

## Welcome to the May edition of *In the Know*.

Depression, anxiety disorders, the opioid crisis, and the role telehealth plays in the treatment of mental health and substance abuse issues have come to the forefront during the last year. The pandemic has affected the mental health of many of our members. The overall well-being of our members is very important to us and we ask that you help us help them.

During the month of May we invited our members to participate in a FREE <u>31 Days of Mental Fitness Journey</u>. We hope you'll join us in spreading the word that help is always available through our partners, Beacon Health Options (**800-397-1630**) and Montefiore's University Behavioral Associates (**800-401-4822**). Their staff can assist you in connecting your EmblemHealth patients with professionals that can help them.

To support your care of all of our members, please see the <u>tips and tools page on our website</u> and let our members know about the resources we have available to them.

This month we're also celebrating the nursing profession. National Nurses Week has been expanded to a monthlong celebration. We thank all our nurses and yours for the lives they've touched and the impact they've had on our communities.

## **Bridge Program to Expand to Non-ASO Members**

EmblemHealth Plan, Inc., EmblemHealth Insurance Company, and ConnectiCare, Inc. are collaborating to offer the Bridge Program's combination of five networks to large groups that like our current Benefit Plan designs but want access to more providers. The pairing of Bridge with existing plans will give our clients the ability to offer the same benefits at different price points to their employees, depending on their network size needs. If you are participating in any of the networks listed below, you will be able to see these new members.

- EmblemHealth Insurance Company Prime Network (formerly HIPIC)
- EmblemHealth Plan, Inc. National Network (formerly GHI)
- ConnectiCare Choice Network
- QualCare Network
- First Health Network



## **New Provider Portal – What to Expect Next**

As previously announced, EmblemHealth has been working hard to develop and deliver a new provider portal in the next few months to make it easier for you to do business with us. We'll continue to give you updates on our progress and share training information once available

on the topics below. Here are some important changes you need to be aware of:

All users will need their own unique email address. To help improve security of our members' protected health information (PHI), you will no longer be able to share an email ID for multiple portal accounts. You will, however, be able to consolidate your existing accounts under your own unique email address that will work for both <a href="emailto:emblemhealth.com">emblemhealth.com</a> and connecticare.com.

You'll be able to submit Benefit Extensions through the portal for EmblemHealth Plan, Inc. (formerly GHI) members instead of faxing a form. You'll also be able to submit attachments with supporting clinical information for a preauthorization request or ER Admission Notification at the time of submission or later. And, you'll be able to search for Explanations of Payment (EOPs).

Throughout the next few months, we will share training materials to guide you through the transition to the new portal including, but not limited to:

- The sign-in process
- Navigation of the portal
- Downloading a bulk eligibility report to Excel
- Setting different user roles
- And much more

Stay tuned for more updates.

## I Am a Specialist. Do I Need a Referral?

Referrals are intended to support appropriate care, not to become a barrier to care. Many of our plans do not require a referral, and we want to help save your staff time by avoiding unnecessary work. Investing two, quick minutes watching this video on this page, "Do I Need a Referral?" – A Quick Guide, will save your staff much more time in the long run. It will also get you off to a better start with the new patients coming to your office.

Our referral policy has flexibility. Referrals can be filed up to 30 days after the date of service. This means you can schedule appointments

and see our members even if the referral transaction is handled after the visits.

### **Referral Policy Reminders**

- SOMOS-managed members do not need referrals for dates of service after Dec. 1, 2020.
- CMS Extends Referral Waiver for Medicare Advantage Members:
   While most of our Medicare plans normally don't require a referral, all Medicare Advantage members do not need a referral during the COVID-19 State of Emergency.

## Triannual Recredentialing: CAQH Accuracy Is Key

To limit the paperwork you need to fill out for us, we rely on the information you have in your Council for Affordable Quality Healthcare, Inc. (CAQH) application to conduct our triannual recredentialing review. Contact information and hospital-admitting arrangements are two items we notice providers often overlook.

