

# Network News

## YOUR CHANGES ARE IMPORTANT TO US

CHNCT strives to have the most current and updated information on our network providers. In order to ensure accurate claim processing and provider directory listings, we ask that you provide us with changes to your practice. Changes may consist of practitioners leaving or joining your group, opening or closing an office site, changes to payment address, office hours, or telephone numbers among other things. Please submit your changes in writing via fax to your Senior Provider Relations Representative at 203.265.3590.

## REMINDER: ELIGIBILITY VERIFICATION FOR HUSKY B AND CHARTER OAK MEMBERS

Please note: Providers are verifying eligibility for HUSKY B and Charter Oak Members with the EDS system. EDS shows that members are in spend-down when, in fact, the members are eligible. Spend-down is when a Medicaid applicant has income that exceeds the income limit to qualify for Medicaid but may qualify if they have medical bills that equal or are greater than their "excess" income. The process of subtracting those medical bills from the individual's income over a six-month period is called a Medicaid "spend-down." In order to avoid confusion in the future, please verify eligibility for HUSKY B and Charter Oak Members by calling CHNCT's Member Services Department at 1.800.859.9889 or by calling the HUSKY Program at 1.800.656.6684.

# Network News

## HILL HEALTH CORPORATION CHANGES ITS NAME TO HONOR ITS LATE DIRECTOR, CORNELL SCOTT



In May 2009, Hill Health Center's Robert Kilpatrick announced that in honor of the memory of the late Cornell Scott, Hill Health Corporation is changing its name to Cornell Scott-Hill Health Corporation.

The decision was announced at the corporation's 40th anniversary gala May 9 by Andrea Jackson-Brooks, President of the Board of Directors.

The change takes effect July 1, 2009 and also affects the name "Hill Health Center," which will be changed to Cornell Scott - Hill Health Center.

The life and legacy of the late Mr. Scott were celebrated at the 40th anniversary event on May 9 at Yale Commons.

The Hill Health Center is a federally qualified health center and provides primary health, dental, behavioral health and ancillary services to approximately 30,000 patients annually. In 2008, Hill Health Center provided 180,000 patient care visits and has grown dramatically over the years since Cornell Scott became its Chief Executive Officer and until his death in August 2008. Now with 18 sites throughout the Greater New Haven area and its surrounding communities, the Center operates a pharmacy, a clinical laboratory, an in-patient alcohol and drug detoxification facility and many other supportive services.

Scotty, as Mr. Scott was known to his friends, was the CEO of Hill Health Center for nearly 40 years and is credited with being a pioneer in the field of community health.

## COMMUNITY HEALTH NETWORK OF CONNECTICUT, INC. HAS JOINED THE COUNCIL FOR AFFORDABLE QUALITY HEALTH CARE (CAQH)

Community Health Network of Connecticut Inc. (CHNCT) joined the Council for Affordable Quality Health Care (CAQH) in early 2009. CAQH's data collection initiative, the Universal Provider Datasource (UPD), allows registered physicians and other health professionals in all 50 states and the District of Columbia to enter their credentialing information free of charge into a single, uniform online system. This system meets the credentialing needs of most health plans, hospitals and other health care organizations. The provider data collection service streamlines the initial application and re-credentialing processes, reduces provider administrative burdens and costs, and offers health organizations real-time access to reliable provider information for quality assurance and support services, such as directories and claims processing.

If you would like more information about how to register for this service or to complete an online application, please visit [www.caqh.org/cred](http://www.caqh.org/cred).

If you are a provider looking to contract with CHNCT, are not registered with CAQH and do not have a CAQH provider identification number, we can register for you. All we require is a one-page application, which can be found on our website, [www.chnct.org](http://www.chnct.org). Please complete this application and return it to your Senior Provider Relations Representative via fax at 203.265.3590 or by mail to: CHNCT Provider Relations, 11 Fairfield Blvd., Suite 1, Wallingford, CT 06492.

