

HealthPartners Products for Minnesota State Public Programs

State Public Programs Product Information Index

Contents

❖ HealthPartners Care (HP-Care) plans	3
• Prepaid Medical Assistance Programs (PMAP).....	3
• MinnesotaCare (MNCare).....	3
• Minnesota Senior Care Plus (MSC+).....	3
❖ HealthPartners Inspire (SNBC) plan	4
❖ HealthPartners Minnesota Senior Health Options (MSHO) plan.....	5
• HealthPartners MSHO plan service area	5
• Medicare prescription drug coverage (Part D drug coverage)	5
• MSHO supplemental benefits 2017.....	6
❖ Product names with group number and medical package codes	7
❖ Spoken language interpreter services.....	9
❖ Sample insurance cards.....	10
• Insurance card identifies State Public Program member	10
❖ Pharmacy / Formulary	11
❖ Noncovered services	12
• Public programs products may require referrals for claims payment.....	12
❖ Important phone numbers	14
❖ Link to MSHO Training Manual - Model of Care	

HealthPartners Families' and Children's Medicaid Plans

The HealthPartners Care plans provide care to recipients of Prepaid Medical Assistance Programs (PMAP), MinnesotaCare Programs (MNCare), and Minnesota Senior Care Plus (MSC+). HealthPartners Care members do not have a Primary Care Clinic designation with the exception of a restricted recipient. No referrals are needed for HealthPartners Care network healthcare providers, specialists and hospitals.

MHCP medical coverage policies apply and are found on the [Provider Portal](#).

HealthPartners Care service area

HealthPartners Care service area varies by product. See specific service area under each product.

Prepaid Medical Assistance Programs (PMAP)

The benefits are based on the Medical Assistance (MA) benefit packages. PMAP covers health care for the following people who have Medical Assistance:

- Children under the age of 21
- Parents and caretakers of a dependent child
- Pregnant women
- Certain low-income adults without a dependent child

HealthPartners service area for PMAP members includes: Aitkin, Anoka, Becker, Benton, Carlton, Carver, Cass, Chisago, Clay, Cook, Crow Wing, Dakota, Hennepin, Kittson, Koochiching, Lake, Mahnommen, Marshall, Mille Lacs, Norman, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Roseau, St. Louis, Scott, Sherburne, Stearns, Washington, Wilkin and Wright counties.

MinnesotaCare (MNCare)

MinnesotaCare is a managed care plan for recipients who do not have access to affordable health care coverage. Some members may be required to pay a premium to the State.

HealthPartners service area for MNCare members includes: Aitkin, Anoka, Becker, Benton, Carlton, Carver, Cass, Chisago, Clay, Cook, Crow Wing, Dakota, Hennepin, Kittson, Koochiching, Lake, Mahnommen, Marshall, Mille Lacs, Norman, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Roseau, St. Louis, Scott, Sherburne, Stearns, Washington, Wilkin and Wright counties.

Minnesota Senior Care Plus (MSC+)

MSC+ is for members age 65 or older who qualify for Medical Assistance. They may also have fee-for-service Medicare. The health care benefits are similar to PMAP coverage with the addition of Elderly Waiver Services and Nursing Facility services for those who are assessed as eligible for those services.

Some MSC+ members have a care coordinator. The care coordinator will perform an initial assessment of the member within 30 days of enrollment and annually thereafter. Following the assessment, the care coordinator will develop a personalized care plan. The care coordinator will support the member through different settings of care and update the member's care plan to accommodate the member's changing needs.

HealthPartners service area for MSC+ members includes: Anoka, Benton, Carver, Chisago, Dakota, Hennepin, Ramsey, Scott, Sherburne, Stearns, Washington and Wright counties.

