













## **OHIO CPC:**

## **OHIO MEDICAID MANAGED CARE ORGANIZATIONS (MCOs) CONSOLIDATED RESOURCE GUIDE**

June 2025

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# **OHIO CPC PRACTICE ROSTER – with Lead MCO Assignments**

Name	Enrollment	Lead MCO
ALL ABOUT KIDS PEDIATRICS LLC	2020	AmeriHealth
FRANKLIN PARK PEDIATRICS	2020	AmeriHealth
HEALTH PARTNERS OF WESTERN OHIO	2017	AmeriHealth
KWASI A NENONENE	2025	AmeriHealth
LOWER LIGHTS CHRISTIAN HEALTH CENTER INC	2017	AmeriHealth
LOWER LIGHTS NURSING CENTER	2017	AmeriHealth
MARGARET B SHIPLEY CHILD HEALTH CLINIC INC	2022	AmeriHealth
MARY RUTAN HOSPITAL	2017	AmeriHealth
MED CARE GROUP INC	2019	AmeriHealth
SUMMA PHYSICIANS INC	2017	AmeriHealth
TOLEDO CLINIC INCORPORATED	2019	AmeriHealth
COMPASS COMMUNITY HEALTH	2019	Anthem
JAMES A GOTTFRIED MD INC (NORTHERN OHIO FAMILY PRACTICE)	2017	Anthem
LIMA MEMORIAL PROFESSIONAL CORPORATION	2019	Anthem
LORAIN COUNTY HEALTH & DENTISTRY	2017	Anthem
MEMORIAL PROFESSIONAL SERVICES (PROMEDICA)	2020	Anthem
NORTH COAST PROFESSIONAL CO LLC	2019	Anthem
OHIO PEDIATRICS INC	2019	Anthem
PROMEDICA CENTRAL PHYSICIANS LLC	2017	Anthem
PROMEDICA MULTI SPECIALTY PHYSICIANS	2025	Anthem
PROVIDENCE MEDICAL GROUP INC	2017	Anthem
ROCKING HORSE CHILDREN'S HEALTH CENTER	2020	Anthem
SCH PROFESSIONAL CORPORATION	2019	Anthem
TALBERT HOUSE HEALTH CENTER (CENTERPOINT)	2017	Anthem
TALBERT HOUSE PRIMARY CARE	2020	Anthem
TOLEDO HOSPITAL (PROMEDICA)	2020	Anthem
TRIHEALTH (BETHESDA FAMILY PRACTICE)	2017	Anthem
TRIHEALTH PHYSICIAN PRACTICES	2023	Anthem
WESTSIDE PEDIATRICS INC	2017	Anthem
ADEBOWALE A ADEDIPE	2019	Buckeye
BLANCHARD VALLEY MEDICAL PRACTICE LLC	2018	Buckeye
CHMCA PHYSICIAN BILLING DBA CHILDRENS HOSP MED CTR AKRON	2017	Buckeye
CIRCLE HEALTH SERVICES	2017	Buckeye
COLUMBUS NEIGHBORHOOD HEALTH CENTER, INC. DBA PRIMARYONE HEALTH	2017	Buckeye
COMMUNITY ACTION AGENCY OF COLUMBIANA COUNTY INC	2021	Buckeye
COMMUNITY AND RURAL HEALTH SERVICES	2023	Buckeye
COMMUNITY HEALTH & WELLNESS PARTNERS OF LOGAN COUNTY	2018	Buckeye
COMMUNITY HEALTH CARE INC	2017	Buckeye
FAMILY HEALTH CARE OF NORTHWEST	2017	Buckeye
FAMILY HEALTH SERV OF DARKE COUNTY	2019	Buckeye
HOLZER CLINIC LLC	2017	Buckeye
JTDM FAMILY PRACTICE LLC	2019	Buckeye
MEDF PHYSICIANS CORPORATION	2018	Buckeye
METROHEALTH SYSTEM	2017	Buckeye
OHIO NORTH EAST HEALTH SYSTEMS INC	2019	Buckeye
PAULDING COUNTY HOSPITAL PHYSICIAN SERVICES	2025	Buckeye

# **OHIO CPC PRACTICE ROSTER – with Lead MCO Assignments** (continued)

Name	Enrollment	Lead MCO
PEDIATRIC CENTER INC	2019	Buckeye
PEDIATRICS OF LIMA INC	2024	Buckeye
PIONEER PHYSICIANS NETWORK INC	2017	Buckeye
QUICKMED URGENT CARE LLC	2024	Buckeye
SHAWNEE MENTAL HEALTH CENTER INC	2025	Buckeye
THE HEALTHCARE CONNECTION INC	2018	Buckeye
TRIAD HEALTH SERVICES LLC	2023	Buckeye
UNIVERSITY OF TOLEDO PHYSICIANS LLC	2018	Buckeye
ALLIANCE PHYSICIANS INC (KETTERING)	2017	CareSource
AULTMAN NORTH CANTON MEDICAL GROUP	2020	CareSource
CARE ALLIANCE HEALTH CENTER	2018	CareSource
CARO PEDIATRIC CENTER	2019	CareSource
CHILD ADOLESCENT SPECIALTY CARE	2019	CareSource
CHILDRENS MEDICAL CENTER INC	2020	CareSource
CHRISTIAN COMMUNITY HEALTH SERVICES DBA CROSSROAD HEALTH CENTER	2018	CareSource
COMMUNITY HEALTH CENTERS OF GREATER DAYTON	2018	CareSource
FAIRFIELD COMMUNITY HEALTH CENTER	2017	CareSource
FIVE RIVERS HEALTH CENTERS	2017	CareSource
GENESIS HEALTHCARE SYSTEM	2022	CareSource
GREENE MEMORIAL HOSPITAL	2025	CareSource
HEALTHSOURCE OF OHIO, INC	2017	CareSource
MERCY HEALTH PHYSICIANS CINCINNATI LLC	2017	CareSource
MERCY HEALTH PHYSICIANS LIMA LLC	2017	CareSource
MERCY HEALTH PHYSICIANS LORAIN LLC	2017	CareSource
MERCY HEALTH PHYSICIANS YOUNGSTOWN LLC	2017	CareSource
MERCY HEALTH PHYSICIANS NORTH LLC	2023	CareSource
MERCY MEDICAL PARTNERS NORTHERN REGION LLC	2017	CareSource
MERCY HEALTH PHYSICIANS SPRINGFIELD PRIMARY CARE	2023	CareSource
NATIONWIDE CHILDRENS HOSPITAL	2017	CareSource
NEIGHBORHOOD HEALTH CARE INCORPORATED DBA NEIGHBORHOOD FAMILY PRACTICE	2020	CareSource
NORTHEAST CIN PEDIATRIC ASSOC	2019	CareSource
NORTHWEST CHILDREN'S COMMUNITY PRACTICES II, LLC	2025	CareSource
NORTHWEST PEDIATRIC SPECIALISTS, LLC	2025	CareSource
OHIO PEDIATRIC CARE ALLIANCE PHYSICIANS, LLC	2025	CareSource
OHIO PHYSICIAN PROFESSIONAL CORPORATION	2018	CareSource
ORRVILLE HOSPITAL FOUNDATION	2020	CareSource
ORRVILLE HOSPITAL FOUNDATION DBA AULTMAN ORRVILLE DUNLAP FAMILY PHYSICIANS	2020	CareSource
PEDIATRIC ASSOC OF LANCASTER	2017	CareSource
PEDIATRIC ASSOCIATES OF MT. CARMEL, INC	2017	CareSource
RACHEL M GARBER, MD	2021	CareSource
RAMZIEH AZMEH	2020	CareSource
SHELLY DAVID SENDERS MD INC	2017	CareSource
SIGNATURE HEALTH INC	2020	CareSource
UNIVERSITY OF CINCINNATI PHYSICIANS COMPANY	2023	CareSource
ABC PEDIATRICS	2019	Humana

