

GENERAL

Who is Cenpatico?

Cenpatico has been doing business in Texas since 2003. We were formerly known as Integrated Mental Health Services (IMHS) in Texas; in 2011, we began doing business as Cenpatico in all markets. We encourage our provider network to access www.cenpatico.com frequently to obtain important and helpful information about Cenpatico and the procedures pertinent to our provider network.

Where does Cenpatico operate in Texas?

Cenpatico manages STAR and CHIP member benefits in the following Texas service delivery areas: Amarillo, Bexar, El Paso, Lubbock/Amarillo, Nueces, and Travis; STAR+Plus member benefits in the following Texas service delivery areas: Bexar and Nueces; CHIP RSA member benefits in 174 rural counties state-wide; and STAR Health member benefits state-wide.

Who manages the physical health benefits for Superior HealthPlan members?

Superior HealthPlan (SHP) manages the physical health benefits for Superior HealthPlan members. You can visit the SHP website at www.superiorhealthplan.com.

How do I contact Superior HealthPlan?

Members may call 800-783-5386 and providers may call 877-391-5921.

How do I contact Cenpatico?

CHIP Program.....	888-471-4357
STAR Program.....	800-716-5650
STAR+Plus Program.....	800-466-4089
CHIP RSA Program.....	800-213-9927
STAR Health.....	866-218-8263

CLINICAL

Where can I find the Cenpatico clinical practice guidelines & medical necessity criteria?

You can find these materials on the Cenpatico website at www.cenpatico.com. Click on the Providers tab, Provider Forms/Resources, Texas and Foster Care then Medical Necessity Criteria.

Where can I get a copy of the Preferred Drug Listing (PDL)?

The PDL is managed by the Texas Health and Human Services Commission (THHSC). The list is easily accessed on the THHSC website at www.hhsc.state.tx.us/hcf/vdp/pt/pdl_program.html.

NETWORK

Do I need a Medicaid number to join your network?

Providers that wish to render covered services to Cenpatico STAR, STAR Plus, and STAR Health members must have a Medicaid Number. Providers that **do not** have a Medicaid Number, but meet Cenpatico credentialing standards, are eligible to provide services to CHIP/CHIP RSA members only.

How do I obtain a copy of the Cenpatico provider manual?

Visit us on-line at www.cenpatico.com. Click on the Providers tab, Provider Forms/Resources, Texas and Foster Care then see Provider Manuals. If you do not have access to the internet, you may call Cenpatico Texas Provider Relations at 877-264-6550 to obtain a copy. The Manual contains information such as Cenpatico Medical Necessity Criteria, Clinical Practice Guidelines, and policies and procedures regarding Credentialing, Utilization Management, Quality Improvement, and Claims.

How do I update my provider profile information?

Please obtain a Provider Change Form at www.cenpatico.com. Click on the Providers tab, Provider Forms/Resources, Texas and Foster Care, then see the Administrative & Claims section and click on Provider Change Form or call Cenpatico Provider Relations at 877-264-6550. The form will allow you to change your provider demographics, IRS tax information, practice hours and location(s). Once you complete the form, simply fax it to the number listed on the form.

What do I do if my practice is full or I can't see patients temporarily?

Please submit the Provider Change Form. Click on the Providers tab, Provider Forms/Resources, Texas and Foster Care, then see the Administrative & Claims section and click on Provider Change Form or call Cenpatico Provider Relations at 877-264-6550. You should use the form if your practice is full or you need to stop seeing our members for a period of time. We will remove your name from our public directory. When you are ready to see new members again, simply forward the form to us. Once you complete the form, simply fax it to the number listed on the form.

Does CENPATICO offer provider training or CEU opportunities?

Cenpatico Network Development and Provider Relations are available to conduct provider forums, orientations, or individual training to our Texas provider network on topics such as Cenpatico policies & procedures, current trends, forums, and CEU opportunities. Please call 877-264-6550 if you would like further information regarding upcoming training events in your area.

