

New York Tri-State Participating Network Administrative Addendum 2003/2004

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Medicaid, Child Health Plus and Family Health Plus Information

The information contained in this section does not replace the information contained in other sections of the Physician and Health Care Professional Administrative Addendum, but rather, highlights information pertinent to Managed Medicaid (Medicaid), Child Health Plus (CHP) and Family Health Plus (FHP). Nothing contained in your contract with UnitedHealthcare shall create any contractual relationship between you and local departments of social services, New York City, or the New York City Department of Health.

Change of Practice Information

Medicaid, CHP and FHP customers must be notified within three (3) days when their primary physician's address, phone number or office hours change. To ensure our customers receive this information in a timely manner, notify your UnitedHealthcare patients within three (3) days when your address, phone number or office hours change. UnitedHealthcare has change of address postcards available to help you meet this requirement. To order a supply, please call your Network Account Representative.

Program Eligibility

UnitedHealthcare has contracts with various county Departments of Social Services that allow us to market our HMO program to Medicaid eligible persons in the following counties: Bronx, Herkimer, Kings, Nassau, New York, Oneida, Onondaga, Oswego, Queens, Richmond, and Suffolk. UnitedHealthcare is obligated to provide all necessary medical benefits that are described in those contracts. Some services, such as pharmacy, are not covered by the health plan, but instead, are covered directly by the State. Generally, covered services obtained by customers outside of UnitedHealthcare's physician and health care professional network are not covered by either the health plan or by Medicaid, unless the services are emergency, family planning, or authorized by the health plan.

CHP is a health care program administered by the State of New York and offered through UnitedHealthcare. The plan is available for uninsured or underinsured children who live in New York State. Subsidies are available for children whose families meet size and financial eligibility criteria. Applications for coverage can be obtained by calling 888-617-8979. UnitedHealthcare is enrolling children from birth up to age 19 whose families' size and yearly income meet Federal and State guidelines and who are residents of the following counties: Bronx, Cayuga, Herkimer, Kings, Madison, Nassau, New York, Oneida, Onondaga, Oswego, Queens, Richmond, and Suffolk.

FHP is a health care program administered by the State of New York and offered through UnitedHealthcare. The plan is available for uninsured adults, aged 19 to 64, who live in New York State. Applications for coverage can be obtained by calling 888-617-8979. UnitedHealthcare is enrolling individuals whose families' size and yearly income meet Federal and State guidelines and are residents in the following counties: Bronx, Cayuga, Herkimer, Kings, Madison, Nassau, New York, Oneida, Onondaga, Oswego, Queens, Richmond, and Suffolk.

CHP and FHP customers have agreed to receive all of their medical care from participating physicians and other health care professionals except for emergency or out-of-area urgently needed care.

Customer Service representatives help explain the benefits and procedures to each Medicaid, CHP, and FHP customer, so he or she knows how the benefit works and to what medical benefits he or she is entitled. (See Benefit Summary for details.)

MANAGED MEDICAID, CHILD HEALTH PLUS AND FAMILY HEALTH PLUS

How to Reach Managed Medicaid, CHP and FHP:

For information on how to enroll in these programs	888-617-8979
Customer Services	800-396-7177
Claim Submission Address	UnitedHealthcare P.O. Box 659769 San Antonio, Texas 78265-9769
Health Services	1-866-604-3267
Provider Services	1-800-638-8075
United Behavioral Health (UBH)	888-291-2506

Customer Identification and Verification

Managed Medicaid customer’s ID cards will have Group Number 61000 for customers living Upstate and 63000 for those in Downstate New York. Managed Medicaid Customers with SSI will have Group Number 66000 for Upstate or 63500 for Downstate New York. As the Benefit Summary indicates, the Mental Health/Substance Abuse Benefit is slightly different for Medicaid customers with SSI. CHP ID cards will state the product name and have Group Number 62000 for Upstate or 64000 for Downstate New York customers. FHP ID cards will have Group Number 60000 for Upstate or 65000 for Downstate New York customers. Customer Service Representatives can provide additional information regarding which services are covered, notification requirements and coordination of benefits. Possession of a customer ID card does not guarantee eligibility or coverage. It is your responsibility to verify the eligibility of the cardholder. If a former customer or other ineligible person attempts to use a Managed Medicaid, CHP, or FHP identification card, notify UnitedHealthcare’s Customer Service Department at 800-396-7177 immediately.

