

Here's what's new

- The UnitedHealthcare Community Plan of Indiana Hoosier Care Connect newsletter helps you do business with us.
- The newsletter is published quarterly. We cover a range of topics, including the benefits of digital tools, manual overviews, Indiana Department of Health guidance and more.



Questions?

Check out our UnitedHealthcare Community Plan of Indiana homepage.

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Member care improves with coordination

Timely coordination and collaboration help ensure care is safe and effective when members receive services from more than one health care professional. Please discuss with your patients the benefits of sharing essential clinical and behavioral health information with all their physicians and clinicians. When applicable, we encourage you to obtain a signed release from each of our members that allows you to share appropriate treatment information. Topics include advance directives, health care powers of attorney, understanding care options, home safety, pain management, staying connected and living with grief or loss.

Member Advisory Committee (MAC)

We're excited to introduce you to our Member Advisory Committee (MAC), an invaluable platform for our members to voice their thoughts, ideas and desires regarding their health plan. We encourage your patients to join this interactive committee and become advocates for their own health care needs. By participating in this committee, your patients will have the opportunity to engage directly with us, share their experiences and shape the future of health care.

Here's how encouraging your patients to join the MAC can benefit you and your practice:

- · Enhanced patient engagement: By empowering your patients to actively participate in the MAC, they become more engaged in their health care journey. This involvement can lead to improved patient satisfaction and better health outcomes.
- Patient-centered care: The insights and feedback provided by your patients through the MAC will help us understand their needs, preferences and challenges. This knowledge will enable us to develop patient-centered programs and services that align with their expectations.
- · Strengthened health care professional-patient relationship: By recommending the MAC to your patients, you demonstrate your commitment to their well-being and show their opinions matter. This fosters trust, strengthens the professional-patient relationship and promotes long-term collaboration.

To encourage your patients to join the MAC, simply tell them about this opportunity during their visit and give them the phone number to Member Services. We will guide them through the enrollment process.



Refer interested members to Member Services at 800-832-4643, TTY 711.



UnitedHealthcare CommunityCare Provider Portal

The CommunityCare Provider Portal is our integrated, secure, web-based clinical care coordination platform that shares vital member information.

How do I get there?

Sign in to our UnitedHealthcare Provider Portal, then go to Clinical and Pharmacy > UnitedHealthcare CommunityCare

Health care professional notifications

You can opt in to receive email notifications for your patients. These notifications include, but are not limited to, admission, discharge and transfer notifications. By opting in, you will receive a daily email summary of activities for all UnitedHealthcare Community Plan of Indiana members who are your patients.

To opt in, access the Population Health tab in Community Care and check Email Notifications.

How to view care plan

You play a vital role in the member's interdisciplinary care team. Our care manager takes every opportunity to update and involve you on the member's status and strategies for meeting plan goals. To view the member's assessment results and care plans through CommunityCare from the Population Health tab:

- 1. Select the My Members tab
- 2. Select the blue hyperlink under the member's last name
- 3. Select the Activity Record tab
- 4. Select the Activity Summary tab
- 5. The assessments and care plans are viewable under **Script Activity**

Care coordination referrals

All UnitedHealthcare Community Plan of Indiana members are enrolled in 1 of 3 care coordination levels of service:

- · Disease management
- · Care Management
- · Complex case management

To notify us of a member who would benefit from additional care coordination support:

Call: Provider Services at 877-610-9785

Online referral: Using Community Care, from the Population Health tab:

- 1. Select the My Members tab
- 2. Right click on the 3-bullet icon to the left of the member's name



CommunityCare

We offer a self-paced interactive course for you to navigate the CommunityCare portal.

After completing the course, you'll be able to:

Access and use the:

- 1. Provider Portal
- 2. Population dashboard
- 3. Care plan
- 4. Activities
- 5. Quality Measure **Performance Dashboard**
- 6. My Members Roster
- 7. Upload and view document option
- 8. Release of information
- 9. Inpatient admissions discharges
- 10. Emergency department discharges
- 11. Helpful tips, resources and contact information

3. Select Add Activity

4. Add Activity for: Care Staff

5. Type: Scheduled

6. Activity Type: Referral - Care Management

7. Priority: <High/Medium/Low, as applicable>



Questions?

