



arkansas
health & wellness™

Third Quarter Webinar
September 11th, 2019

Audio Dial In: 1-646-558-8656

Webinar ID: 812 869 114

Please install and test the Zoom application
before we begin today's webinar



Housekeeping



- Please mute your phone
- Please don't put this call on hold – we'll all hear the hold music

Disclaimer



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Acronyms

Acronym	Definition
CPC+	Comprehensive Primary Care Plus
DHS	Department of Human Services
HEDIS	Healthcare Effectiveness Data and Information Set
HMO	Health Maintenance Organization
ID	Identification
MAPD	Medicare Advantage Prescription Drug
NPI	National Provider Identifier
P4P	Pay for Performance
PCMH	Patient Centered Medical Homes
PCP	Primary Care Physician
TIN	Tax Identification Number

Agenda

- AHW
- Ambetter
- Allwell
- Q3 Updates
- Important Reminders

Provider Relations Team



Kari Murphy
Northwest Region



Valinda Perkins
Central Region



Christopher Ishmael
Northeast Region

Provider Relations Team



Tanya Brooks
Southwest Region



Meghan Hunt
North Central Region



Patrice Eackles
Southeast Region

Where to Find Us

FOR MEMBERS **FOR PROVIDERS** **GET INSURED**

FOR PROVIDERS

- Login
- Become a Provider
- Pre-Auth Check
- Pharmacy
- Provider Resources
- QI Program
- Provider News
- Provider Relations

Provider Relations

Arkansas Health & Wellr Associate Territories

- Login
- Become a Provider
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- Provider Relations



Christopher Ishmael

Kari Murphy

Meghan Hunt

Patrice Eckles

Tanya Brooks

Valinda Perkins

3/11/2019

Join Our Email List Today



- Receive current updates:
 - <https://www.arhealthwellness.com/providers/resources.html>
- Choose the network you wish to receive information for

Provider Resources

Arkansas Health & Wellness provides the tools and support you need to deliver the best quality of care. Please view our listing on the left, or below, that covers forms, guidelines, helpful links, and training.

- For Ambetter Information, please visit our [Ambetter website](#).
- For Allwell Information, please visit our [Allwell website](#).

Interested in getting the latest alerts from Arkansas Health and Wellness? Fill out the form below and we'll add you to our email subscription.

Name *

Position/Title *

Email *

Phone Number *

Group Name *

Group NPI * Tax ID *

Network*

Ambetter

Allwell



Ambetter from Arkansas Health and Wellness

Website Home Page

ambetter.™



FROM  arkansas
health & wellness.

[Home](#) [Find a Doctor](#) [Login](#) [Contact](#)

Contrast On Off [a](#) [a](#) [a](#) language ▾

FOR MEMBERS

FOR PROVIDERS

HOW TO ENROLL

[Pay My Premium](#)

[Arkansas Works](#) 

[Login](#)

[Find a Provider](#) 

[Insurance Education](#) 

[Our Health Plans](#) 

[Health & Wellness](#) 

[For Members](#) 

[For Providers](#) 

[For Brokers](#) 

[Find a Broker](#)

[For Navigators](#)

[Newsroom](#)

[Community Events](#)

Quality health plans
that fit your needs
and budget.

[Pay My Premium](#)

Ambetter from Arkansas Health & Wellness



FIND A DOCTOR

Search for doctors, hospitals, and specialists near you.



FOR MEMBERS

Your healthcare doesn't have to be complicated. We have the tools you need to manage your health all in one place.



MY HEALTH PAYS™ REWARDS

Our My Health Pays™ program rewards you for keeping up with your health.



Features for Providers

Login
Find a Provider +
Insurance Education +
Our Health Plans +
Health & Wellness +
For Members +
For Providers -
Login
Join Our Network
Pharmacy
Provider Resources
Provider Webinars
Pre-Auth Check
Clinical & Payment Policies
Provider News
For Brokers +
Find a Broker
For Navigators
Newsroom
Community Events

Note: If you are seeing an Ambetter member who resides in another state, they will not show up in the provider portal. Our customer call center at (844) 818-1633 can verify eligibility and benefits for any out-of-state members for you. The call center staff can be reached between 8 AM and 5 PM.

Stay Connected

Get the latest alerts and news from Arkansas Health and Wellness.

[SIGN UP](#)

Healthy partnerships are our specialty.

With Ambetter, you can rely on the services and support that you need to deliver the best quality of patient care. You're dedicated to your patients, so we're dedicated to you.

