



Mercy Care Department of Child Safety Comprehensive Health Plan Provider Frequently Asked Questions

Assigned Behavioral Health Clinic (ABHC) Assignment Process

Q: Crisis Response Network will be dispatching the rapid response, but how will they determine which health home gets the rapid response referral? Will it still be driven by the DCS worker?

A: The selection and determination of the Assigned Behavioral Health Clinic processes will remain the same as they were prior to 4/1/21 for each geographic area.

Benefits

Q: Will routine vision and vision hardware benefits remain the same as CMDP?

A: Yes, these benefits will remain the same.

Claims

Q: Will there be a different payer ID to use when billing Mercy Care DCS CHP?

A: You will use the Mercy Care DCS CHP payer ID (not Mercy Care RBHA) to submit claims for Mercy Care DCS CHP members. Refer to the Provider Manual to ensure you are using the correct payer ID for the Mercy Care DCS CHP line of business. Click here for the [Mercy Care Provider Manual](#).

Q: What will the address for claims be for the Mercy Care DCS CHP (CMDP) claims?

A: The Mercy Care DCS CHP claim address can be found at: <https://www.mercycareaz.org/providers/chp-forproviders/claims>. You may also refer to the [Provider Manual](#) for claim addresses.

Q: What EDI will we use to bill CMDP claims to Mercy Care DCS CHP?

A: Mercy Care DCS CHP EDI information can be found at: <https://www.mercycareaz.org/providers/chp-forproviders/claims>.

Q: Do members need to have one of our providers (PCP) assigned to them before they can be seen and claims paid?

A: No. Claims received from a contracted provider will still be processed, regardless of the member's PCP assignment.

Care management

Q: How will crisis claims be handled? Will we still submit to the MC RBHA for crisis claims as we do now for DCS CMDP?

A: Integrated Rapid Response is not a crisis service and will be billed to Mercy Care under the DCS CHP line of business. The first 72 hours of crisis remains the responsibility of the RBHA for all people in their county, regardless of eligibility.

Q: Is the claim billing process for Mercy Care DCS CHP the same as the existing lines of business billing for ACC and DD?

A: Yes.

Q: Will we be able to check claim status through the Mercy Care Portal?

A: Yes, claim status for DCS CHP membership will be available through the Mercy Care Web Portal for dates of service starting 4/1/21.

Q: Will claims for dates of service prior to 4/1/21 go to the old CMDP or will they be sent to Mercy Care?

A: You will submit DCS CHP claims to Mercy Care for dates of service beginning 4/1/2021. Claims will go to CMDP to process for dates of service prior to 4/1/21.

Q: If we have claims still pending at CMDP after 4/1/21, will payments still come from CMDP or from Mercy Care DCS CHP?

A: CMDP will continue to process claims for dates of service prior to 4/1/21.

Constant Contact

Q: How do I sign up for your email list?

A: Join our email list by clicking [here](#).

Continuity of Care

Q: Is Continuity of Care reserved for providers currently treating children already placed with DCS?

A: It is for children already in DCS care; however, we will try to accommodate members that are seeing other providers at the time of removal. Providers should be AHCCCS-registered.

Q: What will happen to the youth currently in care in a Behavioral Health Residential Facility who do not have a contract with Mercy Care?

A: They will continue to be paid and we will outreach to those providers as we move through transition. No members will need to move.

Contracts

Q: If we receive a referral after 4/1/21 and are not contracted with Mercy Care, do we turn them down or will we be able to accept under a new SCA until contracted with Mercy Care?

A: If a referral is received 4/1/21 forward, non-contracted providers should follow the prior authorization process.

Covered Services

Q: Does this plan include coverage for DME?

A: Yes. Durable Medical Equipment is still included in this plan. Refer to the Prior Authorization tool to determine if a Prior Authorization is required.

Credentialing

Q: Where do we find the credentialing forms and the email to send them to?