HealthPartners Inspire (SNBC) plan

The HealthPartners Inspire (SNBC) Plan covers people with disabilities who are ages 18 through 64 and have Medical Assistance. Inspire members do not have a Primary Care Clinic designation with the exception of a restricted recipient. No referrals are needed for HealthPartners Care network healthcare providers, specialists and hospitals. Refer to Member Services for questions about benefits.

Each member has a care coordinator. The care coordinator will perform an initial assessment of the member within 30 days of enrollment and annually thereafter. The care coordinator will work with the member to develop a personalized care plan based on the member's needs. The care coordinator will support the member through different settings of care and update the member's care plan to accommodate the member's changing needs.

HealthPartners Inspire (SNBC) service area

HealthPartners Inspire service area includes: Aitkin, Anoka, Becker, Benton, Carlton, Carver, Cass, Chisago, Clay, Cook, Crow Wing, Dakota, Hennepin, Kittson, Koochiching, Lake, Mahnomen, Marshall, Mille Lacs, Norman, Otter Tail, Pennington, Pine, Polk, Ramsey, Red Lake, Roseau, St. Louis, Scott, Sherburne, Stearns, Washington, Wilkin and Wright counties.

HealthPartners Minnesota Senior Health Options (MSHO) plan

HealthPartners MSHO Plan covers health care services for people who are ages 65 and over, have Medical Assistance, and both Medicare Parts A and B. MSHO integrates primary, acute, and long-term care and Medicaid and Medicare services, including Part D, through managed care for seniors. HealthPartners MSHO coordinates Elderly Waiver services for members who meet eligibility criteria set forth by the Department of Human Services. The MSHO Plan is Primary Care Clinic based and not all contracted providers will be in-network for these members. Referrals to specialty providers may be required.

MSHO benefits include all Medicare and Medicaid services including Elderly Waiver services as needed and nursing home care. Elderly Waiver services include assisted living, adult day care, home modifications, chore services, home delivered meals and others.

One of the most attractive benefits of the MSHO plan is each member has a care coordinator. The care coordinator will perform an initial assessment of the member within 30 days of enrollment and annually thereafter. Following the assessment, the care coordinator will develop a personalized care plan. The care coordinator will support the member through different settings of care and update the member's care plan to accommodate the member's changing needs.

HealthPartners MSHO plan service area

HealthPartners MSHO plan's service area includes the following counties: Anoka, Benton, Carver, Chisago, Dakota, Hennepin, Ramsey, Scott, Sherburne, Stearns, Washington and Wright.

Medicare prescription drug coverage (Part D drug coverage)

HealthPartners MSHO Plan combines Medicare, Medicaid and Part D prescription drug coverage all in one plan. In addition, HealthPartners MSHO Plan covers some other drug classes and over the counter medications that are not covered by Medicare. A member's level of Extra Help they receive may impact their copays for prescription drugs. HealthPartners MSHO Plan benefits, list of covered drugs, pharmacies, and copays may change throughout the year and on January 1 of each year.

MSHO supplemental benefits 2019

The MSHO plan provides comprehensive coverage for all seniors covered by Medicare and Medical Assistance. HealthPartners also offers supplemental benefits to MSHO members. These benefits may change each year.

The MSHO supplemental benefits for 2019 are as follows:

Dental

- Adult fluoride
- Second annual Periodic exams
- Periodontal maintenance
- Scaling and root planning
- Root canals on molars
- Denture services - Tissue conditioning
- Porcelain crowns, up to \$2,500

Health and wellness programs and items

- s
- Health education classes
 - Healthy Aging
 - PowerUp Cooking
- Silver&Fit Exercise & Healthy Aging Program – fitness center membership or two home fitness kits
- Tablet for members with diabetes, heart disease or depression
- Transportation to/from supplemental benefit-covered services and Alcoholics Anonymous or Narcotics Anonymous meetings
- Weight management program

Other

- Foot care visits
- Night light
- Personal Emergency Response System (PERS) *provided to members who do not qualify under elderly waiver for lifeline.
- virtuwel™



