

# QUICK REFERENCE GUIDE

Cigna-HealthSpring STAR+PLUS



## PROVIDER SERVICES

Claims Status, Eligibility, Existing Authorizations, Benefit Questions, and PCP Assignment.

### Provider Service Representatives by area:

Call 1-877-653-0331, Monday to Friday,  
8 a.m. to 5 p.m. Central Time

### Automated Eligibility Verification Line:

Call 1-866-467-3126

### Member Service Representatives by area:

Call 1-877-653-0327, Monday to Friday,  
8 a.m. to 5 p.m. Central Time

Email demographic changes to:  
ProviderDataValidation@healthspring.com

## PROVIDER PORTAL

[StarPlus.HSConnectOnline.com/login](http://StarPlus.HSConnectOnline.com/login)

The Provider Portal allows 24-hour access and is an interactive site where participating providers may:

- Verify Member eligibility and PCP
- Check individual claim status or by batch
- Submit claims
- Request authorizations
- Check authorization status
- Verify Member's Service Coordinator
- Print duplicate Explanations of Payments

### HS Connect Technical Support:

Call 1-866-952-7596 or email  
[HSConnectHelp@HSConnectonLine.com](mailto:HSConnectHelp@HSConnectonLine.com)

## PRIOR AUTHORIZATION SERVICES

This list is not all-inclusive. Request for services from a non-participating, out-of-network facility, Provider or vendor in any location requires authorization.

### The following services require prior authorization:

- All Out-of-Network Services
- Audiology testing and hearing aids
- Non-emergency ambulance
- Behavioral health services after the 30th session
- Chemotherapy drugs
- DME – all rental as well as purchase, maintenance, or repair over \$500
- Home health services
- Inpatient services (physical and behavioral health)
- Long Term Services and Supports (LTSS)
- Pain Management
- Psychological and Neuropsychological Testing
- Radiological procedures – such as MRI, MRA, CT Scan, PET Scan
- Rehabilitative Therapy – OT/PT/ST, cardiac rehab
- Sleep studies
- Wound care - outpatient only
- Transplant services
- Mental Health Rehabilitation
- Targeted Case Management
- Supported Employment/ Employment Assistance

## LAB SERVICES

The following routine lab services may be performed in a participating Provider's office/facility:

81001	81025	82947	84520	85610
81002	82010	82962	84703	87449
81003	82270	83026	85013	87804
81005	82272	83036	85014	87880
81007	82570	84478	85018	

All other lab specimens should be drawn in the Provider's office and sent to the contracted lab Provider (Quest, CPL, ProPath and LabCorp). The Provider will be reimbursed for specimen handling.

## TO REQUEST PRIOR AUTHORIZATION

### Fax a Prior Authorization Form to:

- 1-877-809-0787 (Outpatient)
- 1-877-809-0786 (Inpatient)
- 1-877-809-0788 (LTSS)

### Request Prior Authorization through the secure Provider Portal.

**Note:** The Texas Standard Prior Authorization Form may be found on Cigna-HealthSpring's STAR+PLUS Provider website.

### Visit us at:

[StarPlus.CignaHealthSpring.com](http://StarPlus.CignaHealthSpring.com)

### Prior Authorization for Acute Services:

- **Standard:**  
*In Network:*  
Determination within 3 business days  
*Out of Network:*  
Determination within 3 business days
- **Expedited:**  
Call 1-877-725-2688
- **Emergency Admissions and Services:**  
Not required. Providers must notify us of admissions resulting from Emergency Services within one business day
- **Pharmacy services:**  
[StarPlus.CignaHealthSpring.com/SPParmacy](http://StarPlus.CignaHealthSpring.com/SPParmacy)

### Dispensing 72-hour Emergency Prescriptions:

Federal and Texas laws require that a 72-hour emergency supply of a prescribed drug be provided when a medication is needed without delay and Prior Authorization (PA) is not available. This rule applies to non-preferred drugs on the Preferred Drug List and any drug that is affected by a clinical or therapeutic PA edit and would need prescriber prior approval.

## SERVICE COORDINATION

Cigna-HealthSpring offers Service Coordination for STAR+PLUS Members in an effort to work collaboratively with Providers and Members to assess Member health needs, create a plan of care, organize delivery of healthcare services, monitor progress toward Member's individual health goals and coordinate Long Term Services and Supports. Anyone can refer a Member for services.

