



Parkland
Community Health Plan

FALL 2022

Provider Newsletter

Changing the way communities think about healthcare by connecting people
to meaningful health and wellness experiences.



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A Note from PCHP

In May 2022, Parkland Community Health Plan received its interim NCQA Accreditation. We have now embarked on our journey toward achieving full NCQA Accreditation by November 2023. PCHP is committed to providing high-quality care for members through our incredible network of providers. I would like to thank you for your part in providing this high-quality care in the communities we serve.

Understanding the complex health conditions and to meet the medical and psychosocial needs of our members, PCHP offers our *Be in Control* disease management program to provide additional support to members, specifically those with asthma and diabetes.

The *Be in Control* program is a chronic-care support service that, in partnership with their medical providers, helps PCHP members with asthma and diabetes improve adherence to their provider's treatment plan. The program, in collaboration with the member's provider, promotes improved patient self-management and reduces barriers to optimal health. Members receive targeted interventions that focus on accessing medical care, developing and using their medical home, adhering to prescribed medications and treatment plans, building habits that foster a healthy lifestyle, and minimizing psycho-social barriers to self-care.

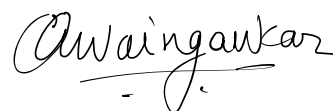
The *Be in Control* program is delivered by a team of specially trained registered nurses and other professional staff, using state-of-the-art information systems to provide knowledge,

support, and monitoring for patients between provider visits. Patients also have access to a nurse line 24 hours a day, seven days a week for health care questions and concerns.

For more information about the *Be in Control* program or to refer a patient you think could benefit by participating, please call 1-866-461-7227, option 1, then option 3. The Disease Management team is available Monday through Friday from 8 am to 8 pm.

Finally, as we approach the last quarter of 2022, PCHP will intensify member outreach to encourage receiving preventive care, including well checks and immunizations (including the influenza vaccine), along with other initiatives to help promote wellness and maintain optimal health.

Thank you again for all you do to support and care for our members! We look forward to any suggestions you may have on how PCHP can better support you with member care!



DR. AMRITA WAINGANKAR
Senior Medical Director
Parkland Community Health Plan

Provider Town Hall

Have you missed any of our recent Provider Town Halls? If so, you can view the recordings here:

- 3rd Quarter: <https://youtu.be/-VKvEMhRRiM>
- 2nd Quarter: <https://www.youtube.com/watch?v=pcAbwSHxdOw>
- 1st Quarter: <https://youtu.be/Q6pYn638LT4>

Each town hall ends with a Question & Answer session. All questions are captured and sent out after the meeting. You can locate a copy of these Q&As on the PCHP Provider Portal under Forms & Resources.



The next Provider Town Hall is scheduled for **Wednesday, December 7;** be on the lookout for an invitation to register in December. You can also visit our website for list of all upcoming provider meetings: <https://parklandhealthplan.com/living-well/events/>.

CPW: Case Management for Children and Pregnant Women

Case Management for Children and Pregnant Women (CPW) is a Medicaid benefit that provides health-related case management services to children birth through 20 years of age with a health condition and to high-risk pregnant women of any age. Case managers help members gain access to needed medical, social, educational, and other services. Effective September 1, 2022, Parkland Community Health Plan has begun coordinating

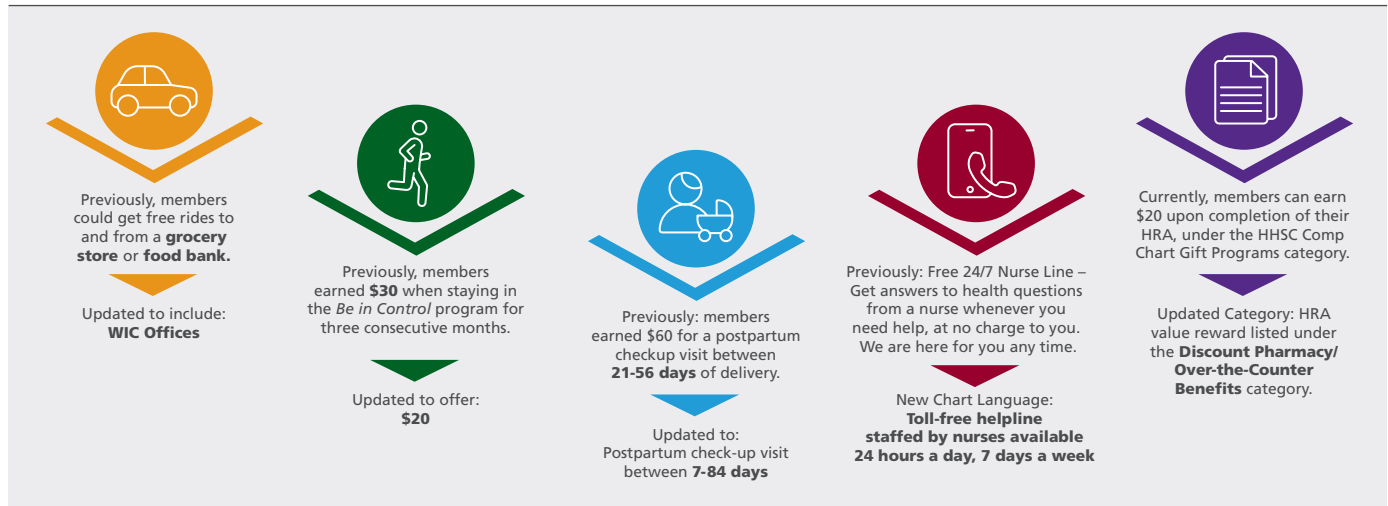
CPW services currently being received by our members. These services were previously provided through a Texas Medicaid CPW provider or a Department of State Health Services (DSHS) regional case manager. Members can keep their current CPW provider for up to 90 days after the September 1 deadline.

