

myNEXUS Home Health Care Program for Utilization Management, Network Contracting and Claims Processing FAQ

Listed below are Frequently Asked Questions (FAQs) regarding the myNEXUS home health care program which includes utilization management, claims processing and network management for providers providing home health services to most Amerigroup Medicare Advantage members.

Why did Amerigroup implement a Home Health Management program?

Amerigroup implemented the program to more closely manage Medicare Advantage member care in the home health setting. myNEXUS manages the care and utilization between Amerigroup, providers, and members. Starting Aug. 1, 2018, myNEXUS will contract the network and process claims for its providers and all out of network providers for most Medicare Advantage members under the program.

What services does this include?

The following home health care services are included:

- Skilled Nursing
- High Tech Nursing
- Home Health Aide
- Therapies (PT, OT, ST)
- Wound Care
- Behavioral Health
- Medical Social Worker

What services are not included?

This management program does NOT include inpatient rehabilitation, Durable Medical Equipment (DME) requests (e.g., oxygen) or home infusion services.

How do I determine if an Amerigroup Medicare Advantage member is not included in the myNEXUS home health care program and the Amerigroup agreement and policies still apply?

- While most Amerigroup Medicare Advantage members have been delegated to myNEXUS, some members in IPA or risk relationships have not.
- You can confirm network delegation status during the eligibility, benefit and prior-authorization process using Availity - our secure Web-based provider tool or, if you prefer, call the customer service number on the member's ID card to speak with an Amerigroup representative. Alternatively, you can contact myNEXUS directly at 1-844-411-9622 or <https://portal.mynexuscare.com/> to verify in scope members and begin the authorization process.

NETWORK CONTRACTING

myNEXUS has asked us to submit an application for our home health care agency to join the myNEXUS provider network. Does this insert another contract layer between us and Amerigroup? Does it change the payment schedule we have in our direct contract with Amerigroup?

Beginning Aug. 1, 2018, Amerigroup will use the myNEXUS network of participating home health care agencies. Amerigroup will delegate claim payment for most of our Medicare Advantage members. After delegation occurs Aug. 1, 2018, your Amerigroup agreement will no longer be primary for the delegated membership.

Once a home health care agency enters into a network agreement with myNEXUS, what will the impact be to the Amerigroup agreement?

Your agreement with Amerigroup will stay in place and be the primary agreement for all lines of business and members that are not delegated to myNEXUS. The terms and conditions of your Amerigroup agreement will be intact.

What happens if I do not sign an agreement with myNEXUS?

Amerigroup is delegating most of its Medicare Advantage provider network for home health services to myNEXUS Aug. 1, 2018. Home health care agencies not directly contracted with myNEXUS will be considered out-of-network for as long as the network delegation services are provided to Amerigroup by myNEXUS unless otherwise required by your Agreement. Providers who have not signed an agreement with myNEXUS risk having the delegated Amerigroup Medicare Advantage members in your service area directed to an in-network home health care agency.

What are the myNEXUS credentialing requirements?

The myNEXUS credentialing and recredentialing processes are in accordance with industry standards and use systematic approaches to collecting and verifying applicant information and qualifications. myNEXUS standards are fully compliant with CMS original Medicare requirements, National Committee for Quality Assurance (NCQA) requirements, including but not limited to relevant training, licensure, certification and/or registration. myNEXUS requires all Ancillary Health Care Providers (Home Health) to pass the credentialing standards for acceptance into the provider network. Providers must be recredentialed every three (3) years.

Where can I learn more about joining the myNEXUS network?

To learn more about how to become a contracted provider with myNEXUS, please contact myNEXUS using one of the options below:

- Visit Contracting Homepage at:
<https://www.mynexuscare.com/contracting/>
- Email Contracting at: contracting@mynexuscare.com

CLAIMS PROCESSING

Where should I file home health claims for most Medicare Advantage members once the home health network is delegated to myNEXUS?

Please submit claims to either Amerigroup or myNEXUS based on the **scenarios listed below**.

- Start of Care is **prior** to Aug. 1 and dates of service are **prior** to Oct. 1:
 - o Please submit claims to Amerigroup.
- Start of Care is **on or after** Aug. 1:
 - o Please submit claims to **myNEXUS**.
- Start of Care is **prior** to Aug. 1 and dates of service are **on or after** Oct. 1:
 - o Please submit claims to **myNEXUS**.

Amerigroup
SOC is prior to 8/1 AND DOS are prior to 10/1

MyNEXUS
SOC is on or after 8/1 OR SOC is prior to 8/1 AND DOS are on or after 10/1

Electronic Claim Submission:

Participating providers may submit claims electronically to myNEXUS.

- Register with Change Healthcare (formerly Emdeon, the clearing house used by myNEXUS) by calling: 1-800-845-6592
- Reference Payer ID# 34009
- Once registered, Change Healthcare (formerly Emdeon) will provide support on submitting claims electronically.

Providers can mail claims forms to:

myNEXUS
P.O. Box 981620
El Paso, TX 79998-1620

Will claim filing requirements change on Aug. 1, 2018?

Yes, providers should follow myNEXUS claims filing requirements for services billed for dates of services or new episodes of care after Aug. 1, 2018. See paper and electronic claims submission information above. Please contact myNEXUS for additional information regarding claims questions:

myNEXUS Claims Department
Phone: 1-833-241-0428

UTILIZATION MANAGEMENT

How do I obtain or check on the status of an authorization from myNEXUS?

Information is available either online at <https://www.mynexuscare.com/Anthem/>, via the Provider Portal at myNEXUS <https://portal.mynexuscare.com>, or by calling myNEXUS at 1-844-411-9622

Please note: An authorization is not a guarantee of payment and it is contingent upon the member's benefits, contract limitations and eligibility at the time of service.

How do I submit a request for prior authorization for home health services?

Complete a self-service online authorization request at the myNEXUS portal at
<https://portal.mynexuscare.com>

For faster authorizations, providers are encouraged to use the self-service myNEXUS portal at
<https://portal.mynexuscare.com>

What if I have more questions?

For additional questions go to <https://www.mynexuscare.com/anthem/>

How will I learn about additional updates from Amerigroup?

Any updates regarding effective dates, in-scope membership or other program changes will be posted to the provider portal:

[TN](#)
[TX](#)
[WA](#)

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