Provider Report ambetter. FROM







Managing complex care

Do you have patients whose conditions need complex, coordinated care they may not be able to facilitate on their own? A care manager may be able to help.

Care managers are advocates, coordinators, organizers and communicators. They are trained nurses and other clinicians who promote quality, cost-effective outcomes by supporting you and your staff, as well as your patients and their caregivers.

A care manager connects the Ambetter member with the healthcare team by providing a communication link between the member, his or her primary care physician, the member's family and other healthcare providers, such as physical therapists and specialty physicians.

Care managers do not provide hands-on care, diagnose conditions or prescribe medication. Care managers help members understand the benefits of following a treatment plan and the consequences of not following the plan outlined by a physician.

Our team is here to help your team with:

- Noncompliant members
- New diagnoses
- Complex multiple comorbidities

Providers can directly refer members to our care management program by phone or through the provider portal. Providers may call 1-877-617-0390 for additional information about the care management services Ambetter from Arkansas Health & Wellness offers.

Let us know your plans

Our goal is to provide seamless care for our members and frictionless service for you. To support these goals, it is important that we know if you are planning to move, change phone numbers or leave the network.

Please call 1-844-263-2437 or email arkcredentialing@ centene.com to request a Provider Data Change Form.

Mail or fax the completed form with supporting documents to:

Provider Data Management P.O. Box 25230 Little Rock, AR 72221 Fax: 1-844-357-7890



Accessing specialists

The availability of our network practitioners is essential to member care and treatment outcomes. We evaluate the performance in meeting these standards and appreciate you working with us to accommodate our members' clinical needs.

Our specialty provider network in Arkansas is very broad. Provider lists and locations can be found on the Find a Provider Tool on our website. If you are having trouble finding a specialist for a member or need assistance securing an appointment with a specialist for a member, contact Provider Services at 1-877-617-0390.

The table below depicts the appointment availability and wait time standards for members:

Appointment type	Access standard
PCPs – routine visit	30 calendar days
PCPs – adult sick visit	48 hours
PCPs – pediatric sick visit	24 hours
Behavioral health – routine visit	10 business days
Specialist	30 calendar days
Urgent care provider	24 hours
Behavioral health urgent care	48 hours
After-hours care	Phone access within six hours
Emergency provider	Immediately, 24 hours a day, seven days a week and without prior authorization
Behavioral health – non-life-threatening emergency	Within six hours

To ensure appropriate care, we have adopted the geographic accessibility standards below:

- PCP within 30 miles of a member ZIP code
- Specialist within 60 miles of a member ZIP code
- One hospital within 60 miles of a member ZIP code

the Arkansas Prescription Monitoring Program. All current network providers

recredentialing. This requirement has been added to the attestation submitted with initial applications, as well as recredentialing packets.

will be required to register upon

Under Arkansas law, a prescriber may designate someone in the facility, such as a nurse, to be that prescriber's delegate for checking the Prescription Monitoring Program database once that delegate has also registered. Checking the Prescription Monitoring Program database can alert providers to patient issues, allowing providers to begin discussions about safer drug use, better pain management and treatment for addictions, when appropriate. Arkansas Health & Wellness requires contracted providers in Arkansas to register and encourages use of the Arkansas Prescription Monitoring Program.

Hours of operation

Arkansas Health & Wellness supports extended hours of operation, and we want to promote those hours to our members. Please ensure the hours of operation listed are correct. Providers can update their hours of operation by contacting Provider Services at 1-877-617-0390 or emailing ambetterarproviders@ ambetterhealth.com.



LexisNexis validating demographic data

Ambetter from Arkansas Health & Wellness values the excellent care that our provider partners deliver to our members.

As you know, a critical component of quality care is understanding where to find the right provider. That is why we partnered with LexisNexis last year to validate the accuracy of our provider demographic data. We appreciate your support of that effort.

To ensure that our provider demographic data stay current for our members, we are partnering with LexisNexis again to validate the data on a quarterly basis. The first of the 2017 quarterly validation efforts began in March.

Providers should have received a joint email from LexisNexis and the American Medical Association requesting your attestation that your data are current.