» For more information, please refer to our [Provider Network News alert](#) from August 2022.

Value-Added Services

Value-added services (VAS) are added benefits or extra services offered by PCHP to promote healthy lifestyles that improve health outcomes among all its members. All managed care plans offer a variety of VAS in an effort to distinguish themselves from their competitors and be more appealing to potential member needs. All VAS are offered at no additional cost to members or providers.

Summary of changes to our value-added services for the 2023 program year*



*Changes effective September 1, 2022

SFY23 VAS Unchanged from SFY22

Disease Management	1. Free membership in the <i>Be in Control</i> program with educational materials and resources. 2. \$10 for completion of diabetic eye exam and/or HB/A1C blood test
Dental Services	\$300 allowance per year for dental services, for ages 21 and older.
Extra Vision Services	\$100 allowance for members every 2 years toward upgrades on frames.
Sports and School Physicals	One free sports physical per school year, ages 5 through 19, at the member's assigned participating PCP.
Health Play and Exercise Program	\$30 for members ages 10 and older who complete the free 3-week Step-Up Challenge.
Temporary Phone Help	Free Android™ smartphone with monthly data, phone call minutes, and unlimited text messaging for members enrolled in the Federal Lifeline Program.
Help for Members with Asthma	\$60 for members who refill asthma medication prescription (every 60 days for 2 refills worth \$10) annually.
Extra Help for Pregnant Women	1. Free family style meal (oven or microwave ready) for a family of four. 2. Free car seat for completing prenatal visit within first trimester.
Help and Wellness Services	1. \$20 for PCP visit within 90 days. 2. \$30 for follow-up visit with PCP within 7 days after hospital discharge.
Gift Programs	1. Up to \$160 for 6 timely well-baby checkups or Texas Health Steps. 2. \$20 for the adolescent Texas Health Steps ages 12-18. 3. \$20 for online Member Portal enrollment. 4. \$20 for members who receive initial ADHD meds and follow-up visit within 30 days.
Inpatient Follow-Up Incentive Program	1. \$30 for a follow-up BH visit within 7 days after hospitalization discharge for BH diagnosis. 2. \$20 for a follow-up BH visit within 8-30 days after hospitalization discharge for BH diagnosis.
Online Mental Health Resources	Free 24/7 access to online tools, to help members learn ways to reduce stress, anxiety, or depression and how to manage substance abuse problems.

Value-Added Services

CONTINUED

The program's incentives encourage members to participate in healthy activities and behaviors that can not only improve their overall health but prevent future disease as well.

In addition to taking care of their health, PCHP members can earn rewards that may alleviate some of their extra medical expenses. Members can earn rewards to redeem for gift cards or other items from a rewards catalog when they complete their:

- Yearly health risk assessment (HRA)
- Diabetic (retinal or dilated) eye exam
- HB/A1c blood test exam
- Follow-up visits after hospital discharge
- Annual flu shot
- Well-baby checkups
- Well-adolescent checkups and for ADHD and asthma medication refills

What Do Value-Added Services Mean for PCHP Providers?

VAS programs are intended to improve and promote health and fitness for all members through services that are not covered by managed care plans, at no extra cost to any provider. Providers may find these programs valuable for their patients' needs outside the medical scope.

As a PCHP provider, we encourage you to:

1. Be aware and well-informed of all the VAS programs offered by PCHP.
2. Promote them among your patients.
3. Encourage their participation.

