

### **January 2023**

### **Provider News**

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### **Contact Us**

If you have questions or need assistance, visit the *Contact Us* section at the bottom of our provider website for up-to-date contact information and self-service tools or call Provider Services.

### **Provider website:**

https://provider.wellpoint.com/md/

### **Provider Services:**

833-707-0868



### **Administrative**

### **Engagement with your patient counts**

#### Why is this important?

Each year, a random sample of enrolled members receive a CAHPS® Survey or a Qualified Health Plan Enrollee Survey asking them to evaluate their experiences with healthcare. The surveys ask members to rate their experiences with:

- 1. Their health plan.
- 2. Their personal provider.
- **3.** Their specialist.

Several responses are combined and evaluated for the following:

- Getting needed care
- · Receiving care quickly
- · Communicating with providers
- Sharing in the decision-making process

The responses give us an idea of how your patients and our members perceive us and provide opportunities for us to improve the way we deliver services. Our engagement and interaction with patients and members are critical. Together, we can provide positive experiences for our shared members and patients.

### Every interaction with a patient is an opportunity to make their healthcare experience positive.

We thank you for striving to provide quality care for our members and for the continued focus on improving our member experience.

### **Additional information**

Continuing medical education (CME) education opportunities: http://www.mydiversepatients.com.

Members receive the survey either by mail or phone between February and May. Some of the questions they are asked include:

- In the last six¹ months, how often did your personal provider explain things in a way that was easy to understand?
- In the last six¹ months, how often did your personal provider listen carefully to you?
- In the last six¹ months, how often did your personal provider show respect for what you had to say?
- In the last six1 months, how often did your personal provider spend enough time with you?
- Using any number from 0 to 10, where zero is the worst personal provider possible, and 10 is the best personal provider possible, what number would you use to rate your personal doctor?
- We want to know your rating of the specialist you saw most often in the last six¹ months. Using any number from 0 to 10, where zero is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate the specialist?
- 1 The commercial survey asks the same questions, butfor the last 12 months vs. six months and language on the Medicaid Child Survey is slightly different to reflect asking a parent/guardian about their child's experience.

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MDWP-CD-008607-22-CPN6881



## Submitting prior authorizations digitally through ICR webcast

Prior authorizations submitted digitally can reduce denials associated with manual submission errors. The interactive care reviewer (ICR) prior authorization application makes it easy to submit, review, and check authorization status – all in one place.

Learn how by attending our January 2023 ICR webcast.

### Tuesday, January 17, 2023 | Noon Eastern time

#### Learn how to use ICR to:

- Create an authorization request.
- Inquire on a previously submitted authorization.
- Update a case.
- Copy a case.
- View letters associated with a case.
- Request and check the status of an authorization appeal.

Visit the ICR target page to register and to access self-service learning and to view recorded learning sessions. Download ICR user guides and other job aides from the ICR target page too. You can also register from the Provider Learning Hub by selecting the ICR live webinar learning icon.

If you have questions, call 833-707-0868.

### Register today!

MDWP-CD-014694-22-CPN14594

### Adult dental now covered service

Beginning January 1, 2023, Medicaid will provide coverage of dental services to adults under the Maryland Healthy Smiles Dental Program (MHSDP). As a result, all adults who have Medicaid will receive benefits that are similar to the benefits children, pregnant women, and adults in the Rare and Expensive Case Management program receive.

The MHSDP will provide comprehensive dental services that include diagnostic, preventive, restorative, endodontic, periodontic, and certain prosthodontic services; oral maxillofacial surgery; and sedation.

To ensure the continuation of care, we encourage all dental providers to enroll with Medicaid to participate in MHSDP. To enroll as a Medicaid provider:

- Visit the Electronic
   Provider Enrollment and
   Revalidation Portal (ePREP) at

   ePREP.health.maryland.gov.
- Step-by-step enrollment instructions with tutorial videos can be found under the prospective provider section of the MHSDP website.

If you are already enrolled in Medicaid, there is **nothing** additional you need to do. For more information about Medicaid enrollment, call the ePREP help desk at **844-463-7768**. If you have questions about the adult dental coverage expansion, call MHSDP at **844-275-8753**.

