



# **Preferred Administrators Benefits Fiscal Year October 1, 2015 – September 30, 2016**

**Preferred**  
**ADMINISTRATORS**



# **Preferred Administrators Benefits**

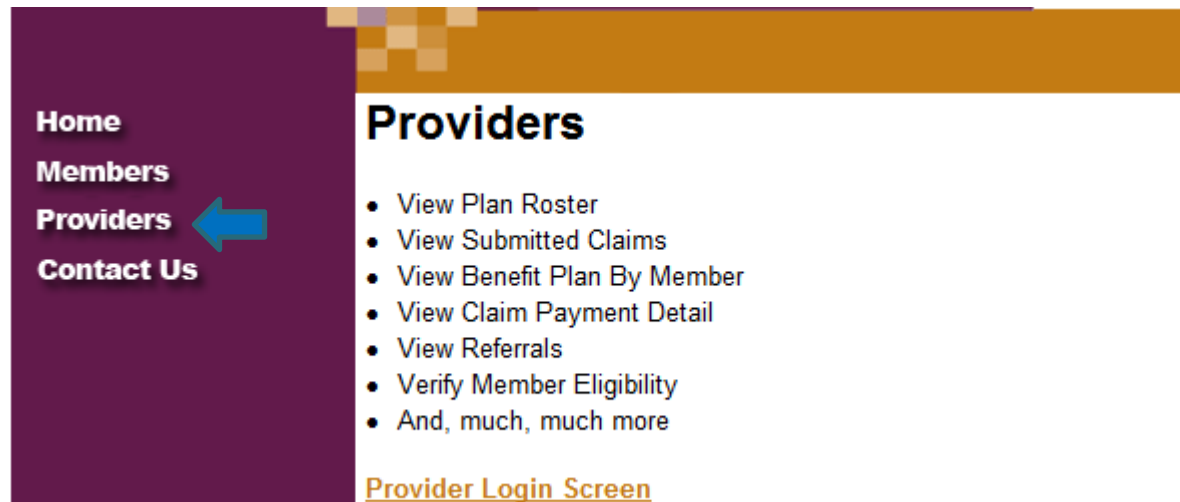
## **Fiscal Year**

### **October 1, 2015 – September 30, 2016**

- Preferred Administrators Provider Resources for Benefits and Eligibility
- Deductibles
- Maximum Out of Pocket
- Benefit differences between UMC and EPCH
- New Prior Authorization Requirements
- Synagis, Flu, and Preventive Services

# Preferred Administrators Provider Resources for Benefits and Eligibility

Preferred Administrators strongly encourages providers to use online resources to verify member information. You can log into [www.preferredadmin.net](http://www.preferredadmin.net) and select Providers and go into log in screen.



## New Providers

- If you are not a registered user, visit the [Registration page](#) to submit a request for access.
- If you have any difficulty accessing this information, call our helpline at 532-3778, or 1-877-532-3778 (if outside the area).
- If you continue to have problems getting into your account, please email us directly by [clicking here](#). Please provide us with your username for faster service.

If you are not registered, you will need to go to Registration Page and submit a request for access. If you have previously registered, you can log in with your User ID and Password.

# Features on Provider Portal

## Manage Patients

- [Find a Patient or Member](#)
- [Submit Amended Authorizations](#)
- [Submit an Inpatient Hospital Notification](#)
- [Submit an Outpatient Authorization Request](#)

## Claims and Services

- [View Recent Claims](#)
- [View Outpatient Services](#)
- [View Inpatient Stays](#)
- [Submit Professional Claim](#)
- [Submit Corrected Claims](#)
- [Submit Facility Claim via TexMedConnect\(TMC\)](#)
- [How to submit claims using TMC](#)
- [Provider Appeals](#)

## ICD10 Resources

- [ICD9 To ICD10 Mapping](#)

## Provider Look-up

- [Provider Directories](#)

67

# Health X Fax System

Call automated fax service at  
(915) 225-5463

Health X Fax System

You can also verify eligibility, benefits, claim and authorization status, by calling our automated Health X. You do this by calling our automated fax service at 915-225-5463 and entering the provider's TAX ID to verify claims status/authorizations or member's information to verify eligibility or benefits.

