



March 2019

Care Continuum Launches May 1

Network Health to use CCUM for Medical Drug Authorization

In our ongoing efforts to improve prior authorization processes, we are partnering with ESI Care Continuum (CCUM) for medical drug prior authorization effective May 1, 2019.

ESI Care Continuum will handle pre-determination and prior authorization requests for medical drug (excluding oncology drug) for all lines of business, including Medicare and Health Exchange. eviCore will continue to review oncology medical drug requests.

Providers should submit medical drug requests via the ExpressPath portal at www.express-path.com. Online submissions will streamline communication and improve turnaround times for these authorizations.

Providers will also have seamless access to ExpressPath through the Network Health provider portal. The online authorization process takes less than 10 minutes to complete (on average), and the response is often immediate.

ExpressPath is available 24 hours a day, seven days a week. Users can complete the following tasks online.

- Create new requests (eliminating the need to call or send faxes)
- View the status of previously submitted requests
- Complete or edit existing requests that may require additional information
- Search for a previously submitted requests
 - Search by patient details such as member number, date of birth, etc.
- Renew an approved request that will expire in the next 90 days

Tutorials for using the portal will be made available to providers prior to the May launch. For additional information, please contact Network Health's Utilization Management Department or your contract manager.

Medical Drug Claims Must Include National Drug Code (NDC)

Providers must include the National Drug Code (NDC) when submitting claims for medical drugs to Network Health.

If you are billing for an unclassified drug, you must include the NDC as well as the name and description of the drug. Claims submitted with a J399 code will automatically pend and require a medical necessity review to process.

Network Health Medicare Diabetes Prevention Program Starts April 2

Network Health is participating in a new initiative from the Centers for Medicare & Medicaid Services (CMS). The Medicare Diabetes Prevention Program (MDPP) focuses on decreasing Type 2 diabetes by empowering people to take steps to lower their risk.

Between April 2, 2019, and February 18, 2020, Network Health is hosting PreventT2 sessions at its headquarters in Menasha. The 10-month program encourages participants to live a healthier lifestyle, including making healthier dietary choices and increasing their physical activity to at least 150 minutes a week.

Approximately 1,300 Medicare Advantage Plan members with prediabetes were invited to participate in the program. Members will be directed by trained nurses and lifestyle coaches who focus on empathy, behavior change and developing healthy support systems.

For more information about referring patients to this or other wellness programs, contact Network Health at 855-580-9935 or QI@networkhealth.com.

Reminder: Providers Are Required to Update Data with Dial America

We validate provider information quarterly and when new information is sent from a contracted group. Contracted providers and provider groups are **required** to participate in this process as part of their contractual obligation.

Dial America is a vendor that Network Health uses to update provider information as regulated by CMS. Please make sure to update your information with them when they call. If you do not provide the information to Dial America, Network Health must follow up with your staff.

If you would rather not provide information over the phone, you have the option to submit your roster via email on a quarterly basis to Provider Informatics. If you would like to switch to email rosters, please contact your contract manager. For more information on what information is required, please read the [Provider Data Validation policy](#).

Report changes in provider participation

It is also a contract requirement to promptly (within 30 days) inform Network Health of any provider participation changes such as location changes, terminations, part-time covering or no longer accepting new patients. Failure to report this information in a timely fashion affects the state and federal continuity of care provision for our members.

Portal User PINs Mailed Only to Provider Office Location on File

The new [Network Health provider portal](#) launched in November 2018 and is available to contracted and non-contracted providers as well as third-party billing entities.

For security purposes, users who create a login with a non-company domain (e.g., gmail, yahoo, etc.) or unknown company domain, are asked to verify the mailing address we have in our system. Verification initiates a PIN number sent via the U.S. mail. Once users receive the PIN number, they can enter it to complete registration and gain access to all areas of the site.

As engagement with the portal continues to grow, we have had some new users request that their PIN numbers be sent to addresses other than those we have on file.

For provider and member security, we can mail PIN numbers ONLY to an address currently on file for a provider office.

Please watch the mail for envelopes marked “Complete Your Portal Registration” as these letters contain the PIN information required to access the site. We ask for your cooperation in ensuring that the PIN information is forwarded to the appropriate personnel.

If you have any questions or issues registering, please contact Network Health Customer Service at 800-769-3186.

Reminder: Submit authorization requests via iExchange

Providers may now submit authorization requests directly to Network Health through the iExchange platform. You may use iExchange to submit requests for inpatient hospital stays, durable medical equipment, outpatient procedures and more.

If you are currently using iExchange with other payers, you will now see Network Health in your payer drop-down menu on the iExchange platform. You will also be able to seamlessly access your iExchange account through the [Network Health provider portal](#).

iExchange is available 24 hours a day, seven days a week, and provides real-time entry into Network Health's Care Management Platform. For guidance, view our [Inpatient](#) and [Outpatient](#) tutorials.

Is there something you would like to see in the next issue of The Pulse? [Email us today.](#)