



Post Acute Care Provider Forum

In partnership with UnitedHealthcare

July 2024



Agenda

- 1 Medicare & Retirement Post Acute Process
- 2 Employer & Individual Post Acute Process
- 3 Claims and Billing Information
- 4 Contact Information
- 5 Questions & Closing Remarks
Please enter questions in the Chat

Medicare & Retirement Post Acute Processes

Post-acute Member Journey



Meet Alice

Admitted to the hospital and needs additional care before returning home



Prior Authorization is requested

Approved authorization is required prior to admission

Provider submits prior authorization request up to 48 hours prior to hospital discharge



Prior Authorization Request is reviewed

Pre-service Coordinators review for medical necessity and issue a determination (approved authorizations are typically valid for 3 – 5 days)

Admission notification required within 24 hours of admission



Final Steps

SNF submits discharge documentation: therapy discharge summary, service logs, and discharge instructions



Alice is discharged home

Upon discharge, **SICC** completes discharge Predict Function Assessment®



Alice is admitted to SNF

Skilled Inpatient Care Coordinator (SICC)

- Completes Predict Assessment® and shares SNF Predict Outcome report with Alice and clinical team
- Completes Interim reviews with SNF Interdisciplinary Team based on Alice's needs

Prior Authorization & Continued Stay Documentation



Prior authorization request

- History & Physical
- Most recent physician progress notes
- PT/OT/SLP evaluations and progress notes
- Case Management notes
- High-cost drug / TPN



Discharge Predict Assessment

- Discharge instructions
- Therapy discharge notes
- Therapy service/billing logs (for entire SNF stay)



Initial Predict Assessment Upon Admission

- Demographics sheet
- MD order sheet / medication list
- Nursing admission assessment
- PT, OT, ST evaluations
- Respiratory therapy evaluation (if applicable)
- Depression screening (PHQ-9 assessment)



Interim Assessment based on member need

- Physician and nursing notes
- MD Order Sheets
- Medication List
- PT, OT and ST notes
- Respiratory therapy notes (if applicable)

Using Access for Prior Authorization & Ongoing Communication

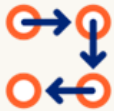
Easy-to-use online portal

Submit records electronically:

- ✓ Prior Authorization Requests
- ✓ Continued stay requests
- ✓ Medical necessity documentation
- ✓ Discharge records

