



Health Plus

Your community's guardian angel since 1984

# provider*news*



Tyra Jefferson, D.D.S., (left) joins Health Plus Marketing Manager Angel Rivera and Marketing Assistant Director Yvette Rosado at a member recertification event at Lutheran Medical Center.

## IN THIS ISSUE:

- HIV rapid tests
- LMC and Health Plus team up for addiction treatment
- Reduce ER use
- Care coaching for high-risk members
- FAQs about NPI

## Message from the Chief Medical Officer

### Dear Health Plus providers:

In this edition of *Health Plus Provider News*, we are pleased to highlight our new and ongoing initiatives to ensure member



access to quality preventive care and treatment. On page 3, we describe the medical and care management services available to members affected by HIV and opioid addiction. Page 5 discusses *To Your Health™*, our new personalized care coaching program for high-risk members with multiple co-morbidities.

As always, Health Plus is working hard to prevent member disenrollment and high emergency room (ER) use. We are seeking your help in promoting continuity of care and panel stability through our retention and ER use reduction efforts (this page and page 4).

Health Plus needs to receive your NPI (National Provider Identifier) number as soon as possible. Page 6 includes information on how to obtain an NPI number and send it to Health Plus, and answers to some of your frequently asked questions about getting, using and sharing your NPI.

Last but not least, please take note of the Provider Relations contact information on this page. These are the numbers to call to get your questions answered.

Sincerely,

*Clifford D. Marbut, M.D., M.P.H.*

Clifford D. Marbut, M.D., M.P.H.

# Preventing member disenrollment

Health Plus members must renew their membership each year in order to maintain their health coverage. Failure to renew leads to involuntary disenrollment and disrupts continuity of care, making it difficult for providers to render quality services in a timely, efficient manner. Health Plus is working with providers in a joint effort to facilitate timely member renewal. Each PCP now receives an **“Urgent Action”**

page as part of their monthly member roster that lists the names of members due for renewal. Health Plus asks that PCPs remind these members about the importance of timely renewal to avoid a disruption of benefits.

Members can visit any of the Health Plus community offices, or

call a recertification representative at **1-888-809-8009** to begin the renewal process. We have a trained, multilingual staff to assist them in completing the required forms. Our recertification representatives are also available to do on-site renewals at hospitals and large group practices. For more information, please contact our Marketing Department at **1-888-809-8009**.



## Need to contact us?

### For general provider inquiries:

**Health Plus Provider Care Center** ..... 1-800-450-8753

### For more specific inquiries:

**Cleo Dixon, Vice President, Network Management and Provider Relations** ..... 1-718-491-6770

**Gary Cowan, Provider Relations Senior Manager** ..... 1-718-491-7495

### BROOKLYN/STATEN ISLAND PROVIDERS

**Stacey Ross, Provider Relations Manager** ..... 1-718-491-7509

**Svetlana Kats, Provider Relations Field Supervisor** ..... 1-718-491- 7513

### BRONX/MANHATTAN PROVIDERS

**Saman Mey-Yin, Provider Relations Manager** ..... 1-718-840-4309

**Nina Stone, Provider Relations Field Supervisor** ..... 1-718-840-4314

### QUEENS/NASSAU PROVIDERS

**Leroy Houston, Provider Relations Manager** ..... 1-718-491-7556

**Belinda Kavanagh-Lantimo, Senior Provider Relations Associate** ..... 1-718-567-3251

# HIV and Health Plus members

According to the New York City Department of Health and Mental Hygiene (DOHMH), more than 100,000 New Yorkers are currently living with HIV and thousands more are infected but unaware of their status. In 2005, the New York State Department of Health introduced guidelines to promote widespread use of rapid HIV tests, simplified written consent procedures, and routine HIV testing as a standard component of primary care. Last year, in an effort to remove testing barriers and reduce the problem of late diagnosis, DOHMH proposed changing the existing laws to replace written consent with documented oral consent and to link test-positive individuals with HIV treatment services.

For providers interested in offering HIV rapid tests to their members, there are several FDA-approved rapid HIV tests that are CLIA waived and reimbursable by Health Plus. These tests can be performed during an office visit and provide results in less than half an hour, thus eliminating the need for patients to return at a later date for their results.

More information about rapid HIV tests can be obtained from [www.cdc.gov/hiv/rapid\\_testing](http://www.cdc.gov/hiv/rapid_testing).

