



HIP Prepayment and Prepayment Tool

September 2015

Exclusively serving Indiana families since 1994.



Purpose of the HIP Prepayment Tool:

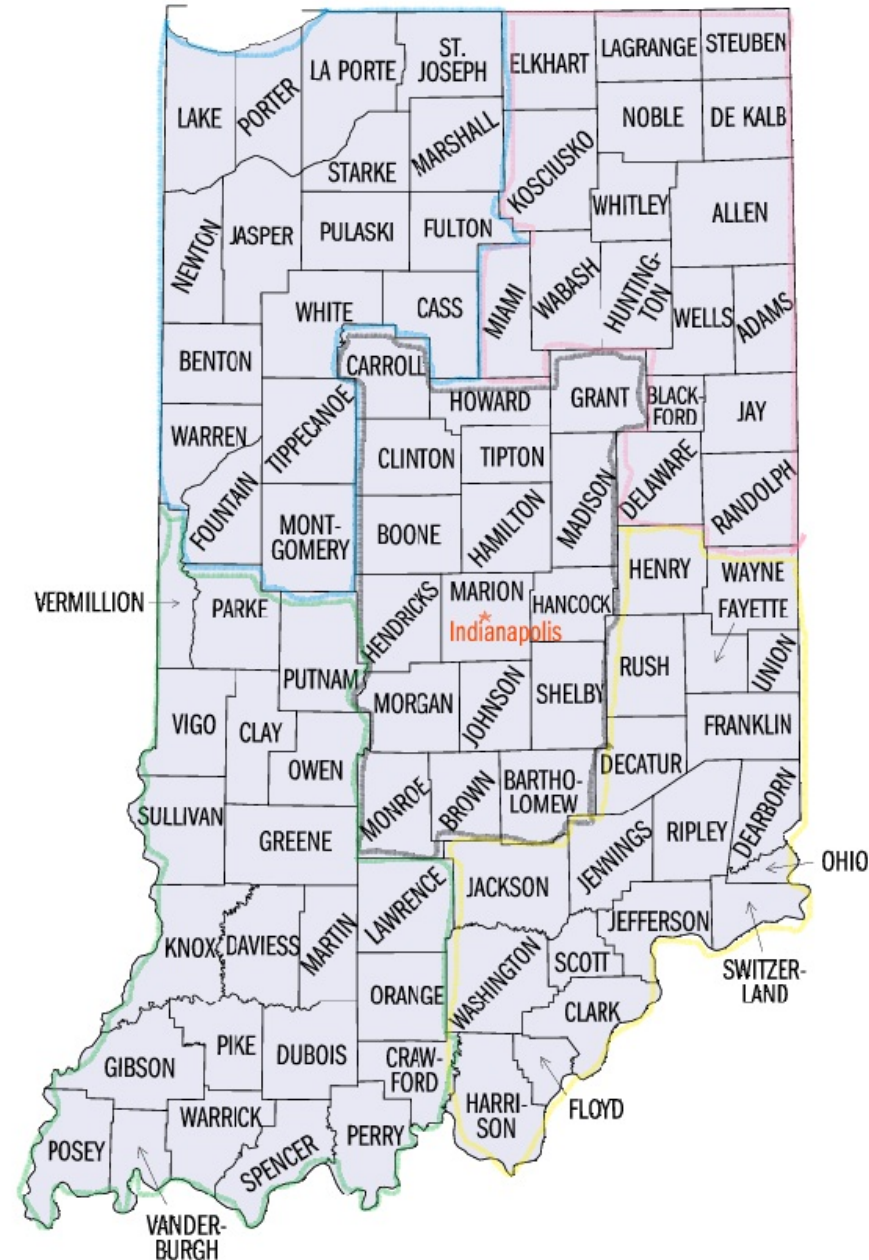
- A POWER Account is established for each Healthy Indiana Plan (HIP) member when they become eligible for the plan.
- The POWER Account totals a combined member and state contribution of \$2,500 per benefit year.
- As members see their POWER Account funds decrease, we believe they will utilize health care services more wisely, have a greater financial awareness of their health care costs, and be encouraged to use greater financial responsibility when seeking care.