# **OHIO CPC PRACTICE ROSTER – with Lead MCO Assignments** (continued)

	I	
Name	Enrollment	Lead MCO
CHILD CARE CONSULTANTS INC	2021	Humana
CHMC COMMUNITY HEALTH SERVICES NETWORK	2023	Humana
DAYTON CHILDREN'S HOSPITAL	2019	Humana
DAYTON CHILDREN'S SPECIALTY PHYSICIANS, INC.	2025	Humana
ERIE COUNTY OFFICE OF AUDITOR	2020	Humana
FISHER-TITUS MEDICAL CARE LLC	2019	Humana
HIGHLAND HEALTH PROVIDERS CORPORATION	2024	Humana
MARIETTA MEM HOSPITAL	2017	Humana
MARION AREA PHYSICIANS, LLC	2017	Humana
NEIGHBORHOOD HEALTH ASSOCIATION OF TOLEDO, INC	2020	Humana
OHIOHEALTH PHYSICIAN GROUP INC	2017	Humana
PEDIATRIC ASSOCIATES INC	2017	Humana
PREMIUM PEDIATRICS INC	2019	Humana
SOMC MEDICAL CARE FOUNDATION	2021	Humana
THE CHRIST HOSPITAL MED ASSOC	2017	Humana
THIRD STREET COMMUNITY CLINIC INC DBA FIVE POINTS PRIMARY CARE	2021	Humana
THIRD STREET COMMUNITY CLINIC, INC	2021	Humana
WESTERVILLE PEDIATRIC SPECIALISTS	2024	Humana
BUTLER COUNTY COMMUNITY HEALTH CONSORTIUM INC DBA PRIMARY HEALTH SOLUTIONS	2017	Molina
CHILDRENS HOSP MED CTR PHY BILL (CINCINNATI CHILDRENS HOSPITAL)	2017	Molina
COMMUNITY ACTION COMMITTEE OF PIKE COUNTY	2017	Molina
EQUITAS HEALTH INC	2024	Molina
HEART OF OHIO FAMILY HEALTH CENTERS	2023	Molina
HEART OF OHIO (CAPITAL PARK FAMILY HEALTH CNTR)	2019	Molina
HEART OF OHIO (CHANTRY FAMILY HEALTH CNTR)	2023	Molina
HOPEWELL HEALTH CENTERS INC	2017	Molina
IRONTON LAWRENCE COUNTY COMMUNITY ACTION ORGANIZATION	2020	Molina
LICKING MEMORIAL PROFESSIONAL	2023	Molina
MERIDIAN HEALTHCARE	2025	Molina
MUSKINGUM VALLEY HEALTH CENTERS	2017	Molina
NORTH CENTRAL OHIO FAMILY CARE CENTER	2023	Molina
SAMUEL GETACHEW MD INC	2025	Molina
SOUTH DAYTON PEDIATRICS	2024	Molina
SOUTHEAST INC	2020	Molina
ADENA MEDICAL GROUP LLC	2017	UnitedHealthcare
ADENA FAYETTE MEDICAL CENTER	2025	UnitedHealthcare
ALLIANCE FAMILY HEALTH CENTER INC.	2023	UnitedHealthcare
ASHLAND HOSPITAL CORPORATION	2019	UnitedHealthcare
AUSTINTOWN PEDIATRICS INC	2020	UnitedHealthcare
AXESSPOINTE COMMUNITY HEALTH CENTER INC	2017	UnitedHealthcare
CENTER STREET COMMUNITY CLINIC INC	2022	UnitedHealthcare
CENTRAL OHIO PRIMARY CARE PHYSICIANS INC	2017	UnitedHealthcare
CINCINNATI HEALTH DEPT (CITY OF CINCINNATI)	2017	UnitedHealthcare
CLEVELAND CLINIC MERCY HOSPITAL	2025	UnitedHealthcare
COMPASSION HEALTH TOLEDO	2025	UnitedHealthcare
KNOX COUNTY GENERAL HEALTH DISTRICT	2022	UnitedHealthcare
NITON COURT SENERAL HEALTH DISTRICT	2022	Оппсеинеаппсате

# OHIO CPC PRACTICE ROSTER – with Lead MCO Assignments (continued)

Name	Enrollment	Lead MCO
LAKE HOSPITAL SYSTEM (UNIVERSITY HOSPITALS)	2017	UnitedHealthcare
MERCY PROFESSIONAL CARE CORP (CCF)	2019	UnitedHealthcare
MOUNT CARMEL - OSU PHYSICIAN ALLIANCE LLC (MADISON HEALTH)	2019	UnitedHealthcare
MY COMMUNITY HEALTH CENTER	2024	UnitedHealthcare
NEIGHBORHOOD PEDIATRICS LLC	2021	UnitedHealthcare
NORTHEAST OH NEIGHBORHOOD HEALTH (NEON)	2017	UnitedHealthcare
NORTHERN OHIO MED SPECIALISTS	2017	UnitedHealthcare
OHIO STATE UNIVERSITY, THE	2025	UnitedHealthcare
OSU GENERAL INTERNAL MEDICINE, LLC	2017	UnitedHealthcare
PARTNERS PHYSICIAN GROUP (CLEVELAND CLINIC)	2017	UnitedHealthcare
PREMIER PHYSICIANS CENTERS INC	2018	UnitedHealthcare
THE CLEVELAND CLINIC FOUNDATION	2017	UnitedHealthcare
THE OHIO STATE UNIVERSITY TOTAL HEALTH AND WELLNESS	2020	UnitedHealthcare
UNION PHYSICIAN SERVICES (CCF)	2017	UnitedHealthcare
UNIVERSITY HOSPITALS MED GROUP	2019	UnitedHealthcare
UNIVERSITY HOSPITALS REGIONAL PRACTICES, LLC	2021	UnitedHealthcare
UNIVERSITY PRIMARY CARE PRACTICES, INC (UNIVERSITY HOSPITALS)	2018	UnitedHealthcare
WINTON HILLS MEDICAL & HEALTH CENTER	2021	UnitedHealthcare
WOOD COUNTY AUDITOR	2023	UnitedHealthcare
WOOSTER CLINIC	2025	UnitedHealthcare















# All OH Medicaid MCO Primary Care Provider (PCP) Selection/Change Form

Please complete this form to update the Primary Care Provider (PCP) Selection/Change Form for an OH Medicaid MCO member. Please fax/email completed form to the MCO listed below.

New Provider	<u>Information</u>	on (plea	ase prin	t)						
PCP Name					Clinic					
PCP NPI					Tax ID	-				
PCP Address					City					
State					Zip Code					
PCP Phone #					PCP Fax #	-				
Effective. Date		/	/							
_										
Have you seen th	nis provider i	n the las	t year?	⊔ Yes	□ No (F	lease	checl	( one)		
☐ More convenied ☐ I am an existing ☐ I requested this  Member Infor	patient with PCP when I v	this doc vas enro	lled, but	☐ Dissa	rral by famil atisfaction signed a diff	•		or		
Full Name										
Date of Birth	/		/	Ph	one #	(		)	-	
Age				Me	edicaid ID #					
Member ID #				Ph	one #					
Address				Cit	у					
State				Zip	Code					
(A	new ID card w	ill be sent	t out to th	nis addre	ss within seve	n to te	n bus	iness da	ys.)	
Signature of Mem	ber or Memb	er's Gua	ardian				Toda	ay's Da	te	
Provider (Staff) Sign	gnature						Toda	ay's Da	te	
OH Medicaid Man	aged Care Or	ganizati	ion (MC	O) Inforr	mation_					
· AmeriHealth Cari	tas Ohio; Fax	Numbe	r: (833) 6	541-3290	)					
$\cdot \   \text{Anthem Blue Cro}$	· Anthem Blue Cross & Blue Shield; Fax Number: (866) 840-4993									
	· CareSource; Fax Number: (937) 226-6916									
· Buckeye Health P					ail: <u>bhp me</u>	<u>dicaid</u>	mem	ber ser	vices@c	entene.con
· Molina Healthcar	e; Fax Numbe	er: (844)	834-215	55						

· Humana Healthy Horizons in Ohio; Email: <a href="https://ohioto.com/OHMedicaidProviderRelations@Humana.com/">OHMedicaidProviderRelations@Humana.com</a>

