

# Anthem HealthKeepers Plus: Product Overview

May, 2012



# Product Offering: Medallion II

- Medallion II was built to expand the use of MCOs for the delivery of health care to Medicaid recipients as well as:
  - Improve access to care
  - Promote disease prevention
  - Ensure quality care
  - Reduce Medicaid expenditures
- Eligibles include non-institutionalized individuals in the following covered groups:
  - Families and Children
  - Aged, Blind, or Disabled (ABD)



# Product Offering: FAMIS

- Virginia's Children's Health Insurance Program (CHIP)
- Eligibles include children:
  - Living in Virginia
  - Under age 19
  - Without health insurance now and past 4 months
  - Ineligible for any Virginia state employee health insurance plan
  - Living in families meeting FAMIS income guidelines
  - United States citizens or qualified aliens
- Newborn whose mother is enrolled in MCOs FAMIS/ FAMIS MOMS program at birth is deemed an enrollee of that MCO for three calendar months (birth month plus two months)



# Product Offering: FAMIS (cont'd)

- Benefits differ from those under Medallion II/FAMIS MOMS
  - Additional covered services, such as Chiropractic
  - Benefit limitations
  - Cost sharing
    - Co-payments depending on income levels (<150% and >150%)
    - No cost sharing for American Indians and Alaska Natives



# Product Offering: FAMIS MOMS

- Provides health care coverage for pregnant women
- Encourages early and regular prenatal care to increase the likelihood for a healthy birth outcome
- Eligibles are pregnant women who:
  - Are uninsured
  - Have a medically confirmed pregnancy or be within the sixty-day period after pregnancy ends
  - Are a Virginia resident
  - Are a U.S. citizen or a qualified legal immigrant
  - Do not have access to a state employee health plan
  - Meet family income guidelines
- Eligible through three months (birth month plus two additional months)
- Receive same benefit package, I.D. card, and Evidence of Coverage (EOC) as Medallion II



# Emergency Services

- Emergency medical condition: medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that a prudent lay person, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in placing the health of the individual (or with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy, serious impairment to body functions, or serious dysfunction of any bodily organ or part



# Emergency Services (cont'd)

- Urgent medical condition: medical (physical, mental or dental) condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of medical attention within 24 hours could reasonably be expected by a prudent layperson who possesses an average knowledge of health and medicine to result in:
  - Placing the patient's health in serious jeopardy
  - Serious impairment to bodily function
  - Serious dysfunction of any bodily organ or part
  - Serious jeopardy to the health of the unborn child



# Emergency Services (cont'd)

- Emergency services: covered inpatient/outpatient services furnished by participating or non-participating qualified providers that are necessary to evaluate, treat or stabilize an emergency medical condition
- Cost sharing
  - Medallion II/FAMIS MOMS: no co-payments or balance billing
  - FAMIS: emergency room co-payment and ability to bill the difference between the emergency room and non-emergency co-payments, if it is determined that the visit was a non-emergency
- Effective April 1, 2011 Anthem HealthKeepers Plus will reimburse emergency room claims submitted without medical records at emergency triage rate unless diagnosis code is on the list of auto paid code. Refer to the DMAS website. Providers can accept the level of reimbursement or submit medical records to dispute the claim via an Anthem Claim Information Request Form. See Network Update May 2011.

