

# Welcome Providers



## Provider Quarterly Training

### November 13, 2014



**EL PASO FIRST**  
*Health Plans, inc.*

# Agenda

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- **Welcome & Introductions**
- [Updated Provider Manual](#)– Provider Relations
- [THSteps Updates / Accelerated Services for Children of Migrant Farmworkers who Travel / Updated Website](#) – C.A.R.E.
- [Long Acting Reversible Contraception / Prenatal-Postpartum Online Verification Tool / Flu Vaccine / Synagis Season](#) – Health Services
- [2015 Pay for Quality / 2015 PIPs / 2015 HEDIS Medical Records Requests](#) – Quality Improvement
- [Electronic Claims / ICD-10 Updates / National Drug Code](#) – Claims
- [Complaints & Appeals Process / Special Investigations Unit](#) – Compliance
- [Overview of Member Services](#) – Member Services
- [Preferred Administrators Updates](#) – Member Services
- **Close**

# Updated Provider Manual

Rene Duran

Provider Relations Representative

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# Provider Manual

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- El Paso First will no longer provide the Manual on a CD format unless requested.
- The Provider Manual only applies to STAR and CHIP programs.
- Providers are able to access this information on our web site @ [www.epfirst.com](http://www.epfirst.com).

# Where to locate the Provider Manual

[www.epfirst.com](http://www.epfirst.com)

915-532-3778

1-877-532-3778

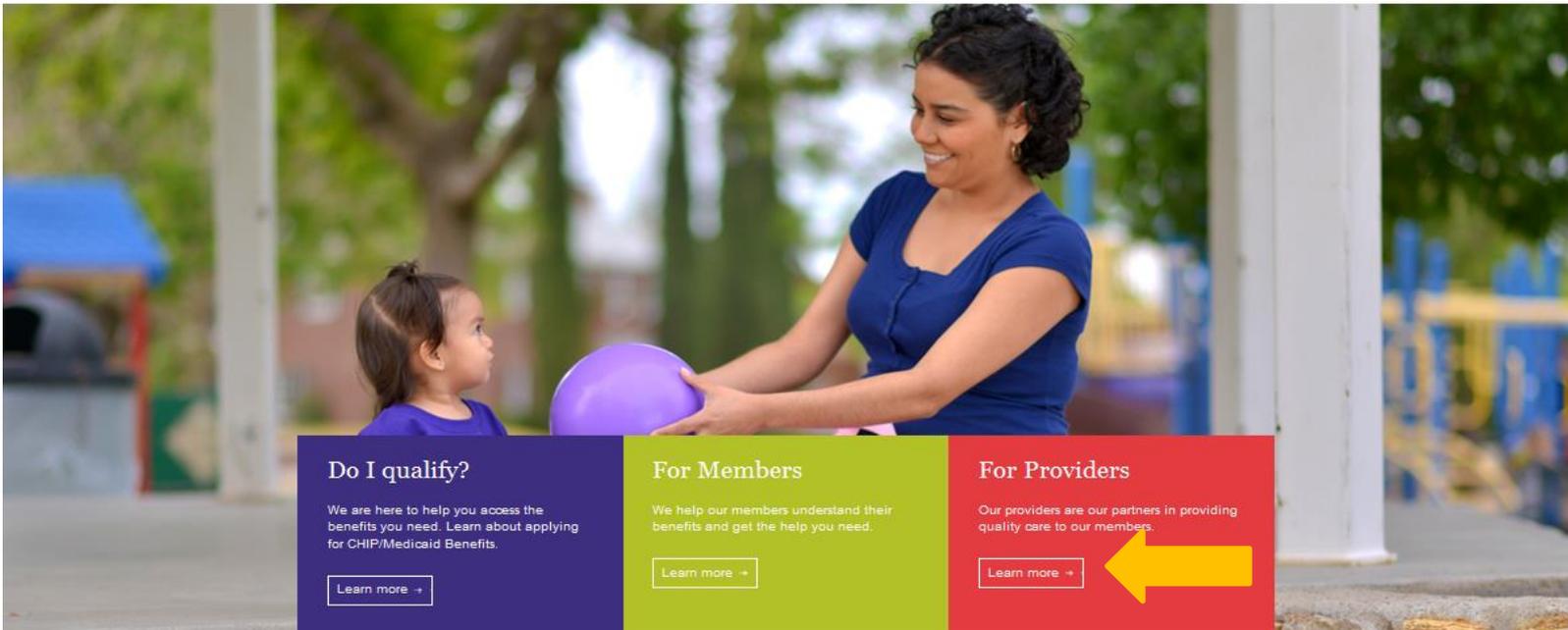
For Providers

[Web Portal Login →](#)

[En Español](#)



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Health Plans, inc.



## Do I qualify?

We are here to help you access the benefits you need. Learn about applying for CHIP/Medicaid Benefits.

[Learn more →](#)

## For Members

We help our members understand their benefits and get the help you need.

[Learn more →](#)

## For Providers

Our providers are our partners in providing quality care to our members.

[Learn more →](#)

## Welcome to El Paso First!

We are your local, non-profit health plan serving El Paso and Hudspeth counties. Our team of bilingual professionals is dedicated to helping our members and providers. Take the time to browse our website and access the information you need. Thank you for your visit.

## Health CARE Options

Health CARE Options is a benefit program for low-income adults.

[Read more about the program here →](#)

## Preferred Administrators

Preferred Administrators is the health insurance coverage for all Associates of the El Paso County Hospital District and employees at El Paso Children's Hospital.

[Learn More→](#)

Call us at  
**915-532-3778**

Outside the El Paso  
**1-877-532-3778**

For Providers  
**[Web Portal Login](#)** →

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## We Are Proud!

We are proud of our extensive network of providers and the quality health care they provide to our members. Our network currently has more than 1,000 providers, including physician groups, specialists, ancillary providers, and 8 hospitals offering comprehensive care to our members. To view our network of providers, please select Provider Directories to the right.



If you are not part of our network and would like information about joining El Paso First, please [click here](#) to email the Provider Relations Department or call us at 915-532-3778 ext. 1507. You can also [view our El Paso First Department Extensions here](#). Thank you for your interest!

**WEB PORTAL LOGIN** →

### PROVIDER FORMS



The forms you need.  
[Learn More](#) →

### PROVIDER MANUAL



All you need to know about providing services to El Paso First members.  
[Read More](#) →

### PROVIDER DIRECTORIES & MEMBER HANDBOOKS



Provider Directories and Member Handbooks breakdown by Program.  
[Read More](#) →

### FIND A DOCTOR



CHIP & STAR Provider Directory  
[Search](#) →

### PROVIDERS NEWSLETTER



Health Quarterly Newsletter [Read More](#) →

**Click on the Read More link to access the Provider Manual**

You may now begin to  
access the Provider  
Manual.

