

Meridian – Supporting Positive Health Outcomes



Meridian
Health Plan



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Meridian Overview

Our Mission:

To continuously improve the quality of care in a low resource environment

We are:

- ***Physician owned and directed***
- Committed to quality, innovation and member and provider satisfaction

Our Vision:

- To be the #1 health organization based on quality, innovative technology and service to our members
- To be the premier service organization in health care

*Meridian has been recognized multiple times by NCQA as a
Top 20 Medicaid Health Plan*

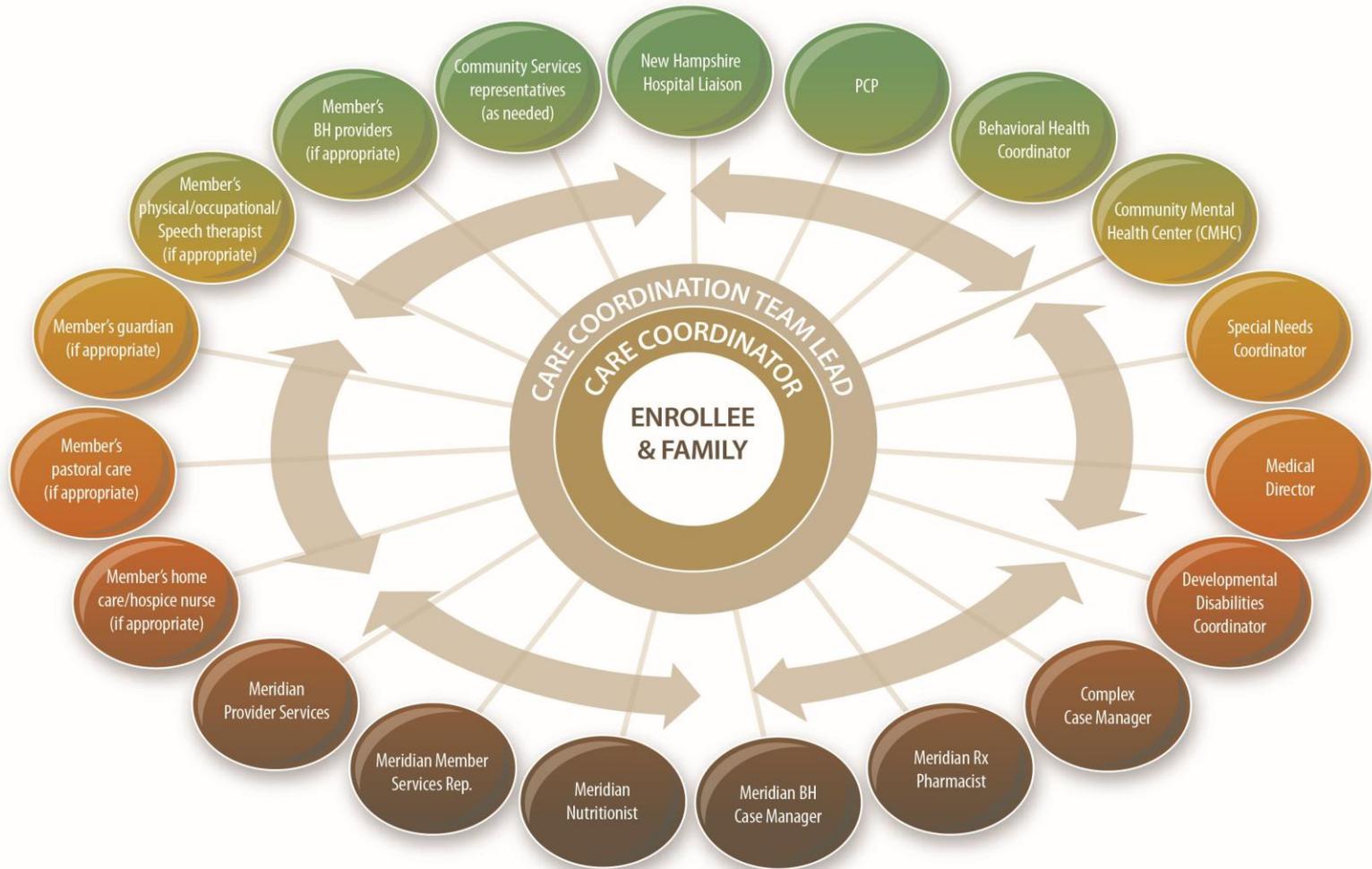
High-Quality Care Across the State



Care Coordination

A Member's Personal Meridian Support Team

INTEGRATED CARE PROGRAM



...all working to achieve health goals

Utilization Management Program

Utilization Management
Prior authorizations
Referral management
Clinical review
Inpatient review and concurrent review (medical/surgical and behavioral health)
Discharge planning
Continuity of care
Home care services
Coordination of medical & behavioral services
Post discharge follow-up program

