Provider Orientation 2019
Presenters

- Erin Kelly - Director of Sales
- Kristin Pelot – Lead Health Management Programs
- Michael O’Leary – Manager Clinical Services Utilization / Case Management
- Kristina Meridith - Project Manager
- Diana Schneider – Senior Provider Relations Representative
Agenda

• Introduction
• What is Together with CCHP?
• Service area
• Plans
• Prescription Drug Benefits
• Member Wellness
• CCHP on Call
• Post Re-Enrollment / Enrollment
• Grace Period
• Case and Disease Management Programs
• Prior Authorizations and Inpatient Notifications
• In-network labs
• Provider Portal
• Meet the Provider Relations Team
• Provider Updates
• Claims and Billing Questions
• Appeals
• Contact Information
What is Together with CCHP?

- A local health plan for individuals and families
- Plans for Everyone – not just kids
- Coverage sold On Exchange and Off Exchange
- Offers access to high-quality health care in southeast Wisconsin
- Together with CCHP was launched in 2017
- We enrolled 3,730 members for the 2017 plan year
- Grew to over 27,000 members for the 2018 plan year
- An Exclusive Provider Organization (EPO)
Service Area & Provider Network

Network hospitals in our service area include:

WASHINGTON COUNTY
1. St. Joseph's Hospital, West Bend

OZAUKEE COUNTY
2. Ascension - Columbia St. Mary’s Hospital - Ozaukee

WAUKESHA COUNTY
3. Ascension - Wheaton Franciscan - Elmbrook Memorial
4. Community Memorial Hospital
5. Rogers Memorial Hospital

MILWAUKEE COUNTY
6. Ascension - Columbia St Mary’s
7. Ascension - Wheaton Franciscan Healthcare - Franklin
8. Ascension - Wheaton Franciscan Healthcare - St. Francis
10. Children’s Hospital of Wisconsin
11. Froedtert Hospital and the Medical College of Wisconsin
12. Midwest Orthopedic Specialty Hospital - Franklin
13. Orthopaedic Hospital of Wisconsin - Glendale
14. Rogers Memorial Hospital - Brown Deer
15. Rogers Memorial Hospital - West Allis

RACINE COUNTY
16. Ascension - Wheaton Franciscan Healthcare - All Saints (Spring Street Campus)
17. Ascension - Wheaton Franciscan Healthcare - All Saints (Wisconsin Avenue Campus)

KENOSHA COUNTY
18. Froedtert South - Kenosha Medical Center
19. Froedtert South - St. Catherine’s Medical Center
20. Rogers Memorial Hospital
# 2019 On/Off-Exchange Plans

<table>
<thead>
<tr>
<th></th>
<th>Catastrophic</th>
<th>Bronze</th>
<th>Bronze HDHP</th>
<th>Silver</th>
<th>Silver Select</th>
<th>Standard Silver</th>
<th>Gold</th>
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<td>Individual medical and prescription deductible</td>
<td>$7,900</td>
<td>$7,000</td>
<td>$6,750</td>
<td>$4,700</td>
<td>$3,250</td>
<td>$4,000</td>
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<td>Individual medical and prescription maximum out-of-pocket*</td>
<td>$7,900</td>
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<td>Family medical and prescription maximum deductible</td>
<td>$15,800</td>
<td>$14,000</td>
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<td>$9,400</td>
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<td>Family medical and prescription out-of-pocket maximum*</td>
<td>$15,800</td>
<td>$15,800</td>
<td>$13,500</td>
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<th>Gold</th>
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<td>Primary care office visit</td>
<td>3 free visits, then 0% after deductible</td>
<td>$60 copay</td>
<td>0% after deductible</td>
<td>$50 copay</td>
<td>$35 copay</td>
<td>$30 copay</td>
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<tr>
<td>Speciality/specialist office visit</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>$100 copay</td>
<td>$80 copay</td>
<td>$65 copay</td>
<td>$60 copay</td>
</tr>
<tr>
<td>Inpatient and outpatient services</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>40% after deductible</td>
<td>40% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Urgent care</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>$100 copay then deductible/cost share</td>
<td>$80 copay then deductible/cost share</td>
<td>$65 copay then deductible/cost share</td>
<td>$60 copay then deductible/cost share</td>
</tr>
<tr>
<td>Emergency room</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>40% after deductible</td>
<td>40% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
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### Prescription Drugs²