· UnitedHealthcare Community Plan; Fax Number: (844) 386-9286

# Managed Care Organization (MCO) Transportation Benefit Resource Guide for Practices

member website as available. Android or available. And the provided and the Sydney app. Text remindes and all medical populations at and-alcore tips to the planting of the planting		1	1	1	1	T	1	
Cencel or get Trippstum, Gall Standard Impacts of the Control of Impacts of the Control of Impacts of the Control of Impacts of Impa			buckeye health plan		MOLINA' HEALTHCARE	UnitedHealthcare' Community Plan	Anthem.	CareSource
Scheduling onthe Scheduling onthe Instructions and Scheduling onthe Instructions and Instru	Cancel or get	Routine scheduling -7am- 8pm M-F Urgent and discharge				or1-800-895-2017		
Scheduling online vision samptiones solves amorphores solves amorphore solves amorphor	Scheduling		Tr	ips must be scheduled	48 hours (2 business d	ays) up to 30 days in a	dvance	
radiation, dialysis, wheelchair, and all mediate in the plant of the members and transportation or entergent transportation. The plant of the plant	Special Scheduling	via smartphone app, Member chat, MTM Member Portal. Reminder calls or texts are	and via Access2Care smartphone app is available. Android app, iPhone app. Text reminders are	and via Access2Care smartphone app is available. Android app, iPhone app. Text reminders are	and via Access2Care smartphone app is available. Android app, iPhone app. Text reminders are	UHC Customer Service or Provide A Ride at the phone numbers	scheduling is available on the member website and	and via Provide A Ride smartphone app is available. Android app, iPhone app. Text reminders are
Not Applicable.   Please see below - 60 One-Way Trips/15 Round   For appointments where there is no provider within 30 miles, all necessary transportation is provided   Please see below - 60 One-Way Trips/ 30 Round Trips	Unlimited Trips	radiation, dialysis, wheelchair, non- emergent ambulance transportation,	unlimited trips to all medical appointments and stand-alone trips to the pharmacy that is within 10 miles of the member's pick up and drop	Chemo/Radiation, Hospital discharge, Wheelchair, Urgent Care, Pregnancy related and Doctor visits up to 12-months postpartum, Diabetes Management, Wound Care, OhioRISE, Go to Value-Added Benefits for	Radiation, Hospital discharge, Wheelchair, Pregnancy related	Wound Care, Chemo, Substance Use Disorder, NICU, Wheelchair, Pregnancy related trips, Diabetes Management,	unlimited trips to Urgent Care, Dialysis, Chemo / Radiation, Hospital discharge, all wheelchair trips and	Radiation, Hospital discharge, Wheelchair, NICU, Pregnancy related trips, Diabetes Management,
Available for all members, renews on an annual basis ror appointments where there is no provider within 30 miles, all necessary transportation is provided 30 Neurotrips Available for all members, renews on an annual basis ror appointments where there is no provider within 30 miles, all necessary transportation is provided 30 Neurotrips Available for all members, renews on an annual basis ror appointments where there is no provider within 30 miles, all necessary transportation is provided 30 Neurotrips Available for all members, renews on an annual basis ror appointments where there is no provider within 30 miles, all necessary transportation is provided 30 Neurotrips Available for all members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members, renews on an annual basis ror appointment shall members appointment shall members annual basis ror appointment shall members annual basis ror appointment shall be appointment shall be appointment annual basis ror appointment shall be appointment sh			Same day/sick	l visit trips available by c	l alling scheduling line al	pove; provider may nee	ed to confirm urgency	
Please see above - 30 One-Way Trips/15 Round Trips Less Than 30 Miles  Please see above - 30 One-Way Trips/15 Round Trips Less Than 30 Miles  Please see above - 30 One-Way Trips/15 Round Trips Less Than 30 Miles  Please see above - 30 One-Way Trips/15 Round Trips Less Than 30 Miles  Additional Trip  Radiation, chemotherapy, dialysis, oncology, wound care, hospital discharges, urgent care Additional Trips for Pregnancy (Prenatal, Post-Partum, NICU) 2-day scheduling timeline waived for kids under 1 year and organ transportation is provided  Approved Locations  Medical, Dental, Vision, Mental/Behavioral Health, Hospital Discharge, DME, Urgent Care, WIC, CDJFS, Pharmacy after Medical Appointment, Stand Alone Pharmacy Trip, Health Condition Education Classes (e.g., Diabetes, Hypertension), Centering and Parenting Classes (including Car Seat & Cribette classes), Medical, Social Security, BCMH, Waiver Redetermination, Food Bank/Pantry, Pre-ordered Grocery Pick-up, immunizations  Approved Transportation Choices  Cab/Van, Bus Pass, Lyft and/or Uber Medical, Mileage Reimbursement to driver/to member, Wheelchair Van Please contact plan for medically assisted and stretcher transport needs  Additional Contact Information  Plan Member Scanding Plan Health, Pla	30 One-Way Trips/15 Round Trips Less Than	For appointmen				ation is provided	Please see below - 60 One-Way Trips/ 30 Round Trips	Please see below - 60 One-Way Trips/ 30
Additional Trips for Pregnancy (Prenatal, Post-Partum, NICÚ) 2-day scheduling timeline waived for kids under 1 year and organ transplant  Approved Locations  Medical, Dental, Vision, Mental/Behavioral Health, Hospital Discharge, DME, Urgent Care, WIC, CDJFS, Pharmacy after Medical Appointment, Stand Alone Pharmacy Trip, Health Condition Education Classes (e.g., Diabetes, Hypertension), Centering and Parenting Classes (including Car Seat & Cribette classes), Medicaid, Social Security, BCMH, Waiver Redetermination, Food Bank/Pantry, Pre-ordered Grocery Pick-up, Immunizations  Approved Transportation Choices  Cab/Van, Bus Pass, Lyft and/or Uber Medical, Mileage Reimbursement to driver/to member, Wheelchair Van Please contact plan for medically assisted and stretcher transport needs  Additional Contact Information  Additional Contact Information  Plan Member Services for General Benefit Inquiries, Issues, Special Requests  Ohio Department of Medicaid (ODM) Provider Hotline  1-800-684-4168 7am-7pm M-F 7am-7pm M-F 7am-7pm M-F 7am-7pm M-F 1-800-686-1516	Trips/30 Round	Please see above - 30 One-Way Trips/15 Round Trips Less Than 30 Miles  members, renews on an annual basis For appointments  For appointments  For appointments  Available members, renews on an annual basis For appointments  base For appointments  For appointments  are news or base for appointments  For appointments  For appointments  are news or base for appointments  for appointments  are news or base for appointments  for appointments  are news or base for appointments  for appointments  for appointments  for appointments  are news or base for appointments  for a					members with trips less than 30 miles, renews on an annual basis. For appointments where there is no provider within 30 miles, all necessary transportation is	
Medical, Dental, Vision, Mental/Behavioral Health, Hospital Discharge, DME, Urgent Care, WIC, CDJFS, Pharmacy after Medical Appointment, Stand Alone Pharmacy Trip, Health Condition Education Classes (e.g., Diabetes, Hypertension), Centering and Parenting Classes (including Car Seat & Cribette classes), Medicaid, Social Security, BCMH, Waiver Redetermination, Food Bank/Pantry, Pre-ordered Grocery Pick-up, Immunizations  Approved Transportation Choices  Cab/Van, Bus Pass, Lyft and/or Uber Medical, Mileage Reimbursement to driver/to member, Wheelchair Van Please contact plan for medically assisted and stretcher transport needs  Additional Contact Information  Plan Member Services for General Benefit Inquiries, Issues, Special Requests  Ohio Department of Medicaid (ODM) Provider Hotline  Ohio Department of Medicaid (ODM) Provider Hotline  Tan-8pm M-F  Ohio Department of Medicaid (ODM) Provider Hotline  Plan Member Services (Tipy Tipy Tipy Tipy Tipy Tipy Tipy Tipy	•			Additional Trips f	or Pregnancy (Prenata	I, Post-Partum, NICU)	, 0	
Cab/Van, Bus Pass, Lyft and/or Uber Medical, Mileage Reimbursement to driver/to member, Wheelchair Van Please contact plan for medically assisted and stretcher transport needs  Additional Contact Information  Amerillealth Caritats Ohio buckeye health plan.  Humana Healthy Horizons William Health		Medical, Dental, \ Pharmacy Trip, He	/ision, Mental/Behavior ealth Condition Education	on Classes (e.g., Diabe	tes, Hypertension), Cei	ntering and Parenting (	Classes (including Car Se	at & Cribette classes),
Plan Member Services for General Benefit Inquiries, Issues, Special Requests  Ohio Department of Medicaid (ODM) Provider Hotline  Additional Contact Information  Humana Healthy Horizons William Healthy Healthy Horizons William Healthy Healthy Horizons William Healthy Healt		Approved Transpo		on Luft and/out the and	adical Mileage Deimi	roomont to duive-u-u-	ombor Whaslah -:- V-	
Plan Member   Services for   General Benefit   Inquiries, Issues,   Special Requests   Ohio Department of Medicaid (ODM) Provider Hotline   Ohio Department of Medicaid (ODM) Provider Hotline   Limited Health Caritas   Leaves			Cab/van, Bus Pa					
Plan Member Services for General Benefit Inquiries, Issues, Special Requests  Ohio Department of Medicaid (ODM) Provider Hotline  Lagrange Lealth Porizons Lea		Additional Conta	act Information					
Services for General Benefit Inquiries, Issues, Special Requests         1-866-246-4358 7am-7pm M-F         1-877-856-5702 7am-8pm M-F         1-800-642-4168 7am-7pm M-F         1-800-895-2017 7am-7pm M-F         1-844-912-0938 (TTY 711) 7am-8pm M-F         1-800-488-0134 7am-7pm M-F           Ohio Department of Medicaid (ODM) Provider Hotline         Tam-8pm M-F         Tam-8pm M-F <td></td> <td>AmeriHealth Caritas</td> <td></td> <td></td> <td>MOLINA' HEALTHCARE</td> <td></td> <td>Anthem.</td> <td>CareSource</td>		AmeriHealth Caritas			MOLINA' HEALTHCARE		Anthem.	CareSource
	Services for General Benefit Inquiries, Issues,		7am-7pm M-F	7am-8pm M-F			(TTY 711) 7am-8pm M-F	
Ohio Department of Medicaid (ODM) Member Hotline 1-800-324-8680							1-800-324-8680	

