



MEMBER SERVICES Beyond the Practitioner's Office

PCW Agencies
Wisconsin DHS requires Electronic Visit Verification (EVV) for Medicaid-covered personal care and supportive home care services.
Are you EVV ready?
Click to [learn more](#).

At MHS Health, we believe it is our purpose to take care of the whole person and that means going beyond healthcare needs. From dedicated case managers to assistance in obtaining safe and affordable housing, our Member Services Team helps fill countless needs for our members.

MHS Health offers many member services, such as:

Transitions of Care

Our services Identifying the value of staying closely connected to our members throughout their care has inspired us to build our Transition of Care (TOC) team. TOC works with members through a 30-day period after release from hospital admission to make sure they are following up with their discharge instructions with the goal of preventing readmission. Beyond the 30 days, members are referred to another of MHS Health's teams for longitudinal care management.

Start Smart for Your Baby®

The [Start Smart for Your Baby](#) team is dedicated to working with our pregnant and postpartum members to ensure the mom and baby are receiving the care and services they need.

Behavioral Health Clinical Liaison

Dedicated team member who serves as the single point of contact for timely, effective resolution of BH provider clinical questions or concerns.

Community Health Workers

MHS Health has dedicated Community Health Workers who help members find community resources to address their needs. They also assist members in connecting with providers and offer non-clinical coaching on certain health conditions.

My Health Pays® Rewards Program

A member financial incentive program. You may find the [My Health Pays](#) program to be a beneficial supplement in your conversations encouraging your patients to get vital preventative care.

These are just some of the member services we to achieve our vision of transforming the health of our community, one person at a time. We encourage you to review our complete list of [Member Services](#) and make referrals as appropriate.

PROVIDER MANUALS UPDATE: POST-PROCESSING CLAIMS AUDIT

MHS Health recently updated its Provider Manuals to include additional information related to Fraud, Waste and Abuse. The new Post-Processing Claims Audit information can be found under the Fraud, Waste and Abuse sections in both the [Medicaid](#) and [Medicare](#) Provider Manuals.

Providers are in the best position to identify potential member fraud as the most common incidence involves members sharing their ForwardHealth card with family members and friends. If you suspect this is happening, please call the MHS Health Compliance Officer at 1-800-222-9831.

INTEROPERABILITY AND PATIENT ACCESS RULE

As of July 1, 2021, the Interoperability and Patient Access rule (CMS-9115-F) is now in effect. This federal rule gives patients control and easy access to their health information. MHS Health has provided its members a list of apps that have attested to the CARIN Code of Conduct ensuring they meet the strictest privacy and security guidelines. If one of your patients/our members asks about recommended apps, please direct them to myhealthapplication.com for a list.

PRO TIP

Billing/Rendering/Attending Provider Denials

Billing, rendering, and attending provider denials are common and typically caused by information billed not matching certification information from the State of Wisconsin (ForwardHealth).

The good news is that these can be identified and corrected fairly easily. We created a few tips sheets based on provider type. Take a moment to click on the links below to learn what corrective action steps to take.

- ▶ [Attending Provider](#)
- ▶ [Billing Provider](#)
- ▶ [Rendering Provider](#)

Member Breathes Easier Due to Doctor's Dedication

In 2012, Martin (not his real name) was diagnosed with severe asthma due to allergies. Despite seeking care from multiple physicians, he was unable to be outside for more than a walk around the block. He had more than 12 visits to the emergency room and five inpatient stays in 2020 alone.

Martin reported that due to his chronic illness he felt "captive" in his home. He shared how much he missed gardening, taking his dog for long walks, and playing volleyball. While articulating this, he laughed in disbelief at mention of him doing these things again.

In November 2020, Martin's life changed when he, like so many others during the pandemic, had to apply for state-covered health insurance. Fortunately, for Martin, this led him to MHS Health and one particularly caring practitioner.

MHS Health referred Martin to Dr. Anne Lent, board certified physician of internal medicine, allergy and immunology, to help him get the care he needed for his allergies and asthma.

Dr. Lent worked intensely with Martin to not only manage his allergies but to also investigate and treat his asthma. She helped identify allergens and triggers, ordered breathing tests and imaging, trialed multiple medication combinations, and advocated for him to be approved for an injectable biologic.

For eight years, Martin suffered with unresolved chronic allergies and asthma. After only 8 months under the care of Dr. Lent, he is able to walk his dog 2-3 miles and has a garden he loves. He is also working to build his cardiopulmonary endurance in the hope of getting back to volleyball by the end of summer.

As a result of Dr. Lent's hard work, Martin is no longer imprisoned by his medical diagnoses, and he credits her with giving him back the life he had been missing for so long.



Dr. Anne Lent is with Madison Medical Associates. She earned her medical degree from the University of Minnesota Medical School in 2000. She completed an allergy and immunology fellowship at the National Jewish Medical and Research Center. Dr. Lent also received the 2018 Top Doctors Award from *Milwaukee Magazine*.



Want to stay updated on Clinical & Payment Policies, news, and announcements? Visit the Provider section on mhswi.com.
Need to check a member's eligibility, submit a prior auth or claim reconsideration request? Log in to the secure Provider Portal.

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
For more phone numbers and addresses: mhswi.com

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