



Office Visit

News for health care providers

November 2021 - In This Issue

[Dental Network Changing from DentaQuest to Healthplex in 2022](#)

[See What's New for 2022](#)

[EmblemHealth's Provider Toolkit Update](#)

[New Provider Portal](#)

[Dec. 1 is World AIDS Day](#)

[Bridge Program](#)

[New Medicare Advantage Plan in 2022 for City of New York Members](#)

[Medicare Open Enrollment](#)

[EmblemHealth Medicare Service Area Changes for 2022](#)

[Care Management Plans for D-SNP Members](#)

[2021 Annual Special Needs Plan Model of Care Training – Deadline Extensions](#)

[Policies, Billing and Claims](#)

[Updated Policy for ConnectiCare](#)

[Preventive Medicine & Screening – How to Effectively Use E&M Codes](#)

[Definitive Drug Testing](#)

[No-Cost/Reduced Cost Drugs, Implants & Devices](#)

[Intraoperative Neurophysiology Monitoring \(IONM\) – March 1, 2022](#)

[Allergy Testing & Immunotherapy Policy Expanding to ConnectiCare March 1 2022](#)

[Modifiers PN & PO for Clinic Visit Services](#)

[Multiple Endoscopy-Pay Percent](#)

[Medical Policy Updates](#)

[Recent Provider News](#)

Dental Network Changing from DentaQuest to Healthplex in 2022

Our dental network partner is changing in 2022 from DentaQuest to Healthplex for certain dental products. Members who need dental care should be directed to our Find a Doctor directory. If additional assistance is needed, please contact Healthplex at [888-468-2183](tel:888-468-2183), Monday to Friday from 8 a.m. to 5 p.m.

See What's New for 2022

This year's [Annual Provider Notification](#) is ready for you! The new year will bring important changes to our benefit plans, and simpler administrative processes for you and your team. Our annual notice also gives a recap of key changes that took place in 2021, and highlights regulatory requirements and trainings needed for your continued participation in our network. Information for ConnectiCare providers is included. Be sure to visit emblemhealth.com/AnnualProviderNotice2021-2022.

EmblemHealth's Provider Toolkit Updates

Our [Provider Toolkit](#) which houses many of the most important documents you need to work with our company and care for members, now has these updated

resources available:

- [2022 Summary of Companies, Lines of Business, Networks, and Plans \(includes Connecticare plans\)](#)
- [2022 Plans That Do Not Need Referrals](#)
- [Medicare Advantage Guide for EmblemHealth](#)
- [Commercial Plan Guide for EmblemHealth](#)

New Resource on ConnectiCare's Site:

- [2022 Medicare Advantage Guide for ConnectiCare](#)

New Provider Portal

Save time and effort by taking advantage of our new, secure portal's capabilities. Use it to upload documents in support of preauthorization requests, concurrent review determinations, customer service inquiries, and more. ConnectiCare providers are urged to submit preauthorization requests, referrals, and ER Admission and Newborn Notifications online. Help us make faxes and phone calls a thing of the past. For help, see [Educational materials](#) and [Frequently Asked Questions](#).

If you still have questions or need additional support, please contact Provider Customer Service at:

EmblemHealth: [866-447-9717](tel:866-447-9717)

ConnectiCare: Commercial: [860-674-5850](tel:860-674-5850), Medicare: [877-224-8230](tel:877-224-8230).