Timeline for Debit Card

- Pilot began 7/1/15
 - MDwise and the other HIP MCEs began a pilot of the Debit Card with a handful of providers.
- Phased Rollout for all providers to begin 10/1/15
 - MCEs are working together to conduct a phased rollout for the Debit Card.
 - Split the State into 5 regions.
 - Phased rollout will flow from region to region.
 - Week 1: Southeast
 - Week 2: Southwest
 - Week 3: Central
 - Week 4: Northeast
 - Week 5: Northwest

Phased Rollout

- Five regions:
 - Southeast (Clarksville/ Jeffersonville)
 - Southwest (Evansville)
 - Central (Indianapolis)
 - Northeast (Ft. Wayne)
 - Northwest (Gary/ Hammond)



Debit Card Solutions

- Each MCE has their own Debit Card solution.
- Anthem and MHS are using a swipe card.
- MDwise is utilizing our Prepayment Tool on the Provider Portal.

How to Estimate the POWER Account Charges for a HIP member and Receive Prepayment for Claims:

- When a HIP member accesses services, the provider's office staff will ask for the member's HIP ID card and go to <http://www.mdwise.org/providers/mymdwise> to access the provider portal.
 - Note: the providers office may already have a user name and password. If not, the provider will need to Request a New Account.
 - To request access to receive prepayment for claims:
 - Complete and fax the EFT and ERA Vendor Request Form for Prepayment to the number provided on the form.
 - Complete online form to update provider portal account.

How to Estimate the POWER Account Charges for a HIP member and Receive Prepayment for Claims:

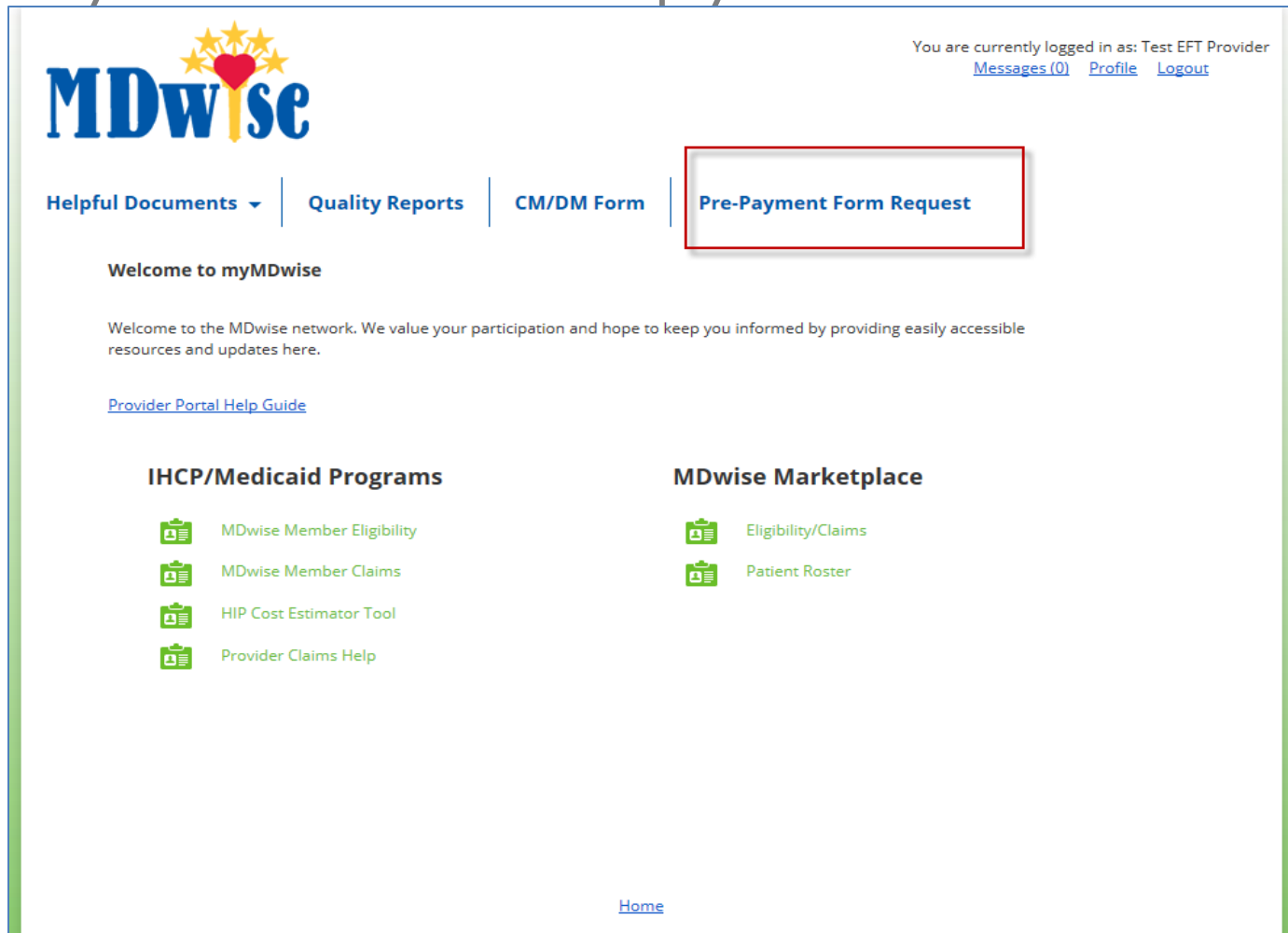
- The Provider's office staff will then enter RID information from the member's ID card into the provider portal to confirm that the member is eligible to receive services.
- During patient check-out, the provider will then log into the MDwise Prepayment Tool, which is available within the MDwise Provider Portal as a link. The provider will enter all procedure codes relevant for the services provided to the member on this date of service.
 - Note: The provider may enter up to ten (6) procedure codes.