General Coverage Notes

UnitedHealthcare customers are not subject to Medicaid Utilization Thresholds, limitation on, or copayments for services included in the benefit package. Medicaid customers may be subject to Medicaid Utilization Thresholds for outpatient pharmacy services, which are billed Medicaid fee-for-service. A female Medicaid customer’s enrollment in UnitedHealthcare is sufficient to allow for the provision of service to that woman’s newborn, unless the newborn is excluded from participating in Medicaid Managed Care.

Covered Services for Managed Medicaid, Child Health Plus and Family Health Plus

Service	Medicaid	Child Health Plus	Family Health Plus
Inpatient Hospital – includes inpatient hospital care for treatment, maintenance and nursing services as required, up to 365 days per year (366 days in a leap year). This service includes a full range of diagnostic and therapeutic care (i.e. medical, surgical, nursing, radiological and rehabilitative services). These services are provided under the direction of a physician, nurse practitioner or dentist.	Yes	Yes	Yes
Outpatient Hospital – includes services provided in hospital outpatient departments, freestanding clinics, and emergency rooms. These services include preventive, primary medical, specialty, mental health, EPSDT and family planning services.	Yes	Yes	Yes
Physician Services – includes services provided in an office, customer's home, hospital, skilled nursing facility or elsewhere. These services include the full range of preventive care services, primary care medical services, and physician specialty services that fall within a physician's scope of practice. In addition, pharmaceuticals and medical supplies routinely furnished or administered as part of a clinic or office visit; physical examinations, including those necessary for employment, school, and camp; health and mental health assessments required to determine a person's disability status for Federal SSI applications; health assessments for the Infant/Child Assessment Program; annual preventive health visits for adolescents; new admission exams for school children if required by the County; health screening, assessment and treatment of refugees, including State and County required forms.	Yes	Yes	Yes
Laboratory Services – includes all clinically appropriate tests and procedures ordered by a qualified medical professional.	Yes	Yes	Yes
Radiology – includes diagnostic radiology, diagnostic ultrasound, nuclear medicine, radiation oncology, and MRI.	Yes	Yes	Yes

Service	Medicaid	Child Health Plus	Family Health Plus
DME – includes devices and equipment, other than medical/surgical supplies, enteral formula (see Prescription and Non Prescription drug section) Examples include wheel chairs, crutches, oxygen and oxygen supplies, nebulizers, patient lifts, etc. These devices must be ordered by a qualified physician or other health care professional or received from a participating physician or other health care professional.	Yes	Yes	Yes
Prosthetics/Orthotics Services/Orthopedic Footwear -covered if medically necessary.	Yes	Yes (except not covered if needed solely for sports)	Yes
Hearing Aid – including selecting, fitting and dispensing of hearing aides, hearing aid checks, conformity evaluation, and hearing aid repairs.	Yes	Yes	Yes
Transportation Emergency – transportation to a hospital emergency room generated by a call to 911 Non-emergency – transportation that is essential for a customer to obtain necessary medical care and services that are covered under the Medicaid program. <i>Note: Customers should call Customer Services to arrange for transportation services.</i>	Yes Yes in NYC, Nassau Co., Suffolk Co. and Onondaga Co. No in rest of service area; paid for by FFS Medicaid	Yes No	Yes Yes for Family Health Plus members aged 19 and 20. No for the rest of the membership
Court-ordered Services – services ordered by the Court that are covered in UnitedHealthcare’s benefit package.	Yes	Yes, if medically necessary	Yes