# **Well Visits for Preventive Health Care**

Details and Best Practices from Ohio Medicaid Managed Care Plans

Sick to Well Visits and Once a Calendar Year Scheduling

# **Key Details for Improving Well Visits**

All Ohio Medicaid Managed Care Plans allow a sick visit and a well visit on the same day for patients 2 years of age and older.

**(NEW)** Well Visits can now be scheduled every Calendar Year for patients of all Ohio Medicaid Managed Care Plans.

- Allows Members and Providers to schedule Well Visits when it is more convenient.
- Removes Barrier of previous policy if a Sick Well Visit opportunity was prior than 365 days since last Well Visit.

Here are some points to keep in mind with them:

- If it's the first time a patient will be seen in your office, only one of the two billed visits can be billed as a new patient visit.
  - o For example, if a new patient is seen and both a well visit and a sick visit are appropriately received, only one service is a new patient visit. The other is an established visit
- As long as the provider's documentation supports services for a well visit and a sick visit (with no overlapping documentation components), then separate reimbursement is both warranted and supported.
- When billing a sick visit on the same day as a well visit, bill the appropriate evaluation and management code (i.e., 99201-99215) with modifier-25 and preventive code (i.e., 99381-99397).

## **Best Practices**

- Consider every visit an opportunity for a well visit *and* an immunization.
- Review patient charts prior to appointments and allow extra time to complete a well visit with a sick visit or sports physical.
- Schedule the next well visit during check out.
- Provide appointment reminders by text or mobile app.
  - o Medicaid patients generally need 48 hours to arrange for transportation, so send reminders
    - 48 to 72 hours prior to the appointment.
- Send reminder letters or call your attributed patients who are due for a well visit even when patients haven't been seen in your office. These patients either chose your office or were assigned to it.
- © Collaborate with your EHR vendor to incorporate pop-up alerts for preventive services.

## Completing a Well Visit during a Sick Visit

Did you know the seven Ohio Medicaid Managed Care Plans pay for a well visit to be completed on the same day as a sick visit? The well visit and sick visit will both be paid at 100% with the addition of a modifier 25.

Children will often only visit their provider when sick. Caregivers may experience barriers to scheduling a well visit such as being unable to miss work. Completing the well visit during the sick visit may be the only opportunity the provider has to complete a well visit during the year and give any immunizations the child needs. Therefore, all Medicaid Managed Care Plans provide payment for a combination of certain services on the same day including: sick visits, well visits, immunizations, labs (including lead).

### How to Bill

When a patient is seen in the office for a well visit as a new or established patient, providers can bill that diagnostic exam as an E&M-25. Providers should reference the most up-to-date sources of professional coding guidance for valid CPT/HCPCS codes.

### In order to receive payment, follow the billing guidelines below:

Visit Type	ICD-10 codes	CPT codes	Modifiers
Well Visit	Z00.129	(99381-5 or 99391-5)	None
Well + immunizations	Z00.129, Z23	(99381-5 or 99391-5)	25
Well + Sick	Z00.121 AND appropriate sick ICD-10 code	(99381-5 or 99391-5) and 9921x	25
Well + Sick + Immunizations	Z00.121, Z23, AND appropriate sick ICD-10 code	(99381-5 or 99391-5) and 9921x	25 for sick and 25 for immunizations

### BEST PRACTICES FOR IMPROVING WELL VISITS IN YOUR PRACTICE

- Consider every visit an opportunity for a preventative care, well visit and an immunization visit.
- Schedule the next well visit during check out.
- Collaborate with your EHR vendor to incorporate pop up alerts for preventive services.
- Check payer specific provider portal when a member presents to your office without their insurance card.
- Clarify payer procedures for covering well visits every calendar year, not every 365 days.

Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)/Medicaid's Healthchek Program This program ensures that members under age 21 have access to services that are available in accordance with federal EPSDT requirements found at 42 U.S.C. 1396d(r) as amended. This includes medically necessary services covered by Ohio Medicaid, as well as any medically necessary screening, diagnostic and treatment services available to Medicaid consumers that go beyond the applicable coverage and limitations set forth in Division 5160 of the Ohio Administrative Code (OAC). Screening components, frequencies, and indications of need for further evaluation are in accordance with the most current American Academy of Pediatrics recommendations for pediatric preventive health care. Prior authorization and coverage determinations are based on medical necessity.

### Thank you for your support!

## **Pregnancy Risk Assessment Form 2.0**



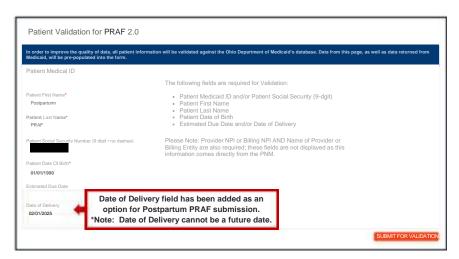
Nurture Ohio PRAF 2.0 Updates 4/1/2025

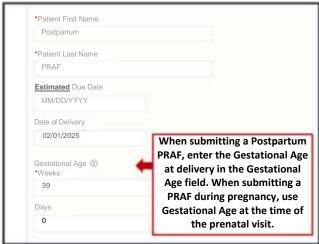
#### Enhanced Features include:

- · Added Date of Delivery option (Postpartum PRAF)
- Maternal Mental Health Screening tool lists updated
- Prior and Current Perinatal Risks New question type Matrix Multi-Select
- Patient would benefit from Managed Care Organization/County Department of Job and Family Services assistance updated

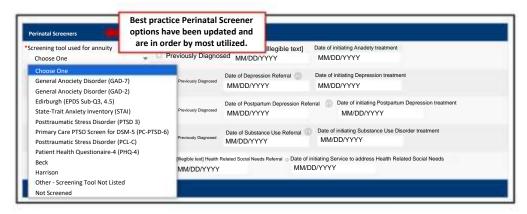
Note -A PRAF should be submitted at the initial prenatal visit, at the first postpartum visit, and if there is a change in risk and/or need within the prenatal and/or postpartum period.

#### Date of Delivery (Postpartum PRAF)

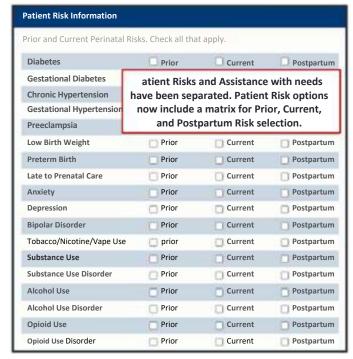




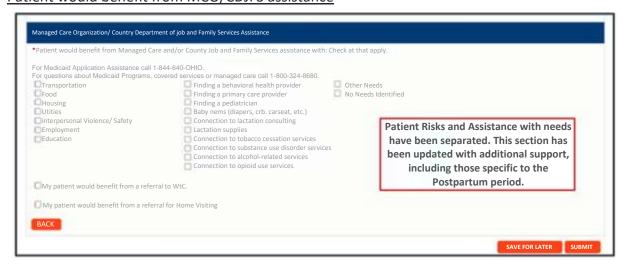
### Maternal Mental Health Screening tools



### **Prior and Current Perinatal Risks**



### Patient would benefit from MCO/CDJFS assistance



# Pregnancy Risk Assessment Form (ePRAF/PRAF 2.0) Billing Instructions

- Modifier TH <u>should no longer be used</u> when coding Healthcare Common procedure Coding System (HCMCS) H1000 for an Electronic Pregnancy Risk Assessment Form (PRAF).
- Providers are encouraged to submit updated ePRAFs for pregnant Medicaid patients as new risks or needs are assessed.
- When billed correctly (H1000 + modifier 33), participating prenatal service providers will receive \$90 payment for the submission of each ePRAF submission.