A: Credentialing forms are located on our website under each line of business and contain instructions for submission. Here is the link to Provider Forms under Mercy Care DCS CHP: <https://www.mercycareaz.org/providers/chp-forproviders/forms>. You may download the applicable AzAHP Form to submit for credentialing.

Q: Will you be honoring all currently credentialed providers?

A: Providers currently credentialed with Mercy Care will not require additional credentialing for DCS CHP when Mercy Care DCS CHP begins 4/1/21. We will *not* honor credentialing where the provider was credentialed by another plan and is currently non-contracted with Mercy Care.

Q: Will DCS CHP require us to submit credentialing applications? Or is the contract amendment all we need?

A: Providers currently credentialed with Mercy Care will not require additional credentialing for DCS CHP when Mercy Care DCS CHP begins 4/1. We will *not* honor credentialing where the provider was credentialed by another plan and is currently non-contracted with Mercy Care.

Electronic Funds Transfer (EFT) / Electronic Remittance Advice (ERA)

Q: We currently receive physical payments and paper EOBs from CMDP; will that change effective 04/01/21? Will we receive electronic payments?

A: Mercy Care encourages all our providers to apply for EFT and ERA. If you already receive electronic payment and EOBs from Mercy Care, there is nothing further you need to do – your DCS CHP payments and EOBs will be electronic as well. Provider's enrollment in electronic checks and remits vs. paper will mirror your current Mercy Care set up. If you are not currently enrolled with Mercy Care you will need to set up this preference as we will not be able to mirror your current set up with DCS CMDP.

Eligibility

Q: If I already have access to the Mercy Care web portal, will I be able to search for DCS CHP member eligibility?

A: Mercy Care DCS CHP Enrollment and Eligibility detail will be available in the Mercy Care Web Portal beginning 4/1/21.

Q: Will eligibility information specify DCS CHP on the Mercy Care website?

A: Mercy Care DCS CHP Enrollment and Eligibility detail will be available in the Mercy Care Web Portal beginning 4/1/21.

Early Periodic Screening, Diagnostic and Treatment (EPSDT)

Q: With CMDP we just submitted provider progress notes along with the claim instead of an EPSDT form. Will we have to use this form, or will provider progress notes be ok to submit along with the claim?

A: The EPSDT Form is a required form.

Q: Where can we get the EPSDT forms?

A: The EPSDT Forms are found on Mercy Care's website under any line of business. Here is the link to Provider Forms under Mercy Care DCS CHP: <https://www.mercycareaz.org/providers/chp-forproviders/forms>.

Family Connect

Q: When a new placement comes into a foster parent's care, will the child's information automatically be put into their portal? Or are the portals made for each individual child?

A: If the foster parent has multiple children placed with them, they'll need to create an account for each individual child.

Q: Will foster parents have access FamilyConnect, and if so, how will that work if the child changes placements?

A: Yes, foster parents will have access to the FamilyConnect application. Once a child is no longer with the foster parent, the child will no longer be visible to the foster parent in FamilyConnect.

Member ID #

Q: Will the member ID be the AHCCCS ID or the numeric ID that is currently used for CMDP?

A: All members are assigned a CMDP "P ID" and all Titled members will be assigned an AHCCCS ID. The AHCCCS ID is the preferred identifier for claims submissions. There is a period of time when members may not have an AHCCCS ID, or there may be members that never qualify for Titled coverage; in those instances the CMDP "P ID" should be used. Mercy Care will store both IDs in the member's record.

Q: Currently members have an AHCCCS ID and CMDP ID. Will they continue to have both?

A: All members are assigned a CMDP "P ID" and all Titled members will be assigned an AHCCCS ID. The AHCCCS ID is the preferred identifier for claims submissions. There is a period of time when members may not have an AHCCCS ID, or there may be members that never qualify for Titled coverage; in those instances the CMDP "P ID" should be used. Mercy Care will store both IDs in the member's record.

Q: Will Mercy care continue to use the CMDP ID number, or do we use the member's AHCCCS ID on claims submitted to Mercy Care?

