

December 2009

ELECTRONIC REFERRAL SUBMISSION

As NAMM/HPH moves forward in enhancing our value-added services to our physician offices, we are pleased to announce that you may now submit referrals that require pre-authorization **electronically** via EZNet. EZNet is a free of charge internet based tool that is HIPPA compliant that is available 7 days a week/24 hours a day. This new process will help enhance provider and member satisfaction and most of all, improve the referral turnaround times. EZNet also allows offices to verify eligibility, claims status/payment, and referral/authorization status.

To become an EZ-Net user:

1. Providers must have internet access with 128 bit-encryption.
2. Complete the enclosed ***EZ-Net System User Login Worksheet*** and fax it back to (708) 432-0183.
3. Providers will be notified once access is set up.

THERAPY SERVICES

Since we are nearing the end of the benefit period 2009, now is the great time to renew therapy authorizations for 2010 benefit period. Effective January 1, 2010, with the new benefit period, any patient may be referred to any of the following in-network Therapy providers:

- Adventist Paulson Rehabilitation Services
- ATI Therapy Services
- Helping Hand Rehabilitation Center
- Physiotherapy Associates
- Milestone for Kids' Success

HOLIDAY HOURS

In observance of the Christmas and New Year Holiday, the NAMM / HPH office hours are as follows:

Thursday December 24, 2009 – Closing at Noon

Friday December 25, 2009 – Closed

Thursday December 31, 2009 – Closing at Noon

Friday January 1, 2010 – Closed

Emergency protocol should be followed during this time. Members should **ONLY** be referred for URGENT SERVICES. Please reference your Hinsdale Physicians Healthcare Directory for participating providers. Services requiring pre-authorization should be submitted via the EZ-Net electronic referral process or telephonically on Monday, January 4, 2010 when the office will reopen.

ENCOUNTER DATA – CLAIM SUBMISSION

This is a reminder that all participating Physicians of Hinsdale Physicians Healthcare (“HPH”) are required by contract to submit all claims encounter data to HPH for adjudication. Even though services provided are capitated, this encounter data is contractually required by the health plans. Failure to submit claims encounter data is a sanctionable offense and it impacts the outcome of profiling performance reporting for all physicians. Your compliance with this requirement is very important. HPH Provider Relations Staff will be contacting your office if you are not submitting claims and will work with you to establish connectivity to an electronic claims submission process. NAMM/HPH is partnered with Emdeon and Availity for your claims processing needs. Below are the Payer IDs:

Emdeon:	36385
Availity:	NAHIN

BCBS DIABETIS QUALITY STUDY

This is the reminder that the last project of the year is due to HPH by December 31, 2009. If you have not already submitted requested documentation, your Quality Nurse needs your information as soon as possible.

Elements required for this project are:

- 2009 HbA1c < 8
- 2009 LDL < 100
- 2009 Dilated Retinal Eye Exam
- 2009 Blood Pressure reading of < 140/90
- 2009 Depression Screening
- 2009 Kidney Function Screening
- 2009 **Urine** for Microalbumin Test, **OR** urinalysis with positive protein (not trace), **OR** a copy of a nephrologist’ office visit
- 2009 Current/Updated Medication
- 2009 Flu Vaccine
- Completed Diabetic Flow Sheet

Again, please call Kristin Glavin, RN, Quality Nurses if you have questions at 708-432-1642. Fax number: 708-432-0205

HPH

HINSDALE PHYSICIANS HEALTHCARE ASSOCIATION, INC.

December 20, 2009

TO: All HPH Participating Primary Care and Specialty Care Physicians

FROM: Danielle M. Dillon, Executive Director

SUBJECT: UNICARE HMO CONTRACT AND MEMBERSHIP

As you may already be aware, Unicare Health Plans announced that it would be exiting the Illinois Market for its HMO and most of its PPO business. Unicare has indicated that many of its HMO Members will be transitioning to a Blue Cross Blue Shield Illinois ("BCBSI") HMO plan by the end of this year. Further, HPH has been waiting to receive some news of a transition plan from Unicare and to date, we have no additional information about eligibility, membership and capitation.

As a result, HPH has taken the following action:

- All Unicare eligible members with open referrals will have an end date of 12/31/09 on their referral. Should a Unicare Member contact you on 1/2/2010 with a request for a referral, HPH will verify eligibility with Unicare and BCBSI for the member.
- If a member is eligible under Unicare, an authorization will be issued through 1/31/2010.
- If a member is eligible under BCBSI, appropriate authorization will be issued.
- If a member does not show eligible under either Unicare or BCBSI HMO plans, no authorization will be issued for the member.
- HPH has issued notice of termination to Unicare that shall be effective January 31, 2010.

As Unicare makes known its transition plan, this information will be communicated to you in a timely manner. In the meantime, should you have any questions regarding this memo, please feel free to contact me at 630-551-0655 or danielledillon@comcast.net.

Thank you.

4415 W. Harrison Street, Suite 300
Hillside, IL 60162

Executive Director 630-551-0655 & Fax 630-551-0772
Operational Management 708-432-4000 and Fax 708-432-4077 Fax