

Health care provider tip sheet for the MVP USA Care PPO[®] plan.

What Is USA Care PPO?

USA Care PPO from MVP Health Care is a Medicare Advantage PPO plan. USA Care PPO members are not restricted to a particular provider network. Direct provider contracts with MVP are not required with USA Care. Members are able to continue to see the providers they do today as long as the providers accept Medicare.

USA Care PPO members do not need referrals, and are free to obtain services from any provider in the U.S. who is eligible to be paid under Original Medicare. Some services require prior authorization. No referrals required.

Payment for Physicians, Hospitals, and Other Providers

The USA Care PPO plan reimburses Medicare providers at the Medicare rate, minus any member co-payments or co-insurance, for medically necessary services covered by the plan.

- Hospitals are paid using the Medicare Prospective Payment System.
- Physicians and other health professionals are paid based on the Medicare Fee Schedule.
- Hospital outpatient departments are paid using Medicare's service classification formula.
- Skilled nursing facilities are paid using Medicare's pre-determined daily rates.

Providers should collect only applicable co-payment or co-insurance amounts from USA Care PPO members. The Social Security Act Amendments of 1994 prohibit balance billing by providers who provide covered services to USA Care members. Since USA Care

PPO reimburses providers directly, there is no additional administrative burden of patient billing.

Claims Submission

Claims should be submitted using the standard CMS-1500 or the UB-04 forms. All Medicare billing guidelines must be followed when submitting claims.

Submit claims to USA Care at the address below. With USA Care there is no need for secondary billing. Do not submit claims for USA Care members to Medicare or a Medicare Supplement carrier. Send all claims to:

ATTN: CLAIMS SUBMISSION, MVP HEALTH CARE,
PO BOX 2207, SCHENECTADY NY 12301

Obtaining a Pre-Determination Review

USA Care PPO recommends hospitals or facilities to contact MVP for the following:

- Inpatient surgical admissions
- Acute rehabilitation admissions
- Inpatient mental health stays
- Inpatient substance abuse stays
- Level of care changes during the above stays
- Organ transplants
- Elective air transport

Pre-Determination Reviews are helpful to know whether the service is covered and what the cost-sharing responsibility will be.

Call **1-800-684-9286** to obtain a Pre-Determination Review. For more information, visit **mvphealthcare.com/usacare**.