# **EL PASO FIRST**

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## Provider Manual

September 1, 2014

### STAR Medicaid & CHIP Programs

1145 Westmoreland Dr.  
El Paso, Texas 79925  
Toll Free- 1-877-532-3778  
915-532-3778  
[www.epfirst.com](http://www.epfirst.com)

Service Area: El Paso and Hudspeth Counties  
(STAR Medicaid and CHIP)



# Contact Information

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**Rene Duran**  
**Provider Relations**  
**Representative**  
rduran@epfirst.com  
(915) 532-3778 ext. 1037

Provider Relations Department  
(915) 532-3778 ext. 1507

# Texas Health Steps Updates

Maritza E. Lopez, MPH

Texas Health Steps Coordinator

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# THSteps Updates

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- The Texas Health Steps Quick Reference Guide has been updated. Under the column titled “Immunizations Administered,” vaccine procedure code **90688** has been added and vaccine procedure code **90669** has been removed. The updated document is available on the following website:  
[http://www.tmhp.com/TMHP File Library/Provider Manuals/THStepsQRG/THSteps\\_QRG.pdf](http://www.tmhp.com/TMHP_File_Library/Provider_Manuals/THStepsQRG/THSteps_QRG.pdf)
- For more information, call the TMHP Contact Center at 1-800-925-9126.

# THSteps Updates

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- **Beginning September 1, 2014, reporting of Critical Congenital Heart Disease (CCHD) is mandatory in Texas**
- Please go to the Newborn Screening website at [www.dshs.state.tx.us/newborn/](http://www.dshs.state.tx.us/newborn/) for complete information on CCHD screening and reporting in Texas, and to access the CCHD toolkit.

# THSteps Updates- ADHD Prescribing

- Texas Medicaid encourages appropriate prescribing for Attention Deficit Hyperactivity Disorder (ADHD). The following guidelines are provided as resources on appropriate clinical guidelines related to diagnosis, evaluation, and treatment of ADHD. This information reinforces the importance of frequent reevaluation of children on these medications. Please review the guidelines from:
  - The American Academy of Pediatrics  
<http://pediatrics.aappublications.org/content/early/2011/10/14/peds.2011-2654>
  - The Department of Family Protective Services guidelines, which are also used by the Department State Health Services.  
[http://www.dfps.state.tx.us/documents/Child\\_Protection/pdf/TxFosterCareParameters-December2010.pdf](http://www.dfps.state.tx.us/documents/Child_Protection/pdf/TxFosterCareParameters-December2010.pdf)

# ADHD Follow-up visits

- Providers may be reimbursed for ADHD follow-up visits, consistent with Medicaid policy.
- Providers should bill for this service with the appropriate procedure code and diagnosis applicable to each follow-up visit.
- There are procedure codes for such a visit even when they are not provided by mental health providers.
- Any questions about the use of these parameters or billing and reimbursement for ADHD follow-up visits can be directed to:
  - Dr. Emilie Attwell Becker
  - M.D., Mental Health Medical Director
  - HHSC Office of Health Policy and Clinical Services
  - (512) 380-4310 or [Emilie.Becker@hhsc.state.tx.us](mailto:Emilie.Becker@hhsc.state.tx.us)
- **ADHD Medication Follow-up**
  - Medicaid providers should offer clinically appropriate services and bill according to the payable procedure codes that can be found in the Texas Medicaid Provider Procedure Manual (TMPPM). See the TMHP online fee look up search for payable procedure codes at [http://www.tmhp.com/Pages/Medicaid/Medicaid\\_home.aspx](http://www.tmhp.com/Pages/Medicaid/Medicaid_home.aspx)

# ImmTrac Registry

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- Free service
- Stores child's immunization information electronically
- One centralized system
- Consent is during birth registration process OR completion of consent form
- Written consent for participation is only required **one time**.
- Clients may withdraw consent and request removal of their record from ImmTrac at any time.

# ImmTrac Registry

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- To obtain more information about ImmTrac, please contact the DSHS Immunization Branch's information hotline at (800) 252-9152. You may also:
  - Send an e-mail to [ImmTrac@dshs.state.tx.us](mailto:ImmTrac@dshs.state.tx.us)
  - Visit [www.ImmTrac.com](http://www.ImmTrac.com) or [www.ImmTracForEveryone.com](http://www.ImmTracForEveryone.com)
  - Log on to:  
<http://www.dshs.state.tx.us/immunize/immtrac/default.shtm>

*Texas Department of State Health Services, ImmTrac Group – MC 1946, P.O. Box 149347, Austin, TX 78714-9347  
(512) 458-7284 03/19/2012*

# Contact Information

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**Maritza E. Lopez**

**Texas Health Steps Coordinator**

915-298-7198 ext. 1071

[mlopez@epfirst.com](mailto:mlopez@epfirst.com)

**Adriana Cadena**

**C.A.R.E. Unit Manager**

915-298-7198 ext. 1127

[acadena@epfirst.com](mailto:acadena@epfirst.com)

**Overview:**  
**Program for Children of Farm  
Workers who Travel for Work**

Lluvia Acuña  
Migrant Outreach Coordinator

**EL PASO FIRST**  
*Health Plans, inc.*

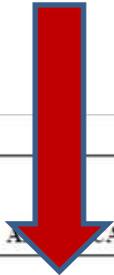
# Accelerated Services for Children of Farm Workers who Travel for Work

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- State initiative to provide a THSteps checkup and accelerated services to children of farm workers who travel for work due to the uniqueness of the population.
- Coordinate with the Migrant Outreach Coordinator for provider education on these services.

# Indicator on Roster

An indicator was introduced to the THSteps Members Due Roster on May 2011.



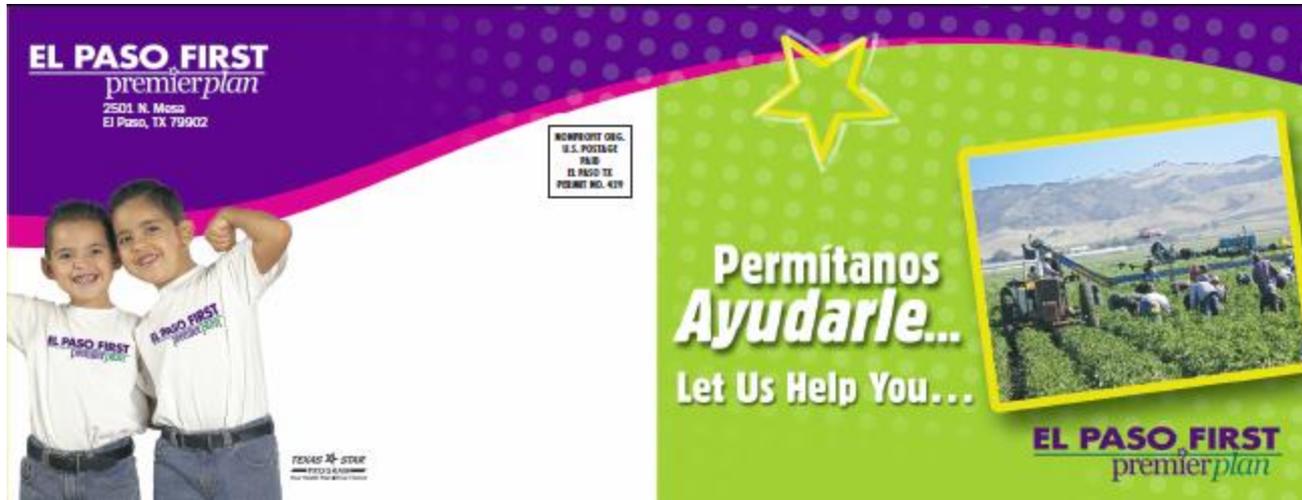
ROBERTO CANALES MD PA  
EL PASO, TX 79902

