

HAP Midwest Integration Update

HAP Empowered

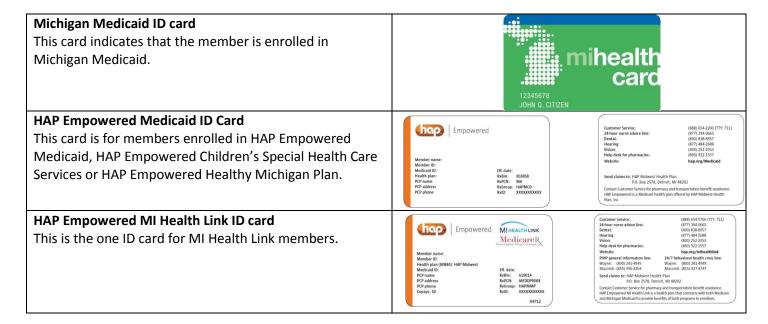
Earlier this year, the plans we offer through HAP Midwest Health Plan, Inc. became HAP Empowered plans. These plans include:

- HAP Empowered Medicaid
- HAP Empowered Healthy Michigan Plan
- HAP Empowered MI Child Program
- HAP Empowered Children's Special Health Care Services program
- HAP Empowered MI Health Link

Only our plan name changed. Members are still with HAP Midwest Health Plan, Inc. and their coverage didn't change. **Providers are contracted and paid through HAP Midwest Health Plan.**

ID cards

Members will receive new ID cards with HAP Member ID numbers. Below are examples of the ID cards.



Important contacts

For	Contact
Claims questions	(888) 654-2200 and follow the prompts
Adding providers to your officeOffice or remittance advice address changes	provider_contracting.org Or provider_development@hap.org
Provider contracting	Phone: (866) 766-4708 Email: provider_development@hap.org
Provider services	Phone: (866) 766-4708 Email: prelweb1@hap.org
Fee schedules: Providers are reimbursed at the Medicaid fee schedule.	Michigan.gov/mdhhs Details about Medicaid, assistance programs, billing and reimbursement and other provider-specific information

HAP Midwest integration with hap.org

Last month, we announced exciting online changes coming to HAP Midwest. Effective July 1, 2019, we're integrating the HAP Midwest website with **hap.org**. The good news for you – one system for claims, remittance advices, authorizations, member eligibility and more through a secure provider portal.

Below are instructions for accessing the portal for member eligibility, benefits, authorizations, claims, remittance advices and more.

If	Then
You already have a login and	1. Visit hap.org.
password for provider portal	2. Log in with your username and password.
You don't have a login and	You can:
password for provider portal	Self-register by visiting hap.org and selecting Register Now.
	or
	• Call (866) 766-4708
Note: Vendor ID and password are required to access remittance advice.	

Eligibility and benefits verification

For	Process
Verification	You can verify eligibility by any of these methods:
	• Log in at hap.org and select Member Eligibility (for dates of service July 1, 2019 forward).
	For HAP Empowered Medicaid members, call (888) 654-2200.
	• For HAP Empowered MI Health Link members, call (888) 654-0706.
	CHAMPS web portal: milogintp.michigan.gov
	• CHAMPS provider support: (800) 292-2550; Choose option 5, then 2
Eligibility list	Available for primary care physicians.
	• Log in at hap.org and select Member Eligibility, then Click here to view Member Roster (under
	Date of Service field).
Member benefit	Benefit documents can be found online by logging in at hap.org. Then click on:
documents	1. Member Eligibility
	2. Related Documents
	3. Medicaid and MI Health Link Member Benefits
	Under Medicaid, you'll find:
	Certificate of Coverage
	Medicaid Handbook
	Under MI Health Link, you'll find:
	Annual Notice of Change
	Member Handbook
	Summary of Benefits

Important: Member deductible and out-of-pocket balance information is not applicable for Medicaid and MI Health Link members.

Prior authorizations

Since September 13, 2018, you've been submitting authorization requests for your HAP Empowered patients online. Below is a reminder of the process.

