Thank you for joining Mercy Care for our provider webinar:

**Mercy Care Provider In-Service**

We will begin at 11:00 a.m.

Webinar reminders:

- All phone lines will be muted for the duration of the webinar
- Submit your questions using the Chat or Q&A feature and they will be addressed at the end of the presentation
- The slide presentation will be emailed by the end of today
Agenda

• Welcome and overview
• CMDP RFP award information
• Mercy Care contracts and lines of business
• Provider Assignments
• Provider Manual
• Secure web portal
• Deliverables / SFTP
• Provider Rosters
• Services for Members
• Provider Trainings
• Prior Authorization (PA)

• Billing
• Claims information
• Timely Filing
• Electronic Remittance Advice (ERA)
• Electronic Funds Transfer (EFT)
• Health Information Exchange (HIE)
• Appointment Availability Audit (AAA)
• Provider Service Profile (PSP)
• Tools and Resources
• Q&A and Closing
Mission

Mercy Care exists to address and advocate for the comprehensive health of our members and families, including circumstances that impact their well-being. This includes special consideration for the underserved and those with complex health needs regardless of race, color, religion, ethnicity, national origin, sex, sexual orientation, gender identity, age or disability.

Vision

Our members live a healthier life and achieve their full potential.

Values

Our values guide us to approaching our work with integrity, confidence and clarity.

- **Compassion:** Mercy Care will pursue its mission with passion, enthusiasm, optimism and diligence.
- **Innovation:** Mercy Care will be innovative though leaders transforming the care delivery system.
- **Collaboration:** Mercy Care will seek partners to create exceptional results.
- **Advocacy:** Mercy Care will work on behalf of the underserved and those with complex health needs to improve health outcomes.
Welcome to Mercy Care

Mercy Care has a comprehensive website that provides all our resources, manuals, guides, forms, references and provider assignments. We also provide past webinars, trainings, and forms to providers for full access.

The Mercy Care website also has provider notices (you can sign up for Constant Contact here to have them emailed directly to you) that go out often with updates/changes for Mercy Care.

www.MercyCareAZ.org
RFP and award information

- Arizona Department of Child Safety’s Comprehensive Medical and Dental Program currently provides physical health services to children in foster care.
- Arizona’s three Regional Behavioral Health Authorities provide behavioral health services to children in foster care.
- DCS awarded Mercy Care the CMPD contract effective April 1, 2021.
- Note that the Comprehensive Medical and Dental Program is changing its name to Comprehensive Health Plan (CHP) effective April 1, 2021.
- This is a statewide contract. Mercy Care will provide physical and behavioral health services to children in foster care.
- This will create a Mercy Care DCS CHP integrated health plan.
Changes effective April 1, 2021

**Current**

**RBHA CMDP**
- Mercy Care (Central)
- AZ Complete Health (South)
- Health Choice Arizona (North)

**Acute CMDP**
- DCS/CMRP

**Future**

**DCS CHP**
- Mercy Care
Dept. of Child Safety Comprehensive Health Plan (DCS CHP)

Counties served:
- All counties

About DCS CHP:
- Children in foster care
- Integrated physical and behavioral health services
## Mercy Care contracts and lines of business

<table>
<thead>
<tr>
<th>Contract</th>
<th>Description</th>
<th>Regulator</th>
<th>Physical and Behavioral Care</th>
<th>Members</th>
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<tbody>
<tr>
<td>ACC</td>
<td>AHCCCS Complete Care</td>
<td>AHCCCS</td>
<td>Adults and Children Medicaid Members</td>
<td>368K*</td>
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<tr>
<td>ALTCS</td>
<td>Arizona Long Term Care System</td>
<td>AHCCCS</td>
<td>Long Term Care Members</td>
<td>11K*</td>
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<tr>
<td>MCA</td>
<td>Mercy Care Advantage</td>
<td>CMS</td>
<td>Medicare Advantage Dual Special Needs Plan Members</td>
<td>16K*</td>
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<tr>
<td>DD</td>
<td>Developmentally Disabled</td>
<td>DDD</td>
<td>Developmentally Disabled Members</td>
<td>14K*</td>
</tr>
<tr>
<td>RBHA</td>
<td>Regional Behavioral Health Authority</td>
<td>AHCCCS</td>
<td>Persons with Serious Mental Illness, BH for Foster Care Kids and Crisis Members</td>
<td>34K*</td>
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<tr>
<td>DCS CHP</td>
<td>Comprehensive Health Program</td>
<td>DCS</td>
<td>Children in foster care</td>
<td>13,500</td>
</tr>
</tbody>
</table>

