United Behavioral Health (UBH) Florida Healthy Kids (FHK) Frequently Asked Questions

Who can see UBH FHK members?

Any <u>licensed</u> UBH contracted provider who provides treatment to children ages 5-18 is eligible to join the FHK Network and see UBH FHK members.

Even if a contracted provider does not have a Medicaid ID #, can that provider still see UBH FHK members?

Yes.

What rates will be paid for seeing an FHK member?

Current UBH contracted fee schedules apply. Please contact UBH Provider Relations directly, if you should have additional questions.

What type of codes will be used when billing for an FHK member? CPT codes.

How will I know that a patient is a UBH FHK member?

The insurance ID card will list UnitedHealthcare (UHC) or UnitedHealthcare Community Plan on the front of the card and FHK will be listed in the lower right corner of the card. The Mental Health number on the back of this card will be the number for UBH. As with any member, always call the number on the card to verify current eligibility and benefits.

On the ID card, does the membership number have any special characters to indicate that it is a FHK member?

FHK does not have unique identifiers in the membership number.

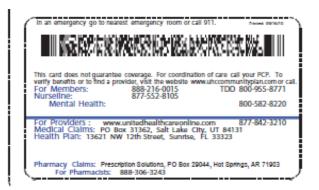
Example of FHK ID Card with co-pay:





Example of FHK ID Card without co-pay:





How much is the FHK co-pay for routine outpatient services?

There is a \$5 co-pay for FHK members. The only current exception is: Native American members will have a \$0 copay, which will be verified by their group number.

When is the open enrollment period for FHK members?

There is not an annual open enrollment period. Each member can switch plans at their annual renewal date, which occurs one year from their original enrollment date.

Can an FHK member change their insurance carrier at times other than on their annual renewal date?

Typically members are "locked in" to an insurance plan for one year, however, there are good cause exceptions for which the enrollee can change plans at other times under the Enrollee Protections Policy, if needed.

If an FHK member does not pay their premium, will they lose their eligibility? Yes Can the member get retroactively reinstated?

The member can never be retroactively reinstated if they simply did not pay their premium or complete their renewal documents. Retroactive reinstatement only occurs if there was a system error that caused the payment not to post, etc.

Are there limits on the number of routine outpatient sessions that can be provided to a member?

No, once the open authorization is entered and the member maintains eligibility with UBH, they can be seen per medical necessity guidelines for up to 1 year on the authorization.

Can individual and group therapy be provided on the same day?

Yes, as long as two <u>different</u> services were provided on the same day and appropriately documented in the patient records.

Is a 90808 considered a standard code under the open authorization?

No, 90808 requires additional clinical review and may be authorized based upon specific situations/criteria. If an extended visit is needed such as a member is seen and then the family is seen with or without the member, the provider may bill two <u>different</u> CPT codes in one day such as: a 90806 and a 90847 or a 90846.

What is the authorization process for Psychological Testing for FHK members?

The standard process applies for FHK members. You may call the Care Advocacy Center at 1-800-582-8220 to request authorization for up to 5 units of Psychological Testing. For anything beyond 5 units, you would need to go to ubhonline to complete the Psychological Testing Request Form and submit the form for further authorization.

Will I still be able to use ubhonline services for FHK members?

Yes, most ubhonline services are available for FHK.

Who do I contact with additional FHK questions or to join the FHK Network? Jennifer Durgee-Hemminger, Network Manager at 813-907-1348 or <u>jennifer.durgee-hemminger@optum.com</u>.