MDWP-CD-013315-22



### Monkeypox and smallpox vaccines: Product code on claims

Providers are a trusted resource for patients when it comes to vaccine advice. As information on the monkeypox outbreak changes and vaccination and testing guidance is released, we're committed to keeping you informed.

Some providers may have seen a message on their provider *Explanation of Payment (EOP)* stating that Wellpoint does not recognize the vaccine product codes for monkeypox and smallpox that became effective July 26, 2022. We're updating the provider fee schedules to reflect the new vaccine product codes as quickly as possible. The *EOP* message did not impact payment for administration of the vaccines, which is reimbursable; however, since the monkeypox and smallpox vaccines are provided by the government at no charge, the vaccine products are non-reimbursable.

To aid in processing claims for the monkeypox and smallpox vaccine products, providers must include these three elements on claims, even if vaccine products were received from the federal government at no charge:

- **1.** Product code (90611 or 90622)
- 2. Applicable ICD-10-CM diagnosis code
- **3.** Administration code

### More detail on codes and cost-sharing

Providers are encouraged to use:

- **1.** Product code 90611 for smallpox and monkeypox vaccine.
- **2.** Product code 90622 for vaccinia (smallpox) virus vaccine.
- **3.** Code 87593 for laboratory testing.

When billing the monkeypox and smallpox vaccine products, providers should submit those codes with a \$0.01 charge.

Cost-sharing for the vaccine and administration is waived.

#### What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your assigned Provider Relationship Management associate or call Provider Services at **800-454-3730**. You can read more information on monkeypox **online**.

MDWP-CD-014825-22-CPN8697



### This is Quitting: Helping teens and young adults quit vaping

You play an influential role in helping young patients overcome nicotine addiction early, and we can help you make an even bigger impact.

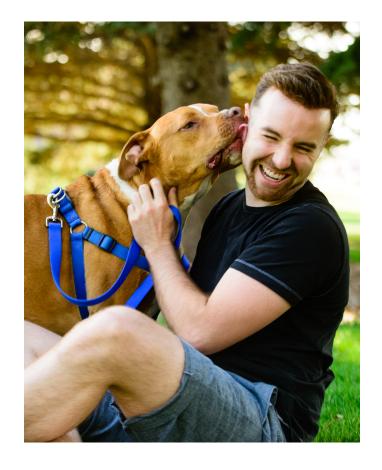
During tobacco-use assessments with young patients, inform those who are Wellpoint members that they have access to a free vaping cessation program.

Wellpoint is working with This is Quitting by Truth Initiative<sup>®</sup>. This is Quitting is a free and confidential text-message based program specifically designed to help teens and young adults (ages 13 to 24) quit vaping. This program is an excellent resource helping patients quit for good and see a future without nicotine.

Have your patients text **VAPEOUTMD** to **88709** to sign up. Once they text back their age, they will start receiving messages.

### The program is:

- Free to each user.
- Completely anonymous no data about any one user is shared.
- Entirely automated and text-message based.
- Peer-to-peer:
  - Many messages are skills or coping tools shared from other
     This is Quitting users to help a participant know they're not alone.
- Interactive and inquisitive to get to know the user better.
- Supportive, like texting with a friend who is helping them quit.
- Tailored based on age and device used.



Young people tend to prefer discretion when it comes to quitting vaping or letting others know they have been vaping at all. If possible, try to have these discussions in private, away from a parent.





## Use of modifier 25 when billing for visits that include preventive services and problem-oriented evaluation and management services

Beginning with claims processed on or after February 1, 2023, Wellpoint will implement additional steps to review claims for evaluation and management (E/M) services submitted by professional providers when a preventive service (CPT® codes 99385-99387 or 99395-99397) is billed with a problem-oriented E/M service (CPT codes 99202-99215) and appended with modifier 25 (for example, CPT code 99395 billed with CPT code 99213-25). This policy applies to members ages 22 and older.

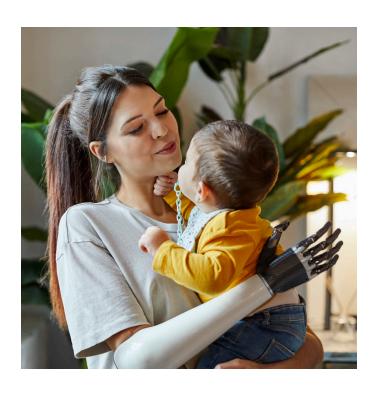
According to the *American Medical Association (AMA) CPT Guidelines*, E/Ms must be significant and separately identifiable in order to appropriately append modifier 25. Based upon review of the submitted claim information, if the problem-oriented E/M service is determined not to be a significant, separately identifiable service from the preventive service, the problem-oriented E/M service will be bundled with the preventive service.