Product names with group number and medical package codes

State Public Program Members	Group Number	Medical Package Code
MA Kids & Pregnant Women No Copay	4183	HP2
MA Adults with Copay	4183	HPC2
MA Adults No Copays	4183	HPD2
MA Adults Copay Max (0)	4183	HPC4
MA Adult Copay Max (1-11)	4183	HPC4D
MA Adult Copay Max (12-110)	4183	HPC4A
MA Adults - Medicaid Expansion with Copay	4183	HP25
MA Adults - Medicaid Expansion No Copay	4183	HP26
MA Adults - Medicaid Expansion Copay Max (0)	4183	HP27
MA Adult – Medicaid Expansion Copay Max (1-11)	4183	HP27D
MA Adults - Medicaid Expansion Copay Max (12-110)	4183	HP27A
MA Adult <65 FFS Medicare (AB) with Copay	4183	HPMC2
MA Adult <65 FFS Medicare (AB) No Copay	4183	HPM2
MA Adult <65 FFS Medicare (AB) Copay Max (0)	4183	HPMC4
MA Adult <65 FFS Medicare (AB) Copay Max (1-11)	4183	HMC4D
MA Adult <65 FFS Medicare (AB) Copay Max (12-110)	4183	HMC4A
MA < 65 with FFS Medicare (A no B) with Copay	4183	HPMC6
MA < 65 with FFS Medicare (A no B) No Copay	4183	HPM2A
MA < 65 with FFS Medicare (A no B) with Copay Max (0)	4183	HPMC7
MA < 65 with FFS Medicare (A no B) with Copay Max (1-11)	4183	HMC4F
MA < 65 with FFS Medicare (A no B) with Copay Max (12-110)	4183	HMC4E
MSC+ NHC (Medicare AB) with Copay		
MSC+ NHC (Medicare AB) with Copay	4184	GSP01
MSC+ NHC (Medicare AB) Copays Max (0)	4184	GSP16
MSC+NHC (Medicare AB) Copays Max (1-11)	4184	GSP50
MSC+ NHC (Medicare AB) Copays Max (12-110)	4184	GSP26
MSC+ Institutional (Medicare AB) No copay	4184	GSP03
MSC+ Non-NHC (Medicare AB) with Copay	4184	GSP02
MSC+ Non-NHC (Medicare AB) Copays Max (0)	4184	GSP17
MSC+ Non-NHC (Medicare AB) Copays Max (1-11)	4184	GSP51
MSC+ Non-NHC (Medicare AB) Copays Max (12-110)	4184	GSP29
MSC+ NHC (Medicare B no A)		
MSC+ NHC (Medicare B no A)	4186	GSP04
MSC+ NHC (Medicare B no A) Copays Max (0)	4186	GSP18
MSC+ NHC (Medicare B no A) Copays Max (1-11)	4186	GSP52
MSC+ NHC (Medicare B no A) Copays Max (12-110)	4186	GSP32
MSC+ Institutional (Medicare B no A) No Copay	4186	GSP06
MSC+ Non-NHC (Medicare B no A) with Copay	4186	GSP05
MSC+ Non-NHC (Medicare B no A) Copays Max (0)	4186	GSP19
MSC+ Non-NHC (Medicare B no A) Copays Max (1-11)	4186	GSP53
MSC+ Non-NHC (Medicare B no A) Copays Max (1-6)	4186	GSP35