# Verifying Benefits



The screenshot shows the Preferred Administrators website. The header features the logo "Preferred ADMINISTRATORS" in orange and purple. A left sidebar contains navigation links: Home, Members (highlighted with an orange bar and a blue arrow pointing to the main content), Providers, and Contact Us. The main content area is titled "Members" and includes a paragraph: "The Member area is an easy-to-navigate page where you can perform the following functions:". Below this is a bulleted list of functions: View Enrolled Family Members, View Submitted Claims, View Available Benefits, View Demographics, Change PCP, View Authorizations, and And, much, much more. Further down, there are links for "Member Login Screen", "Member Registration", and "Flex Spending Account/HRA". A section titled "Member News and Resources" lists several documents: "UMC Plan Document 2015-2016", "EPCH Plan Document 2015-2016", "2015-2016 UMC SBC EFF 10.1.15", "2015-2016 EPCH SBC EFF 10.1.15", and "Notice of Privacy Practices". On the right side of the page, there is a "Provider Directory Search" button with a magnifying glass icon, a note about downloading Adobe Acrobat, and a thumbnail image of the "Preferred ADMINISTRATORS PROVIDER DIRECTORY" document.

**Preferred ADMINISTRATORS**

Home  
**Members**  
Providers  
Contact Us

## Members

The Member area is an easy-to-navigate page where you can perform the following functions:

- View Enrolled Family Members
- View Submitted Claims
- View Available Benefits
- View Demographics
- Change PCP
- View Authorizations
- And, much, much more

[Member Login Screen](#)  
[Member Registration](#)  
[Flex Spending Account/HRA](#)

**Member News and Resources**

- [UMC Plan Document 2015-2016](#)
- [EPCH Plan Document 2015-2016](#)
- [2015-2016 UMC SBC EFF 10.1.15](#)
- [2015-2016 EPCH SBC EFF 10.1.15](#)
- [Notice of Privacy Practices](#)

**Provider Directory Search**

Click on Picture to Download. You need Adobe Acrobat to read a PDF. If you don't have Adobe Acrobat you can download it for [free here](#).

**Preferred ADMINISTRATORS PROVIDER DIRECTORY**

Preferred Administrators Provider

Under **Member News and Resources**, select UMC Plan Document or EPCH Plan Document or select Summary of *Benefits*. Online resources are available 24 hours a day, seven days a week.

- If you are unable to verify eligibility or benefits using these methods, you may call our Provider Relations Department at 915-532-3778 ext. 1507 from 7:00 am to 5:00 pm Monday to Friday.
- If further information is required, providers may call our Customer Service Department at 915-532-3778 from 7:00 am to 5:00 pm Monday to Friday.

# Deductibles for UMC and EPCH

Deductible Per Fiscal Year UMC/EPCH	UMC EPCH	Texas Tech Provider	PPO Provider
<b>Per Covered Participant</b>		\$125	\$1,250
<b>Maximum Family Deductible Limit</b>		\$375	\$3,750

# Maximum Out of Pocket (MOP)

UMC /Out-of-Pocket Maximum (MOP) Per Fiscal Year <u>combined with</u> <u>Medical and Pharmacy</u> <u>(MOP)</u>	UMC EPCH	Texas Tech Provider	PPO Provider
<b>Per Covered Participant</b>		N/A	\$6,600
<b>Family Out-of-Pocket</b>		N/A	\$13,200

EPCH /Out-of-Pocket Maximum (MOP) Per Fiscal Year <u>combined with</u> <u>Medical and Pharmacy</u> <u>(MOP)</u>	UMC EPCH	Texas Tech Provider	PPO Provider
<b>Per Covered Participant</b>		N/A	\$6,000
<b>Family Out-of-Pocket</b>		N/A	\$12,000

The out-of-pocket includes any applicable deductibles, coinsurance and co-pays for services rendered with in-network providers. Once MOP has been met, covered services will be covered at 100% with any in-network provider.