How to Estimate the POWER Account Charges for a HIP member and Receive Prepayment for Claims:

- The MDwise Prepayment Tool identifies the chargeable amount for the service.
- The provider can then print a receipt for the member.
- Using the new function of the HIP Prepayment tool, the provider can now receive pre-payment for qualifying services rendered to active HIP members.
- Providers should collect the member's copayment (if applicable) at the time of service as the pre-payment is intended to reimburse for those charges MDwise is responsible for.

How to Access the HIP Prepayment Tool:

Provider logs into their account and requests access to Pre-Payment form via HIP Prepayment Tool link

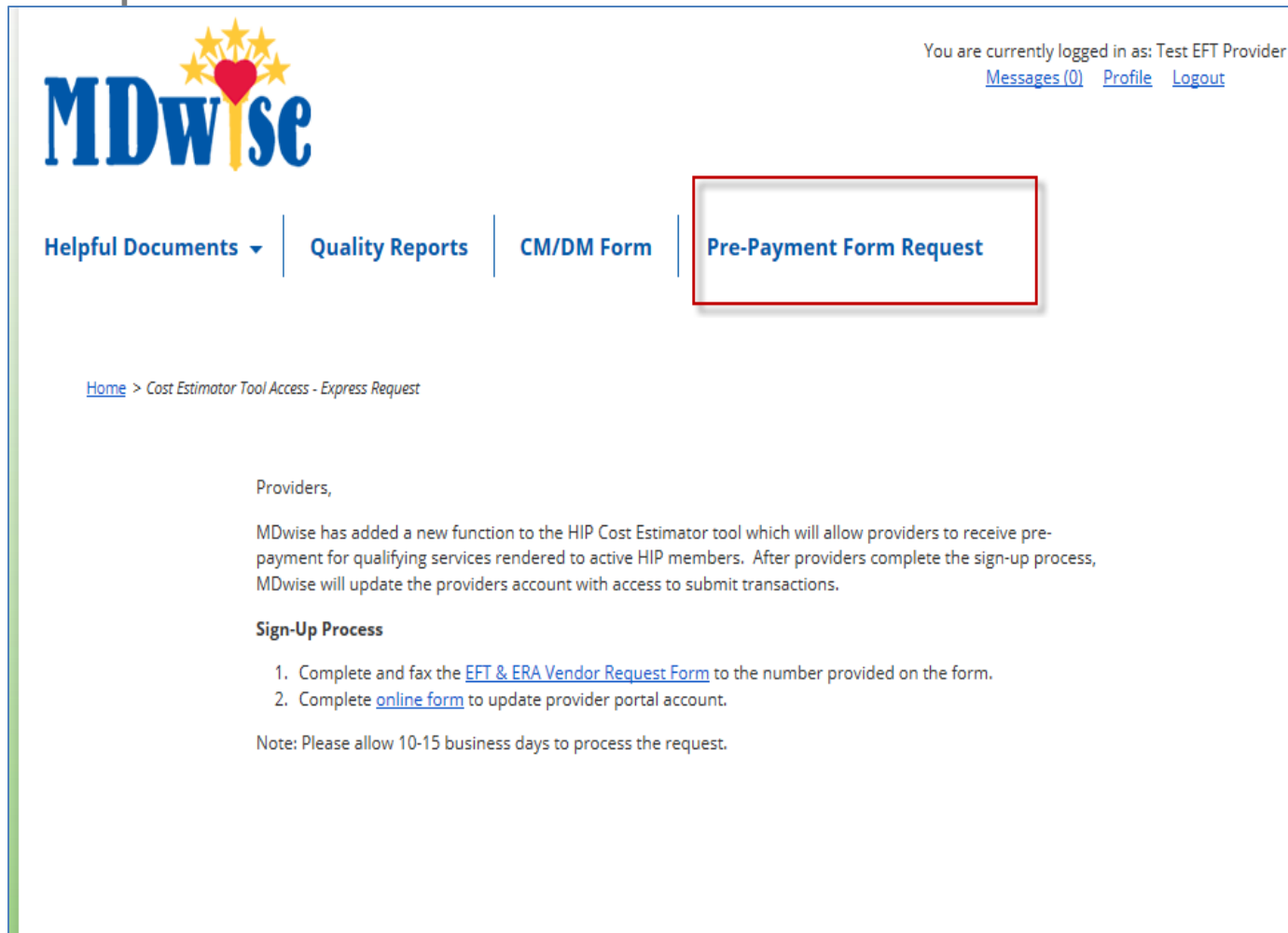


The screenshot displays the MDwise Provider Portal. At the top left is the MDwise logo, which includes a heart and stars. In the top right corner, it states 'You are currently logged in as: Test EFT Provider' with links for 'Messages (0)', 'Profile', and 'Logout'. Below the logo is a navigation bar with four items: 'Helpful Documents' (with a dropdown arrow), 'Quality Reports', 'CM/DM Form', and 'Pre-Payment Form Request'. The 'Pre-Payment Form Request' link is highlighted with a red rectangular box. Below the navigation bar, there is a 'Welcome to myMDwise' section followed by a welcome message and a link to the 'Provider Portal Help Guide'. The page is divided into two main columns. The left column is titled 'IHCP/Medicaid Programs' and contains four links, each with a clipboard icon: 'MDwise Member Eligibility', 'MDwise Member Claims', 'HIP Cost Estimator Tool', and 'Provider Claims Help'. The right column is titled 'MDwise Marketplace' and contains two links, each with a clipboard icon: 'Eligibility/Claims' and 'Patient Roster'. At the bottom center of the page is a 'Home' link.



