



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES
SHANNON R. TURNER, COMMISSIONER**

Ernie Fletcher
Governor

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Mark D. Birdwhistell
Secretary

May 15, 2006

Re: *KyHealth Choices* – Kentucky Medicaid Program Update

Dear Kentucky Medicaid Provider:

Governor Fletcher has introduced a new Medicaid initiative called *KyHealth Choices* that will be implemented on May 15, 2006. *KyHealth Choices* will offer Kentucky Medicaid members benefits that are customized to their specific needs. *KyHealth Choices* is designed to make Medicaid more effective and less costly by providing members with adequate resources and encouraging them to become more involved in their health care.

As a Medicaid provider, it is essential for you to be familiar with the new options *KyHealth Choices* offers to your patients. *KyHealth Choices* has four health plans:

- **Global Choices** covers the general Medicaid population
- **Family Choices** covers most children, including the Kentucky Children's Health Insurance Program (KCHIP) population
- **Optimum Choices** covers Intermediate Care Facility for the Mentally Retarded (ICF/MR) level of care individuals with mental retardation and developmental disabilities
- **Comprehensive Choices** covers nursing facility level of care individuals who are disabled

All four of the plans include basic medical services, including mental health services in inpatient and outpatient settings. *KyHealth Choices* members who are eligible for any existing waivers, such as the Home & Community Based Services (HCB) waiver, Supports for Community Living (SCL) waiver, Model II (Ventilator-Dependent) waiver, and/or the Acquired Brain Injury (ABI) waiver, will continue to receive waiver services through those specific programs.

Most members will need to pay a co-payment for some services and prescriptions; however, **members are not required to pay the new copayment amounts until June 1, 2006**. The maximum out of pocket expense that members will be required to pay is \$225 for healthcare services and \$225 for prescriptions per year. Members will not receive a new Medicaid card and may continue to use their current cards.

Providers may call the Kentucky Medicaid Automated Voice Response System at 1-800-807-1301 or visit our website at www.chfs.ky.gov/dms/kyhealthchoices.htm to find out which plan a member has or to learn more about *KyHealth Choices*.

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Helpful Numbers for Providers

CHFS has partnered with EDS (Electronic Data Systems) and First Health to offer Medicaid providers and members with the best services and information that is easy to use and access. For assistance with a variety of issues, please refer to the list below.

Call **1-800-639-5195** for:

- Provider Credentialing
- Provider Enrollment

Call **1-800-432-7005** for:

- Pharmacy Claims Processing

Call **1-800-807-1232** for:

- Medicaid Claims Processing

Call **1-877-298-6108** or use fax number **1-502-209-3290** for:

- KenPAC and Lock-In Member Management

Use the following toll free or fax numbers for Prior Authorizations (PA), Pro-Certifications (Pro-Certs) and Utilization Review (UR):

Ancillary Direct Line	1-800-807-8842
Kentucky Medicaid PA	1-800-292-2392
Home Health PA	1-800-664-5725
Home Health Fax	1-800-664-5749
Medicaid DRG PA	1-877-324-2461
PA Medicaid Fax	1-800-807-7840
PA Medicaid Fax	1-800-807-8843
PA Medicaid Fax	1-502-327-9453
PA Medicaid Fax	1-502-429-5233
PA Medicaid Fax	1-502-326-4564

The above-listed toll-free call centers are available from **8 a.m. to 6 p.m. (EDT) Monday through Friday.**

A new Medicaid system is currently being developed and you will be hearing more about the features and benefits of this new system in provider workshops being conducted throughout the Commonwealth over the next several weeks and months.

Sincerely,

Shannon R. Turner, J.D
Commissioner