ASSOCIATIONS

El Paso First Health Plans, Inc.  
STAR Master Roster - THSteps Due Members Only  
July 2011

Member#	Member Name	Migrant	Age	DOB	Sex	Phone	Address	Effective	THSteps	PCPName
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# Postcard



<p><b>Estimado miembro, permitanos ayudarle:</b></p> <p>El Plan Premier de El Paso First tiene servicios especiales de Medicaid para niños de trabajadores temporales del campo, por eso nos gustaria saber lo siguiente:</p> <p>¿Es usted un trabajador temporal del campo?          Si <input type="radio"/> No <input type="radio"/></p> <p>¿En la plaza de cebolla, chile, lechuga, tomate, uvas, nueces, etc...?          Si <input type="radio"/> No <input type="radio"/></p> <p>¿Empacando o procesando vegetales, frutas, pescado, pollo, etc...?          Si <input type="radio"/> No <input type="radio"/></p> <p>¿En lecherias, pesca, o matanza, etc...?          Si <input type="radio"/> No <input type="radio"/></p> <p>Si contesto <b>SI</b> a alguna de las preguntas, por favor comuniquese con Lujvia Acuña, Coordinadora Migrante, al <b>(915) 532-3778</b>. Le ayudaremos a recibir servicios rápidos. ¡Gracias por su tiempo!</p> <p>Sinceramente,          Plan Premier de El Paso First</p>	<p><b>Dear member, let us help you:</b></p> <p>El Paso First Premier Plan has special Medicaid services for the children of seasonal farm workers and we would like to know the following:</p> <p>Are you a seasonal worker?          Yes <input type="radio"/> No <input type="radio"/></p> <p>Picking onions, chile, lettuce, tomatoes, grapes, pecans, etc...?          Yes <input type="radio"/> No <input type="radio"/></p> <p>Packing or processing vegetables, fruits, fish, chicken, etc...?          Yes <input type="radio"/> No <input type="radio"/></p> <p>In dairies, fisheries, or slaughtering, etc...?          Yes <input type="radio"/> No <input type="radio"/></p> <p>If you answered <b>YES</b> to any of these questions, please contact Lujvia Acuña, Migrant Coordinator at <b>(915) 532-3778</b>. We will help you receive accelerated services. Thank you for your time!</p> <p>Sincerely,          El Paso First Premier Plan</p>
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# Contact Information

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**Lluvia Acuña**  
**Migrant Outreach Coordinator**  
[lacuna@epfirst.com](mailto:lacuna@epfirst.com)  
915-531-3778 ext. 1075

**Adriana Cadena**  
**C.A.R.E. Unit Manager**  
[acadena@epfirst.com](mailto:acadena@epfirst.com)  
915-532-3778 ext. 1127

# Updated Website

Adriana Cadena  
C.A.R.E. Unit Manager

**EL PASO FIRST**  
*Health Plans, inc.*

# Purpose

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- Focus on our members
- Provide accessible information to our Providers

Call us at:  
**915-532-3778**

Outside the El Paso  
**1-877-532-3778**

For Providers  
**Web Portal Login →**

[En Español](#)



# EL PASO FIRST

Health Plans, inc.

HOME

ABOUT

MEMBERS

PROVIDERS

PROGRAMS

FIND A DOCTOR

EVENTS

CONTACT US

## Do I qualify?

We are here to help you access the benefits you need. Learn about applying for CHIP/Medicaid Benefits.

[Learn more →](#)

## For Members

We help our members understand their benefits and get the help you need.

[Learn more →](#)

## For Providers

Our providers are our partners in providing quality care to our members.

[Learn more →](#)

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# EL PASO FIRST

Health Plans, inc.

HOME ABOUT MEMBERS PROVIDERS PROGRAMS FIND A DOCTOR EVENTS CONTACT US

VALUE-ADDED SERVICES

HOW DO I QUALIFY?

## Members *Helping you access your benefits*

To search type and hit enter...

### Thank you for being part of El Paso First.



Our Member Services staff consists of highly qualified and trained individuals, fluent in both English and Spanish.

You can reach our Member Services Department at 915-532-3778 or toll-free 1-877-532-3778. We are available Monday through Friday from 7 a.m. to 5 p.m., Mountain Time. We can:

#### FIND A DOCTOR



CHIP & STAR Provider Directory  
[Search →](#)

#### PROVIDER DIRECTORIES & MEMBER HANDBOOKS



Provider Directories and Member Handbooks breakdown by Program.  
[Read More →](#)

#### YOUR LOCAL NIGHT CLINICS



Find the nearest night clinic to you.  
[Learn More →](#)

#### FIND A PHARMACY



Look here for a list of pharmacies.  
[Search →](#)

#### MEMBERS NEWSLETTER



El Paso Health First Newsletter  
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## FIND A DOCTOR



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El Paso Health First Newsletter  
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## FIRST STEPS FOR HEALTHY BABIES



This program ensures you receive medical services to keep you and your unborn baby healthy during your pregnancy.  
[Learn More](#) →

## TEXAS HEALTH STEPS FOR MEMBERS



Texas Health Steps is more than just a medical checkup.  
[Learn More](#) →

## HEALTH & WELLNESS



You can raise your kids to be healthy for life.  
[Learn More](#) →

## CHILDREN OF FARMWORKERS WHO TRAVEL



Special Medicaid services for the children of farmworkers who travel for work.  
[Learn More](#) →

## OUR CASE MANAGEMENT PROGRAM



We are here to help meet your needs.  
[Learn More](#) →

Call us at:  
**915-532-3778**

Outside the El Paso  
**1-877-532-3778**

For Providers  
[Web Portal Login →](#)

[En Español](#)



# EL PASO FIRST

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ABOUT

MEMBERS

PROVIDERS

PROGRAMS

FIND A DOCTOR

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## Providers *Our partners in providing quality health care*

### We Are Proud!

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PROVIDER FORMS

TEXAS HEALTH STEPS  
FOR PROVIDERS  
INFORMATION

CLINICAL PRACTICE  
GUIDELINES

PRENATAL-POSTPARTUM  
CARE VISIT VERIFICATION

To search type and hit enter...

