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Online Tools & Resources Available to All Providers

UCare offers several self-service options to assist providers in managing UCare patient accounts. Accessing information online may reduce the need to call the Provider Assistance Center (PAC). You can also send a secure message to PAC via the Provider Portal. If you do need to call PAC, the portal may provide you with information that will make your phone conversation more effective and efficient.

UCare.org/Provider

UCare's provider website will help you find the information you need quickly and easily to help support your work with our members. You do not need to be logged in to access this public information:

Provider Center

- Add, change or terminate a facility or practitioner linked to your profile.
- Search the UCare online directory.
- Notify UCare of a Contract or Contract Changes with Third-party Billers.
- Sign up to receive our monthly newsletter and bulletins.

Eligibility & Authorization

- Find Product/Benefit
 Information by entering the
 members' plan under UCare
 Products. You may also
 download a Product/ Benefit
 Tip Sheet to see detailed
 information about the
 product(s).
- View Authorization & Notification Grids under Resources and Information (+).
- View UCare Member ID Card Samples under General UCare Product Information (+).

Claims & Billing

- View Provider Guide: The Explanation of Payment (EOP) Report under Forms & Links (+).
- Download the Provider Claims Reconsideration Request Form under Forms & Links (+).

UCare Provider Portal

The UCare Provider Portal is a secure website that allows your clinic, facility or system to access UCare information to support your work with our member. The portal allows you to:

- Verify member eligibility
- View EOPs
- View Claims status
- View Authorizations
- Manage your portal account, including changing your password and email address
- Send secure messages directly to our Provider Assistance Center

UCare Provider Website www.ucare.org/providers Provider Assistance Center 612-676-3300

1-888-531-1493 toll free

UCare Tobacco Quit Line

Encourage members trying to quit tobacco to enroll in the UCare tobacco quit line program. Through our partnership with American Cancer Society's Quit for Life program, members get free access to:

- One-on-one coaching, available 24/7.
- Interactive, web-based learning support and tools.
- Texting reminders and emails to help support quitting.
- Nicotine replacement therapy (NRT) support.

Members can enroll by calling the UCare tobacco quit line at 1-855-260-9713 toll-free or visit www.myquitforlife.com/ucare.

Do you work with individuals from American Indian communities? QUITPLAN® Services now offers free, culturally-specific support by American Indian coaches to help anyone in Minnesota quit commercial tobacco use. For more information, visit www.aiquit.com.

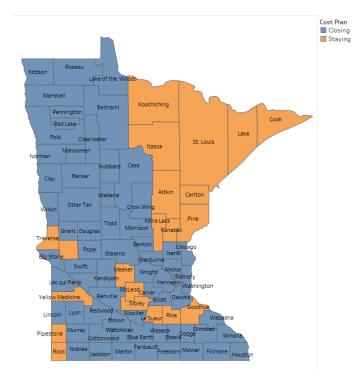
Medicare Changes Coming in 2019

On Jan. 1, 2019, Cost Plans, a type of Medicare plan, will be closing in 66 Minnesota counties. **UCare members are not impacted by these changes**. UCare plans are Medicare Advantage plans and are not affected. The changes to Cost Plans will, however, impact about 315,000 of the total 370,000 Cost Plan members. The map below shows the counties where cost plans will be exiting.

Again, this change does not impact our members or members of Medicare Advantage plans. If you receive questions from our members, please assure them that we will continue to offer them great service, now and in the future.

Following is a list of Cost Plans:

- Health Partners: Freedom Active, Freedom Active
 with Rx, Freedom Balance, Freedom Balance with Rx,
 Freedom Basic, Freedom Ultimate, Freedom Ultimate
 with Enhanced Rx, Freedom Ultimate with Rx,
 Freedom Vital, Freedom Vital with Rx
- Medica: Prime Solution Basic, Prime Solution Basic with Rx, Prime Solution Basic with Rx2, Prime Solution Enhanced, Prime Solution Enhanced with Rx, Prime Solution Enhanced with Rx2, Prime Solution Thrift, Prime Solution Thrift with Rx, Prime Solution Thrive with Rx, Prime Solution Value, Prime Solution Value w/Rx, Prime Solution Value w/Rx2



Blue Cross: Platinum Blue Choice Plan, Platinum Blue Choice Plan with Rx, Platinum Blue Complete Plan, Platinum Blue Complete Plan with Rx, Platinum Blue Core Plan, Platinum Blue Core Plan with Rx

For those who are losing their coverage, we are available to help with their Medicare questions or concerns – 1-877-523-1518. Note: Information on our 2019 Medicare Advantage products will be available as of October 1, 2018.