<table>
<thead>
<tr>
<th>Tier</th>
<th>Catastrophic</th>
<th>Bronze</th>
<th>Bronze HDHP</th>
<th>Silver</th>
<th>Silver Select</th>
<th>Standard Silver</th>
<th>Gold</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1: Generic</td>
<td>0% after deductible</td>
<td>$20 copay</td>
<td>0% after deductible</td>
<td>$10 copay</td>
<td>$15 copay</td>
<td>$15 copay</td>
<td>$10 copay</td>
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<tr>
<td>Tier 2: Preferred brand</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>40% after deductible</td>
<td>40% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Tier 3: Non-preferred brand</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>40% after deductible</td>
<td>40% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Tier 4: Specialty prescriptions²</td>
<td>0% after deductible</td>
<td>50% after deductible</td>
<td>0% after deductible</td>
<td>40% after deductible</td>
<td>40% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Tier 5: ACA preventive prescriptions</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Tier 6: Select generics</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
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### 2019 Off-Exchange Plan

<table>
<thead>
<tr>
<th></th>
<th>SILVER CHOICE</th>
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<tbody>
<tr>
<td>Individual medical and prescription deductible</td>
<td>$4,600</td>
</tr>
<tr>
<td>Individual medical and prescription maximum out-of-pocket¹</td>
<td>$7,900</td>
</tr>
<tr>
<td>Family medical and prescription maximum deductible¹</td>
<td>$9,200</td>
</tr>
<tr>
<td>Family medical and prescription out-of-pocket maximum¹</td>
<td>$15,800</td>
</tr>
<tr>
<td>Primary care office visit</td>
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<td>40% after deductible</td>
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<td>Urgent care</td>
<td>$100 copay then deductible/coinsurance</td>
</tr>
<tr>
<td>Emergency room</td>
<td>40% after deductible</td>
</tr>
</tbody>
</table>

**Prescription drugs¹**

<table>
<thead>
<tr>
<th>Tier</th>
<th>Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1: Generic</td>
<td>$10 copay</td>
</tr>
<tr>
<td>Tier 2: Preferred brand</td>
<td>40% after deductible</td>
</tr>
<tr>
<td>Tier 3: Non-preferred brand</td>
<td>40% after deductible</td>
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<tr>
<td>Tier 4: Specialty prescriptions²</td>
<td>40% after deductible</td>
</tr>
<tr>
<td>Tier 5: ACA preventive prescriptions</td>
<td>$0</td>
</tr>
<tr>
<td>Tier 6: Select generics</td>
<td>$0</td>
</tr>
</tbody>
</table>

- **Award-winning customer service**: ✔
- **CCHP on Call nurseline**: ✔
Prescription Drug Benefits

- Express Scripts
- Thousands of pharmacies to choose from including **CVS and Walgreens**
- Prescription drug formulary
  - Make sure to review changes from 2018-2019
    - 72 drugs moving from formulary to non formulary
- Mandatory generic drug substitution
- Convenient Mail order available
- $0 preventive prescriptions
Member Wellness Incentive

2019 Wellness Incentive:

- Registering for the Member Portal
  • One-time $20 gift card for Primary Insured
  • Not eligible if they registered for the 2017 or 2018 plan years

- Wellness Physical
  • One-time $20 gift card for Primary Insured and Spouse

- Completing the HRA
  • One-time $20 gift card for Primary Insured and Spouse
  • Complete electronically
CCHP On Call