When you partner with us, you benefit from years of valuable healthcare industry experience and knowledge. We're dedicated to helping your practice run as efficiently as possible, which is why we always strive for prompt claims processing.

At the end of the day, our job is to make yours easier. That way, you can focus on your patients. They've always been able to count on you. And, as a partner with Ambetter, you'll be able to count on us.

Login to Your Account



Access your secure provider information any time.

[Login Now](#)

Pre-Auth Check



Use our tool to see if a pre-authorization is needed.

[Check Now](#)

Provider Resources



Use our helpful resources to deliver the best quality of care.

[Go Now](#)



Provider Resources

- Find a Provider +
- Insurance Education +
- Our Health Plans +
- Health & Wellness +
- For Members +
- For Providers -
- Login
- Join Our Network
- Pharmacy
- Provider Resources
- Provider Webinars
- Pre-Auth Check
- Clinical & Payment Policies
- Provider News
- For Brokers +
- Find a Broker
- For Navigators
- Newsroom
- Community Events

Reference Materials

- [2019 Provider and Billing Manual \(PDF\)](#)
- [Quick Reference Guide \(PDF\)](#)
- [ICD-10 Information](#)
- [Payspan \(PDF\)](#)
- [Secure Portal \(PDF\)](#)
- [Wellness and Preventive Services Fact Sheet \(PDF\)](#)

Medical Management

- [Pre-Auth Needed?](#)
- [Prior Authorization Guide \(PDF\)](#)
- [Inpatient Prior Authorization Fax Form \(PDF\)](#)
- [Outpatient Prior Authorization Fax Form \(PDF\)](#)
- [Grievance and Appeals](#)

Behavioral Health

- [Discharge Consultation Form \(PDF\)](#)
- [Electroconvulsive Therapy \(ECT\) Authorization Request Form \(PDF\)](#)
- [Intensive Outpatient/Day Treatment Form for Mental Health/Chemical Dependency \(PDF\)](#)
- [Outpatient Treatment Request Form \(PDF\)](#)
- [OTR Tip Sheet \(PDF\)](#)
- [Psychological or Neuropsych Testing Authorization Request Form \(PDF\)](#)

Claims and Claim Payment

- [Electronic Transactions \(PDF\)](#)
- [Claim Dispute Form \(PDF\)](#)



Provider Webinars

- Find a Provider
- Pay My Premium
- Find a Broker
- Insurance Education
- Our Health Plans
- Health & Wellness
- For Members
- Arkansas Works
- For Providers
- Login
- Join Our Network
- Pharmacy
- Provider Resources
- Provider Webinars
- Pre-Auth Check
- Clinical & Payment Policies
- Provider News

Ambetter from Arkansas Health & Wellness Provider Webinars

This Provider Webinar Series is designed to offer Arkansas Health & Wellness providers and their office staff the opportunity to learn from subject matter experts and ask questions about current topics and best practices. Registration is free and each webinar will be approximately one hour in length.

Provider Webinar Sign-Up

Thank you for your interest in the Arkansas Health & Wellness Provider Webinar Series. Click the button below to sign up for future webinars.

[Sign Up for Future Webinars](#)

Previous Webinars

Risk Adjustment & Incentives
December 14, 2017

This quarter we will cover topics related to Risk Adjustment, Coding Tips, Risk Gaps, Disclosure of Ownership forms, Pay for Performance, and our new Medicare Advantage sister-product, Allwell. [View the Risk Adjustment & Incentives webinar.](#)

Quality and Incentives
June 15, 2017

Arkansas Works 2.0



- Arkansas Works – formally known as Private Option or Healthcare Independence Program:
 - Medicaid Expansion Eligible
 - Enroll through local DHS office or <https://access.arkansas.gov>
- Work Requirements:
 - ✓ Currently not in effect

The screenshot shows the Ambetter website interface. At the top right, there is a search bar and navigation links for Home, Find a Doctor, Login, and Contact. Below this are links for Contrast (On/Off) and language settings. The main navigation bar includes sections for FOR MEMBERS, FOR PROVIDERS, and HOW TO ENROLL. A sidebar on the left lists various services: Find a Provider, Pay My Premium, Insurance Education, Our Health Plans, Health & Wellness, For Members, Arkansas Works (highlighted with a yellow circle), For Providers, For Brokers, For Navigators, Newsroom, and Community Events. The main content area features a message about Open Enrollment being closed, a 'Learn More' button, and three promotional tiles: 'Find the Right Health Plan', 'For Members', and 'My Health Pays™ Rewards Program'. Below these is a 'Find A Provider Maintenance' notice and the 'Ambetter from Arkansas Health & Wellness' logo and tagline.



