

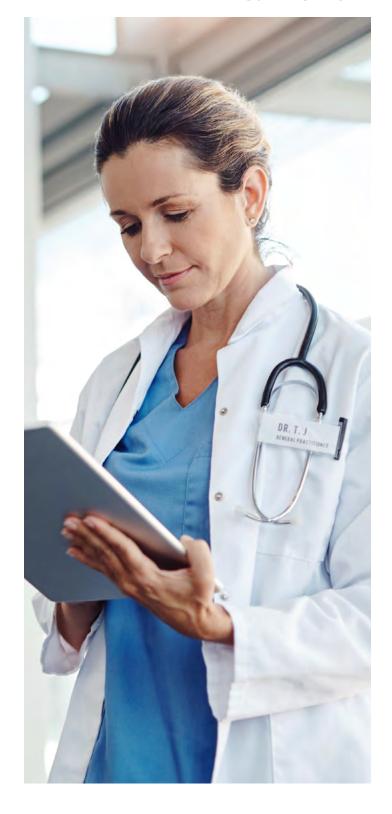
CONNECTIONS

A Provider's Link to AmeriHealth Caritas Delaware

Summer 2021

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Pfizer COVID-19 vaccine to include adolescents ages 12 to 15

The U.S. Food and Drug Administration recently expanded the emergency use authorization of the Pfizer COVID-19 vaccine to include adolescents ages 12 to 15. Following this decision, the Centers for Disease Control and Prevention (CDC) recommended this vaccine for this population.

Our members look to you, their trusted primary care provider (PCP), for guidance and support in making health care decisions. We encourage you to continue to talk to your patients about COVID-19 vaccination. For help finding a location for your patient to receive a vaccine, visit www. vaccines.gov (English) or www.vacunas.gov (Spanish). If you have a member who needs help with transportation, please contact 1-844-623-7090. For members who may need assistance with interpretation services, contact 1-844-211-0966 (TTY 1-855-349-6281) Services are available 24 hours a day, seven days a week.

AmeriHealth Caritas Delaware understands that care goes beyond physical health, and we are committed to supporting whole-person care. Caring for your patients during this time may result in heavier workloads and increased stress. As you take care of others, it is also important to take care of yourself. Below are some resources that may be helpful for you and your patients.

- CDC emergency responders: Tips for taking care of yourself.
- CDC COVID-19 stress and coping.
- Mental health and COVID-19 Information and resources.
- Mental Health America resources for mental health providers.
- SAMHSA first responders and disaster responders resource portal.

Diabetes Prevention Program (YMCA of Delaware)

AmeriHealth Caritas Delaware has partnered with the YMCA of Delaware to bring its Diabetes Prevention Program to patients in Delaware — including AmeriHealth Caritas Delaware members at risk for diabetes.

Offered locally by the YMCA of Delaware, the National Diabetes Prevention Program (NDDP) is a yearlong, evidence-based lifestyle change program available at no cost to AmeriHealth Caritas Delaware members (ages 18 and older) who meet program eligibility criteria.

In May 2021, 1,400 AmeriHealth Caritas Delaware members who were eligible for the NDPP received a letter explaining the benefits of the program and instructions on how to enroll. Two NDPP partners, Quality Insights and the YMCA of Delaware, as well as AmeriHealth Caritas Delaware, have been enrolling members into the program over the past month.

To qualify for the YMCA's Diabetes Prevention Program, participants must meet the following criteria:

- Age 18 or older.
- Not pregnant.
- Overweight (BMI > 25 or BMI > 23 for Asian individuals).
- Not diagnosed with type 1 or type 2 diabetes or end-stage renal disease (ESRD).

And have one of the following:

- Qualifying risk score as determined by the risk assessment. The score must be 9 or greater. The CDC Prediabetes Screening Test is available at https://www.cdc.gov/diabetes/prevention/pdf/ prediabetes-screening-test-tag508.pdf.
- Previous diagnosis of gestational diabetes.
- Diagnosed within the last year with prediabetes via a qualifying blood test value:
 - HbA1c value of 5.7 percent to 6.4 percent.
 - Fasting glucose of 100 to 125 mg/dL.
 - Two-hour plasma glucose of 140to 199 mg/dL.

Additional resources:

- To learn more about the program, contact the YMCA of Delaware's Healthy Living Department at 1-302-572-9622 or healthyliving@ymcade.org.
- Providers may also refer members to the program by completing the Healthcare Provider Referral Form at https://ymcadefhlbf.formstack.com/forms/ referral_healthy_living.

Please visit https://www.ymcade.org/preventdiabetes for a full overview of the program, eligibility criteria, class locations and schedules, and additional diabetes prevention resources.

