

 			
Member # 000000000	Member Name Jane Doe	Sex F	Date of Birth 00/00/0000
Primary Care Provider (PCP) John Smith, M.D.		PCP Phone Number (000) 000-0000	Co-Pay Office/SO Rx/SO
Plan # 001	Group # 06P	Effective Date 01/01/0000	
¡Hablamos Español!			
<small>Carry this card with you at all times. This card is for identification only and is not a guarantee of coverage. Pharmacy — see state MO HealthNet Card Bin: 004047 PCN: 43-1754897</small>			

Children's Mercy Family Health Partners

Prior Authorization Requirements when CMFHP is Primary

NOTE: Failure to request and receive prior authorization from CMFHP or submit a Pregnancy Notification Form (PNF) will result in denial of claims. All claims are subject to verification of eligibility and benefits. Authorization does not guarantee payment. Benefit coverage may vary by age group, please contact Customer Service for verification of coverage.

Inpatient Admissions: Scheduled and non-emergent inpatient admissions require notification and clinical information at least 2 business days prior to the services being rendered. Emergent services require notification to CMFHP within 10 calendar days after admission. The participating providers are responsible for communication of clinical information to CMFHP.

Other Medical Services: The services listed below require prior authorization from CMFHP prior to the date of service. All services require phone or fax notification and clinical information at least 2 business days prior to the services being rendered.

Visit www.fhp.org for Claims submission, Claims status, Eligibility, Important Information and helpful forms and the most up to date information

Customer Service

816-559-9599
1-800-347-9363

Claims

P.O. Box 411806
Kansas City, MO 64141-1806
Electronic Payor ID:
Emdeon/WebMD: 43173
Gateway: 00173
SSI: 99999-0227

Provider Relations

1-800-347-9363

Prior Authorization Case Management

1-888-691-4872 (Voice)
816-842-0843 (FAX)

Pharmacy

(Fee for Service Medicaid)
1-800-392-8030

24-Hour Nurse Advice Line

1-800-347-9369

TDD

1-877-347-9361

Behavioral Health

New Directions
1-800-528-5763
Meritain/New Directions
P.O. Box 270520
Minneapolis, MN 55427

Dental

Bridgeport
1-877-394-9994
Prior Authorization and Claims
12 Westbury Dr., Ste. D
St. Charles, MO 63301

Non-Emergency Transportation

Medical Transportation Management (MTM)
1-800-890-6026

Admissions

- Inpatient Admissions
- Rehabilitation Facility Admissions
- Skilled Nursing Facility Admissions
- Pre and Post Admissions for Transplant Patients

Ambulance, Air or Ground

- Non-emergent Transportation

Cochlear Implants

Dental

- Oral Surgery
- TMJ related services

DME/Devices/Supplies (vendors should do prior auth)

- Rental >\$200 over term of rental
- Purchase > \$200 per date of service

Diagnostic Radiology/Procedures

- Pet Scans
- Uterine Artery Embolization

Formula/Enteral Nutrition

General Surgery, Plastic and Cosmetic Procedures

- All Potentially Cosmetic Services and Procedures (Examples: scar revision, varicose vein procedures, skin tags, etc.)
- Breast Surgery (reduction, reconstruction or augmentation)
- Obesity related procedures

Home Health/Infusion Services

- Enteral Nutrition Supplies and Pumps
- Formula
- Hospice Services
- Private Duty Nursing
- PT, OT, ST
- Respite Care
- Skilled Nursing Services (beyond the first visit)
- Telemonitoring Services

OB Care

- Prenatal Care requires notification via the Pregnancy Notification Form (PNF) following the first OB Appointment.

Out of Network Services

- All out of network services: Inpatient, Outpatient, Physician Office, Home Care, etc.

Outpatient Services

- Cardiac Rehabilitation
- Full or Partial Day Rehabilitation
- Hyperbaric Oxygen Therapy
- Neuropsychological Testing/Developmental Delay Testing
- Observation Stays
- Pain Management (beyond 3rd injection)
- Pulmonary Rehabilitation
- Rehab Services: PT, OT (beyond evaluation and 3 therapy sessions)
- Speech Therapy (beyond evaluation)
- Sleep Studies

Prosthetics and Orthotics

- Purchase > \$200

Spinal Cord Stimulator

Vagal Nerve Stimulator

Specialist Responsibilities:

- The ordering provider is responsible for any required prior authorization.
- In network referrals to specialists do not require a referral number.