State Public Program Members	Group Number	Medical Package Code
MSC+ NHC (Medicare A no B) with Copay	4187	GSP07
MSC+ NHC (Medicare A no B) Copays Max (0)	4187	GSP20
MSC+ NHC (Medicare A no B) Copays Max (1-11)	4187	GSP54
MSC+ NHC (Medicare A no B) Copays Max (12-110)	4187	GSP38
MSC+ Institutional (Medicare A no B) No Copay	4187	GSP09
MSC+ Non-NHC (Medicare A no B) with copay	4187	GSP08
MSC+ Non-NHC (Medicare A no B) Copays Max (0)	4187	GSP21
MSC+ Non-NHC (Medicare A no B) Copays Max (1-11)	4187	GSP55
MSC+ Non-NHC (Medicare A no B) Copays Max (12-110)	4187	GSP41
MSC+ NHC (No Medicare) with Copay	4188	GSP10
MSC+ NHC (No Medicare) Copays Max (0)	4188	GSP22
MSC+ NHC (No Medicare) Copays Max (1-11)	4188	GSP56
MSC+ NHC (No Medicare) Copays Max (12-110)	4188	GSP44
MSC+ Institutional (No Medicare) No Copay	4188	GSP12
MSC+ Non-NHC (No Medicare) with Copay	4188	GSP11
MSC+ Non-NHC (No Medicare) Copays Max (0)	4188	GSP23
MSC+ Non-NHC (No Medicare) Copays Max (1-11)	4188	GSP57
MSC+ Non-NHC (No Medicare) Copays Max (12-110)	4188	GSP47
SNBC Medicare Community with Waiver-Adults	4180	HP260
SNBC Medicare Community with Waiver-Kids & Pregnant Women	4180	HP261
SNBC Medicare Community no Waiver-Adults	4180	HP262
SNBC Medicare Community no Waiver-Kids & Pregnant Women	4180	HP263
SNBC Medicare Institutional-Adults	4180	HP264
SNBC Medicare Institutional-Kids & Pregnant Women	4180	HP265
SNBC no Medicare Community with Waiver-Adults	4180	HP266
SNBC no Medicare Community with Waiver-Kids & Pregnant Women	4180	HP267
SNBC no Medicare Community no Waiver-Adults	4180	HP268
SNBC no Medicare Community no Waiver-Kids & Pregnant Women	4180	HP269
SNBC no Medicare Institutional-Adults	4180	HP270
SNBC no Medicare Institutional-Kids & Pregnant Women	4180	HP271
MSHO Community Non-Nursing Home Certifiable	4182	GPM07
MSHO Community Nursing Home Certifiable	4182	GPM08
MSHO Institutional	4182	GPM09
MSHO Community Non-Nursing Home Certifiable With Hospice	4182	GPH07
MSHO Community Nursing Home Certifiable - With Hospice	4182	GPH08
Minnesota Care Adult (Non-Parents) FFP	4190	HP24A
Minnesota Care Adult (Non-Parents) No Copay - American Indian	4190	HP24B
Minnesota Care Adult (Parents)	4190	HP1
Minnesota Care Adult (Parents) No Copay-American Indian	4190	HP1A
Minnesota Care Child	4190	HP8
Minnesota Care Members Age 1920	4190	HP8A



Spoken language interpreter services

Information for HealthPartners Care, HealthPartners Inspire and HealthPartners MSHO

Members may use the following spoken language interpreter services:

Kim Tong Translation Service

2994 Rice St.
Little Canada, MN 55113
Phone: 651-252-3200
Fax: 651-252-3214
24-Hour Service
Face to face and phone interpretation
Website: kttsmn.com

Itasca Corporation

1549 Livingston Ave
Suite 102
West St. Paul, MN 55118
Phone: 651-457-7400
Fax: 651-457-7700
Website: itascacorp.biz

The Bridge World Language Center, Inc.

110 2nd St S Ste 213
Waite Park, MN 56387
Phone: 320-259-9239
Fax: 320-654-1698
Website: bridgelanguage.com

Intelligere, Inc.

10000 Hwy 55 Ste 400
Plymouth MN 55441
Phone: 952-920-6160
Fax: 952-922-8150
24-Hour Service
Website: intelligeresolutions.com

The Language Banc

1625 Park Ave
Minneapolis, MN 55404
Phone: 612-588-9410
Fax: 612-588-9420
24-Hour Service
Website: thelanguagebanc.com

Arch Language

1885 University Avenue West, Suite 75
Saint Paul, MN 55104
Phone: 651-789-7897
Fax: 651-789-7898
24-Hour Service
Website: ArchLanguage.com

The Minnesota Language Connection, Inc.