CREDENTIALING

How long does the credentialing process take?

The credentialing process can take up to six (6) months.

How do I add a non-par provider to a participating group?

Please contact Cenpatico Texas Provider Relations at 877-264-6550. The necessary paperwork will be forwarded to you at that time. We can rapidly add the individual provider under the terms of HB1594. The individual will be loaded to our payment system while the credentialing process is completed. Please note that if a provider fails to pass the credentialing process, all funds paid to the Group on behalf of that provider will be re-couped. A letter will be mailed at the conclusion of the full credentialing process notifying the individual of the outcome. Should the process be successful, a welcome packet will be mailed.

Do I need to be re-credentialed?

Cenpatico re-credentials each provider/facility every three (3) years from the date of their initial credentialing date. For example, if you were credentialed on January 1, 2009, your re-credentialing would need to occur before January 31, 2012.

AUTHORIZATIONS

How do I receive member referrals?

Cenpatico employs a team of Customer Service Representatives (CSR) who refer members to Cenpatico providers. Referrals are tailored to the member's needs and provider specialty and location are taken into consideration. Unless otherwise requested, all in-network providers will be listed in the public directory and posted at www.cenpatico.com. Click on the Find a Provider Tab and then click on Texas.

When do I request prior authorization?

Cenpatico requires prior authorization, following a free authorization period (based on product type (see below), for every billing code except a select group of ongoing medication management codes. To download an Outpatient Treatment Request Form at www.cenpatico.com, click on the Providers tab, Provider Forms/Resources, Texas and Foster Care then click the Outpatient Treatment Request Form (OTR) section.

STAR, CHIP, CHIP RSA and STAR+Plus

Network Practitioners may provide a covered evaluation/assessment and up to five (5) follow-up sessions per participating practitioner per member without seeking authorization from Cenpatico. Only specific covered outpatient/office services are covered without authorization. Please refer to the Covered Professional Services & Authorization Guidelines in the Cenpatico Provider Manual to identify which services apply to this requirement. Once the evaluation/assessment and five (5) outpatient/office location follow-up sessions per participating practitioner per member are utilized, Network Practitioners must contact Cenpatico to obtain authorized sessions for continued services. To download an OTR Form at www.cenpatico.com, click on the Providers tab, Provider Forms/Resources, Texas and Foster Care then see the Outpatient Treatment Request Form (OTR) section. Cenpatico does not retroactively authorize treatment.

STAR Health

Network Practitioners may provide a covered evaluation/assessment and up to nine (9) follow-up sessions per participating practitioner per member without seeking authorization from Cenpatico. Only specific covered outpatient/office services are covered without authorization. Please refer to the Covered Professional Services & Authorization Guidelines to identify which services apply to this requirement. Once the evaluation/assessment and nine (9) outpatient/office location follow-up sessions per participating practitioner per member are utilized, Network Practitioners must contact Cenpatico to obtain authorized sessions for continued services. To download an OTR Form at www.cenpatico.com, click on the Providers tab, Provider Forms/Resources, Texas and Foster Care then see the Outpatient Treatment Request Form (OTR) section. Cenpatico does not retroactively authorize treatment.

What is the Health Passport, and must I participate? (STAR Health only)

The Health Passport is an electronic health record accessed through the Cenpatico Provider Website that provides a current and historical summary of medical and behavioral health treatment. All mid-level behavioral health providers are required to submit an initial assessment and monthly treatment summary.

All forms can be found at:

https://www.superiorhealthplan.com/portal/public/superior/provider/resources/health_passport/health_passport_forms. For questions related to the Health Passport contact Superior HealthPlan at 866-714-7996, or via email Tx_passportadmin@centene.com.

What if I do not have computer or internet access? (STAR Health only)

Please contact Superior HealthPlan at 866-714-7996 and the Health Passport forms can be forwarded to you. The completed form(s) may be faxed to the number listed on the form(s).