### CAQH BENEFITS TO PROVIDERS

- ❖ Free service to providers
- ❖ Enter your data once through a single data-collection process
- ❖ Submit, store, manage and distribute your information electronically
- ❖ Keep your data safe and secure
- ❖ Maintain total control of your information
- ❖ Re-attest in minutes

Community Health Network of Connecticut, Inc. "The One With the Sun"



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## MEMBER APPEALS AND GRIEVANCES

### MEMBER APPEALS (GRIEVANCES): HUSKY B AND CHARTER OAK MEMBERS

CHNCT policy states that Charter Oak and HUSKY B members and their legally authorized representatives (herein referred to as “the Member” or “Members”) are educated about, and have access to, a unified process for filing appeals in the event that CHNCT or its subcontractor partially or fully denies, suspends, reduces or terminates authorization of the provision of goods/services. All appeals will be reviewed fairly and objectively by appropriate CHNCT decision-makers in a time frame appropriate to the exigencies of the situation, but no later than 30 calendar days from the date of receipt of the appeal. There is a process for expedited review of appeal requests and for external review of appeals by the state Department of Insurance (DOI).

Charter Oak and HUSKY B Members may submit an appeal to CHNCT within 60 calendar days of the date of the denial letter sent to the Member by CHNCT (or its subcontractor). Appeals received after 60 calendar days shall be considered untimely, in which case CHNCT shall notify the Member in writing that they have lost their appeal opportunity.

All oral appeals should be directed to CHNCT’s Member Services Department at 1.800.859.9889. All written appeals should be mailed to: CHNCT Manager of Member Services, 11 Fairfield Blvd., Suite 1, Wallingford, CT 06492.

Expedited appeals may be initiated by the Member, or by a practitioner acting on behalf of the Member. CHNCT will expedite its review in all cases concerning admissions, continued stays, or other health care services for a Member who has received emergency services but has not been discharged from a facility. If the oral or written request is for an expedited appeal, CHNCT will determine within one business day of receipt of the appeal with written notice to the Member, and to DSS (for Charter Oak and HUSKY B Members only), whether to expedite the review or whether to perform the review according to the standard time frames. An expedited review must be performed when the standard time frames for determining an appeal could jeopardize the life or health of the Member or the Member’s ability to regain maximum functioning. CHNCT must expedite its review when an expedited review is requested by the Member’s treating physician or PCP, functioning within his/her scope of practice as defined under state law or by DSS.

If the Member has exhausted CHNCT’s internal appeals and has received a final written appeal determination from CHNCT upholding the original denial of the goods or service, the Member may file an external appeal with the DOI within 30 calendar days of receiving CHNCT’s written appeal decision. Members may call 860.297.3862 to obtain information about the external review process or request a form from:

**Connecticut Department of Insurance**  
P.O. Box 816  
Hartford, CT 06142

*CHNCT shall be bound by the CT DOI’s external appeal decision.*

### MEMBER APPEALS (GRIEVANCES): HUSKY A MEMBERS

It is CHNCT policy that HUSKY A Members and their legally authorized representatives (herein referred to as “the Member” or “Members”) are educated about, and have access to, a unified process for filing appeals and requesting DSS Fair Hearings, in the event that CHNCT or its subcontractor (a) fails to respond within 14 business days to a request for goods/services, or (b) partially or fully denies, suspends, reduces or terminates authorization of the provision of goods/services. All appeals will be reviewed fairly and objectively, by appropriate CHNCT decision-makers, in a time frame appropriate to the exigencies of the situation, but by the date of the DSS Fair Hearing, and no later than 30 calendar days from the date of receipt of the Appeal/Administrative Hearing request at DSS.

A Member may request an appeal either orally or in writing. When requesting an oral appeal, unless the member is requesting an expedited review, the member must follow-up with a written, signed appeal form within 5 business days of the oral request. The Member must file the written, signed Appeal/Administrative Hearing request form in order to receive an appeal review by CHNCT and a Fair Hearing before DSS. The Member will be instructed to submit the completed Appeal/Administrative Hearing request form to DSS by faxing it to 860.424.5729 or mailing it to:

**State Department of Social Services**  
Office of Administrative Hearings and Appeals - HUSKY A Appeals  
25 Sigourney St., 12th Floor,  
Hartford, CT 06106

Upon request, CHNCT shall assist the Member in completing an Appeal/Administrative Hearing request form, and shall provide translation services, or services for vision or hearing impaired Members as appropriate.

An Appeal/Administrative Hearing request form may be completed and filed by a provider on behalf of a Member with the Member’s written consent. A provider may file an appeal on behalf of a member in instances where CHNCT has denied authorization for a service, which has not yet been rendered to the Member and the provider is seeking approval for the service on behalf of the member.

