



March 21, 2024

IPHA Third-Party Billing Capacity and Needs Survey

The IPHA Third-Party Billing team is conducting a statewide comprehensive billing capacity and needs survey.

The data gathered from this survey will be used to identify training and operational needs that will be addressed by the IPHA Third-Party Billing Program. Your participation is vitally important to ensure that we have current and accurate data. The information you provide will help us customize our technical assistance to meet the needs of healthcare providers in Illinois.

This survey should be completed by the person within your organization who is most familiar with your billing and revenue cycle management processes.

We ask that only one respondent from each healthcare organization complete the survey. Please participate in this important survey by clicking [here](#).

Thank you for your participation and cooperation.



"A recent analysis of data breaches by Security Scorecard for its Global Third-

Party Cybersecurity Breaches Report found healthcare was the worst affected industry with the highest volume of third-party breaches, followed by financial services. More than one-quarter (28%) of all breaches occurred at healthcare organizations, with financial services the second most targeted sector (16%).”

The HIPAA Journal: **Healthcare Experiences More Third-Party Data Breaches Than Any Other Sector**

The widespread impact of the Change Healthcare ransomware attack has highlighted the importance of increased vigilance by all types of healthcare organizations. [The Department of Health and Human Services \(HHS\)](#) has responded by issuing [new flexibilities for affected providers](#).

HHS has also issued a [Healthcare Sector Cybersecurity Concept Paper](#) that outlines voluntary [Cybersecurity Performance Goals](#) (CPGs) designed to help healthcare organizations improve cybersecurity by implementing measures to increase resistance to cyber threats and recover more quickly when cybersecurity defenses are breached. For more information and additional resources, please see: <https://hphcyber.hhs.gov/performance-goals.html>.

UnitedHealth Group Offers Temporary Funding Assistance in Response to Change Healthcare Ransomware Attack

“UnitedHealth Group, the parent company of Change Healthcare, has set up a temporary financial assistance program for customers affected by the Change Healthcare ransomware attack. The program will help providers who have been unable to receive

payments due to the outage at Change Healthcare. Under the [financial assistance program](#), providers that receive payments processed by Change Healthcare will be able to apply for temporary funding through Optum Financial Services. If applications are made for temporary funding, they will be paid based on prior claims volume and will be interest-free and fee-free."



In March, the IPHA Third-Party Billing team hosted two training sessions:

Billing and Coding for PrEP, PEP, and Other HIV Prevention Services was presented on March 6 by [Nicole Elinoff](#), Senior Manager, Prevention with [National Alliance of State & Territorial AIDS Directors \(NASTAD\)](#). This training provided tips and best practices to help providers efficiently bill for HIV services.

Intro to Managed Care, Working with MCOs, and Credentialing was presented on March 13 by [Lindsey Artola](#), President of [SAGE Health Strategy](#). This webinar provided an introduction to Medicaid managed care and getting set up to bill the Medicaid health plans. Topics covered included:

- The national move to managed care in Medicaid
- How to work with Medicaid Managed Care Organizations (MCOs)
- Credentialing in IMPACT
- Completing the Universal Roster

Both trainings were recorded and will be available for viewing at the [IPHA Healthcare Billing webpage](#).

The next installment of our **Webinar Wednesdays** training series will be held on April 10, 11:30 AM – 12:30 PM. [Kem Tolliver](#), President and CEO of [Medical Revenue Cycle Specialists LLC \(MRCS\)](#), will be presenting **Revenue Cycle Management Fundamentals**.

Revenue Cycle Management (RCM) impacts all aspects of a healthcare entity's ability to be paid for medical services and capability of delivering high quality care. Participants in this session will learn of the foundational components of the revenue cycle and map current processes to best practices.

Learning objectives include:

1. Define and examine the four quadrants of the revenue cycle.
2. Map revenue cycle to organizational workflows.
3. Discuss best practices in revenue integrity and revenue cycle optimization.

For more information and to register: <https://form.jotform.com/240784005838157>






Join Webinar Wednesdays

to learn more about:
"Revenue Cycle Management
Fundamentals"

Guest Speaker: [Kem Tolliver](#), FACMPE,
CPC, CMOM

Revenue Cycle Management impacts all aspects of a healthcare entity's ability to be paid for medical services and capability of delivering high-quality care. Participants of this session will learn of the foundational components of the Revenue Cycle and map current processes to best practices.

Topics of this webinar will include:

-  Define and examine the four quadrants of the revenue cycle
-  Map revenue cycle components to organizational workflows
-  Discuss best practices in revenue integrity and revenue cycle

Wednesday, April 10, 2024

11:30 am – 12:30 pm CST

[Register here](#) by
Monday, April 8, 2024

Webinar Wednesdays will take place every **second Wednesday** of the month.



Watch IPHA's [Upcoming Events](#) page and monthly Billing Digests for additional details and information on how to Register for the next webinar.