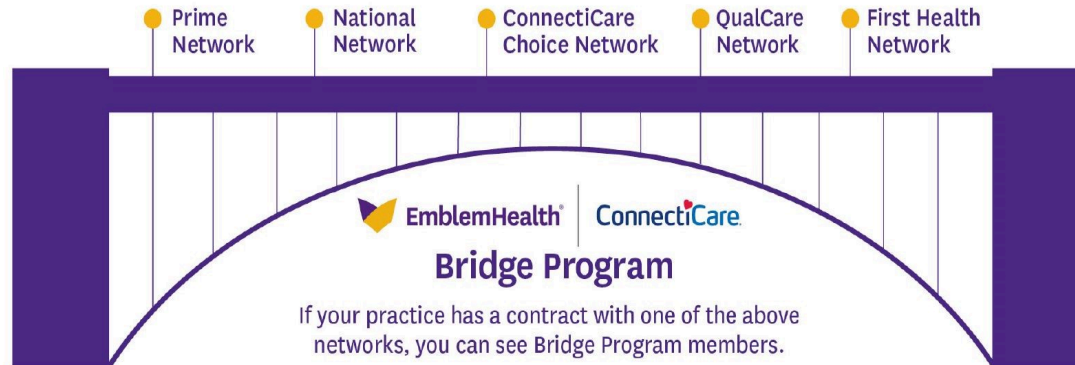
Dec. 1 is World AIDS Day

Dec. 1 is World AIDS Day. Studies show that better health outcomes result from strong provider-patient relationships, a multidisciplinary care team approach, and regular office visits. Refer your patients with HIV to an infectious disease specialist, if needed, and maintain ongoing communication for continuity of care. For more information, visit the [CDC website](#).

COMMERCIAL BUSINESS UPDATE

Bridge Program

You're a provider for EmblemHealth and ConnectiCare Bridge Program members if you participate in any of the plans listed above. Visit [our website](#) for updated information about the Bridge Program.



MEDICARE UPDATES

New Medicare Advantage Plan in 2022 for CNY Members

As we mentioned in previous newsletters, nearly 250,000 Medicare-eligible City of New York retirees are eligible to be transferred to the NYC Medicare Advantage Plus plan starting in 2022. The NYC Medicare Advantage Plus plan is a Medicare Advantage PPO group retiree offering through The Alliance, a collaboration between EmblemHealth and Empire BlueCross BlueShield. The plan allows retirees to visit any doctor nationally that accepts Medicare, while ensuring providers get paid their negotiated contractual rate or 100% of the Medicare-allowable rate if non-contracted (less any member copay).

To help you better manage these members in the new year, we have collected some important resources that you may find useful:

- [Frequently Asked Questions](#)
- [Plan overview](#), including information about claims and services requiring preauthorization

- [List of webinars](#) where providers can learn more about this product. Sessions are scheduled through January 2022.
-

Medicare Open Enrollment

Medicare open enrollment is underway. To see what is being offered in 2022, including new value-based benefits to help connect members to nutritious food, review our new Medicare Advantage web pages for [EmblemHealth](#) and [ConnectiCare](#).

EmblemHealth Medicare Service Area Changes for 2022

The following four plans will no longer be offered in the counties shown below:

- VIP Essential: Dutchess and Putnam
- VIP Value: Putnam and Sullivan
- VIP Dual Select: Richmond
- VIP Passport NYC: Richmond

Members of these plans may choose another EmblemHealth Medicare plan available in their area before **Dec. 7, 2021**; otherwise, they will be enrolled in Original Medicare.

Care Management Plans for D-SNP Members

Enrollees covered under our dual-eligible special needs plans (D-SNPs) have care plans on file with our Care Management Department. We make these care plans available to providers and are happy to share a copy with you. Please contact us to receive a copy for member(s) under your care.

For EmblemHealth Enrollees:

Email: complexcasemgmt@emblemhealth.com

Phone: 800-447-0768

For ConnectiCare Enrollees:

Email: hmoreferrals@connecticare.com

Phone: 800-390-3522

2021 Annual Special Needs Plan Model of Care Training – Deadline Extensions

The Centers for Medicare & Medicaid Services (CMS) requires providers to complete training for each dual-eligible special needs plan (D-SNP) they participate in. Our trainings take only 15 minutes to complete. Providers must submit an attestation to receive a certificate of completion. [EmblemHealth's VIP Bold Network and Reserve Network](#) providers who do not complete the training by Nov. 30, 2021 will be referred to the EmblemHealth Credentialing Committee as this is a requirement for continued participation in our network.

[Providers who care for ConnectiCare's Medicare Advantage members with Choice Dual \(HMO D-SNP\) plans training](#) have an extension until Dec. 3, 2021 to complete the training.

POLICIES, BILLING AND CLAIMS

The ConnectiCare website is a rich source of information that helps your practice navigate ConnectiCare claims and billing processes. Check the [website](#) often to see new postings. Similar information can be found on EmblemHealth's [website](#).