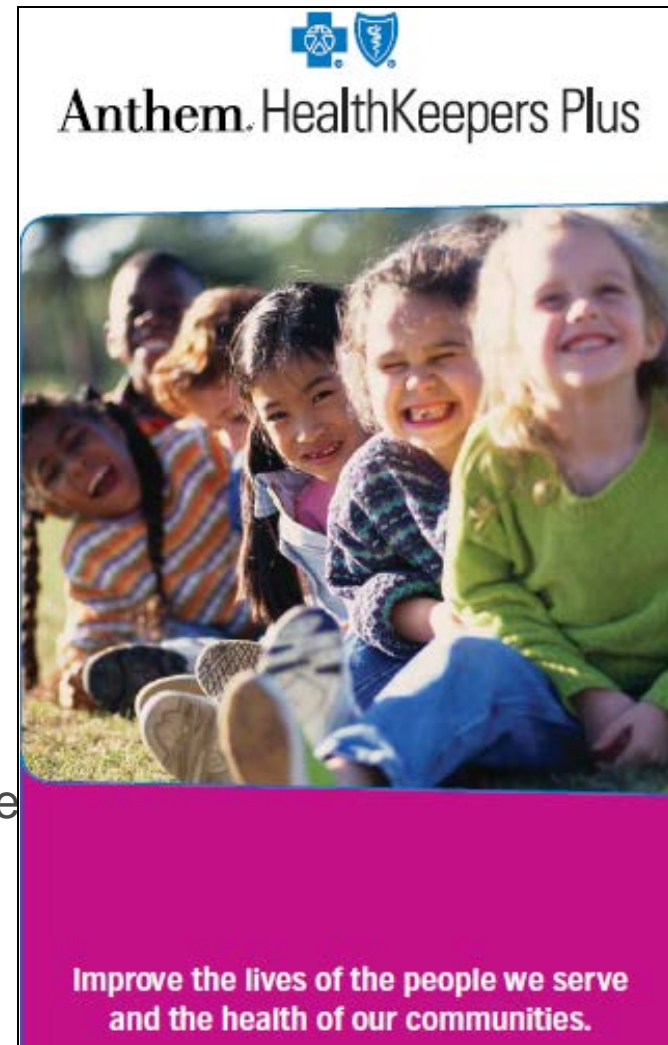


# Anthem HealthKeepers Plus



# Anthem HealthKeepers Plus

- Largest Virginia Medicaid managed care organization
- Participation since Medicaid managed care program began in 1996
- Operate in over 80 Virginia cities and counties
- Serve over 220,000 Medallion II, FAMIS and FAMIS MOMS enrollees
- Open Access Provider network consists of a variety of physician, hospitals & health systems, laboratories, and other service providers
- Member populations include:
  - Aged, Blind, Disabled (ABD) – approximately 19,000 members statewide making up 8.5% of our total membership
  - Temporary Assistance for Needy Families (TANF)
  - Children's Health Insurance Program (FAMIS)



# Enrollment

- For the first ninety (90) days following the effective date of enrollment, members are permitted to change from one MCO to another without cause
- If the member does not disenroll during this period, then the member must remain with the MCO for the duration of the enrollment period
- Members may change from one MCO to another at any time, for good cause, as defined by DMAS




# Primary Care Physician Assignment

- Each member must select a PCP...Open Access Network
- If the member does not request an available PCP, then one is assigned taking into consideration
  - Current provider relationship
  - Language needs
  - Age
  - Sex
  - Enrollment of family members
  - Area of residence
- If a member is not happy with the PCP assigned, the member can contact Customer Service to request a physician change
  - New identification card is mailed with the new physician listed
  - If the request is received the 10th of the month, or you have seen the PCP listed on your identification card, the change will take effect on the first of the following month
- PCPs can download via Point of Care a monthly listing of members who have selected them or receive a report via mail

# Member Verification and Enrollment



- All service providers must verify program eligibility at each visit as eligibility can change
- Relying on the member's ID card does not guarantee current eligibility or reimbursement
  - Providers should know the payer source before services are rendered
- Automated Response System (ARS) is a Web-based option offered by DMAS to access information regarding eligibility
- MediCall is a voice response system offered by DMAS that provides information regarding eligibility by telephone at 800-884-9730 or 800-772-9996
  - Member eligibility, special indicator codes, managed care program assignment (including coverage dates), and MCO provider
  - Required information includes National Provider Identifier (NPI) number, the recipient Medicaid ID number or Social Security number and date of birth, and date (s) of service not more than 31 days

# Anthem Medallion II/FAMIS MOMS I.D.s



 <b>Anthem HealthKeepers Plus</b> Offered by HealthKeepers, Inc.	
<b>David Smith</b> Identification Number <b>YTD123456780</b>	PCP Name <b>Jane Smith</b> PCP Phone <b>999-999-9999</b> Medicaid ID <b>987654321</b>
Group Number <b>HKP00200</b> BC/BS Plan <b>423/923</b> Rx Bin Number <b>610575</b>	<div style="border: 2px solid orange; border-radius: 50%; padding: 10px; display: inline-block;"> <b>No Copays</b> </div>
Rx	

Front: No copayments  
No Suitcase

Back: Transportation benefit


 <b>Anthem HealthKeepers Plus</b> Offered by HealthKeepers, Inc.		<b>anthem.com</b> Member Services: <b>1-800-901-0020</b> Provider Services: <b>1-800-901-0020</b> TDD (Hearing Impaired): <b>1-800-247-9843</b> 24/7 Nurse Line: <b>1-800-382-9625</b> Mental Health Services: <b>1-800-991-6045</b> Rx Services: <b>1-800-662-0210</b> Authorization: <b>1-800-533-1120</b> Transportation: <b>1-877-892-3988</b> Doral Dental* <b>1-888-912-3456</b> <small>* Not a Blue Cross Blue Shield Product</small>
<p><b>Members:</b> When submitting inquiries always include your identification number from the face of this card. Possession or use of this card does not guarantee payment. In an emergency, go to the nearest facility or call 911.</p>		
<p><b>Providers:</b> Please submit claims to your local BCBS plan. To ensure prompt claims processing please include the 3-digit alpha prefix that precedes the patient's identification number listed on the front of this card.</p>		<p><b>HealthKeepers, Inc</b>          277 Bendix Road, Suite 100          Virginia Beach, VA 23452-1361  <small>HealthKeepers, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. © ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.</small></p>
Claims Filing Address: Post Office Box 27401 Richmond, Virginia 23279		