Funding for this program provided by the Illinois Department of Public Health

IPHA.com | (217) 522-5687 | insurancebilling@ipha.com

TRAINING AND EDUCATION RESOURCES



On Wednesday, April 3, the Illinois Association of Medicaid Health Plans (IAMHP) will be providing a webinar on **IMPACT Provider Enrollment and Eligibility**. For more information and to register, please see:
<https://www.iamhp.org/product/04-03-2024-Sip-&-Refresh>

On Wednesday, April 3, at 11:00 AM CST, the Department of Health and Human Services (HHS) and the Centers for Medicare and Medicaid Services (CMS) will be presenting a **Medicaid and Children's Health Insurance Program (CHIP) Renewals** webinar. Topics discussed during this webinar will include:

- Overview of CMS recently released guidance
- Review of key messages and outreach resources for partners

If your organization serves or interfaces with people that have health insurance through Medicaid or CHIP, then this webinar is for you. For more information and to register please see:

https://cms.zoomgov.com/webinar/register/WN_qma5AvyBQWCTB0vbNF3ITA

To register to receive email notifications from CMS, please visit:

<https://public.govdelivery.com/accounts/USCMS/subscriber/edit?preferences=true#tab1>

Want to learn more about 340B? This [article](#) provides an excellent summary of the 340B drug discount program and will help you determine if 340B is a viable option for your organization.

Get to Know the MCOs

The Illinois Department of Healthcare and Family Services (HFS) operates three distinct care coordination programs within Illinois’—[Medicaid Managed Care program](#); [HealthChoice Illinois](#) (HCI), [YouthCare](#), and the [Medicare Medicaid Alignment Initiative](#) (MMAI). To help provide Medicaid clients with quality services, enhance healthcare coordination, and manage costs, HFS has partnered with six [Managed Care Organizations](#) (MCOs), also known as Medicaid Health Plans, to manage and administer benefits for beneficiaries within each of these care coordination programs. The six Illinois Medicaid MCOs are:

- [Aetna Better Health Illinois](#)
- [Blue Cross Blue Shield of Illinois](#)
- [CountyCare](#)

- [Humana](#)
- [Meridian](#)
- [Molina Healthcare](#)

This month, we focus on **[Molina Healthcare](#)**. Molina serves clients enrolled in [HealthChoice Illinois \(HCI\)](#), and [the Medicare Medicaid Alignment Initiative \(MMAI\)](#).

Information about their provider portal can be found [here](#). Their provider manuals can be accessed using the Manual Home for [Medicaid](#) and for [MMAI](#). Their [Provider News and Updates](#) allows providers to receive the most current information. You may register to receive this information [here](#). You may also sign up to receive their [provider newsletter](#).

For their Network Relations contact information and coverage areas (for health departments), please use this link: [Service Area \(molinahealthcare.com\)](#). To access Information about how to contract with Molina, please see [Join Our Network | Molina Healthcare of Illinois](#). Their new Provider Orientation can be found at https://www.molinahealthcare.com/-/media/Molina/PublicWebsite/PDF/Providers/il/Provider-Webinar-PDFs/MHIL_2024_Provider_Orientation_Webinar.ashx.

Molina has interpreter/translator services available for members and providers for [MMP/ Duals](#) and [Medicaid members](#).

To verify member eligibility and link to resources for eligibility verification providers may use [Molina's Availability Provider Portal](#).

For procedures and contacts to pursue claim rejections and denials use this [link](#) for MMP/DUAL and Medicaid use this [link](#).

Molina provides a series of [trainings for providers](#). Frequently used forms and other helpful resources for providers can be found [here](#).

If you cannot find the information you need using the links above, you may [contact Molina](#).



This Month's MVR

This month's award for MVR (Most Valuable Resource) goes to the [Application for Benefits Eligibility](#), also known as "ABE". Every provider should be familiar with this website because it will help your clients determine if they are eligible for benefits such as Medicaid, All Kids, Medicare, SNAP, and more. Helping your clients apply for these benefits assures that they have the healthcare benefits that they are eligible for and minimizes the number of uninsured clients presenting for services. Referring clients to this website is a "win/win" for providers and their patients.



Did You Notice?

HFS has recently issued several important Provider Notices:

[Temporary System Outage for Fee-For-Service \(FFS\) Pharmacy Billing](#)

**Medical Programs Billing Continues
Despite Change Healthcare Nationwide
Outage**

**Coverage for Synagis Extended through
March 31, 2024**

**Updated Community-Based Behavioral
Health Fee Schedule and Billing Guidance**

**Practitioners - No Prior Approval for Drug
Items During Change Healthcare Outage –
Fee-for-Service Program Only**

If you have not already subscribed to receive email notifications from HFS when new Provider Notices are posted, you may subscribe [here](#).

To learn more about the many helpful resources available to healthcare providers, please visit the [HFS Provider website](#).



If you have any questions or suggestions for topics that you would like to see covered in

future issues of the IPHA Billing Digest,
please email your suggestions and/or
requests to insurancebilling@ipha.com.

Thank you!



If you ever have any questions or need any advice, don't
hesitate to touch base with me.

Sincerely,

Phil Talley, IPHA Program Manager
ptalley@ipha.com | 217-522-5687



Forward

Illinois Public Health Association
500 W Monroe St, #1E
Springfield, IL 62704

As one of the largest affiliates of the American Public Health
Association, IPHA is widely recognized as a leader in the field of
public health advocacy, health education and promotion.

Join our membership to stay up to date on all public health
activity in the state!

[Preferences](#) | [Unsubscribe](#)