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#### PROVIDER FORMS



The forms you need.  
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#### PROVIDER MANUAL



All you need to know about providing services to El Paso First members.  
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#### PROVIDER DIRECTORIES & MEMBER HANDBOOKS



Provider Directories and Member Handbooks breakdown by Program

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## Contact Provider Relations for:

- Changes in address locations
- Name changes
- Billing company changes
- NPI/TPI updates
- Phone and fax updates, etc.
- Any changes you consider we may need in order to update our system and your records.

## Provider Resources ↴

Fax Blasts and Communication +

Quarterly Provider Orientations +

[WEB PORTAL LOGIN →](#)

### PROVIDER FORMS



The forms you need.  
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Health Quarterly Newsletter  
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### TEXAS HEALTH STEPS FOR PROVIDERS



Texas Health Steps Resources for Providers  
[Learn More →](#)

### PRENATAL-POSTPARTUM CARE VISIT VERIFICATION



First Steps OB Case Management Program  
[Complete the visit information →](#)

### OUR CASE MANAGEMENT PROGRAM



We are here to help meet your needs.  
[Learn More →](#)

### CLINICAL PRACTICE GUIDELINES



Clinical Practice Guidelines provide a framework for specific clinical processes.  
[Read More →](#)

### ADDITIONAL RESOURCES

[FAQS →](#)  
[Links →](#)

# Contact Information

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**Adriana Cadena**

**C.A.R.E. Unit Manager**

[acadena@epfirst.com](mailto:acadena@epfirst.com)

915-532-3778 ext. 1127

# Pharmacy Updates

Perla Saucedo

Pharmacy Technician

**EL PASO FIRST**  
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# Long Acting Reversible Contraception

**EL PASO FIRST**  
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# LARC

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## **Pharmacy Benefit**

- Beginning August 1, 2014, providers can prescribe and obtain long-acting reversible contraception (LARC) products that are on the Texas Medicaid and Texas Women's Health Program (TWHP) drug formularies from certain specialty pharmacies for women participating in Texas Medicaid and TWHP. LARC products are only available through a limited number of specialty pharmacies that work with LARC manufacturers. Providers who prescribe and obtain LARC products through the specialty pharmacies listed will be able to return unused and unopened LARC products to the manufacturer's third-party processor.
- Only Mirena and Skyla are available through the pharmacy benefit at this time.
- Providers may also continue to obtain LARC products through the existing buy and bill process.

# LARC

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- El Paso First's PBM, Navitus, has identified Walgreens Specialty as the pharmacy our providers must use when ordering LARC products through the outpatient pharmacy benefit.

Walgreens Specialty Contact Information for  
Mirena/Skyla:

10530 John W. Elliot Drive Suite 100

Frisco, TX 75033

Fax Number: 800-830-5292

Phone: 877-686-4633

# EL PASO FIRST

*healthplans, inc.*

## Memo

**To:** Our Valued Providers  
**From:** El Paso First Health Plans  
**Date:** August 28, 2014  
**Re:** LARC -Long Acting Reversible Contraception

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Effective August 1, 2014, HHSC Vendor Drug added two long-acting reversible contraception (LARC) products to the Medicaid formulary. These products include Mirena (NDC 50419-0421-01) and Skyla (NDC 50419-0422-01) manufactured by Bayer.

These LARC products are treated as limited distribution products as they are only available through a limited number of pharmacies. Our limited network of Walgreens Specialty currently stocks Mirena and Skyla.

Manufacturers with these LARC products on the Medicaid formulary are required to offer a buy-back program. Buy-back, also known as Abandoned Unit Return, is a program offered by manufacturers that allows providers to return unused and unopened LARC products purchased through a specialty pharmacy back to the specialty pharmacy. When a provider returns an individual patient's unused and unopened LARC product to the specialty pharmacy, the specialty pharmacy will be required to reverse the claim for the LARC product. Information about Bayer's Abandoned Unit Return program is attached.

Walgreens Specialty Contact Information for Mirena/Skyla:  
10530 John W. Elliot Drive  
Suite 100  
Frisco, TX 75033  
Fax Number: 800-830-5292  
Phone: 877-686-4633

LARC will remain a medical benefit and providers will continue to have the option to receive reimbursement for LARC as a clinician-administered drug.

El Paso First Health Plans, Inc.

Attachments:  
Abandoned Unit FAQ 270-37-0002-14 FINAL MARCOM  
Abandoned Unit Return Form 270-011-0004-14 FINAL MARCOM

Forms located on El Paso First Website Forms Health Services Section <http://www.epfirst.com/ProvidersForms.html>

# Flu Vaccine

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# Flu Vaccine

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- **Medicaid/CHIP PERINATE**

STAR (18 and older)/CHIP PERINATE members can receive the flu shot at any of the following pharmacies

- Wal-Mart
- Walgreens
- CVS
- Target
- K-Mart
- Albertson's

\*STAR members under 18 can receive the flu shot at their primary doctor's office.

# NETWORK BULLETIN



Navitus Health Solutions LLC • Pharmacy Network Development & Administration

## RE: Texas Medicaid STAR and CHIP Perinate Adult Coverage of Influenza Vaccine for the 2014-2015 Season

Effective September 1, 2014, the managed care organizations listed below will cover the influenza vaccine for their members at participating Navitus Texas Network Pharmacies.

Pharmacies participating in the vaccine service network may process the influenza vaccine at the point of service for STAR members ages 18 and older and CHIP Perinate mothers ages 18 and older.

### Important Items:

- The Pharmacist administering the flu vaccine does not have to be enrolled with TMHP or VDP, but must follow the Texas State Board of Pharmacy rules related to certification to immunize and vaccinate (Texas Administrative Code, Title 22, Part 15, §295.15).
- Pharmacies must bill using the pharmacy's NPI
- Pharmacies must be enrolled with VDP and the PBM
- Pharmacies must submit a claim that includes the following information:
  - Professional Service Code (Field 440-E5) with the value "MA" (Medication Administration) in the DUR/PPS segment for the service
  - Appropriate NDC for the vaccine in Product/Service ID (Field 407-D7)
  - Value "7" in the Submission Clarification Code (Field 420-DK)
- Pharmacies are encouraged to collect the administering pharmacist's NPI. It is recommended that the same billing method be used as has been defined for Medicare Part D vaccine administration billing.