Secure Provider Portal

- Arkansas Health & Wellness is here to provide the tools and support you need to deliver the best quality of care. Our Secure Provider Portal offers an easy way for you to manage patient administrative tasks quickly

FOR MEMBERS	FOR PROVIDERS	HOW TO ENROLL
Quality health plans that fit your needs and budget. Pay My Premium	Login Join Our Network Pharmacy Provider Resources Provider Webinars Pre-Auth Check Clinical & Payment Policies Provider News	

Ambetter from Arkansas Health & Wellness



FIND A DOCTOR
Search for doctors, hospitals, and specialists near you.



FOR MEMBERS
Your healthcare doesn't have to be complicated. We have the tools you need to manage your health all in one place.



MY HEALTH PAYS™ REWARDS
Our My Health Pays™ program rewards you for keeping up with your health.

Secure Provider Portal – Create An Account



- Registration is free and easy

A screenshot of the Secure Provider Portal website. The page has a dark blue header with navigation links: "Features", "Join Our Network", and "CREATE ACCOUNT". Below the header is a section titled "The Tools You Need Now!" with the subtext "Our site has been designed to help you get your job done." To the left of this section are three icons with corresponding text: a thumbs up icon for "Check Eligibility" (Find out if a member is eligible for service.), a checkmark icon for "Authorize Services" (See if the service you provide is reimbursable.), and a dollar sign icon for "Manage Claims" (Submit or track your claims and get paid fast.). In the center-right, there is a "Login" form with fields for "User Name (Email)" (containing "name@domain.com") and "Password", and a green "Login" button. Below the login form is a link for "Forgot Password / Unlock Account". Below the login form is a section titled "Need To Create An Account?" with the text "Registration is fast and simple, give it a try." and a prominent orange "Create An Account" button. Below this is a section titled "How to Register" with the text "Our registration process is quick and simple. Please click the button to learn how to register." and two blue buttons: "Provider Registration Video" and "Provider Registration PDF". A red circle highlights the "Create An Account" button, and a red arrow points to it from the right.



Secure Portal - PCP Reports

- PCP Reports:
 - PCP reports available on Ambetter's secure provider web portal are generated on a monthly basis and can be exported into a PDF or Excel format
- PCP Reports Include:
 - Patient List with Care Gaps
 - Emergency Room Utilization
 - Rx Claims Report
 - Members flagged for Disease and Case Management



Ambetter Provider Incentives

- CPC+ and PCMH providers earn:
 - Per PMPM monthly care management fee
 - \$100 bonus for each Annual Wellness Visit performed
- All Ambetter providers are part of the P4P program:
 - HEDIS Measures available for payments
 - Paid Per Measure to the Attributing PCP
 - \$30 - \$100 potential pay out per measure
 - Paid 3x per year
 - Patient list with open care gaps are available on the secure provider portal

HEDIS



HEDIS measures final rates for all Ambetter reports. Please note that the anchor date for closing these gaps is December 31, 2019.

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis (AAB)		18.6%	1 Star
Low Back Pain (LBP)		61.3%	1 Star
Medication Management for People with Asthma (MMA)		41.6%	1 Star
Annual Monitoring for Patients on Persistent Medications (MPM)		85.9%	3 Star
Controlling Blood Pressure (CBP)		41.2%	1 Star
Comprehensive Diabetes Care (CDC)	Retinopathy Eye Exams	37.5%	2 Star
	A1C value less than 8.0	34.4%	1 Star
	A1C Testing Done	84.2%	1 Star
	Nephropathy Monitoring	87.3%	1 Star
Cervical Cancer Screening (CCS)		46.1%	1 Star
Breast Cancer Screening (BCS)		49.4%	1 Star
Colorectal Screening (COL)		40.1%	1 Star
Adult BMI Assessment (ABA)		84.6%	3 Star



Allwell from Arkansas Health and Wellness

Medicare Advantage Plan Expansion for 2019

allwell.

TM

WE ARE EXPANDING TO 16 ADDITIONAL COUNTIES

As an Allwell provider, you can now serve all Allwell members in Arkansas regardless of the county they live in.

Eligible residents in your county will be able to enroll with Allwell this year during the Annual Enrollment Period.

