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EmblemHealth®

In The Know
JANUARY 2021

A New Year With New Stories To Tell

Welcome to 2021. Many are happy to see 2020 end, but our hopes for a happier New Year are tempered by the continuing COVID-19 pandemic. Please be sure to visit our **Provider COVID-19 page** for updates that may affect your practice, including hospital preauthorization changes required by New York State Department of Financial Services Circular Letter 17 that affect Commercial, Essential Plan, Child Health Plus, and Medicaid Managed Care. We have also decided to suspend prior authorization, as described in Circular Letter 17, to our EmblemHealth Medicare Advantage plans between Jan. 13 and Feb. 21, 2021.

This year brings changes to our networks and health plans, as well as new names to know, so keep reading for more information. We also intend to release a new provider portal this year, one that will make it easier for you and your office staff to manage your EmblemHealth business.

Thank you for continuing to be our partner in caring for our members. We look forward to more opportunities to collaborate on programs and services that improve both our relationship with you, and your relationship with your patients.

EmblemHealth Study Finds Language Matters When Talking About COVID-19 Vaccinations

EmblemHealth has studied the importance of terminology and how it affects Americans' openness to receive immunizations and vaccinations. Our study found that people generally understand the difference between the terms "shot," "vaccination," and "immunization," with **vaccination** and **immunization** being the preferred terms across all groups. Knowing this will be helpful as you discuss the COVID-19 vaccine with your patients.

Annual Provider Notification on This Year's 'Must Read' List for Providers

If you haven't already seen this year's edition of our **Annual Provider Notification**, please put it at the top of the reading list for you and your staff. This special web feature includes guides to our 2021 suite of networks and plans, along with other key participation requirements. You will also be able to see a comprehensive summary of updates made to policies and procedures over the last year to simplify working with us throughout 2021.

LabCorp Joins EmblemHealth's Networks

As many of you know, we provided LabCorp as an additional option to address the increased demand for COVID-19 testing. Now we have taken this further and are pleased to tell you our arrangement with LabCorp has become a permanent one. LabCorp is now an in-network provider for EmblemHealth Plan, Inc. (formerly GHI) members ONLY for all services as of **Jan. 1, 2021**. Quest Diagnostics is still EmblemHealth's preferred in-network lab, but we recognize it is critical to have expanded access to laboratory services.

System Transitions Complete

We are excited to share that our technology transition has hit a major milestone. Starting **Jan. 1**, all members will share a consistent member ID format—the "K-ID". During 2020, members were given new member ID numbers as they were moved to our new systems upon plan renewal. We know this transition may have caused some confusion and we

appreciated your patience as we moved our members to this more advanced system.

EmblemHealth Plan, Inc. (formerly GHI) Members Complete Transition to New Radiology Programs

As of **Jan. 1**, we have completed our streamlining of the **radiology accreditation processes for non-radiologists**. In addition, the same programs for **Radiation Therapy and Cardiology Imaging** now apply to most EmblemHealth members, and all are managed by eviCore Healthcare. The only remaining exceptions are New York City members managed by Empire and members assigned to HealthCare Partners (HCP) and Montefiore CMO as their managing entities. During 2020, EmblemHealth Plan, Inc. (formerly GHI) members were transitioned into these programs as they were moved to our new systems when their health plans renewed.

COMMERICAL BUSINESS UPDATE

Bridge Updates

We are happy to announce the **2021 Caring for Bridge Program Members: Reference Guide** is now available.

The Bridge Program, which is available to ASO clients, has expanded to include our own employees. Employees for each of our companies—EmblemHealth, ConnectiCare, and AdvantageCare Physicians—were given the option to select health plans with access to the same bridged set of networks offered to our ASO clients.

These networks include HIP's Prime Network, EmblemHealth Plan, Inc.'s (formerly GHI) National Network, ConnectiCare's Choice Network, as well as QualCare and First Health's networks. If you are contracted for any of these networks, you can see our employees as well as any Bridge Program members. Look for "Bridge" as the network description on the member ID cards and provider portal eligibility page and welcome these members into your practice.

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

Reminder: Removal of service limits on physical therapy (PT), occupational therapy (OT), and speech therapy (ST)

Starting **Jan. 1**, the Medicaid Managed Care (MMC) benefit package was modified to remove service limits on physical therapy (PT), occupational therapy (OT), and speech therapy (ST). This applies to our Medicaid and Health and Recovery Plan (HARP) members.

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.

CLAIMS CORNER

The **Claims Corner** section of our website is a rich source of information that helps your practice navigate EmblemHealth claims and billing processes. Please check often to see posted updates.