Service	Medicaid	Child Health Plus	Family Health Plus
<p>Chemical Dependence (Including Alcohol/Substance Abuse) includes self referral for one chemical dependence assessment for all inpatient detoxification, inpatient rehabilitation, or outpatient detoxification services.</p>	<p>Outpatient: Non-SSI Medicaid Members and SSI Medicaid Members must use their Medicaid Fee-for-Service card to access outpatient chemical dependence treatment services, except outpatient Detoxification services which are part of the benefit package.</p> <p>Inpatient: Non-SSI Medicaid Members covered by health plan.</p> <p>SSI Medicaid Members must use their Medicaid Fee-for-Service Card for inpatient benefit.</p>	<p>Outpatient: Covered for 60 visits per calendar year for mental health and diagnosis and treatment of alcohol and substance abuse.</p> <p>Inpatient: Covered for 30 days per calendar year for inpatient mental health and alcohol and substance abuse services. Visits may include family therapy related to the enrolled child's treatment.</p>	<p>Outpatient: Covered for 60 visits per year for mental health and diagnosis and treatment of alcohol and substance abuse.</p> <p>Inpatient: Covered for 30 days per year for inpatient mental health and alcohol and substance abuse services.</p>
<p>Experimental and/or Investigational Treatment</p>	<p>Covered on a case by case basis. Refer questions about coverage in these cases to Health Services.</p>	<p>Covered on a case by case basis. Refer questions about coverage in these cases to Health Services.</p>	<p>Covered on a case by case basis. Refer questions about coverage in these cases to Health Services.</p>
<p>Detoxification – includes medically managed detoxification and medically supervised inpatient/outpatient withdrawal services.</p>	<p>Yes-both SSI and Non SSI members are covered for Detoxification</p>	<p>Covered for 30 days per calendar year combined mental health/ substance abuse inpatient services</p>	<p>Yes</p>

Services	Medicaid	Child Health Plus	Family Health Plus
<p>Family Planning – includes offering, arranging and furnishing of those services that enable individuals, including minors, who may be sexually active to prevent or reduce the incidence of unwanted pregnancy. These services include diagnostic and all clinically appropriate treatment, sterilization, screening and treatment for sexually transmissible diseases, screening for disease and pregnancy.</p> <p>Also included is HIV counseling and testing when provided as part of a family planning visit.</p> <p><i>Note: Medicaid customer may access these services in or out of the network. Medicaid, Child Health Plus, and Family Health Plus customers may access these services without a referral from their primary physician.</i></p>	Yes	Yes	Yes
<p>Abortions Medically Necessary</p>	Yes	Yes	Yes
<p>Elective</p>	Yes, in NYC only	No	Yes, in NYC only
<p>Private Duty Nursing – these services are available when they are part of a physician or nurse practitioner’s written treatment plan.</p>	Yes	No	No
<p>Home Health Care – clinically appropriate services provided to recipients in their homes. These services include personal care tasks pursuant to an established care plan.</p>	Yes	Up to 40 certified home health agency visits per calendar year in lieu of hospitalization or confinement in a skilled nursing facility.	Up to 40 certified home health agency visits per year in lieu of hospitalization, a skilled nursing facility stay, or as part of a post-partum home visit.

