

2020 Provider Fall Newsletter

Welcome

We are living through unprecedented times, and this newsletter is our way to stay connected and keep you informed on the progress of our health plan. We are excited to report an 80% growth in our membership from 2019 to 2020.

Over the past few months, we recognize the uncertainty and disruption that COVID-19 has caused in connecting with our providers. We have a profound appreciation for all that you do for our members and want to thank you for a job well done!

This newsletter addresses a few trends and policy changes that you need to know about and how these will impact the way we do business together. Our goal is to enhance the provider experience during the COVID-19 era, and we want you to know we are here for you! Please take care of each other, our members, and your loved ones. We will get through this together!

Medicare Network Expansion

Our Medicare Advantage Network will expand from our current 12 counties into eight new counties effective 2021.

New Counties: Blue Earth - McLeod - Le Sueur - Meeker - Waseca - Kanabec - Renville - Sibley

- The goal was to expand to counties contiguous to our current footprint, where we know our network could meet Medicare adequacy standards.
- Claims data showed that our members were already accessing care in some of our expansion counties, so those counties are a natural fit.
- 5 of the 8 expansion counties still have Cost Plans available. Entering those markets with Medicare Advantage plans provides another choice for Medicare beneficiaries which could save some patients money while providing comprehensive coverage.

Allina Health | Aetna Medicare Phone Number Change

New provider service number for Medicare Advantage as of 1/1/2020 **Medicare 1-833-570-6671 Option #2.**

Medicare Wellness Visit vs. Annual Physical

Are you aware that our Medicare Advantage members are eligible for one (1) Wellness Visit and one (1) Annual Physical each calendar year? Both services can be performed during the same visit.

Annual Routine Physical

The annual routine physical is an extensive physical exam including a medical history collection and it may also include any of the following: vital signs - observation of general – appearance - head and neck exam - heart and lung exam - abdominal exam – neurological exam-dermatological exam - extremities exam

Coverage for this non-Medicare benefit is in addition to the Medicare-covered annual wellness visit and the "Welcome to Medicare" Preventive Visit.

Annual Wellness Visit

If a member has had Part B for longer than 12 months, our plan will cover the annual wellness exam once per calendar year.

Please reach out to the Network Relations Team if you have any questions about the differences between a Wellness Visit vs Annual Physical.

Telemedicine/Telehealth

For information about our telemedicine liberalization in response to COVID-19, please visit Availity for a list of our clinical policies.

Allina Health Employee Elevate Narrow Network Plan Requirement

The new Allina Health Employee Elevate Narrow Network Plan has a unique feature called the Advance Care Team (ACT). ACT is a multidisciplinary team of health professionals who collaborate with the member's care team to coordinate care and resources to help individuals and their care circle manage and understand illness. The team operates as an extension of care through the full continuum of health services, including primary and specialty care, hospitalizations, transitions, and in the community. The team includes registered nurses, social workers, pharmacists and care guides.

Allina Elevate members have total responsibility for obtaining a referral from ACT to seek care from providers outside of Allina Health Elevate Narrow Network. If members seek services without a referral, then the member is 100% responsible for billed charges.

Advance Care Team Phone: (612) 262-8100

Hours of Operation: Monday - Friday: 8AM - 5PM CST (a dedicated voicemail box is available)



MWW.ALLINAHEALTHAETNA.COM/AH
Aetna performs administrative service for Allina Health Aetna
Phone prompts: #1-Medical, #2-Pharmacy
#3-Behavioral Health, #4-Nurse Line, #5-EAP
#6-Concierge/Member Services

You do not have to choose a primary care doctor. For mental
health or substance abuse preapproval or coverage questions,
call 1-800-424-4047. See your plan documents for information
on your plan requirements. In an emergency call 911 or go to
the nearest emergency room.
Note: This card does not guarantee coverage.

The pharmacy benefit is administered by Express Scripts.

ALLINA HEALTH AND AETNA INSURANCE CO
PO BOX 981106
EL PASO

CONCIERGE/PROVIDER SERVICES

1-800-343-9264

Medicare Advantage Risk Adjustment Documentation and Coding Education

Don't miss a great opportunity to learn with Allina Health | Aetna

Educational opportunities to help YOU:

- •Understand the basics of Medicare Advantage Risk Adjustment
- •Tips to stay compliant with regulatory requirements related to Risk Adjustment
- •Learn when it is appropriate to document and code a condition
- •Understand the role of the Annual Wellness Exam
- •Tips to improve submission and data accuracy requirements
- •Understand the role of the In-Home Assessment
- AAPC coding CEU webinars available

Benefits for YOU:

- •Learn how Medicare Advantage Risk Adjustment impacts providers and patients
- •Review documentation standards for quality medical records
- •Learn how documentation and coding accuracy affects a patient's future health care
- Discuss ICD 10-CM coding guidelines in effect today
- •Tips to increase claim submission accuracy
- •Understand medical records requests: the when and why

Education at your pace and on your schedule • Multiple opportunities available • Contact us today

LarsenS@AllinaHealthAetna.us.com for scheduling or information.

Credentialing Cost Savings Option

What is CAQH ProView?

CAQH ProView is an online provider data collection solution. It streamlines provider data collection by using a standard electronic form that meets the needs of nearly every national health plan organizations.

CAQH ProView enables physicians and other healthcare professionals in all 50 states and the District of Columbia to enter information **free-of-charge** into a secure central database and authorize healthcare organizations to access that information. CAQH ProView eliminates redundant paperwork and reduces administrative burden. *There is no cost for physicians and other health care providers to use CAQH ProView.*

CAQH ProView makes it easier for providers to make updates, reducing the time and resources necessary to submit accurate, timely data to organizations that require that information. Timesaving features enable healthcare providers to:

- •Complete and attest to multiple state credentialing applications in one intelligent workflow design.
- •Upload supporting documents directly into CAQH ProView to eliminate the need for manual submission and to improve the timeliness of completed applications.
- •Protect against delays in data processing with more real-time validation.

Completing the CAQH application is more efficient and takes less of your time:

Allina Health | Aetna participates, along with many other health plans, in the Council for Affordable Quality Healthcare and accepts the CAQH application for our credentialing and recredentialing process. The CAQH application is a universal data source. The objective is to make the process more efficient by offering a single point of contact and eliminating the extensive paperwork during the process. CAQH is compliant with all state required credentialing applications.

How do providers access CAQH ProView?

Providers can register online at https://proview.caqh.org/pr
For more information contact CAQH at 1-202-517-0384 or email info@caqh.org.

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