

Welcome and Key Contacts

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Welcome

Welcome to MedStar Select, a provider-sponsored health plan established to serve the healthcare needs of MedStar Health associates and their dependents.

As the region's largest healthcare provider, MedStar plays a significant role in the well-being of the communities we serve. We are a local health plan owned by MedStar Health. Our responsibility includes ensuring that, as members of our communities, our associates and their dependents receive the highest level of quality care focused on health and wellness.

MedStar Select provides associates and covered dependents with access to comprehensive and competitive medical benefits. It is built around the MedStar Select Provider Network, including MedStar physicians and hospitals and key community clinical partners. MedStar Select covers the greater Baltimore and Washington, DC, regions as well as Southern Maryland. The plan is designed to be patient-centered and physician-driven with innovative, coordinated care programs.

Our goal is to work with you and others in the MedStar Select Provider Network to make sure our associates and their dependents get regular preventive services and quality medical care, and to reduce unnecessary medical procedures.

This document is intended to serve as the main resource for information about MedStar Select and its services and claims processes, and to act as a reference for providers when questions arise. If certain situations require further explanation, providers should call:

Provider Services

Monday through Friday, 8 a.m. to 5 p.m.

855-222-1042

Provider OnLine

Provider OnLine is specifically designed for practitioners and providers affiliated with MedStar Select. The portal allows quick and efficient access to claims, benefit and eligibility information for our associates and covered dependents. In addition, providers can chat online with Provider Services by clicking the link at the bottom of the home page.

Check Eligibility and Benefits

The Provider OnLine portal allows associates and covered dependents' eligibility verification in one easy step. Simply enter the member's identification number, last name, and first name, then click "Search." Eligibility results for applicable dependents and subscribers display within seconds. The result details show the member's specific benefits and effective date of benefits.

Online Claim Submission

The Provider OnLine portal offers a CST (Claims Submission Tool) that provides a complete Internet portal solution for services provided by MedStar Select. MedStar Select Provider OnLine is a website that gives anyone with access the ability to view transactions. A portion of its function allows for claim submission via the web. All claims are entered or submitted in batches. A submitter can be any type of user that has been configured to submit claims or other electronic inbound or outbound transactions.

Check the Status of a Claim

The Claim Inquiry search allows providers to search by associate or covered dependent or claim information online to obtain real time claims status. Detailed CMS-1500 and UB claim detail is supplied, including adjustment reasons, by clicking on the applicable claim from the search results. Providers who have questions on claims can compose an email to Provider Services on the claim detail screen directly.

Direct Communication with Provider Services

Save time by messaging or chatting online with Provider Services through the Provider OnLine portal. Communications are sent directly to the appropriate service area by selecting the applicable topic. Providers have the option to select topics such as, but not limited to, eligibility, authorization inquiry, claim inquiry or batch inquiry.

Register for the Provider OnLine site today! Sign up through <https://secure.togetherforyourhealth.com/WebRequests/Requests/SecurityRequest.aspx?CLIENT=000101&ID=000001&DIV=0001>.

For further information on the Provider OnLine portal, please contact Provider Services at **855-242-1042**.

Electronic Prior Authorization Submission

MedStar Select has the capability to accept prior authorizations submitted by providers electronically. Once submitted, providers are able to view the status of their request as well as make edits up until a decision has been rendered.

If you are interested in obtaining access to submit requests electronically, please notify MFC-ProviderRelations2@medstar.net to request permission. Requests will continue to be accepted via phone and fax as well.

Internet Site

The MedStar Select plan website is located at www.MedStarProviderNetwork.org.

Physicians can find the following information on the website:

- Certificate of Coverage
- Provider Manual
- Provider information — links to various other MedStar Select documents for providers
- Utilization Management information including prior authorization requirements
- Pharmacy information including protocols and the formulary
- Behavioral Health resources
- Provider directory
- Provider newsletters
- Notice of Privacy Practices
- Quick Reference Guide including contact information for MedStar Select
- Medical Management services and forms
- Provider OnLine for access to claim information

If your office does not have access to this information, please contact Provider Services at **855-222-1042** to obtain these documents in print.

How to Use This Manual

This manual provides physicians, hospitals and other healthcare practitioners in the MedStar Select Provider Network with a succinct, easy-to-use guide to the MedStar Select plan's business and medical management practices. When referencing the manual, please take special note of information that has been highlighted for your attention.

This chapter includes a list of key contacts. Throughout this manual, we also include important phone numbers and addresses, all of which are printed in **boldface type**.

MedStar Select will update this manual and post revisions, as needed. The bottom of each page indicates the copyright date and the edition to indicate the timeliness of the information.

Key Contacts

The following chart includes all of the important telephone and fax numbers listed in the MedStar Select Plan Provider Manual. Before calling Provider Services, please have the following information available:

- Provider's tax identification number (preferred),
- Provider's National Provider Number (NPI), or
- MedStar Select provider number

Providers will be asked for the associate or covered dependent's identification number, as well as the phone number from which the call has been made.

MedStar Select Plan Contacts

CONTACT	TELEPHONE NUMBER
<p>Provider Services Eligibility inquiries, claims inquiries and claims appeals information</p>	<p>855-222-1042</p>
<p>MedStar Provider Relations Notification of provider additions, terminations and address changes; contracting or credentialing inquiries</p> <p>Please note: Claims inquiries cannot be handled by the MedStar Provider Relations department. Please call Provider Services.</p>	<p>800-905-1722 (MD providers)</p> <p>Fax: 855-600-3077 HYPERLINK "mailto:"MFC-ProviderRelations2@medstar.net (practitioner inquires) MFC-Ancillary@medstar.net (ancillary inquires) MFC-ProviderDemographics@medstar.net (demographic updates) msfc.credentialing@medstar.net (credentialing/recredentialing inquiries)</p>

CONTACT	TELEPHONE NUMBER
Medical Management To obtain prior authorization or assistance with patient admissions/discharges (including Transplant)	855-242-4875 Fax: 855-431-8762
MedStar Select Claims	P.O. Box 1200 Pittsburgh, PA 15230-1200 Electronic Payer ID 251MS
Pharmacy Help Desk includes an option for pharmacy authorizations covered under the pharmacy benefit with CVS Caremark.	Please contact Caremark at 888-771-7282
Pharmacy Under Medical Benefit: Prior Authorization Requests and Specialty Pharmacy For medications covered under the medical benefit	855-266-0712 Fax: 855-862-6517 http://medstarprovidernetwork.com/medstar-select/pharmacy-resources/pharmacy-prior-authorization-forms
Care Advising To speak to a Care Advisor or refer a patient for Care Advising	Main line: 888-959-4033, option 1 Maternity line: 888-959-4033, option 2
MedStar Provider OnLine For technical issues related to the provider portal or to obtain login information	855-222-1043
MedStar Select Member Services For MedStar associate inquiries	855-242-4872 TTY: 711
24/7 Nurseline	855-242-4873
MedStar Select Provider Services	855-222-1042
MedStar MyHealth	855-242-4871
Behavioral Health Services	Please contact Magellan Healthcare at 800-327-7855 Claims: P.O. Box 2188 Maryland Heights, MO 63043

CONTACT	TELEPHONE NUMBER
MedStar Health Integrity Hotline Call anonymously and without fear of retribution if you identify or suspect fraudulent activities or behaviors.	877-811-3411
Dental	Delta Dental PPO Plus Premier Plan: 800-932-0783 DeltaCare USA Plan: 800-422-4234 www.DeltaDentalIns.com
Vision	Group Vision Services: 866-265-4626
TTY	711
Fraud Waste and Abuse Hotline	855-222-1046