Billing Procedures:

- The CMFHP member number should be included on each claim form.
- Claims must be received by CMFHP within 180 days of date of service claims received after the 180 day limitation will be subject to denial.
- Members cannot be billed for covered services.
- Billing provider NPI must be on each claim.
- On line claims submission at www.fhp.org

 			
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Children's Mercy Family Health Partners

Care Management

Children's Mercy Family Health Partners adopts the Care Management Society of America's definition, "A collaborative process that assesses, plans, implements, coordinates, monitors and evaluates the options and services required to meet the individual's health needs, using communication and available resources to promote quality and cost effective outcomes."

Catastrophic illness or injuries can have a devastating affect on the patient and those closes to them. Suddenly family members are forced to make quick decisions that may affect the patient and themselves for years to come. Catastrophic illness often create an insurmountable burden for the patient and their family. Children's Mercy Family Health Partners provide case managers who utilize their experience and working knowledge of alternative care facilities and services to assist the physician and patient in identifying the most appropriate services. Our Case managers will continue to follow the patient throughout the entire course of treatment and keep in touch even after treatment or services end to assist or advise in any way they can.

Customer Service

816-559-9599
1-800-347-9363

Claims

P.O. Box 411806
Kansas City, MO 64141-1806
Electronic Payor ID:
Emdeon/WebMD: 43173
Gateway: 00173
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Provider Relations

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Pharmacy

(Fee for Service Medicaid)
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24-Hour Nurse Advice Line

1-800-347-9369

TDD

1-877-347-9361

Behavioral Health

New Directions
1-800-409-2225
Epoch/New Directions
P.O. Box 399
Shawnee Mission, KS 66201

Dental

Bridgeport
1-877-394-9994
Prior Authorization and Claims
12 Westbury Dr., Ste. D
St. Charles, MO 63301

Non-Emergency Transportation

Medical Transportation
Management (MTM)
1-800-890-6026

Visit www.fhp.org for Claims
and
Member Eligibility Information

Care Management Services

- Identification of members with complex medical and/or psychosocial needs who have or are at risk of developing complex needs.
- Provide early intervention for those individuals requiring Care Management.
- Assistance in facilitating medical care that maximizes quality of life and ensure that the care is provided in the most appropriate setting.
- Facilitate communication among all persons involved in the delivery of care and support of the member and his or her family.
- Act as a liaison to community resources.
- Serve as an advocate and educator for the member and the family.
- Facilitate the member reaching maximum medical potential.

If you have or are aware of patients with any of the following diagnoses or services, please refer them to the Care Management Department for screening and possible services.

- AIDS/HIV
- Abuse and/or Neglect/Domestic Violence
- Amputation
- Broncho Pulmonary Dysplasia (BPD)
- Burns with greater than 3 day hospital stay
- Cancer
- Cerebral Palsy
- Cerebral Vascular Accident (CVA/Stroke)
- Cochlear Implant (initial request)
- Congenital Abnormality
- Cystic Fibrosis
- Degenerative Neuromuscular Diseases (Multiple Sclerosis, ALS, Guillan Barre')
- Diabetes resulting in 2 or more hospitalizations within 1 year
- Diseases requiring long-term IV antibiotic or TPN
- Disorders requiring long-term rehabilitative services
- Electrical Bone Growth Studies/Stimulators
- Failure to thrive
- Head Injuries with greater than 3 day hospital stay
- Home Health services greater than 7 visits
- Homelessness
- Hospice services
- Immunological Disorders
- Lead Poisoning Levels above 9
- Mental Illness
- Multiple Fractures/Multiple Traumas
- Pregnancy, High Risk/Maternal Complications
- Premature Births with complications
- Rehabilitation Services - Inpatient
- Renal Failure
- Selected Cardiovascular diseases resulting in 2 or more hospital stays in 1 year
- Skilled Nursing Admission
- Spinal Cord Injuries
- Substance Abuse
- Tocolytic Therapy
- Transplants
- Wound Care Center Services