### Covered Benefits

IM Injection and Nasal Spray	IM Injection Only
Community First Health Plan	Cook Children's Health Plan
Community Health Choice	Driscoll Children's Health Plan
FirstCare Health Plan	El Paso First Health Plans
Parkland Community Health Plan	Seton Health Plan
Sendero Health Plan	
Texas Children's Health Plan	

For questions regarding your pharmacy's contract status, please contact Navitus Provider Relations at [providerrelations@navitus.com](mailto:providerrelations@navitus.com). If your pharmacy is affiliated with a Pharmacy Services Administration Organization (PSAO), please contact your representative at the PSAO regarding your participation status for this vaccine service.

# Flu Vaccine

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## **PREFERRED ADMINISTRATORS**

- Flu Vaccine will be covered at 100% for UMC, EPCH, Texas Tech and PPO Providers
- It will not be covered for non-contracted providers

# Synagis Season

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# Synagis

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El Paso First Health Plans will start the administration of Synagis injections on November 1, 2014 and terminate March 31, 2015

**STAR and CHIP Members:**

Navitus, El Paso First's pharmacy benefit manager, is processing all Synagis prior authorization requests for Medicaid and CHIP members enrolled with the health plan. Synagis is only dispensed through the pharmacies listed below.

Maxor Specialty  
216 South Pol Street  
Amarillo, TX 79101  
Synagis Phone # 866.629.6779  
Synagis Fax # 866.217.8034

Avella Specialty Pharmacy  
3016 Guadalupe St Ste. A  
Austin, TX 78705  
Synagis Phone # 877.470.7608  
Synagis Fax # 877.480.1746

# Synagis – PA Process

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- Prescribers are to submit requests for Synagis on a prior authorization form directly to the dispensing pharmacy. Completed forms are now being accepted (for a November 1<sup>st</sup> effective date).
- Approval authorizes up to a five (5) dose maximum or through the season end date of March 31, 2015.
- If approved, each subsequent monthly dose will require submission of the member's current weight and last injection date.
- Letters will be faxed to both the prescriber and the dispensing pharmacy notating approval or denial.
- Prior Authorization forms can be found at [www.navitus.com/texas-medicaid-star-chip/synagis.aspx](http://www.navitus.com/texas-medicaid-star-chip/synagis.aspx).

For additional information concerning Synagis administration for STAR and CHIP Members, please call Navitus 24 hours a day, 7 days a week at 1-877-908-6023.

# Synagis

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## **PREFERRED ADMINISTRATORS - ONLY –**

- Providers are required to send in a Prior Authorization Request form along with clinical information to support the medical necessity for the administration of Synagis.
- Pre-Authorization requests can be faxed to the El Paso First Utilization Management Department at 915-298-7866.
- For additional information concerning Synagis administration for Preferred Administrators Members, please call El Paso First Health Plans at 915-532-3778

# Prenatal-Postpartum Online Verification Tool

Melissa Rosales, LVN  
OB Case Manager

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# Prenatal-Postpartum Tool

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El Paso First adheres to the National Committee for Quality Assurance (NCQA) and Healthcare Effectiveness Data Information Set (HEDIS) guidelines for Prenatal and Postpartum Care (PPC).

The criteria being monitored includes:

- the percent of prenatal care visits that occur within the first trimester or within 42 days of enrollment with El Paso First
- and the percent of postpartum visits that take place between 21 to 56 days after the delivery.

With your help, we want to ensure expectant mothers who are enrolled in our health plan receive appropriate prenatal and post-partum care. El Paso First has created an online tool for you to report when members attend their first prenatal and postpartum visits to support the case management efforts that encourage timely and quality health care. We are asking providers to submit the member's information on a secure online tool that is available at [www.epfirst.com](http://www.epfirst.com).

Providers may also indicate if a member is experiencing any barriers to their prenatal or post-partum care, which prompts us to contact the Member. Furthermore, providers have the option to refer a member for Case Management by selecting the Case Management Referral Form from the First Steps OB Case Management Program page.

# Prenatal-Postpartum Tool

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## Prenatal-Postpartum Care Visit Verification

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### First Steps OB Case Management Program

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Please complete the visit information below:

**\*=Required Information**

Physician/Nurse Practitioner Name \*:

Member's ID Number \*:

Member's Name \*:

Member's Birth Date(mm/dd/yyyy) \*:

Expected Date of Delivery \*:

Date of First Prenatal Visit:

Date of Postpartum Visit:

Is the member experiencing barriers to prenatal/postpartum care?  Yes  No

# Contact Information

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**Dolores Herrada, RN CCM**

Director of Health Services

915-532-3778 ext. 1007

**Edna Lerma, LPC**

Clinical Supervisor

915-532-3778 ext. 1078

**Perla Saucedo, RPhT**

Pharmacy Technician

915-532-3778 ext. 1035

# Quality Improvement Updates

Don Gillis, MIT

Director of Quality Improvement

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# Quality Improvement Updates

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- 2015 Pay for Quality (P4Q)
- 2015 Performance Improvement Projects (PIPs)
- 2015 HEDIS Medical Record Requests

# 2015 Pay for Quality (P4Q)

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- 4% of our STAR and CHIP Premiums.
- No penalties if scores improve year over year.
- No penalties if above 90<sup>th</sup> percentile on HEDIS measures.

# 2015 Pay for Quality (P4Q)

Source	Measure	STAR	CHIP
HEDIS	Well-Child Visits 3, 4, 5, & 6 yr olds	X	X
HEDIS	Adolescent Well Care (12-21 yrs old)	X	X
HEDIS	PPC - Prenatal and Postpartum Care	X	
HEDIS	Asthma Med Ratio & use of Asthma Medications		X
3M	Potentially Preventable Admissions	X	X
3M	Potentially Preventable Readmissions	x	
3M	Potentially Preventable ED Visits	X	X
3M	Potentially Preventable Complications	X	

# El Paso First Interventions

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- Happy Birthday Gift Cards
- Reminder Postcards
- Automated Call Reminders
- Health Fairs
- Provider Rosters
- Provider Profiles

# 2015 PIPs

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- Performance Improvement Projects
- 2014 PIPs carried over into 2015.
- PIP Topics:
  - Reduce STAR ED utilization for Asthma and Upper Respiratory Infections for members 0-9 years of age.
  - Address PPAs for Asthma by encouraging proper Asthma management for STAR members.
  - Improve CHIP Member's Access and Utilization of Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life.
  - Improve CHIP Member's Access and Utilization of Adolescent Well-Care Preventative Visits.

# 2015 HEDIS Medical Record Requests

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- Medical Record Reviews to score Pay 4 Quality measures.
- Less measures, less records.
- Please transmit records electronically.

