PROVIDER CONNECTION

University of Utah Health Plans
Provider Publication

HEALTH PLANS
UNIVERSITY OF UTAH

PROVIDER CONNECTION

In This Issue

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NEW LOOK
Same Great Brand.

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We are excited to announce the NEW University of Utah Health Plans brand (U of U Health Plans for short).

Most notably you will recognize the adoption of a new U of U Health brand – one that reflects our strong and familiar "Block U," accompanied by a DNA helix. By using the Block U we connect more closely to our colleagues on main campus, and to the prominence of the mark in our community and in the PAC 12. The helix symbolizes discovery and innovation—both literally in our institution's DNA.

We recognize your partnership is a very important part of how our brand is shared, please don't hesitate to reach out if you have questions or need guidance on an co-branded communications.

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OXYGEN CONCENTRATORS
for Healthy U Medicaid Members

Alpine Home Medical will continue as the contracted vendor for oxygen concentrators for fee-for-service Medicaid members and for Medicaid members enrolled in an Accountable Care Organization (ACO) residing in a voluntary county.

Effective January 1, 2017, members enrolled in an ACO living in a mandatory county must receive oxygen concentrator services through their ACO. Mandated counties are highlighted in yellow.

County	Health Choice Utah	Healthy U	Molina	Selecthealth Community Care	Fee For Service Network
Beaver	•	•	•		•
Box Elder	•	•	•	•	
Cache	•	•	•	•	
Carbon		•	•		•
Daggett		•	•		•
Davis	•	•	•	•	
Duchesne		•	•		•
Emery		•	•		•
Garfield		•	•		•
Grand		•	•		•
Iron	•	•	•	•	
Juab	•	•	•		•
Kane		•	•		•
Millard	•	•	•		•
Morgan	•	•	•		
Piute		•	•		•
Rich	•	•	•		
Salt Lake	•	•	•	•	
San Juan		•	•		•
Sanpete	•	•	•		•
Sevier	•	•	•		•
Summit	•	•	•	•	
Tooele	•	•	•		
Uintah		•	•		•
Utah	•	•	•	•	
Wasatch	•	•	•	•	
Washington	•	•	•	•	
Wayne		•	•		•
Weber	•	•	•	•	

*Effective January 1, 2017 members living in highlighted counties **must** have a health plan.
Members living in counties not highlighted can choose a health plan (ACO) or use the Fee for Service Network.

NCQA INTERIM ACCREDITATION
Received by University of Utah Health Plans

University of Utah Health Plans received its National Committee for Quality Assurance (NCQA) Interim Accreditation in January 2017 for its Individual Marketplace and Commercial health plans. NCQA is an independent, non-profit organization whose mission is to improve the quality of health care. NCQA Health Plan Accreditation is a nationally recognized evaluation that purchasers, regulators and consumers can use to assess health plans. Health Plan Accreditation evaluates how well a health plan manage all parts of its delivery system – physicians, hospitals, other providers and administrative services – in order to continuously improve the quality of care and services provided to its members.

The quality team at U of U Health Plans worked collectively with all departments in the organization to meet NCQA's rigorous standards. The standards are intended to help organizations achieve the highest level of performance possible and create a culture of continuous quality improvement. This recognition exemplifies U of U Health Plans' commitment to transform health care quality through measurement, transparency, and accountability as a quality health plan.

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INTRODUCING
David Call, Chief Operating Officer

David Call joined University of Utah Health Plans as Chief Operating Officer in August 2016. David is a graduate of Brigham Young University (BS in Accounting) and the University of Utah Eccles School of Management (MBA).

After graduating from the "U", David began his career managing the Intermountain Medical Clinic in Salt Lake City. His career path included serving as Administrator of the Ogden Clinic, Executive Director of Maxicare Utah, Director of Marketing and Product Development at FHP Healthcare and Director of Managed Care Contracting for HCA.