If your demographic data have changed, please be sure to update. Attestations were due within two weeks of receipt of the request.

By updating your demographic information in the AMA portal, you can ensure that your edits are implemented across all Medicare and Marketplace payers who are also using the AMA portal. Without current demographic information, members may have difficulty locating providers in their area and care needs may go unmet. Additionally, these updates are required by CMS and covered in your Participating Provider Agreement with Ambetter from Arkansas Health & Wellness.

Please contact Provider Services at **1-877-617-0390** with any questions you may have. Thank you again for your ongoing partnership.



A shared agreement

Member rights and responsibilities cover members' treatment, privacy and access to information. We have highlighted a few below. There are many more member rights and responsibilities, and we encourage you to consult your provider manual to review them. Visit **ambetter.arhealthwellness.com** or call **1-877-617-0390** if you need a copy of the manual.

Member rights include but are not limited to:

- Receiving all services that Ambetter must provide
- Being treated with dignity and respect
- Knowing their medical records will be kept private, consistent with state and federal laws and Ambetter policies
- Being able to see their medical records
- Being able to receive information in a different format in compliance with the Americans with Disabilities Act, if the member has a disability

Member responsibilities include:

- Understanding their health problems and telling their healthcare providers if they do not understand their treatment plan or what is expected of them
- Keeping scheduled appointments, and calling the physician's office whenever possible if there is a delay or cancellation
- Showing their member ID card at appointments
- Using an emergency room only when they think they have a medical emergency; otherwise, members should call their primary care provider
- Following the treatment plans and instructions for care that they have agreed on with their healthcare providers

Multiple E/M codes may be billed on the same claim for visits that occur on the same day.

Example: When a scheduled wellness visit turns into a (consecutive) sick visit, both can be billed on the same claim.

To bill for a wellness/preventive care visit, use one of the following procedure/ diagnosis codes:

Procedure Codes:

99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99461

Diagnosis Codes:

V202, V203, V2031, V2032, V700, V703, V705, V706, V708, V709, Z0283, Z0271, Z0282, Z0281, Z024, Z025, Z022, Z005, Z023, Z029, Z00111, Z008, Z026, Z00110, Z00121, Z020, Z021, Z00129, Z0001, Z0000, Z0279, Z0289

Check the Ambetter Provider Manual for more information regarding use of E/M Modifier 25.

HEDIS measures performance

The Healthcare Effectiveness Data and Information Set (HEDIS) is a set of performance measures updated annually by the National Committee for Quality Assurance (NCQA).

Most health plans use HEDIS to measure performance on important aspects of care and service. Through HEDIS, NCQA holds Ambetter from Arkansas Health & Wellness accountable for the timeliness and quality of healthcare services (including acute, preventive, mental health and other services). We also review HEDIS data to identify opportunities to improve rates and ensure our members are receiving appropriate care.

Please familiarize yourself with the behavioral health HEDIS topics covered in this issue of the provider newsletter.



Behavioral health **HEDIS** measures

Antidepressant medication

management is an important part of helping patients recover from mental health issues. Adherence to prescribed medications is a priority for patients who have been diagnosed with depression. Ask patients about side effects, and discuss any other barriers to medication compliance. Ambetter from Arkansas Health & Wellness can assist members with staying adherent to their antidepressants.

The HEDIS measure definition:

Antidepressant medication management (acute phase): Percentage of health plan members ages 18 and older with a diagnosis of depression who were treated with an antidepressant medication and remained on the medication for at least 12 weeks.

Antidepressant medication management (continuation phase):
Percentage of members ages 18 and older with a diagnosis of depression who were treated with an antidepressant medication and remained on the medication for at least six months.

Learn more: ncqa.org/report-cards/ health-plans/state-of-health-carequality/2016-table-of-contents/ antidepressant

Follow-up after hospitalization for

mental illness is vital to a patient's recovery. There are more than 2 million hospitalizations for mental health issues in the U.S. each year. Follow-up care can help patients transition back into the community and ensure they are taking prescribed medications correctly. Ambetter from Arkansas Health & Wellness can help by scheduling follow-up appointments, making reminder calls about appointments and providing member transportation assistance.