Review authorization status

Communicate with SICC



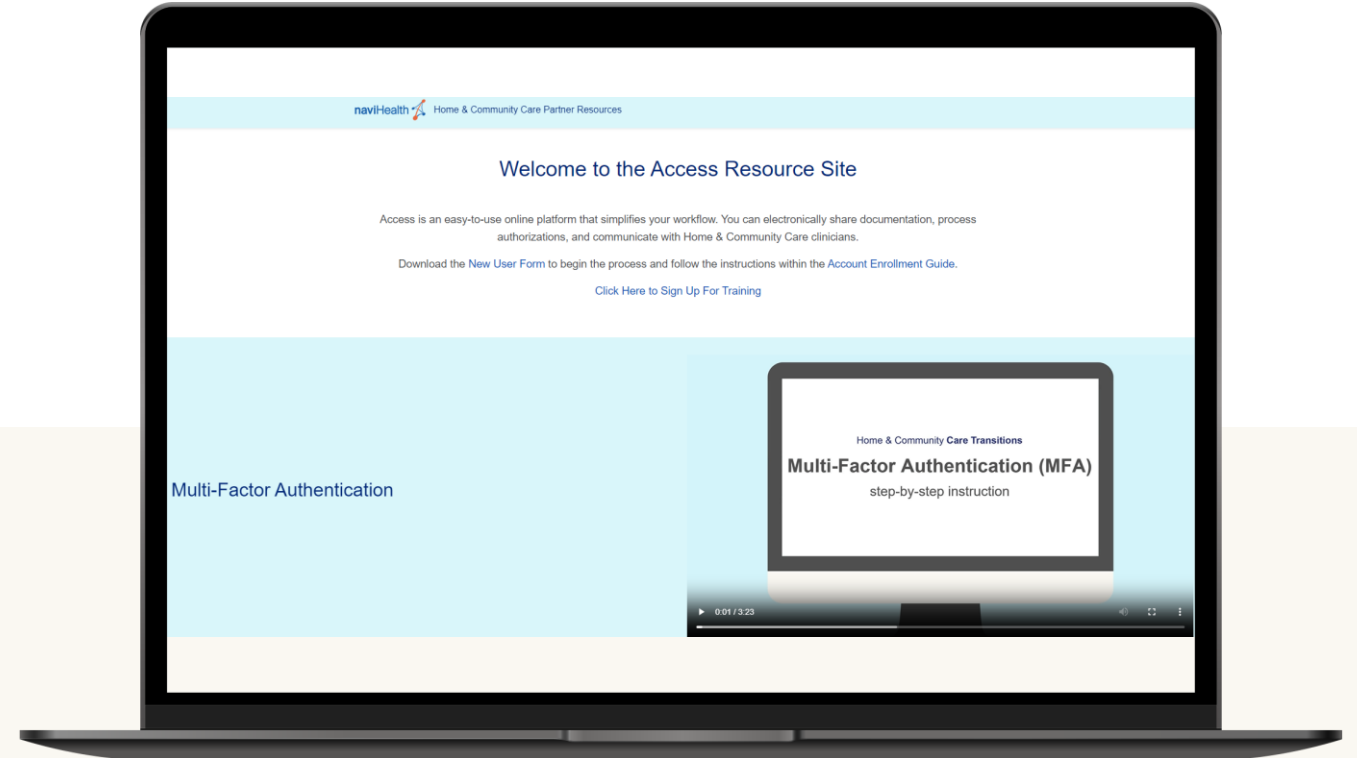
**Simplify
authorization
process**



**Upload & view
documentation
in portal**



**Receive email
notifications**



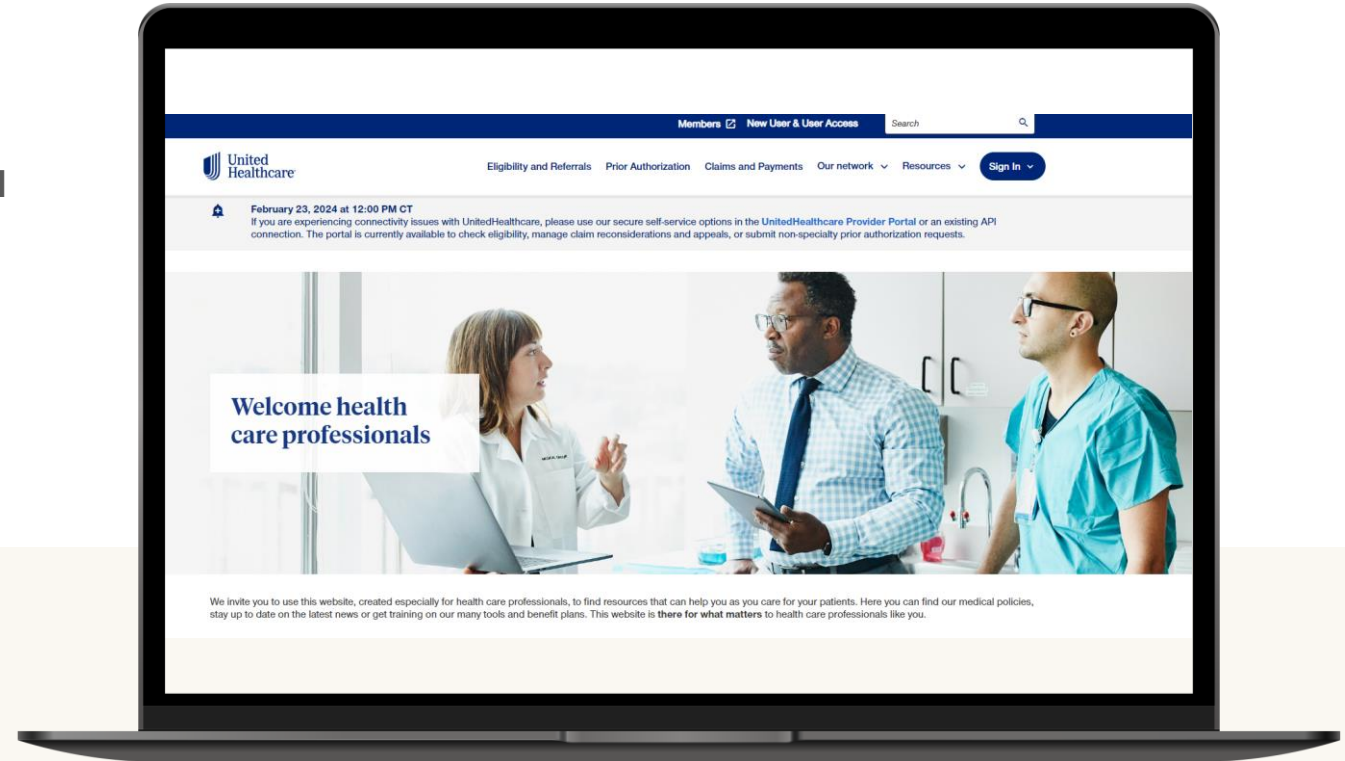
Please visit <https://partners.navihealth.com/partner/nh-access> for information, sign-up and training

