

Louisiana Department of Health Informational Bulletin 21-02

Revised June 15, 2023

Medicaid Managed Care Transportation Provider Issue Resolution

This bulletin outlines the options available to transportation providers for pursuing resolution of claims payment issues. Providers must first seek resolution with the transportation broker directly, prior to engaging managed care organizations (MCO), third parties, or the Louisiana Department of Health (LDH).

For issues related to transportation claims, contact:

Ctrl+Click logo to reach each broker's website	MedilRANS	☆ VERIDA (formerly Southeastrans)	Medi RANS	Medi RANS	Veyo	modiv care
MCO	Aetna Better Health of Louisiana	Amerihealth Caritas of Louisiana	Healthy Blue	Humana Healthy Horizons	Louisiana Healthcare Connections	United Healthcare Community Plan
CLAIM RESOLUTION						-
	By email:	By phone:	By email:	By email:	By phone:	By phone:
	Billing Department	470-819-4349	Billing Department	Billing Department	Shiva Nagalingam	Jennifer Baker
	Billing@MediTrans.com		Billing@MediTrans.com	Billing@MediTrans.com	504-344-4454	866-570-6143 Ext. 2001
		By email:				
		claimdispute@verida.com			By email:	By email:
					snagalingam@mtm-inc.net	Jennifer.Baker@modivcare.com
					By web:	By web:
					https://providersupport.veyo.com/	www.logisticare.com/provider-
					hc/en-	concerns
					us/requests/new?ticket form id=1	
					87746	

Transportation provider issue escalation and resolution – claim appeals:

	Medi RANS	☆ VERIDA (formerly Southeastrans)	MedilRANS	MedilRANS	Veyo	modiv care
CLAIM APPEAL						

Time Requirements	An appeal must be received from the provider within 180 calendar days of the Remittance Advice paid date or original denial date. A determination will made by the broker within 30 days of receipt.						
How to Submit	Request may be submitted in writing or through the web portal (if applicable).						
	By email:	By email:	By email:	By email:	By email:	By email:	
	Appeals@meditrans.com	<u>claimdispute@verida.com</u>	Appeals@meditrans.com	Appeals@meditrans.com	Amber Dalcourt, Vendor Account	phxopsspecialist@modivcare.com	
	By mail:	By mail:	By mail:	By mail:	Manager	By mail:	
	MediTrans	VERIDA, Inc	MediTrans	MediTrans	adalcourt@mtm-inc.net	Modivcare Solutions LLC – Claims	
	ATTN: Billing	ATTN: CFO	ATTN: Billing	ATTN: Billing	Divonne Wiliams, Vendor Account	2602 S 47th St, Ste 100	
	102 Asma Blvd. Suite 200	843 Dallas Hwy	102 Asma Blvd. STE 200	102 Asma Blvd. STE 200	Manager	Phoenix, AZ 85034	
	Lafayette, LA 70508	Villa Rica, GA 30180	Lafayette, LA 70508	Lafayette, LA 70508	divwilliams@mtm-inc.net	By web:	
	Escalations:	By web:	Escalations:	Escalations:	By mail:	http://www.logisticare.com/provid	
	Providers@meditrans.com	https://myverida.com/facilities-file-	Providers@meditrans.com	Providers@meditrans.com	Veyo	<u>er-concerns</u>	
	(Subject Line: Appeal Escalation)	a-complaint-form/	(Subject Line: Appeal Escalation)	(Subject Line: Appeal Escalation)	3016 19th Street		
					Metairie, LA 70002		
					By web:		
					https://providersupport.veyo.com/		
					hc/en-us/sections/360012351212-		
					<u>Louisiana</u>		

LDH and MCOs recognize there will be instances when a provider may desire to escalate issue resolution to the attention of LDH or the MCOs' executive teams. While the above chart is specific to claim issue resolution, the following options are available for resolution of all issue types, including claims. If a provider is unable to reach satisfactory resolution or get a timely response through the MCO escalation process, direct contact with LDH is also an option.