Is the Health Passport HIPAA compliant? (STAR Health only)

Yes, there are security measures in place that assure HIPAA compliance.

When is prior authorization not required?

Prior authorization is not required for the following CPT code for contracted Psychiatrists or Advance Nurse Practitioners:

90801/90802- Diagnostic Interview Examination

90862- Pharmacologic Management

90805- Individual Therapy (20-30 minutes) with med eval/mgmt services

90807- Individual Therapy (45-50 minutes) with med eval/mgmt services

90811- Individual Therapy, interactive (20-30 minutes) with med eval/mgmt services

90813- Individual Therapy, interactive (45-50 minutes) with med eval/mgmt services

When do I complete an Outpatient Treatment Request (OTR) form?

Once you exhaust the initial free authorization period or utilize all sessions authorized by Cenpatico, you will need to complete an OTR form to request additional sessions. You may want to complete an OTR when you only have one (1) session left from the previous authorization. This will allow you ample time to complete and submit the OTR, and for the OTR to be reviewed and approved.

Where do I send completed OTRs?

Please fax your completed OTR to (866) 694-3649. The Cenpatico clinical team will review and process your request once it is received. You will be notified of your new/updated authorization via fax. The usual turnaround time is 2 business days.

REIMBURSEMENT & CLAIMS

Where do I send my clean claims?

Please mail your claims to the following address:

Cenpatico Claims Processing

PO Box 6300

Farmington, MO 63640-3806

What is the timely filing deadline?

You have 95 days from the Date of Service to submit your clean claim to Cenpatico for processing.

Do I use a CMS-1500 or UB-04 form?

CPT and HCPCS codes must be billed on a CMS-1500 form. Revenue codes must be billed on a UB-04 form.

What if I disagree with a claims denial?

If you disagree with a claims denial, you may appeal in writing within 120 days of the date of the denial on the Explanation of Payment to the following address:

Cenpatico Appeals
PO Box 6000
Farmington, MO 63640-3809

You can find more information regarding the appeal process in the Cenpatico Provider Manual.

How do I contact claims customer service?

Please contact 877-730-2117 to speak with Claims Customer Service.

Where do I find the covered billing codes?

Please refer to your reimbursement exhibit (fee schedule) in your agreement. Updated Medicaid allowable rates are posted at Texas Medicaid & Healthcare Partnership (TMHP) at www.tmhp.com. You may also contact Cenpatico Texas Provider Relations at 877-264-6550.

Can I submit my claims electronically?

Cenpatico will accept claims electronically through one of our approved clearing houses:

- Emdeon - Cenpatico Payor ID #68053 - phone number 866-369-8805
- Availity - Cenpatico Payor ID #68053 - phone number 800-282-4548

In-network providers may also choose to submit claims at no cost using the Provider Portal at www.cenpatico.com.

My tax identification number has changed. What do I do?

Contact the Texas Medicaid & Healthcare Partnership (TMHP) by calling 800-925-9126. Once you have received verification of changes from them, please submit a Provider Change Form to Cenpatico. At www.cenpatico.com, click on the Providers tab, Provider Forms/Resources, Texas and Foster Care, then see the Administrative & Claims section and click on Provider Change Form or call Cenpatico Provider Relations at 877-264-6550. A copy of your updated W9 must be attached.

Can I bill a member for covered services?

Per your CMS guidelines and your signed agreement with Cenpatico, members may not be billed for covered services.

Who do I contact if my checks are sent to the wrong address?

Go to www.cenpatico.com and click on the Providers tab, Provider Forms/Resources, Texas and Foster Care, then see the Administrative & Claims section and click on Provider Change Form or call Cenpatico Provider Relations at 877-264-6550. Address changes take 10 business days once the change has been submitted. Claims payments must be sent to the address on the W9. If the wrong address is on the W9, claims payments will be delayed to the provider.