



Provider Newsletter



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Updates and resources from Community Health Plan of Washington to providers and staff.

To get the latest updates, visit our Bulletin Board:

[Provider Bulletin Board](#)

Provider and Staff Training Programs

CHPW is committed to providing training and education to our providers and their staff. We are dedicated to developing your knowledge and understanding through a variety of mandatory and optional training programs.

To access our online training programs, go to our website at www.chpw.org. From the homepage, select "For Providers" and from the menu, select "Orientation, Training and Education."

If you prefer an in-person training session, or if you have any questions regarding our training programs, please contact our Provider Relations Department at Provider.Relations@CHPW.org.

Behavioral Health Trainings

Cultural Competency Trainings:

Cultural and linguistic competency is recognized as an important strategy for improving the quality of care provided to clients from diverse backgrounds. The U.S. Department of Health and Human Services, Office of Minority Health has developed an online training, [Improving Cultural Competency for Behavioral Health Professionals](#). The goal of this e learning program is to help behavioral health professionals increase their cultural and linguistic competency. This training is free and offers continuing education credits for providers.

Trauma Informed Approach Trainings:

The Health Care Authority is offering free trainings across the state on the Trauma Informed Approach (TIA) to care. A trauma informed approach gives all of us working with individuals an acknowledgment of the impacts of trauma on those around us and the tools to recognize the signs of trauma. These trainings are offered to individuals interested in or receiving behavioral health services, their supervisors, agency leadership and the broader community. For additional information about the training and to find a location near you, visit the [HCA TIA website](#).

Reporting Changes in Provider Information

All CHPW providers must give notice to CHPW at least 60 days in advance of any provider changes including, but not limited to:

- Tax identification
- NPI number (individual and/or group)
- Billing (vendor) address, office, and fax phone numbers
- Clinic contact Information (name, phone number, fax, and email) – i.e., Credentialing Coordinator, Billing Manager, Clinic Manager
- Provider additions (include provider effective date)
- Provider terminations (include provider termination date)
- Clinic/facility location additions/changes (if applicable, include effective and termination dates for your clinics and/or facility)



A 60-day advance notice for changes will provide CHPW ample time to update all systems, notify members, and prevent claims payment delays. Provider and group changes should be reported to CHPW by completing a Provider Add Change Term (PACT) Form and/or Clinic and Group Add Change Term Form (available on the [Provider Forms and Tools](#) page of our website). Email your completed form(s) to Provider.Changes@chpw.org.

For new providers requiring credentialing, please submit a full credentialing application to Provider.Credentialing@chpw.org.

For Delegated Credentialing provider groups, please refer to and follow your delegated credentialing agreement. Delegated Credentialing provider groups should submit provider updates via email to DelegatedCredentialing@chpw.org.

Acupuncture Benefit

Community Health Plan of Washington (CHPW) is pleased to announce that we will be covering acupuncture as a value added benefit for Apple Health (Medicaid) adult members (age 18 and over) in all CHPW service area counties starting August 1, 2019. Our initial launch in King County (only) on June 1, 2019 was successful and we are excited to offer this new benefit statewide.

CHPW will cover up to six (6) acupuncture visits per member per year. No referral or prior authorization is required for the six visits. Additional acupuncture visits (after the initial six visits) will require a prior authorization for a visit limit extension in order to be covered. Benefit coverage is limited to acupuncture needling sessions, with or without electrical stimulation. Nutritional supplements, herbs, vitamins and other services are not covered by this acupuncture benefit.

The following acupuncture procedure codes are eligible for reimbursement: 97810, 97811, 97813 and 97814.

More information is available in the [Billing Guidelines: Acupuncture Benefit \(Medicaid\)](#) and the [Member Benefit Grids](#).

CHPW Apple Health members must receive acupuncture services from a qualified CHPW network provider in order to be covered. Out of network acupuncture providers will not be reimbursed by CHPW for these services.

We hope that you will join our network of participating providers. To participate, please visit our provider page at CHPW.org, click "Join our Network," and complete the provider enrollment form. A contract packet will then be sent for your review and consideration.