In 1992, David began working for Deseret Mutual (DMBA) where he served as Vice-President for medical plans, nationwide. His duties included managing the health insurance plans offered to employees of the LDS Church and its affiliated organizations. During his tenure at DMBA, David started a medical plan for missionaries of the LDS Church, created a Medicare Advantage plan for retirees, helped start a pharmacy benefits management company, and was responsible for managing health plans in Utah, Hawaii and Idaho. David retired from DMBA in September of 2015 and has been engaged in managed care consulting since that time.

David has served in the healthcare industry as Vice-Chairman of the Utah Health Information Network (UHIN), a board member of the Utah Health Data Committee, board member of Employee Benefits Research Institute (EBRI) in Washington, D.C., and a member of the ERISA Industry Council (ERIC) in Washington, D.C. David also served as a registered lobbyist with Utah's legislature and has worked extensively with Utah's congressional delegation in Washington, D.C. and other congressional leaders regarding health insurance industry issues.

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INTRODUCING

Doug Hasbrouck M.D. joined University of Utah Health Plans as Associate Chief Medical Officer in January 2017. Doug is a graduate of the College of St. Thomas (BS in Biology) and the University of Minnesota, School of Medicine (MD).

Doug completed his residency in Internal Medicine at the University of Utah Hospital. He worked as a general internist at Granger Medical Clinic and at the University of Utah's Greenwood Clinic.

Doug has served in administrative roles with several organizations. He served as Vice President for Professional Services with Columbia/HCA in the mid-90's. He served in medical director leadership roles with UnitedHealthcare of Utah, Regence BlueCross BlueShield of Utah, Regence, HealthInsight of Utah and Utah State Medicaid.

Doug has served in the healthcare industry as a board member of the Utah Health Information Network (UHIN), a board member of the Utah Health Data Committee, board member and Chairman of Utah's High Risk Insurance Pool and member and Chairman of the Utah Digital Health Services Commission.

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CREDENTIALING OF PAs
And Other Mid-Level Providers

University of Utah Health Plans requires that all Physician Assistants (PAs) and other mid-level providers complete credentialing. Once PAs are credentialed, they must submit claims under their own name and personal NPI for our commercial plans.

For Healthy U Medicaid, PAs will need to submit claims under the supervising physician as this is a requirement of State Medicaid.

All other mid-level providers need to submit claims under their own name and personal NPI, for our commercial plan as well as for Healthy U Medicaid.

COMMUNITY EDUCATION FAIRS
For Utah Providers

U of U Health Plans Provider Relations participated in the Utah Provider Community Education Fairs, spanning from March 23rd–April 6th, and covering Ogden, Salt Lake, Provo and St. George!

U of U Health Plans was a Gold Sponsor of the fairs and participated on the Payer Panel at each fair. The theme of the fairs was Care Coordination: Tying Healthcare Together. There were over 350 attendees from across the state.

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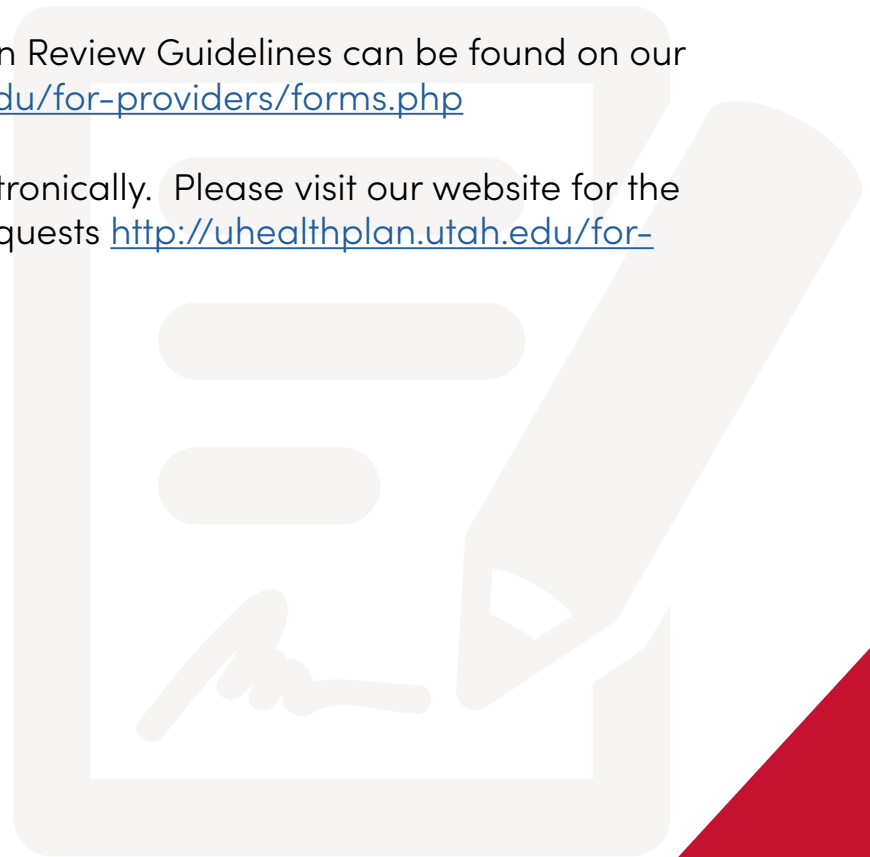UNIVERSITY OF UTAH