*Reminder: If you wish to perform*

*rapid HIV tests you must obtain a CLIA Certificate of Waiver and have a copy of the certificate on file with Health Plus. More information is available on the CDC website.*

Should a member test positive for HIV, he or she can be referred to one of Health Plus's participating Designated AIDS Centers or experienced HIV care facilities across the city. We also have HIV Specialist primary care physicians in our network in all five boroughs. See your printed or online provider directory (under *HIV/AIDS Providers*) for more details.

Health Plus's HIV Case Management Program is an additional service available to HIV-positive members. Health Plus case managers help coordinate member care by fostering communication among the various providers rendering services. For more information or to complete a member referral,



please call our Provider Care Center at **1-800-450-8753** and press **6** to reach our Health Services Department. Alternatively, you can download and print a case management referral form from our website, [www.healthplus-ny.org](http://www.healthplus-ny.org) by clicking on *Providers* and then *Referral Info & Forms*. Fax the completed form to **1-718-360-1314**.

## LMC and Health Plus leading the way in addiction treatment

**Lutheran Medical Center (LMC) and Health Plus** are working together to provide **Buprenorphine** treatment for Health Plus members tackling opioid addiction.

**Buprenorphine**, prescribed under the brand name **Suboxone**, is taken by mouth daily in a sublingual form. It enables addicted people to discontinue use of opioids without experiencing withdrawal symptoms. It also enhances maintenance therapy by reducing or preventing the emergence

of cravings, and blocking the "highs" from heroin, pain pills, and methadone in cases of relapse.

Health Plus members can be evaluated for **Buprenorphine** induction in the Lutheran Hospital ambulatory area. Mild to moderate cases can be handled on an outpatient basis while more severe, complex cases can be admitted to the LMC Detox Unit.

Members continuing on **Buprenorphine** maintenance will be integrated into the LMC intensive

outpatient program or be referred to another outpatient program in their area.

**Buprenorphine** is contraindicated in some patients abusing multiple substances.

For more information and to refer a member for services, please call:

■ Monday through Friday, 8:30 a.m. to 4:30 p.m.—LMC Detox Intake Screening Office, **1-718-630-8256**.

■ Nights, weekends and holidays—LMC Detox Unit, **1-718-630-7363**.

# Reducing ER use

A recent report published jointly by the National Association of Community Health Centers and the Association of Community Affiliated Plans determined that **at least one-third of ER visits are 'avoidable' (meaning non-urgent or ambulatory care sensitive).**

The report further concluded that physician practices that adopt some level of "open access" or same day appointments can demonstrate a marked reduction in ER use and appointment "no shows", as patients tend to call when they have both the need and means to present for care.

## YOUR ROLE

To reduce ER use and maximize primary care access, Health Plus requires participating primary care physicians (PCPs) to incorporate evening and weekend office hours into their schedules. **Best practices dictate office hours two evenings per week and one half day during the weekend.** Participating PCPs are also required to comply with Health Plus 24 Hour Access standards (wherein member calls are returned by a physician within 30 minutes).

## HEALTH PLUS'S ROLE

Health Plus works with members and providers in an ongoing effort to reduce ER use. We educate all new members on the importance of regular preventive visits and building a rapport with their PCPs. Members with frequent ER visits receive personalized information from our nurses on how to avoid using the ER for non-urgent conditions. We also contact these members' PCPs in an effort to facilitate timely well care and prevent urgent and emergent situations whenever possible.

## NURSE ADVICE LINE

Please remind your Health Plus members to use Tele-Nurse Plus, our

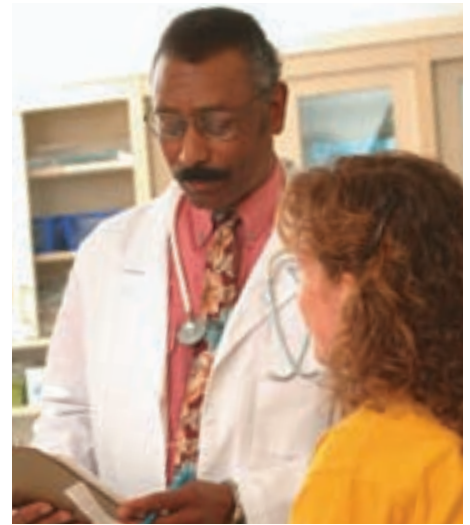
nurse advice line, which is available 24 hours a day, seven days a week (**1-800-437-7587**). This toll-free service gives members access to trained live nurses who can provide health education and advice on urgent health problems.