Currently Serving

Benton
Crawford
Garland
Pulaski
Saline
Sebastian
Washington

2019 Additions

Faulkner
Conway
Lonoke
Craighead
Boone
Pope
Hot Spring
Scott
Logan
Carroll
Clark
Greene
Franklin
Baxter
Madison
Marion



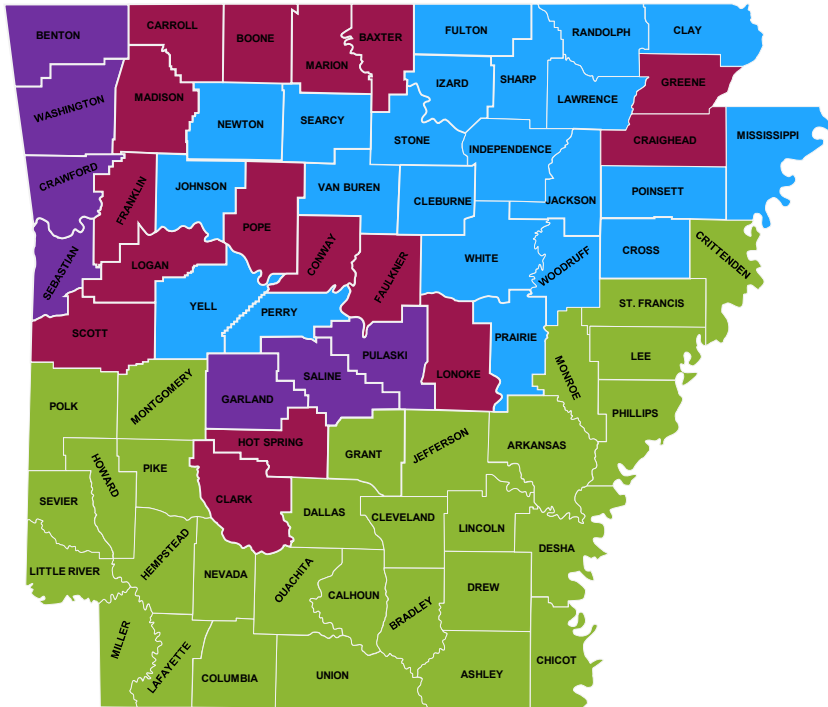
FROM  arkansas
health & wellness.

1-855-565-9518 (TTY: 711)
Allwell.ARHealthWellness.com



TM

Medicare Advantage - Arkansas



2020 Expansion Counties*:

- Johnson
- Prairie
- Clay
- Yell
- Cross
- Independence
- Poinsett
- Fulton
- Newton
- Izard
- White
- Searcy
- Woodruff
- Mississippi
- Lawrence
- Perry
- Cleburne
- Randolph
- Van Buren
- Sharp
- Stone
- Jackson

*Filed with CMS. Pending approval.

Allwell Identification Cards

Allwell offers plans that utilize two distinct networks of providers, Allwell Medicare HMO and Allwell Medicare HMO *Select*.

Allwell members do not have Out of Network benefits.

When searching for a participating provider on the Find A Provider tool, please make sure you select the network that corresponds to the network listed on the members identification card.



 allwell. from Arkansas Health & Wellness		Allwell Medicare HMO CMS#: XXXXX-XXX Effective: <mm/dd/yyyy>
MEMBER INFORMATION Name: <First Last> Member ID#: <XXXXXXXXXX-XX> Issuer ID: <(80840)> <9151014609>		PHARMACY INFORMATION  Prescription Drug Coverage
PROVIDER INFORMATION PCP Name: <> PCP Phone: <>		RX Claims Processor: <CVS Caremark®> RXBIN: <004336> RXPCN: <MEDDADV> RXGRP: <RX8909>

 allwell. from Arkansas Health & Wellness		Allwell Medicare Select HMO CMS#: XXXXX-XXX Effective: <mm/dd/yyyy>
MEMBER INFORMATION Name: <First Last> Member ID#: <XXXXXXXXXX-XX> Issuer ID: <(80840)> <9151014609>		PHARMACY INFORMATION  Prescription Drug Coverage
PROVIDER INFORMATION PCP Name: <> PCP Phone: <>		RX Claims Processor: <CVS Caremark®> RXBIN: <004336> RXPCN: <MEDDADV> RXGRP: <RX8909>



Secure Portal

- Arkansas Health & Wellness is here to provide the tools and support you need to deliver the best quality of care. Our Secure Provider Portal offers an easy way for you to manage patient administrative tasks quickly
- Visit the portal at Provider.ARHealthWellness.com

allwell. FROM arkansas health & wellness

Home Arkansas Health & Wellness search

Contrast On Off a a language

LOGIN FIND A DOCTOR OR PHARMACY CONTACT US

About Allwell
Our Health Plans
How to Enroll
Pay My Premium
Find a Doctor or Pharmacy
Drug and Pharmacy Information
Medicare Reference Documents
Member Rights and Resources
CMS STAR Rating
Member Login
For Providers
For Brokers

Beginners Guide to Medicare
Plans with Low or \$0 Premiums
Learn More about Allwell

Welcome to Allwell from Arkansas Health and Wellness, your Medicare Advantage plan in Arkansas.

