SoonerCare policy is subject to change. The information included in this presentation is current as of June 2023. The most current information can be found on the OHCA public website at www.oklahoma.gov/ohca.
AGENDA

• Doula information
• Eligible providers
• Coverage and services
• Contracting with SoonerCare
• Secure provider portal
• Basic claims overview
• Resources
• Questions
DOULA BASICS

• A doula or birth worker is a trained professional who provides emotional, physical and informational support services during the prenatal, labor and delivery, and postpartum periods. Doulas are non-clinical and do not provide medical care.

• Services should not replace the services of other licensed and trained medical professionals including, but not limited to, physicians, physician’s assistants, advanced practice registered nurses, and certified nurse midwives.
ELIGIBLE PROVIDERS
PROVIDER REQUIREMENTS

Provider requirements:

• Must be 18 years of age.

• Must obtain and maintain a National Provider Identifier (NPI).

• Must use the taxonomy number required by the state.

Apply for a NPI
PROVIDER REQUIREMENTS (CONT.)

Certifications (must possess one of the following):

- Birth doula
- Postpartum doula
- Full-spectrum doula
- Community-based doula
Certifying organization:

- Must be certified by one of the state's recognized certifying organizations.

  ▪ The list can be found on our website at https://oklahoma.gov/ohca/doula.
COVERAGE
AND SERVICES
COVERED BENEFITS

• Prenatal/postpartum visits: There are a total of eight visits allowed for the member. The doula must work with the member to determine how best to utilize the benefit to meet the needs of the member.

• Labor and delivery: There is one visit allowed, regardless of the duration.
VISIT REQUIREMENTS

• The minimum visit length is 60 minutes.

• Visits must be face-to-face.

  ▪ Prenatal and postpartum visits may be conducted via telehealth.

  ▪ Labor and delivery services may not be conducted via telehealth.
SERVICE LOCATIONS

- Prenatal and postpartum: Doulas must coordinate directly with the member and their family to determine the most appropriate service location for prenatal and postpartum visits. Service locations may include the following:
  - Member’s place of residence
  - Doula’s office
  - Physician’s office
  - Hospital
  - In the community

- Labor and delivery services: There is no coverage for home birth.
REFERRAL REQUIREMENTS

• Doula services must be recommended by a physician or other licensed practitioner of the healing arts who is operating within the scope of their practice under state law. The following providers may recommend doula services:
  ▪ Obstetricians
  ▪ Certified nurse midwives
  ▪ Physicians
  ▪ Physician assistants
  ▪ Certified nurse practitioners

• The SoonerCare referral form must be completed and submitted, noting the recommendation for doula services. The form is located on the [Doula webpage](#).
PRIOR AUTHORIZATION

• A prior authorization is not required to access the standard doula benefit package.

• A prior authorization would be required if there is a need for additional visits beyond the eight prenatal/postpartum visits.
PRIOR AUTHORIZATIONS

Under the SoonerCare program, there are health care related goods and services that require prior authorization (PA) by OHCA.

- PA is a process to determine if an item or service is medically necessary.
- It is not a guarantee of member eligibility or of SoonerCare payment.

OHCA's Medical Authorization Unit web page provides PA guidelines for medical services, DME and supplies, therapy, and out-of-state services. The provider training page also provides training materials on PAs:

- Prior authorizations
MEDICAL RECORD REQUIREMENTS

• The medical record must include, but not be limited to:
  ▪ Date of service.
  ▪ Person to whom the services were rendered.
  ▪ Service start and stop time.
  ▪ Specific services performed by the doula on behalf of the member.
  ▪ Member/family response to the service.
  ▪ Any new needs identified during the service.
  ▪ Original signature of the doula, including their credentials.
COVERED PROCEDURES

- Prenatal Visit Billing Codes
  - 59899/HD - other maternity care and delivery procedure

- Labor & Delivery Care Billing Codes
  - 59409/HD - vaginal delivery only (with/out episiotomy and/or forceps)
  - 59514/HD - cesarean delivery only
  - 59612/HD - vaginal delivery after previous cesarean delivery
  - 59620/HD - cesarean delivery following vaginal delivery attempt after previous cesarean delivery
COVERED PROCEDURES

• Postpartum Visit Billing Codes
  ▪ 59899/HD - other maternity care and delivery procedure; or

• Prenatal and Labor and Delivery Care Diagnosis Codes
  ▪ Z32.2 - encounter for childbirth education

• Postpartum Diagnosis Codes
  ▪ Z32.3 - encounter for childcare instruction
CONTRACTING WITH SOONERCARE
NEW CONTRACTS

The SoonerCare provider enrollment application is found on the provider enrollment page by clicking the New Contracts link, or by visiting www.ohcaprovider.com/Enrollment/Site/Home/createuser.aspx.
Choose an individual contract if payments will report to your employer, or you are a sole proprietor and payments will report to your SSN or personal FEIN.
Choose a business contract if you are set up as a corporation (Inc., PC, PLLC, Partnership, LLC, etc.).
APPLICATION SUBMISSION

New provider contracts are processed by provider enrollment within 4-6 weeks of submission.

OHCA will acknowledge receipt of the application with an application tracking number (ATN). The ATN or SSN/FEIN may be used to check the status of the application here. See Global Message 8/4/20.

If the application is returned for corrections, email notifications will be sent to the enrollment contact submitted on the application.