1327 County Road D Circle East
Saint Paul, MN 55109
Phone: 651-644-7100
Fax: 651-644-7600
24-Hour Service
Website: minnesotalanguageconnection.com

All In One – Translation Agency, LLC

201 West Burnsville Pkwy Ste 108
Burnsville, MN 55337
Phone: 952-435-0799
Website: allin1translation.com

To arrange for these services, please work directly with the interpreter agency or contact HealthPartners Member Services with any questions at **952-967-7998**.

More information on [interpreter services](#) can be found under the administrative policies on the Provider Portal at healthpartners.com/provider.



Sample insurance cards

Insurance card identifies State Public Program member

Member card:

- The member’s identification number, name and PMI number appear at the top of the card.
- Under the member name is “Care Type” which shows the member’s product. For MSHO, it reads “HealthPartners – MSHO (HMO SNP).”
- Copays appear in the middle section of the card.
- For MSHO, the member’s clinic number and clinic name appear next to “Medical” and “Dental” on the bottom of the card.

HealthPartners®

ID	12345678	Group 4184	Renewal Mo.
Name	JANE A DOE		January
Care Type	HealthPartners Care		PMI####

HealthPartners

Office	\$0.00	
RxBIN 017142 RxPCN MNPROD1	See Contract	
RxGrp HMN07		
ER	\$0.00	
Urgent	\$0.00	
Deductible	\$0.00	

Emergency & Urgently Needed Care
 For emergency situations, call 911 and/or get medical attention immediately. For medical advice call the CareLineSM nurse service any time at 612-339-3663 or 800-551-0859.

Hospital Admissions Contact CareCheckSM at 866-275-8555 for any admission at an out-of-network hospital or facility.

Claims Submission
 Medical: HealthPartners Claims, P.O. Box 1289, Minneapolis, MN 55440-1289
 Dental: HealthPartners Dental Claims, P.O. Box 1172, Minneapolis, MN 55440-1172.

Member Services Call HealthPartners Member Services at 952-967-7998; 866-885-8880; or TTY/TTD (for hearing impaired only): 952-883-6060; 800-443-0156. Or write to P.O. Box 9463, Minneapolis, MN 55440-9463. To schedule a ride to a medical appointment, call **RideCare**: 952-883-7400 or 888-288-1439.

To file a State Fair Hearing, please send your request to: Appeals Office/Department of Human Services, PO Box 64941, St. Paul, MN 55164-0941. Or, fax your request to: 651-431-7523. A State Ombudsman may be able to help you with your problem. They can also help you request a State Fair Hearing. You may call them at 651-431-2660 or toll free at 1-800-657-3729.

healthpartners.com Offered by HealthPartners

HealthPartners®

Plan (80840)	ID	12345678	Group 4182	Renewal Mo.
	Name	JANE A SAMPLE		January
	Care Type	HealthPartners MSHO HMO SNP		PMI####

Office	\$0.00	Prescription Drug Plan
RxBIN 015574 RxPCN MNPROD1	See Contract	
RxGrp HMN01		
ER	\$0.00	
Urgent	\$0.00	

Medical	PCP Code ABC	PCP or Network ABC MEDICAL CLINIC	CMS - H2422####
----------------	---------------------	--	------------------------

MS-ID Card GP051061 **MedicareRx**

Emergency & Urgently Needed Care
 For emergency situations, call 911 and/or get medical attention immediately. For medical advice call the CareLineSM nurse service any time at 612-339-3663 or 800-551-0859 or call your clinic at ###-###-####.