# Questions ?

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## Contract Information

Don Gillis

Director of Quality Improvement

915-298-7198 x1231

# Claims Updates



Yvonne Grenz  
PCU Supervisor

**EL PASO FIRST**  
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# Electronic Claim Submission Information



# Electronic Claims

- Claims are accepted from:
  - Availity
  - Trizetto Provider Solutions, LLC.  
*(formerly Gateway EDI)*
- Payer ID Numbers:
  - » STAR Medicaid =====EPF02
  - » El Paso First CHIP =====EPF03
  - » Preferred Administrators UMC =====EPF10
  - » Preferred Administrators EPCH =====EPF11
  - » Healthcare Options=====EPF37

# ICD-10



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# ICD-10

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- Providers are encouraged to continue their preparation efforts
- New proposed effective date is 10/01/2015
- Date of service will determine use of ICD-9 or ICD-10 codes for claims submission

# New ICD-10 Compliance Date: October 1, 2015

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- **About ICD-10**
- The transition to ICD-10 is required for everyone covered by the [Health Insurance Portability Accountability Act \(HIPAA\)](#). Please note, the change to ICD-10 does not affect CPT coding for outpatient procedures and physician services.
- **Road to 10: CMS Online Tool for Small Practices**
- [Road to 10](#), an online resource built with the help of providers in small practices, is now available. This tool is designed to help small medical practices jumpstart their ICD-10 transition.
- “Road to 10” includes specialty references and helps providers build ICD-10 action plans tailored for their practice needs.

# New ICD-10 Compliance Date: October 1, 2015

- **CMS Resources**
- Access three new Medscape Education resources that provide guidance around the transition to ICD-10. Continuing medical education (CME) and nursing continuing education (CE) credits are available to health care professionals who complete the learning modules, but anyone can take them and earn a certificate of completion. If you are a first-time visitor to Medscape, you will need to create a free account to access these resources.
- Video: [ICD-10: Getting From Here to There -- Navigating the Road Ahead](#)
- Video: [ICD-10 and Clinical Documentation](#)
- Expert Column: [Preparing for ICD-10: Now Is the Time](#)
- View the [ICD-10 Introduction](#) fact sheet and [FAQs](#) for an overview of ICD-10.
- Find official resources designed to help [providers](#), [payers](#), [vendors](#), and [non-covered entities](#) with the transition to ICD-10.
- **Stay up to date on ICD-10!**
- Sign up for [CMS ICD-10 Industry Email Updates](#)

# National Drug Code Billing Requirements

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Providers are required to submit the quantity of units and unit of measurement information in box 24D plus 24G.

As of 09/01/2014, the NDC and HCPCS code must be an exact match on the claim.

# NDC and HCPCS

HHSC requirement: a valid relationship must exist between the HCPCS code and NDC.

As of 09/01/2014, claims without a valid HCPCS and NDC match will be denied.

Example: injection for Rocephin

HCPCS	HCPCS DESCRIPTION	NDC	Generic Name	Name
J0696	Injection, ceftriaxone sodium, per 250 mg	00004-1963-01	CEFTRIAZONE SODIUM	ROCEPHIN 500 MG VIAL
J0696	Injection, ceftriaxone sodium, per 250 mg	00004-1964-04	CEFTRIAZONE SODIUM	ROCEPHIN 1 GM VIAL

# NDC and HCPCS

---

NDC must be submitted on all medical claims for clinician administered drugs provided in an outpatient setting.

- Primary Care Providers
- Specialty Care Providers
- Outpatient Hospital Departments

Providers are encouraged to consult with applicable resources to identify the appropriate crosswalk for NDC and HCPCS codes.

# Contact us

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## Provider Care Unit Extension Numbers:

- 1527 – Medicaid
- 1512 – CHIP
- 1509 – Preferred Administrators
- 1504 – HCO

# Questions?

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# Complaints and Appeals Process

Raquel Payan  
Compliance Supervisor

**EL PASO FIRST**  
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# Complaints & Appeals Process

- All Complaints and Appeals must be submitted in writing
  - All complaints/appeals are acknowledged no later than five (5) business days
  - All complaints/appeals are resolved within thirty (30) calendar days
- Appeals must be received within 120 days from the notice of the denial
- Complaints or Appeals must include detailed and supporting information:
  - Corrected Claim
  - Copy of Remittance Advice
  - Medical records
  - Proof of Timely Filing
  - Provide attested letter TPI/NPI
- Complaints must be addressed to:

El Paso First Health Plans, Inc.  
Complaints and Appeals Unit  
1145 Westmoreland  
El Paso, Texas 79925

Note: Member's must not be billed or balanced billed

**Raquel Payan**  
**Compliance Supervisor**  
**(915) 298-7198 ext. 1092**

**EL PASO FIRST**  
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# Special Investigations Unit Compliance

Alma Meraz

Special Investigations Unit Claims Auditor

**EL PASO FIRST**  
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# Monthly Random Medical Records Reviews

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- Texas enacted bill 2292 to require all Managed Care Organizations like El Paso First to establish a plan to prevent waste, fraud and abuse
- 5-7 providers are randomly selected on a monthly basis
  - Edits, billing patterns, Health Plan request
- The process involves the review of paid claims and if necessary a request for records

# Monthly Random Medical Records Reviews Cont.

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- A Business Records Affidavit is required
- El Paso First will send out a notification letter with the findings at the end of the review
  - Will include detailed spreadsheets with claim recoupment information
- You have the right to dispute the findings ( within 30- days of receipt of the notice)
- The Recoupment process
  - Per the Office of the Inspector General's directive El Paso First will recoup via claims

# 39 Week OB Reviews

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- Random selection of 15 providers a month
- Records are requested and reviewed
- Ensures medical necessity of inductions and/or c-sections
- Reviews proper utilization of modifiers U1, U2 and U3

# Member Services Verification

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- Random selection of 60 members a month
- Courtesy phone calls to verify services were rendered as billed
- If not verified by member, records are requested
- The Provider will be notified of findings

# Contact Information

---

**Alma Meraz**

Special Investigations

Unit Claims Auditor

915-298-7198 ext. 1039

[ameraz@epfirst.com](mailto:ameraz@epfirst.com)

# Overview of Member Services

Edgar Martinez, MBA

Director of Member Services

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# Member Health Care Benefits

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- Our Member Services staff consists of highly qualified and trained individuals, fluent in both English and Spanish. Our Member Services Department can be reached at 915-532-3778 or toll-free 1-877-532-3778. We are available Monday through Friday from 7 a.m. to 5 p.m., Mountain Time.
- Member Services Representatives are able to explain covered benefits, such as:
  - Medical Benefits
  - Laboratory Services
  - Vision Benefits
  - Dental Benefits
  - Pharmacy Benefits
  - Behavioral Health Benefits
  - Durable Medical Equipment Benefits
  - Value Added Services

# How to pick a Primary Care Provider

---

- To pick a new Primary Care Provider, Member must follow these simple steps:
  - Look at the Primary Care Provider Directory.
  - See who speaks their language.
  - See who has an office in their neighborhood or if the Primary Care Provider's office is close enough for travel.
  - Pick a new Primary Care Provider.
- Once the Member picks a Primary Care Provider, they must call our Member Services Department.
- An new ID card will be sent to the Member with the name and phone number of the new Primary Care Provider.
- If a Primary Care Provider is not picked by the Member, a Primary Care Provider will be picked for them. However, the Member can always call and pick a new Primary Care Provider if they don't want the one that was selected for them.

