



P R O V I D E R B U L L E T I N

B T 2 0 0 1 4 0

O C T O B E R 2 5 , 2 0 0 1

To: All Providers**Subject: Mandatory MCO Enrollment****Important News About Hoosier Healthwise Managed Care**

As established in *Public Law 291-2001, Section 160 (IC 12-15-12-14)*, the Office of Medicaid Policy and Planning (OMPP) will begin to implement Hoosier Healthwise mandatory risk-based managed care (RBMC) enrollment in specific Indiana counties. This will transition current PrimeStep Hoosier Healthwise members from primary care case management (PCCM) into enrollment with a local managed care organization (MCO) in the RBMC delivery system.

IC 12-15-12-14 states that Medicaid recipients eligible for enrollment in a Medicaid managed care program, and who reside in a county having a population of between 150,000 and 700,000 must enroll in a risk-based managed care program. Census 2000 data lists the following Indiana counties as having populations greater than 150,000: Allen, Elkhart, Hamilton, Lake, Marion, St. Joseph, and Vanderburgh. While Marion County is not included in *IC 12-15-12-14* (because its population is greater than 700,000) mandatory MCO enrollment in Marion County is not prohibited. The scheduled transition dates, by county, from PrimeStep to an MCO are listed in Table 1.1 below.

Table 1.1 – County Transition Dates

Counties	Transition Date
Allen and Marion	April 2002
Elkhart and St. Joseph	July 2002
Lake, Vanderburgh, and Hamilton	October 2002

As required, the OMPP has submitted a request for federal approval to the Centers for Medicare and Medicaid Services (CMS), formerly known as Health Care Financing Administration (HCFA), for modification of Indiana's 1915(b) waiver, and expects to receive the necessary approval to move forward. For the waiver to be approved, more

than one MCO network must be available in the counties being proposed to eliminate PCCM enrollment. Currently, Hoosier Healthwise has two MCO contracts in northern and central regions, and only one MCO contract in the southern region. However, the other MCOs may negotiate contract amendments with the OMPP to also serve members in the southern region.

Upon implementation, all PrimeStep primary medical providers (PMPs) in designated counties must be enrolled with an MCO to be eligible for services or reimbursement from the Hoosier Healthwise Managed Care Program. **All Hoosier Healthwise PMPs (in the designated counties) enrolled in the PrimeStep program will be required to enroll with an MCO network or disenroll from the Hoosier Healthwise Managed Care Program entirely.** MCO PMPs who wish to remain in their current Hoosier Healthwise MCO network program will not have to do anything.

Providers will be given 45 days notice of the effective date of the implementation once federal waiver modification approval has been received from CMS. Accompanying the 45-day notification will be detailed and date-specific enrollment transition instructions to ensure that there are no enrollment gaps for PMPs who want to keep their current member panels. Adherence with the forthcoming instructions will help to ensure that a PrimeStep provider's current member panel, in most cases, will follow him/her to the new MCO enrollment through the automated PMP member-assignment process. **As Marion and Allen counties are scheduled for transition April 2002, please be advised that no new PrimeStep PMP enrollments will be accepted in these counties after November 1, 2001.** Enrollment paperwork for PrimeStep PMPs in Marion and Allen counties, received at EDS on or after October 31, 2001, will be returned unprocessed to the submitting entity. In addition, after November 1, 2001, PrimeStep PMPs will receive only previously assigned members and family members of currently enrolled members; no default assignments will be made.

The OMPP encourages Hoosier Healthwise PrimeStep PMPs, in the counties designated for mandatory MCO enrollment, to begin negotiations with the MCO of their choice as soon as possible. MCO and contact information for each is listed in Table 1.2. Indiana Health Coverage Programs (IHCP) providers are also encouraged to contact the MCOs to discuss any contract arrangements to become part of the MCO network of providers.

Table 1.2 – MCO Contact Information

MCO	Currently Contracted Region	Contact
Harmony Health Plan	North	Provider Services 1-800-504-2766
MDwise (IU Health Plan)	Central	Customer Service (Members and Providers) (317) 630-2831 or 1-800-356-1204
Managed Health Services (MHS)	North Central South	Provider Contracting and Administration 1-800-944-9661

Note: MCOs may negotiate contract amendments with the OMPP to serve members in regions not currently designated in Table 1.2.

Please watch closely for upcoming bulletins with more information about this very important change in the Hoosier Healthwise Program.

CDT-3/2000 (including procedure codes, definitions (descriptions) and other data) is copyrighted by the American Dental Association. © 1999 American Dental Association. All rights reserved. Applicable Federal Acquisition Regulation System/Department of Defense Acquisition Regulation System (FARS/DFARS) Apply.

CPT codes, descriptions and other data only are copyright 1999 American Medical Association (or such other date of publication of CPT). All Rights Reserved. Applicable FARS/DFARS Apply.