- Initial email: the first notification that corrections are needed.
- Second email: sent 15 days after the initial email as a reminder.
- Expiration email: sent 30 days after the initial email as notification the contract is expired, and a new application is required.
Upon application approval, official contacts will receive:

- **Welcome letter** containing important contract information.
  - Provider ID
  - Primary taxonomy code
  - Zip +4
  - CN1 (if applicable)
  - Program
  - Effective date
  - Expiration date

- **PIN letter** containing secure provider portal login instructions.
OHCA’s SoonerCare provider portal is a secure website that offers several services for providers:

- Claim functions (submitting, editing, voiding) and status
- Eligibility verification
- Fee schedule search
- Find a provider
- Provider letters
- Prior authorization status and submission
- Remittance advice and other reports

www.ohcaprovider.com
Upon contract approval from OHCA, official contacts will receive a welcome letter containing important contract information and a PIN letter containing secure provider portal login instructions.

- Use your provider ID, service location and PIN to register on the portal.
Several helpful resources are available online for assistance navigating the secure provider portal:

- **OHCA Secure Provider Portal Functions** presentation
- **Update Provider Files** presentation
- **Register a Clerk** how-to video
- **Create Clerks** how-to video
- **Add Credential Agent** how-to video
- Provider training manual: **Medicaid on the Web**
- The **Provider Portal Access Form** is available for administrator account locks. See **Global Message 3/19/21** for more information.
BASIC CLAIMS
OVERVIEW
CLAIM SUBMISSION

Payment is made to practitioners for services clearly identifiable as personally rendered and performed on behalf of a patient (see OAC 317:30-5-1 policy on eligible providers). Claims for rendered services may be billed by:

• OHCA secure provider portal – direct data entry (DDE).
• ASC X12N 837 – electronic data interchange (EDI).

OHCA’s claim tools web page contains many resources to help providers successfully submit claims.

• Provider billing and procedures manual
• SoonerCare fee schedules
• Electronic Data Interchange information
CLAIM SUBMISSION VIA PORTAL

The provider training page offers training materials on submitting claims via the secure provider portal.

• 1500 Professional Claim Submission

Medicare Crossover Claims: Claims cross over from Medicare automatically based on the Medicare NPI on the SoonerCare provider file.

• If there is a failure, you may submit the claim on the provider portal or through your electronic submission source.
• Effective Feb. 1, 2017, paper crossover claims are no longer accepted.
TIMELY FILING

The timely filing limit for SoonerCare reimbursement is six months from the date of service.

OHCA policy on timely filing: OAC 317:30-3-11.

If a problem exists (such as pending eligibility determination), the provider must still file the claim within 183 days.

Claims received after the timely filing limit must have proof of timely filing attached.

Proof of timely filing (a denied claim can be proof) must reflect a claim that was received by OHCA within the timely filing limit:

- The full page from the remittance advice that includes the ICN, and all lines of service related to the claim.
- A copy of the portal screen that includes the ICN and line-item details.
- Date stamp on a paper claim returned by OHCA or Gainwell.
THIRD PARTY LIABILITY (TPL)

Third Party Liability, or TPL, refers to another party responsible for paying health care costs before SoonerCare pays.

- All available TPL resources must meet their legal obligation to pay claims first, as SoonerCare is the payer of last resort, with few exceptions:
  - Services provided at an I/T/U
  - Crime victim’s compensation

- Examples of TPL include:
  - Private health insurance and Tricare
  - Casualty insurance
  - Worker’s compensation
  - Estates and trusts
  - Tort proceeds
  - Medicare

- Visit OHCA’s Third Party Liability page for a list of TPL carriers.
TPL RESPONSIBILITIES

Federal regulations (42 CFR 447.20) prohibit providers from billing a member while a claim is pending adjudication.

× Providers cannot refuse service because the member has third party coverage.

× Providers cannot collect the copayment of the primary insurance if the member also has SoonerCare.

× Providers must write off any amount over the SoonerCare allowable.

A member can only be billed if:

• The service rendered is a non-covered service.
• The member does not adhere to all the rules of the primary insurance and SoonerCare.
OHCA PUBLIC WEBSITE

OHCA’s public website is the best source for current SoonerCare information: www.oklahoma.gov/ohca.

• A provider toolkit is available to help providers locate helpful information online more efficiently.

• Find service-specific information such as rules, manuals, prior authorization, forms and contracts for enrolling in the SoonerCare program and other important topics based on the services you provide on the provider types page.

• Policy and rules are available to review online.
PROVIDER ENROLLMENT

• Phone: 800-522-0114, option 5

• Hours: 8 a.m.-5 p.m. on Mon., Tue., Thu., Fri. 1-5 p.m. on Wed.

• Email: ProviderEnrollment@okhca.org

• Web: https://oklahoma.gov/ohca/providers/provider-enrollment.html
HELPFUL TELEPHONE NUMBERS

• OHCA Call Center:
  800-522-0114 or 405-522-6205, option 1

• Internet Help Desk:
  800-522-0114 or 405-522-6205, option 2, 1

• EDI Help Desk:
  800-522-0114 or 405-522-6205, option 2, 2
HELPFUL LINKS

• Agency Website:  
  www.oklahoma.gov/ohca
• OHCA Provider Portal:  
  www.ohcaprovider.com
• Provider Training:  
  www.oklahoma.gov/ohca/providers/provider-training
• Care Coordination Resources:  
  https://oklahoma.gov/ohca/providers/sooner-care-care-coordination-resources.html
• Provider Quick Reference Guide
• OHCA Resource Guide
TRAINING RESOURCES

• Provider education specialists:
  ▪ Education specialists provide education and training as needed for providers either virtually or telephonically.
  ▪ Requests for assistance should be emailed to: SoonerCareEducation@okhca.org. (Requests should include the provider's name and ID, contact information, and a brief description of what assistance is being sought.)
  ▪ For immediate claims or policy assistance, please contact the OHCA provider helpline at 800-522-0114.

• Monthly webinars
• How-to videos
QUESTIONS