*As of January 2021
Mercy Care lines of business

Mercy Care has several Lines of Business:

- Mercy Care Complete Care (referred to as ACC)
- Mercy Care Long Term Care (ALTCS)
- Developmental Disabilities (DDD)
- Mercy Care Advantage (MCA)
- Mercy Care RBHA
- Mercy Care DCS CHP (formerly known as CMDP)

ACC, ALTCS, DDD, MCA, DCS CHP claims

- Bill to Mercy Care Payor ID 86052

RBHA claims

- Bill to Mercy Care Payor ID 33628

*Please note that the different Payor IDs are two different Mercy Care systems so claims will be denied if you bill the incorrect Line of Business. Timely filing rules will apply if you bill the incorrect Line of Business. The claim will need to be fully resubmitted to the correct payor ID in order to be reviewed for payment.
Provider Assignments

Each provider has an assigned Network Relations Representative to navigate through Mercy Care. The provider assignment list is on our website in any of the “For Providers” tabs.

MercyCareAz.org > Any For Provider tab in green > For Providers, scroll all the way to bottom Network Management Department > Provider assignments by county
Provider Manual

Mercy Care has a Provider Manual for general information, one for each line of business, and a Claims Processing Manual.

• All Manuals with Mercy Care are an extension of your contract and need to be referenced and followed.

• Manuals are updated throughout the year and we recommend that you save the Mercy Care website link to find the manuals rather than saving the document.

• On our website you can go into any “For Provider” tab and select the “Provider Manual” tab on the left side as well as the Claims tab.

MercyCareAZ.org > any For Provider tab in green > Provider Manuals
Secure web portals

Mercy Care has two Secure Web Portals in which providers can enroll. Once enrolled in the portals you are able to see

- Fee schedules, claim remits, prior authorizations assigned to your group, member search, panel roster, add/remove portal users, some deliverables, and more.

ACC/DDD/ALTCS/MCA/DCS CHP Secure Web Portal Form:

- www.MercyCareAZ.org > Mercy Care Complete Care For Providers Tab > Provider Forms > Mercy Care Web Portal Registration Form

RBHA Secure Web Portal Form:

- www.MercyCareAZ.org > Mercy Care RBHA For Providers Tab > Provider Forms > Secure Web Portal Registration Form
Mercy Care has Provider Deliverables that are due monthly, annually, or as requested. Mercy Care prefers to receive most of our deliverables via SFTP.

- SFTP is a secure connectivity to transfer files to Mercy Care.
- You will need to sign up for SFTP using the Enrollment form which can be found: [www.MercyCareAZ.org > RBHA for Providers tab > Provider Forms > SFTP Connectivity Enrollment]

For a complete list of Mercy Care Deliverables please use this website:

- [Provider Deliverable Matrix Updated Version]
Provider rosters: adds, terms, changes

• Mercy Care has a comprehensive Provider Directory which is reviewed regularly to ensure accuracy.

• Routine audits are conducted by Mercy Care regulators; as such, it is the provider’s responsibility to notify Mercy Care of any Provider/Facility terminations within the group.

• Contractually, providers should give a 90-day notice to allow Mercy Care enough time to update the administrative tasks associated with terms/additions, as well as ensure member continuity of care.

• Additionally, providers are required to issue a 90-day notice when adding/changing a provider/location.

• The Provider Directory can be accessed using the “Find a provider/Pharmacy link at the very top of the Mercy Care website.

www.MercyCareAZ.org
Services for members

Mercy Care members are entitled to many different services in which it is the providers responsibility to coordinate. Transportation is also included as a benefit.

