

Question	Sunflower	UHC	Healthy Blue
What are the full steps to be able to bill clinical services?	1. Pharmacy provider enroll BOTH pharmacy and pharmacist in KMAP (must select Sunflower in enrollment). 2. Sunflower review enrollment and if applicable sends contract to pharmacy; If not applicable, Sunflower will send the pharmacy an email acknowledging receipt and no changes needed. 3. If Sunflower outreaches regarding clarification or documents updates, please respond to request. 4. Pharmacy signs contract. 5. Sunflower loads the pharmacy and then pharmacist 6. Pharmacy completes Sunflower provider training and Sunflower portal training	1. Pharmacy provider enroll BOTH pharmacy and pharmacist in KMAP (must select UHC in enrollment). 2. UHC review enrollment and if applicable sends contract to pharmacy; If not applicable, UHC will send the pharmacy an email acknowledging receipt and no changes needed. 3. If UHC outreaches regarding clarification or documents updates, please respond to request. 4. Pharmacy signs contract. 5. UHC loads the pharmacy and then pharmacist 6. Provider advocate will reach out to provide education and support. 7. Provider completes UHCCP of Kansas, KanCare 101 Training available online.	1. Pharmacy provider enroll BOTH pharmacy and pharmacist in KMAP (must select Healthy Blue in enrollment). 2. Healthy Blue review enrollment request for credentialing, then contracting. 3. If Healthy Blue outreaches regarding clarification or documents updates, please respond to request. 4. Pharmacy signs contract. 5. Pharmacy and pharmacist are now able to bill Healthy Blue.
How many contracts will the pharmacy have with the MCO if they dispense, provide DME, and clinical services?	2 contracts The pharmacy may already have a pharmacy contract through our PBM (ESI). This contract is separate from the medical contract which may include DME and the new Medical Group contract.	3 contracts A retail pharmacy contract with OptumRx, a DME contract, and a small medical group contract.	3 contracts A retail pharmacy contract with CarelonRX/CVS, a DME contract, and a Non-Physician contract.
What should the pharmacy look for after KMAP enrollment is approved?	The contract will be sent by Centene eSign via Adobe Acrobat Sign <adobesign@adobesign.com>; Starting 8/20/24, Sunflower will send an additional email from the Contract team with additional details regarding the contract.	The contract will be sent via Adobe Acrobat Sign. Once the contract is finalized and loaded a dually signed contract will be sent back with an effective date. An email will also come from one of the three UHN representatives that is assigned to establish the contract	Once credentialed and contracted, KMAP will be updated to show a participating status with Healthy Blue.

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What type of contract will be sent when they are KMAP approved?	Repaper/New Contract: If the provider's base agreement with Sunflower is older than 5 years, a new agreement will be created. This is an administrative update that will include existing services loaded into our payment system for all products the provider is contracted for. In addition to the administrative update, the agreement will also include a professional compensation schedule for all products the provider is contracted for – Medicaid, Medicare, Commercial-Exchange. Reimbursement for Medicaid services will be 100% of the Payor Medicaid fee schedule which equals 100% of the Kansas Medicaid fee schedule. Amendment: If the provider's base agreement with Sunflower is less than 5 years old, an amendment will be created. The amendment will include professional compensation schedules for all products the provider is contracted for – Medicaid, Medicare, Commercial-Exchange. Reimbursement for Medicaid services will be 100% of the Payor Medicaid fee schedule which equals 100% of the Kansas Medicaid fee schedule.	The pharmacy will receive a new contract for a Small Medical Group with UHC. The new established contract as a Small Medical Group will not impact other agreements.	Provider will receive a copy of the contract once finalized via Adobe Acrobat Sign which will include the details of their agreement.

