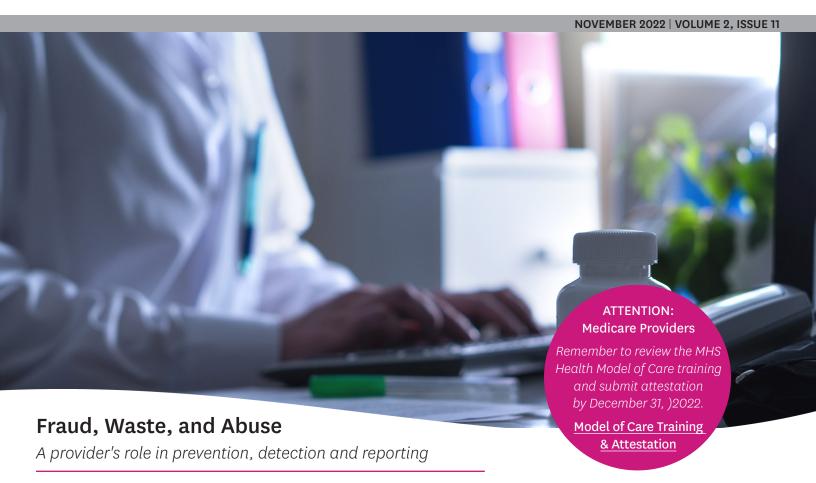
Provider NOTES





MHS Health follows the four parallel strategies of the Medicare and Medicaid programs to prevent, detect, report, and correct fraud, waste, or abuse (FWA).

- Preventing fraud through effective enrollment and education of all providers, suppliers, and beneficiaries.
- Detection through data analytics; medical records review.
- Reporting of identified or investigated violations to the appropriate partners, (i.e., contractors, the NBI-MEDIC and federal and state law enforcement agencies, such as the Office of Inspector General, Federal Bureau of Investigation, Department of Justice, and Medicaid Fraud Control Unit).
- Correcting FWA by applying fair and firm enforcement policies, such as pre-payment review, retrospective review, and corrective action plan.

MHS Health performs front- and back-end audits to ensure compliance with billing regulations. Common errors include:

- Use of incorrect billing code
- Not following the service authorization
- · Procedure code not being consistent with provided service
- Excessive use of units not authorized by the case manager
- Lending of insurance card

Benefits of stopping fraud, waste, and abuse:

- Improves patient care
- · Helps save dollars and identify recoupments
- Decreases wasteful medical expenses

MHS Health expects its provider partners to also safeguard against any potential fraud, waste, or abuse. Reporting of FWA may be reported to:

- » Hotline (anonymous and confidential): 1-866-685-8664
- » MHS Health Compliance Officer: 1-800-547-1647
- » Wisconsin Department of Health Services: 1-877-865-3432
- » Online: www.reportfraud.wisconsin.gov

To report suspected fraud, waste, or abuse in the Medicare program, please use one of the following avenues:

- » Office of Inspector General (HHS-OIG): 1-800-447-8477/ TTY: 1-800-377-4950; Fax: 1-800-223-8164
- » Online: www.OIG.HHS.gov/fraud
- » Email: HHSTips@oig.hhs.gov
- » NBI MEDIC: 1-877-7SafeRx (1-877-772-3379)

Providers are also encouraged to review FWA standards and requirements in the <u>Provider Manual</u>.

Meet the TEAM!

NAME: Tanya Stanly

TITLE: Manager, Strategic Provider Partnerships

TERRITORY: Milwaukee County

PROVIDERS: Large providers/health systems

BACKGROUND: More than 15 years of experience in the healthcare across claims, compliance, and provider relations.

PERSONAL INFO: I've been married to my husband, Jeremy, for more than 10 years. We have two children, Leighton (8) and Nolan (5), and recently brought an English Mastiff, Bruno, into our lives. I enjoy being outside and playing with the kids, golfing, boating, and singing.

EMAIL: Tanya.Stanly@mhswi.com

PHONE: (920) 413-2889

HOMETOWN: De Pere, Wisconsin

DATE STARTED AT MHS HEALTH: April 2022

PROVIDER RELATIONSHIP GOAL:

My goal is to build strong relationships with my providers in order to collaborate on projects and incentive opportunities. I strive to exceed expectations by building trust and maintaining integrity.

MHS Health recognizes that food costs have risen and wants to ensure its members have access to high quality, nutritious meals during the holiday season. Through partnerships with GA Foods and FarmboxRx, MHS Health is providing its Wellcare By Allwell Medicare members with home deliveries of nutritious, prepackaged meals and produce until the end of the year. Each member will receive seven weekly deliveries containing 14 nutritious frozen or shelf stable meals and six weekly deliveries of fresh vegetables and fruits. By year's end, nearly 310,000 food deliveries will be made to Wellcare By Allwell members to support their overall wellness and health.





Please make note of the updates for providers whose patients are members of Wellcare By Allwell.

2023 Medicare Provider Manual

The Wellcare by Allwell Provider Manual for 2023 is now available and posted on the MHS Health website.

► Review or download the manual

Medicare Part B Drug List

The updated Medicare Part B Drug List is now available for review. Changes take effect on January 1, 2023.

► Access the updated drug list (Appendix A)

2023 Updates to Prior Authorization List

Wellcare By Allwell requires prior authorization (PA) as a condition of payment for many services. Information regarding such PA requirements are applicable to all Medicare products offered by Wellcare By Allwell. Changes to the PA requirements take effect January 1, 2023.

- ► Access the Medicare Prior Authorization changes
- ► For a complete CPT/HCPCS code listing, please see Online Prior Authorization Tool.

Attestations for Special Supplemental Benefits for Chronically Ill Members (SSBCI)

Special Supplemental Benefits for Chronically Ill are offered to Wellcare by Allwell's highest-risk members who meet specific criteria for eligibility based on the Centers for Medicare and Medicaid Services (CMS) guidelines. Effective January 1, 2023, eligibility requirements can be checked and attestations submitted online at ssbci.rrd.com. Faxed attestations will no longer be accepted after that date.

Click here to learn more or submit an attestation

Provider Services: 1-800-222-9831

Behavioral Health Provider Services: 1-800-589-3186 Prior Authorization Requests Fax: 1-866-467-1316 Member Customer Service: 1-888-713-6180 24-hour Nurse Advice Line: 1-800-280-2348 Mailing Address:

MHS Health Wisconsin Attn: Provider Relations 801 S. 60th Street, Suite 200 West Allis, WI 53214 Medical Claims Address:

MHS Health Wisconsin Attn: Claims Dept PO Box 3001 Farmington, MO 63640 **BH Claims Address:**

MHS Health Wisconsin Attn: BH Claims Dept PO Box 6123 Farmington, MO 63640