Services	Medicaid	Child Health Plus	Family Health Plus
<p>Emergency Services – a serious medical condition resulting from injury, sickness or mental illness that arises suddenly and requires immediate care and treatment, generally within 24 hours of onset, to avoid jeopardy to the life or health of a person.</p> <p><i>Note: Customers may access these services in or out of network without a referral from the primary physician.</i></p>	Yes	Yes	Yes
<p>Immunizations – the provision of vaccines to prevent against the onset of certain diseases.</p> <p><i>Note: Physicians or other health care professionals practicing in the New York City should be sure to report to and work with the Citywide Immunization Registry.</i></p>	Yes	Yes	Yes
<p>Mental Health Care – all inpatient mental health services, including voluntary and involuntary admissions. On an outpatient basis, assessment, stabilization, treatment planning, discharge planning, verbal therapies, education, symptom management, case management services, crisis intervention, outreach services, chlozapine monitoring and collateral services as certified by the Office of Mental Health are covered.</p> <p><i>Note: Customers can self refer for one mental health assessment from a participating physician or other health care professional in a 12-month period. In the case of children, the referral may originate at the request of a school guidance counselor or similar source.</i></p>	<p>Non-SSI Medicaid members, Yes covered by health plan.</p> <p>SSI Medicaid Members-must use their Fee-for-Service Medicaid card.</p>	<p>Outpatient: Covered for 60 visits per calendar year for mental health and diagnosis and treatment of alcohol and substance abuse.</p> <p>Inpatient: Covered for 30 days per calendar year for inpatient mental health and alcohol and substance abuse services. Visits may include family therapy related to the enrolled child’s treatment.</p>	<p>Outpatient: Covered for 60 visits per year for mental health and diagnosis and treatment of alcohol and substance abuse.</p> <p>Inpatient: Covered for 30 days per year for inpatient mental health and alcohol and substance abuse services.</p>

Services	Medicaid	Child Health Plus	Family Health Plus
Preventive Health Services – care or service to avert disease or illness or its consequences. Coverage includes general health education classes, smoking cessation classes, childbirth education classes, parenting classes, and nutrition counseling. HIV counseling and testing is covered for all customers as part of a family planning visit.	Yes	Yes	Yes
Vision – includes the service of an optometrist and an ophthalmic dispenser. Coverage includes contact lenses, polycarbonate lenses, artificial eyes and replacement of lost or destroyed glasses (including repairs) when medically necessary. Artificial eyes are covered as ordered by a participating physician or other health care professional.	Yes	Yes (Lenses may be glass or plastic. Contact lenses are covered only if medically necessary)	Yes
Dental Care – includes preventive, prophylactic and other routine care, services and supplies, dental prosthetics required to alleviate a serious health condition, including one that affects employability.	Paid for by FFS Medicaid, except for customers residing in Nassau Co. where it is covered by the health plan	Yes	Yes
Dental Surgery – inpatient and referred ambulatory claims for medical services provided in an inpatient or outpatient hospital setting in conjunction with a dental procedure (e.g. anesthesiology, x-rays).	Yes	Yes as long as the surgery does not require inpatient hospitalization * If an inpatient stay is required, please contact the health plan for guidance re coverage.	Yes

Services	Medicaid	Child Health Plus	Family Health Plus
Prescription and Non-Prescription Drugs, Medical Supplies, and Enteral Formula – includes drugs dispensed by community pharmacies, over the counter drugs, medical or surgical supplies (e.g. gauze pads, bandages and diapers) and enteral formula.	<p>Paid for by FFS Medicaid</p> <p>(Note: New York State recently implemented a mandatory generic drug program for the Medicaid Program. For more information, call the Medicaid Hotline at 1-800-541-2831)</p>	Yes as long as the drug is prescribed by a person licensed to write prescriptions	<p>Yes as long as the drug is prescribed by a person licensed to write prescriptions</p> <p>Note: Over the counter drugs and medical or surgical supplies are NOT covered, including diabetic supplies, hearing aid batteries and smoking cessation agents as covered.</p>
Podiatry Care – foot care services. Covered when a customer’s physical condition poses a hazard due to the presence of localized illness, injury or symptoms involving the foot, or when performed as a necessary and integral part of otherwise covered services, such as the diagnosis and treatment of diabetes, ulcers, and infections.	Yes	Yes (Routine foot care is not covered)	Yes
Therapies – including radiation therapy, chemotherapy, injections, and medications provided at time of therapy.	Yes	Yes	Yes
Second Surgical Opinion	Yes	Yes	Yes
Second Medical Opinion	Yes	Yes	Yes
Cosmetic, plastic or reconstructive surgery	Reconstructive is covered	No	Reconstructive is covered