The Provider Relations Staff will also be contacting you to address any questions or concerns regarding participation. In the meantime, if you should have any questions, you can send them directly to our Provider Relations in box at Provider.Relations@CHPW.org

Receive Your Payment Faster

To improve our business processes and services, we wish to partner with you by having you sign up for electronic funds transfer (EFT) through an Automated Clearing House (ACH).

By using ACH, you will receive payments directly into your checking account and receive a remittance advice (RA) via an email address that you designate.

Because payment via ACH is faster, this is now our preferred payment method.

Please enroll using our [online form](#).

If you have questions, please reach out to Customer Service or directly to your Provider Relations Representative.

National Correct Coding Initiative (NCCI) Edits

During a recent claims audit CHPW identified units of service exceeding the National Correct Coding Initiative (NCCI) allowances that were paid inappropriately for durable medical equipment (DME) and medical supplies. CHPW is reviewing claims and will adjust claims and recoup payments for any claims that do not meet the requirements.

Information about the number of units allowed by NCCI for all services is available at <https://data.medicaid.gov/Uncategorized/NCCI-Medically-Unlikely-Edits-MUEs-8pny-kgh5>. These NCCI unit edits also include NCCI Medically Unlikely Edits (MUEs), which “define for each HCPCS / CPT code the maximum units of service (UOS) that a provider would report under most circumstances for a single beneficiary on a single date of service.” More information about MUEs is available at <https://www.medicaid.gov/medicaid/program-integrity/ncci/index.html>.

Valid National Provider Identifier (NPI) for Medicare Advantage Claims

A valid National Provider Identifier (NPI) number is required when submitting Medicare Advantage claims. Previously, CHPW placed a hold on claims and searched our claims system for a valid NPI for the attending provider. If a valid NPI was found, the claims were released from hold and processed as usual.

CHPW received notification that the Centers for Medicare and Medicaid Services (CMS) is implementing software changes to its systems for accepting and processing encounter data. CMS will validate the billing provider NPI submitted for all professional, institutional, and durable medical equipment (DME) encounters submitted by Medicare Advantage Organizations (MAOs), including CHPW, for all dates of service (DOS) from 01/01/2011 forward. Encounters with invalid NPIs will be rejected.

CHPW will follow a new process to ensure the encounters we submit to CMS include valid NPIs. Key steps in our new process include:

1. We will validate NPIs via data obtained from the CMS National Plan and Provider Enumeration System (NPPES), <https://nppes.cms.hhs.gov/#/>.
2. We will deny claims where the submitted billing NPI is not active in NPPES, using message code CDNBR (“The submitted billing NPI number is not valid per the National Plan and Provider Enumeration System (NPPES)”). Providers may resubmit the claim(s) with a valid NPI.

Questions?

If you have general provider relations and contracting questions, please email provider.relations@chpw.org.

If you have questions about the NPI requirement, or if you have general questions about other topics, please email Customer Service at customer care@chpw.org.

Billing Requirements for Apple Health Behavioral Health Providers

As a reminder, a valid National Provider Identifier (NPI) number and a rendering provider taxonomy are required when billing for Washington Apple Health (Medicaid) behavioral health services.

Please see the following Washington State Health Care Authority resources for more information:

- Service Encounter Reporting Instructions (SERI; “Provider Types” section), <https://www.hca.wa.gov/billers-providers-partners/behavioral-health-recovery/service-encounter-reporting-instructions-seri>
- Regional resources, <https://www.hca.wa.gov/about-hca/healthier-washington/regional-resources> [The Integrated Managed Care SERI, National Provider ID (NPI) & Taxonomies FAQs are included under the “General” heading.]
- NPI fact sheet, <https://www.hca.wa.gov/assets/program/National-Provider-Identifier-Fact-Sheet.pdf>

New Provider Directory

Our new and improved Provider Directory is now live!

You can use the same Find A Doctor link as before.

