



Provider Alert

IMPORTANT UPDATE:

Effective January 1, 2010,
Care Improvement Plus will only coordinate benefits
with Texas State Medicaid for members in our
Dual Special Needs Plan

We remain committed to coordinating Texas State Medicaid benefits for our QMB, QMB+ or SLMB+ members enrolled in our NEW Dual Special Needs plan (DSNP), the Dual Advantage Plan.

However, effective January 1, 2010, Care Improvement Plus will no longer be responsible for coordinating Texas State Medicaid benefits for members in our Chronic Special Needs plan (CSNP), Medicare Advantage plan (MA-PD), or Medicare Advantage LPPD plan (MA-PD LPPD).

Benefits will be coordinated at the time the claim is processed and no additional documentation is required for coordination of the benefit.

As a reminder, to receive cost share reimbursement for Medicare claims filed with TMHP, providers should utilize the following codes: CP003, CP004, CP007 or CP008. Providers need to submit claims to TMHP for coinsurance and deductibles using the revised Medicare Remittance Advice Notice (MRAN)/MAP templates. Providers should attach a copy of the completed CMS-1500 paper claim form to the completed MRAN form. The new templates and instructions are available on this website on the [Medicare/Medicaid Dual Eligibility Claims web page](http://www.tmhp.com/txtlstvw.aspx?LstID=cc9ca40b-2694-439f-8dcd-cf34d24f1b3a) at <http://www.tmhp.com/txtlstvw.aspx?LstID=cc9ca40b-2694-439f-8dcd-cf34d24f1b3a>.

How do you know which Care Improvement Plus plan your patient is a member of?

Each Care Improvement Plus member ID card is a different color and has a different description within the logo.



The CSNP card is blue and the product name is Silver Rx, Gold Rx or Gold Rx Advantage.



The MA-PD card is red and the product name is Medicare Advantage.



The DSNP card is green and the product name is Dual Advantage. This is the only plan (member ID card) that we coordinate with Texas State Medicaid benefits for.

If you are interested in learning more about our 2010 plan offerings, don't hesitate to contact us at **1-866-679-3119** for additional information, or email us at providerrelations@careimprovementplus.com

This is not an advertisement. However, if you have received this transmission in error or wish to no longer receive faxes from us, please (1) call 1-888-681-5252, enter document #700014 and follow the prompt; or (2) send us a fax at 1-866-248-5116 requesting to no longer receive faxes. You must include in your request the fax/phone numbers for which you are requesting to no longer receive faxes from Care Improvement Plus. We will comply with your request within 30 days after receiving it. Your opt-out request will be overridden if you subsequently expressly request Care Improvement Plus to send you faxes at the fax/phone numbers for which your opt-out request was made.