Important Notifications

2018 BENEFIT UPDATE: MEDICARE DIABETES PREVENTION PROGRAM

Secure Provider Portal - Features



- Information contained on our Secure Provider Portal includes:
 - Member Eligibility
 - Patient Listings
 - Health Records & Care Gaps
 - Authorizations
 - Case Management Referrals
 - Claims Submissions & Status
 - Corrected Claims & Adjustments
 - Payments History
 - PCP Reports
- A login is required to access the secure portal
- If you have not logged in for more than 90 days, your account will automatically lock and require you to contact us for a password reset

Allwell Provider Incentives



- Allwell offers a Care Management fee for CPC+ providers for Track 1 and Track 2 providers:
 - **ALL** Allwell providers are eligible for a \$100 bonus for each Annual Wellness Visit performed
 - Allwell offers a P4P program for Quality improvement for 10 HEDIS measures paid quarterly.

Allwell Provider Incentives



Sub Measure	Measure Incentive	Score	Compliant	Qualified	Target 1	Target 2	Target Achieved	Max Target Gap	Bonus Amount
ANNUAL MONITOR RX 18 - COMBINED RATE	\$100.00	80.00%	4	5	84.00%	87.00%	--	1	\$0.00
AVOID ABX BRONCH 18 - AVOID ABX BRONCH 18	\$80.00	66.67%	2	3	26.00%	33.00%	Target 2	0	\$160.00
BRST CNCR N MCARE 18 - BRST CNCR N MCARE 18	\$40.00	60.00%	3	5	70.00%	74.00%	--	1	\$0.00
CERVICAL CANCER 18 - CERVICAL CANCER 18	\$40.00	31.82%	21	66	56.00%	65.00%	--	22	\$0.00
COLORECTAL CANCER 18 - COLORECTAL CANCER SCREENING	\$40.00	20.00%	4	20	52.00%	60.00%	--	8	\$0.00
COMP DIABETES 18 - A1C TEST	\$30.00	57.14%	4	7	92.00%	94.00%	--	3	\$0.00
COMP DIABETES 18 - NEPH ATTN	\$30.00	100.00%	7	7	91.00%	93.00%	Target 2	0	\$210.00
MED MGMT ASTHMA 18 - TOTAL 5 TO 64 75% COVERED	\$85.00	0.00%	0	0	53.00%	58.00%	--	0	\$0.00
QRS PDC - PDC ACE/ARB	\$40.00	0.00%	0	0	75.00%	79.00%	--	0	\$0.00
QRS PDC - PDC ORAL DIABETES RX	\$30.00	0.00%	0	0	69.00%	74.00%	--	0	\$0.00
QRS PDC - PDC STATINS	\$40.00	0.00%	0	0	69.00%	74.00%	--	0	\$0.00
USE IMG LOW BACK 18 - IMAGING FOR LOW BACK PAIN	\$80.00	100.00%	3	3	74.00%	79.00%	Target 2	0	\$240.00

Q3 Topics

- Accessing Provider Analytics
- Top Claim Rejections
- Clinical & Payment Policies

Access Provider Analytics



The screenshot shows the Ambetter provider dashboard. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, and Messaging. Below this is a header area with a dropdown menu set to "Ambetter" and a "GO" button. The main content area is divided into several sections:

- Quick Eligibility Check for Ambetter:** A form with two input fields: "Member ID Only" (containing "123456789 or Smith") and "Birthdate" (containing "mm/dd/yyyy"). A green "Check Eligibility" button is positioned to the right of the birthdate field.
- Recent Claims:** A table with four columns: STATUS, RECEIVED DATE, MEMBER NAME, and CLAIM NO. The table contains five rows of data, all with a status of "P" and a received date of "08/30/2019". The member names and claim numbers are redacted with blue boxes.
- Welcome:** A sidebar menu with several options: "Add a TIN to My ACCOUNT", "Manage Accounts", "Reports", "Patient Analytics", and "Provider Analytics". The "Provider Analytics" option is highlighted with a red border.
- Recent Activity:** A section with a "Date" and "Activity" header, currently empty.
- Go Paperless:** A section with a heading "Empower your practice with electronic settlement. Now you can receive EFT's and ERA's without investing in new technology and without changes to current systems." and a green "PaySpan Site" button.

