



PROVIDER MANUAL

REFUGEE MEDICAL ASSISTANCE & UNACCOMPANIED CHILDREN

AUGUST 2019

Key Contact Information

Administrative Mailing Address	Point Comfort Underwriters, Inc 306 Prospect Street Suite 100 Indianapolis, IN 46225
Main Phone	317-210-2010 Toll Free: 844-210-2010 Interpretation Services Available
Unaccompanied Children Program	Paper Claims: PO Box 211628 Eagan, MN 55121 EDI Payer ID: PCU01
Refugee Medical Assistance Program	Paper Claims: PO Box 211745 Eagan, MN 55121 EDI Payer ID: PCU02
Benefits and Eligibility	317-210-2010 service@pointcomfort.com
Claim Status	Website: Claims.pointcomfort.com Phone: 317-210-2010
Pre-certification (RMA Program only)	To submit a pre-cert: pcf.pointcomfort.com Questions? Email: rmaclinical@pointcomfort.com Phone: 317-210-2010
TAR Assistance (UC Program)	Please contact the patient's ORR Care Facility
Provider Relations	Email: Providers@pointcomfort.com Phone: 317-210-2010 Fax: 317-659-4610
Smart Data Solutions (clearinghouse)	Phone: 855-297-4436 Website: https://www.sdata.us/contact/
Appeals	Email: Claims@pointcomfort.com Fax: 317-659-4610 Mail: 306 Prospect St, Suite 100 Indianapolis, IN 46225
PCU Provider Portal (claim status, payment details, EOBs, FAQs)	Claims.pointcomfort.com Live Chat available Monday-Friday, 9am-5pm

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Introduction

The purpose of this manual is to assist providers with general program policies, coverage information, and standard claim reimbursement. If you have any questions regarding the information in this provider manual, please call Point Comfort Underwriters at (844) 210-2010 or send an email to providers@pointcomfort.com.

About Point Comfort Underwriters

At PCU we recognize the complexities facing international organizations and citizens. We know that one solution rarely fits the needs of many. PCU was formed to provide tailored insurance products and delivery systems that empower customers in new and innovative ways.

PCU has provided healthcare management and third-party administrator services throughout the US since 2014. During that time, we have assisted over 253,000 customers. We have processed and paid over 954,000 claims with an average claim processing time of 12 days, and an accuracy rate of 99%. Our customers include individuals, groups and large government programs which mirror state Medicare or Medicaid plans.

The plans we service are not traditional PPO or HMO type plans. We contract with providers who are requested by our clients, with the goal of providing our clients with a broad range of medical service providers representing the full spectrum of medical specialties.

At PCU we incorporate our core values in every product and in every relationship. Our core values are: Integrity, Creativity and Excellence.

Integrity: Uncompromising and predictably consistent commitment to the highest moral and ethical standards in all business activities.

Creativity: Transformative vision and fearless innovation that attacks every opportunity with a passion to succeed on behalf of our clients, our community and our employees.

Excellence: Accountability to the principles and people that make up our market so we may excel in all facets of client and customer satisfaction

About PCU Programs

PCU is contracted by the Office of Refugee Resettlement to manage claims and healthcare benefits for the Unaccompanied Children (UC) Program and Refugee Medical Assistance Program. Though both programs are federally funded by the Office of Refugee and Resettlement, they are unrelated and have specific guidelines that are outlined in this manual.

PCU manages the RMA Program in Texas, Maine, Tennessee, Kansas, and Missouri. Eligible members are between the ages of 19 & 64 and do not qualify for Medicaid. Members can be covered for up to 8 months unless they are classified as an Unaccompanied Refugee Minor (URM). URM's are eligible for coverage until they are 21 or 22 years old.

PCU manages the UC Program in several locations throughout the United States. All youth are under the age of 18. PCU works closely with ORR Care Facilities to ensure the children have access to proper medical care while also following ORR mandated guidelines.

ORR Unaccompanied Children Program

Unaccompanied Children (UC)

A UC, as defined by the Homeland Security Act, is a child who:

- has no lawful immigration status in the United States;
- has not attained 18 years of age; and
- with respect to whom: (1) there is no parent or legal guardian in the United States; or (2) no parent or legal guardian in the United States is available to provide care and physical custody.

