in-depth information about each electronic transaction, associated companion guides and best practices.

Authorization Grid Updated for 2009

Check out UCare's provider web page for news of updates to our Authorization Grid ([click here to view and print the PDF](#)).

You also can find this grid on our [Provider web page](#), and scroll down to the notice entitled "2009 Authorization/Notification Contact List Now Posted*New*."

This grid was updated in November 2008. It features current information about prior authorizations per product, and their approval authorities.

Help Us Help You

We'd like to hear from you about what you'd like to hear from us this year!

UCare is committed to providing excellent service to you as a valued provider in our network! Your needs and opinions really matter.

Please send us your comments and/or suggestions for future *health lines* content at healthlines@ucare.org.

Thank you for your continued support of UCare and our members.

UCare is committed to providing excellent service to you as a valued provider in our network.

Friendly Reminders

- UCare's **Coding Consultant Service** is available to providers for coding and billing issues. Coding questions should be sent via e-mail to codingconsultant@ucare.org. *Note: There is a four-day turnaround time on these requests.*
- Don't forget to subscribe to our **E-mail List Server** to receive provider news and updates, including *health lines*, via e-mail. To subscribe, visit us online at <http://www.ucare.org/providers/Pages/E-MailListServer.aspx>.
- Our **Provider Assistance Center** can help answer your questions and we're just a phone call away! **612-676-3300 or 1-888-531-1493 (toll free).**

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