New Prolonged Services Reimbursement Policy

Effective **Jan. 1, 2021**, CMS finalized HCPCS code G2212 for prolonged office and outpatient evaluation and management visits. EmblemHealth is following CMS minimum time guidelines and allowing G2212 to be used with 99205 or 99215. Do not use 99358, 99359, or 99417 with code 99202-99215. **See** full policy.

Providers Will Receive Multiple 1099s for 2020 Claims

In 2021, providers may receive more than one 1099 for claims paid during the year 2020. Different 1099s may be produced for:

- Paper checks paid directly by EmblemHealth
- EFT payments made by PNC
- EFT, virtual card, and/or paper checks processed by ECHO Health

National Drug Code (NDC) Requirements for Drug Claims

Starting **April 19, 2021**, a valid National Drug Code (NDC) number, unit of measure, and units dispensed for drugs administered in ambulatory care settings will be required on all claims except for child and adult immunization drug codes. Claims submitted with missing, invalid, incomplete NDC information, etc., will be denied. Claims may be resubmitted with the appropriate NDC information for reconsideration. **See** full policy.

Reminder: Include Taxonomy Codes for All Servicing Providers on Claims

EmblemHealth requires providers add Taxonomy Codes to all claims for all services delivered to members. Missing codes may result in incorrect payment to you. Furthermore, if we do not have the correct taxonomy code on file, our pharmacy vendor may stop prescriptions you ordered from going through.

EFT/ERA – Sign Up for Free

Through ECHO Health, Inc., you can receive direct deposits to your bank account(s) (known as electronic funds transfer (EFT)) and view or download your remittances online (known as electronic remittance advantage (ERA)). Electronic transactions are fast, convenient, and reduce the risk of lost or stolen payments. This solution is free and allows you to reduce payment processing costs and improve cash flow. Visit **ECHO**, click on the "Click Here" button, and follow the instructions to enroll. Learn **more**.

CLINICAL CORNER

Check Panel Reports – Schedule New Patient Visits

If you're a primary care physician, we urge you to regularly check your panel reports by signing into the secure portal at **emblemhealth.com/providers**. Review the reports to identify new patients and call them to schedule a new patient visit. Please encourage new Medicare and dual-eligible Special Needs Plan (SNP) members to complete and submit their Health Assessments, too.

Medical Policy Updates

All **Medical Policies** are available for download in Clinical Corner on our provider website. We encourage you to review this section for new information. In Dec. 2020, we reinstated and revised the medical policy Noninvasive Prenatal Testing (NIPT) for Fetal Aneuploidy.

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.

Clinical Practice Guidelines

EmblemHealth encourages our providers to consult our **Clinical Practice Guidelines** (CPGs) for assistance in the treatment of acute, chronic, and behavioral health issues. We've adopted these guidelines from professionally recognized sources and through consultation between board-certified specialists and our Health Status Improvement Subcommittee. The guidelines are reviewed and updated regularly. CPGs are not intended as a substitute for your professional assessment but to assist you in the management of certain types of preventive and clinical care.

PHARMACY

Formularies

EmblemHealth updates its Formularies on a regular basis. Updates as of **Jan. 1** have been posted to Clinical Corner. Find our most recent updates **here**. You can find all of the formularies **here**.

**Reminder: New Pharmacy Utilization Management
Started Jan. 1:**

- ESI began managing our Medicare and Medicaid members along with our Commercial members for most drugs.
- New Century Health (NCH) will authorize most oncology-related chemotherapeutic drugs and supportive agents when delivered in the physician's office, outpatient hospital, or ambulatory setting.

Exceptions apply. Learn **more**.

WEBINAR/TRAINING

Join us Feb. 10 for our monthly webinar

The next session of our monthly webinar series will be held on **Wednesday, Feb. 10 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.

Free Pulse8 Webinars for Patient Management and ICD-10 Coding

To register, go to **https://pulse8.zoom.us** and select the session that interests you.

If you have any questions, or you would like to set up a private session for your practice, please email Pulse8 at **ProviderEngagement@Pulse8.com** or call Pulse8's 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 current so we can get information to you quickly.

Keep Your Directory Information Current

If a provider in your practice is leaving, **please inform us** as soon as possible. Click here to see if your practice falls under a delegated credentialing arrangement to determine which process to follow:

No delegated credentialing: To report other changes, you can also sign in to your Provider/Practice Profile on our **secure website**.

Delegated credentialing: If you participate with us under a delegated credentialing arrangement, please have your administrator submit all 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 **virtual classes** 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**.

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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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