• What is CCHP On Call?
  – **No-cost, unlimited** nurse triage line that is available 24/7
  – Registered nurses can provide symptom assessments and direct members to the appropriate level of care
  – MD Consultations
    • Diagnose your condition
    • Provide at-home treatment advice
    • Send in a prescription to your local pharmacy

• Member Success Story:
  "I had a medical question on a Sunday morning. I used the nurse hotline and she had a doctor contact me and I was able to get help right over the phone. It was a nice alternative to the Emergency Room."
Post Re-Enrollment/Enrollment

- **What will members receive:**
  - Welcome Kit
  - Welcome Letter
  - Healthy Mom/Healthy Baby Letter
  - Preventive Service Guide for 2019
    - 3D Mammograms are covered
  - Plan Guide/EOC
  - ID Cards

- **When will members receive:**
  - Members will receive ID Cards starting the third week of December once they effectuate coverage
  - Welcome Kits will go out the first week of January after they effectuate
Grace Period

• Eligibility status can be verified for members by calling Provider Services 844-202-0117

• On-Exchange Members
  – 90 day Grace period
  – Claims and RX paid in first 30 days, days 60-90 no RX coverage and medical claims will be recouped if premium not paid

• Off-Exchange Members
  – 30 day Grace period
Since joining our team in February, Kristin has assisted members with their health management in her role as a Disease Case Manager.

“I am excited to work collaboratively with members and help make a positive impact that leads to a better quality of life.”
Health Management Programs

Condition specific health management programs:
Programs include:
• Asthma: 5 - 17 years old
• Depression: 18 - 64 years old
• Diabetes: 18 - 64 years old
• Healthy Mom Healthy Baby
• Substance Use Disorder: 18 - 64 years old
• General Case Management: 18 - 64 years old

Complex Case Management (CCM)
• 15 or more prescribed medications
• Other complex care situations

Programs are staffed by:
• Social workers/Licensed professional counselor
• Nurses
• Navigators
• Case management outreach coordinators
If members would like help managing any concerns related to their health, please call 414-266-3173 to reach the Health Management team.

- Please complete a referral form on our website.
- This form can be faxed to 414-266-1715.
Prior Authorization

- Prior Authorization list available in the provider section under Authorizations at www.Togethercchp.org
- Submit a prior authorization request online through CareWeb QI
- Together with CCHP contracted providers are responsible for obtaining prior authorization before they provide services to covered members.
- Make sure the authorization is submitted prior to date of service
- Clinical documentation should be submitted through CareWeb QI Auto Authorization Tool
- Prior authorization does not guarantee either payment of benefits or the amount of benefits.

For questions or assistance with your authorization request, call Together with CCHP Clinical Services Department at 844-450-1926
Inpatient Notifications

- Inpatient admissions require notification within 24 hours of admission
- Submit an inpatient notification online through CareWeb QI
- Clinical documentation should be submitted through CareWeb QI Auto Authorization Tool
- Inpatient notification does not guarantee either payment of benefits or the amount of benefits.
- No retro authorizations
In-Network Labs

• Together with CCHP Members can have lab services done at any in-network hospital outpatient lab that is participating in the Together with CCHP Provider Network.
• Physicians may also send labs to the following free-standing reference labs.
  • Quest Diagnostics
  • Wisconsin Diagnostic Labs

Network hospitals in our service area include:

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OZAUKEE COUNTY
2. Ascension - Columbia St. Mary’s Hospital - Ozaukee

WAUKESHA COUNTY
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KENOSHA COUNTY
18. Froedtert South – Kenosha Medical Center
19. Froedtert South – St. Catherine’s Medical Center
20. Rogers Memorial Hospital
Provider Portal

Children's Community Health Plan Provider Portal

If you are registered, sign in to access the private portal by clicking Provider Portal button below.