Transportation Services

• Medically necessary non-emergent transportation services are covered for AHCCCS members.

• Members able to set up their own transportation can do so by calling Member Services at least 3 day prior to the appointment:
  o 1-800-624-3879

• Some members are not able to make these arrangements on their own due to cognitive/physical ability, providers should help members with the phone call in these situations.

Please see website for full list of member services:

https://www.mercycareaz.org/members/completecare-formembers/resources
Services for members

Interpretation Services Available:

- Qualified Bilingual Staff
  - Utilizing the T1013 Code
- Language Line
- Vendors

How to connect to the Language Line and Vendors listed above:

- Instructions provided on Mercy Care Website under Language and Translation Tab or at the following link: https://www.mercycareaz.org/providers/completecare-forproviders/language

For Support contact Cultural Competency

- CulturalCompetency@MercyCareAZ.org
Provider trainings: Fraud, Waste, and Abuse (FWA)

• Providers/staff delivering services to Mercy Care Advantage enrollees are required by CMS to take the Medicare Parts C & D Fraud, Waste, Abuse Training, and General Compliance Training.

• This training needs to be completed within 90 days of hire and annually thereafter.

• This training is available on CMS Medicare Learning Network.

• Employees need to register and take a brief training, once completed they will receive a certificate of completion.

• This training module is also available for download to add to your existing training methods.

• Please keep completion certificates or other proofs of training for at least 10 years.
Provider trainings: Model of Care (MOC)

• Providers are required to review a power point presentation available on our website for the current year’s Model of Care Provider Training available on our Provider Information web page.

• An attestation is built into this power point that enables you to e-mail directly to our Network Management department.
  - It is very important to follow all instructions.

• Model of Care Training
Relias: Behavioral Health provider trainings

All contracted Mercy Care BH Providers must be set up in the Relias Learning system which tracks and reports all training activities for their staff. Trainings include, but are not limited to:

- Technology based/Online Courses
- Webinars/Web Conferences
- Live Training, Seminars, Conferences and/or Events

Access to the system provides:

- Over 800 courses in varying content areas from basic computing skills, to specific clinical functions
- Courses to meet your contractual and licensing requirements
- 160+ courses that can be used for Continuing Education (CEUs) for individuals who hold a clinical license
- 100 courses that are accredited for Continuing Medical Education (CMEs)

https://www.mercycareaz.org/providers/completecare-forproviders/training

Sarah Hauck  Workforce Development Administrator (RBHA, ACC, ALTCS)
602-316-3382  |  HauckS@MercyCareAZ.org

*Providers will be contacted by a Workforce Development Team Member to set up a meeting to go over required trainings and help with enrolling in Relias.*
Prior authorization (PA)

• Mercy Care requires prior authorization for select acute outpatient services, ABA services, and planned hospital admissions.

• Prior authorization is not required for emergency services.

• For full details about PA and how to obtain a PA, please visit our website:
  o https://www.mercycareaz.org/providers/completecare-forproviders/priorauth

• To check on the status of an authorization, please visit our provider secure web portal.

• For more information about prior authorization, please review Mercy Care's Provider Manuals on the Mercy Care website. Click “For Providers” under any line of business, then select “Prior Authorizations” from the left side menu.

• You can fax your authorization request to 1-800-217-9345.
No billing members

• Members may **NOT** be billed for covered services or for services not reimbursed due to the failure of the provider to comply with prior authorization or billing requirements.

  
  • In particular, Arizona Administrative Code **R9-22-702** states in part, “An AHCCCS registered provider shall not do either of the following, unless services are not covered or without first receiving verification from the Administration [AHCCCS] that the member was not an eligible member on the date of service: Charge, submit a claim to, or demand or collect payment from a member claiming to be AHCCCS eligible; or Refer or report a member claiming to be an eligible member to a collection agency or credit reporting agency.”

• Members should not be billed or reported to a collection agency for any covered services your office provides.