DPH presents: the National Diabetes Prevention Program Coverage Toolkit overview

Learn how the National Diabetes Prevention Program (NDPP) can help prevent progression to Type 2 diabetes, improve patients' quality of life, and reduce long-term health care costs.

As part of ongoing national efforts to establish Medicaid coverage for the NDPP, the NDPP Coverage Toolkit was developed in 2017 by the National Association of Chronic Disease Directors (NACDD), the Division of Diabetes Translation at Centers for Disease Control and Prevention (CDC), and Leavitt Partners (a health care intelligence firm).

During this course offered by the Delaware Division of Public Health (DPH), you will explore the NDPP Toolkit to learn about patient eligibility, identification, recruitment, referral, and retention in the NDPP lifestyle change program.

Learning objectives

 Identify key information that is included in the NDPP Coverage Toolkit.

• List eligibility requirements and referral processes for the lifestyle change program.

 Describe at least one way to screen and identify eligible participants for the program.

- State three ways to recruit eligible patients for the lifestyle change program.
- Discuss how retention strategies can improve participant health and quality of life outcomes, better adhere to quality measures, and reduce overall health care costs.

How to enroll:

Please visit https://www.ediscolearn.com to enroll for the training.

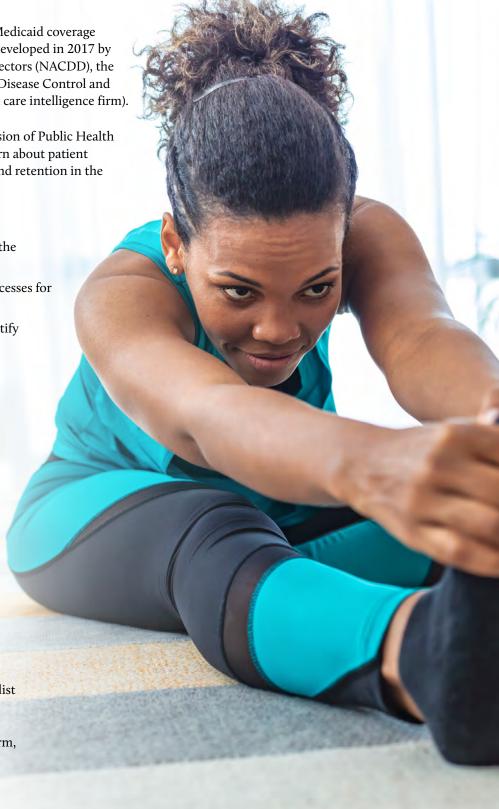
New to EDISCO™?

Enter code DEPHS when creating your account.

Questions

For question about course content, please email Quality Insights Practice Transformation Specialist Patrick Weiss at pweiss@qualityinsights.org.

For technical assistance with the learning platform, please email EDISCO@qualityinsights.org.





Healthy Heart Ambassador blood pressure self-monitoring program

Help your patients improve their hypertension with a new evidence-based program that empowers them to manage their high blood pressure (BP) while learning ways to eat healthier and be more physically active.

In this exciting no-cost program from the Delaware Division of Public Health, specially trained health coaches teach simple yet proven ways for patients to:

- Manage and understand BP.
- Measure and track their BP.
- · Set and achieve health goals.
- Identify and control triggers that can raise BP.
- Adopt healthier eating habits.
- Increase physical activity

Your patients will receive (at no cost):

- A BP monitor (if needed) and training on how to measure and track BP at home.
- Virtual one-on-one support from specially trained facilitators and virtual learning sessions over a four-month period.
- Cooking demonstrations and nutritional education that will build confidence to buy, prepare, and cook affordable, delicious heart-healthy meals.

• Support to help your patients make real changes for heart health.

Participation requirements:

- Over 18 years old.
- High BP diagnosis or prescribed a medication for high BP.
- No cardiac events in the last year.
- No atrial fibrillation or other arrhythmias.
- No lymphedema or risk for lymphedema.

Program referrals:

You can refer patients to this program via a direct referral by calling **1-302-208-9097**, using the patient portal or text messaging, or getting a referral letter. **Email dhss_dph_hha@delaware.gov** or contact Robina Montague at **1-800-642-8686**, ext. **7814**, for more details.



At one time or another, we all need a little help.

AmeriHealth Caritas Delaware provides a free searchable website to connect our plan members with online and local, inperson programs and resources. The Community Resource Hub offers free or reduced-cost local services related to **medical care**, **housing and food, job training, child care, and more**.

To learn more and help connect your patients with these important services and supports, visit www.amerihealthcaritasde.com > Wellness Resources.



Prior authorization lookup tool available on plan website

The prior authorization lookup tool helps reduce the administrative burden of calling Provider Services to determine whether prior authorization is required. The tool is easy to use and offers general information for outpatient services performed by a participating provider.

