



December 16, 2021

Subject: Wellcare By `Ohana Health Plan Partnership Begins 1/1/2022
What Every Provider Should Know About Wellcare By `Ohana Health Plan

Dear HDS Participating Provider,

Per previous communications, **beginning January 1, 2022**, coverage will begin for Wellcare By `Ohana Health Plan patients enrolled in a dental plan with HDS.

Wellcare By `Ohana Health Plan patients can have one of two plan types: **Medicare Advantage or Medicare Advantage - PPO (NEW!)**.

- **If you are already an HDS Medicare Advantage in-network provider**, no action is required, and you are all set to treat Wellcare By `Ohana Health Plan patients at all of your authorized service locations.
- **If you are not an HDS Medicare Advantage in-network provider**, please be on the lookout for patients enrolled in our new plan type called **Medicare Advantage - PPO**. Patients with this new plan type may see any licensed provider in the State of Hawaii and still receive benefits!

Please review the included **“What Every HDS Provider Should Know about Wellcare By `Ohana Health Plan”** for information on how to identify, submit claims, bill patients and more.

The chart below displays the two Wellcare By `Ohana plan types along with the patient’s benefits based on the HDS Network the provider belongs to.

Patient has Plan Type	HDS Networks (Provider belongs to)		Non-Par
	HDS Premier/PPO ONLY (aka Commercial)	HDS Medicare Advantage	Not-participating in any HDS Networks
Medicare Advantage	NO Benefits	Full Benefits (100%)	NO Benefits
Medicare Advantage - PPO	Reduced Benefits (30%)	Full Benefits (60% - 100%)	Reduced Benefits (30%, patient out-of-pocket may be the greatest)

Mahalo for your continued support and we wish you much success with your practice.

Sincerely,



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What *EVERY* HDS Provider Needs to Know About Wellcare By `Ohana Health Plan

Whether you are an **HDS Medicare Advantage (MA)** in-network provider or not, **Wellcare By `Ohana Health Plan** patients may end up in your practice. If the patient is enrolled in one of three new Medicare Advantage - PPO plans, they are allowed to go out-of-network and still receive benefits. This information is being provided to help you identify these patients, submit claims and bill appropriately.

WHAT'S NEW?

New Partnership

Effective Date: January 1, 2022

HDS has contracted with Wellcare By `Ohana Health Plan to offer Medicare Advantage dental plans that will cover approximately 12,000 patients across the islands.

New Plan Type

Medicare Advantage - PPO (for ALL licensed dentists in Hawaii)

In 2022, HDS will have four plan types that you may see associated with patients when viewing patient eligibility online:

1. HDS Premier (aka Commercial plans)
2. Medicare Advantage
3. Supplemental Medicaid
4. **Medicare Advantage - PPO - NEW!**

The new and fourth plan type called Medicare Advantage - PPO (MA - PPO) allows patients to go out-of-network to any licensed provider in the state of Hawaii.

This patient has a Medicare Advantage PPO plan and can see any licensed provider in the State of Hawaii. You do not have to be a Medicare Advantage network dentist for PPO benefits to be covered.

Primary Coverage	HAWAII DENTAL SERVICE		Plan Type: Medicare Advantage - HDS PPO	
WellCare 'Ohana				
Effective Date for Coordination of Benefits: 04/01/2021				
Relationship	Name	Group/Relation	Birthdate	Person ID
Subscriber	CABREROS, ROSPER	9050-7 G	11/29/1972	502074
Patient	CABREROS, ROSPER	Subscriber	11/29/1972	502074
Add Coverage		Add Medical Risk Factor		



Group Numbers

HDS Wellcare By `Ohana Health Plan is offering patients seven different dental plans. Four are Medicare Advantage and three are Medicare Advantage - PPO.

HDS Medicare Advantage	HDS Medicare Advantage - PPO
Group Numbers: 9050-1 A, 9050-2 B, 9050-3 C, 9050-4 D	Group Numbers: 9050-5 E, 9050-6 F, 9050-7 G
Patients must go to a Medicare Advantage in-network dentist to use their benefits.	Patients <u>can see any provider</u> in the state of Hawaii
Note: patients receive the best coverage when they see an MA in-network provider.	

Plan Benefits

To view plan benefits, go to HDS Online (HDSDentistPortal.com), scroll to the Medicare Advantage section in the Download Center to view the benefit summaries.

How to Identify Patients

- In addition to the Group Name (Wellcare `Ohana) that is visible online, patients will have two different network types: “Medicare Advantage” or “Medicare Advantage - PPO” included in their eligibility profile on HDS Online (hdsdentistportal.com).
- The online benefit display will be dynamic and will adjust based on the in-MA or out-of-MA network status of the selected provider.