• For additional information please see **Mercy Care Provider Manual Chapter 14 – Billing Encounters and Claims.**
## Mercy Care Claims

<table>
<thead>
<tr>
<th>Claims</th>
<th>Mail To</th>
<th>EDI Vendors</th>
</tr>
</thead>
</table>
| **Medical and Behavioral Health** | Mercy Care or Mercy Care Advantage Claims Department  
P.O. Box 52089  
Phoenix, AZ 85072-2089 | □ Change Healthcare  
www.changehealthcare.com/  
1-877-363-3666, Option 1 for Sales  
CMS 1500 and UB-04 Payer ID: 86052 |
| **Dental** | DentaQuest of Arizona, LLC  
Attention: Claims  
P.O. Box 2906  
Milwaukee, WI 53201-2906 | □ Southwestern Provider Services (SPSI)  
www.spsi-edi.com  
1-817-684-8500  
CMS 1500 Payer ID: MCP01  
UB-04 Payer ID: MCPU |
| **Refunds** | Mercy Care  
Attention: Finance Department  
P.O. Box 90640  
Phoenix, AZ 85066 | □ Relay Health  
www.relayhealth.com/  
1-866-RELAY-ME (1-866-735-2963; ext. 2)  
CMS 1500 and UB-04 Payer ID: 86052 |
# Mercy Care RBHA Claims

## Mercy Care RBHA

<table>
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<th>Claims</th>
<th>Mail To</th>
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<tbody>
<tr>
<td><strong>Medical and Behavioral Health</strong></td>
<td>Mercy Care RBHA&lt;br&gt;Claims Department&lt;br&gt;P.O. Box 64835&lt;br&gt;Phoenix, AZ 85082-4835</td>
<td>❑ Change Healthcare&lt;br&gt;www.changehealthcare.com/&lt;br&gt;1-877-363-3666, Option 1 for Sales&lt;br&gt;CMS 1500 and UB-04 Payer ID: 33628</td>
</tr>
<tr>
<td><strong>Dental</strong></td>
<td>Mercy Care RBHA&lt;br&gt;Dental Claims Department&lt;br&gt;P.O. Box 62978&lt;br&gt;Phoenix, AZ 85082-2978</td>
<td>❑ Southwestern Provider Services (SPSI)&lt;br&gt;www.spsi-edi.com&lt;br&gt;1-817-684-8500&lt;br&gt;CMS 1500 and UB-04: 33628</td>
</tr>
<tr>
<td><strong>Refunds</strong></td>
<td>Mercy Care&lt;br&gt;Attention: Finance Department&lt;br&gt;P.O. Box 90640&lt;br&gt;Phoenix, AZ 85066</td>
<td>❑ Relay Health&lt;br&gt;www.relayhealth.com/&lt;br&gt;1-866-RELAY-ME (1-866-735-2963; ext. 2)&lt;br&gt;CMS 1500 and UB-04 Payer ID: 33628</td>
</tr>
</tbody>
</table>

*Dental Claims Department*<br>P.O. Box 62978<br>Phoenix, AZ 85082-2978
Timely filing

New claim submissions:

- Effective July 1, 2019 Claims must be filed on a valid claim form within **150 days (five months) from the date services** were performed or from the date of eligibility posting, whichever is later, unless there is a contractual exception.
  - For hospital inpatient claims, date of service means the date of discharge of the patient.

Claim resubmission:

- Claim resubmissions must be filed within **365 days (one year) from the date of provision of the covered service** or eligibility posting deadline, whichever is later.
  - The only exception is, if a claim is recouped, the provider is given an additional **60 days from the recoupment date** to resubmit a claim.
  - Please submit any additional documentation that may effectuate a different outcome or decision.

Failure to submit claims in a timely manner could result in your claim being denied for timely filing.
Assistance with claims status should be handled through the following resources:

• Check the secured web portal

• Call CICR for a claim inquiry
  o MCCC 800-624-3879
  o MCRBHA 800-564-5465

• Call Network Management – we should be your last source of contact for claims questions.