To try the prior authorization lookup tool, visit

https://www.amerihealthcaritasde.com/provider/resources/prior-authorization-lookup.aspx.

You cannot submit prior authorization requests through the tool and should continue to request them through your current process. We would like to remind you that you can submit your requests electronically via NaviNet. Through your single login to NaviNet, you can request prior authorization and view authorization history. If you are not already a NaviNet user, visit https://navinet.secure.force.com to sign up.

If you have questions about the tool, please contact your Provider Network Management Account Executive or the Provider Services department at **1-855-707-5818**. If you have questions related to a procedure code or prior authorization, please call **1-855-396-5770**.

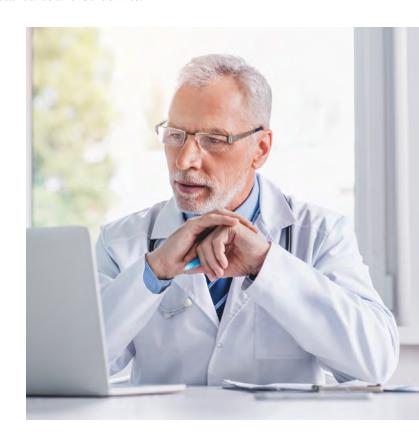
Important reminder: Medical record reviews

AmeriHealth Caritas Delaware annually evaluates compliance with medical record standards and preventive health guidelines based on a random selection process and/or as determined by AmeriHealth Caritas Delaware for PCPs, OB/GYN providers, high-volume/high-impact specialists, and other providers as deemed appropriate.

AmeriHealth Caritas Delaware Quality Management staff conducts annual medical record review (MRR) audits to ensure adherence to AmeriHealth Caritas Delaware's Medical Record Standards and Guidelines.

AmeriHealth Caritas Delaware's Medical Record Standards and Guidelines are available to providers in the Provider Manual, which is available on AmeriHealth Caritas Delaware's website, and include:

- Guidelines pertaining to medical record content, organization, and ease of retrieving medical records.
 - Medical records must be legible, signed, and dated.
- A requirement that providers achieve a medical record review audit score of 90% or greater to meet AmeriHealth Caritas Delaware's MRR standards.
- The stipulation that providers who do not achieve a score of 90% will have a re-audit within 120 days of the initial review to ensure they have corrected the deficiencies.



Important reminders: Claim submission, provider complaints, and appeals

Important claim time frames			
Action	Time frame	Time frame begins	
Initial claim submission (AmeriHealth Caritas Delaware is primary payer.)	120 days	Date of discharge (inpatient) or date of service (outpatient)	
Corrected claim submission (AmeriHealth Caritas Delaware is primary payer.)	120 days	Date of discharge (inpatient) or date of service (outpatient)	
Initial claim submission (AmeriHealth Caritas Delaware is s econdary payer.)	60 days	Date of primary payer's final determination	
Corrected claim submission (AmeriHealth Caritas Delaware is secondary payer.)	60 days	Date of primary payer's final determination	
Provider complaint	12 months from the date of service or 60 calendar days after the payment, denial, or recoupment of a timely claims submission, whichever is latest.		

Corrected claim submission guidelines		
Paper claims	Claim filing guidelines:	
Submit to: AmeriHealth Caritas Delaware Attn: Claims Processing Department P.O. Box 7367 London, KY 40742	 CMS 1500 claim — Resubmission code "7" and the plan's original claim number must be in field 22. Institutional UB-04 claim — Bill type for form locator 4 should end in "7" and the plan's original claim number must be entered in form locator 64A (document control number). 	
Electronic claims Payer ID: 77799	 Claim filing guidelines: Bill frequency code "7" in the 2300 claim loop in the field CLM05-3. Bill the original claim number in the 2300 claim loop in the REF*F8 segment. 	

Important tips

- When submitting a corrected claim, you do not need to append a Provider Complaint Form. Attaching a Provider Complaint Form to a corrected claim will cause a delay in claim processing.
- Corrected claims must be received 120 days from the date of service, unless otherwise specified in your contract.
- If AmeriHealth Caritas Delaware is the secondary payer, corrected claims must be submitted within 60 days of the date on the primary insurer's explanation of benefits (EOB).

Provider appeals

Providers may file an appeal on a member's behalf with the member's written consent. The Notice of Adverse Benefit Determination letter has an attached consent form for your convenience. Consent forms must be signed by the member or the member's authorized representative. The provider may not sign the form for the member.

Please mail all provider-initiated appeals to AmeriHealth Caritas Delaware, P.O. Box 80106, London, KY 40742-0106, or call 1-855-396-5770 and follow the prompts.

