

# PROVIDER UPDATE

November 2020

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## MediGold achieves 4.0 out of 5 Star Rating for 2021 Ohio HMO plans



MediGold is honored to announce that it has received a **4-Star Overall Plan Rating** out of 5 stars<sup>1</sup> for our 2021 Ohio HMO plans. This rating is the result of the combined efforts of our passionate colleagues and network providers.

**Thank you** for partnering with MediGold!

<sup>1</sup> Centers for Medicare & Medicaid Services evaluates plans based on a 5-star rating system. Star ratings are calculated each year and may change from one year to the next. 2021 Star Ratings are based on services and care members received in 2018 and are posted at [Medicare.gov](https://www.medicare.gov).

### Staying in the loop is easy!

In the past year, has your:

- Ability to **accept new patients** changed?
- Office recently **moved or have a new mailing address**?
- **Phone number** changed?

If you answered yes to any of these questions, access the Provider Information Change Form here: <https://MediGold.com/For-Providers/Tools-and-Resources/Forms>.

### Sign up for Provider Email Updates

Do you know a provider who would benefit from these monthly updates? Encourage them to sign up on our website at <https://www.MediGold.com/for-providers/provcomm>



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## Copays for Select Services Waived Through the End of the Year

As we continue through the COVID-19 journey together, we want you to know that our members are our **top priority**, and their good health is our **focus**. That's why we continue to cover COVID-19 testing at zero cost-share to our members.

In addition, we are waiving copays for the following from 9/1/20 through 12/31/20\*:

- Primary Care office visits
- Specialist physician office visits
- Telehealth visits
- Physician assistant or nurse practitioner office visits
- Medicare-covered chiropractic and acupuncture services
- Podiatry services and routine eye and hearing exams
- Physical therapy, occupational therapy and speech therapy
- Cardiac and pulmonary rehabilitation services
- Outpatient mental health and substance abuse visits
- Opioid treatment services

We are committed to doing everything we can to ensure that members are able to access care safely, affordably and efficiently. Thank you for your partnership with us as we move through this delicate and challenging time and as we continue to work to make Medicare easy!

*\*Member cost-share is not waived for the following services.*

- Lab and diagnostic tests (radiological and non-radiological)
- Part B and Part D drugs
- Durable Medical Equipment, Prosthetics, Orthotics and Supplies
- Renal Dialysis
- Other services not covered by your plan
- Copays, coinsurance and deductibles for services in the following settings are not waived. Members will be responsible for their share of the cost under their benefit:
  - Inpatient hospital and Outpatient surgery or observation services
  - Skilled Nursing Facilities
  - POS Minute Clinics
  - Emergency, Urgent and Ambulance services

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## FDR Attestation

MediGold is committed to maintaining an effective compliance program due to our participation with Medicare.

First Tier, Downstream and Related Entities (FDRs) are asked to complete an annual attestation affirming they are meeting CMS standards and guidelines.

The easiest and quickest way (5 minutes or less!) to provide proof is to click on the FDR Compliance Attestation link [found here](#), complete and submit the form.

When you successfully complete the form online you will receive a confirmation number.

## UPDATE: SNF Authorization Requirement

Our members are our top priority, and their good health is our focus.

We are **waving** the **authorization requirement for skilled nursing admissions** for 30 days, immediately and **through December 12, 2020.**

- Please notify the plan of admission the same day the member arrives at your facility.
- An update will be required within 2 days of admission to your facility.
- Our team will continue to follow their stay and provide next review dates with each update.
- Fax is the preferred avenue for admission notifications and concurrent review
- Watch your emails for updates.

Thank you for your partnership with us as we move through this delicate and challenging time and as we continue to work to make Medicare easy!

# UPDATE



## Talk About MediGold

You may receive questions about MediGold from patients, colleagues, family members or friends. Please understand these dos and don'ts when talking about MediGold.

### Do

- Promote the MediGold brand.
- Promote MediGold 2021 plans, product and benefit information.
- Share MediGold social content from Facebook and LinkedIn pertaining to MediGold plans, product and benefit information.
- Encourage friends, family and colleagues to learn more by visiting [MediGold.com](http://MediGold.com).

### Don't

- Create your own original marketing content.
- Accept completed enrollment applications in your provider office.
- Talk about specific MediGold benefits or plans (marketing) in the exam/care setting.

### Have concerns or questions?

Reach out to the MediGold marketing team by email at [MediGoldCommunications@mchs.com](mailto:MediGoldCommunications@mchs.com).

