

Provider News

In this issue:

- Availity to Handle CHOICE Online Transactions
- Risk Adjustment and Reimbursement Rates
- CHOICE Total Adds Hospice Benefit
- Total to Notify PCPs of Patient Transitions
- Patient Satisfaction Survey Season Has Begun
- We May Ask to Review Your Records

Alert Your Vendors: New Partner Handling CHOICE Online Transactions

Effective **February 22, 2021**, Availity will become the preferred **Electronic Data Interchange (EDI)** and Portal vendor for VNSNY CHOICE Health Plans transactions. VNSNY CHOICE and Availity are committed to working with providers and their vendors to ensure that there is no disruption in the transmission of your VNSNY CHOICE transactions.

The existing Payer IDs – 77073 and VNSNY CHOICE – are not changing; they can continue to be used moving forward.

It may take time to work with your clearinghouse or service provider, so please act now to help ensure the continuity of your EDI transactions. Please make sure the vendors you work with are aware of this impending change. If they are not currently registered with Availity, they will need to do so to be able to submit claims using the Availity EDI and Provider Engagement Portal.

You or your vendors can sign up to submit transactions using either method below:

- Connect directly to the Availity Gateway at no cost for all VNSNY CHOICE 837, 835, and 27X transactions. Please visit
 apps.availity.com/web/welcome/#/edi
 and
 www.availity.com/vns
 to help set up your business or vendor for submitting EDI transactions through Availity.
- Use Availity's Provider Engagement Portal for eligibility and benefits inquiry, claim submission, claim status inquiry, and electronic remittance advice. Please ensure you are registered with Availity for this access. (**Availity Registration**).

If you have questions or need assistance, call Availity Client Services at 1-800-Availity (1-800-282-4548) Monday through Friday, 8:00 am to 8:00 pm Eastern Time.

Go to the VNSNY CHOICE/Availity EDI Gateway

How Do Billing Codes Affect Your Payment Rates?

Providers play an important role in the Medicare Advantage (MA) risk adjustment process. By **accurately identifying and coding your patients' diagnoses**, you help us get paid the proper rates for your patients, which means you can get paid the proper rates for your patients.

Risk adjustment ensures that MA plans like VNSNY CHOICE Total (HMO D-SNP) are able to reimburse providers treating MA beneficiaries, including individuals with complex chronic diseases. In turn, MA plans rely on risk adjustment to maintain predictable and actuarially sound payments from the Centers for Medicare and Medicaid Services (CMS) to provide benefits to all beneficiaries.

Read more about risk adjustment, including steps you can take to make sure your patients' health care needs are accurately reflected in the claims you submit, by clicking the button below.

Read about Risk Adjustment for Providers

CHOICE Total Begins Covering Hospice Services

If you have patients in need of hospice services, we have good news.

VNSNY CHOICE Total (HMO D-SNP) is pleased to announce its designation as a Centers for Medicare and Medicaid Services (CMS) Innovation Center Model participant for the **Hospice Benefit Program**.

Designation under the CMS Innovation Center Model means CHOICE will pay for **all services covered by Original Medicare**, **including hospice**. These changes only apply to patients who elect to begin hospice care, receive that care from CHOICE Total and are enrolled in the plan in 2021.

The hospice carve-in is intended to increase patient access to hospice services and facilitate better coordination between their hospice providers and other clinicians. For CHOICE Total, the Hospice Benefit component of the Value Based Insurance Design (VBID) Model is an opportunity to collaborate with hospice providers and improve care coordination, transparency, and quality.

For more information about how the Hospice Benefit can work for your patients, please contact:

- Clinical and Patient Support Contact: Esther Conteh at Esther.Conteh@vnsny.org and 212-609-1898
- Hospice Network Administrative Contact: Tamara Romero at <u>Tamara.Romero@vnsny.org</u> and 212-609-7546

If you are a hospice provider, interested in learning more about the Hospice Benefit program, click on the **blue** button below to see the Hospice Benefit FAQs on the CHOICE website. You may also view up-to-date information on the CMS Innovation Center website by clicking on the **green** button below.

See our Hospice Benefit FAQs on the CHOICE Website

Read More about the Hospice Benefit at CMS

Real-Time Admissions/Discharge Alert for

VNSNY CHOICE Total Providers

We are pleased to announce the **2021 rollout of a new alert** containing member inpatient admission and discharge information as part of a continued effort to alert VNSNY CHOICE Total (HMO D-SNP) primary care physicians (PCPs) of member health changes in real time.

If you have a Total patient, you can expect to receive an alert via secure email or secure e-fax each time CHOICE learns that a member is admitted to or discharged from an inpatient facility.

Providers should review the information and enter all pertinent information into the patient's medical record. Discharged patients should see you within 14 days to discuss their post-transition plan for medications and other health routines.

These alerts are aimed at assisting providers in meeting the HEDIS® **Transition of Care** (TRC) measure, among others.

Read more about the CHOICE Total Real-Time Transition Alerts under Guideline and Policy Updates on the CHOICE website by clicking the button below.

Go to VNSNY CHOICE Total Guideline and Policy Updates

Patient Satisfaction Survey Season Starts

Now through April, VNSNY CHOICE MLTC and Total members may receive a survey from **Island Peer Review Organization (IPRO)** on behalf of New York State Department of Health (NYSDOH). Beginning in March, Total enrollees may also receive a survey from **CAHPS (Consumer Assessment of Healthcare Providers and Systems)** on behalf of Centers for Medicare and Medicaid Services (CMS) concerning their Medicare and Part D plans. Both surveys ask for feedback on, among other things, the quality and accessibility of the services they receive from care providers and health plans.

If any patient asks about the surveys, you can refer them to the either of these CHOICE Call Center lines:

For MLTC, call at 1-888-867-6555 (TTY 711)

CHOICE Total and SelectHealth Providers: We May Ask to Review Some of Your Medical Records

Beginning in February, a data analysis organization named **Cotiviti** may contact you on our behalf to request medical records for some of your patients. This review is part of the annual Healthcare Effectiveness Data and Information Set (HEDIS) audit.

Developed by National Committee for Quality Assurance, HEDIS measures quality by examining medical records to determine whether certain care standards for patients have been met. Note that this is not an audit of physician performance.

As a reminder, your provider participation agreement with VNSNY CHOICE requires that you supply us with medical records needed for various purposes, including quality reviews, at no charge. Cotiviti will make every effort to minimize disruption to your practice and to patient care.

Your assistance in the data collection process for HEDIS is extremely important to its success. Thank you in advance for working with us!

If you have questions, please write to QualityManagement@vnsny.org or contact your Provider Relations representative.

Questions?

Contact VNSNY CHOICE Provider Relations

Call toll free: **1-866-783-0222**TTY for the hearing impaired: **711**Monday – Friday, 9 am – 5 pm

Use the VNSNY CHOICE Provider Portal

Click here for our Provider Quick Reference Guides

Thank you for being part of the VNSNY CHOICE Provider network!

We want to make this publication useful to you. Please let us know what you think! Write to us at CHOICEProviderNews@vnsny.org.

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