

# Healthfirst at a Glance



# CompleteCare (HMO D-SNP)

A program that combines Medicare & Medicaid benefits with long-term care services.

- For individuals who are expected to need at least one Community Based Long Term Care Service for 120 days or more from the date of enrollment:
  - nursing services in the home
  - therapies in the home
  - home health aide services
  - personal care services in the home
- adult day health care
- private duty nursing or
- Consumer Directed Personal Assistance Services

#### Service Area

Within New York City's five boroughs (the Bronx, Brooklyn, Manhattan, Queens, and Staten Island), and in Nassau, Orange, Rockland, Sullivan, and Westchester counties

## Access and Appointment Availability

- Healthfirst members must be able to locate a Healthfirst participating provider or his/her designated covering provider.
- It is not acceptable to have an outgoing answering machine message that directs members to the emergency room in lieu of appropriate contact with the provider or covering provider. If an answering machine message refers a member to a second phone number, a live voice must answer that phone line.

#### SERVICE STANDARD(S)

TYPE OF SERVICE	STANDARD(S)
Emergency Care	0–3 hours upon presentation. All emergency admissions must be called in no later than one business day after admission.
O Urgent Care	0-30 mins upon presentation.
Non-Urgent "Sick" Visits	Visit must be scheduled within 48 to 72 hours of request as indicated by the nature of the clinical problem.
Routine Care	Appointment must be scheduled within 4 weeks of request.
Adult Baseline and Routine Physicals	Appointment must be scheduled within 12 weeks of enrollment.

#### **Transportation**

Supplemental Transportation: Unlimited

Emergency: Call 911 for emergency transportation

Non-Emergency Medical Transportation (NEMT): Unlimited

- For routine and standing order NEMT services from healthcare facilities, call ModivCare at 1-866-428-2351, Monday to Friday, 8am-8pm. Two business days' advance notice is required.
- Requests for Ride Assist and urgent NEMT services (non-life-threatening) are accepted 24/7/365.
- Ambulette transportation is not a covered benefit while members reside in a nursing home, assisted living community, or other skilled nursing facility.
- Members with a medical condition who require NEMT should contact Member Services at
   1-888-260-1010 and follow the prompts to request transportation.

#### Discharge Planning

For assistance in facilitating discharge planning for a Healthfirst member, call Provider Services at **1-888-801-1660**, Monday to Friday, 8:30am-5:30pm.

#### **Ancillary Authorizations**

Cataract/cosmetic eye surgery	Superior Vision: <b>1-888-273-2121</b>
Chiropractic services	ASH: <b>1-800-972-4226</b>
Dental	DentaQuest: <b>1-888-308-2508</b>
Oncology management	eviCore: <b>1-877-773-6964</b>
Pain management/spinal surgery/foot surgery	OrthoNet: <b>1-844-504-8091</b>
Pharmacy	CVS Caremark: <b>1-855-344-0930</b>
PT, OT, ST services	OrthoNet: <b>1-844-641-5629</b>
Radiology	eviCore: <b>1-877-773-6964</b>
Routine hearing/hearing aids	NationsHearing: <b>1-877-438-7251</b>
Routine vision care/eyewear	Davis Vision: <b>1-800-773-2847</b>

#### **Preauthorization Guidelines**

For preauthorization, log in to <u>HFproviderportal.org</u> and navigate to the **Online Authorization Tool**.

For **hysterectomy and sterilization** claims to be considered for reimbursement, these forms must be completed and submitted:

- New York State requires forms DSS-3133 and 3134 for hysterectomy services
- Form 7473 M ED is required for sterilization
- Consent form FD-189

Preauthorization is not a guarantee of payment. Payment by Healthfirst for services provided is contingent upon the member's active membership in Healthfirst at the time the service or treatment was rendered. Member is responsible for any applicable cost-sharing such as copayments, coinsurance, or deductible amounts. Policies are subject to change.

#### Claims

For details on claims, submissions, and what to submit as acceptable support documentation, refer to the Healthfirst Provider Manual, <u>section 17</u>, at <u>HFproviders.org</u>.

#### Compliance

Anonymously report compliance concerns and/or suspected fraud, waste, and abuse that involves Healthfirst at **1-877-879-9137** or at <u>HFCompliance.EthicsPoint.com</u>.

### Contacts

Provider Services Center	1-888-801-1660 Monday to Friday, 8:30am-5:30pm HFproviders.org
CompleteCare Management Team	<b>1-866-237-0997</b> (TTY 1-888-542-3821) Monday to Friday, 8am-8pm
Medical Pharmacy (pharmacy medications for provider administration)	<b>1-888-394-4327</b> (TTY 1-888-542-3821) Medical Pharmacy Fax: 1-212-801-3223 Monday to Friday, 8am-5:30pm
	1-888-260-1010 7 days a week, 8am-8pm (October through March), and
Member Services	Monday to Friday, 8am–8pm (April through September) (TTY 1-888-542-3821) (TTY Spanish 1-888-867-4132)  MyHFNY.org
Member Services  Member Enrollment	Monday to Friday, 8am-8pm (April through September) (TTY 1-888-542-3821) (TTY Spanish 1-888-867-4132)

Visit <u>healthfirst.org/medicare-long-term-care-plans</u> for plan details.