Provider Analytics (cont.)



To better collaborate and support provider efforts to care for our members, Daily Care Gaps information will be available to providers through Availity.

Availity's platform helps providers close care gaps and improve member health outcomes through real-time analytics. HEDIS care gap information is updated daily by Interpreta using data from pharmacy, membership and claims. This ensures providers have the most up-to-date information to provide the best care possible.

The information provided by Interpreta includes

- The date a member should be scheduled to see a provider when a gap has not yet been closed
- Percentages of total care gaps that have been closed
- Total care gaps that need to be closed
- Total care gaps that are past deadline for closure

Top Claim Rejections



1. Member not valid at DOS
2. Invalid or Missing Taxonomy Code
3. Invalid Member DOB
4. Original claim number required
5. Invalid Member
6. A data segment with 'Must Use' status is missing.
7. Payer Claim Control Number is not used for first time submitted claim.
8. HCPCS Procedure Code is invalid in Professional Service.
9. UPIN for Referring Provider is invalid.
10. HCPCS Modifier Code is invalid in Institutional Service Line.
11. National Provider ID (NPI) is invalid for Billing Provider Name.

Clinical & Payment Policies



What are Clinical Policies?

- A set of guidelines used to assist in administering health plan benefits, either by prior authorization or payment rules.

What are Payment Policies?

- A set of guidelines used to assist in administering payment rules based on generally accepted principles of correct coding

Clinical & Payment Policies

<http://www.arhealthwellness.com>



FOR PROVIDERS



Provider Resources	⊖
Manuals, Forms and Resources	
Provider Training	⊕
Eligibility Verification	
Incentives Statement	
Integrated Care	
Provider Webinars	
Prior Authorization	
National Imaging Associates (NIA)	
Report Fraud, Waste and Abuse	
Patient Centered Medical Home Model	
Electronic Transactions	⊕
Clinical & Payment Policies	

Clinical & Payment Policies



Ambetter Policies

AMBETTER CLINICAL POLICIES +

AMBETTER PAYMENT POLICIES +

AMBETTER PHARMACY POLICIES +

Allwell Policies

ALLWELL CLINICAL POLICIES +

ALLWELL PAYMENT POLICIES +

ALLWELL PHARMACY POLICIES +

Clinical & Payment Policies



- CC.PP.057
 - Under modifier -25 correct coding principles, a patient may be seen by the physician for both a preventative evaluation and management (E&M) service and a problem-oriented E&M service during the same patient encounter. Duplicate payments occur when a provider is reimbursed for resources not directly consumed during the provision of a service.

NIA's Prior Authorization Program



NIA's Prior Authorization Program

Only non-emergent procedures performed in an outpatient setting require authorization with NIA.

Procedures Requiring Authorization

- CT/CTA
- CCTA
- MRI/MRA
- PET Scan
- Myocardial Perfusion Imaging
- MUGA Scan
- Stress Echocardiography
- Echocardiography

Excluded from Program: Procedures Performed in the Following Settings:

- Hospital Inpatient
- Observation
- Emergency Room
- Urgent Care
- Surgery Center

NIA to Ordering Provider: Request for Additional Clinical Information



CC_TRACKING_NUMBER

FAXC



ABDOMEN - PELVIS CT
PLEASE FAX THIS FORM TO: 1-800-784-6864

Date: TODAY

ORDERING PHYSICIAN:	REQ_PROVIDER		
FAX NUMBER:	FAX_RECIP_PHONE	TRACKING NUMBER:	CC_TRACKING_NUMBER
RE:	Authorization Request	MEMBER ID:	MEMBER_ID
PATIENT NAME:	MEMBER_NAME		
HEALTH PLAN:	HEALTH_PLAN_DESC		
We have received your request for Abdomen - Pelvis CT. As we are unable to approve based on the information provided to date, please respond to this fax as soon as possible.			