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Who do we contact if we have contract questions or to figure out where we are at in the process?	Please contact Sunflower Contracting at SunflowerContracting@sunflowerhealthplan.com	Please contact UHC at uhccs_pharmacy@uhc.com and issues will be triaged appropriately.	Please contact your dedicated Healthy Blue Provider Relationship Account Consultant, Toi Tillmon. Email: toi.tillmon@healthybluekansas.com
What date will claims pay? KMAP enrollment? Or MCO contract date?	Effective date for billing (100% Medicaid reimbursement) is the effective date on the contract. If a claim was billed after the KMAP enrollment date but before the contract effective date, the claim will be reimbursed at 90% of Medicaid rate. Effective date on the contract is generally 30 days from KMAP publish date (date sent to the MCO). Both the pharmacist and the pharmacy on the claim must be KMAP effective (enrolled with KMAP) before claims will pay. Starting 8/20/24, Sunflower contract team will provide a contract with 8/1 effective date (if enrolled prior to 8/1/24) or actual KMAP enrollment date (if enrolled after 8/1/24).	Effective date for billing (100% Medicaid reimbursement) is the effective date on the contract. If a claim was billed after the KMAP enrollment date but before the contract effective date, the claim will be reimbursed at 90% of Medicaid rate. Effective date on the contract is generally 30 days from KMAP publish date (date sent to the MCO). Both the pharmacist and the pharmacy on the claim must be KMAP effective (enrolled with KMAP) before claims will pay. While we work through enrollments United Healthcare will reimburse pharmacists and pharmacies fully enrolled with KMAP at 100% Medicaid Rate for approved claims submitted prior to their contract activation.	Effective date for billing (100% Medicaid reimbursement) is the effective date on the contract. If a claim was billed after the KMAP enrollment date but before the contract effective date, the claim will be reimbursed at 90% of Medicaid rate. Effective date on the contract is generally 30 days from KMAP publish date (date sent to the MCO). Both the pharmacist and the pharmacy on the claim must be KMAP effective (enrolled with KMAP) before claims will pay.
What type of training is required post-contracting before you can bill a claim?	Pharmacy will receive an email from Provider Engagement Communications and Training Specialist Jenny Davis regarding required trainings. Trainings may include New Provider Orientation, Cultural Competency Training and or attestation that they have taken	Pharmacy will receive outreach from the provider advocate assigned to provider. They will assist with claim, billing, and any education/training issues. UHCCP of KS hosts a monthly UHC KanCare 101 that is also available to attend.	Pharmacy will receive an invite to schedule and attend a Provider Orientation to learn more about Healthy Blue, but there are no required trainings post-contracting in order to start billing.

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	external Cultural Competency Training.	Training on Microsoft Teams: KanCare UHC 101 the last Wednesday of every month 11:00 a.m. - Noon, Central Join on your computer or mobile app Call in (audio only): 1 952-222-7450 Phone Conference ID: 554 098 422	
Will the pharmacy be contacted for additional documents during the contracting process?	Potentially; Outreaches may be made to ensure documents are accurate (confirm W-9 DBA, expired licenses, expired certificate of insurance), verify other locations (multiple locations and NPIs), inform pharmacy that no pharmacist enrollment has been received. These questions could come from a contract negotiator, contract coordinator and or provider data specialist at Sunflower Health Plan. Sunflower will reach out via email with the request. CAQH is not required but can help speed up the process.	Potentially; Outreaches may be made to ensure documents are accurate (confirm W-9 DBA, expired licenses, expired certificate of insurance), or verify other locations (multiple locations and NPIs). These questions would come from the contact specialist that is assigned to establish the contract with the pharmacy. CAQH is not required but can help speed up the process.	Potentially; Outreaches may be made to ensure documents are accurate (confirm W-9 DBA, expired licenses, expired certificate of insurance), or verify other locations (multiple locations and NPIs). These questions would come from the credentialing team and/or contract specialist that is assigned to establish the contract with the pharmacy.
How should pharmacy bill the vaccine claim?	Pharmacy can find training withing our new provider orientation; pharmacy can also refer to the KMAP professional manual ; KMAP portal may be used but will delay payment. Sunflower MCO provider portal is preferable or electronic billing. We can connect the pharmacy with a Provider Representative regarding more detailed billing questions.	Please contact a UHC provider representative: uhckancare_providerrelations@uhc.com https://www.uhcprovider.com/content/dam/provider/docs/public/commplan/ks/resources/KS-UHCCP-Hospital-Advocate-Map.pdf	Claims must be billed directly to Healthy Blue on a professional claim. Reference (Immunizations Pg 18 of 36): KMAP Pharmacy Fee-For-Service Provider Manual
Who do I contact if I have questions	Please contact Sunflower provider representative:	Please contact a UHC provider representative:	Healthy Blue Provider Services - 833-838-2595 or your dedicated

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on billing? Is there a Provider portal?	https://www.sunflowerhealthplan.com/providers/resources/provider-relations-territory-map.html	uhckancare_providerrelations@uhc.com https://www.uhcprovider.com/content/dam/provider/docs/public/commplan/ks/resources/KS-UHCCP-Hospital-Advocate-Map.pdf	Healthy Blue Provider Relationship Account Consultant, Toi Tillmon. Email: toi.tillmon@healthybluekansas.com / Healthy Blue Website: Kansas Providers State & Federal Programs Healthy Blue
Where should we direct members for vaccines or other services if our pharmacy is not contracted with the MCO?	Please direct the member to call our member services number on their member ID card 1-877-644-4623 (TTY: 711)	Member Services Call 1-877-542-9238 (TTY 711)	Member Services at 833-838-2593