Providers who believe their medical record documentation supports a significant and separately identifiable E/M service should follow the claims payment dispute process (including submission of such with the dispute) as outlined in the provider manual.

MDWP-CD-010861-22-CPN9023



### Policy Updates — Medical Policies and Clinical Guidelines



# Update to AIM Specialty Health Genetic Testing Clinical Appropriateness Guidelines CPT® code list

Effective for dates of service on and after April 1, 2023, several codes will require prior authorization through AIM Specialty  $Health_{\it ®}$  (AIM).

### Read more online.

AIM Specialty Health is an independent company providing some utilization review services on behalf of Wellpoint.

MDWP-CD-011935-22



### **Quality Management**

### 2022 CAHPS Survey results

Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an annual standardized survey conducted between January and May to assess consumer experiences with their provider and health plan, received by a random sample of patients. We use the results to measure our performance against our goals and determine the effectiveness of actions implemented to improve.

Wellpoint child population  CAHPS Survey measures	2022 rate	2022 all affiliates child Medicaid average	2021 NCQA Quality Compass® national average (all LOB)
Getting care			
Getting needed care composite (percent always or usually)	79.67%	89.24%	85.65%
Ease of getting needed care (percent always or usually)	92.09%	88.07%	90.33%
Ease of seeing a specialist (percent always or usually)	67.24%	72.41%	81.90%
Getting care quickly composite (percent always or usually)	85.81%	82.08%	86.90%
Ease of getting urgent care (percent always or usually)	92.98%	84.76%	91.02%
Ease of getting a checkup or routine care (percent always or usually)	78.65%	79.40%	82.98%
Satisfaction with plan physicians			
Rating of personal doctor (percent 9 or 10)	81.38%	74.83%	78.01%
Rating of specialist seen most often (percent 9 or 10)	67.35%	67.35%	73.84%
Rating of all healthcare (percent 9 or 10)	76.97%	70.83%	74.30%
Coordination of care (percent always or usually)	76.79%	81.34%	86.61%
Satisfaction with plan services			
Rating of health plan (percent 9 or 10)	77.46%	68.42%	72.19%



#### 2022 CAHPS Survey results (cont.)

Wellpoint adult population  CAHPS Survey measures	2022 rate	2022 all affiliates adult Medicaid average	2021 NCQA Quality Compass® national average (all LOB)
Getting care			
Getting needed care composite (percent always or usually)	80.84%	82.87%	83.56%
Ease of getting needed care (percent always or usually)	90.08%	86.62%	85.45%
Ease of seeing a specialist (percent always or usually)	71.60%	79.11%	81.81%
Getting care quickly composite (percent always or usually)	82.17%	80.83%	81.83%
Ease of getting urgent care (percent always or usually)	86.89%	82.18%	83.09%
Ease of getting a checkup or routine care (percent always or usually)	77.45%	79.47%	79.93%
Satisfaction with plan physicians			
Rating of personal doctor (percent 9 or 10)	66.20%	65.25%	69.21%
Rating of specialist seen most often (percent 9 or 10)	63.16%	61.60%	68.99%
Rating of all healthcare (percent 9 or 10)	60.66%	55.45%	58.67%
Coordination of care (percent always or usually)	80.70%	84.85%	85.36%
Satisfaction with plan services			
Rating of health plan (percent 9 or 10)	57.46%	56.53%	62.26%

Providers directly affect over half of the questions used for scoring. Wellpoint offers an online course for providers and office staff designed to teach how to improve communication skills, build patient trust and commitment, and expand your knowledge of the *CAHPS Survey*. The Improving the Patient Experience course is available at no cost and is eligible for one continuing medical education (CME) credit by the American Academy of Family Physicians. Providers can access the course at <a href="https://www.mydiversepatients.com/le-ptexp.html">https://www.mydiversepatients.com/le-ptexp.html</a>.

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MDWP-CD-013709-22