Referral Management

Referral and authorization processing is the primary function of our utilization management specialists team

If the referral is submitted with complete and accurate information, a decision is made at the time of the initial review

Referrals can be faxed to Meridian at 603-263-3449 or a **provider** may call directly at 855-827-1766

All care must be coordinated by the member's primary care provider or specialist

Home Care Services

- Requires referral and prior authorization
- For weekend or holiday hospital discharges, providers may contact Meridian the next business day for approval
- Home care providers may submit referral requests with the physician's order



Home Care Services

- Required information:
 - Member name
 - Contract number
 - Date of birth
 - Diagnoses
 - Requested service and CPT codes
 - Beginning date of service
 - # of visits requested
 - Length of referral
- Completed referral form is preferred but, not required
- Prior authorization needed for:
 - DME > \$500
 - Home infusion



Pharmacy Management



Meridian Health Plan's pharmacy benefit manager

- Formulary includes New Hampshire's required Drug List (PDL)
- Certain pharmacy requires prior authorization
 - Specialty drugs, biologicals and IVIG
 - Visit www.mhplan.com for a list of drugs requiring prior authorization
 - Fax prior authorization requests to MeridianRx at 603-263-3455 or call at 855-291-5217

Member ID Card



Effective Date:
Member Name:
Member ID:
PCP:
PCP Address:

DOB:
PCP Phone:
Member Services: 855-291-5221
TTY Number: 800-735-2964

Prescriptions: 855-291-5217
Behavioral Health: 855-291-5218
(Available 24 hours a day, 7 days a week.)

Meridian^{Rx}
A United Liberty Company
RxBIN: 610241
RxPCN: MHPNHMCD

The back of the Meridian Health Plan ID card is blank.

Payment Protocols

Primary Care Providers

Fee for service, with quality bonus incentives in lieu of traditional full risk arrangements.

Specialist Providers

Meridian seeks to limit the amount of "red tape" whenever possible, especially with referrals and authorizations.

Hospital Providers

Partner with each contracted hospital in coordinating the care of its beneficiaries. Hospital providers can count on Meridian to help serve their communities with as little interference as possible.

Ancillary Providers

Meridian seeks to assist in the coordination of care through these relationships.

How to Submit Claims

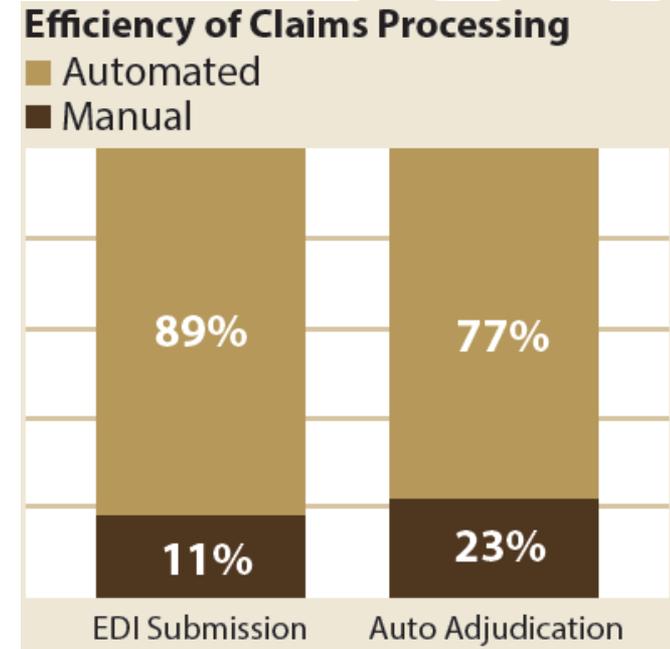
- Meridian Provider Portal
 - www.mhplan.com/nh/mcs

Professional Claim			
Member ID :	<input type="text"/>	<input type="text"/>	
Prior Auth# :	<input type="text"/>	<input type="text"/>	Patient Account# :
Billing NPI :	<input type="text"/>	Serv Prov NPI :	<input type="text"/>

- Using standard CMS 1500 form or UB-04 claim
 - Mail to Meridian Health Plan at:
1001 Woodward Avenue
Suite 540
Detroit, MI 48226
Attn: Claims Department
 - Submit electronically via clearinghouse

Claims Payments

- Timely claims processing
 - Meridian pays 100% of Medicaid Fee Schedule
 - Clean claims in 10 business days
 - Electronically billed claims are paid faster
 - Most claims processed in 2-5 days
- Hassle-free policies and procedures
 - Meridian reimburses PCPs for well and sick visits provided during the same visit