Please call your provider

Services at 877-610-9785.

advocate or Provider

UnitedHealthcare CommunityCare Provider Portal (cont.)

- 8. Contact Type: Member's telephone member
- 10. Leave all other options as the default option
- 11. Select Add and Close

Notification of behavioral health visits

Behavioral health care professionals must notify us through CommunityCare within 5 days of the member's behavioral health visit. Using CommunityCare, from the **Population Health** tab:

- 1. Select the Mv Members tab
- 2. Right click on the 3-bullet icon to the left of the member's name
- 3. If you are unable to select this icon, you need to complete a Release of Information to view the member's information
- 4. Select Add Appointment
- 5. Care Team: <select your name or leave as Select>
- 6. Appointment Type: <select applicable appointment type>
- 7. Appointment Reason: <enter diagnosis reason driving appointment need>
- 8. Appointment Date: <select date>
- 9. Notes: <include information regarding the member's treatment plan, medications and other pertinent information>
- 10. Provider Details: <complete with the treating health care professional's information>
- 11. Select Add

Preventing unnecessary claim denials

Unnecessary claim denials can cost you valuable time. In many cases, these claim denials can be avoided by ensuring your claims include the correct information.

Avoiding frequent errors

The following are 2 mistakes we frequently see, along with solutions to help you avoid them:

Unregistered taxonomy codes

Issue: The Hoosier Care Connect Community Plan doesn't require you to bill any rendering, attending or billing taxonomies on Professional CMS-1500 or Institutional UB-04 claim forms. However, if you bill any taxonomy codes, those codes must be registered with the state Medicaid program, Indiana Health Coverage Programs (IHCP).

Solution: Check that the taxonomy code you bill is registered with the IHCP before you submit your claim.

Incorrect service location information issues

Issue: To process claims accurately, your National Provider Identifier (NPI) number and provider service location must match the IHCP provider data file. If you bill a claim with an NPI and/or service location address that is not registered with IHCP, we'll deny the claim.

Solution: To avoid any disruptions, verify that your demographic information billed on the claim matches the IHCP provider data file. If you notice a discrepancy or error in the IHCP provider data file, please refer to the FAQs - Top 10 Questions section of the Indiana Medicaid: Providers website to learn more about making changes to the IHCP provider data file.



Questions?

Go to UHCprovider.com/claims for claims, billing or if you have payment questions.



The Individual Health Record

The Individual Health Record (IHR) is a technology platform that provides a robust digital record of a person's UnitedHealthcare health care history. IHR takes data from across systems and transforms it into a record that communicates each person's health history and current health status.



Information





Coordination

The platform delivers patient information across all patient encounters in the health care delivery system.

- · Includes diverse data such as inpatient, outpatient, ambulatory, in-network, out-of-network and reported sources are combined into a single record
- · Gives you access to current and historical diagnoses, visits, medications and tests from physicians outside your practice

Provides a broader view of your patient's overall health care experience. It benefits care teams in several important ways:

- · Making the most of the patient's visit, potentially closing gaps
- Identifying potential admission/ readmission risks early, so you can take preventive measures

Reduces unnecessary or duplicated tests and appointments as all clinical teams work from the same patient information.

- · Helps reduce your administrative burden by automating the movement of data
- · Near real-time data is used in the IHR, helping decrease possible test duplication and increase the ability to monitor items, such as medication
- Get a broader understanding of your patients' overall health care

How do I request access to IHR?

- · Go to UHCprovider.com/newuser
- Contact UnitedHealthcare Web Support at providertechsupport@uhc.com
- Call **866-842-3278**, option 1, 7 a.m.-9 p.m. CT, Monday-Friday



Whom can I reach out to for questions about IHR?

Call the Dedicated Service Team at 888-761-0346 7 a.m.-7 p.m. CT, Monday-Friday. The Dedicated Service Team will research the issue and validate the information.