Study Requested was: Abdomen - Pelvis CT
For documentation **ALWAYS PROVIDE:**

1. The most recent office visit note
2. Any office visit note since initial presentation of the complaint/problem requiring imaging
3. Any supporting documentation such as diagnostic or imaging reports that corroborate abnormalities or the requirement for follow-up imaging

Further specifics and examples are listed below:

FAX QUESTIONS_ADDL
aa1fadd1faxquestions

a) **Abdominal pain evaluation:**

Provide details regarding history of abdominal pain (history- onset, trauma mechanism, if relevant, effect on/change w/ bowel or urinary habits, relevant past medical history- bowel disease or surgery, etc; examination, including pelvic/rectal examinations; diagnostic work-up- submit reports demonstrating abnormalities; prior treatment/consultation, if any).

b) **Abnormal finding on examination, imaging or laboratory test:**

Provide the office visit note(s) or lab/imaging report that documents the abnormality found and any needed explanation of the relevance to the request for abdomen/pelvis CT imaging

c) **Suspicion of cancer:**

Provide the office visit/consultation notes indicating rationale for suspicion of cancer, along with relevant examination, diagnostic/imaging reports indicating the relevance of an imaging test in further evaluation of a possible malignancy

d) **History of cancer:**

Provide the office visit note describing the current symptoms or issue and the history; report of the biopsy and/or relevant treatment reports that will document the cell type of the cancer and treatment to date.

e) **Pre-operative evaluation:**

Provide the office visit note/consultation by the surgical specialist indicating the operation planned and indications. It is usually expected that planned pre-operative evaluation will be ordered by the surgeon in conjunction with surgical scheduling so that the two coincide within a four week/30 day period.

f) **Post-operative evaluation:**

- A fax is sent to the provider detailing what clinical information that is needed, along with a Fax Coversheet
- We stress the need to provide the clinical information as quickly as possible so we can make a determination
- Determination timeframe begins after receipt of clinical information
- Failure to receive requested clinical information may result in non certification

CC_TRACKING_NUMBER

FAXC



Notification of Determination

- **Approval Notification**

- Ordering Provider – Fax
- Member - Written

- **Denial Notification**

- Ordering Provider – Fax
- Member - Written

- **Authorization Validity Period**

Authorizations will be valid 30 from date of request.

- **Appeal Instructions**

- In the event of a denial, providers are asked to follow the appeal instructions provided in their denial letter.

NIA's Urgent Authorization Process



arkansas
health & wellness™

- **Urgent Authorization Process:**

- If an urgent clinical situation exists outside of a hospital emergency room, please contact NIA immediately with the appropriate clinical information for an expedited review at 1-866-500-7685

Ordering Provider: Getting Started on RadMD.com



Everyone in your organization is required to have their own separate user name and password due to HIPAA regulations.

STEPS:

1. Click the “New User” button on the right side of the home page.
2. Select “Physicians office that orders procedures”
3. Fill out the application and click the “Submit” button.
 - You must include your e-mail address in order for our Webmaster to respond to you with your NIA-approved user name and password.

Offices that will be both ordering and rendering should request ordering provider access, this will allow your office to request authorizations on RadMD and see the status of those authorization requests.

1

RadMD Sign In
24/7 online access for imaging facilities and health plans to NIA's RadMD Web site
Sign In **New User**
Track an Authorization
Authorization Tracking Number **Go**

2

Which of the following best describes your company?

-- Please Select an Appropriate Description --

-- Please Select an Appropriate Description --
Imaging Facility or Hospital that performs radiology exams
Health Insurance company
Physician's office that orders radiology exams
Cancer Treatment Facility or Hospital that performs radiation oncology procedures
Physicians office that prescribes radiation oncology procedures

3

New Account User Information		Your Direct Report	
Choose a User ID: <input type="text"/>		The manager or supervisor responsible for terminating your access. This cannot be yourself.	
First Name: <input type="text"/>	Last Name: <input type="text"/>	First Name: <input type="text"/>	Last Name: <input type="text"/>
Phone: <input type="text"/>	Fax: <input type="text"/>	Phone: <input type="text"/>	Email: <input type="text"/>
Email: <input type="text"/>	Confirm Email: <input type="text"/>		
Company Name: <input type="text"/>	Job Title: <input type="text"/>		
Address Line 1: <input type="text"/>	Address Line 2: <input type="text"/>		
City: <input type="text"/>	State: [[State]] <input type="text"/>		
Zip: <input type="text"/>			
Submit			

Rendering Provider: Getting Started on RadMD.com



IMPORTANT

- Everyone in your organization is required to have their own separate user name and password due to HIPAA regulations.
- Designate an “Administrator” for the facility who manages the access for the entire facility.