PRAF Submission Type	Corrected Coding Guidance	Rate
Electronic PRAF (ePRAF)	H1000 + 33 modifier	\$90.00
Non-Electronic PRAF	H1000 (no modifier)	\$12.10

FQHC/RHC Billing Guidance – ePRAF submission claims should be reported separately as covered non-PPS services under the "clinic" provider number (provider type 50) of the FQHC/RHC. Billing is Fee for Service and is additional to any PPS visit payment.

AmeriHealth Caritas	Anthem	Buckeye Health Plan	CareSource
Stephanie Shinaver	Kara Johnson	Timicia Swallen	Sharon Johnston
614-874-1535	937-371-1845	866-246-4356 Ext. 24532	937-823-9733
sshinaver@Amerihealthcaritasoh.com	karam.johnson@anthem.com	TSwallen@centene.com	Sharon.Johnston@CareSource.com
Humana Healthy Horizons	Molina Healthcare	United Healthcare	
Dallas King	Shelby Burch	Kristen Majercak	1
502-885-7203	614-516-4402	612-383-4637	
dking68@humana.com	shelby.burch@molinahealthcare.com	kristen majercak@uhc.com	

# Important Pregnancy Risk Assessment Form Links, Contacts, & Information

## **Ohio Department of Medicaid PRAF Webpage:**

Pregnancy Risk Assessment | Medicaid (ohio.gov)

## NurtureOhio Webpage:

## Progesterone (nurtureohio.com)

## **NurtureOhio System Support:**

nurtureohiosupport@DeliverHealth.com

## **General Questions about ePRAF:**

MomsandBabies@medicaid.ohio.gov

### **NurtureOhio User Manual:**

NurtureOhio Provider User Manual

## PRAF 2.0/ePRAF FAQs

**FAQs** 

## **Updated Progesterone Information**

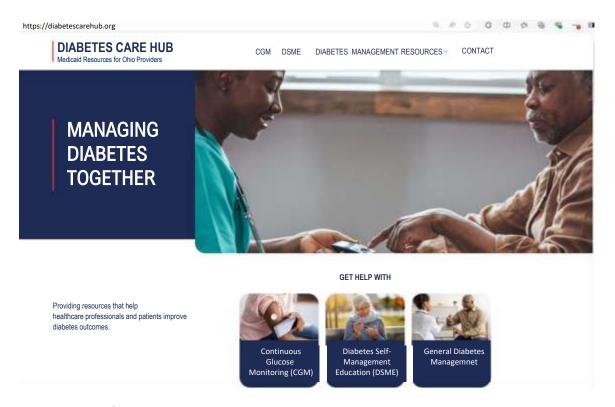
On April 6, 2023, the U.S. Food and Drug Administration announced the final decision to withdraw approval of Makena—a drug that had been approved under the accelerated approval pathway. This drug was approved to reduce the risk of preterm birth in women pregnant with one baby who have a history of spontaneous preterm birth. The decision was issued jointly by the FDA Commissioner and Chief Scientist.

- Makena (hydroxyprogesterone caproate injection) Information | FDA
- Updated Clinical Guidance for the Use of Progesterone Supplementation for the Prevention of Recurrent Preterm Birth | ACOG
- <u>SMFM Statement: Response to the Food and Drug Administration's withdrawal of 17-alpha</u> hydroxyprogesterone caproate

### **DIABETES CARE HUB**

Online resource for various Ohio Medicaid resources for Ohio providers which may also be shared with patients:

Diabetes Care Hub - Medicaid Resources for Ohio Providers - Ohio Diabetes Care Hub



## Resource includes information on:

- Continuous Glucose Management (CGM): <u>Diabetes Care Hub Medicaid</u> Resources for Ohio Providers - Ohio Diabetes Care Hub
- Diabetes Self-Management Education (DSME): <u>DSME Resources Ohio</u> <u>Diabetes Care Hub</u>
- Diabetes Management Resources: <u>Diabetes Management Resources</u> <u>Ohio Diabetes Care Hub</u>