Please make sure to keep your CAQH application current and accurate to avoid the risk of being terminated from our provider network during the recredentialing process. CAQH asks providers to review their information every 120 days. Please ensure you have authorized EmblemHealth as an eligible plan to access your CAQH information.

## Reminder: GHI and HIPIC Renamed EmblemHealth

As a reminder, we had announced late last year that we were retiring the Group Health Incorporated (GHI) and HIP Insurance Company of New York (HIPIC) names and replacing them with names that reflect our EmblemHealth identity. This has been done and is in effect.

Coverage and benefits remain the same. The EmblemHealth name changes do not affect how you work with us or our members. It's simply new names for the same companies that have been a part of your practice for years. Please make a note of the name changes:

Former Name	NEW Name
Group Health Incorporated (GHI)	EmblemHealth Plan, Inc.

HIP Insurance Company of New York	EmblemHealth Insurance
(HIPIC)	Company

# GOVERNMENT-SPONSORED PROGRAM UPDATES MEDICARE

## Do Not Bill Dual Eligible and QMB Members with Full Medicare Benefits

If Medicare-Medicaid dual-eligible individuals have their Part A and Part B cost-share fully covered by their Medicaid plan, or are Qualified Medicare Beneficiaries (QMBs), they are not responsible for their Medicare Advantage cost-share for covered services. You can use ePACES to check whether the member has full or partial Medicaid benefits. Please do not balance bill these members for any other costs. If you received Medicare and Medicaid payments for services given to these members, it must be accepted as payment in full. For more detail, see our 2021 Medicare Advantage Guide.

## MEDICAID, HARP, AND CHILD HEALTH PLUS (STATE-SPONSORED PROGRAMS) UPDATES

## 29-I Voluntary Foster Care Agency Health Facility Services for Children/Youth

Effective **July 1, 2021**, all children and youth ages 21 and under – who are placed with a 29-I Voluntary Foster Care Agency (VFCA) Health Facility – may receive five, Core Limited Health-Related Services provided the VCFA has an Article 29-I license and all required New York State certifications, designations, and/or licenses. See <u>full information</u>. **Please note**: 29-I providers will be contacted about the required annual training.

## **Change of Address and Contact Information Notification**

Providers must notify Medicaid of any change of address, telephone number, or other pertinent information within **15 days of the change**. For more detail on this requirement and how to submit changes click

here.

## **Medicaid: New York State Medicaid Update**

The Office of Health Insurance Programs of the New York State
Department of Health regularly posts a Medicaid Update. Click here to
view their latest announcements.

## **Required Medicaid Cultural Competency Training**

See the training section below for training details.



#### **CLAIMS CORNER**

The <u>Claims Corner</u> section of our website is a rich source of information that helps your practice navigate EmblemHealth claims and billing processes. To help you quickly find what you need, we have been reorganizing our Claims Corner web pages. You will start to see sortable and searchable tables. We are changing some of the titles of the items to improve sorting results. We are also introducing Archive sections to house information that has been replaced or only applies to a prior date of service. We are tagging the older items "Expired" to help you differentiate current vs. prior policy.



#### **CLINICAL CORNER**

#### **Medical Policy Updates**

All <u>Medical Policies</u> are available for download in Clinical Corner on our provider <u>website</u>. The <u>Obstructive Sleep Apnea Diagnosis and Treatment policy</u> was recently revised.

### **Medical Technologies Database**

A comprehensive listing of medical technologies reviewed by the Medical Policy Committee for coverage consideration is available for download in Clinical Corner on our provider website. The database has been updated with new 2021 CPT/HCPCS codes, as needed.