To see a full list of VAS programs and details, visit

<https://parklandhealthplan.com/members/benefits/>



Questions, suggestions, or concerns?

Please email us at PCHPVAS@phhs.org

Billing Members

Co-Pay Amounts for CHIP Members: Providers may collect co-pay amounts from CHIP members as outlined below or on the member's CHIP identification card. There are no co-pays for CHIP Perinate Newborn and CHIP Perinate Mother.

Co-Pay Amounts for STAR Medicaid: There are currently no co-payments for STAR Medicaid members as of the publication of the most recent Texas Medicaid Provider Procedures Manual. Co-payments may be instituted at the discretion of HHSC.

Collecting from or Billing CHIP Members for Co-Pay Amounts:

- To encourage responsible use of health care services, families are required to share in the CHIP program's cost by paying small co-pays.
- Cost sharing guidelines include:
 - o Information about co-pays and annual reporting caps is based on family income; the CHIP member ID card shows the member's co-pay amount.
 - o Members must report to Texas CHIP when they or their family reach the annual reporting cap; once the cap is met, the member will be issued a new ID card.
 - o Upon verbal notification from the member or presentation of an ID card showing the cost-sharing limit has been met, no co-pay is collected from the member for the balance of the year.

Cost-sharing guidelines require that providers:

- Only bill for valid, unpaid co-pays and noncovered services received by the member.
- Promptly refund member overpayments if an incorrect co-pay was collected for covered services.
- Not collect additional payment once the co-pay is made.
- Verify eligibility and co-pay amounts by calling Provider Services at 1-888-672-2277 for STAR program claims and 1-888-814-2352 for CHIP claims.

Cost-sharing exemptions include:

- Preventive health care services such as well-child exams, immunizations, and pregnancy-related services.
- Enrollment fees and co-pays do not apply to CHIP Perinate and CHIP Perinate Newborn members.
- Co-pays may not be collected in excess of the cost of a covered service.

Except as specifically indicated in the Medicaid benefit descriptions, a provider may not bill or require payment from members for Medicaid covered services. Providers may not bill or take recourse against members for denied or reduced claims for services that are within the amount, duration, and scope of benefits of the STAR program. For more information, please refer to the Texas Medicaid Provider Procedures Manual found [here](#).

Requesting a Referral

A referral is appropriate when a provider determines medically necessary services, including substance abuse treatments, are beyond the scope of the PCP's practice or it is necessary to consult or obtain services from other in-network specialty health professionals, unless the situation is one involving the delivery of Emergency Services. Information is to be exchanged between the PCP and Specialist to coordinate care of the patient to ensure continuity of care. Providers need to document in the patient's medical record any referrals that are made. Documentation needs to include the specialty, the services requested, and the diagnosis for which the referral is being made.

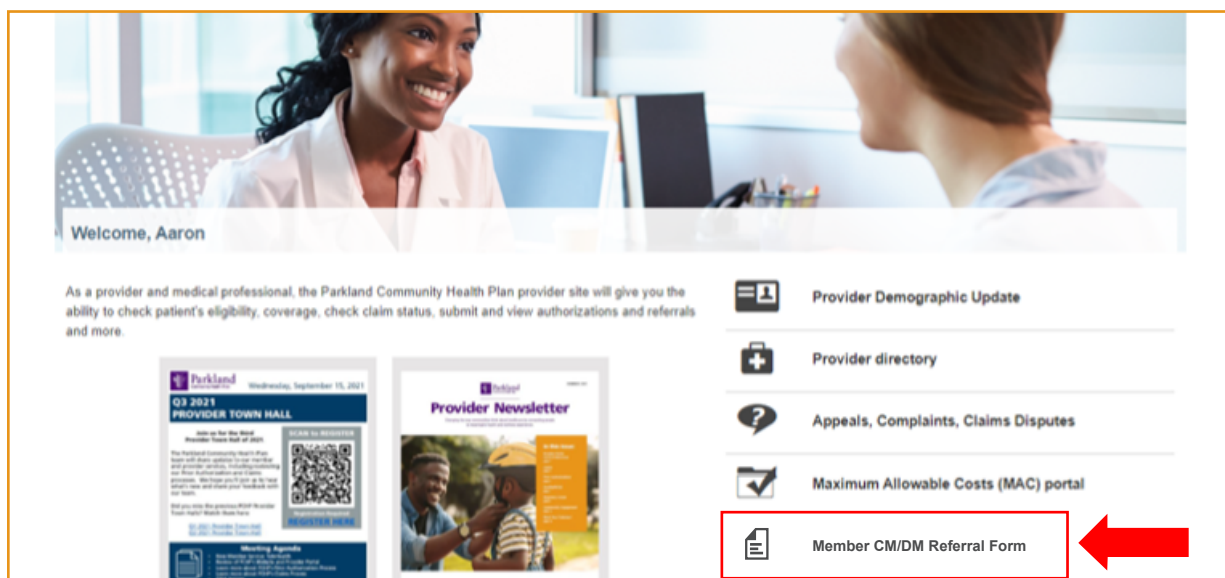
Providers should direct PCHP members to health professionals, hospitals, laboratories, and other facilities and providers that are contracted and credentialed with PCHP Medicaid and CHIP. In the case of urgent and emergency services, providers may direct members to an appropriate service including but not limited to primary care,