Medicaid Carved Out Services

Service	Medicaid	Child Health Plus	Family Health Plus
<p>Personal Care Agency Services – some or total assistance with personal hygiene, dressing and feeding, and nutritional and environment support (e.g. meal preparation and housekeeping). Such services must be essential to the maintenance of a patient’s health and safety in his or her own home. The service has to be ordered by a physician, and there has to be a medical need for the service.</p>	<p>Paid for by FFS Medicaid</p>	<p>No</p>	<p>No (Note: short-term home health care is covered, see Home Health Benefit Above)</p>
<p>Residential Health Care Facilities – nursing homes</p>	<p>Individuals who are permanent residents are covered by FFS Medicaid. UnitedHealthcare covers individuals who are residents for rehabilitation services on a short-term basis.</p>	<p>No</p>	<p>UnitedHealthcare covers individuals who are residents for rehabilitative services on a short-term basis.</p>
<p>Hospice Program – a coordinated program of home and inpatient care that provides non-curative medical and support services for persons certified by a physician to be terminally ill with a life expectancy of 6 months or less.</p>	<p>Paid for by FFS Medicaid</p>	<p>Yes</p>	<p>Yes</p>

Service	Medicaid	Child Health Plus	Family Health Plus
<p>Alcohol and Substance Abuse – includes the following categories of service:</p> <ul style="list-style-type: none"> • Methadone Maintenance Treatment Program, which consists of chemical management of patients with methadone; • Outpatient Substance Abuse Services provided by facilities licensed by the Office of Alcohol and Substance Abuse Services (OASAS), which provide multiple non-residential services to persons suffering from substance abuse or dependence or to their significant others under the direction of a physician; • Outpatient Alcoholism Rehab. Services, which provide full or half-day services to meet the needs of a specific target population of chronic alcoholic persons who need a range of services that are different from those typically provided in an alcoholism outpatient clinic; • Alcohol and Substance Abuse (ASA) Services Ordered by the LDSS and provided to customers who have been assessed as unable to work by the LDSS and who are mandated to receive ASA services as a condition of Medicaid or Public Assistance eligibility or who have been determined to be able to work with limitations and are simultaneously mandated by the district into ASA treatment pursuant to work activity requirements. 	Paid for by FFS Medicaid	No	No

Service	Medicaid	Child Health Plus	Family Health Plus
<p>Mental Health Services – includes the following categories of service:</p> <ul style="list-style-type: none"> • Intensive Psychiatric Rehab. Treatment Programs (IPRT) – time limited active psychiatric rehab. Designed to help a patient form and achieve mutually agreed upon goals in living, learning, working and social environments to overcome functional disabilities. • Day Treatment – clinic treatment, social training, task and skill training, and socialization activities. • Continuing Day Treatment – assessment and treatment planning, discharge planning, medication therapy, medication education, case management, health screening and referral, and symptom management to enhance current levels of functioning, maintain community living, and develop self-awareness and self-esteem. • Day Treatment Programs Serving Children – a blend of mental health and special education classes. • Home and Community Based Services Waiver for Seriously Emotionally Disturbed Children – services to children who would otherwise be admitted to an institution. This program is only in select counties. • Intensive Case Management – provides seriously and persistently mentally ill people with intensive, personal and proactive intervention to help them obtain those services needed to function in the community. • Partial Hospitalization – alternative to inpatient hospitalization or reduces the length of hospital stay through the provision of assessment and treatment planning, health screening and referral, symptom management, medication therapy, medication education, verbal therapy, case management, psychiatric rehabilitation readiness determination and referral, and crisis intervention. 	Paid for by FFS Medicaid	No	No