# Anthem FAMIS I.D.s

 <b>Anthem HealthKeepers Plus</b> Offered by Priority Health Care, Inc.												
<b>David Smith</b> Identification Number <b>YTF123456780</b>		PCP Name <b>Jane Smith</b> PCP Phone <b>999-999-9999</b> Medicaid ID <b>987654321</b>										
Group Number <b>HKP00200</b> BC/BS Plan <b>423/923</b> Rx Bin Number <b>610575</b>	<table border="1"> <tr> <td>PCP/Specialist</td> <td><b>\$2/\$2</b></td> </tr> <tr> <td>Outpatient</td> <td><b>\$2</b></td> </tr> <tr> <td>Inpatient</td> <td><b>\$15</b></td> </tr> <tr> <td>Emergency</td> <td><b>\$2</b></td> </tr> <tr> <td>Rx</td> <td><b>\$2/\$4</b></td> </tr> </table>		PCP/Specialist	<b>\$2/\$2</b>	Outpatient	<b>\$2</b>	Inpatient	<b>\$15</b>	Emergency	<b>\$2</b>	Rx	<b>\$2/\$4</b>
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Rx	<b>\$2/\$4</b>											
		Rx										

Front: FAMIS logo  
Co-payments  
No Suitcase

Back: No transportation benefit

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<p><b>Priority Health Care, Inc.</b>          277 Bendix Road, Suite 100          Virginia Beach, VA 23452-1361          Priority Health Care, Inc. is an independent licensee of the Blue Cross and Blue Shield Association. ® ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.</p>		

# Medical Management

- Anthem HealthKeepers Plus has an Open Access Network
- Two types of medical authorizations handled by Medical Management for all Anthem Blue Cross Blue Shield lines of business either by phone at (800) 533-1120 or electronic via Point of Care
  - Health Services Reviews (formerly “pre-auths”) are performed by PCPs and/or Specialists via telephone or online through Point of Care
  - Admission Reviews (formerly “pre-certs”) are performed by PCPs and/or Specialists via telephone or online through Point of Care
- Visit [www.anthem.com](http://www.anthem.com) for a list of services requiring authorization





# Pharmacy

- Express Scripts, Inc. (ESI) is Anthem HealthKeepers Plus' pharmacy benefit management company
- All FDA-approved, medically necessary prescription drugs and over-the-counter medications incidental to outpatient care are covered, including compound medications
- Only generic drugs will be dispensed unless physician obtains prior authorization for a brand name drug
  - Physician must document the medical reason why a brand-name drug is required
  - Specific classes of medications, antipsychotics and contraceptives, do not require use of generics — both brand name drugs and generics will be covered

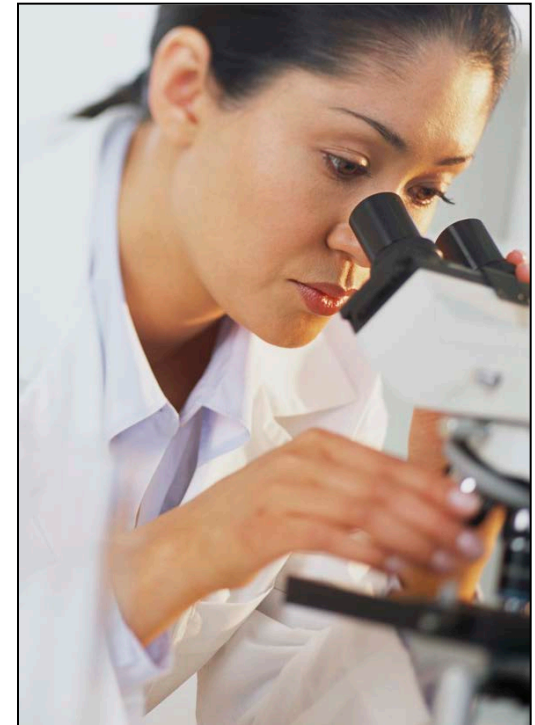


# Pharmacy (cont'd)

- Cover up to a 31-day supply
- Diaphragms and birth control pills are also covered
- Cover injectable insulin and syringes and needles for the administration thereof, diabetic glucose test strips and lancets
  - No more than one glucometer will be approved within a two-year period
- Allow a specific medically necessary drug not on the covered drug list if member has been receiving the specific drug for at least six months previous to the development or revision of the covered drug list and the prescribing physician has determined that the drug on the covered drug list is an inappropriate or that changing drug therapy presents a significant health risk

# Laboratory Services

- LabCorp® is the exclusive provider of reference lab testing for Anthem HealthKeepers, Inc., which includes Anthem HealthKeepers Plus
- Providers agree to use LabCorp for all Anthem HealthKeepers Plus members
- Any lab test provided by a non-network laboratory must be authorized by Anthem prior to the test being performed
- Specific lab tests may be performed in the physician's office
- Laboratory tests performed for members while hospitalized are handled through the hospital



# Claims Submission

- Submit claims using the same processes currently use for all Anthem Blue Cross and Blue Shield lines of business\*
- Use 10-digit National Provider Identifier number (NPI) to submit electronic claims through clearinghouse/vendor or paper claims mailed to P. O. Box 27401, Richmond, VA 23279
- Reimbursement for services provided to Anthem HealthKeepers Plus members appears on the provider's Anthem remittance
- Reimbursement is based on a percentage of the Anthem HMO Medicaid fee schedule with no physician reimbursement by capitation

\*Mom and baby claims for delivery must be billed separately.

**Thank you for your time.**

**Questions?**