How to Access the HIP Prepayment Tool:

- Provider clicks on “Pre-Payment Form Request” link to request access.



The screenshot displays the MDwise provider portal interface. At the top left is the MDwise logo, which consists of the word "MDwise" in blue with a yellow heart and stars above the "i". In the top right corner, it says "You are currently logged in as: Test EFT Provider" with links for "Messages (0)", "Profile", and "Logout". Below the logo is a navigation bar with four items: "Helpful Documents" with a dropdown arrow, "Quality Reports", "CM/DM Form", and "Pre-Payment Form Request", which is highlighted with a red rectangular box. Below the navigation bar is a breadcrumb trail: "Home > Cost Estimator Tool Access - Express Request". The main content area starts with "Providers," followed by a paragraph: "MDwise has added a new function to the HIP Cost Estimator tool which will allow providers to receive pre-payment for qualifying services rendered to active HIP members. After providers complete the sign-up process, MDwise will update the providers account with access to submit transactions." Below this is a section titled "Sign-Up Process" with a numbered list: "1. Complete and fax the [EFT & ERA Vendor Request Form](#) to the number provided on the form." and "2. Complete [online form](#) to update provider portal account." A note follows: "Note: Please allow 10-15 business days to process the request." The MDwise logo is also present in the bottom right corner of the page.