# To change a Primary Care Provider

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- To change a Primary Care Provider, the Member must also call the our Member Services Department.
- A Member Services Representative will help the Member make the change or will do everything they can to help the Member find a doctor that is right for them.
- A Member Services Representative will also tell the Member when they can start seeing their new Primary Care Provider.
- Members must not change to a new Primary Care Provider without telling El Paso First.
- If Members go to a new Primary Care Provider without telling El Paso First, the services may not be covered.
- If the Primary Care Provider decides to leave El Paso First and the Member is under treatment, we will arrange for the Member to continue with treatment with their Primary Care Provider until their treatment is complete or have chosen a new Primary Care Provider that is qualified to treat their condition.
- There is no limit on how many times a Member can change their Primary Care Provider.

# When will the Primary Care Provider change become effective?

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- The change will become effective immediately.
- The Member will receive a new ID card with the new Primary Care Provider's name on it.
- If the Member calls on or before the 15th of the month, the Member will receive the new card within the first two weeks of the next month.
- If the Member after the 15th of the month, the Member will receive the new card within the first two weeks of the following month.
- For example:
  - If the Member calls on or before April 15, the Member will receive the new in May.
  - If the Member calls after April 15, the Member will receive the new card in June.

# Interpreter Services

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- El Paso First can get an interpreter to be present with the Member at the doctor's office if needed.
- For this service, please call our Member Services Department, at least 24 to 48 hours in advance.
- El Paso First offers interpreters who know sign language and speak foreign languages.

# Out of Town Services

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- Before a Member receives services in their new area, they must call El Paso First, unless emergency services are needed.
- Members will continue to get care through El Paso First until HHSC changes their service area.
- Members must call 211 and El Paso First to report an address or telephone number change.
- If the Primary Care Provider is referring a Member to an out-of-town Provider, a referral and an authorization is required.

# Complaints and Concerns

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- If a Member has a complaint, they can call an El Paso First Member Services Advocate to help them file a complaint. Within five business days of receiving the verbal or written complaint, the Member will receive an acknowledgement letter. The letter will confirm the day the complaint was received. El Paso First will review the facts and will reach a decision within 30 days. A resolution letter then be mailed to the Member. Members have the right to request a second review of the solution of your complaint if they are not satisfied with the resolution.

# Phone Queues

El Paso First Health Plans Phone Queues	Extension
Eligibility Dept. CHIP - Provider	1517
Eligibility Dept. Medicaid - Provider	1514
Eligibility Dept. Preferred Administrators - Provider	1529
Claims Dept. - Provider Care Unit	1504
Claims Dept. - CHIP	1512
Claims Dept. - Health Care Options	1504
Claims Dept. - Medicaid	1527
Claims Dept. - Preferred Administrators	1509
Prior Authorization Dept. - Medicaid	1500
Prior Authorization Dept. - CHIP	1536
Prior Authorization Dept. - Health Care Options	1537
Prior Authorization Dept. - Preferred Administrators	1538
Provider Relations Department	1507

# Questions

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- Edgar Martinez, Director of Member Services ext. 1064
- Antonio Medina, Enrollment & Member Service Supervisor ext. 1034
- Juanita Ramirez, Member Services & Enrollment Supervisor ext. 1063

# Preferred Administrators

Benefit Changes Effective  
October 1, 2014- September 30, 2014

Edgar Martinez  
Member Service Director

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# UMC and EPCH-Deductibles MOP

Deductible Per Fiscal Year	UMC EPCH Provider	Texas Tech Provider	PPO Provider
Deductible Per Covered Participant		\$125	\$1,250
Deductible Maximum Family Deductible Limit		\$375	\$3,750
Out-of-Pocket Maximum Per Fiscal Year (This now includes co-pays, deductibles, and co-insurance)	UMC EPCH	Texas Tech Provider	PPO Provider
Per Covered Participant		N/A	\$6,000
Family Out-of-Pocket		N/A	\$12,000

# UMC and EPCH Benefits

Benefit Description	UMC EPCH Provider	Texas Tech Provider	PPO Provider
Office Visits	\$15 co-pay	\$30 co-pay	\$40 co-pay
Chiropractic Office Visit (Maximum 10 visits per Fiscal Year)	N/A	\$30 co-pay	\$40 co-pay
Covered Expenses during visit	100% after deductible	100% after deductible	70% after deductible
Specialist/Urgent Care Office Visits	\$15 co-pay	\$30 co-pay	\$40 co-pay
Inpatient Co-pay	\$250 co-pay	N/A	\$1,000 co-pay
Observation Co-pay (less than 24 hours in hospital)	\$50 co-pay 100% coverage	N/A	\$50 co-pay 100% coverage
Outpatient Surgery Co-pay	\$100 co-pay	N/A	\$300 co-pay
Physical Therapy (PT), Speech Therapy (ST), and Occupational Therapy (OT) (A maximum of 30 combined PT,ST and OT visits per Fiscal Year)	100% after deductible	100% after deductible	70% after deductible

# UMC and EPCH Behavioral

Benefit Description	UMC EPCH Provider	Texas Tech Provider	PPO Provider
<p><b>Behavioral Office Visits</b></p> <p><b>*UMC associate have a maximum of 30 visits per Fiscal Year</b></p> <p><b>**EPCH associates have no maximum visits per Fiscal Year</b></p>	<p>N/A</p>	<p>\$35 co-pay applicable to UMC associates *</p> <p>\$30 co-pay applicable to EPCH associates**</p>	<p>\$40 co-pay applicable to UMC associates*</p> <p>\$40 co-pay applicable to EPCH associates**</p>

# Preferred Administrators Updates

- Contraceptives
  - List of contraceptives covered at 100% if not on the list, co-pay and co-insurance will apply. You can review list at [www.preferredadmin.net](http://www.preferredadmin.net)
  - IUDs are a medical ***not*** a pharmacy benefit (insertion and removal do not need a prior authorization)

List of 50 Cost Share Contraceptive Medications & Products  
Please note this list is subject to change