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Protected Health Information (PHI) - A Friendly Reminder

Let's talk about good old fashioned paper medical records!

Even in these days of rapidly changing technology, many of us in the health care community still maintain some medical records on paper and store these records using file storage areas and containers.

Paper records containing protected health information (PHI) are vulnerable to Health Insurance Portability and Accountability Act (HIPAA) violations and must be protected.

The HIPAA Privacy Rule prohibits unauthorized access, uses or disclosures of PHI in any format when created, received, maintained or transmitted by a HIPAA-covered entity, such as a health plan or health care provider and includes business associates.

In the world of paper records, this means we should take extra precautions to store records securely in our facilities, whether that's in a hospital, clinic or small office space setting.

Helpful Hints

- Store medical records in locked file cabinets or rooms that are not accessible to the public or unauthorized personnel.
- Keep your medical record storage separate from common areas or supply storage.
- When you walk away from your desk, turn over, place in a folder or put away anything you are working on that includes member/patient PHI.

Clinical Documentation - Focus on Cancer

Proper documentation of a cancer diagnosis is required for accurate reporting.

The primary step to complete documentation and coding is determining if the cancer is current or historical.

- Patients receiving active treatment for cancer should be documented with the appropriate neoplasm diagnosis.
- Active treatment includes chemotherapy, radiation or adjunct therapy.

Cancer medications, such as Herceptin, Tamoxifen and Lupron are considered adjunct therapy. While patients are prescribed this therapy, their documentation and coding should reflect active cancer. Once there is no evidence of the cancer and the patient is no longer undergoing active treatment, documentation should reflect a "personal history of malignant neoplasm" with the associated site. The appropriate Z code per anatomical site would be used for reporting.

Additionally, the documentation should clearly note metastatic sites, related conditions, treatment and complications. Conditions related to or caused by the cancer or treatment are often discussed and treated but not documented. An example of this is protein-calorie malnutrition, which is often associated in oncology patients but commonly missed in documentation.

Comprehensive provider documentation is essential for the accurate code assignment and reporting of all diagnoses. Per the *Official ICD-10-CM Guidelines for Coding and Reporting,* physicians should code chronic and coexisting conditions as often as they are treated or affect patient care, treatment or management. Meaning even if you are not directing the treatment of a patient's malignancy, you should code out the condition if it was considered in the care of your patient.

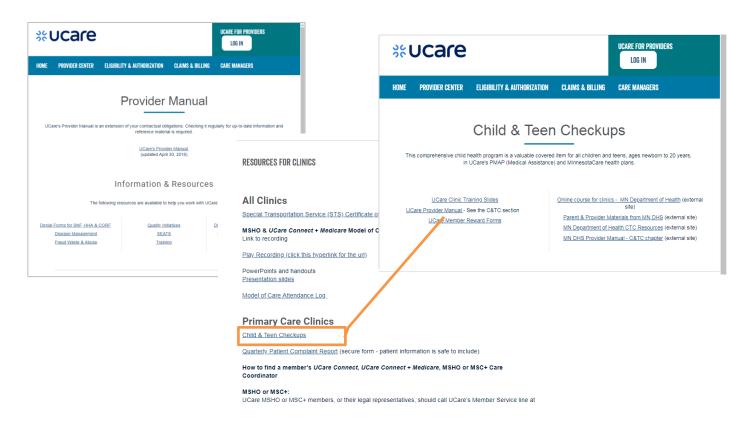
Strengthen the integrity of your patient's medical record by understanding these documentation needs.

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Website Tip of the Month: Child & Teen Checkups

With the start of school, we thought a pointer to the Child & Teen check-ups page might be timely. See below for helpful resources. If you have a website question you'd like to see answered in a future column, please email it to providernews@ucare.org.

- 1. From the Home page, select **Provider Manual and Resources**.
- 2. Click on the Resources for Clinics (+).
- 3. Select Child and Teen Checkups.





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