The following chart outlines provider complaint and escalation contacts for each MCO and LDH:

Ctrl+Click logo to reach each MCO's provider website	aetna: AETNA BETTER HEALTH® OF LOUISIANA	AmeriHealth Caritas Louisiana	Healthy Blue	Humana Healthy Horizons	louisiana healthcare connections	UnitedHealthcare® Community Plan
MCO ESCALATION						
Formal Complaint	By phone: 1-855-242-0802 By email: LAProvider@aetna.com By mail: Aetna Better Health of Louisiana 2400 Veterans Memorial Blvd. Suite 200 Kenner, LA 70062	By phone: 1-225-300-9112 By email: brobertson@amerihealthcaritasla.com By mail: AmeriHealth Caritas Louisiana PO Box 7323 London, KY 40742	By phone: 1-844-521-6942 or 1- 504-836-8888 By email: laprovidercomp@healthybluela.com By mail: Healthy Blue 10000 Perkins Rowe Suite G-510 Baton Rouge, LA 70810 By web: https://provider.healthybluela.com /docs/gpp/LA_CAID_ProviderCompl aintSubmissionForm.pdf?v=202208 181706	By phone: 800-448-3810 By email: humanahealthyhorizonslouisiana@ humana.com By mail: Humana Healthy Horizons 1 Galleria Blvd. Suite 1000 Metairie, LA 70001	By phone: 1-866-595-8133 By email: providercomplaints@louisianahealt hconnect.com By mail: Louisiana Healthcare Connections 8585 Archives Ave, Suite 310 Baton Rouge, LA 70809	By phone: 504-849-1567 By email: latransportation@uhc.com By mail: United Healthcare Community Plan 3838 N. Causeway Blvd. Suite 2600 Metairie, LA 70002
Management Level	Stella Joseph	Kyle Godfrey	Amber Earwood	Alicia Coleman	Candace Kliesch	Yolanda Hubbard
Contacts	Manager of Appeal and Grievance LAAppealsandGrievances@aetna.com	COO tgodfrey@amerihealthcaritasla.com	Program Director, Operations <u>Amber.Earwood@healthybluela.com</u>	Associate Director, Provider Contracting acoleman9@humana.com	Director of Operations <u>Candace.H.Kliesch@louisianahealth</u> <u>connect.com</u>	Operations Manager Yolanda M Hubbard@uhc.com Retresha Ambrose Operations Manager Retresha ambrose@uhc.com
Executive Level	Richard Born	Kyle Viator	Janel Gary	Tish Anderson	Joe Sullivan	Susan Mieras
Contacts	CEO <u>BornR@aetna.com</u>	CEO <u>kviator@amerihealthcaritasla.com</u>	COO <u>Janel.Gary@healthybluela.com</u>	COO <u>LAnderson55@humana.com</u>	COO Joe.M.Sullivan@louisianahealthcon nect.com	Director of Operations <u>Susan j Mieras@uhc.com</u>
LDH ESCALATION	If a provider is unable to reach satisfactory resolution or receive a timely response through the MCO escalation process, contact LDH using the information below.					
How to Submit	E-mail LDH at MedicaidTransportation@la.gov Always include details on attempts to resolve the issue at the MCO level, as well as contact information (contact name, provider name, e-mail and phone number) so that LDH staff can follow up with any questions.					

Independent Review

In conjunction with the above claim dispute grid, Independent Review is another option for resolution of claim disputes.

Ctrl+Click logo to reach each MCO's provider website	aetna aetna Betterhealth® Of Louisiana	AmeriHealth Caritas Louisiana	Wealthy Blue	Humana Healthy Horizons	louisiana healthcare connections.	UnitedHealthcare Community Plan	
INDEPENDENT REVIEW	Note: Per House Bi	ill No. 492 Act No. 349, an adverse det	The Independent Review process r ermination involved in litigation or arbi		aid enrollee shall not be eligible for i	ndependent review.	
	• The Independent Review process was established by La-RS 46:460.81, et seq. to resolve claims disputes when a provider believes an MCO has partially or totally denied claims incorrectly. An MCO's failure to send a provider a remittance advice or other written or electronic notice either partially or totally denying a claim within 60 days of the MCO's receipt of the claim is considered a claims denial.						
	• Independent Review is a two-step process which may be initiated by submitting an Independent Review Reconsideration Request Form to the MCO within 180 calendar days of the Remittance Advice paid, denial, or recoupment date. Request forms are available on MCO websites or at the link below.						
	• If a provider remains dissatisfied with the outcome of an Independent Review Reconsideration Request, the provider may submit an Independent Review Request Form to LDH within 60 calendar days of the MCO's decision. Request form available at the link below.						
	• Effective Jan. 1, 2018 there is a \$750 fee associated with an independent review request. If the independent reviewer decides in favor of the provider, the MCO is responsible for paying the fee. Conversely, if the independent reviewer finds in favor of the MCO, the provider is responsible for paying the fee.						
	SIU post-payment reviews are not considered claims denials or underpayment disputes, therefore, SIU findings are exempt from the Independent Review Process.						
	Additional detailed information and copies of above referenced forms are available at: http://ldh.la.gov/index.cfm/page/2982.						