Service	Medicaid	Child Health Plus	Family Health Plus
Rehabilitation for Residents of OMH Licensed Community Residents – medically necessary interventions, therapies and activities that are therapeutic and remedial in nature	Paid for by FFS Medicaid	No	No
Mental Retardation and Developmental Disabilities Services including: <ul style="list-style-type: none"> • Long Term Therapy Services provided by Article 16 Clinic Treatment Facilities or Article 28 Facilities – services designed to achieve best possible functional level. • Day Treatment – diagnostic, treatment and rehabilitation provided to individuals who need a broad range of services but who do not need 24 hour care and medical supervision. • Comprehensive Medicaid Care Management – on-going, comprehensive case management. • Home and Community Based Services Waivers – services designed to allow developmentally disabled people who would otherwise be admitted to a Intensive Care Facility to live at home. • Services Provided Through the Care at Home Program – serve children whose family income is too high to qualify for Medicaid but who can be cared for at home if provided additional services. 	Paid for by FFS Medicaid	No	No
Early Intervention Program – services are targeted at any child age birth to 2 who has a developmental delay or who has a high probability of a developmental delay.	Paid for by FFS Medicaid	Yes, if covered by the standard benefit package, and the provider is par	No
Preschool Supportive Health Services – certain educationally related medical services provided by approved preschool special education programs for young children with disabilities (age 3-4).	Paid for by FFS Medicaid	No	No
School Supportive Health Services – certain educationally related medical services provided by approved special education classes for children age 5 – 21 with disabilities.	Paid for by FFS Medicaid	No	No

Service	Medicaid	Child Health Plus	Family Health Plus
Comprehensive Case Management – assist clients in accessing necessary services in accordance with the goals contained in a written case management plan. Targeted population includes pregnant teens and mentally ill.	Paid for by FFS Medicaid	No	No
Direct Observed Therapy for TB Disease – direct observation of oral ingestion of TB medications to assure patient compliance with the physician’s prescribed medication regimen.	Paid for by FFS Medicaid	No	No
AIDS Adult Day Health Care – designed to assist individuals with HIV disease to live more independently in the community or eliminate the need for residential health care services.	Paid for by FFS Medicaid	No	No
HIV COBRA Care Management – intensive, family-centered case management and community follow-up activities by case managers, case management technicians, and community follow-up workers.	Paid for by FFS Medicaid	No	No
Chiropractic Services	Not Covered by UnitedHealthcare or by FFS Medicaid unless the service is part of an Early and Periodic Screening, Diagnostic and Treatment Program (EPSDT) service to a child under age 19.	No	No
Fertility Services	Not Covered by UnitedHealthcare or by FFS Medicaid	No	No

Wellness Programs

UnitedHealthcare sponsors various activities for physicians, other health care professionals and customers to encourage healthy lifestyles and disease prevention. These activities include mailings to physicians and other health care professionals and programs for customers, such as health care manuals, reminders about preventive medicine practices and mailings. Initiatives are based on data that indicate areas of health care needing improvement.

UnitedHealthcare collaborates closely with many community agencies and resources. Call our Health Services Department for help in coordinating with school-based health centers, WIC, PCAP, the court system and any court-ordered evaluations and treatment, family planning clinics, services focused on the homeless, and/or other community-based providers.

Mental Health and Substance Abuse Services

United Behavioral Health (UBH) is a specialty managed behavioral health care organization that provides all aspects of mental health, substance abuse services and case management.

UnitedHealthcare customers are allowed to self-refer for one mental health/substance abuse visit per year. Subsequent visits require prior authorization through UBH.

Referring a customer to UBH

Managed Medicaid, CHP, or FHP customers should call UBH to access UBH mental health and substance abuse services. A customer is not required to have a referral from his or her primary physician to access mental health and substance abuse services. Customers will be evaluated by a clinical mental health professional who identifies the appropriate treatment pathway to meet the customers' individual needs. UBH provides service directly through its own multidisciplinary staff or arranges for service through UBH's network of participating physicians and other health care professionals.

