Day Activity Health Services (DAHS)
Training Last Updated June 2015
Who is Superior HealthPlan?

- A subsidiary of Centene Corporation located in St. Louis, MO.
- Has held a contract with HHSC since December 1999.
- Provides programs in various counties across the State of Texas. Programs include STAR, STAR+PLUS, CHIP, STAR Health (Foster Care), STAR+PLUS Medicare-Medicaid Plan (MMP), Medicare Advantage, and Ambetter from Superior HealthPlan.
- Manages healthcare for over 900,000 Members across Texas.
Verify Eligibility

- Superior HealthPlan Secure Web Portal: www.SuperiorHealthPlan.com
- “Your Texas Benefits” Medicaid Card
- TexMedConnect: http://www.tmhp.com/Pages/EDI/EDI_TexMedConnect.aspx
- Superior HealthPlan Member Identification (ID) Card
- Member Services: 1-866-516-4501
This is where your name appears.

This is your Medicaid ID number.

This is HHSC’s agency ID number. Doctors and other providers need this number.

If you have a health plan, its name and phone number will be listed here. Call this number if you have questions about your doctor or services.

Drug stores use these numbers.

This is the date your card was sent to you.

This message is for doctors and other providers. This means they need to make sure you are still in the Medicaid program.

This card does not guarantee eligibility. La tarjeta no garantiza la elegibilidad.

This is a magnetic strip your doctor can swipe (like a credit card) to get your Medicaid ID number.

Call this number if you need help using this card.

Need Help? ¿Necesita Ayuda?

1-800-252-8263

Questions about your doctor? ¿Preguntas sobre su doctor?

Call your health plan. Llame su plan de salud.

www.YourTexasBenefits.com

Go to this website to learn more about this card.
Member ID Cards

• The Member ID Cards contain at least the following information:
  – Member name
  – Primary Care Provider
  – Prescription information
  – Program eligibility
  – Superior HealthPlan contact information

• Copies of the ID Card can be found in the Superior Provider Manual.
Service Coordination

• Single point of contact for the Member
• Reviews assessments and develops a plan of care utilizing input from the Member, family and providers
• Coordinates with the Member’s PCP, specialist and LTSS Providers to ensure the Member’s health and safety needs are met in the least restrictive setting
• Refers Member to support services such as disease management and community resources
Service Coordination

• Authorizes Long Term Services & Supports (LTSS)
• Utilizes a multidisciplinary approach in meeting Members needs
• Conducts mandatory telephonic or face to face contacts
• Service Coordinator Member caseloads are assigned by mixed model
Locating Member’s Service Coordinator

- Find the name and phone number of the assigned Service Coordinator through the secured Provider web portal.
  - The assigned Service Coordinator and phone number is displayed on the Eligibility Overview page under Care Gaps for each specific member.

- For questions, call Service Coordination: 1-877-277-9772
LTSS Service Authorizations

• All authorizations for LTSS services are obtained through the Service Coordination Department
• A member’s specific Service Coordinator’s name can be seen when a member’s eligibility is confirmed through the Superior’s web portal
• Speak to a Service Coordinator, call 1-877-277-9772
• Prior Authorization Form should be faxed to:
  – STAR+PLUS – 1-866-895-7856
  – STAR+PLUS MMP – 1-855-277-5700
  – DAHS Authorizations – 1-877-441-5811
Authorization Specifics

- A new Individual Service Plan (ISP) is necessary for individuals who need initial prior approval for DAHS services or who are being transferred to a new DAHS facility.

- Updates are done with there is a change to the individuals treatment, monitoring and intervention occurs, or nursing service needs changed based on new or supplemental physician’s orders.
Authorization Specifics

- Providers may call the Service Coordination department or fax a 2067 Form to request initial approval of DAHS services.
- Additionally, the following DADS forms can be used at:
  - Initial and renewal requests & facility transfer
  - Health assessments
    - Form 3050
    - Form 3049
    - Form 3055

For more information visit: http://www.superiorhealthplan.com/2015/05/05/update-to-policy-update-dahs-request-for-services-2/
An alternative to the forms is submitting all the following criteria that is either current or no older than three months:

- Active medical diagnosis
- Current list of medications
- Description of member’s personal care requirements
- Indication of dietary needs (special requirements)
- Complete vital signs at time of assessment
- Physician’s orders requesting the service
- Functional disability related to the medical diagnosis
- Therapeutic benefit potential from attending DAHS
- Interventions being performed by nurse at the DAHS facility for the member
Billing Requirements

- Place of Service Codes:
  - 99
- Procedure Codes:
  - DAHS: S5101
- Taxonomy Codes:
  - 261QA0600X
- Units:
  - 1 unit = 3 to 6 hours
  - 2 units = Over 6 hours
- If Provider bills less than contracted amount, the claim will be eligible for reimbursement at the lesser of billed charges.
- Must use appropriate modifiers as found on the LTSS Billing Matrix.
Provider Portal & Website

Provider Portal:
• Secure.
• Provides up-to-date member eligibility and Service Coordinator assignment.
• Has a secure claim submission portal you can submit claims at no cost!
• Provides a claim wizard tool that walks you through filling in a claim to submit online.
• Provides claim status and payment information.
• Allows you to request and check the status of an acute care authorization.

Public Site:
• Contains our Provider Directory and on-line lookup.
• Has a map where you could easily identify the office of the field Provider Relations Specialist assigned to you.
• Contains an archive of Provider Manuals, newsletters, bulletins, forms, and links to important sites to keep you up to date on any new changes that may affect you.
Provider Training

- Superior offers billing presentations and product specific trainings. Other topics include:
  - Provider Portal Training
  - LTSS Billing Clinics
  - STAR+PLUS
  - STAR+PLUS MMP

- You can find the training schedule on our website at www.SuperiorHealthPlan.com in the Provider Resources section.

  We encourage you to join us!