MCO Contacts: Contact - Ohio Diabetes Care Hub

## **CPT-II CODING AND OTHER BILLING CODES**

	Billing Code Type			Key Billing Codes	
Quaity Metric: Weight	ICD-10 codes to indicate BMI	BMI <5 percentile for age			Z68.51
Assessment and Counseling for	percentile (numerator)	BMI 5th percentile to <85t	th percentile for ag	e	Z68.52
Chidren/Adolescents BMI		BMI 85th percentile <95th			Z68.53
Percentile (Pediatric)	ICD 10 codes	BMI >95th percentile for a	~	2 Evereiro !	Z68.54 g: Z71.82
Dietary / Physical Activity	ICD-10 codes	Dietary counseling and sur Inappropriate dietary and		,	
BMI Assessment (Adult)	ICD-10 codes to indicate BMI	BMI 19.9 or less	Z68.1	BMI 32.0-32.9	Z68.32
	(numerator)	<u>BMI 20-29</u>	<u>Z68.2</u>	BMI 33.0-33.9	Z68.33
		BMI 20.0-20.9	Z68.20 Z68.21	BMI 34.0-34.9 BMI 35.0-35.9	Z68.34 Z68.35
		BMI 21.0-21.9 BMI 22.0-22.9	Z68.21	BMI 36.0-36.9	Z68.36
		BMI 23.0-23.9	Z68.23	BMI 37.0-37.9	Z68.37
		BMI 24.0-24.9	Z68.24	BMI 38.0-38.9	Z68.38
		BMI 25.0-25.9	Z68.25	BMI 39.0-39.9	Z68.39
		BMI 26.0-26.9	Z68.26	BMI 40 or greater	Z68.4
		BMI 27.0-27.9	Z68.27	BMI 40.0-44.9	Z68.41
		BMI 28.0-28.9	Z68.28	BMI 45.0-49.9	Z68.42
		BMI 29.0-29.9	Z68.29	BMI 50-59.9	Z68.43
		BMI 30-39	<u>Z68.3</u>	BMI 60.0-69.9	Z68.44
		BMI 30.0-30.9	Z68.30	BMI >70	Z68.45
O dis and a side of	COT II and the second s	BMI 31.0-31.9	Z68.31	111-44-7	
Quality Metric: Diabetes Care- HbA1c Poor Control (>9%)	CPT-II codes to identify HbA1c levels (numerator)	HbA1c<7% HbA1c>9%	3044F 3046F	HbA1c 7- < 8% HbA1c 8- < 9%	3051F 3052F
HBATC POOF CONTROL (25%)	ieveis (iluillerator)	Dilated retinal eye exam: 2		7 standard field ster	
Quality Metric: Diabetes Care-	CPT-II codes to indicate retinal	7 standard field stereo. Ph			l eye exam: 2022F
Eye Exam	eye exam			2026F Diab. retinal scree	
•	,	Eye imaging validated to n		w/o rtnpthy: 2033F	
. ,	ICD-10 (denominator)	ICD-10: I10- indicates hype		1	
Blood Pressure in Patients with	CPT-II codes	Systolic		Diastoli	
Hypertension / Blood Pressure Control for Patients with	CF1-II codes	Most recent BP <130 Most recent BP 130-139	3074F 3075F	Most recent BP <80 Most recent BP 80-89	3078F 3079F
Diabetes		Most recent BP 130-139 Most recent BP ≥ 140	3075F 3077F	Most recent BP 80-89 Most recent BP ≥ 90	3079F 3080F
Quality Metric: Immunization	CPT, HCPCS				
for Children <sup>1</sup>	,	MMR / VZV / PCV 90707,90710 / 90710, 90716 / 90670, 90671, 90677, G0			
10. 0					
		HiB		90644, 90647, 90648, 90	1697, 90698, 90748
		НерВ	9069	7, 90723, 90740, 90744, 90	747, 90748, G0010
	ICD 10 Dx/ PCS	HepB B16.0, B16.1, B16.2, E	316.9, B17.0, B18.0,	B18.1, B19.10 B19.11, Z22 51	L / 3E0234Z, 99 55
		Measles	B05.0, B05	5.1, B05.2, B05 3, B05.4, B05	81, B05.89, B05.9
				6.1, B05.2, B05 3, B05.4, B05 B26.82, B26.83, B26.84, B2	
			6.2, B26.3, B26.81,		6.85, B26.89, B26.9
Quality Metric: Immunization for		Mumps B26.0, B26.1, B26 Rubella	6.2, B26.3, B26.81, B06.00, B06.01,	B26.82, B26.83, B26.84, B2	6.85, B26.89, B26.9 6.82, 906 89, B06.9
Quality Metric: Immunization for Adolescents <sup>1</sup>		Mumps B26.0, B26.1, B26 Rubella	6.2, B26.3, B26.81, B06.00, B06.01,	B26.82, B26.83, B26.84, B2	6.85, B26.89, B26.9 5.82, 906 89, B06.9
Adolescents <sup>1</sup> Quality Metric: Lead Screening	СРТ	Mumps B26.0, B26.1, B26 Rubella	6.2, B26.3, B26.81, B06.00, B06.01,	B26.82, B26.83, B26.84, B2	6.85, B26.89, B26.9 5.82, 906 89, B06.9
Adolescents <sup>1</sup>	СРТ	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S	6.2, B26.3, B26.81, B06.00, B06.01, l occal: 90619, 9073	B26.82, B26.83, B26.84, B2 306.02, B06 09, B06.81, B06 3, 90734 HPV: 90649, 90	6.85, B26.89, B26.9 5.82, 906 89, B06.9
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric:	СРТ	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc	6.2, B26.3, B26.81, B06.00, B06.01, l occal: 90619, 9073	B26.82, B26.83, B26.84, B2 306.02, B06 09, B06.81, B06 3, 90734 HPV: 90649, 90	6.85, B26.89, B26.9 5.82, 906 89, B06.9
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric: Topical Fluoride for Children,	СРТ	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S	6.2, B26.3, B26.81, B06.00, B06.01, l occal: 90619, 9073	B26.82, B26.83, B26.84, B2 306.02, B06 09, B06.81, B06 3, 90734 HPV: 90649, 90	6.85, B26.89, B26.9 5.82, 906 89, B06.9
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric: Topical Fluoride for Children, ages 1-4 <sup>1</sup>	CPT CPT, CDT	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S Application of topical fluor	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188,	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90 D1206	6.85, B26.89, B26.9 5.82, 906 89, B06.9 650, 90651
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric: Topical Fluoride for Children, ages 1-4 <sup>1</sup> Quality Metric: Tobacco Use	CPT CPT, CDT CPT and CPT-II codes to indicate	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S Application of topical fluor Screened for tobacco use	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188,	B26.82, B26.83, B26.84, B2 306.02, B06 09, B06.81, B06 3, 90734 HPV: 90649, 90	6.85, B26.89, B26.9 5.82, 906 89, B06.9 650, 90651 4004F
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric: Topical Fluoride for Children, ages 1-4 <sup>1</sup>	CPT CPT, CDT	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 83655 Application of topical fluor Screened for tobacco use Current tobacco non-user	6.2, B26.3, B26.81, B06.00, B06.01, l occal: 90619, 9073 ride varnish 99188,	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90 D1206	6.85, B26.89, B26.9 5.82, 906 89, B06.9 650, 90651 4004F 1036F
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation	CPT CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use. Current tobacco non-user Smoking/tobacco counseli	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90 D1206	6.85, B26.89, B26.9 5.82, 906 89, B06.9 650, 90651 4004F
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation	CPT CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 83655 Application of topical fluor Screened for tobacco use Current tobacco non-user	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba ing 3-10 minutes ing >10 minutes	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90 D1206	6.85, B26.89, B26.9 5.82, 906 89, B06.9 650, 90651 4004F 1036F 99406
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation	CPT CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use. Current tobacco non-user Smoking/tobacco counseli Smoking/tobacco counseli	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba ing 3-10 minutes ing >10 minutes	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90 D1206  cco cessation intervention	6.85, B26.89, B26.9 6.82, 906 89, B06.9 650, 90651 4004F 1036F 99406 99407 271.6
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation	CPT CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counseli Tobacco abuse counseling (Use additional code for motobacco Use	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba ing 3-10 minutes ing >10 minutes	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  cco cessation intervention	6.85, B26.89, B26.9 6.82, 906 89, B06.9 650, 90651 4004F 1036F 99406 99407 271.6 272.0
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric: Topical Fluoride for Children, ages 1-4 <sup>1</sup> Quality Metric: Tobacco Use Screening and Cessation Intervention <sup>2</sup>	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counselis Smoking/tobacco counseling Tobacco abuse counseling (Use additional code for model) Tobacco Use Use additional code from ca	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba ing 3-10 minutes ing >10 minutes incotine dependence stegory F17 to ident	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  cco cessation intervention  ce (F17)	4004F 1036F 99406 99407 271.6 272.0 ependence
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²	CPT CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use current tobacco non-user Smoking/tobacco counseli Tobacco abuse counseling (Use additional code for motobacco Use Use additional code from ca	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba ing 3-10 minutes ing >10 minutes sicotine dependence ategory F17 to ident cating pregnancy:	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  cco cessation intervention	4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, 099.333
Adolescents <sup>1</sup> Quality Metric: Lead Screening for Children <sup>1</sup> Quality Metric: Topical Fluoride for Children, ages 1-4 <sup>1</sup> Quality Metric: Tobacco Use Screening and Cessation Intervention <sup>2</sup>	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 83655  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counselit Smoking/tobacco counselit Tobacco abuse counseling (Use additional code for in Tobacco Use Use additional code from ce Smoking (tobacco) complii Smoking (tobacco) complii	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received toba ing 3-10 minutes ing >10 minutes ideotine dependence ategory F17 to identicating pregnancy: cating childbirth	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  cco cessation intervention  ce (F17)	4004F 1036F 99406 99407 271.6 272.0 (ependence)
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counselis Smoking/tobacco counseling (Use additional code for intobacco use Use additional code from case Smoking (tobacco) complis Smoking (tobacco) complis Smoking (tobacco) complis Smoking (tobacco) complis	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received tobating 3-10 minutes ing >10 minutes ategory F17 to identicating pregnancy: cating childbirth cating puerperium	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  Cco cessation intervention  ce (F17)  fify type of tobacco nicotine d  O99.330, O99.331,	4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, O99.333 O99.334 O99.335
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 83655  Application of topical fluor Screened for tobacco use. Current tobacco non-user Smoking/tobacco counseling (Use additional code for non-use additional cod	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073 ride varnish 99188, AND received tobating 3-10 minutes ing >10 minutes ategory F17 to ident cating pregnancy: cating childbirth cating puerperium al) tobacco smoke	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  Ccc cessation intervention  ce (F17)  Ify type of tobacco nicotine d  O99.330, O99.331,  in the perinatal period	4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, O99.333 O99.335 P96.81
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counselis Tobacco abuse counseling (Use additional code from case additional code from case use use additional code from case use use use use use use use use use u	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073  ride varnish 99188,  AND received toba ing 3-10 minutes ing >10 minutes ing >10 minutes cating pregnancy: cating childbirth cating puerperium al) tobacco smoke ernal use of tobacc	B26.82, B26.83, B26.84, B2 B306.02, B06.09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  CCC cessation intervention CCC (F17) CCC (F17	4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, O99.333 O99.334 O99.335
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counselis Tobacco abuse counseling (Use additional code from case additional code from case use additional code from case use use use use use use use use use u	6.2, B26.3, B26.81, B06.00, B06.01, occal: 90619, 9073  ride varnish 99188,  AND received toba ing 3-10 minutes ing >10 minutes ing >10 minutes cating pregnancy: cating childbirth cating puerperium al) tobacco smoke ernal use of tobacce to environmental	B26.82, B26.83, B26.84, B2 B306.02, B06 09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  CCC cessation intervention CCC (F17) CCC (F17	4004F 4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, 099.333 099.335 P96.81 P04.2 277.22
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²  Tobacco Use During Pregnancy, Childbirth, and Puerperium	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)  ICD-10 codes	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use Current tobacco non-user Smoking/tobacco counselis Tobacco abuse counseling (Use additional code from case additional code from case use additional code from case use use use use use use use use use u	AND received toba  ing 3-10 minutes  ing >10 minutes  ing ing pregnancy:  cating pregnancy:  cating pregnancy:  cating puerperium  al) tobacco smoke  ernal use of tobacce  to environmental  attion and literacy:	B26.82, B26.83, B26.84, B2 B306.02, B06 09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  CCC cessation intervention  CCC (F17) CCC (F17.	4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, 099.333 099.335 P96.81 P04.2 277.22 n school Z5S.3
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²  Tobacco Use During Pregnancy, Childbirth, and Puerperium	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)  ICD-10 codes	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use. Current tobacco non-user Smoking/tobacco counselis Tobacco abuse counseling (Use additional code from case) Smoking (tobacco) complis Complis Complis Smoking (tobacco) complis Complis Complis Rubella	AND received toba  aing 3-10 minutes  aicotine dependent  cating pregnancy:  cating pregnancy:  cating puerperium  al) tobacco smoke  ernal use of tobacce  to environmental  attion and literacy  ayed, unspecified	B26.82, B26.83, B26.84, B2 B306.02, B06 09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  D1206  CCC cessation intervention  CCC (F17)  CCC (F17)  CCC (F17)  CCC (F27)  CCC (F27)  CCC (F37)  CCC (F37)	4004F 6.85, B26.89, B06.9 6.82, 906.89, B06.9 650, 90651 4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, O99.333 O99.335 P96.81 P04.2 277.22 n school Z5S.3 ate food Z5S.4
Adolescents¹  Quality Metric: Lead Screening for Children¹  Quality Metric: Topical Fluoride for Children, ages 1-4¹  Quality Metric: Tobacco Use Screening and Cessation Intervention²  Tobacco Use During Pregnancy, Childbirth, and Puerperium	CPT  CPT, CDT  CPT and CPT-II codes to indicate tobacco screening and cessation counseling provided (numerator)  ICD-10 codes	Mumps B26.0, B26.1, B20 Rubella Tdap: 90715 Meningoc Lead Tests: 8365S  Application of topical fluor Screened for tobacco use. Current tobacco non-user Smoking/tobacco counselis Tobacco abuse counseling (Use additional code from ca Smoking (tobacco) complis Smoking (tobacco) complis Smoking (tobacco) complis Smoking (tobacco) complis Smoking (tobacco) complie Exposure to (environment Newborn affected by mate Contact with and exposure Problems related to educa Unemplo	AND received toba  aing 3-10 minutes  aicotine dependent  cating pregnancy: cating pregnancy: cating puerperium  al) tobacco smoke ernal use of tobacce to environmental attion and literacy  ayed, unspecified  attyle, unspecified  attyle, unspecified  atticon and second attyle, unspecified  attyle, unspecified  attyle, unspecified  attyle, unspecified  attyle, unspecified	B26.82, B26.83, B26.84, B2 B306.02, B06 09, B06.81, B06 B3, 90734 HPV: 90649, 90  D1206  D1206  CCC cessation intervention  CCC (F17)  CCC (F17)  CCC (F17)  CCC (F27)  CCC (F27)  CCC (F37)  CCC (F37)	4004F 6.85, B26.89, B06.9 6.82, 906.89, B06.9 650, 90651 4004F 1036F 99406 99407 271.6 272.0 ependence 099.332, O99.333 O99.335 P96.81 P04.2 277.22 n school Z5S.3 ate food Z59.4x elessness Z59.0x