- Total Claims Processed in 2012 = **4,534,610**
- Average Monthly Claims Volume = **377,884**
- Average Claims Payment Time = **1.85 Days**
- Claims Payment Accuracy Level = **99.21%**
- % of Calls Answered within 30 Seconds = **99.9%**

High-Quality Network Development

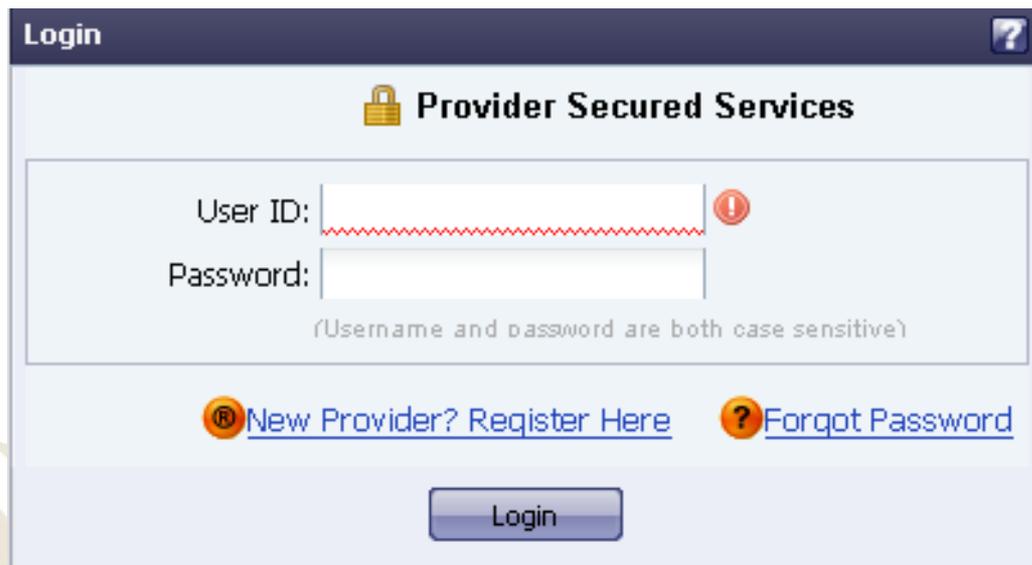


Network Development department:
877-480-8250

- Dedicated Provider Network Development Representative
- PCP monthly site visits
 - Personalized service
 - Distribute plan information/updates
 - Answer questions
 - Assist in developing plans to ensure members receive important services

Extra Provider Benefits

- Provider Portal
 - Secure, online access at: www.mhplan.com/nh/mcs



The screenshot shows a web browser window titled "Login". The main heading is "Provider Secured Services" with a padlock icon. Below this is a login form with two input fields: "User ID:" and "Password:". The "User ID:" field contains a red wavy line and a red exclamation mark icon, indicating an error. Below the fields is the text "(Username and password are both case sensitive)". At the bottom of the form are two links: "New Provider? Register Here" with a registered trademark symbol and "Forgot Password" with a question mark icon. A "Login" button is positioned at the bottom center of the form.



www.mhplan.com/nh/mcs

Extra Provider Benefits

- Provider Portal
 - View & verify eligibility
 - Review health history
 - Review previous utilization from other plans

Run As Of: 10/22/2013 02:04:21

Member Id:
Name:
Birthdate:
Gender:

County:
Case Number:
Worker Load:

Medicaid

Start Date	End Date	Coverage	Copay	Coins	Deduct	Status	Provider/HMO
10/01/2013	10/22/2013					Inactive	



www.mhplan.com/nh/mcs

Extra Provider Benefits

- Provider Portal
 - Enter authorizations
 - Print reports on assigned members
 - Status claims
 - Request assistance from Meridian departments