MDwise

You are currently logged in as: Test EFT Provider
[Messages \(0\)](#) [Profile](#) [Logout](#)

Helpful Documents ▾ | Quality Reports | CM/DM Form | **Pre-Payment Form Request**

[Home](#) > Cost Estimator Tool Access - Express Request

Providers,

MDwise has added a new function to the HIP Cost Estimator tool which will allow providers to receive pre-payment for qualifying services rendered to active HIP members. After providers complete the sign-up process, MDwise will update the providers account with access to submit transactions.

Sign-Up Process

1. Complete and fax the [EFT & ERA Vendor Request Form](#) to the number provided on the form.
2. Complete [online form](#) to update provider portal account.

Note: Please allow 10-15 business days to process the request.

MDwise

How to Access the HIP Prepayment Tool:

- Provider completes sign-up process, step-two online form below.

[Home](#) > [Cost Estimator Tool Access - Express Request](#) > [Submit Request](#)

Provider Request for Pre-Payment Form Access

Request for Pre-Payment Form Access

To obtain access to the Pre-Payment Form, please complete and submit the following information. You will receive an e-mail when the authorization process has been completed and access has been granted or denied.

*NPI Number: x

*Contact Name:

Title:

*Practice or Facility Name:

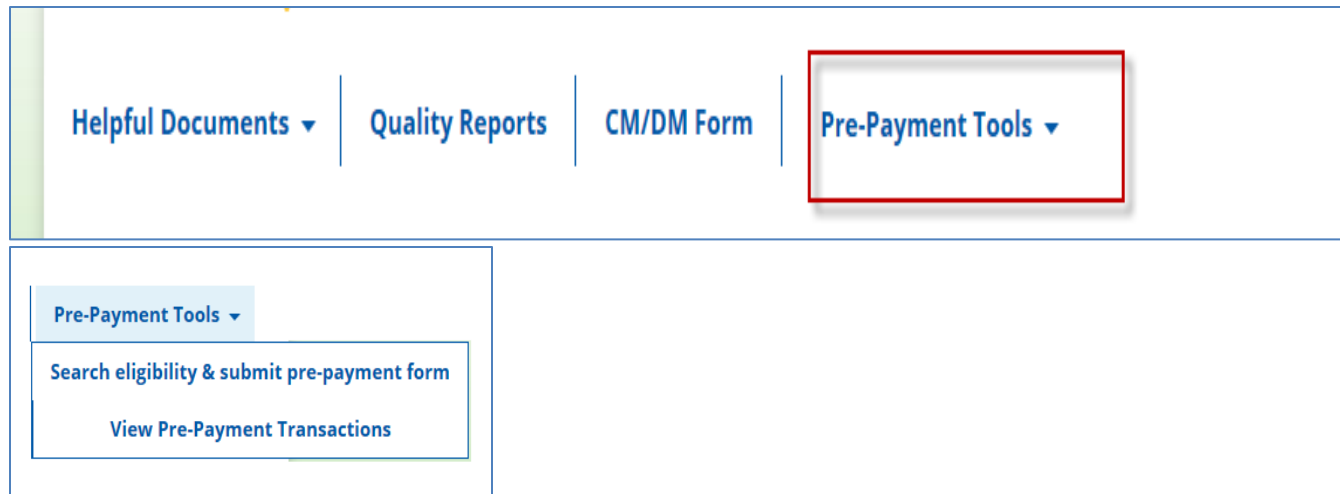
*Phone#:

Email address:

To submit this request to customer service, please click on 'submit'.
To save this request and complete later, please click on 'save'.

How to Access the HIP Prepayment Tool:

- MDwise Provider Relations team approves access. Provider will receive email when access is approved.
- Upon approval “Pre-Payment Tools” link will display in the menu bar on providers next log-in.



Utilizing the HIP Prepayment Tool for Prepayment:

- Provider selects “Search eligibility & submit pre-payment form” from Pre-Payment tools drop-down menu and searches for member eligibility.