Hospital Admissions Contact CareCheckSM at 866-275-8555 for any admission at an out-of-network hospital or facility.

Claims Submission
 Medical: HealthPartners Claims, P.O. Box 1289, Minneapolis, MN 55440-1289
 Dental: HealthPartners Dental Claims, P.O. Box 1172, Minneapolis, MN 55440-1172.

Member Services Call HealthPartners Member Services at 952-967-7029 or 888-820-4285 or TTY/TTD (for hearing impaired only): 952-883-6060; 800-443-0156. Or write to P.O. Box 9463, Minneapolis, MN 55440-9463. To schedule a ride to a medical appointment, call **RideCare**: 952-883-7400 or 888-288-1439.

To file a State Fair Hearing, please send your request to: Appeals Office/Department of Human Services, PO Box 64941, St. Paul, MN 55164-0941. Or, fax your request to: 651-431-7523. A State Ombudsman may be able to help you with your problem. They can also help you request a State Fair Hearing. You may call them at 651-431-2660 or toll free at 1-800-657-3729.

healthpartners.com Offered by HealthPartners

HealthPartners®	
ID	<99999999> Group 4180 Renewal Mo.
Name	<JANE F DOE> January
Care Type	HealthPartners Inspire (SNBC) PMI000000
	Dental Pkg: PC07A
Office	\$0.00
Rx BIN 017142 RxPCN MNPROD1	See Contract
RxGrp HMN07	
ER	\$0.00
Urgent	\$0.00
Deductible	\$0.00

Emergency & Urgently Needed Care

07/2016

For emergency situations, call 911 and/or get medical attention immediately. For medical advice call the CareLineSM nurse service any time at 612-339-3663 or 800-551-0859 or call your clinic.

Hospital Admissions Contact CareCheckSM at 1-866-275-8555 for any admission not directed by a network physician.

Claims Submission

Medical: HealthPartners Claims, P.O. Box 1289, Minneapolis, MN 55440-1289
Dental: HealthPartners Dental Claims, P.O. Box 1172, Minneapolis, MN 55440-1172.

Member Services Call HealthPartners Member Services at **952-967-7998; 866-885-8880;** or TTY/TTD (for hearing impaired only): 952-883-6060; 800-443-0156. Or write to P.O. Box 9463, Minneapolis, MN 55440-9463. To schedule a ride to a medical appointment, call

RideCare: 952-883-7400 or 888-288-1439.

To file a State Fair Hearing, please send your request to: Appeals Office/Department of Human Services, PO Box 64941, St. Paul, MN 55164-0941. Or, fax your request to: 651-431-7523. A State Ombudsman may be able to help you with your problem. They can also help you request a State Fair Hearing. You may call them at 651-431-2660 or toll free at 1-800-657-3729.

healthpartners.com

Offered by HealthPartners

Member Eligibility

Please verify member eligibility EVERY month!

Electronic claim transactions for Minnesota Health Care Programs (MHCP) are accepted through MN-ITS *Interactive* or MN-ITS *Batch*. Claims sent through ITS or NSF will no longer be accepted.

Verify recipient eligibility through MN-ITS or by calling EVS at (651) 431-4399 or 1-800-657-3613.

Learn more about MN-ITS and register online at mn-its.dhs.state.mn.us.

Minnesota Restricted Recipient Program (MRRP) designated provider information will be listed on the MN-ITS website. The eligibility portal will indicate the member is restricted.

Pharmacy / Formulary

The HealthPartners formulary should be used when writing prescriptions. In addition, all classes of drugs on the Medical Assistance formulary are covered. Many over-the-counter drugs are also covered as long as they are prescribed by a plan physician and obtained at a plan pharmacy.