# Difference between benefits for UMC and EPCH

## University Medical Center of El Paso (UMC)

- Does not have Domestic Partners
- Behavioral Max 30 Visits Per Fiscal Year
- Maximum Out of Pocket is \$6,600 per Individual and \$13,200 Maximum Family Amount

## El Paso Children's Hospital (EPCH)

- Covers Domestic Partners
- No Behavioral Max
- Maximum Out of Pocket is \$6,000 per Individual and \$12,000 Maximum Family Amount

# Preferred Administrators ID card



Example of a University Medical Center of El Paso ID Card



Example of a El Paso Children's Hospital ID Card

# Important Note to Remember!

- Preferred Administrators Network physicians, who provide services at UMC or EPCH, will have professional services paid at the contracted rate. Member's responsibilities will be UMC/EPCH/Texas Tech benefit coverage level.
- Effective October 1, 2012 – The Hospitals at Providence (formerly Tenet) and its affiliates are considered an out of network Provider.

# Prior Authorization

The following are new Pre-Authorization Requirements effective October 1, 2015. You can view the Prior Authorization Flyer at [www.preferredadmin.net](http://www.preferredadmin.net)

- Varicose vein treatments/services in office or outpatient
- Fetal Echocardiography
- Dental Anesthesia for children under age of 18, meeting medical criteria
- Dialysis professional services and dialysis labs
- Note: It is the Provider's responsibility to request a prior authorization for services listed on the flyer. For questions on Pre-Authorization, you can call 915-532-3778 ext. 1500

# Preventive Services

**Preferred Administrators** will cover the recommended preventive services under the Preventive Care Services benefit as mandated by Patient Protection and Affordable Care Act (PPACA,) with no cost sharing when provided by a Network provider. For a complete listing, go to [www.preferreadmin.net](http://www.preferreadmin.net)

# Flu Vaccine Preferred Administrators

## Plan

- **Preferred Administrators**

## Ages

- All Ages

## Location

- PCP or SPECIALIST (flu shot is not covered at pharmacy locations)

Preferred Administrators participating providers please review Preventative Service Listing for appropriate Diagnosis and CPT codes at

[www.preferredadmin.net](http://www.preferredadmin.net)

# Synagis

## Preferred Administrators

- Providers are required to send in the El Paso First Prior Authorization Form with clinical information to **El Paso First Utilization Management Department at 915-298-7866.**
- The authorization form can be located on the El Paso First website.

<http://epfirst.com/forms/Prior%20Authorization%20Form%20-%20Outpatient-Scheduled%20Procedures.pdf>

For additional information concerning Synagis administration for Preferred Administrators Members, please contact **El Paso First Health Plans at 915-532-3778.**

# Preferred Administrators Preventative Services

- Preventative services are updated every fiscal year
- Under Section 2713 of The Affordable Care Act, private health plans **must** provide coverage for a range of preventative services
- *ACA requires plans to cover the following Services –*
  - 1. Evidence-Based Screenings and Counseling**
  - 2. Preventive Services for Children and Youth**
  - 3. Routine Immunizations**
  - 4. Preventive Services for Women**



# Preferred Administrators Preventative Services Cont.

- If Member receives a preventive service, the Member ***should not*** be responsible for co-payments, deductibles or co-insurances.
- However, if a diagnostic or routine chronic service is performed during the same healthcare visit as a preventive service, the Member will have a copayment, coinsurance or deductible applied if applicable.
- **Listing of the covered services available on the Preferred Administrators website.**

[www.preferredadmin.net](http://www.preferredadmin.net)

## Preferred ADMINISTRATORS

Home  
Members  
Providers  
Contact Us

### Welcome

Preferred Administrators is a third party administrator contracted to service medical plan benefits. Preferred Administrators is committed to improving the health of El Paso by making health care services available, accessible and affordable.

[Login Screen](#)



## Preferred ADMINISTRATORS

Home  
Members  
Providers  
Contact Us

### Providers

- View Plan Roster
- View Submitted Claims
- View Benefit Plan By Member
- View Claim Payment Detail
- View Referrals
- Verify Member Eligibility
- And, much, much more

[Provider Login Screen](#)

[Specialty Drug List](#)

[OptumRx Core Formulary](#)

If you have any difficulty accessing this information, call our helpline at 532-3778, or 1-877-532-3778 (if outside the calling area).

