Introduction to Iowa Total Care



Our purpose is to transform the health of the community, one person at a time. We know this is only possible by building a strong partnership with you.

We are dedicated to providing you with reliable services and support. As our partner, you have access to industry knowledge, resources and programs created to deliver efficiencies for your practice so you can focus on your patients.

We developed this packet to introduce ourselves and to welcome you by providing some initial resources. We look forward to working with you.

Suggested next steps:

- Register on our Secure Provider Portal.
- Set up Electronic Funds Transfer with Iowa Total Care.
- Get familiar with Prior Authorization requirements.
- Review the Quick Reference Guide for office administrative task information.
- Hang the window decal to show you accept Iowa Total Care.
- Let us know what we can do to help. Contact Provider Services: 1-833-404-1061 (TTY: 711).

Iowa Total Care Overview

Established to deliver quality healthcare in the state of Iowa through local, regional and community-based resources, Iowa Total Care is a Managed Care Organization and subsidiary of Centene Corporation (Centene). Iowa Total Care exists to improve the health of its beneficiaries through focused, compassionate and coordinated care. Our approach is based on the core belief that quality healthcare is best delivered locally.

Benefits & Services for Patients

We deliver top-quality coverage for your patients, but the focus doesn't stop there. Our coverage extends beyond your office or organization to offer valuable programs and educational tools to patients, making it easier for them to be engaged in their health.

Comprehensive Medical Care

Our plan includes essential health benefits that your patients need such as preventive care, maternity care and emergency services.

Care Coordination

Care coordinators work closely with you and your patients to make sure their health needs are always met, including medical, behavioral and social needs.

• 24/7 Nurse Advice Line

Rest assured knowing that patients have 24/7 access to our medical advice line for answers to all of their health questions.

Maternity Care Coordination

Our dedicated maternity care coordination team works closely with you and your maternity patients, especially those that have a medium or high risk level for an adverse event.





Payspan: A Faster, Easier Way to Get Paid



Iowa Total Care offers Payspan, a free solution that helps providers transition into electronic payments and automatic reconciliation.



Improve cash flow by getting payments faster



Settle claims electronically

through Electronic Fund Transfers (EFTs) and Electronic Remittance Advices (ERAs)

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Maintain control over bank accounts by routing EFTs to the bank account(s) of your choice



Match payments to advices quickly and easily re-associate payments with claims



Manage multiple payers, including any payers that are using Payspan to settle claims



Remittance flexibility

provides options to download into a PDF or Excel file



Create custom reports

including ACH summary reports, monthly summary reports and payment reports sorted by date

SET UP YOUR PAYSPAN ACCOUNT

Contact Payspan by phone: 1-877-331-7154, option 1 or email them: providersupport@payspanhealth.com.

You may need your National Provider Identifier (NPI) and Provider Tax ID Number (TIN) or Employer Identification Number (EIN).

How to Secure Prior Authorization

Prior Authorization Check Tool



Use the Prior Authorization Check Tool on the website to quickly determine if a service or procedure requires prior authorization.

Submit Prior Authorization

Emergency services, family planning, post-stabilization services and tabletop x-rays do not require prior authorization. If a service requires authorization, submit via one of the following ways:



SECURE WEB PORTAL

Provider.IowaTotalCare.com

This is the preferred and fastest method.

Notification of authorization will be returned by phone, fax, or web.



FAX

1-833-257-8327

- For behavioral health:
 - Outpatient: 1-844-908-1170
 - Inpatient: 1-844-908-1169



See reverse side for a list of services that require prior authorization.

Please note:

- All out-of-network services require prior authorization EXCEPT emergency services, family planning, post-stabilization services, and tabletop x-rays.
- Failure to complete the required authorization or certification may result in a denied claim.

Prior Authorization Guide

Out-of-Network Services

All out-of-network (non-par) services and providers require prior authorization, excluding emergency services, family planning, post-stabilization services and tabletop x-rays.

