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July 24, 2009

MEMORANDUM

MEMO NOS.
ACS M09-19 (For FFS)
ADMX-0907 (For QExA)

TO: All FFS and QUEST Expanded Access (QExA) Providers

FROM: Kenneth S. Fink, MD, MGA, MPH
Med-QUEST Division Administrator ↙

SUBJECT: QExA UPDATE

The QExA program began on February 1, 2009 and provides a comprehensive continuum of care for more than 40,000 “aged, blind and disabled” (ABD) beneficiaries. These low-income people age 65 and older and/or with disabilities were previously receiving treatment through the Medicaid Fee-For-Service (FFS) system. This memo provides an update on QExA transition of care and coordination of benefits.

End of Transition of Care

The QExA program began with a 180-day transition of care period for QExA clients. During this period, providers were able to bill QExA health plans as non-participating without any additional prior authorization requirements. After the transition of care period ends on July 31, 2009, non-participating providers will need to obtain prior authorization from the QExA health plan to assure payment, and non-participating providers may be reimbursed less than participating providers, except for FQHCs, RHCs, and CAHs. Every single Medicaid provider provides a valuable service to the low-income members of our community. I personally appreciate your service to our beneficiaries, particularly during the State’s current economic situation and fiscal constraints.

If you have not already and are interested in contracting with a QExA health plan, please contact the following:

Evercare

Bill Spencer, MDX Hawaii, 792-8446 or e-mail at williamspencer@uhc.com (MDX is a subcontractor to Evercare for certain services)

Debbie Hughes, Evercare Hawaii, 544-8805 or e-mail at debra_hughes@uhc.com

'Ohana Health Plan

'Ohana Provider Services: 1-888-84-OHANA (1-888-846-4262) or via email at providers@ohanahealthplan.com

Coordination of Benefits

Coordination of benefits (COB) refers to coordination between original Medicare (Part B) and Medicaid, such that when an electronic claim is sent to the Medicare carrier, the information is transmitted to the Med-QUEST Division's (MQD) fiscal agent, ACS, and the Medicaid share of the claim is paid. MQD sent out a provider memorandum dated March 2, 2009 about COB.

If your patient has original Medicare (Part B) as their primary coverage, please bill the Medicare carrier as you normally do. Medicare will continue to cross-over electronically submitted claims to ACS for Medicaid processing as the secondary payer until the MQD transitions this process to the QExA health plans. The MQD will send a provider memo giving providers at least a months notice when the MQD has decided the date of the transition.

Providers who submit paper claims to the Medicare carrier should continue to submit the paper claims to ACS for processing the Medicaid secondary payment.

If your patient has SecureHorizons/Evercare (United) or 'Ohana Health Plan (Wellcare) as their Medicare Advantage (Part C) plan and the same plan for their QExA Medicaid coverage, bill those plans as primary and the claims will cross-over automatically within their claims systems as the secondary payer.

For all other Medicare Advantage plans, you will need to bill the Medicare Advantage Plan as primary and then file a secondary claim with the QExA health plan as secondary (as you had done previously with ACS). Please submit the Explanation of Benefits (EOB) from the Medicare Advantage Plan when you submit the secondary claim to the QExA health plan. Please submit these secondary claims to the addresses listed below.

Evercare

Medical Claims
P.O. Box 31362
Salt Lake City, UT 84131-0362

'Ohana Health Plan

Claims Department
P.O. Box 31372
Tampa, FL 33631-3372

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Also, as a reminder, the QExA health plans are not allowed to require their clients to be in their Medicare Advantage plan. Clients are allowed to choose to be in either Secure Horizons, 'Ohana Health Plan's Medicare Advantage plan, a different Medicare Advantage plan, or remain with original Medicare. It is the client's choice, not the QExA health plan's choice.

If you have any question(s), please call the MQD Customer Service Center on Oahu at 524-3370 or Neighbor Islands/Oahu (toll-free) at 1-800-316-8005.

Thank you for your support of QExA enrollees.