**To reach a Service Coordinator or to arrange for Long Term Services and Supports: Call 1-877-725-2688**

## CLAIM FILING TIPS

- Providers must submit all claims on a CMS 1500 or UB 04 Claim Form as specified by HHSC/TMHP.
- Providers must submit claims within 95 days of the date of service. LTSS services billed with a date range are required to be submitted within 95 days from the first date of service.
- Cigna-HealthSpring is required to process clean claims within 30 days of receipt.
- Providers should not collect payment from or bill Cigna-HealthSpring members for any covered services.
- If you are eligible for Attendant Care Enhancement Payments, you must bill at least the amount you expect to be reimbursed.
- Submit claims for one Member and one Provider per claim form.
- Itemize multiple visits rendered over several days. If there is a break in service, bill on a separate line.
- Bill CMS 1500 claims with a valid place of service identifier.
- Avoid using unlisted procedure codes when possible. Submit unlisted codes only after receiving prior authorization for the specific code.
- Enroll in EFT and/or ERA to view your Payments and download duplicate copies of EOP's on our Claims Portal.
- Providers billing as a group must list the:
  - Rendering Provider's NPI in the unshaded portion of box 24j
  - Rendering Provider's TPI in the shaded portion of box 24j
  - Group Provider's NPI in box 33a
  - Group's TPI in box 33b (if applicable)

## There are four ways to file a claim with Cigna-HealthSpring:

- **Electronically (Payer ID# 52192):**  
Via one of the following three Cigna-HealthSpring claims clearinghouses: (1) Change Healthcare (formerly Emdeon), (2) PayerPath, or (3) Availity.
- Via secure Provider Portal:  
**StarPlus.HSConnectOnline.com**
- Via mail:  
**Cigna-HealthSpring**  
P.O. Box 981709 – STAR+PLUS  
El Paso, TX 79998-1709
- Via TMHP state's website:  
**www.tmhp.com**

## Two ways a Provider may appeal a previously processed claim:

- Fax the appeal to Cigna-HealthSpring at **1-877-809-0783**
- Mail the appeal to:  
**Cigna-HealthSpring**  
**Appeals and Complaints Department**  
P.O. Box 211088  
Bedford, TX 76095

## Appeals or requests for reconsideration must be made within 120 days from the date of the Explanation of Payment (EOP).

Acknowledgment letter for appeals are sent within five business days of receipt. Appeals will be resolved within 30 calendar days. Appeals and Payment Dispute Forms may be found on Cigna-HealthSpring STAR+PLUS Provider website at **StarPlus.CignaHealthSpring.com**

## PAYMENT DISPUTE FORM

Administrative decisions include billing issues such as incorrect modifiers, diagnostic codes, overpayments and underpayments.

Examples of when to use this form are:

- Denial for "timely filing", but provider has proof of timely.
- Denial for "no auth on file", but provider has auth listed.

**Fax form to: 1-877-809-0783**

**E-mail form to:**

**Claims\_MMP\_Medicaid@HealthSpring.com**  
**or mail to: Attention: Cigna-HealthSpring**  
**Payment Dispute Unit**  
**P.O. BOX 211088, Bedford, TX 76095**

## EXTRA SERVICES

### 24-Hour Health Information Line:

Toll-free access to experienced Registered Nurses, 24-hours per day, 365 days per year for immediate, reliable information for any health concern.

**Call 1-855-418-4552**

### Behavioral Health and Substance Abuse:

**Call 1-877-725-2539**

### Dental Services:

- **www.dentaquest.com**
- **Provider Services 1-888-308-9345**
- **Member Services 1-855-418-1628**

### Vision services:

- **www.superiorvisiononline.com**
- **Member Services 1-800-879-6901**
- **Provider Services 1-866-819-4298**

## OTHER IMPORTANT CONTACTS:

### Maximus (Medicaid Enrollment):

**1-800-964-2777**

### Medicaid Managed Care Helpline:

**1-866-566-8989**

### Medicaid Managed Care Helpline TDD:

**1-866-222-4306**

### Managed Transportation Organizations (MTO):

- **1-877-633-8747 Hidalgo SDA and MRSA Northeast SDA**
- **1-855-687-3255 Tarrant SDA**

### Texas Department of Family and Protective Services (TDFPS):

- **Member Services 1-512-438-4800**

### Provider Pharmacy Website:

- **www.txvendordrug.com/pdl/**

### Change Healthcare (formerly Emdeon)

- **Call 1-800-845-6592**
- **To enroll in electronic funds transfer (EFT) go to: [www.emdeon.com/epayment/](http://www.emdeon.com/epayment/)**
- **To enroll in Electronic Remittance Advice (ERA) go to: <http://www.emdeon.com/resourcepdfs/ERAPSF.pdf>**