urgent care, and emergency services. There may be circumstances in which referrals may require an out-of-network provider. Prior authorization will be required from PCHP except in the case of emergency services.

PCPs can refer a member to an in-network specialist for consultation and treatment without a prior authorization request to PCHP. If the PCP believes that a member needs to be referred to an out-of-network provider, including medical partners not contracted with PCHP, documentation demonstrating the need must be submitted to PCHP for review and prior authorization before the referral can occur. There must be documentation of coordination of referrals and services provided between the PCP and Specialist.

Members with disabilities, special health care needs, or chronic or complex conditions have the right to designate a specialist as their PCP as long as the specialist agrees.

Referrals can be made on the PCHP Provider Portal



Welcome, Aaron

As a provider and medical professional, the Parkland Community Health Plan provider site will give you the ability to check patient's eligibility, coverage, check claim status, submit and view authorizations and referrals and more.

Q3 2021 PROVIDER TOWN HALL
Wednesday, September 15, 2021
Register Here

Provider Newsletter
Fall 2021

- Provider Demographic Update
- Provider directory
- Appeals, Complaints, Claims Disputes
- Maximum Allowable Costs (MAC) portal
- Member CM/DM Referral Form**

Quality Corner

PCHP Provider Forum

The upcoming Quality Provider Forum is scheduled for Thursday, November 17 from 5:00 – 6:00 pm. This event is open to all providers and offers continuing education credit. The invitation will be posted on the PCHP Provider Portal and PCHP's social media pages two weeks prior to the event.

To view a list of PCHP's upcoming events for both members and providers, [click here](#). You can also follow PCHP on LinkedIn and Facebook.



Disease Management Programs for Asthma and Diabetes

We strive to provide quality care for our members affected by asthma and diabetes.

- End-to-end population health management support to positively affect patient/member health outcomes and influence the cost curve.
- <https://www.hgshealthcare.com/healthcare/population-health-management>

Behavioral Health Services

PCHP is committed to connecting all of our members to the care they need—and we're continually working to improve coordination of care for behavioral health services in accordance with NCQA quality standards.

- Members may access behavioral health benefits by contacting providers directly. No primary care referrals are needed.
- Members are allowed a fixed number of initial therapy sessions without prior authorization. These sessions, called initial encounters (IEs), must be provided by contracted in-network providers and are subject to meeting medical necessity criteria. Medication visits do not require authorization.

Beacon Behavioral Health Hotline Services are available 24/7:



www.beaconhealthoptions.com



1-800-945-4644 (Member Services)



We Want Your Feedback!

Please [click here](#) to complete the Provider Satisfaction Survey. PCHP appreciates your input, and we're committed to improving our relationships with all of our providers.

Quality Needs

For any other quality needs, please contact Jeniffer Gonzalez, Director of Quality Improvement, at Jeniffer.Gonzalez@phhs.org.

Provider Resources

Stay current on Parkland Community Health Plan newsletters, provider network updates, and other issues affecting your practice and patients – visit www.parklandhealthplan.com/providers/news.

Quick Contact Sheet



Provider Services Call Center

Parkland HEALTHfirst (STAR Medicaid): 1-888-672-2277

Parkland KIDSfirst (CHIP/CHIP Perinate): 1-888-814-2352

Case Management

Fax: 1-214-266-2097

TFN: 1-844-306-2430

Submit electronic referral via:

[PCHP Provider Portal](#)

Email:

PCHPUMCaseManagement@phhs.org

Claims Resubmissions Disputes

ATTN: Claims Dispute

P.O. Box 560327

Dallas, TX 75356

Submit electronic dispute via:

[PCHP Provider Portal](#)

Claims Submission

ATTN: Claims

P.O. Box 560327

Dallas, TX 75356

[TriZetto Provider Solutions](#)

<https://www.trizettoprovider.com/parkland-community-health-plan-new-user-request>

[TexMedConnect](#)

www.tmhp.com

The Parkland Community Health Plan

Payer ID for electronic claims is: #66917.