Crisis Services

UBH clinicians are available 24 hours a day, seven days a week for urgent and emergency services. If a customer needs crisis services, call UBH.

Questions or Concerns

Call UBH for assistance in interpreting mental health and substance abuse benefits or to address concerns regarding services.

Customer Services

Enrollment

Our team of marketing representatives coordinate with community-based organizations and providers to educate potential customers about UnitedHealthcare. You are welcome to contribute to this process, but you must comply with the marketing rules set forth by the counties with which UnitedHealthcare contracts. These rules include, but are not limited to: no cold-call telephoning, no door-to-door solicitation, mailings sent only at the request of the potential customer, all materials and incentives must be pre-approved, and physicians or other health care professionals must tell their patients about all the managed care organizations with which they contract and must help individuals choose a plan best suited for them based on their individual needs. New enrollments are effective the first day of the month. UnitedHealthcare ID cards are sent to new customers within 10 days of their effective date. If a customer needs to access services prior to receiving his or her card, you can verify eligibility by calling Network Management or logging on to the physician portal, www.unitedhealthcareonline.com. Once a month, primary care physicians will receive a roster of UnitedHealthcare Medicaid, CHP and FHP customers who are under their care. Their Medicaid, CHP and FHP enrollment shall not exceed the customer-to-physician ratios prescribed by the New York State Department of Health. If you need assistance in tracking your UnitedHealthcare Medicaid, CHP and FHP customer list(s), contact Network Management.

Disenrollment

New York State supports a 12-month lock-in policy for Medicaid and FHP customers. These customers can disenroll from UnitedHealthcare for any reason in the first 90 days of enrollment. For the remainder of the year, they can only disenroll for good cause. A customer wishing to disenroll should call Customer Service for information about who to contact to terminate his or her coverage.

Customer Orientation

Applicants for UnitedHealthcare Medicaid, CHP, and FHP have access to information about health plan options via the New York City Department of Health and Mental Hygiene, Division of Health Care Access and Improvement, County Department of Social Services, the State Department of Health or UnitedHealthcare's marketing representatives, who are available locally to educate and enroll. UnitedHealthcare's marketing representatives are directed to thoroughly explain the benefits and limitations of each plan as they apply to the individual applicant's lifestyle and location. Each new customer also receives a welcome packet, which contains information about how to use the health plan and services and benefits available. This information is also available on audiotape.

Care Coordination/ Health Services

Currently, AmeriChoice of New York, a UnitedHealth Group company, is managing the Care Coordination of the UnitedHealthcare Medicaid, Child Health Plus and Family Health Plus members through its Health Services Unit. This arrangement has been in place since March, 2003. We anticipate some changes to the guidelines in 2004, which will be communicated to you before the implementation of any of these changes.

Vaccines for Children Program(VFC)

We require all primary physicians who are contracted with our Medicaid Program to participate in the Vaccines for Children (VFC) Program. This program provides free vaccines for Medicaid recipients. To enroll or request information, call the New York State Department of Health at 1-518-473-4437 or the New York City Department of Health and Mental Hygiene at 212-276-2265.

Encounter Reporting

Encounter Data

Submit customer encounter data to UnitedHealthcare using the approved Encounter Form (CMS 1500). The encounter data enables us to:

- track utilization
- analyze patient care patterns
- adhere to state and federal HMO reporting requirements
- provide a source for quality assurance studies

Encounter Forms

Submit the approved form to UnitedHealthcare at least monthly. Complete the following information:

- customer name, birth date, sex, address and customer number found on the customer's ID card
- physician name and participating physician or other health care professional number
- date of service
- diagnosis in a written description and the appropriate ICD diagnosis code, procedure in a written description and the appropriate CPT code, or the HCPCS procedure codes as established by the federal government, and type of visit

Supplement to the New York State Regulatory Chapter

Customer Non-liability

In no event, including but not limited to, nonpayment by UnitedHealthcare or IPA, insolvency of UnitedHealthcare or IPA, or breach of the agreement between you and us, shall you bill, charge, collect a deposit from, seek compensation, remuneration or reimbursement from, or have any recourse against a subscriber and customer or person acting on his/her/their behalf, for services provided pursuant to the subscriber contract for CHP, or county Medicaid Managed Care contract, or the State Family Health Plus contract, and the agreement between you and us, for the period covered by the paid customer premium.

