
February 22, 2019

Passport Health Plan to pause construction on west Louisville headquarters amid fight with state
LOUISVILLE, Ky. (WDRB) – Passport Health Plan, the Medicaid provider in the Louisville area, on Friday said it would halt construction on its west Louisville headquarters building and health campus. The move escalates the nonprofit's fight with Gov. Matt Bevin's administration over rate cuts that Passport says will leave it insolvent within months if not reversed. The Medicaid managed care organization, which serves over 200,000 in the Louisville and over 300,000 in Kentucky, sued Bevin's Cabinet for Health & Family Services last week and is asking a judge for an immediate order to reverse the cuts. An initial hearing in the case is scheduled Tuesday morning. Passport, which rents office space in southern Jefferson County, announced in 2018 that it would relocate nearly 700 employees to a new building at 18 and Broadway, on vacant land that city leaders once hoped would become a Walmart. The building – part of a broader "health and well-being campus" planned on the 20-acre site – is under construction and had been set to open next year. "While we remain passionate about the continued revitalization of west Louisville and hope to play a significant role in those efforts in the future, we have no choice but to delay any further work on Passport's new headquarters building," Passport CEO Mark Carter said in a press release. "This greatly saddens me because of the promise it holds for a vital part of our community. But, our immediate priority is to preserve the future of our organization, for the more than 310,000 members we serve and our nearly 700 employees. [Read more](#)

Kentucky Health News - Lobbyists create tracking tables that make it easier to keep up with bills; legislature also offers free 'Bill Watch' service

As the 2019 General Assembly moves into the second half of its session, it can be easy to lose track of the many health-related bills, but a contract lobbying group has a bill tracker to make that easier. The **Government Strategies** tracking tables are broken down into several categories: education, energy/environment, general business, health care, health insurance, insurance and transportation. The bills are chosen by the lobbyists, so it's worth taking a look in every category. For example, **House Bill 11** and **Senate Bill 27**, the measures to make all schools tobacco-free, are in the "general business" category instead of health care or education. Each list links to the bill number, names the sponsor, offers a short summary of the bill, and records the last action, which is updated nightly. [Click here to see](#). Another way to track bills is to go to the **Kentucky General Assembly website** and click on "**Bills**." This will take you to a page where you can click on "**Bill Watch**," which will then require you to register in order to track the specific bills that interest you.

Verifying eligibility and benefits for Meritain Health members

Meritain Health is a subsidiary of Aetna and is one of the nation's largest administrators of health benefits. When you see a member's ID card, it will show the Meritain Health logo (their health care benefits administrator) and the logo of the network the member can use. This means their claims should be submitted electronically using the Meritain EDI information. Claims can also be mailed to the Meritain claims address on the member's ID card. Claims **should not** be submitted to Aetna. These are done directly by Meritain Health. Although Meritain Health is an Aetna-owned company, we do not administer benefits for these members. We cannot process claims or confirm eligibility. These are done directly by Meritain Health. Three ways to verify eligibility and benefits:

- Use Change Healthcare/Emdeon: ED# 41124
- Go to mertain.com—you'll need your NPI and TIN to register the first time.
- Call Meritain's Provider Relations team at the number on the back of the member's ID card

6th Annual Medicaid Roundtable April 10

GLMS will be hosting the 2019 Medicaid Roundtable on Wednesday, April 10 at 7:30 a.m. at the Foundation for a Healthy Kentucky with representatives from Aetna Better Health, Anthem Medicaid, Humana CareSource, Passport Health Plan, WellCare and the Kentucky Department for Medicaid Services. The purpose of this meeting is to promote ongoing communication and exchange of information between practices and payers. Panelists and other payer representatives will be available immediately following the meeting to talk with attendees individually on specific issues. To prepare for an effective meeting and give panelists the ability to research issues and prepare responses, we need your help collecting issues and topics for discussion before the meeting. Submit your question/issue here. [Click here to report an issue or topic for discussion](#) by Wed, March 27.