If a provider already uses a clearinghouse, such as Availity, Office Ally, Emdeon, Claim Logic, etc., claims will be sent to PCHP.

Complaints and Claims Appeals

ATTN: Complaint and Appeals Team

P.O. Box 560347

Dallas, TX 75356

Fax: 1-844-310-1823

Submit electronic appeal via:

[PCHP Provider Portal](#)

Email:

PCHPComplaintsandAppeals@phhs.org

Concurrent Review

Fax: 1-214-266-2084

TFN: 1-844-303-2087

Disease Management

Fax: 1-214-266-2097

TFN: 1-844-306-2430

Submit electronic referral via:

[PCHP Provider Portal](#)

Prior Authorization

Fax: 1-214-266-2085

TFN: 1-844-303-1382

Submit electronic Prior Authorization via:

[PCHP Provider Portal](#)

For immediate consideration, urgent requests should be faxed to: 214-266-2085.

Add/Update Provider Information

Complete [Provider Action Form](#) and email to:

PCHPProviderInfoUpdate@phhs.org

Send all additions, deletions, and updates to provider data to this address.

General Provider Relations Inquiry?

Email:

PCHP.ProviderRelations@phhs.org

Provider Quick Links



Parkland Community Health Plan

- [Provider Home Page](https://parklandhealthplan.com/providers/)
<https://parklandhealthplan.com/providers/>
- [Provider Resources](https://parklandhealthplan.com/providers/resources/)
<https://parklandhealthplan.com/providers/resources/>
- [Provider Trainings and Manuals](https://parklandhealthplan.com/providers/manual/)
<https://parklandhealthplan.com/providers/manual/>
- [Provider Manual](https://parklandhealthplan.com/media/dcrgqj5f/parkland-community-health-plan-provider-manual.pdf)
<https://parklandhealthplan.com/media/dcrgqj5f/parkland-community-health-plan-provider-manual.pdf>
- [Prior Authorization](https://parklandhealthplan.com/providers/prior-authorization/)
<https://parklandhealthplan.com/providers/prior-authorization/>
- [Claims](https://parklandhealthplan.com/providers/resources/claims/)
<https://parklandhealthplan.com/providers/resources/claims/>
- [Forms](https://parklandhealthplan.com/providers/resources/forms/)
<https://parklandhealthplan.com/providers/resources/forms/>
- [Upcoming Events](https://parklandhealthplan.com/living-well/events/)
<https://parklandhealthplan.com/living-well/events/>

PCHP Provider Portal

- [Portal Login](https://parklandhealthplan.com/providers/login/)
<https://parklandhealthplan.com/providers/login/>
- [Portal User Guide](https://parklandhealthplan.com/media/305huo05/pchp-provider-portal-user-guide-final.pdf)
<https://parklandhealthplan.com/media/305huo05/pchp-provider-portal-user-guide-final.pdf>

EFT Payment Methods

- [ECHO Health](https://enrollments.echohealthinc.com)
<https://enrollments.echohealthinc.com>

Behavioral Health

- [Beacon Health Provider Portal](https://providerportal.beaconhealthoptions.com)
<https://providerportal.beaconhealthoptions.com>

Pharmacy

- [Navitus](https://www.navitus.com)
<https://www.navitus.com>
- [Navitus Claims](https://www.navitus.com/members/filing-a-claim)
<https://www.navitus.com/members/filing-a-claim>
- [Maximum Allowable Costs \(MAC\) Portal – Navitus](https://pharmacies.navitus.com/Secured-Pages/Nav/Resources/MAC-Program.aspx)
<https://pharmacies.navitus.com/Secured-Pages/Nav/Resources/MAC-Program.aspx>

Claims Submission

- [TriZetto Provider Solutions](https://www.trizettoprovider.com/parkland-community-health-plan-new-user-request)
Preferred Electronic Data Interchange (ED Source)
<https://www.trizettoprovider.com/parkland-community-health-plan-new-user-request>
- [TexMedConnect](https://www.tmhp.com)
<https://www.tmhp.com>

Texas Medicaid Provider Procedures Manual

<https://www.tmhp.com/resources/provider-manuals/tmppm>

HHSC Uniform Managed Care Manual

<https://www.hhs.texas.gov/services/health/medicaid-chip/managed-care-contract-management/texas-medicaid-chip-uniform-managed-care-manual>

Texas Health Steps

<https://www.hhs.texas.gov/services/health/medicaid-chip/medicaid-chip-members/texas-health-steps>