2021 All-network meeting





Agenda

- Welcome from Christine Murphy
- COVID-19 updates
- Know your resources
- Important reminders

Presenters

Nicole Aguero, Senior Provider Network Account Executive

Yesenia Fajardo, Senior Provider Network Account Executive

Meghan Morrissey, Senior Provider Network Account Executive

Before we get started

- Submit questions through the Q&A chat box
- We'll have time for questions at the end of the presentation
- Please do not include PHI in questions
- Include your contact info so we can follow-up with you directly
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Christine Murphy Vice President Network Management

Stay connected

Visit **provider.allwayshealthpartners.org/manage-subscription** to register

Administrative Newsletter

(monthly)

Includes important administrative updates that make it easier for your practice to do business with us

Clinical Digest Newsletter (monthly)

Read the top clinical and patient care information from the previous month in one place

Best Practice Provider Blog

(twice per week)

Get the latest in health and health insurance trends, news, and tips

Provider Community

(Now live)

A new way for providers to connect with us and their peers, share feedback and have a dialogue

COVID-19 updates

COVID-19 Updates

- Check out our COVID-19 FAQs for the latest information
- provider.allwayshealthpartners.org/FAQ
- Cost sharing had resumed for non-COVID-19-related telemedicine visits

Know your resources

- 2021 product portfolio
- Prior authorizations
- Claims information
- Provider support

2021 product portfolio

2021 Products and ID Cards

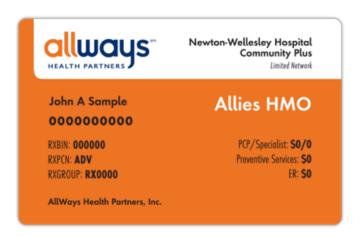
provider.allwayshealthpartners.org/product-reference

Highlights:

- Select HMO launched on Jan 1, 2021
- Mass General Brigham Employee plan ID cards updated
- Allies HMO launched in 2020 and continues to grow
- PPO Plus members will have access to the United Healthcare Options PPO network







AllWays Health Partners upcoming webinars

2021 Product webingrs

Register at provider.allwayshealthpartners.org/new-product-training-webinar

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1/29/21 - 12PM - 1PM
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2/03/21 - 10AM - 11AM

2/12/21 - 12PM - 1 PM

Prior Authorizations

Prior authorization enhancements

Helpful Links

Prior authorization enhancements

provider.allwayshealthpartners.org/prior-authorization-2020

Prior authorization information page

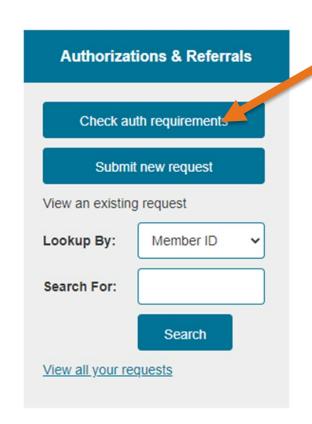
allwayshealthpartners.org/providers/authorization-guidelines

Highlights

- Use our online tool to check requirements by entering in a valid CPT/HCPCS code
- Get immediate approvals for medically necessary outpatient services 24/7

Verifying prior authorization requirements

- Save time and validate prior authorization requirements before you submit a new request
- In the Authorization tile on the Provider Portal homepage, you will be able to access our new auth requirement tool. Validate requirements by code



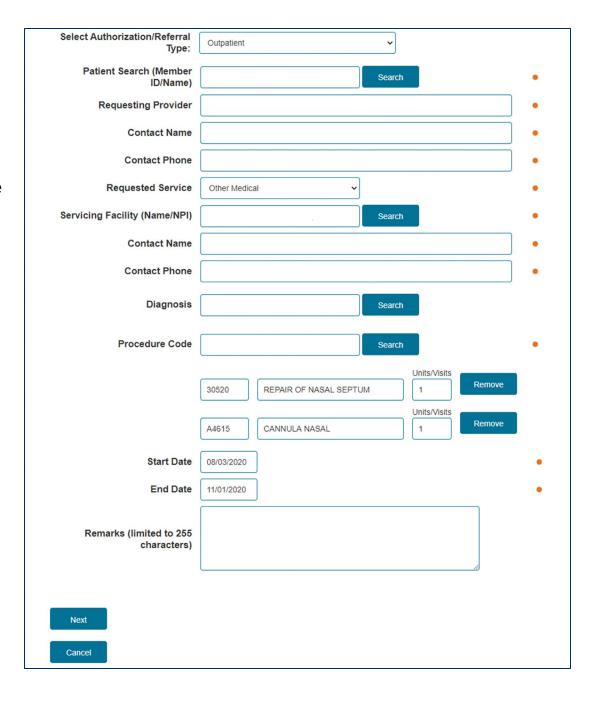
Verifying prior authorization requirements