Online trainings and guides available

Did you know that AmeriHealth Caritas Delaware provides online training that you can access at your convenience? Visit the **Providers > Training and education** section of our website to find available trainings and to access registration links, e-learning modules, and user guides.

Do you know your Provider Network Management Account Executive?

Your Account Executive is your liaison with AmeriHealth Caritas Delaware. They are responsible for orientation, continuing education, and problem resolution for our network providers. Email us or give us a call.

Ancillary providers:

Katrina Tillman

Phone: 1-302-233-1544

ktillman@amerihealthcaritasde.com

Behavioral health providers and facilities:

Karen Lysinger

Phone: 1-302-233-5700

kly singer@ameriheal th caritas de.com

Hospitals

Tiara Goodmond

Phone: 1-302-270-6750

tgoodmond@amerihealthcaritasde.com

Long-term services and supports providers, skilled nursing facilities, and home health agencies

Deneka Smith

Phone: 1-302-286-5927

dsmith3@amerihealthcaritasde.com

Physical health providers (United Medical, Mednet, and Delaware Chiropractic Services Network [DCSN], statewide)

Kristina Peden

Phone: 1-302-256-6254

kpeden@amerihealthcaritasde.com

New Castle County physician groups

Latasha Smith

Phone: 1-302-268-0424

lsmith@amerihealthcaritasde.com

Kent and Sussex counties physician groups and dental (SkyGen) and vision (Avesis) providers

Ashley McLaughlin

Phone: 1-302-286-5907

amclaughlin@amerihealthcaritasde.com

Management

Stephanie Miller

Phone: 1-302-270-6788

smiller@amerihealthcaritasde.com



If you suspect it, report it: Help us fight fraud, waste, and abuse

At AmeriHealth Caritas Delaware, we recognize the importance of detecting, investigating, and preventing fraud, waste, and abuse.

Examples of fraud, waste, and abuse include:

- Accepting kickbacks for patient referrals.
- Violating physician self-referral prohibitions.
- Billing for services not furnished.
- Providing medically unnecessary care.

As a reminder, AmeriHealth Caritas Delaware providers are required by contract to make medical records accessible to all appropriate government agencies, including, but not limited to, Delaware Health and Social Services (DHSS), the Delaware Division of Medicaid and Medical Assistance (DMMA), the United States Department of Health and Human Services (DHHS), the Centers for Medicare & Medicaid Services (CMS), and/or the Office of Inspector General (OIG), and their respective designees, to conduct fraud, waste, abuse, and/or quality improvement activities.

Anonymously report suspected fraud, waste, or abuse directly to AmeriHealth Caritas Delaware or to DMMA:

AmeriHealth Caritas Delaware:

- Call: AmeriHealth Caritas Delaware Fraud Tip Hotline at 1-866-833-9718.
- Email: fraudtip@amerihealthcaritas.com
- Mail: Special Investigations Unit 200 Stevens Drive Philadelphia, PA 19113.

DMMA:

- Call: 1-800-372-2022.
- Fax: 1-302-255-4425, Attn: SUR Unit.
- Email: surreferrals@state.de.us
- Mail:

Division of Medicaid & Medical Assistance, Surveillance and Utilization Review (SUR) Unit Lewis Building P.O. Box 906 New Castle, DE 19720.





Will you Let Us Know?

AmeriHealth Caritas Delaware is here to help you engage members in their health care by offering you the Let Us Know program.

The Let Us Know program is a partnership between AmeriHealth Caritas Delaware and the provider community to collaborate in the engagement and management of our members — your patients — with chronic behavioral or physical health conditions, as well as those who need long-term services and supports (LTSS). We have support teams and tools available to assist in the identification, outreach, and education of our members with complex health needs, as well as clinical resources for providers in their care management.

If you recognize a patient with a special, chronic, or complex health condition who may need the support of one of our programs, we just need you to Let Us Know in one of the following ways:

- Contact our Rapid Response and Outreach Team at 1-844-623-7090.
- Use the Member Intervention Request Form.

Complete a **Member Intervention Request Form** to Let Us Know about members who have missed appointments, need transportation services, or need further education on their treatment plans or chronic conditions. Simply complete and fax the form to our Rapid Response and Outreach Team at **1-855-806-6242**.

Subscribe to Network News — AmeriHealth Caritas Delaware's email service

To help ensure that you are receiving all provider notices, subscribe to our email service, **Network News**.

We use Network News to share information on topics of importance to you, including important plan updates, provider training events, and more.

To subscribe:

- Complete the online form found under www.amerihealthcaritasde.com > Providers > Newsletters and Updates or simply click here.
- · Click Submit.
- Watch for a confirmation email in your inbox.

Your information will be kept confidential.

We encourage all providers to **register**.



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Instagram for event information,
health tips, member information,
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