<sup>&</sup>lt;sup>1</sup>CPC for Kids quality metric

Rev. 5/6/202S

<sup>&</sup>lt;sup>2</sup> CPC for Kids quality metric applicable for ages 12-17

ervices 1-833-644-6001
ealthcaritasoh.com/index.aspx
althcaritasoh.com or 1-833-644-6001
1-833-889-6446)
ealthcaritasoh.com/index.aspx
ealthcaritasoh.com/index.aspx
ealthcaritasoh.com/index.aspx
ealthcaritasoh.com/index.aspx
healthcaritasoh.com/provider/find-provider/index.aspx
rvices: (833) 764-7700 or Secondary – Transportation: (833)
nformation on <i>page 10</i> of this guide – MCO fit Resource Guide for Practices
healthcaritasoh.com/member/eng/index.aspx
healthcaritasoh.com/member/eng/index.aspx
healthcaritasoh.com/member/eng/index.aspx
healthcaritasoh.com/provider/pharmacy/index.aspx
nealthcaritasoh.com/provider/resources/navinet.aspx
rs for PCPs included under your contract.
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Anthem.	Anthem
Mailing Address	PO Box 62500, Virginia Beach, VA 23466-2509
Public Website	www.anthem.com
Support	
Ohio CPC Specific Questions	CPC@anthem.com
Provider General and Support Questions	Provider Services: 844-912-1226
Member Questions	Member Services: 844-912-0938
Care Management Questions	Medical Management Dept: 833-308-3035
Website Information	
Home Page	www.anthem.com
Benefits and Programs	www.Availity.com
Case Management	https://providers.anthem.com/ohio-provider/patient-care/care-management
Chronic Disease Management	Email: Condition-Care-Provider-Referrals@anthem.com
Provider Directory	https://www.anthem.com/find-care/
Transportation Assistance Call	Access2Care: 800-282-9720 or Member Services: 844-912-0938
Program website	https://www.anthem.com/oh/medicaid/welcome
Transportation Information	See Transportation information on <i>page 10</i> of this guide – MCO Transportation Benefit Resource Guide for Practices
Women and Children's Health Program	https://providers.anthem.com/ohio-provider/patient-care/maternal-child-services
24 Hour Nurse Line	844-430-0341
Community Resources	www.anthem.com/oh/medicaid/community-resources
Prescription Information	www.anthem.com/oh/medicaid/benefits
Provider Portal (note: login required)	
Home Page	https://www.providers.anthem.com/ohio-provider/welcome
Portal Access for Care Navigators - content	Member rosters, care management info, benefits, ID Cards, authorizations, provider directory, claims and frequently asked questions.

buckeye health plan	Buckeye
Mailing Address	4349 Easton Way, Suite 120 Columbus, OH 43219
Public Website	https://www.buckeyehealthplan.com/
Support	
Ohio CPC Specific Questions	Heather Baker: 614-881-6549; <u>heather.m.baker@centene.com</u>
Provider General and Support Questions	Provider Services: 866-246-4358
Member Questions	Member Services at (866) 246-4358 or TTY (800) 750-0750). Or https://www.buckeyehealthplan.com/members/medicaid/resources/handbooks-forms.html
Care Management Questions	Main Switchboard: 1-866-246-4356
Website Information	
Home Page	https://www.buckeyehealthplan.com/
Benefits and Programs	https://www.buckeyehealthplan.com/members/medicaid/benefits- services.html
Case Management	https://www.buckeyehealthplan.com/members/medicaid/benefits- services.html
Chronic Disease Management	https://www.buckeyehealthplan.com/members/medicaid/benefits- services.html
Provider Directory	https://www.buckeyehealthplan.com/find-a-doctor.html
Transportation Assistance Call	1-866-531-0615 OR 1-866-246-4358 (TDD/TTY: 1-800-750-0750)
Transportation Information	See Transportation information on <i>page 10</i> of this guide – MCO Transportation Benefit Resource Guide for Practices
Program website	https://www.buckeyehealthplan.com/members/medicaid/benefits- services.html
Women and Children's Health Program	https://www.buckeyehealthplan.com/members/medicaid/resources/women- and-childrens-health.html
24 Hour Nurse Line	https://www.buckeyehealthplan.com/members/medicaid/benefits- services.html
Community Resources	https://www.buckeyehealthplan.com/community-connect.html
Prescription Information	https://www.buckeyehealthplan.com/providers/pharmacy.html
Provider Portal (note: login required)	
Home Page	https://www.buckeyehealthplan.com/providers/login.html
Portal Access for Care Navigators - content	Member rosters, care management info (e.g. assessments and care plans, authorizations, claims, hospital inpatient, ER and outpatient utilization, provider directory, benefits, ID Cards, frequently asked questions, secure messages, and many other topics.

