

February 2021



Reminder to Check the EDI Claims Rejection Report

As a reminder for all providers, you must check the EDI Claims Rejection Report to check if any claims rejected out of our system due to clerical errors or a provider not being added to the system.

This report is located in the provider portal. Network Health does not reject the claims through EDI. Your clearinghouse may indicate that the claim was sent, but the claim will not come back through your clearinghouse as rejected.

It is very important to check this report if you have not received payment within 30 days. If you have any questions on how to access this report, please reach out to your Provider Operations Manager.

A Change Coming to the Utilization Management (UM) Fax Number

In order to better serve you, our providers, Network Health's UM team is streamlining their fax numbers down to one line. Effective immediately, if you aren't already, please begin using 920-720-1916. Please make sure to update any pre-programmed numbers you have set up.

Did you know there's a more efficient way to contact UM, rather than faxing? iExchange, our provider auth portal, offers convenient 24/7 access to submit prior authorization requests, upload clinical, or send a message to UM.

To learn more about registering for iExchange, or individualized training please reach out to Sara Froeming at 920-720-1627 or sfroemin@networkhealth.com

February 2021: CPT and HCPCS Code Updates

Quarterly, the American Medical Association updates Current Procedural Terminology (CPT) codes and the Centers for Medicare and Medicaid Services updates Healthcare Common Procedure Coding System (HCPCS) codes.

There are new codes that will require prior authorization and these services fall within our current authorization, experimental and/or genetic review processes. You can find a list of all services requiring prior authorization on line at www.networkhealth.com.

If you have specific questions regarding a service, please contact our customer service or health management teams for assistance. For more information about authorization requirements, forms or services that require review under the experimental and/or genetic process visit the **Provider Authorizations** section of our website at www.networkhealth.com.

Please forward this information to those within your facility who will need to follow these processes. For prior authorization requests or questions, contact our care management departments Monday through Friday; 8 a.m. to 5 p.m.

Commercial: call 920- 720-1600 or 800-236-0208. For questions specific to behavioral health utilization, call 920-720-1340 or 800-555-3616.

Medicare: call 920-720-1602 or 866-709-0019

Language assistance is available for members or practitioners to discuss utilization management issues. Network Health also offers TDD/TTY services for deaf, hard of hearing or speech-impaired individuals. Anyone needing these services should call 800-947-3529. All callers may leave a message 24 hours a day, seven days a week.

Provider Data Validation Using NPPES NPI Provider Data

Network Health is asking providers to begin updating their NPPES provider data to help maintain the accuracy of their provider directories.

NPPES allows providers to attest to the accuracy of their NPI data. If a provider's information is correct, they will be able to attest to it and NPPES will record and reflect the attestation date. If the provider's information is not correct when they request any change to the NPI record, the provider will be able to attest to their changed NPI data, resulting in an updated certification date.

CMS will publish the latest certification date for each NPI in the NPI Registry as well as the NPPES dissemination file. Network Health will be using this data to aid us in the development of our provider directories, however, we can only use the most current data published, therefore, it would be imperative that you attest to the data regularly. **NPPES was recently updated to allow providers to input multiple addresses to support other work locations.**

Network Health will access core NPPES data weekly i.e., provider name, provider specialty, provider address, provider telephone number. Collectively, these data elements represent 91% of the CMS provider directory review errors found. NPPES data will be compared to your provider data which is already being submitted and serve as an important resource to improve Network Health's provider directory reliability and accuracy.

We encourage you to access the NPPES webpage at <https://nppes.cms.hhs.gov> today as well as quarterly to update and/or attest to your provider data. It will be imperative to ensuring provider directory accuracy to our members.

If you are not a current subscriber to *The Pulse* and you would like to be added to the mailing list, please email us today.

Current and archived issues of *The Pulse*, *The Script* and *The Consult* are available at networkhealth.com/provider-resources/news-and-announcements.



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