STEPS:

1. Click the “New User” button on the right side of the home page.
2. Select “Facility/office where procedures are performed”
3. Fill out the application and click the “Submit” button.
 - You must include your e-mail address in order for our Webmaster to respond to you with your NIA-approved user name and password.

NOTE: On subsequent visits to the site, click the “Sign In” button to proceed.

If you have multiple staff members entering authorizations and you want each person to be able to see all approved authorizations, they will need to register for a rendering username and password. The administrator will have the ability to approve rendering access for each employee. This will allow users to see all approved authorizations under your organization.

1

RadMD Sign In
24/7 online access for imaging facilities and health plans to NIA's RadMD WebMD
Sign In New User
Track an Authorization
Authorization Tracking Number Go

2

-- Please Select an Appropriate Description --
Physician's office that orders procedures
Facility/office where procedures are performed
Health Insurance company
Cancer Treatment Facility or Hospital that performs radiation oncology procedures
Physicians office that prescribes radiation oncology procedures

3

New Account User Information		Your Direct Report	
Choose a User ID: <input type="text"/>		The manager or supervisor responsible for terminating your access. This cannot be yourself.	
First Name: <input type="text"/>	Last Name: <input type="text"/>	First Name: <input type="text"/>	Last Name: <input type="text"/>
Phone: <input type="text"/>	Fax: <input type="text"/>	Phone: <input type="text"/>	Email: <input type="text"/>
Email: <input type="text"/>	Confirm Email: <input type="text"/>		
Company Name: <input type="text"/>	Job Title: <input type="text"/>		
Address Line 1: <input type="text"/>	Address Line 2: <input type="text"/>		
City: <input type="text"/>	State: <input type="text"/>		
Zip: <input type="text"/>			
<input type="button" value="Submit"/>			

When to Contact National Imaging Associates, Inc. (NIA)



Providers:

Ordering Providers:

- To initiate a request for an authorization please contact NIA via website, www.RadMD.com or via toll-free number 1-877-617-0390.
- To check the status of an authorization please contact NIA via website, www.RadMD.com or Interactive Voice Response (IVR) System at 1-877-617-0390.

Rendering Providers:

- To check the status of an authorization please contact NIA via website, www.RadMD.com or Interactive Voice Response (IVR) System at 1-877-617-0390.

Ordering Providers and Rendering Providers:

- For assistance or technical support for RadMD, please contact RadMD Help Desk via e-mail RadMDSupport@magellanhealth.com or 877-80-RadMD (877-807-2363).
- For any provider education requests or questions specific to NIA and the Medical Specialty Solutions Program, Providers may contact Leta Genasci, Provider Relations Manager lgenasci@magellanhealth.com or 1-800-450-7281 Ext. 75518.

Important Reminders



Arkansas Health & Wellness Provider Webinars

AHW Q2 Provider Webinar

Summary: The webinar for this quarter will cover topics related to annual wellness visit incentives, top denials & rejections and policy updates.

Available Online Webinar Sessions*

- June 6, 2019 - 10AM - AHW Q2 Provider Webinar
- June 6, 2019 - 3PM - AHW Q2 Provider Webinar

Please choose which webinar(s) you would like to attend. Registration ends one hour before the scheduled class time.

First Name *

Last Name *

Position/Title *

Tax ID *

Group Name *

Group NPI *

Email *

If you have a secure Provider Portal account, please register with the email address associated with your account.

What other topics would you like to see offered as webinars?

- Claims / billing
- Prior authorization
- Quality improvement and HEDIS
- Office and practice management news and tips
- Other

Submit

Needing to Contact Us?



Education Requests

Would you like training for you and your staff?
You can submit your requests to
Providers@arhealthwellness.com



Arkansas Health and Wellness Contracting

Phone Number: 1-844-631-6830

Hours of Operation: 8am-4:30pm



Provider Contracting Email Address:

ArkansasContracting@centene.com

Regular contracting inquiries and contract requests

Ambetter from Arkansas Health and Wellness

Provider Services

Phone: 1-877-617-0390
TTY/TDD: 1-877-617-0392
ambetter.arhealthwellness.com

Allwell from Arkansas Health and Wellness

Provider Services

Phone: 1-855-565-9518

TTY/TDD: 711

allwell.arhealthwellness.com

QUESTIONS?

Please submit any questions by using the chat

feature or in an email with

“Provider Webinar” in the subject line to

Providers@ARhealthwellness.com



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Thank you!