Be sure to click the “Click here for benefits” notices (if applicable) that might appear in the benefit summary and use the benefit estimator and/or pre-authorizations for coverage estimates.



Fee Schedules and Payments

- **Medicare Advantage Providers** – Claims will be paid using the Medicare Advantage Fee Schedule.
- **HDS Premier/PPO Providers** (Non-Medicare Advantage Providers) – Claims for patients enrolled in PPO plans will be paid using the HDS Maximum Plan Allowance.
- **Additional Codes and Fees** – Wellcare By `Ohana Health Plan patients have added benefits, so be sure to view the “2022 Wellcare `Ohana Additional Codes and Fees” found in the Group Information section in the Download Center online (where your Implant and Enhanced Benefits Fees are found). Specialists, please contact Professional Relations for the fee schedule.
- **Claim Payments** – Will be included in your weekly HDS check or deposit.
- **Non-Par Providers** – For providers that are non-par with HDS, claims will be paid using the Non-Par Table of Allowance.

Claims and Pre-Authorizations

Claim Deadline:

HDS recommends you submit claims the same day treatment is completed or within 7 days at the latest; if you submit later than 7 days, be sure to adhere to the claim filing deadlines listed below.

- **Medicare Advantage Providers (180 Days):**
Claims for services rendered to Wellcare By `Ohana Health Plan members must be received by HDS with all required documents no later than 180 days from the date of service.
- **Non-Medicare Advantage Providers (12 Months)**
All claims must be received by HDS with all required documents no later than 12 months from the date of service.

Pre-Authorizations:**■ Medicare Advantage providers:**

Pre-authorizations and Benefit Estimates are not required; however, they are strongly recommended as financial agreements must be in place prior to providing or billing patients for non-covered services.

Claims Submission:

- Submit online - www.HDSDentistPortal.com
- Submit via HDS partner clearinghouses using Payor ID 99010
- Mail claims to:

Hawaii Dental Service
900 Fort Street Mall, Ste 1900
Honolulu, HI 96813-3705

GE Tax and Financial Agreements

- **Medicare Advantage Providers** – GE tax is not chargeable to the patient. As with all MA patients, a signed written financial agreement is required prior to providing and billing for non-covered services.
- **Non-Medicare Advantage Providers** – GE tax is chargeable to the patient if it is part of your normal practice.

No Provider Action Needed...

- If you are an HDS Medicare Advantage provider, MA patients can automatically use their benefits in your authorized service locations.
- If you are not an HDS Medicare Advantage provider, you do not have to take any action (unless you decide to become an MA provider). Patients with the MA - PPO plan type may receive benefits when treated in your practice. Claims for patients with the Medicare Advantage (non-PPO) plan type will continue to be denied.



HDS
Hawaii Dental Service



What Networks do you Belong to?

The HDS networks you belong to are displayed in the Provider Network(s) section (by treatment location) online.

HDS Online	
Patient Eligibility	Claim Status
E-Claims Batch Status	Fees
Inquiries	Log In
Log Out	Settings
Main Menu	

User:	
Clinic:	ALL CLINICS
Treating Dentist & Treatment Location:	JOHN DOE, 123 Aloha Hwy Ste 1000
Provider Network(s): HDS Premier/PPO, Medicare Advantage, Supplemental Medicaid	

Resource Information for Medicare Advantage Providers

As a Medicare Advantage provider, you must adhere to your Medicare Advantage Addendum and the Medicare Advantage Provider Manual. Both documents can be found online in the Download Center's Medicare Advantage section. You may also contact Professional Relations for a copy.

How to Contact Us

- **Customer Service:** 808-529-9248 or toll-free 1-844-379-4325
Email: CS@HawaiiDentalService.com
- **Professional Relations:** 808-529-9222 or toll-free 1-844-379-4324
Email: HDSProfessionalRelations@HawaiiDentalService.com

Please review the chart on the next page for summary of information.

The chart below displays information based on provider network status and patient plan type.

The chart below shows network and plan type scenarios for Wellcare By `Ohana Health Plan patients treated in your office				
Provider belongs to (Network):	Patient has Plan Type:	Will the patient be able to receive benefits?	Is GE tax collectible?	Claim filing deadline:
Medicare Advantage	Medicare Advantage	YES	NO	180 Days
Medicare Advantage	Medicare Advantage - PPO	YES	NO	180 Days
Premier/PPO Only	Medicare Advantage	NO	YES	12 Months
Premier/PPO Only	Medicare Advantage - PPO	YES	YES	12 Months