

Mercy Managed Behavioral Health (MMBH) Provider Newsletter

May/June 2023 - Spring Edition



THANK YOU to all the Providers that completed the MMBH Provider Satisfaction Survey in December of 2022. We have received your feedback and are taking actions now based on your comments.

As always, we value your positive feedback or concerns you may have.

Thank you for the great service you provide to our members!

MMBH Services

- **4** Utilization Management
- **♣** Case Management
- ♣ Behavioral Health Provider Networks
- Quality Improvement
- ♣ Behavioral Health 24/7/365 Call Center

Have you moved or need to update your information with MMBH?

It is imperative that you keep us updated with any changes by <u>e-mailing</u> the **Provider Change Form** with your updated information to Provider Relations at <u>MMBHProviderRelationsTeam@Mercy.net</u>.

Note: To make a provider name change, the provider's professional license & NPI must BOTH match the providers new legal name.

You can find the Provider Change Form on our website: http://www.mbh-eap.com/resources-forms/providers/

Did you know you can find the following forms and more on our MMBH Website?

Resource Forms:

- Provider Network Request form
- ♣ ABA Treatment Request form
- ♣ Psych Testing Request form
- **♣** IOP Request form
- Claims Submission and Payment Information
- Provider Manual

You can access these by clicking on the following link:

http://www.mbh-eap.com/resourcesforms/providers/

Appointment Standards

The following standards have been adopted by MMBH and our Health Plan partners:

- Emergency Life Threatening:
 - o Standard: Immediate
- Emergent Non-Life Threatening:
 - Standard: < 6 Hours
- Urgent:
 - Standard: < 24 hours
- **4** Routine:
 - o Standard: < 10 days



Health Call Center 12/01/2025

MMBH Provider Newsletter



- ♣ Current Medicare/CMS Telehealth Guidance: <u>Telehealth</u> policy updates | Telehealth.HHS.gov
- **♣** 2023 CPT Code Changes from the AMA: <u>2023 CPT E/M</u> descriptors and guidelines (ama-assn.org)
- ♣ 988 Resource for Members: You can refer members for any Mental Health or suicide concern. More details: https://www.samhsa.gov/find-help/988
- **♣** Effective 6/1/2023 IBEW Local 1 (MO) is transferring their Behavioral Health benefits to Cigna
 - The new Cigna EAP/MAP phone number for IBEW Local 1 (MO) is 877-622-4327.
 - The Cigna BH telephone number for prior authorization (and other UM/CM, Provider Network, and Member Service needs) is 800-768-4695.

Provider Notification Information

As part of our standard Utilization Management processes and procedures we utilize nationally recognized and evidenced based medical necessity criteria, including:

• MCG Behavioral Health Care Guidelines

The behavioral health criteria used in making utilization management determinations are available to our providers (and members) upon request by mail, fax, or secure email. Please reach out to MMBH if you have any questions or would like to request the criteria, we use in making utilization management determinations, at 1-800-413-8008.

Reminders for Essence Healthcare:

- Essence does <u>NOT</u> require prior authorization for routine outpatient visits, including psych/neuro psych testing.
- Communication with the members PCP is extremely important. Please obtain authorization to release information to PCPs, particularly those taking medications, have unstable conditions, and those with co-morbid chronic medical conditions. Integrated care results in better overall health outcomes.
- Please visit the Essence provider portal to obtain member benefit and claim information. Search: Essence Healthcare and click on Provider Log- In to register for this service.

MMBH Provider Newsletter

Claims Submission and Payment Information

List of Accounts managed by Mercy Managed Behavioral Health

**Send claims directly to the third-party administrator.

			CLAIM	
PLAN	ADDRESS		CLAIM STATUS/	ADDITIONALE
FLAN	ADDRESS Electronic Claims Ad			APPLICABLE STATE
	Electronic Claims At	iuress	PROVIDER RELATIONS	SIAIE
Essence Healthcare MO/IL	Essence Healthcare		(314) 209-2700	MO
HMO & PPO	PO Box 5907		or	MO
IIIVIO & FFO	Troy, MI 48007		OI .	
	110y, WII 48007		(866) 597-9560	
	Emdeon #20818, Gate	way #57082	Option 5, then	
	SSI Payer ID & Sub II	-	Option 2	
IBEW Local 309	Meritain Health		(618) 344-2002	MO
Collinsville, Illinois			(010) 544 2002	IL
Commovino, immors	Richardson, TX 75085-3921			
	Kichardson, 174 /3003-3521			
	WEBMD/Emdeon #41	WEBMD/Emdeon #41124 Mckesson/Relay Health #1761		
	Mckesson/Relay Healt			
IBEW Local No. 1 Health	IBEW Local 1	IBEW Local 1		MO
and Welfare	Health & Welfare Fund		or (877) 281-	IL
	PO Box 6088		2430	
	St. Louis, MO 63139			
	Relay Health #44602 Trizetto / Office Ally / Practice Insight #44602			
LHN	Meritain Health		(866) 209-3063	MO
(Labor Health Network)	PO Box 853921			IL
	Richardson, TX 75085-3921			
	WEBMD/Emdeon #41124 Mckesson/Relay Health #1761			
Missouri -	110πessonitemy Hemin π1 / 01		(888) 571-9054	MO
Mercy Co-Workers –	MO ONLY: EPO &	MO ONLY: EPO & PPO Product		1110
Anthem Alliance EPO &	Anthem			
Blue Access Choice PPO		PO Box 105187 Atlanta, GA 30348		
	Electronic Claim Submission:			
	www.anthem.com/edi Payor ID: 00241			
Arkansas –			(888) 571-9054	AR
Mercy Co-Workers –	AR - EPO ONLY:			
Anthem Alliance EPO &	Anthem	File claims with the local		
Blue Access Choice PPO	PO Box 105187	Blue Cross and Blue Shield		
	Atlanta, GA 30348	Plan in the state where		
		services were provided.		
	Electronic Claim Submission:			
TW	www.anthem.com/edi Payor ID: 00241		(000) 551 0051	
Illinois, Oklahoma,	Anthem Alliance PI		(888) 571-9054	IL
Kansas –	File claims with the local Blue Cross and Blue			OK
Mercy Co-Workers –	Shield Plan in the state where services were			KS
Anthem Alliance Options	provided.			
PPO				
	Electronic Claim Submission:			
	www.anthem.com/edi			

MMBH Provider Newsletter

Direct contracts in network with Mercy Managed Behavioral Health

PLAN	ADDRESS Electronic Claims Address	CLAIM STATUS/ PROVIDER RELATIONS	APPLICABLE STATE
Direct Contracts – with various Employer Groups	Please see the back of the member's insurance card for the appropriate claim submission address.	Found on the back of the member's insurance card.	MO, IL, AR, KS, OK

MMBH is responsible for managing prior authorization requests on behalf of the Health Plan. If you have obtained prior authorization through MMBH and experience claim issues, your claim inquiry should be directed to the Health Plan, not MMBH. Please refer to the phone number on the back of the member's insurance card.

Please note:

- Failure to obtain prior authorization will result in a denied claim.
- **ABA ONLY**: Failure to include the modifier (HP/HO/HN/HM) may result in a denied claim.
- NEW Providers should hold their claims for 30 days from their assigned effective date listed on your Welcome Letter, to allow our TPA's time to get your information loaded into their claims payment system.