



Missouri | Fall 2019

practice**matters**



For More Information

Call our Provider Services Center at **888-362-3368**

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We hope you enjoy the fall edition of Practice Matters. In this issue, you can read about maternity support resources, availability of electronic breast pumps, 2019 Member Incentive Programs and much more.



Maternity Support Resources

Our maternity programs provide UnitedHealthcare Community Plan members with education, resources and individualized support to help them focus on a healthy pregnancy and birth. These programs are available to members at no extra cost. Incentives may be available for care providers and members who participate in the programs.



Visit UHCProvider.com/maternity to learn more.

Electronic Breast Pumps Available

UnitedHealthcare Community Plan of Missouri members who are pregnant and planning to breast feed are eligible to receive a hospital grade electronic breast pump. This benefit is limited to one pump per member per lifetime.

How to Request a Breast Pump

A member may request a pump one month before delivery or up to 60 days postpartum. A pump can be ordered through Med Resources by faxing a physician order to **636-530-4577**.

For a physician order form, go to UHCProvider.com/MOcommunityplan > Provider Forms and References > **Electronic Breast Pump Form**.

Questions?



If your pregnant patients who are our members have questions, they can call customer service at **866-292-0359**.

2019 Member Incentive Programs

In August, we started offering incentives to UnitedHealthcare Community Plan of Missouri members who haven't completed important preventive visits and screenings. The incentives are based on specific Healthcare Effectiveness Data and Information Set (HEDIS®) measures. Incentives are available for the following:



- **Well child visits:** One or more well child visits per HEDIS® measurement year with a primary care provider (PCP) for members at ages 3, 4, 5 and 6
- **Adolescent well care visits:** At least one comprehensive adolescent well care visit per HEDIS® measurement year with a PCP or an OB-GYN for members ages 12-21
- **Annual dental visits:** At least one dental visit per HEDIS® measurement year for members ages 2-20
- **Postpartum visits:** One postpartum visit on or between 21 and 56 days after delivery
- **Comprehensive diabetes care:** Diabetes care for members ages 18-75 who are diagnosed with type 1 or type 2 diabetes and had HbA1c <8.0%
- **Lead screening in children:** One or more capillary or venous blood tests for lead poisoning by the second birthday

Incentives Available

Members receive an introduction letter and instructions explaining the criteria for earning incentives. The first five incentives listed above will earn members a \$25 gift card for Walmart or Old Navy. The Walmart gift card is

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Important information for health care professionals and facilities

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coded to prohibit the sale of alcohol, tobacco, firearms or ammunition.

When a lead screening is completed, the member will receive a \$10 Walmart or Old Navy gift card.

Breast Cancer Incentive in Fourth Quarter 2019

From Oct. 1 through Dec. 31, 2019, we'll offer a breast cancer screening incentive for women ages 50-74. Members who haven't had a mammogram will receive an introduction letter and instructions explaining the criteria to obtain the incentive. When they complete the mammogram, they'll earn a \$25 gift card to Bed, Bath & Beyond.

“Always Therapy” Code Reimbursement for Claims

On May 21, 2019, we discovered a claim edit was incorrectly loaded into our system. As a result, UnitedHealthcare Community Plan claims that included “Always Therapy” codes with and without the GN, GO or GP modifiers were denied for claims submitted on or after May 19, 2019.

What We're Doing to Correct the Issue

- Our claims system was updated on May 22, 2019, to remove the edits that were loaded incorrectly.
- We're working to identify and reprocess affected claims as quickly as possible.
- When claims are reprocessed, affected care providers will receive payment for the correct reimbursement amount.



What This Means for You

- While we work to identify and reprocess affected claims, we've postponed implementing the edit requiring the modifier on “Always Therapy” codes until Sept. 1, 2019.
- For dates of service on or after Sept. 1, 2019, the GN, GO or GP modifiers will be required on “Always Therapy” codes.
- Denials will only occur if the “Always Therapy” codes are reported without one of the required modifiers.
- Claims are still subject to other reimbursement policy edits, coverage and/or benefit determinations.

Questions?



If you have questions, please call us at **877-842-3210**, from 7 a.m. to 7 p.m. Eastern Time, Monday through Friday.



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