PRIOR AUTHORIZATION
Required For Inpatient Admissions

University of Utah Health Plans will require prior authorization for inpatient admissions except healthy maternity and healthy newborns beginning June 1, 2017 for all plans including Healthy U Medicaid, Individual Marketplace and Employer Groups with Healthy Preferred and Healthy Premier.

The intent of prior authorization with U of U Health Plans is to assure that services being provided to our members meet nationally recognized guidelines and are provided at the appropriate setting (inpatient or outpatient) and that the length of stay can be supported for medical indications. We reference InterQual and Hayes criteria, national recognized guidelines, to help determine medical necessity. We are held to meeting turn-around times to make sure the prior authorization does not interfere with the planned dates of services for our members. Routine (elective) admissions have an expected turn-around time of 14 days. UUHP's current turn-around time is within 2 to 3 days. Urgent admissions have an expected turn-around time of 72 hours. U of U Health Plan's current turn-around time is 48 hours.

The UM Request Form and Utilization Review Guidelines can be found on our website at http://uhealthplan.utah.edu/for-providers/forms.php

UM Requests can be submitted electronically. Please visit our website for the information on how to submit the requests http://uhealthplan.utah.edu/for-providers/pdf/howto-box.pdf

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THANK YOU

We hope you have enjoyed the University of Utah Health Plans Provider Connection Newsletter. We look forward to keep providing you the most timely and useful content. If you have suggestions or success stories you would like to share, please contact us.

The information that is contained in this newsletter does not guarantee benefits or change contractual status. If you have questions about benefits or claims issues, please call Customer Service at 801-587-6480 or toll free 888-271-5870.

WEBSITE AND ELECTRONIC SUPPORT

Please visit our website at uhealthplan.utah.edu/for_providers for additional resources and access to:

Providers Updates
Provider Manual
Provider Newsletters
University of Utah
Health Plans Updates
Electronic Data
Interchange (EDI) Info
      ...And much more

HAVE EDI QUESTIONS?

EDI SUPPORT:

📞 801-587-2638 or 801-587-2639

🖨 801-281-6121

✉ uuhpedi@hsc.utah.edu

Utah Health Information Network (UHIN):
801-466-7705 | uhin.org

Email provider changes to:
provider.relations@hsc.utah.edu

PROVIDER CUSTOMER SERVICE NUMBERS

CUSTOMER SERVICE

801-587-6480, Option 1
Toll Free/Out of Salt Lake:
888-271-5870
Fax: 801-281-6121

CLAIMS / ELIGIBILITY

801-587-6480, Option 1

CARE MGMT. UTILIZATION REVIEW

801-587-6480, Option 2
Fax: 801-281-6121

PROVIDER RELATIONS

801-587-2838, Option 2
provider.relations@hsc.utah.edu

EDI SUPPORT

801-587-2638
uuhpedi@hsc.utah.edu

PROVIDER CREDENTIALING

801-587-2838, Option 3
provider.credentialing@hsc.utah.edu

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