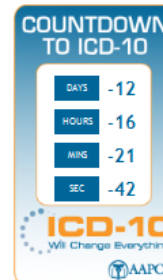
If you continue to have problems getting into your account, please email us directly by [clicking here](#). Please provide us with your username for faster service.

### Forms

- [Pre-Authorization Flyer-Preferred Administrators](#)

### Fax Blasts

- [TPA-PREVENTIVE SERVICE LISTING Fiscal Year 2015-2016](#)
- [TPA-PR-Provider Notification of TPA New Benefits 2015 2016](#)
- [TPA-Immunization Memo-Effective 08.31.15](#)
- [TPA- Revised Immunization Letter and Addendum Memo-Effective 09.21.15](#)
- [TPA-IUD Reimbursement Memo-Effective 05.15.15](#)
- [TPA-Synagis Provider Letter-Effective 11.21.14](#)
- [TPA-Prior Auth Toll Free Fax Numbers-Effective 11.11.14](#)
- [TPA-Global Billing Memo-Effective 11.10.14](#)
- [TPA-TP1 and TP2 Forms Memo-Effective-07.01.14](#)
- [TPA-OB Specialty Training Invite-Effective 07.15.14](#)
- [TPA Behavioral Specialty Training Invite -Effective 06.30.14](#)
- [TPA-Implementation for ICD 10 Delayed-effective 04/14/14](#)
- [TPA-Contraceptives for Preferred Administrators Members-Effective 03.01.13](#)
- [TPA-NCCI Changes Memo Effective 04.01.14](#)
- [TPA-NDC Billing Requirements Memo-Effective 01.14.14](#)
- [TPA-NDC Specialty Training PCP and Specialists-Effective 01.16.14](#)
- [TPA-NDC Specialty Training Ancillary-Effective 01.17.14](#)
- [TPA-Advance Practice Registered Nurses and Physician Assistants Notice-Effective 01.01.14](#)
- [TPA-Provider Quarterly Orientation Invite- Effective 11.08.13](#)



Preventive Service:	CPT Code(s):	ICD9 Diagnosis Code(s)	ICD10 Diagnosis Code(s) Note: ICD-10 codes are effective 10/1/15
<p>Contraceptive methods to include sterilization and Contraceptive Counseling. All Contraceptive methods, services, and supplies covered must be approved by the Food and Drug Administration (FDA). Coverage includes counseling services on contraceptive methods provided by a Physician, Obstetrician or Gynecologist. Covered Contraceptive to include Female Generic Prescription Drugs are covered.</p> <p>All IUDs are covered by the Medical Plan to include its insertion and removal.</p> <p>Please refer to the list of female generic medications posted online. These medications are reimbursed by our RX Pharmacy Vendor (OptumRx).</p>	<p>99401-99404, 99354-99355, 99201-99205, 99211-99215, 99241-99245, 58600-58615, 58670-58671, 58300-58301, J7300-J7307, 11980-11981, 11983, 57170, A4266, A4261, A4264, J1055, J1050, 96372, 58565</p>	<p>V25.0, V25.01, V25.02, V25.03, V25.04, V25.09, V25.1, V25.11, V25.12, V25.13, V25.2, V25.3, V25.4, V25.40, V25.41, V25.42, V25.43, V25.49, V25.5, V25.8, V25.9</p>	<p>Z30.011, Z30.012, Z30.013, Z30.014, Z30.018, Z30.019, Z30.02, Z30.09, Z30.2, Z30.40, Z30.41, Z30.42, Z30.430, Z30.431, Z30.432, Z30.433, Z30.49, Z30.8, Z30.9</p>
Sterilization for men	<p>99201-99205 99211-99215 55250, 55450</p>	V25.2	Z30.2

# Questions



# Contact Information

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**298-7198 ext. 1073**

**Edgar Martinez-Director of Member Services**

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**298-7198 ext. 1064**



**Thank You for  
Attending Providers!**