[Home](#) • [Eligibility Search](#)

Current Patient: None Selected

Patient Eligibility

[Show/Hide Search](#)

First Name:

Member ID(s):

Date of Birth:

Last Name:

Group:

Name ^	MemberID	Group	Date of Birth	Gender	Benefit Plan	Address	Home Phone
Fred Flinstone	123456789123	HIP 2.0	01/02/1999	F	HSB3	123 Main Street, Vincennes, IN 47591	555-555-55555
Fred Flinstone	123456789123	HIP	01/02/1999	F	H	123 Main Street, Vincennes, IN 47591	555-555-55555

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Utilizing the HIP Prepayment Tool for Prepayment:

- Provider clicks on link to select “*submit a pre-payment request form for this member.*”

[Home](#) • [Eligibility Search](#)

Pre-payment Request Form

[Click HERE to submit a pre-payment request form for this member.](#)

Patient Eligibility

[Show/Hide Search](#)

First Name:

Member ID(s):

Date of Birth:

Last Name:

Group:

Eligibility

Member:		PMP #:	1316063613	Plan ID:	HSB3
Member ID:		Current PMP:	STRATTON, THOMAS L	Plan Name:	
Subscriber ID:					
Relationship:		Current Delivery System:			

- Servicing provider and member information pre-populates in form fields; provider enters CPT code(s), number of units and clicks submit.

SUBMIT

- Provider receives transaction confirmation and printable member receipt.

[Home](#)

After Prepayment Request has been Submitted:

- The provider should receive an electronic fund transfer (EFT) payment to their bank account for the prepayment the next business day following submission of the prepayment request.
- The provider must still submit the full claim to MDwise. The payment that was made through the pre-payment tool is an estimate and the actual amount payable could be higher resulting in an additional payment, or a decrease in payment.

Preventive Services and the POWER Account:

Healthy Indiana Plan Preventive Services are not charged to the POWER account:

- Preventive services are not chargeable to a HIP member's POWER account, therefore these services can't be entered into the Prepayment Tool.
 - Annual Well Physical (99385-99386, 99395-99396)
 - Mammograms (77057, G0202)
 - Pap Smears (87210, G0101)
 - Cholesterol Testing (80061)
 - Blood Glucose Screening (82962)
 - Tetanus-Diphtheria Immunizations (90698, 90715)
 - Flu Shots (90658, G0008)

Next Steps

- Providers that wish to participate in the pilot need to complete the following by accessing <http://www.mdwise.org/providers/mymdwise>
 - Complete and fax the EFT and ERA Vendor Request Form for Prepayment to the number provided on the form.
 - Complete online form to update provider portal account.



Healthy Indiana Plan (HIP) POWER Account Prepayment Tool Instructions

A POWER Account is established for each Healthy Indiana Plan (HIP) member when they become eligible for the plan. The POWER Account totals a combined member and state contribution of \$2,500 per benefit year. As members see their POWER Account funds decrease, we believe they will utilize health care services more wisely, have a greater financial awareness of their health care costs, and be encouraged to use greater financial responsibility when seeking care.

Instructions on How to Estimate the POWER Account Charges for a HIP member and Receive Prepayment for Claims:

1. When a HIP member accesses services, the provider's office staff will ask for the member's HIP ID card and go to MDwise.org/providers/mymdwise to access the provider portal. Note: the provider's office may already have a user name and password. If not, the provider will need to Request a New Account.
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3. During patient check-out, the provider will then log into the MDwise Prepayment Tool, which is available within the MDwise Provider Portal as a link. The provider will enter all procedure codes relevant for the services provided to the member on this date of service. (Note: The provider may enter up to six (6) procedure codes).
4. The MDwise Prepayment Tool identifies the chargeable amount for the service. The provider can then print a receipt for the member. Using the new function of the HIP Prepayment Tool (see #1), the provider can now receive pre-payment for qualifying services rendered to active HIP members. Please collect the member's copayment at the time of service as the pre-payment is intended to reimburse for those charges MDwise is responsible for.
5. The provider must submit the full claim to MDwise. The payment that was made through the Prepayment Tool is an estimate and the actual amount payable could be higher resulting in an additional payment, or a decrease in payment. Services that require prior authorization will not be paid through the Prepayment Tool so these services will be paid upon submission of the claim.

Healthy Indiana Plan Preventive Services are not charged to the POWER account:

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HIPP0205 (9/15)