#### **Approved**

- FoundationOne® Liquid CDx (Medicare only)
- Per-oral endoscopic myotomy (POEM) for the treatment of swallowing disorders (e.g., achalasia)
- Prostate cancer antigen 3 gene (PCA 3) screening for prostate cancer (Progensa® PCA3 test [Hologic®]) (Added Commercial to alreadycovered Medicare)

### Rejected

- Cala Trio<sup>™</sup> electrical stimulation of the external upper limb and peripheral nerves of the wrist for essential tremor
- Monarch external Trigeminal Nerve Stimulation [eTNS] System for pediatric attention deficit disorder (ADD)
- PIGF Preeclampsia Screen (PerkinElmer Genetics)
- PreTRM® (Sera Prognostics)
- Precision Blood™ (San Diego Blood Bank)
- Patient Specific Talus Spacer 3D-printed talus implant

## Follow Access and Availability Standards

It's important for our members to get the right care at the right time. Share our <u>Appointment Availability</u> <u>Standards During Office Hours & After Office Hours Access Standards brochure</u> with your appointment schedulers.

#### June Is Men's Health Awareness Month

As Men's Health Awareness Month approaches in June, we encourage you to talk to your male patients about the importance of regular checkups and screenings including colonoscopy, prostate, blood pressure check, and cholesterol, just to name a few important tests to help put your male patients on the

path to a longer, healthier life.

#### **June Is Alzheimer's and Brain Awareness Month**

According to the Alzheimer's Association, 50 million people worldwide are living with Alzheimer's disease and other dementias. Join the association in going purple in June to raise awareness. The symbolism of the color purple is that it's the most recognizable color out of the color wheel and tends to be the last color that Alzheimer's patients forget. Learn more about Alzheimer's disease and other dementias.



#### WEBINAR/TRAINING

### Join Us June 9 for Our Monthly Webinar

The next session of our monthly webinar series will be held on Wednesday, June 9 from 10-11 a.m., and again from 2-3 p.m. Practitioners and office staff are welcome to join this monthly webinar that provides an overview of our products and benefit plans, special utilization management programs, and how to navigate our provider portal. Register today as space is limited.

### **Required Medicaid Cultural Competency Training**

If you have regular and substantial contact with EmblemHealth Enhanced Care (Medicaid) and Enhanced Care Plus (HARP) members, you are required to <u>certify</u> completion of <u>cultural competency training</u>.

## Free Pulse8 Webinars for Patient Management and ICD-10 Coding

Pulse8 offers free webinars for patient management and ICD-10 coding. See the <u>full schedule</u> for 2021. To register, go to our <u>Provider Events page</u>. If you have any questions, or you would like to set up a private session for your practice, please email <u>ProviderEngagement@Pulse8.com</u> or call their Customer Support team at 410-928-4218 ext. 7. Their hours are 8 a.m. to 8 p.m., Monday through Friday.



#### IN EVERY ISSUE

Please keep your email address current so we can get information to you quickly.

#### **Keep Your Directory and Other Information Current**

If a provider in your practice is leaving, please inform us as soon as possible. To report other changes, you can also sign in to your Provider/Practice Profile on our website.

If you participate with us under a delegated credentialing agreement, please have your administrator submit these changes.

#### **EmblemHealth Neighborhood Care**

EmblemHealth Neighborhood Care offers our plan members and other community members a place to get the personalized, one-on-one support of experts in clinical, benefits, and health management solutions in support of a holistic approach to health and wellness. Neighborhood Care does not provide medical services; their role is to help practitioners manage patient care by supporting the primary practitioner-patient relationship. See <u>virtual classes</u> currently being offered.

## In Case You Missed It - In the Know Archives Available

If you missed an edition of In the Know, or have trouble opening a link in this one, please see all our newsletters on our website.

#### **EmblemHealth**

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EmblemHealth Plan, Inc., EmblemHealth Insurance Company, EmblemHealth Services Company, LLC and Health Insurance Plan of Greater New York (HIP) are EmblemHealth companies. EmblemHealth Services Company, LLC provides administrative services to the EmblemHealth companies.

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Nondiscrimination Policy