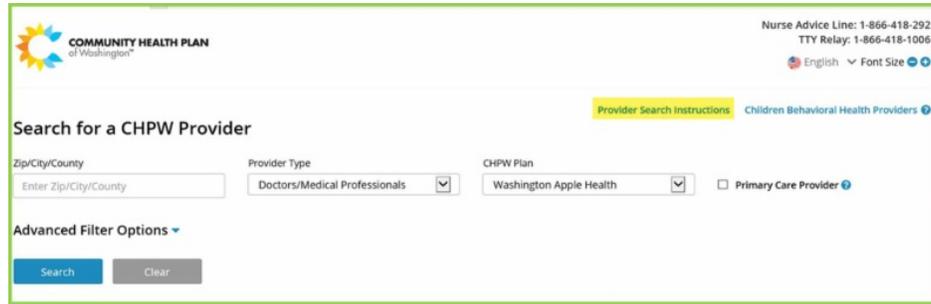
- Go to <https://www.chpw.org/provider-search/> to search on behalf of CHPW Apple Health/Medicaid members.
- Go to <https://healthfirst.chpw.org/find-a-doctor/> to search on behalf of CHPW Medicare members

You may use the directory without registering. If you choose to register, after you log in, the directory will return information based on whether you are a CHPW Apple Health or Medicare provider, your address, etc.

The new directory will have a more organized look and feel with many new features:

- Quick search by zip code, city, or county and health plan
- One click to search primary care providers (PCPs) only
- Use advanced filters from the home page
- Quick search by provider type (doctor/medical professionals, facility, hospital, behavioral health, durable medical equipment, pharmacy)
- Added filters on the left side of your search results let you quickly and easily see more information about the provider

More information is available on our Provider Bulletin Board, <https://www.chpw.org/for-providers/bulletin-board/> (New Online Provider Search Tool topic). In addition, when you access the new directory, you can click the **Provider Search Instructions** link for details about searching in the new tool.



The screenshot shows the 'Search for a CHPW Provider' interface. At the top left is the logo for 'COMMUNITY HEALTH PLAN of Washington'. At the top right, it lists 'Nurse Advice Line: 1-866-418-292' and 'TTY Relay: 1-866-418-1006', along with a language dropdown set to 'English' and a font size control. Below this is a search bar with the text 'Enter Zip/City/County'. To the right of the search bar are dropdown menus for 'Provider Type' (set to 'Doctors/Medical Professionals') and 'CHPW Plan' (set to 'Washington Apple Health'). There is also a checkbox for 'Primary Care Provider'. A 'Search' button and a 'Clear' button are at the bottom left. A yellow highlight is over the 'Provider Search Instructions' link at the top right of the search area.

Your Information in the Provider Directory

You can email provider.changes@chpw.org at any time to update your information in the Provider Directory. Read the Provider Directory Quality Assurance and Provider Roster FAQ bulletins for more information about how CHPW works to ensure the accuracy of our Provider Directory: <https://www.chpw.org/for-providers/bulletin-board/>.

Pharmacy Clinical Coverage Criteria Updates for May-July 2019

PM136 Epoetin and PM140 Darbepoetin:

CHPW criteria was updated to match policy from WA HCA Hematopoietic Agents: Erythropoiesis-Stimulating agents Medical policy no.82.40.10 for Apple Health Medicaid Members.

Criteria for reauthorization has changed for treatment of anemia associated with chronic kidney disease (CKD) including patients on dialysis and not on dialysis. The hemoglobin level must be less than 11g/dL. Previously, it was 11.5g/dL.

PM142 Ocrelizumab:

CHPW criteria was updated to match policy from WA HCA Psychotherapeutic and Neurological Agents – MISC : Multiple Sclerosis Agents: Ocrelizumab (Ocrevus) Medical Policy no. 62.40.50.60 for Apple Health Medicaid Members.

Documentation is now required demonstrating oligoclonal IgG bands in cerebral spinal fluid; T2 lesions on brain or spinal cord imaging; and Ambulatory stage of disease (EDSS < 7).

PM151 Buprenorphine injection:

Criteria was added that patient must be maintained on buprenorphine oral therapy for 6 months or longer without any need for supplemental dosing or adjustments.

PM132 Trastuzumab (Herceptin):

Endometrial carcinoma and salivary gland tumor were added as approved indications. NSCLC was removed as an approved indication.

PM139 Immune globulin Subcutaneous:

Chronic inflammatory demyelinating polyneuropathy was added as a new indication.

We welcome your feedback and future topic ideas.
Email us at: Provider.Relations@chpw.org