UC are part of a vulnerable population that generally leave their home countries to join family already in the U.S.; escape abuse, persecution or exploitation in the home country; or to seek employment or educational opportunities in the United States. Some UC are sent to the U.S. by their families while others are trafficked for labor or commercial sex exploitation. The most common native countries of UC are Guatemala, El Salvador, Honduras, and Mexico. However, UC come from countries all over the world.

Provision of Care

When UC are apprehended by the U.S. Department of Homeland Security (DHS), they are transferred to the care and custody of the Office of Refugee Resettlement (ORR), Division of Children's Services (DCS), a division of the U.S. Department of Health and Human Services. UC are in the legal custody of the Federal Government under ORR's care.

UC are cared for through a network of state licensed ORR-funded care providers. The ORR Care Facility arranges medical, dental, and mental health care for UC in their program, and seeks authorization for such services from the ORR. UC will arrive to a health care provider's office accompanied by their current custodian, and with a valid authorization code for services to be rendered.

Medical Services

ORR provides for the health care of all UC that come into its custody. Covered health care services include, but are not limited to:

- Initial medical screening, including immunizations***
- Sick visits
- Routine and problem-focused dental care
- Mental health care

- Specialized services determined by the health needs of the child.
- Annual physical exams for long-staying children

Specific program guidance for the initial medical examination/screening can be provided upon request.

*****Immunizations (vaccines will not be reimbursed as providers should use Vaccines for Children [VFC] program vaccines; vaccine administration fees may be reimbursed [billing codes 90460, 90461, 90471–90474]):**

- Provide immunizations, unless medically contraindicated, for children with no immunization documentation in accordance with the Advisory Committee on Immunization Practices' (ACIP) catch up schedule: <http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>. ACIP recommends simultaneous administration of all routine childhood vaccines when appropriate.
- Administer influenza vaccine when seasonally available (generally, September through June).
- Pregnant girls should receive the following vaccines - hepatitis A, hepatitis B, influenza (inactivated), meningococcal (quadrivalent conjugate), and Tdap vaccines.

Advance authorization must be obtained for all health care services except initial medical screenings and emergency care. This is the responsibility of the ORR Care Facility. Payment for services is made through Point Comfort Underwriters.

Emergency services are always approved, and the medical coordinators should submit a Treatment Authorization Request (TAR) within 24 hours of the emergency. If the UC is admitted to the hospital as a result of the ER visit, another TAR is needed for the inpatient hospitalization. If ambulance services are utilized, then an additional TAR must also be submitted. Please coordinate all TARs with the UC's medical coordinator to ensure the approved protocol is followed. Emergency Services are defined as treatment in the Emergency Department.

About Reimbursements

PCU's standard reimbursement rates are listed below and apply to in-network and out-of-network providers. If you have signed a contractual agreement with Point Comfort Underwriters, your claims will be reimbursed at the agreed upon rate.

- Medical and mental health services are reimbursed at 100% of the Medicare allowable rate.
- Dental services are reimbursed according to the DenteMax Network fee schedule. PCU utilizes the ORR Dental Fee Reimbursement Schedule for all non-DenteMax providers. A copy of the ORR Fee Schedule can be provided upon request.
- Prescription drugs are reimbursed through the Magellan Rx Network. Prescriptions should be submitted electronically to Magellan using the information provided on the minor's ID document.

There are no co-payments, deductibles, or out-of-pocket expenses for UC while they are covered in this program.

You may contact Provider Relations if you wish to negotiate rates and set up a contract for the services

you provide. If you believe your claim was incorrectly reimbursed, please send an appeal to our claims department via mail, fax or email. See *Appealing a Claim* for more information.

Contracting/Credentialing

Email: providers@pointcomfort.com

Providers do not need to be Medicare participating physicians to serve Unaccompanied Children.

How to Submit a Claim

The Office of Refugee Resettlement/Division of Children's Services (ORR/DCS) Unaccompanied Children Program pays claims through Point Comfort Underwriters, Inc. (PCU) to vendors of services for minors under the care of ORR/DCS.