A written appeal decision will be mailed to the Member, by certified mail, with a copy to the DSS liaison and the Central Fair Hearing Office, no later than thirty 30 calendar days from the date on which the appeal was received by CHNCT (or its subcontractor) or DSS, or by the date of the scheduled Fair Hearing, whichever is sooner.

If the Member is dissatisfied with CHNCT’s decision, or if CHNCT does not render a decision by the time of the scheduled DSS Administrative Hearing, the Member may automatically proceed to the Administrative Hearing. If the Administrative/Fair Hearing request was in response to an advance Notice of Action (NOA), and the Member submitted the request within 10 business days of the

date the advance NOA was mailed by CHNCT (or its subcontractor), the disputed goods and services must continue to be maintained, pending the Administrative Hearing decision.

NOTE: A provider may not file an appeal on behalf of a member in instances where the service has already been rendered to the member and the provider has been denied payment for the service.

## ACCESSIBILITY FOR HEARING IMPAIRED INDIVIDUAL AND LINGUISTIC ACCESS: CULTURAL LINGUISTIC ACCESS SERVICE PROGRAM (CLAS)

CHNCT understands how difficult receiving services can be when there are communication barriers or when English is a second language. CHNCT’s Cultural & Linguistic Access Service program’s (CLAS) goals are to ensure that all members receive fair and effective treatment in a culturally and linguistically appropriate manner.

The CLAS Program helps CHNCT members receive verbal and written communication that satisfies their everyday needs. CHNCT’s number one priority is to ensure that each one of our members receives knowledgeable and quality services in their primary language, regardless of their communication barriers. Some of the CLAS program services include:

- ❖ Face-to-Face Interpretation Services – CHNCT provides interpreters who can be present for eligible members during health care appointments. A 72-hour notice is needed for an interpretation request, except in the case of an emergency.
- ❖ Sign Language and TDD/TTY Access Services – CLAS provides this service for the hearing impaired. Please call 1.877.659.1252 for a telecommunication device to accept text messages.
- ❖ Services for Members with a Visual Disability and Braille Services – CHNCT offers special member services for those who are visually impaired.
- ❖ Telephonic Interpretations – CHNCT has interpretation services through a telephonic hook up. These services can provide interpretations in any language.

All Cultural Linguistic Access Services are FREE and CONFIDENTIAL for active CHNCT members. For more information or to request services for a CHNCT member, please call our Member Services Department at 1.800.859.9889. Our staff speaks English and Spanish and is ready to help you Monday through Friday from 8 a.m. to 5 p.m.

## MEET YOUR SENIOR PROVIDER RELATIONS REPRESENTATIVES

Did you know that as a contracted CHNCT provider you have a dedicated Senior Provider Relations Representative to assist you with your service needs? Your Senior Provider Relations Representative can assist you with questions regarding your CHNCT Agreement, Policies and Procedures or any questions you may have on the HUSKY, SAGA and Charter Oak health plans. They are available to you via a personal on-site visit or by telephone. To schedule an on-site visit, please call the appropriate representative listed below:



David Miller  
203.949.4141  
Hartford, Middlesex, New London  
Tolland and Windham Counties



Nancy Esposito  
203.949.4163  
Fairfield, Litchfield  
and New Haven Counties

## REGISTER FOR e-POWER

One of the services CHNCT offers its participating providers is the e-Power tool. This free web-based tool allows the providers to verify claim status, member eligibility and authorizations.

Upon registration, you will receive an e-Power User Manual along with an Administration Manual that will help you to navigate through the e-Power software. To obtain access, complete the e-Power Amendment found at [www.chnct.org](http://www.chnct.org). Please print out two copies of the Amendment and mail both original copies to: CHNCT Provider Relations, 11 Fairfield Blvd., Suite 1, Wallingford, CT 06492. Once CHNCT receives a list of the users at your practice, they will be set them up with a user name and password. It is quick and easy!

If there are any issues or your password needs to be reset, simply call our Provider Relations Department at 1.800.440.5071.

## 2009 HUSKY/CHARTER OAK PROVIDER MANUALS

The 2009 CHNCT HUSKY/Charter Oak Provider Manuals were mailed to all participating practitioner offices in March 2009. If your office has not received a new HUSKY/Charter Oak Provider Manual or you would like additional copies, please contact your Senior Provider Relations Representative or you can download a copy from our website at <http://www.chnct.org/Providers.aspx>.