A preferred drug list was launched for members on HealthPartners Medicaid plans. The drug list provides any rules or restrictions that may apply to a specific drug, such as prior authorization requirement or a limit on the amount a member is able to receive. For the most up-to-date drug list, **HealthPartners Care, HealthPartners Inspire (SNBC) and MSHO formularies can be accessed on the HealthPartners website.**

Noncovered services

A provider may bill HealthPartners Care members for non-covered services only if:

- 1) The Provider notified the member in writing of the member liability for non-covered services using the State-approved waiver form; and,
- 2) Prior to performance of the service, the provider receives written authorization from the member for the non-covered services.

The agreement should include information specific to the date, the estimated cost of the service and the service to be delivered. A provider cannot bill members for missing scheduled appointments.

Public programs products may require referrals for claims payment

HealthPartners MSHO Plan is primary clinic-based and may require referrals. Providers are encouraged to check eligibility and call Member Services to verify if referrals are required. Eligibility may be checked on the Provider Portal at healthpartners.com/provider. After logging in, select “Eligibility” from the drop down menu under the heading Applications.

The preferred method for referral submission is online through the Provider Portal using the Referral Maintenance Application at healthpartners.com/provider. After logging in, select Referral Inquiry or Referral Maintenance to create, update, view and retrieve/answer Referral Authorization Inquiries (RAIs). A referral can also be made by completing a *Provider Recommendation Form* (found in the Claims Section of this manual) and faxing or mailing it to the Claims department.

An RAI is generated when a member assigned to a primary clinic product receives services outside of the primary clinic’s specialty referral network. The member may or may not have been directed by the primary care clinic care system; however, it is important for primary care providers to respond to these RAIs indicating if the care was referred by the primary clinic care system or not. The RAI response is needed so the outstanding claim can be processed appropriately. RAI notifications are sent to primary care providers via the Provider Portal. There is no indicator on the portal that an RAI has been sent when you log on, so it is important to check your work queues regularly to view and respond to RAIs.

Please note: The current policies and procedures remain in effect and in place regarding prior authorization or Recommendation For Further Services for the HealthPartners Transplant Centers of Excellence, HealthPartners Direct Access Mental Health Network, HealthPartners Referral Mental Health Network, the WLS (Weight Loss Surgery) Designated Network, Low Back Pain or other designated networks.

HealthPartners Care members may self-refer to the following providers:

- Members may self-refer to any provider for family planning services
- Tribal Health Clinics

Members can learn about the providers in these plan-wide networks in several ways:

- Visit healthpartners.com to view a list of providers.
- Review the provider directory that was mailed to them in their enrollment packet.
- Call Member Services to ask about a particular provider.



Public programs products may require prior authorization for certain services

HealthPartners may require prior authorization for certain services or items. For each healthcare service or item that requires a prior authorization, there are documented review criteria in place that have been developed or adopted by HealthPartners and reviewed by physicians from appropriate specialty areas. All review criteria are available to the provider and member upon request free of charge. Emergency services do not require prior authorization.

Coverage criteria requirements may be checked on the Provider Portal at healthpartners.com/provider. Click on Admin Tools heading and then select **Coverage criteria** from the list of options in the menu.

Important phone numbers



Where to call for assistance

HealthPartners Member Services (HPCare, SNBC, MSHO):

HealthPartners Care and Inspire main number: **952-967-7998 or 1-866-885-8880**

MSHO main number: **952-967-7029 or 1-888-820-4285**

Fax: 952-883-7333 or 952-883-7666

TTY: 952-883-6060 or 1-800-443-0156

Claims Helpline: 952-883-7699 or 888-663-6464

RideCare: 952-883-7400 or 888-288-1439
(PMAP, MSC+, MSHO, SNBC)

CareLine: 612-339-3663 or 800-551-0859
(Providers only: 952-883-5883)

Medical Management:

Prior authorization for services/procedures: 952-883-6333 or 888-467-0774

Outpatient Case Management: 952-883-6983 or 877-499-7888

Fax: 952-853-8745

Inpatient Case Management: 952-883-6277 or 877-499-7888

Fax: 952- 853 8748