Members who call with urgent problems are referred to the appropriate level of care. Follow-up notices are then sent to their PCPs informing them of the decisions made regarding their panel patients.

## REFER FREQUENT ER USERS

Frequent ER users should be referred for intensive disease or case management services provided by a Health Plus nurse or social worker. More information is available on our website: **[www.healthplus-ny.org](http://www.healthplus-ny.org)** (click *Providers*, then the *Case or Disease Management* link from the drop-down menu).

If you would like to refer any of your members for these services, please call the Health Plus Provider Care Center at **1-800-450-8753** and press **6** to reach our Health Services Department.



Alternatively, you can download a referral form from our website and fax it to our care management team.

We hope that by working together with our providers, we can reduce the overall number of ER visits and create a better medical environment for our members and their health care needs.

The report mentioned at the beginning of this article can be found at: **[www.nachc.com](http://www.nachc.com)** (click *Research & Data* on the left-hand menu).

## Penalties for fraudulent claims

The Deficit Reduction Act (DRA) was signed into the law in 2006 and became effective Jan. 1, 2007. The DRA enforces compliance with the Federal False Claims Act (FCA) and Program Fraud Civil Remedies Act (PFCRA)—statutes that address fraud involving any federally funded contract or program, including Medicaid.

These statutes establish liability for any person who knowingly presents or causes to be presented a false or fraudulent claim for payment by the government program, including, for example:

- Billing for services not rendered.
- Billing for undocumented services.
- Double billing for items or services.
- Participating in kickbacks.
- Billing for medically unnecessary services.

- Assigning incorrect codes to secure higher reimbursement.

Noncompliance is subject to civil monetary penalties ranging from \$5,000 to \$11,000 for each false claim submitted and, in certain circumstances, the offender can be required to pay three times the amount of damages sustained by the government program.

**The Office of the Inspector General may also seek to exclude the offending provider or supplier from further participation in Federal health care programs.**

**Health Plus is subject to Federal and State laws addressing fraud, waste, and abuse and is legally mandated to pursue recoupment of funds in cases of identified overpayment.**

For more information or to report cases of suspected fraud or abuse, please call the Health Plus Provider Care Center at **1-800-450-8753**.

# To Your Health™ —A new service for high-risk members

Health Plus recently partnered with Health Integrated, Inc., a Florida-based company specializing in personalized care management services, to offer *To Your Health™*—a program that targets high-risk members with multiple co-morbidities.

## MEMBERS HELP THEMSELVES

The program is designed to supplement provider care with coaching, education and support to help members achieve greater self-efficacy and improve their health status. Members are assigned to Care Coaches—licensed registered nurses and other trained clinicians—who assist them with their unique health situations across co-morbidities. Care Coaches develop a personalized coaching plan to help members:

- Understand the impact of lifestyle choices on their health.
- Clearly communicate with their health care providers and adhere to established medical and behavioral treatment plans.
- Set goals to improve their health condition(s) and sense of well-being.
- Identify useful tools for achieving these goals and eliminating potential barriers.

## WHO CAN PARTICIPATE?

These coaching services are now offered to preselected members at the highest acuity level who are not participating in any of Health Plus's existing disease and case management programs.

*To Your Health™* is provided at no charge and with no obligation. Members receive regularly scheduled calls from their Care Coach and educational materials, including a journal to record their progress.

Participants in similar programs

across the country have been shown to communicate better with their providers, make fewer unplanned office calls, have higher treatment adherence, and enjoy improved coordination between their primary care physicians and specialists.

## REFER A MEMBER

For more information about *To Your Health™* and to refer your high-risk members for this service, please call the Health Plus Provider Care Center at **1-800-450-8753** and press **6** to reach our Health Services Department.