The HEDIS measure definition:

Percentage of members ages 6 and older who received follow-up within seven days of discharge and within 30 days of discharge.

Learn more: ncqa.org/report-cards/ health-plans/state-of-health-carequality/2016-table-of-contents/ follow-up

Adherence to antipsychotic medications for people with schizophrenia is critical

in treating this chronic mental illness. Although antipsychotic medications reduce the risk of relapse and hospitalization, nonadherence to prescribed medications is common. Ongoing treatment and monitoring are essential. Ambetter from Arkansas Health & Wellness provides support to members with schizophrenia through our care coordination and care management programs.

The HEDIS measure definition:

Percentage of members ages 19–64 who have schizophrenia and were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.

Learn more: ncqa.org/report-cards/ health-plans/state-of-health-carequality/2016-table-of-contents/ antipsychotic-medications

Helping moms Start Smart Start Smart for Your Baby* is a care management program for women who are pregnant or have just given birth. We want to help women take care of themselves and their babies every step of the way, through pregnancy, postpartum and newborn periods. To take part in this program, women can contact Member Services at 1-877-617-0390. As soon as you confirm a patient's pregnancy, submit a notification of pregnancy (NOP) to ensure Ambetter from Arkansas Health & Wellness is aware of the pregnancy and can provide needed support and member incentives through the Start Smart program.

Provider Webinar series

Arkansas Health & Wellness hosts webinars every quarter. The Provider Webinars are designed to offer our providers and their office staff the opportunity to learn from subject matter experts and ask questions about current topics and best practices. Registration is free, and each webinar is one hour.

Please visit ambetter.arhealthwellness.com/ provider-resources/provider-webinars.html to register. Instructions on accessing the webinars will follow. Reminders will be sent via email once registered.

Unspecified diagnosis codes

Ambetter from Arkansas Health & Wellness wants to provide you with the most seamless experience possible. To review your claim and authorization request in a timely and efficient manner, we ask that providers do not use unspecified diagnosis codes. Please use the most precise diagnosis codes possible when filing a claim or submitting an authorization request. Using unspecified diagnosis codes could result in a denial.

Guidelines for care

Ambetter from Arkansas Health & Wellness adopts preventive and clinical practice guidelines based on the health needs of our membership and on opportunities for improvement identified as part of the quality improvement (QI) program.

When possible, we adopt preventive and clinical practice guidelines formulated by nationally recognized organizations, government institutions, statewide initiatives or a consensus of healthcare professionals in the applicable field.

Guidelines are available for preventive services, as well as for the management of chronic diseases, to assist in developing treatment plans for members and to help them make healthcare decisions. Ambetter from Arkansas Health & Wellness evaluates providers' adherence to the guidelines at least annually, primarily through monitoring of relevant HEDIS measures.

The guidelines:

- Consider the needs of the members
- · Are adopted in consultation with network providers
- Are reviewed and updated periodically, as appropriate
- Are intended to augment, not replace, sound clinical judgment

Preventive and chronic disease guidelines and recommendations include:

- Adult, adolescent and pediatric preventive care guidelines
- Guidelines for diagnosis and treatment of ADHD, asthma, depression, diabetes, hypertension and other diseases and disorders

For the most up-to-date version of our preventive and clinical practice guidelines, go to **ambetter.arhealthwellness.com** or call **1-877-617-0390**.

PCP auto-assignments

Primary care providers (PCPs) play a key role in helping patients stay current with their health. To promote ongoing patient health and wellness, we encourage all Ambetter members to choose a PCP for their care. However, because some members do not make a PCP selection, we complete an auto-assignment process, and Ambetter members are then sent a communication regarding this assignment.

New member assignments are posted on the secure provider portal the first week of every month. Since member assignment is part of the pay-for-performance program, we encourage you to check your member roster regularly. This ensures you are aware of the members on your panel and helps you manage their care accordingly.



Notice: Policy updates

Arkansas Health & Wellness is amending policies or implementing new policies. The effective date for the policies listed below is June 27, 2017.