CareSource	CareSource
Mailing Address	P.O. Box 8738 Dayton OH 45401
Public Website	www.caresource.com
Support	
Ohio CPC Specific Questions	Deanna Daniel 937-952-8265; Deanna.daniel@caresource.com
Provider General and Support Questions	Provider Services Mon - Fri 8am to 6 pm: 800-488-0134 (TTY 1-800-750-0750 or 711)
Member Questions	Member Services Mon - Fri 8am to 6 pm: 800-488-0134 (TTY 1-800-750-0750 or 711)
Care Management Questions	Care Management: https://www.caresource.com/oh/providers/education/patient-care/care-management-disease-management/medicaid/
Website Information	
Home Page	www.caresource.com
Benefits and Programs	https://www.caresource.com/members/ohio/ohio-medicaid/benefits-and- services/
Case Management	https://www.caresource.com/oh/providers/education/patient-care/care-management-disease-management/medicaid/
Chronic Disease Management	https://www.caresource.com/oh/providers/education/patient-care/care-management-disease-management/medicaid/
Provider Directory	https://findadoctor.caresource.com/?
Transportation Assistance Call	800-488-0134 (TTY: 1-800-750-0750 or 711)
Transportation Information	See Transportation information on <i>page 10</i> of this guide – MCO Transportation Benefit Resource Guide for Practices
Program website	https://www.caresource.com/providers/
Women and Children's Health Program	https://www.caresource.com/healthy-living/healthy-family/healthy-pregnancy/
24 Hour Nurse Line	https://www.caresource.com/members/ohio/ohio-medicaid/contact-us/
Community Resources	https://www.caresource.com/oh/members/education/myresources/medicaid/
Prescription Information	https://www.caresource.com/oh/providers/tools-resources/drug- formulary/medicaid/
Provider Portal (note: login required)	
Home Page	https://providerportal.caresource.com/OH/User/Login.aspx?ReturnUrl=%2fO Hportal/
Portal Access for Care Navigators - content	Member rosters, care management info, benefits, ID Cards, authorizations, provider directory, claims, frequently asked questions, secure messages and many other topics.

Humana Healthy Horizons ~	Humana Healthy Horizons
Mailing Address	Humana Healthy Horizons in Ohio
	P.O. Box 14601
	Lexington, KY 40512-4601
Public Website	www.humana.com/medicaid/ohio
Support	
Ohio CPC Specific Questions	Practice Transformation: OHPEX_PracticeTransformation@humana.com
Provider General and Support Questions	Provider Services: 1-877-856-5707 M-F 7am-8pm
Member Questions	Member Services: 1-877-856-5702 (TTY: 711) M-F 7am-8pm
Care Management Questions	Humana CM Support: 1-877-856-5702 OHMCDCareManagement@humana.com
Website Information	
Home Page	www.humana.com/medicaid/ohio
Benefits and Programs	www.humana.com/medicaid/ohio/support
Case Management	www.humana.com/medicaid/ohio/support/care-management
Chronic Disease Management	www.humana.com/medicaid/ohio/support/disease-management
Provider Directory	Physician Search - Humana
Transportation Assistance Call	Access2Care at 1-855-739-5986 (TTY: 1-866-288-3133) M-Sat 8am-6pm
Transportation Information	See Transportation information on <i>page 10</i> of this guide – MCO Transportation Benefit Resource Guide for Practices
Program website	www.humana.com/medicaid/ohio/coverage/transportation
Program Brochure	www.humana.com/medicaid/ohio/support/why-humana
Women and Children's Health Program	www.humana.com/medicaid/ohio/benefits/pregnancy-program www.humana.com/medicaid/ohio/support/child-wellness
24 Hour Nurse Line	24 Hour Nurse Advice Line: 1-866-376-4827
Community Resources	Member Services: 1-877-856-5702 (TTY: 711) M-F 7am-8pm
Prescription Information	www.humana.com/medicaid/ohio/coverage/pharmacy
Provider Portal (note: login required)	
Home Page, hosted by Availity	www.humana.com/provider/medical-resources/ohio-medicaid/availity
Portal Access for Care Navigators - content	The Ohio Medicaid Care Management link within Availity will direct providers to the population health dashboard. This allows providers to view member assessments, care plans, authorizations, assigned care management programs, and contact information for the member's care manager.

MOLINA' HEALTHCARE	Molina
Mailing Address	3000 Corporate Exchange Drive Columbus, OH 43231
Public Website	http://www.molinahealthcare.com
Support	
Ohio CPC Specific Questions	Lucinda Griffith: 1-614-540-3982; Lucinda.Griffith@molinahealthcare.com
Provider General and Support Questions	Provider Services: 1-855-322-4079
Member Questions	Member Services: 1-800-642-4168 (TTY: 1-800-750-0750 or 711)
Care Management Questions	Molina Care Management: 1-800-642-4168
Website Information	
Home Page	http://www.molinahealthcare.com
Benefits and Programs	https://www.molinahealthcare.com/members/oh/en-us/mem/home.aspx
Case Management	https://www.molinahealthcare.com/members/oh/en- us/mem/medicaid/overvw/coverd/hm/casemngt.aspx
Chronic Disease Management	https://www.molinahealthcare.com/members/oh/en- us/mem/medicaid/overvw/coverd/hm/dm/dm.aspx
Provider Directory	https://molina.sapphirethreesixtyfive.com/?ci=oh- medicaid&network id=29&geo location=37.7590999999999,- 122.1358999999998locale=en_us
Transportation Assistance Call	1-866-642-9279 (TTY: 711)
Transportation Information	See Transportation information on <i>page 10</i> of this guide – MCO Transportation Benefit Resource Guide for Practices
Program website	https://www.molinahealthcare.com/members/oh/en- us/mem/medicaid/overvw/coverd/coverd.aspx
Program Brochure	https://www.molinahealthcare.com/members/oh/en-us/-/media/Molina/PublicWebsite/PDF/members/oh/en-us/Medicaid/oh-medicaid-covered-services-list.pdf
Women and Children's Health Program	https://www.molinahealthcare.com/members/oh/en- us/mem/medicaid/overvw/coverd/services/womencare.aspx
24 Hour Nurse Line	Molina 24-Hour Nurse Advice Line 1-888-275-8750 (English); 1-866-648-6537 (Spanish); 711 (TTY)
Community Resources	https://www.molinahealthcare.com/members/oh/en- us/mem/medicaid/overvw/resources/commres.aspx
Prescription Information	https://www.molinahealthcare.com/members/oh/en- us/mem/medicaid/overvw/coverd/presdrugs.aspx
Provider Portal (note: login required)	
Home Page, hosted by Availity	https://apps.availity.com/availity/web/public.elegant.login
Portal Access for Care Navigators - content	Member rosters, care management info (member care plans, member claims history), benefits, ID Cards, authorizations, provider directory, claims, frequently asked questions, secure messages and many other topics.

UnitedHealthcare*	UnitedHealthcare
Mailing Address	5900 Parkwood Place Dublin, OH 43016
Public Website	http://www.uhccommunityplan.com/oh/medicaid/community-plan.html
Support	
Ohio CPC Specific Questions	Sarah Balzano, 763-292-6420, ohiocpc@uhc.com
Provider General and Support Questions	Provider Services: 877-842-3210
Member Questions	Member Services: 800-895-2017 / TTY: 711
Care Management Questions	800-895-2017 / TTY: 711
Website Information	
Home Page	http://www.uhccommunityplan.com/oh.html
Benefits and Programs	http://www.uhccommunityplan.com/oh/medicaid/community-plan.html
Case Management	http://www.uhccommunityplan.com/oh.html
Chronic Disease Management	https://www.uhc.com/communityplan/ohio/plans/medicaid/community-plan
Provider Directory	http://www.uhccommunityplan.com/oh.html
Transportation Assistance Call	(800) 895-2017
Transportation Information	See Transportation information on <i>page 10</i> of this guide – MCO Transportation Benefit Resource Guide for Practices
Women and Children's Health Program	http://www.uhccommunityplan.com/oh/medicaid/community-plan.html
24 Hour Nurse Line	800-542-8630 / TTY 800-855-2880
Community Resources	Member Services: 800-895-2017 / TTY: 711
Prescription Information	https://www.uhc.com/communityplan/ohio/plans/medicaid/community- plan/find-a-provider-or-pharmacy#collapse-find-drug
Provider Portal (note: login required)	
Home Page	www.uhcprovider.com
Portal Access for Care Navigators - content	Member rosters, authorization and claims information, member information such as demographics, care team members, diagnosis(es), completed assessments, and care plans. Portal access also allows the user to identify the assigned health plan care manager or community health worker, and the ability to send private messages to that person. To obtain access to the UHC Care Coordination portal, please send an email to: <a href="mailto:UnitedCCPortal@uhc.com">UnitedCCPortal@uhc.com</a> plans.