In addition, in the case of Medicaid Managed Care, Child Health Plus or Family Health Plus, you will not bill the County Department of Health or the State Department of Health for covered services within the Medicaid Managed Care Benefit Package as set forth in the Agreement between UnitedHealthcare and the county departments of social services for Medicaid or the Agreements between UnitedHealthcare and the State Department of Health for Child Health Plus and Family Health Plus.

Records Access

When enrollee's medical records and other personally identifiable information pertain to Medicaid, Child Health Plus, or Family Health Plus reimbursable services, the provider agrees to disclose the nature and extent of services provided and to furnish the records to DOH and/or the United States Department of Health and Human Services, the County Department of Social Services, the Comptroller of the State of New York and the Comptroller General of the United States and their authorized representatives upon request.

Domestic Violence (Supplement to Clinical Guidelines Packet)

Domestic violence impacts people of all racial, socio-economic, educational, religious and cultural backgrounds, and the rate of injury is staggering. Health care providers are often the first place victims of domestic violence turn for help. As a result, it is important to be able to recognize and treat people in this situation.

One widely recognized screening tool is RADAR, which incorporates the following activities:

- R: Routinely screen female patients
- A: Ask direct questions
- D: Document your findings
- A: Assess patient safety
- R: Review options and referrals

Copies of the full tool can be obtained from the New York State Department of Health, Office for the Prevention of Domestic Violence at 518-486-6262 or 212-613-4398.

UnitedHealthcare has staff available to assist victims of domestic violence in obtaining counseling, accessing community resources, and developing a plan to escape the violent situation, as appropriate. Members identified as victims of domestic violence can call Customer Service at 1-800-396-7177 and ask to be connected with the Domestic Violence Coordinator.

The results of the assessment and referral should be documented in the member's chart along with scale photography and/or body maps, as necessary. In addition, an opinion about whether the member's explanation is consistent with the assessment findings should be recorded.

The following list contains additional resources for members identified as victims of domestic violence as well as for providers seeking additional information about treatment.

New York State Hotlines

NYS Domestic Violence Hotline – English	1-800-942-6906
NYS Domestic Violence Hotline – Spanish	1-800-942-6908
NYS Child Abuse Mandate Reporters Line	1-800-635-1522

New York City Programs

Victim Services Hotline	1-212-577-7777	
Battered Woman Hotline	1-212-274-3204	
Aegis Battered Women's Program (24 Hours)	1-800-621-HOPE	1-212-828-3100
Alianza Dominicana Hotline	1-888 343-4866	1-212-543-0836

National Programs

National Network to End Domestic Violence	1-212-543-5566	www.nnedv.org
Family Violence Prevention Fund	1-415-252-8900	www.fcpf.org
Center for the Prevention of Sexual and Domestic Violence	1-206-634-1903	
National Council on Child Abuse and Family Violence	1-800-429-6695	
Children's Defense Fund	1-202-628-8787	

If a patient is abused or maltreated in a residential health care facility, call the New York State Department of Health 1-212-502-0874 or 1-888-201-4563.

Cases of suspected abuse by a home attendant employed by an agency contracted by the NYC Human Resources Administration must be reported to 1-212-420-7547. Other home health care agencies suspected of abusing/neglecting their patients may be reported to the NYS DOH 1-212-502-0761 or 1-800-628-5972.