Paper Claims:

Point Comfort Underwriters, Inc.

PO Box 211628

Eagan, MN 55121

Electronic Payer ID: PCU01 (Smart Data Solutions clearinghouse)

You will have two options to submit your claims and attachments electronically. First, check with your existing clearinghouse or practice management system to determine if a route for the Payer IDs above has been established. If the route has not been established, request the connection be added by contacting them directly and notifying them of this change.

If your current vendor is unable to establish a connection to the Payer ID above through Smart Data Solutions, at no cost to you, SDS can establish a direct connection and/or provide access to SDS Provider Portal to submit your claims. Please contact Smart Data Solution Support line at 855-297-4436 to establish a direct connection.

NOTEWORTHY: PCU has multiple claim submission addresses and Payer IDs. It is important that your Billing Department submits claims through the correct route. Claims sent to the incorrect address or Payer ID will be denied.

Claim Requirements

Claim submissions **MUST** meet the following requirements to be processed for reimbursement:

- Charges must be submitted on a clean CMS-1500, UB-04, or ADA dental claim form. Invoices will not be accepted for reimbursement unless prior arrangements have been made with PCU.
- Must be submitted within 365 days of the date of service (effective 8/1/18).

- Must have patient's UC ID number in Box 1a on a CMS-1500, Box 60 on a UB-04, or Box 15 on an ADA dental claim form.
- Must have a valid W-9 on file. W-9's can be emailed to providers@pointcomfort.com.
- Services must have a valid authorization (TAR) number. The TAR number does not need to be included on the claim, but it is preferred.
- Claim must include NPI numbers in the appropriate fields – billing, servicing, and/or rendering providers.
- Must use ICD-10 diagnosis codes (ICD-9 will no longer be accepted as of 9/10/18).
- Corrected claims must be submitted with the appropriate Bill Type or Resubmission Code.

It is the responsibility of the ORR Care Facility to provide the UC's ID Document and Treatment Authorization Request form to your office. You may contact the facility to obtain this information if it was not provided at the time of service.

This is not a comprehensive list of requirements. Please work with your Billing Department to ensure clean claims are submitted to avoid delays in reimbursement.

UC Program Documents

Identification Document – This document serves as the UC's insurance card. It includes all the information needed to submit a claim to PCU. The ORR Care Facility is responsible for presenting this document at the time of service.

Treatment Authorization Request (TAR) – An approved TAR is required for all medical services UC receive while in ORR care. The ORR Care Facility is responsible for submitting the request to PCU and ensuring the services are approved prior to the appointment. Emergency services are always pre-approved, but a retro TAR is required before claims can be paid.

TARs are valid for 45 days from the effective date and can only be used for one date of service, unless otherwise stated in the approval. The TAR will be given to your office at the time of service or shortly thereafter by the facility that is caring for the unaccompanied child.

Refugee Medical Assistance Program

For over 100 years the US Committee for Refugees and Immigrants (USCRI) has advanced the rights and lives of people who have been forcibly or voluntarily uprooted. The USCRI provides refugees and others with the opportunity to achieve their full potential in the US. Physical and emotional wellness, as well as access to healthcare, are essential for successful transition to life in the US. USCRI administers the Refugee Medical Assistance (RMA) program to newcomers who are ineligible for their state Medicaid programs. RMA includes the same medical, dental and prescription drug benefits as Medicaid.

When members enter the program, they are assigned to a local agency who are responsible for verifying the refugee's RMA eligibility. Once an application is submitted and approved, the local agency will provide

the member with his/her PCU insurance card. This card should be presented to all medical, dental, and pharmaceutical providers.

Members are covered for up to 8 months from their arrival date into the U.S. or until they acquire other insurance. Clients who become eligible for Medicaid (i.e. newly pregnant women) should apply as soon as possible and notify their case manager. RMA coverage will term on the effective date of their new insurance. PCU does not serve as primary or secondary to any other insurance and should not be billed in these instances.

Medical Services

RMA benefits are dependent on each state's Medicaid plan. Covered health care services include, but are not limited to:

- Sick visits
- Problem-focused dental care (not covered in TN)
- Mental health care
- Specialized services determined by the health needs of the refugee
- Annual physical exams (wellness)

Please email providers@pointcomfort.com for specific questions regarding RMA benefits.