SERVICES THAT REQUIRE PRIOR AUTHORIZATION INCLUDE BUT ARE NOT LIMITED TO:

Ancillary Services

- Hearing devices and implants
- Durable Medical Equipment (DME) including orthotics & prosthetics
- Fixed wing non-emergency air transport
- Home health care
- Hospice services
- Implantable devices
- Specialty pharmaceuticals
- Therapy services (PT, OT, ST) (excludes initial evaluation)

Procedures/Services

- Potentially cosmetic
- Bariatric surgery
- Transplants
- Advance radiology imaging administered by National Imaging Associates (CT/CTA, MRI/MRA, PET scan & nuclear radiology)
 - Requests: RadMD.com
- Cardiac imaging administered by NIA (Myocardial Perfusion Imaging (MPI), MUGA scan, echocardiography, & stress echocardiography)
 - Requests: RadMD.com
- Certain other radiology & laboratory services
- Pain management
- Infertility treatment
- Chiropractic services
- Sleep studies
- Joint replacement
- Services that are experimental/ investigational

Inpatient Services

- All elective/scheduled admission notifications requested at least five
 (5) days prior to the scheduled date of admission including but not limited to:
 - Medical admissions
 - Surgical admissions
 - Rehabilitation facilities
 - Skilled nursing facilities
 - Behavioral and substance use disorder facilities (including detox)
- All emergency admissions and/ or observation stay (exceeding 23 hours require inpatient authorization/ concurrent review) notification within one (1) business day of admission
- All state-approved intermediate care facility and nursing home residential facility admissions for concurrent review authorization

Outpatient Services

- Behavioral health: Intensive Outpatient (IOP), Partial Hospitalization (PHP), and outpatient electroconvulsive therapy (ECT)
- Surgeries/procedures performed in outpatient facilities or ambulatory surgery centers

Home- and Community-Based Waiver Services

- Adult day care
- Assisted living
- Consumer Choice Option (CCO)
- Consumer-Directed Attendant Care (CDAC)
- Day habilitation
- Home-based habilitation
- Transportation administered
 by Access2Care
 - Requests: 1-833-404-1061

TO SUBMIT A PRIOR AUTHORIZATION, LOG INTO OUR SECURE WEB PORTAL

Provider.IowaTotalCare.com

Simplify Administrative Tasks

Keep our Quick Reference Guide nearby to make pre-visit planning and post-visit tasks quick and easy.

Website: IowaTotalCare.com

- Patient care forms
- Prior Authorization Check tool

Member Eligibility

Check member eligibility via:

Secure Provider Portal, or

Call Provider Services at

the number below

Provider Services

1-833-404-1061

(TTY: 711)

Iowa Total Care news

Patient Care Gaps

Provider manual

Find recommended services that a member has not completed:

- 1. Visit the Secure Provider Portal
- 2. Review patient information for any gaps in care.
- 3. Plan to address care gaps during future appointments.

Secure Provider Portal: Provider.IowaTotalCare.com

- Verify member eligibility
- Access patient health records
- View patient gaps

Prior Authorization

Use the Prior Authorization Check tool on our website to determine if prior authorization is required.

Submit prior

authorizations one of three ways:

- Secure Provider Portal
- Fax: 1-833-257-8327 For behavioral health: Outpatient: 1-844-908-1170 Inpatient: 1-844-908-1169
- Call Provider Services: 1-833-404-1061 (TTY: 711)

Claims

Timely filing guidelines: 180 days from date of service.

Claims can be submitted via:

• And more!

- Secure Provider Portal
- Clearinghouses: EDI Payor ID 68069

Manage prior authorizations

Submit and manage claims

Individual Consumer-Directed Attendant Care (CDAC) providers can submit through Electronic Visit Verification (EVV). CareBridge is the chosen EVV vendor in Iowa.

To contact CareBridge: 1-844-343-3653 or iaevv@carebridgehealth.com

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Secure Provider Portal

Secure Provider Portal

Manage patient administrative tasks quickly and easily.



Visibility of Multiple TINs

One point of entry allows for quick and easy access to Iowa Total Care member information for multiple TINs/practices.



Access Daily Patient Lists from One Screen

One concise view allows primary care providers to scan patient lists for Iowa Total Care member eligibility, care gaps and much more.



Real Time Claims Management

Submit and manage claims, including batch files, for free. View detailed Electronic Funds Transfer (EFT) payment history and submit disputes.



Additional Features to Streamline Office Operations:

- View patient demographics & history
- Secure messaging between provider and Iowa Total Care
- Update provider demographics



Get Started Now!

Visit **Provider.IowaTotalCare.com** and click Create an Account. Have your tax ID number ready during sign up.

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