For	Guidelines
Accessing the application	Log in at hap.org. Select Authorizations.
Authorization grid for HAP	No longer used.
Empowered Medicaid and	
HAP Empowered MI Health	Please refer to the Procedure Reference List. Log in at hap.org and select:
link members	1. Quick Links
	2. Procedure Reference list
	3. Services Requiring Prior Authorization
Elective inpatient admissions	Notify HAP within 24 hours or the next business day of the admission by Submitting
that don't require	a request online. Log in at hap.org and select Authorizations. Include appropriate
precertification	clinical information.
Emergent innetions	Providers are not required to call HAP prior to – or at the time of – an emergent
Emergent inpatient admissions	inpatient admission.
aumissions	Authorization requests should be submitted through CareAffiliate after admission
	to allow collection of the appropriate clinical data.
	Requests will not be denied for late notification if they are received within 24
	hours or the next business day of the admission.
Observations	Authorizations not required for observational stays.
Obstetric deliveries	Authorization not required for normal vaginal or C-section delivery.
Outpatient authorizations	First, verify an authorization is required. Log in at hap.org. Select:
	1. Quick Link
	2. Procedure Reference list
	3. Services Requiring Prior Authorization.
	If authorization required, submit online. Log in at hap.org and select
	Authorizations or via eviCore as directed.
Inpatient rehabilitation	Do not use CareAffiliate. Instead, call (313) 664-8800.
at hospitals	
Long-term care at hospitals	You can inquire about a request currently being processed for placement or ask
Skilled nursing facilities	questions about the precertification process.
Subacute rehabilitation	
Pharmacy authorizations	Medical drug requests follow the outpatient authorization process above.
Behavioral health	HAP Empowered members can obtain mental health services by:
authorization requests	 Obtaining a referral from their PCP to a plan approved psychiatrist or
	contracted behavioral health provider.
	 Self-referring to a contracted psychiatrist or contracted behavioral health care
	provider.
	For emergencies, members can go to the closest hospital that provides
	psychiatric services.
	Note: HAP Empowered Medicaid doesn't cover substance abuse services. Members
	should be referred to the Community Mental Health board in the county where they
Historical and the state of	live.
Historical authorizations prior	Call Provider Inquiry at (866) 766-4661.
to dates of service Sept. 13,	
Uistorical authorizations with	Log in at han avg and coloct Authorizations
Historical authorizations with	Log in at hap.org and select Authorizations.
dates of service Sept. 13, 2018, and forward	
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Claims

For	Guidelines
Submitting claims with dates of	Use Change Healthcare clearinghouse
service July 1, 2019, forward	• HAP Payer ID: 38224
	Submit via paper to:
	HAP Empowered Claims
	P.O. Box 2578
	Detroit, MI 48202
	Note: You can no longer enter 5010 professional claims online.
Submitting claims with dates of	Submit via one of the following clearing houses: Availity, Change HealthCare or
service prior to July 1, 2019	Zirmed.
	Use payer ID MHP77.
Historical claims	• Log in at hap.org with your provider username and password. Select Claims.
	Log in with your vendor login and password. Select Remittance Advice.
	There will be a link to view HAP Midwest claims (for your HAP Empowered
	patients) for dates of service prior to July 1, 2019.
Code editing explanation	Log in at hap.org and select More, then Code Editing Explanation.
Electronic funds transfer	If you are currently are set up for EFT with HAP, there is nothing you need to do.
	• If you aren't set up for EFT, please complete an EFT form. Log in at hap.org;
	select Resources, Working with HAP; Billing Information; then Sign Up for
	Electronic Billing.
EDI information	
EDI 5010	Not available on hap.org.
EDI 837 claims errors	Not available on hap.org.
Pick up 999	Available only via FTP connection.
Pick Up 277CA	Available only via FTP connection.
EDI 835	Available only via FTP connection.
Companion guides	Log in at hap.org. Select Claims, then Related Links and Companion Guides.
Coinsurance and deductible	Providers may not balance bill HAP Empowered Medicaid members or dual-
claims processing for HAP	eligible members with HAP Empowered MI Health Link for unauthorized services
Empowered MI Health Link	if the enrollee had no prior knowledge of liability for the service.
members	Cost-sharing does not apply to dual eligible members in HAP Empowered MI
	Health Link or HAP Empowered Medicaid dual eligible. For more information,
	visit cms.gov.
	1. Select Outreach & Education
	2. Under Find your provider type, select <i>Health & drug plans</i>
	3. Click on Medical Learning Network® provider compliance
	We follow the coordination of benefit rules for Medicaid fee-for-service, which
	allow for reimbursement up to the Medicaid fee schedule –
	unless your HAP Midwest contract dictates otherwise.
Claims appeals	Refer to the HAP Midwest Provider Manual. Visit hap.org/providers.

Remittance advice

For	Process
Obtaining a remittance advice	Log in at hap.org with your vendor ID and password and select Remittance
for dates of service July 1, 2019, and forward	Advice.
	Important!
	Your vendor ID number is a HAP assigned number associated with a tax ID
	number.
	Vendor ID numbers can be found:
	On a check stub
	 Vendor site label in the body of your EFT deposit email
Obtaining a remittance advice	1. Log in at hap.org with your vendor ID and password.
for dates of service prior to July	2. Select Remittance Advice.
1, 2019	3. Select the link To view HAP Midwest Remittance Advices.
835 file	If you don't get an 835 from HAP today, contact HAP's EDI Business Coordinator at
	eCommerce@hap.org to inquire about electronic claims submission.
MI Health Link	There will be one line item displaying a combined payment for the Medicare and
Remittance Advice	Medicaid components of the MI Health Link plan.

Pay for Performance Program for primary care physicians

For	Process
Pay for Performance Program	Log in at hap.org.
documents	Select Quick Links.
	Select P4P for PCPs - Medicaid and MI Health Link.
	Choose Medicaid Pay for Performance Program or MI Health Link Pay for Performance
	Program.
Note: The report with earnings will be available later this year.	

You can find the information below when you visit hap.org/providers. You don't need to log in.

- HAP Midwest Administrative Provider Manual
- HAP Midwest newsletters and announcements
- Credentialing information
- Practice guidelines
- HAP Midwest Quality Program

For information on other applications and resources in the provider portal, please see the attached help guide, *Provider Portal-Online Applications and Helpful Information*.

For future updates on the integration, please watch the Provider Newsroom.