- Search by MemberID number and Code
- Coverage and prior authorization requirements will display



Initiating a new request

- The submission form looks similar to what you use today
- Select the authorization type you would like to complete (i.e. homecare, outpatient)
- Some information will auto-populate (i.e. referring provider information, your information)
- Enter all required fields. (We have added new requested services under HomeCare and Outpatient.)
- When you press "Next", the system will verify whether or not an authorization is required
- If no PA is required, then you will be notified.
 - If PA is required, then InterQual Connect will display to conduct a criteria review



Medical Specialty Drugs

The medical specialty drugs on this list require prior authorization through NovoLogix.
Submit all other medical specialty drug requests through AllWays Health Partners.

Online

Beginning 2/13/20, medical specialty drugs (except for dual benefit medications) can be submitted online. Submit your request through the NovoLogix online prior authorization tool for the fastest processing. You can access the NovoLogix online prior authorization tool through the provider portal.

Prior Auth Vendors

Medical Specialty Drugs - click here for access to the NovoLogix secure portal.

Learn how to submit requests for all other vendors on our <u>prior auth page</u>.

Submitting requests to partners

Service	Vendor	Contact Information
Behavioral Health	Optum	 Commercial: 844-451-3518 Partners HealthCare Plans: 844-451-3520 My Care Family: 844-451-3519 Optumportal
Pharmacy (carved in)	CVS Caremark	 Non-Specialty Drugs Commercial: 800-294-5979 Health Connector: 855-582-2022 My Care Family: 877-433-7643 Specialty Drugs All Products: 855-814-5506
Medical Specialty Drugs	Nov oLogix	844-345-2803 NEW in 2020: Submit in the <u>AllWays provider portal</u>
Select Cardiac Imaging, Select Molecular & Genomic Testing, Radiation Therapy, High-Tech Radiology	eviCore Healthcare	888-693-3211 AllWays EviCore portal
Sleep Studies	CareCentrix	866-827-5861 <u>CareCentrix portal</u>

Important reminders

- Provider enrollment
- E/M code updates
- Provider support

Provider Enrollment

The Provider Enrollment Portal gives you online access to submit the following transactions for your practice:

- Affiliate a new doctor: Enrollment and Credentialing submissions can take a minimum of 45 days to be fully processed. Please remember to review your site/practice roster prior to inquiring on a status request.
- Download a completed HCAS form
- Open or close a panel
- Terminate an affiliation: For providers terminating from a practice, AllWays Health Partners requires written notification at least 60 days prior to the practitioner's termination date unless otherwise agreed upon.
- o **Submit demographic changes to AllWays Health Partners –** Continue to run provider rosters and regularly review our Provider Directory information.

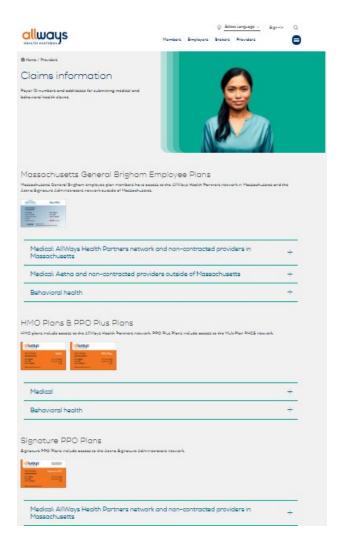
Claims information

Claims resource page

allwayshealthpartners.org/providers/claims-information

Highlights

- Clear guidance for where to send claims
- ID card images to help you identify plans



E/M code updates

E/M code updates

- Physicians will have the option to select the level of code using either total time or level of medical decision-making
- The definition of total time will expand to include all time spent in the care of the patient (face-to-face and nonface-to-face) on the date of the encounter.
- Criteria for medical decision-making levels will be updated
- The patient history and physical exam elements will be eliminated as components of E/M code level selection
- Code 99201 will be deleted, effective 1/1/21

Provider support

Contact

Claims status, eligibility, EOP	Provider portal: <u>allwaysprovider.org</u>
Claims issues, benefits	855-444-4647 providerservice@allwayshealth.org
Portal IT support	prweb@allwayshealth.org
Provider enrollment and credentialling, directory issues	pec@allwayshealth.org
Medical policies, payment policies, provider manual, provider directory, drug lookup, forms	allwayshealthpartners.org/provider
Audit denial inquiries	<u>audit@allwayshealth.org</u>

Thank You

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