Clinical Policies:

- CP.MP.100 Allergy testing
- CP.MP.103 Fractional exhaled nitric oxide
- CP.MP.138 Pediatric heart transplant
- CP.PHAR.107 Regorafenib (Stivarga®)
- CP.PHAR.235 Atezolizumab (Tecentriq[™])
- CP.PHAR.298 Afatinib(Gilotrif®)
- CP.PHAR.299 Gefitinib (Iressa®)
- CP.PHAR.300 Bezlotoxumab (Zinplava™)
- CP.PHAR.81 Pazopanib (Votrient®)
- CP.PHAR.82 Collagenase Clostridium Histolyticum (Xiaflex™)
- CP.PHAR.83 Vorinostat (Zolinza®)
- CP.PHAR.84 Abiraterone (Zytiga™)
- CP.PHAR.92 Tetrabenazine (Xenazine®)
- CP.MP.107 DME and O&P Criteria
- CP.MP.139 Low-frequency ultrasound for wound management
- CP.PHAR.01 Omalizumab (Xolair®)
- CP.PHAR.151 Levoleucovorin (Fusilev®)
- CP.PHAR.152 Laronidase (Aldurazyme®)
- CP.PHAR.153 Eliglustat (Cerdelga®)
- CP.PHAR.154 Imiglucerase (Cerezyme™)
- CP.PHAR.155 Cysteamine (Cystagon[®], Procysbi[®])
- CP.PHAR.156 Idursulfase (Elaprase®)

- CP.PHAR.157 Taliglucerase Alfa (Elelyso™)
- CP.PHAR.158 Agalsidase Beta (Fabrazyme®)
- CP.PHAR.159 Sebelipase Alfa (Kanuma™)
- CP.PHAR.160 Alglucosidase Alfa (Lumizyme®)
- CP.PHAR.161 Galsulfase (Naglazyme™)
- CP.PHAR.162 Elosulfase Alfa (Vimizim®)
- CP.PHAR.163 Velaglucerase Alfa (VPRIV®)
- CP.PHAR.164 Miglustat (Zavesca®)
- CP.PHAR.169 Vigabatrin (Sabril®)
- CP.PHAR.170 Degarelix Acetate (Firmagon®)
- CP.PHAR.171 Goserelin Acetate (Zoladex®)
- CP.PHAR.172 Histrelin Acetate (Vantas®, Supprelin® LA)
- CP.PHAR.173 Leuprolide Acetate (Eligard®, Lupaneta Pack™, Lupron Depot, Lupron Depot-Ped®)
- CP.PHAR.174 Nafarelin Acetate (Synarel®)
- CP.PHAR.175 Triptorelin Pamoate (Trelstar®)
- CP.PHAR.270 Paricalcitol Injection
- CP.PHAR.301 Erwinia Asparaginase (Erwinaze®)
- CP.PHAR.302 Ixazomib (Ninlaro®)
- CP.PHAR.303 Brentuximab Vedotin (Adcetris®)
- CP.PHAR.304 Irinotecan Liposome Injection (Onivyde®)
- CP.PHAR.305 Obinutuzumab (Gazyva®)

- CP.PHAR.306 Ofatumumab (Arzerra®)
- CP.PHAR.307 Bendamustine (Bendeka[®], Treanda[®])
- CP.PHAR.308 Elotuzumab (Empliciti™)
- CP.PHAR.309 Carfilzomib (Kyprolis®)
- CP.PHAR.310 Daratumumab (Darzalex®)
- CP.PHAR.311 Belinostat (Beleodaq®)
- CP.PHAR.312 Blinatumomab (Blincyto®)
- CP.PHAR.313 Pralatrexate (Folotyn®)
- CP.PHAR.314 Romidepsin (Istodax®)
- CP.PHAR.315 Vincristine Sulfate Liposome Injection (Marqibo®)
- CP.PHAR.316 Cabazitaxel (Jevtana®)
- CP.PHAR.317 Cetuximab (Erbitux®)

Payment Policies:

- CP.MP.125 DNA Analysis of Stool
- CP.MP.134 Evoked Potentials
- CP.MP.135 Fecal Calprotectin Assay
- CC.PP.046 Status "B" Bundle Services

To view all policies in detail, please visit:

ambetter.arhealthwellness.com/provider-resources/clinical-payment-policies.html

AMB17-AR-H-047