Hormonal Contraceptives			
Akavera	Enpresse	Microgestin 1.5/30	Quasense
Alyacen 1/35	Errin	Microgestin 1/20	Reclipsen
Alyacen 7/7/7	Falnina	Microgestin Fe 1.5/30	Solia
Amethia	Giamt	Microgestin Fe 1/20	Sprintec
Amethia Lo	Gildess Fe 1.5/30	Mononessa	Sspryx
Amethyst	Gildess Fe 1/20	Myzra	Syeda
Apr	Heather	Necon 0.5/35	Tilia
Aranelle	Introvale	Necon 1/35	Tri-igest
Arviene	Jolesse	Necon 1/50	Trinessa
Azurette	Jolivet	Necon 10/11	Tri-previfem
Balnova	Junel 1.5/30	Necon 7/7/7	Tri-sprintec
Brielyn	Junel 1/20	Nora-be	Trivora
Camila	Junel Fe 1.5/30	Norethindrone	Velvet
Camrese	Junel Fe 1/20	Notrel (21)	Vestura
Camrese Lo	Kariva	Notrel(28)	Viorele
Cazant	Kelnor	Notrel (28) 0.5/35	Wera
Cesia	Leena	Notrel 7/7/7	Wyuzaya
Cryselle	Lesina	Nuvaring	Zarah
Cycladem 1/35	Levoenot	Ocella	Zenchant
Cycladem 7/7/7	Levora	Ogestrel	Zenchant Fe 0.4MG
Dasetta 1/35	Loryna	Orsythia	Zessa
Dasetta 7/7/7	Low-ogestrel	Phlith	Zovia 1/35E
Depo-Sq	Lutera	Portia	Zovia 1/50E
Elmost	Marizza	Prentif	
Emoquette	Medroxyprogesterone	Previfem	

Emergency Contraceptives
Ella
Next Choice 0.75MG
Next Choice 1.5MG

Diaphragms
Omiflex
Ortho Cod
Ortho Flat
Ortho Flex
Wide-Seal

# Breast Pump Benefit

- Obtain it through a DME or
- Member Reimbursement up to \$200 for a non-hospital grade double electric breast pump purchased at retail or up to \$50 for supplies if the member has a device.
  - Must complete *Member Reimbursement Form* and attach RX and receipt.



The screenshot shows the 'Preferred ADMINISTRATORS' website. The main navigation menu on the left includes 'Home', 'Members', 'Providers', and 'Contact Us'. The 'Members' section is active, displaying a list of functions: 'View Enrolled Family Members', 'View Submitted Claims', 'View Available Benefits', 'View Demographics', 'Change PCP', 'View Authorizations', and 'And, much, much more'. Below the list are several links: 'Member Login Screen', 'Member Registration', 'Flex Spending Account/HRA', 'Notice of Privacy Practices', 'NOTICE TO ALL MEMBERS - FAQ's regarding TENET', 'LJMC Breast Pump Amended Benefit Letter.pdf', 'EPCJ Breast Pump Amended Benefit Letter.pdf', and 'Preferred Administrators Contraceptives Benefit.pdf'.

# Prior Authorization

- All inpatient admissions and outpatient procedures must be prior authorized by Preferred Administrators. Emergency Admissions resulting in an Inpatient Admission must be authorized within 24 hours of the admission.
- All services will be denied if prior authorization is not obtained.

**EL PASO FIRST**  
healthplans, inc.

Pre-certification Fax Form for  
**OUTPATIENT/SCHEDULED Procedures**  
Fax No. 915-298-7866 Pre-Cert No. 915-532-3778 X 1500

PLEASE NOTE: All services requiring pre-certification (other than on an emergency basis) must be approved in advance by a HMO Medical Director/designee. Pre-certification is subject to all terms and conditions of the Health Service Contract and is only valid for eligible health plan member at time of service.  
1407201

PROVIDER'S INFORMATION (PROVIDER/FACILITY SUBMITTING AUTH REQUEST)			
DATE OF REQUEST:	PROVIDER'S NAME:		
TPI #	NPI #		
CONTACT PERSON:	PHONE NO.	FAX NO.	
SERVICE LOCATION:	MAIL ADDRESS:		

MEMBER'S INFORMATION			
NAME:	MEMBER I.D. NO.:	SSI	(Circle if SSI)
DOB:	Member Phone:	PCP:	

REFER TO INFORMATION (PROVIDER/FACILITY PERFORMING SERVICE IF DIFFERENT FROM ABOVE)			
PROVIDER'S NAME:	TPI #	NPI #	
CONTACT PERSON:	PHONE NO.	FAX NO.	
SERVICE LOCATION:	MAIL ADDRESS:		

PROCEDURE INFORMATION			
TYPE OF SETTING: <input type="checkbox"/> OFFICE VISIT <input type="checkbox"/> OFFICE VISIT W/TREATMENT <input type="checkbox"/> LABS <input type="checkbox"/> RADIOLOGY			
<input type="checkbox"/> THERAPY (OT, PT, ST) <input type="checkbox"/> SURGICAL <input type="checkbox"/> DENTAL <input type="checkbox"/> HOME HEALTH <input type="checkbox"/> PODIATRY			
<input type="checkbox"/> INPATIENT SCHEDULED SERVICES <input type="checkbox"/> DIABETES/ASTHMA EDUCATION <input type="checkbox"/> OTHER			
EXPECTED DATE OF PROCEDURE: _____			
PRIMARY DIAGNOSIS CODES (ICD-9)		CPT PROCEDURE CODES	
		SSI ONLY	
		TYPE OF SERVICE	
		MODIFIER	
1. _____	1. _____	1. _____	_____
2. _____	2. _____	2. _____	_____
3. _____	3. _____	3. _____	_____
4. _____	4. _____	4. _____	_____
5. _____	5. _____	5. _____	_____

PLAN OF TREATMENT/PERTINENT CLINICAL HISTORY AND PHYSICAL EXAM (INCLUDE PREVIOUS MEDICAL MANAGEMENT, LAB AND/X-RAY RESULTS):

FOR EL PASO FIRST USE ONLY			
REVIEWED BY: _____	DATE: _____	APPROVED: YES	NO
REFERENCE NO. _____			

THIS PRE-CERTIFICATION DOES NOT GUARANTEE PAYMENT OF BENEFITS NOR VERIFY ELIGIBILITY. PAYMENT OF BENEFITS IS SUBJECT TO ALL TERMS, CONDITIONS, LIMITATIONS AND EXCLUSIONS OF THE MEMBER'S CONTRACT. REGARDLESS OF A DETERMINATION, MEDICAL DECISIONS REGARDING A COURSE OF TREATMENT ARE SOLELY BETWEEN THE PHYSICIAN AND THE PATIENT.

# Questions??

Edgar Martinez

Member Service Director

[edmartinez@epfirst.com](mailto:edmartinez@epfirst.com)

915-298-7198 ext. 1064

**EL PASO FIRST**  
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# Thank You for Attending Providers!



**EL PASO FIRST**  
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