PAYMENT REIMBURSEMENT POLICIES

Updated Policy for ConnectiCare

ConnectiCare's [Medical Necessity Guidelines: Experimental, Investigational or Unproven Service Policy](#) was updated with new codes effective Oct. 1, 2021.

Policies Starting Jan. 1, 2022

Preventive Medicine & Screening – How to Effectively Use E&M Codes

Starting **Jan. 1, 2022**, this new enterprise-wide policy, [Preventive Medicine & Screening](#), gives you guidance on the appropriate use of Evaluation & Management (E&M) Codes when billing for preventive screening services. In addition, you can now see the quarterly updated version of the Preventive Services List (Commercial) for [EmblemHealth](#) and for [ConnectiCare](#).

Definitive Drug Testing (Commercial & Medicaid)

Definitive drug testing, also known as confirmation testing, is used when it is necessary to identify specific medications, illicit substances, and metabolites. Starting Jan. 1, 2022, our claims system will be updated to automate the limitations and exclusions section of our policy regarding HCPCS codes G0481-G0483. [See full article on definitive drug testing.](#)

No Cost/Reduced Cost Drugs, Implants & Devices

Starting **Jan. 1, 2022**, the [No Cost/Reduced Cost Drugs, Implants & Devices, Implants & Devices Reimbursement Policy](#) will be applied to both inpatient and outpatient hospital services for both EmblemHealth and ConnectiCare. This policy has coding guidelines for reporting drugs, devices, and/or implants with their associated procedures when obtained by the provider at full cost, no cost, or at a reduced cost.

Polices Starting March 1, 2022

Intraoperative Neurophysiology Monitoring (IONM) – New Policy – March 1, 2022

Starting **March 1, 2022**, we are introducing a new enterprise-wide policy, [Intraoperative Neurophysiology Monitoring \(IONM\)](#), that will apply to both EmblemHealth and ConnectiCare providers. We are aligning our reimbursement policy with CMS' rules and CPT code 95941 will not be payable.

Allergy Testing & Immunotherapy Policy Expanding to ConnectiCare March 1, 2022

Starting **March 1, 2022**, the [Allergy Testing & Immunotherapy policy](#) that has been in place for EmblemHealth is being adopted across the enterprise and will also apply to ConnectiCare providers.

Same Policy: New Format

The following polices have not changed. They have recently been reviewed and may have been documented in a new format, renamed, and/or added to the Reimbursement Policy table(s):

[Modifiers PO/PN and Clinic Visit Ss \(G0463\)](#).

Reminder: Previously Announced Policy(ies)

We want to call to your attention this previously announced policy which you may start to see impact to your claims:

Multiple Endoscopy-Pay Percent

As announced in June, our Coding Edit Rules were updated to include a policy, Multiple Endoscopy-Pay Percent, that went into effect for claims submitted for dates of service on or after Sept 1, 2021. We now edit endoscopic procedure codes billed to align with CMS guidelines. Edits will apply to multiple endoscopic procedures performed for the same patient, by the same provider, on the same date of service.

[EmblemHealth](#)
[ConnectiCare](#)

CLINICAL CORNER

Medical Policy Updates

All [EmblemHealth](#) and [ConnectiCare](#) Medical Policies are available for download from our provider websites.

New policy for ConnectiCare:

- Cortical Stimulation for Epilepsy (NeuroPace®)

The following are the recently revised policies:

- Artificial Intervertebral Discs (EmblemHealth)
- Breast Implants and Reconstruction (EmblemHealth & ConnectiCare)
- Cortical Stimulation for Epilepsy (NeuroPace®)
- Cryosurgical Ablation for Prostate Cancer (EmblemHealth)
- Medical Guideline – Gene Expression Profiling (EmblemHealth)
- Transcatheter Aortic Valve Replacement (EmblemHealth & ConnectiCare)

Recent Provider News

Check out recent provider news for [ConnectiCare](#) and [EmblemHealth](#).

Keep in Touch



ConnectiCare is a brand name used for products and services provided by ConnectiCare Insurance Company Inc. and its affiliates, members of the EmblemHealth family of companies.

JP 56676