A: All members are assigned a CMDP "P ID" and all Titled members will be assigned an AHCCCS ID. The AHCCCS ID is the preferred identifier for claims submissions. There is a period of time when members may not have an AHCCCS ID, or there may be members that never qualify for Titled coverage; in those instances the CMDP "P ID" should be used. Mercy Care will store both IDs in the member's record.

Member ID Card

Q: When will ID cards be mailed?

A: Mercy Care will provide the DCS CHP Member ID Cards to DCS. The ID Cards will then be provided to members within the first two (2) weeks of April.

Q: Is the Assigned Behavioral Health Clinic on the member's ID card?

A: No, this is not included on the member ID card.

Mercy Care DCS CHP

Q: Mercy Care is taking over the DCS CHP contract on 4/1/21. Does that mean Mercy Care ACC, or Mercy Care RBHA?

A: DCS CHP will be a new line of business under Mercy Care. The other lines of business under Mercy Care are ACC, DD, ALTCS, and MCA. Mercy Care DCS CHP members, claims, etc. will be visible in the Mercy Care web portal.

Mercy Care Web Portal

Q: Will DCS CHP be in a separate web portal with Mercy Care?

A: No. DCS CHP will be included in the Mercy Care web portal.

Q: Will providers still have access to view/print explanation and benefits?

A: Yes, this will continue to be available. Providers will use the Mercy Care web portal for DCS CHP members.

Q: Is the Mercy Care web portal available for out-of-network providers?

A: Yes. Access to the portal requires registration. The registration form is located on our website. Go to **www.MercyCareAZ.org** and select "For Providers" under any line of business. Then select Provider Forms from the left side menu. You will choose "Mercy Care Web Portal Registration Form (Non-Par).

Network Representatives

Q: Who should our provider office contact with further questions?

A: Providers may contact their assigned Network Representative directly or email the Network Management Department at MercyCareNetworkManagement@MercyCareAZ.org.

Q: How do I find out who our Provider Representative is?

A: The Network Representative Provider Assignments are available on our website. Go to **www.MercyCareAZ.org** and select "For Providers" under any line of business. Then scroll to the bottom of the page and select "Network Management Department." You will see the listing options for assignments.

Q: If we are already contracted with Mercy Care, will we be using the same Provider Representative or will we have two separate Representatives?

A: You will continue to have one Network Representative.

Prior Authorization

Q: I have a couple kids in HCTC that have prior auths that expire on 3/31/21. Will those get extended or how would you like me to proceed?

A: If the authorizations are not extended prior to transition, please fill out the Child and Adolescent 60 Day Clinical Review form on our website and fax to **855-825-3165**.

Q: If specialty appointments are already scheduled after April, will there be an issue with payment? For example, a neuro evaluation.

A: Members may still receive scheduled covered services from contracted providers with no issue. Non-contracted providers with approved prior authorizations in place prior to 4/1/21 may still provide services.

Q: Will all CMDP authorizations already on file will be honored?

A: Mercy Care will honor all approved CMDP prior authorizations prior to 4/1/21. Out-of-network providers will be allowed to see our members up to one year post 4/1/21 without prior authorization for purposes of transition of care.

Q: Will routine vision require prior authorization if we are in-network?

A: Review the Mercy Care DCS CHP Prior Authorization grid here:
<https://www.mercycareaz.org/providers/chp-forproviders/priorauth>.

Q: Will PT, OT and Speech Therapy require prior authorization for in network providers?

A: Review the Mercy Care DCS CHP Prior Authorization grid here:
<https://www.mercycareaz.org/providers/chp-forproviders/priorauth>.

Q: Will prior authorizations be necessary for outpatient services?

A: Review the Mercy Care DCS CHP Prior Authorization grid here:
<https://www.mercycareaz.org/providers/chp-forproviders/priorauth>.

Q: CMDP currently does not require prior authorization for their outpatient behavioral health services. Beginning 4/1/21, are there only certain services that need prior authorization with Mercy Care for our DCS CHP members?