Employer & Individual Post Acute Processes

UnitedHealthcare portal

Easy-to-use online portal

- Request Prior Authorization for Employer & Individual
- Verify member eligibility information
- Obtain Member ID Cards
- Submit claims and review claim status
- Submit reconsideration requests
- Review Policies and Procedures



Claims and Billing Information

Claims & Billing information



Claim Requirements

Part A

Submit encounter data to CMS in addition to billing UnitedHealthcare:

- Revenue Code 0022 with corresponding PDPM HIPPS Code
- Room & Board (R&B) revenue code listed on the notification
- Start date of a Part A stay in Box 12
- Discharge Date in the “Statement Covers Period” field
- All ancillary services provided during claim dates of service

Part B

- All Part B services itemized with appropriate HCPCS and date of service

All Claims

- Most specific ICD-10 DX Code
- Type of Bill



Code Descriptions

Type of Codes

- 21X: Skilled Nursing Inpatient (including Part A)
- 22X: Skilled Nursing Inpatient (Part B only)
- 23X: Skilled Nursing Outpatient

Type of Bill Frequency Codes (last digit in the bill type)

- 0: Non-payment / Zero Claim
- 1: Admit through Discharge Claim
- 2: Interim – First Claim
- 3: Interim – Continuing Claim
- 4: Interim – Last Claim
- 7: Replacement of prior claim
- 8: Void/Cancel of prior claim

Contacts

UnitedHealthcare Contact Information



UnitedHealthcare Provider Portal (877) 842-3210

Services include:

- Benefits and eligibility
- Pre-authorizations
- Admission notification
- Claim status and assistance
- Credentialing and Re-credentialing
- Privacy practices
- Demographic changes
- Appeal submissions
- Claims Mailing addresses

Available 8am to 8pm EST

Information above can be found on
uhcprovider.com

Advance Notice & Admissions Notification	
Medicare Advantage	access.navihealth.com Phone: (855) 851-1127
Commercial	uhcprovider.com Phone: number on back of member card
Claims Services	
UnitedHealthcare Payer ID	87726
UnitedHealthcare EDI Hotline	(800) 842-1109
UnitedHealthcare EPS Hotline	(866) 842-3278 (#5)
Overpayment Refund Address	UnitedHealthcare PO Box 74804 Atlanta, GA 30374-0804
Reconsideration request for a claim	Uhcprovider.com UnitedHealthcare Provider Appeals PO Box 30559 Salt Lake City, UT 84130
Pharmacy Services	
Request a copy of the prescription drug list	(800) 393-0993
For additional information	(888) 327-9791

Questions?

Please enter questions in the chat section

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