Transportation and Interpretation Services

Non-emergency medical transportation (NEMT) services are available for your patients covered under Refugee Medical Assistance. These services are arranged by the U.S. Committee for Refugees and Immigrants (USCRI). NEMT is available for all RMA enrollees and is available 7 days a week. Requests must be submitted Monday-Friday, 8am-4pm EST. For additional questions, or to schedule a ride for an RMA patient's medical appointment, please contact the Refugee Health Transportation Coordinator at 1-800-688-7338 and/or rmatransportation@uscridc.org.

Interpretation services that are available through your office are also covered by RMA. These services can be billed to PCU using code T1013. The USCRI can arrange interpretation services for an RMA patient if the services are not provided by your facility. USCRI schedules these services and covers all costs. To schedule an interpreter for your patient's medical appointment, please contact the Refugee Health Interpretation Coordinator at 1-800-688-7338 and/or rmalanguageservices@uscridc.org.

Pre-Certification Requirements

Advance authorization must be obtained for all health care services listed below. This is the responsibility of the patient and/or provider. Pre-certification requests can be submitted through pcf.pointcomfort.com. Please allow 24-48 hours for your request to be reviewed by PCU's Clinical Department. Questions can be emailed to rmaclinical@pointcomfort.com.

Inpatient care

Any surgery or surgical procedure
Care in extended care facility
Hospice care
Home nursing care
Chiropractic care
Physical therapy
Occupational therapy
Speech therapy
Allergy testing
Durable medical equipment
Mental health care
Artificial limbs
Prosthetic devices
Computerized Tomography (CAT/CT Scan)
Magnetic Resonance Imaging (MRI)
Positron Emission Tomography (PET Scan)
Human Organ/Tissue Transplants.
PET Scan
Cardiac Nuclear Scan
Mammogram (only required for TN patients under the age of 50)
Dialysis, Renal (Hemodialysis)
Chemotherapy/Radiation Therapy

This is not a comprehensive list of procedures requiring pre-certification. If you are unsure whether a procedure requires pre-certification, please email maclinical@pointcomfort.com or call 844-210-2010.

About Reimbursements

PCU's standard reimbursement rates are listed below and apply to in-network and out-of-network providers. If you have signed a contractual agreement with Point Comfort Underwriters, your claims will be reimbursed at the agreed upon rate.

- Medical and mental health services are reimbursed according to the following:
 - Texas – 100% Medicaid allowable
 - Maine – 100% Medicaid allowable
 - Missouri – 80% Medicare allowable
 - Tennessee – 80% Medicare allowable
 - Kansas – 80% Medicare allowable
- Dental services are reimbursed according to the DenteMax Network fee schedule. PCU utilizes the ORR Dental Fee Schedule for all non-DenteMax providers. A copy of the ORR Fee Schedule can be provided at your request.
- Prescription drugs are reimbursed through the Magellan Rx Network. Prescriptions should be submitted electronically to Magellan using the information provided on the patient's insurance

card.

There are no co-payments, deductibles, or out-of-pocket expenses for RMA members while they are covered in this program. However, the member will be responsible for all non-covered services.

You may contact Provider Relations if you wish to negotiate rates and set up a contract for the services you provide. If you believe your claim was incorrectly reimbursed, please send an appeal to our claims department via mail, fax or email. See *Appealing a Claim* for more information.

Contracting/Credentialing

Email: providers@pointcomfort.com

Providers do not need to be Medicaid participating physicians to serve RMA clients.

How to Submit a Claim

U.S. Committee for Refugees and Immigrants (USCRI) pays claims through Point Comfort Underwriters, Inc. (PCU) to vendors of services for those covered under the Refugee Medical Assistance Program (RMA).

Please submit paper claims to:
Point Comfort Underwriters, Inc.
PO Box 211745
Eagan, MN 55121

Electronic Payer ID: PCU02 (Smart Data Solutions clearinghouse)

If your current vendor is unable to establish a connection to the Payer IDs above through Smart Data Solutions, at no cost to you, SDS can establish a direct connection and/or provide access to SDS Provider Portal to submit your claims. Please contact Smart Data Solution Support line at 855-297-4436 to establish a direct connection.