www.mhplan.com/nh/mcs

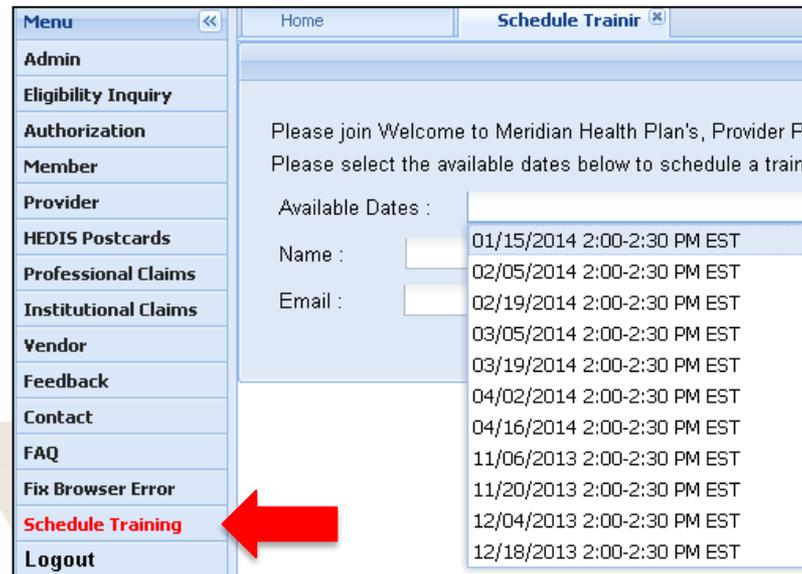
Print Member Report

Notify Health Plan

Authorization Request			
Member ID:	<input type="text"/>	Name:	<input type="text"/>
	<input type="text"/>	DOB:	<input type="text"/>
	<input type="text"/>	Gender:	<input type="text"/>
Location:	<input type="text"/>	Procedure:	<input type="text"/>
	<input type="text"/>	From:	<input type="text"/>
	<input type="text"/>	To:	<input type="text"/>
PCP:	<input type="text"/>	Phone:	<input type="text"/>
	<input type="text"/>	Fax:	<input type="text"/>
Practitioner:	<input type="text"/>	Name:	<input type="text"/>
	<input type="text"/>	Phone:	<input type="text"/>
Fax:	<input type="text"/>		
Facility:	<input type="text"/>	Name:	<input type="text"/>
	<input type="text"/>	Phone:	<input type="text"/>
Fax:	<input type="text"/>		

Extra Provider Benefits

- Provider Training
 - Log in to www.mhplan.com/nh/mcs to request Provider Portal Training
 - Training completed via WebEx
 - Contact your local Provider Network Development Representative to set up in-person training



Menu << Home Schedule Trainir x

Admin
Eligibility Inquiry
Authorization
Member
Provider
HEDIS Postcards
Professional Claims
Institutional Claims
Vendor
Feedback
Contact
FAQ
Fix Browser Error
Schedule Training
Logout

Please join Welcome to Meridian Health Plan's, Provider P
Please select the available dates below to schedule a train

Available Dates :

Name :

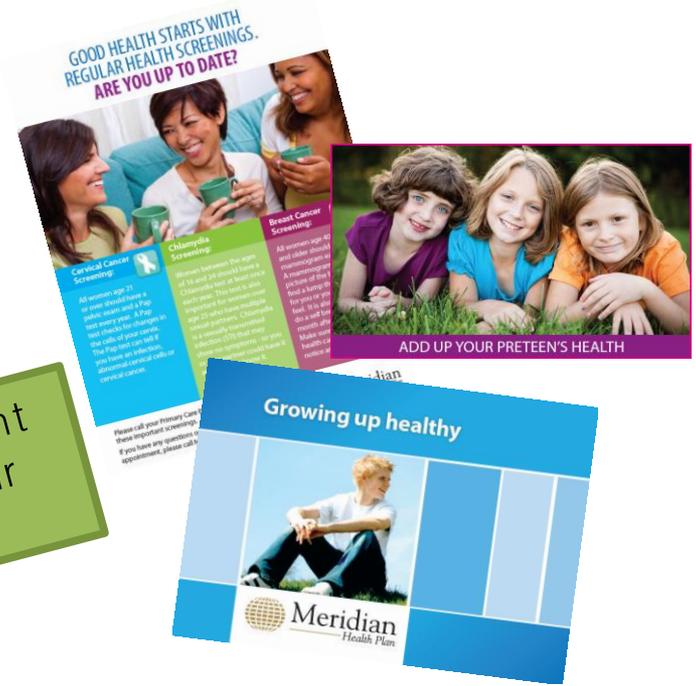
Email :

- 01/15/2014 2:00-2:30 PM EST
- 02/05/2014 2:00-2:30 PM EST
- 02/19/2014 2:00-2:30 PM EST
- 03/05/2014 2:00-2:30 PM EST
- 03/19/2014 2:00-2:30 PM EST
- 04/02/2014 2:00-2:30 PM EST
- 04/16/2014 2:00-2:30 PM EST
- 11/06/2013 2:00-2:30 PM EST
- 11/20/2013 2:00-2:30 PM EST
- 12/04/2013 2:00-2:30 PM EST
- 12/18/2013 2:00-2:30 PM EST

Extra Provider Benefits

- Tailored Outreach
 - Targeted outreach program specially designed for your patients
- Training
 - Fraud, Waste & Abuse (FWA)
 - HIPAA Privacy & Security
 - Provider Portal
 - Critical incident reporting
 - ...and more!

Please contact your local Provider Network Development Representative to schedule on-site training for your office. Call 877-480-8250 for more information.



Thank You

Network Development: 877-480-8250

Member Services: 855-291-5221

Utilization Management: 855-827-1766

MeridianRx: 855-291-5217

www.mhplan.com



@MeridianHP



facebook.com/meridianhealthplan