

The GLMS Physician Education and Practice Support Department sends Weekly Hassle Updates via email to keep other members informed of issues being reported to GLMS and items of interest to physician practices. If you are experiencing these, or any other issues, please contact physician.education@glms.org.

July 6. 2017

Changes to Passport Medicaid Claims Payment System and Provider Portal Effective October 1, 2017

Passport Health Plan (Passport) launched the Medicaid Center of Excellence in 2016 with its strategic partner Evolent Health. As a part of this continuous improvement toward value-based care in the delivery of Medicaid, Passport is making operational changes to enhance your experience with them. Beginning October 1, 2017, Passport will have a new claims payment system and provider portal.

No immediate action is required of you. In the coming weeks, however, you should expect additional communications from Passport. They will provide more information about the payment system migration, your new Passport provider ID, new address and/or payer ID for claims submissions, provider portal training opportunities and more. Claims submissions for Medicaid behavioral health, dental, vision and pharmacy services as well as Passport Advantage (Medicare) will not change.

Passport's provider portal will also be changing. This provider portal account will allow you to check member eligibility, claims status, etc.

Individual Health Insurance Plans Offered by Only Two Companies in 2018

Kentucky Health News is reporting that Kentucky will be down to two participating health plan insurers in 2018: **Anthem Health Plans of Kentucky, Inc.** and **CareSource Kentucky Co.** Anthem will be the only insurer offering individual plans statewide and CareSource will offer exchange plans in 61 counties – leaving 54 of the state's 120 counties with only one insurer.

The two companies are requesting rate increases averaging 27.5 percent; Anthem requested an increase of 34.1 percent for its 2018 individual polices and CareSource requested an increase of 20.8 percent. The rate requests reflect a base rate that will fluctuate with individual consumers based on their age, whether they smoke and where they live. Insurers offering small-group plans are asking for average hikes of almost 10 percent. Kentucky had 81,155 people enroll in coverage through its exchange during the 2017 open enrollment period. Open enrollment in **HealthCare.gov** for plan year 2018 begins November 1. The state Department of Insurance notes that all rates are subject to change and will be finalized by August

New Comment Period for 1115 Medicaid Waiver Modifications ends August 2

A new 30-day comment period is in progress regarding Kentucky's 1115 Medicaid Waiver Modifications. Kentucky Voices for Health encourages all healthcare providers, Medicaid members, and other stakeholders to examine the proposed changes and to express any questions or concerns through the following channels:

- Read the public notice and summary of proposed modifications.
- Submit comments by August 2nd at 11:59 PM to kyhealth@ky.gov.
- Copy Kentucky Health News at kymedicaidchanges@gmail.com, if you want your comments to be shared with the public
- Attend a public hearing and testify July 14th in Somerset or July 17th, 10am-12pm ET, at the Capitol Annex: 702 Capital Ave, Frankfort