

Here's what's new

- The UnitedHealthcare Community Plan of Indiana Hoosier Care Connect newsletter has the information you need to help you do business with us
- The newsletter is published quarterly. We'll cover a range of topics, including the benefits of digital tools, manual overviews, Indiana Department of Health guidance and more.



Questions?

Check out our UnitedHealthcare Community Plan of Indiana homepage.

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United Healthcare

Caregiver support

When your patient requires the ongoing support of an informal caregiver, that caregiver may have stress, frustration and depression that can lead to burnout. We offer a monthly caregiver conference to help them cope with the additional responsibilities.

Topics vary each month, but include advance directives, health care powers of attorney, understanding care options, home safety, pain management, staying connected and living with grief or loss.

We hold conference calls on the third Tuesday of each month at 3 p.m. ET. The caregiver can access the call by dialing **844-767-5679** and using access code 1893910.

Doctor Chat app

The UHC Doctor Chat app provides 24/7/365 virtual care for UnitedHealthcare Community Plan members. When your patients use UHC Doctor Chat, it can reduce after-hours calls to your office while helping your patients receive the care they need, when they need it.

UHC Doctor Chat was designed to supplement — not replace - the care you provide to your patients. Board-certified doctors assist patients with understanding the urgency of their health concerns, and they provide timely care to help avoid unnecessary trips to the emergency room (ER).

Here's how UHC Doctor Chat can support your practice:

- · Redirects patients away from the ER and back to your office
- Saves your staff time by reducing unnecessary emergency and after-hours calls
- Helps reduce avoidable readmissions by offering an after-hours option for patients to ask questions about their post-discharge plan
- · Provides a resource for high-need patients

Who are UHC Doctor Chat doctors?

UnitedHealthcare partnered with CirrusMD to form UHC Doctor Chat. CirrusMD doctors can address acute care, chronic care, mental health, women's health and more.



Questions? Contact your UnitedHealthcare provider representative. Visit UHCprovider.com/contactus

Reduce after-hours calls Tell your patients about the benefits of virtual care through UHC Doctor Chat. Learn more at UHCDoctorChat.com or download the UnitedHealthcare Doctor Chat app on the App Store® and Google Play®. App Store





No Surprises Act

We are committed to spreading awareness of the No Surprises Act, which is a federal law designed to protect patients from unexpected medical bills resulting from balance billing and surprise billing.

Balance billing occurs when health care professionals bill patients for the difference between their charges and the price set by the insurance company after the patient has paid any copay, coinsurance, or deductible. Surprise billing refers to unexpected bills resulting from receiving care from an out-of-network provider or facility.

The No Surprises Act is enforced by the federal government and prohibits you from charging patients more than the in-network cost-sharing amount for:

- · Emergency services
- Air ambulances
- · Services provided by an out-of-network provider or facility

The law also protects patients receiving non-emergency services at an in-network facility. The No Surprises Act applies to both self-insured health plans offered by employers and health insurance companies.

For more information about the No Surprises Act, please visit Healthcare Reform: No Surprises Act (in.gov)



The Individual Health Record

The Individual Health Record (IHR) is a technology platform that provides a digital record of a member's UnitedHealthcare health care history. IHR takes data from across systems and transforms it into a record that communicates each member's health history and current health status.

- 1. Information: The platform delivers patient information across all patient encounters in the health care delivery system.
 - · Diverse data such as inpatient, outpatient, ambulatory, in-network, out-of-network and reported sources are combined into a single record
 - · Gives you access to current and historical diagnoses, visits, medications and tests from physicians outside your practice
- 2. Care: provides a broader view of your patient's overall health care experience. It benefits care teams in several important ways.
 - Making the most of the patient's visit, potentially closing gaps in care
 - Identifying potential admission/readmission risks early so you can take preventive measures
- 3. Coordination: helps reduce unnecessary or duplicated tests and appointments as all clinical teams can work from the same patient information.
 - Helps reduce your administrative burden by automating the data
 - Near real-time data is used in the IHR, helping decrease possible test duplication and increase the ability to monitor items, such as medication. IHR helps you gain a broader understanding of your members' overall health care experience.





The Individual Health Record (cont.)

How do I request access to IHR?

- · Go to UHCprovider.com/newuser
- You may also contact UnitedHealthcare web support at providertechsupport@uhc.com or call 866-842-3278, option 1, 7 a.m.-9 p.m. CT, Monday - Friday

What if I have questions?

Call the dedicated service team at 888-761-0346, 7 a.m.-7 p.m. CT, Monday - Friday.



Quality incentive programs

We're excited to continue offering eligible primary care providers the chance to join the UnitedHealthcare Community Plan Primary Care Professional Incentive (CP-PCPi) program between Jan. 1, 2023, and Dec. 31, 2023. Through CP-PCPi, your practice may earn bonuses for helping patients become more engaged in their health care. CP-PCPi rewards qualifying practices for addressing certain HEDIS® or other patient care opportunities, such as:

- Child and Adolescent Well-Care Visits (WCV)
- Adult Access to Preventative/Ambulatory Health Services (AAP)
- Social Determinants of Health Assessment (SDOH) - Claim billed with a completed health assessment, CPT® code 96160 and billed with an identified Z-code/s
- Tobacco Cessation Based on Indiana Health Coverage Program (IHCP) bulletin BT2022100 for CPT codes 99406 and 99407



To qualify, you must:

- · Be contracted and in-network with us for at least 9 months
- · Be in good standing at the time of payment
- Have an average panel size of 20 assigned members during the year

You do not need to sign up to qualify for the incentive program. You will automatically receive bonus payments in quarters 1 and 3 yearly through a check or electronic funds transfer (EFT). The bonus is paid after you meet the incentive requirements.