Claims Resubmission:

• If a claim was denied and the entire claim denied and it is within timely filing, the claims can be resubmitted as a new claim; it doesn’t need to be submitted as a corrected claim.

• If any part of the claim was paid (or if the entire claim denied but is now outside of timely filing for new claims) the resubmission need to be submitted as a corrected claim.
  o The claim should be submitted with a 7 in the submission form location and the Original Claim ID field needs to be filled out.
Electronic Remittance Advice (ERA)

Mercy Care offers Electronic Remittance Advice through our Secure Web Portals. This is a faster and simpler reconciliation of accounts receivable and can usually be seen in our portal the day after the Electronic Funds Transfer.

- The benefits of electronic remittance advice include:
  - Electronic file of processed claims from MC
  - Electronically post payments to your Practice Management system
  - Faster reconciliation of account receivables
  - Simplified reconciliation process
  - Received day after electronic funds transfer

www.MercyCareAZ.org > For Providers  Provider Forms > Electronic Remittance Advice (ERA) Enrollment/Change/Cancellation

*To enroll, providers need to fill out the ERA form. This form will need to be emailed or faxed 2 times if you have all lines of business.
Electronic Funds Transfer (EFT)

Mercy Care offers Electronic Funds Transfer which allow Providers to receive payments deposited directly to their bank account, allowing for a more expeditious payment process.

• MCCC check runs occur every Tuesday & EFT will generally appear in the provider’s bank account on Wednesday following the check run.

• If a holiday falls on Monday, the money will not appear in the provider’s account until Thursday.

www.MercyCareAZ.org > For Providers  Provider Forms > Electronic Fund Transfer (EFT) Form

*To enroll, providers need to fill out the EFT form. This form will need to be emailed or faxed 2 times if you have all lines of business.
Health Information Exchange (HIE)

https://healthcurrent.org/

- **Secure messaging between providers**
- **Transitions of Care** – HIE services allow the documentation from one care setting to be easily accessed from the next
- **Referrals** – Organizations have the ability to send referrals directly through the HIE, along with appropriate documentation

**Patient Intake** – Access to patient’s summary clinical records

**Patient Exam** – Clinician can access data (such as med lists, allergy info, or lab reports) from other sources

**Lab Results** – HIE services provide physicians with the ability to get results directly through the HIE
Appointment Availability Audit (AAA)

• All AHCCCS Health Plans are required to ensure Providers can see medical and behavioral health members in a timely manner.

• Each Quarter a member of the Mercy Care team will call your office to complete a quick questionnaire designed to assess your appointment availability for members.

• Any member of your scheduling team can answer this questionnaire.
  o Questionnaire takes about 3-5 minutes or less once you have completed a few and get to know the questions.

Please see AHCCCS website for complete AHCCCS Standards Appointment Availability for All AHCCCS Members:

• Standards Appointment Availability
Provider Service Profile (PSP)

• The PSP is a tool that assists Mercy Care with identifying specific services offered at each location in our provider network.

• This tool is gathered initially when you join the network, at least every 6 months, and anytime there is a significant change in services provided at a location.

• Your Onboarding Specialist will set up a meeting with you in the next week to go over this tool to ensure the most accurate record of your organizational services.
Tools and Resources

AHCCCS – ROPA information and FAQ
• Referring, Ordering, Prescribing, Attending (ROPA) Providers

AHCCCS – Electronic Visit Verification (EVV)
• Frequently Asked Questions (FAQ) Live-In/Onsite Caregiver/October 2020
• Letter to Providers- dated 8/25/2020

AHCCCS Contractor Operations Manual (ACOM)
• Chapter 400 – Operations
Welcome to Mercy Care

Your Network Relations Representative, the Secure Web Portals, Provider Manuals and Claims Inquiry Claims Research will help you navigate through Mercy Care.

We are here to help in any way!
Stay up-to-date!

For more information:

• Join our email list [here](#)

• Visit us online at [www.MercyCareAZ.org](http://www.MercyCareAZ.org)

• Follow us on social media @MercyCareAZ to stay informed
Thank you

mercy care
Questions?

Type your questions or comments in the chat feature