NOTEWORTHY: PCU has multiple claim submission addresses and Payer IDs. It is important that your Billing Department submit claims through the correct route. Claims sent to the incorrect address or Payer ID will be denied.

Claim Requirements

Claim submissions **MUST** meet the following requirements to be processed for reimbursement:

- Charges must be submitted on a clean CMS-1500, UB-04, or ADA dental claim form. Invoices will not be accepted for reimbursement unless prior arrangements have been made with PCU.
- Must be submitted within 365 days of the date of service (effective 8/1/18).
- Must include patient's PCU ID number in Box 1a on a CMS-1500, Box 60 on a UB-04, or Box 15 on an ADA dental claim form.

- Must have a valid W-9 on file.
- Claim must include NPI numbers in the appropriate fields – billing, servicing, and/or rendering providers.
- Must use ICD-10 diagnosis codes (ICD-9 will no longer be accepted as of 9/10/18).
- Corrected claims must be submitted with the appropriate Bill Type or Resubmission Code.

This is not a comprehensive list of requirements. Please work with your Billing Department to ensure clean claims are submitted to avoid delays in reimbursement.

General PCU Information

Claim Adjudication Process

PCU adjudicates claims within 30 days of receipt of a clean claim. After submitting a claim, please allow 30 days before checking the status of said claim. After payment has been issued, an Explanation of Benefits will be available to download on the PCU Provider Portal. PCU does not mail or fax EOBs to providers.

Timely Filing

PCU's timely filing deadline is 365 days from the date of service. This applies to first-time claim submissions, corrected claims, and appeals. Any questions or concerns can be emailed to providers@pointcomfort.com.

Payments

Reimbursement can be issued to providers via ACH or check. ACH is required for payments that are \$10,000 or more. PCU recommends all providers sign up for ACH reimbursement as it ensures payment will be received in a timely manner. You may complete the ACH Authorization form located on the PCU Provider Portal and return to accounting@pointcomfort.com.

Check/ACH details can be found on the portal, along with the following documents to assist with payment related inquiries:

- Payment Confirmation Request Form
- Check Reissue Request Form
- Refund Information Form

Appealing a Claim

The first step in appealing a claim is to contact PCU's Client and Provider Relations Department via phone, email, or live chat. Our representatives will review the claim and advise what the best course of action should be. Most issues can be resolved without submitting an appeal.

Appeals can be submitted any of the following ways:

Mail: Point Comfort Underwriters
ATTN: Appeals
306 Prospect St.
Suite 100
Indianapolis, IN 46225

Fax: 317-659-4610

Email (preferred): Claims@pointcomfort.com

PCU Provider Portal

claims.pointcomfort.com

The PCU Provider Portal offers quick and convenient access to the following information and tools:

- Status on claims, broken down by service line
- Documents such as, ACH Authorization form, Check Reissue Request form, Payment Confirmation Request form, etc.
- A complete list of reason codes
- Frequently asked questions
- Explanation of Benefits/Standard Remittance Advice
- Check/ACH Details
- PCU contact information
- Provider account information
- Live Chat Assistance

To gain access to the PCU Provider Portal, you must complete a Claims Portal Authorization form that includes the Admin for your organization and any additional users that will also be utilizing the website. All PCU providers must use the portal to obtain claim status and standard remittance advice.

There are 5 main sections on the portal:

- Claims
 - Check status on claims and pull EOBs
 - Claim information can be customized to fit your provider's needs
 - Search for claims by patient account number, patient ID number, date of service, etc.
- Reason Codes
 - Provides a complete list of reason codes and explanations for each
- Payments
 - Lists detailed information on all payments issued to your provider by PCU
- Documents
 - Important forms such as the ACH Authorization Form and Check Reissue Request Form
 - General PCU contact information and certain billing guidelines
- FAQs



- Answers to questions we receive from Providers most often such as how to obtain an EOB

If you would like more information on navigating the PCU Provider Portal, please reference the Claims Portal User Guide located in the Document's section of the website.