Provider Portal

You need to register before you can access the provider portal. Need to register?
Provider Portal Login Page
Provider Portal

- CareWeb QI Auto Authorization Tool (BadgerCare Plus and Together with CCHP)
- BadgerCare Plus Claims Look-up Tool
- BadgerCare Plus Submission Tool
- BadgerCare Plus Confirmation Tool
- Together with CCHP Plan Tool Login
- Provider Updates /Newsletter

If you have questions please call 414-266-5747
Provider Updates

- For Provider demographic changes complete the Provider Update / Change Form available on our web site.
- Examples:
  - TIN change
  - Address change
  - Billing address change
Claims Submission

- Payments made within 30 days on clean claims
- Hand written claims are not accepted
- Electronic Claims Preferred
- Please submit claims electronically to Together with CCHP
- EDI Payer ID #251CC
- Electronic Remittance Advice (ERA) and Electronic Fund Transfers (EFT) are available – forms available on web site
- Paper Claims Mailing Address:
  Together with CCHP
  P.O. Box 106013
  Pittsburgh, PA 15230-6013
- Refund Address:
  Together with CCHP
  P.O. Box 106014
  Pittsburgh, PA 15230-6013
Where to call with claims questions?

For questions regarding claims and Explanation of Payment (EOP), providers can chat online through the Together portal or contact:

Together with CCHP Provider Services at 844-202-0117
Provider Appeals

• Please call Provider Services prior to submitting a written appeal.

• To file a written appeal:
  – Complete the Together with CCHP Provider Appeal Form, which is available on the Provider Forms page at togetherCCHP.org
  – Submit the form, along with copies of any supporting documentation to:

    Together with CCHP
    ATTN: Appeals Department
    P.O. Box 1997, MS 6280
    Milwaukee, WI 53201-1997
Together with CCHP
Reference Guide

<table>
<thead>
<tr>
<th>Together with CCHP Provider Services</th>
<th>1-844-202-0117</th>
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<tbody>
<tr>
<td>We have a team dedicated to serve your specific needs. Call us, we're happy to help.</td>
<td></td>
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<table>
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<tr>
<td>Please see the Together with CCHP Prior Authorization list on our website for the most up-to-date listing of services that require a prior authorization.</td>
<td>Fax: (414) 266-4726</td>
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<tr>
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<td>Fax: (414) 266-8797</td>
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<tr>
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<td>Fax: 1-844-201-4673</td>
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<tr>
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<th>1-844-201-4677</th>
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<td>Hours: Monday through Friday, 8 a.m. to 6 p.m., Saturdays, 8 a.m. to 2 p.m.</td>
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<tr>
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<td>Please see the Together with CCHP Pharmacy Benefit Guide for the latest listing of prescriptions drugs that are covered or not covered.</td>
<td>P.O. Box 1997, MS 6280</td>
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<tr>
<td>Phone: 1-844-201-4677</td>
<td>Milwaukee, WI 53201</td>
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<table>
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<tr>
<th>Provider Appeals Address</th>
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<tbody>
<tr>
<td>Please see Provider Appeals Process page in this Manual for more information on the appeals processes.</td>
<td>P.O. Box 106013</td>
</tr>
<tr>
<td>Provider Appeals</td>
<td>Pittsburgh, Pennsylvania 15230-6013</td>
</tr>
<tr>
<td>P.O. Box 1997, MS 6280</td>
<td>EDI#: 251CC</td>
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</tbody>
</table>
Email & Contact Information

Provider Services  844-202-0117

Senior Provider Relations Representative
Diana Schneider - dschneider2@chw.org

Provider Relations Representative A-L
Christina Sandoval - csandoval@chw.org

Provider Relations Representative M-Z
Tina Powell - tpowell@chw.org

Provider Relations Representative
Stacey Martinez - smartinez@chw.org

Provider Contract Administrator
Sue Gorecki- sgorecki@chw.org

Provider Network Specialist
Blia Lor - cchp-providerupdates@chw.org

Provider Network Specialist Kamesha Hall – cchp-providerupdates@chw.org

Provider Communications Specialist
Christie Green – cgreen@chw.org
Questions?