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## Diabetes Awareness Month

Measure	Service Needed	Tips to meet the Measure
<b>Dilated Retinal Eye Exam*</b>	<ul style="list-style-type: none"> <li>Retinal or dilated eye exam by optometrist or ophthalmologist in 2020.</li> <li>Negative retinal or dilated eye exam in 2019.</li> </ul>	<ul style="list-style-type: none"> <li>Ask your patient if he/she have had a dilated eye exam in 2020. If not yet received encourage an appointment with an in-network ophthalmologist or optometrist.</li> <li>Include an examiners letter or report in the medical record that states the date and results of the exam.</li> </ul>
<b>HbA1c Control</b>	<ul style="list-style-type: none"> <li>HbA1c test and result in 2020.</li> </ul>	<ul style="list-style-type: none"> <li>Conduct the test during a routine office visit.</li> <li>Schedule an appointment to capture the result.</li> <li>Ideal results may be 9 or less. Record the result in the medical record.</li> <li>Code the result using CPT II.</li> </ul>
<b>Kidney Function</b>	<ul style="list-style-type: none"> <li>Annual urine screening (micro-albumin test).</li> <li>Blood pressure (BP) check. BP medication prescribed, as appropriate.</li> <li>Document ESRD diagnosis in medical record.</li> </ul>	<ul style="list-style-type: none"> <li>Encourage your patient to complete a urine screening during a routine office visit.</li> <li>Conduct a BP test at the beginning and at the end of your patient's visit. (Ideal reading: 140/90 or better)</li> <li>Schedule an appointment and capture the result.</li> </ul>
<b>Medication Adherence</b>	<ul style="list-style-type: none"> <li>Improve the quality of medication management and use.</li> </ul>	<ul style="list-style-type: none"> <li>Counseling will help your patient understand his/her disease and the important role of their medication.</li> <li>Encourage your patient to use a calendar to track their daily medications or use free downloadable medication adherence smartphone apps. (RxRemind or Med Helper)</li> </ul>
<b>Diabetic Statins</b>	<ul style="list-style-type: none"> <li>Prescribe statin therapy for people with diabetes to lower their risk of cardiovascular disease.</li> </ul>	<ul style="list-style-type: none"> <li>Write a prescription for 90 days instead of 30 days.</li> <li>Encourage prescriptions through mail order.</li> </ul>

**\*Tip:** To avoid claim denial for this procedure, it is important to use an appropriate diagnosis code to support medical necessity. For a full list of diagnosis codes please contact us at [StarsAndHEDIS@mchs.com](mailto:StarsAndHEDIS@mchs.com) or refer to **CMS.gov** for guidance.

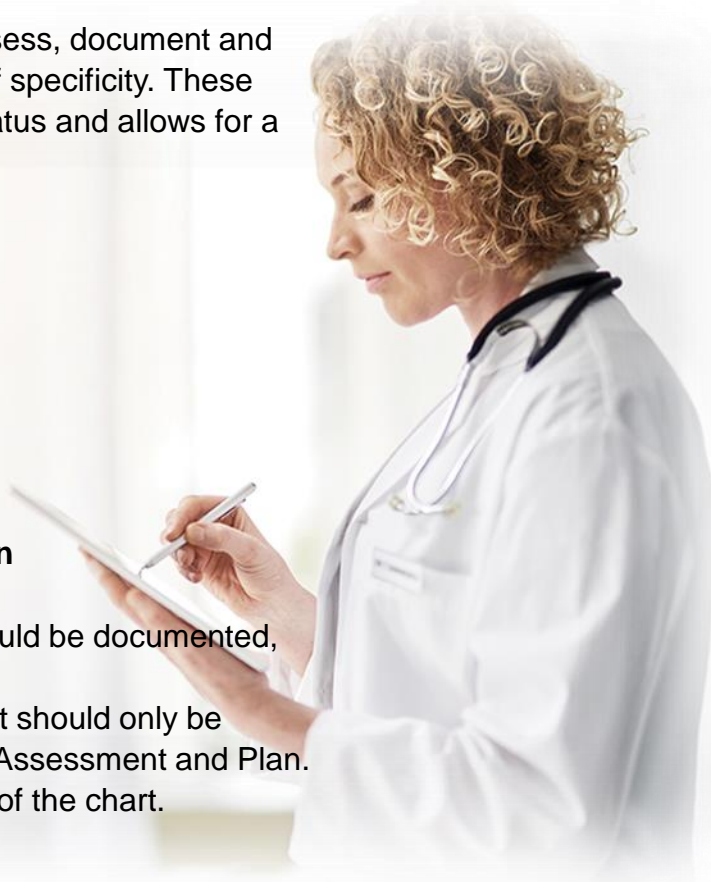
### Status Codes

Certain health status codes are very important to assess, document and code at least once annually using the highest level of specificity. These codes are relevant to the members current health status and allows for a full picture of the members medical record:

- Transplants
- Ventilators
- HIV Status
- Tracheostomy Status
- Artificial openings/Ostomies Dialysis
- Prosthetics/Amputations
- BMI Status Codes

### Important Coding Information

- If an artificial opening was closed, that date should be documented, and the opening should not be coded as active.
- BMI status codes are important to document but should only be captured if documented by the physician in the Assessment and Plan. This cannot be captured from the vitals section of the chart.



### Provider Service Center Closed for Holiday Observance

We will be **closed Thursday and Friday, November 26 & 27, 2020**, in observance of the Thanksgiving holiday. Please let us know if you have any questions.

### IMPORTANT: Claims Payable Holiday Schedule

Please note the holiday claims payable schedule below.

- **Fri 11/27** – Day After Thanksgiving –**no changes**
- **Fri 12/25** – Christmas Day –**moved to Thurs. 12/24/2020**
- **Fri 1/1** – New Year's Day –**moved to Tues. 1/5/2021\***

**\*NOTE:** Tue 1/5 check run will include claims that would have normally been paid on Friday 1/1/21.