A: Review the Mercy Care DCS CHP Prior Authorization grid here:
<https://www.mercycareaz.org/providers/chp-forproviders/priorauth>.

Q: Where do independent laboratories fall within the prior authorization spectrum? Are there any specific services that will always require prior authorization?

A: Review the Mercy Care DCS CHP Prior Authorization grid here:
<https://www.mercycareaz.org/providers/chp-forproviders/priorauth>.

Q: For DCS CHP members currently in out-of-home placement, beginning 4/1/21 with Mercy Care, what might that prior authorization process look like?

A: Review the Mercy Care DCS CHP Prior Authorization grid here:
<https://www.mercycareaz.org/providers/chp-forproviders/priorauth>.

Q: Who needs to be the one to complete the prior authorization? The home health agency or the specialty provider?

A: The Home Health Agency (AKA Assigned Behavioral Health Clinic) will need to complete the prior authorization.

Q: If members are currently placed out-of-home, how will the provider obtain the new authorization information?

A: The provider can contact Mercy Care and the new authorization number will be provided to them.

Q: CMDP issues retro authorization. Will Mercy Care do the same?

A: Typically retro authorizations are not given unless it's for home health or other services needed as part of discharge planning.

Q: For children receiving Therapeutic Foster Care (TFC) services, is a new prior authorization required for the health home if the child is currently receiving services or does the specialty agency need to complete a concurrent review?

A: We will get the authorization from the RBHA and outreach to the provider for any concurrent review or new authorizations needed.

Q: If a prior authorization was submitted to CMPD and a determination was not received prior to 4/1/21, will we need to resubmit a new prior authorization to Mercy Care DCS CHP?

A: Yes, please submit a new authorization.

Q: Along with prior authorizations, CMDP required a consent to perform general anesthesia. Will we need a consent along with prior authorization?

A: Yes, please submit the general anesthesia consent forms with the prior auth request.

Q: Will I be able to modify a prior authorization if the CPT is different than when initially requested, or would we have to appeal? Sometimes when surgery is performed the CPT can change.

A: Yes. The provider will need to call into the health plan and explain the reason for the update.

Q: The Prior Authorization tool has two options; Mercy Care and Mercy Care Advantage. Which one do I select for DCS CHP members?

A: You will select "Mercy Care" in the Prior Authorization tool when checking prior authorization requirements for services for a Mercy Care DCS CHP member.

Reimbursement

Q: Does Mercy Care now cover incidentals for foster care services such as personal and clothing allowances for our Therapeutic Foster Care members or is that still DCS?

A: This responsibility will remain with DCS. You should reach out to the assigned DCS Specialist with questions regarding incidentals.

Single Case Agreements

Q: If I currently have a Single Case Agreement (SCA) with CMDP, will I need to obtain a new one with Mercy Care DCS CHP beginning 4/1/21?

A: Non-contracted providers can continue to see members for up to one year post 4/1/21, and will be paid at the AHCCCS rates. If you had a Single Case Agreement (SCA) with CMDP and would like a Single Case Agreement for services 4/1/21 and after, please contact the Mercy Care Prior Authorization department.

Q: After 4/1/21, under the Single Case Agreements, will we bill Mercy Care DCS CHP?

A: Non-contracted providers can continue to see members and will be paid at the AHCCCS rates. If you had a Single Case Agreement with CMDP and would like a Single Case Agreement for services 4/1/21 and after, please contact the Mercy Care DCS CHP prior authorization department.

Transportation

Q: Will all requests for transportation be through Mercy Care DCS CHP, or will DCS Case Managers have the option to request transport from Providers?

A: Providers and DCS Case Managers may call Mercy Care DCS CHP Member Services to request transportation for a member from a provider visit. Mercy Care DCS CHP Member Services can be reached at **602-212-4983** or **1-833-711-0776**. DCS specialists will continue to arrange the transportation for DCS funded services. For Behavioral health services, transportation requests are set up by the Assigned Behavioral Health Clinic and through the Child and Family Team.