## Where to find information

- INFO PLUS online (Member Eligibility, Claims, Authorizations)**  
..... log on to [www.healthplus-ny.org](http://www.healthplus-ny.org), click "Providers," then "INFO PLUS"
- INFO PLUS by phone (Member Eligibility, Claims, Optometry Benefits)** ..... **1-800-450-8753 (press 1)**
- Provider Care Center (all provider inquiries)**..... **1-800-450-8753**
- Fax Provider Updates**..... **1-718-504-9602**
- Fax NPI Number** ..... **1-718-233-3523**
- Request a Provider Directory** ..... **1-800-450-8753**
- Disease or Case Management Referrals** ..... (Fax) **1-718-360-1314**
- Domestic Violence Coordinator** ..... **1-718-491-7545**
- Health Education and Community Outreach**..... **1-888-743-3508**

Website: [www.healthplus-ny.org](http://www.healthplus-ny.org)

For expert health information, Health Plus members may call **Tele-Nurse Plus 24 hours a day, seven days a week: 1-800-437-7587.**

## Claims paid faster with electronic transmission

Health Plus recently upgraded its claims payment system to allow faster payment of electronic professional (837P) claims transmissions. Please consider the advantages of electronic claims submission:

- Faster processing and payment
- Cleaner, more accurate data
- Elimination of paperwork and lost claims
- Streamlined business-to-business transactions
- Increased security and confidentiality of data submitted

**Our payer ID number is 11324 and Emdeon™ is our clearing-house.** If you would like to learn more about submitting your Health Plus claims electronically, please email us at [EDI@healthplus-ny.org](mailto:EDI@healthplus-ny.org). EDI implementation guides are also available on our website at: [www.healthplus-ny.org](http://www.healthplus-ny.org) (click *Providers*, then *Claims Policy & EDI*).

## CLAIMS DENIED FOR INCORRECT CODING?

Please make sure you have updated your CPT and ICD-9 coding systems to follow 2007 coding rules and guidelines.

**Tom Early**  
Executive Director

**Clifford D. Marbut, M.D., M.P.H.**  
Chief Medical Officer

**Cleo Dixon, M.B.A.**  
Vice President of Network Management and Provider Relations

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Editor

HEALTH PLUS PROVIDER NEWS is published as a community service to members of the HEALTH PLUS provider network. HEALTH PLUS Executive Offices are located at 335 Adams St., Suite 2600, Brooklyn, NY 11201. Our phone number is 1-800-450-8753.

HEALTH PLUS is a not-for-profit health care plan committed to quality health care and dedicated to the health and well-being of our culturally diverse communities through partnerships with members, providers, and community-based organizations.

Information in HEALTH PLUS PROVIDER NEWS comes from a wide range of medical experts. If you have any concerns or questions about specific content in this newsletter, please contact the HEALTH PLUS provider communications manager at 1-718-491-8373. Models may be used in photos and illustrations.

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# Claims Corner

## FREQUENTLY ASKED QUESTIONS ABOUT NPI

**1. If I already have my NPI number, should I begin using it on my claims?**

**No.** For the time being, you will need to continue using your Health Plus Provider ID number in the standard paper (CMS 1500/UB 92) or electronic claim format. Health Plus will send out a notice when it is time to begin using your NPI number.

**2. If I have one NPI number for my individual practice and another one for my group practice, which number will I use on my claims?**

All claims will require the NPI number

of the rendering provider. Services billed under the group practice will also require the group NPI number.

**3. Will I be able to share my NPI number with other providers and to obtain their numbers as well? Is it safe to do so?**

Yes. In fact, you will be required to share your NPI number with other providers when referring patients, receiving referrals, calling in prescriptions and conducting other standard business transactions. The NPI number should be protected because providers will retain one number for life, but it is **not** a private identifier to be treated in the same manner as a social security number. Through careful planning with trading partners and established business associates (such as billing services, vendors and clearinghouses) providers should be able to both protect their NPI and share it appropriately as needed.

## Health Plus needs your NPI number

**Health Plus requests that you send us your NPI (National Provider Identifier) number as soon as possible.** In the future, the NPI will replace all other provider identifiers (except the DEA and Tax Identification numbers) and will be required for processing of Health Plus paper and electronic claims.

To obtain an NPI number, go to [www.nppes.cms.hhs.gov](http://www.nppes.cms.hhs.gov) or call **1-800-465-3203** to request a paper application. Mail the completed paper application to: NPI Enumerator, P.O. Box 6059, Fargo, ND 58108-6059.

**Once you receive your NPI number, please fax a copy of your CMS NPI confirmation sheet to our designated NPI fax line at 1-718-233-3523. Health Plus will need this confirmation sheet in order to process your claims in the future.**

Questions about submitting your NPI information to Health Plus should be directed to the **Health Plus Provider Care Center** at **1-800-450-8753**.

General NPI information for providers can also be found on the CMS website at [www.cms.hhs.gov/NationalProvIdentStand](http://www.cms.hhs.gov/NationalProvIdentStand).

**Remember: Getting an NPI number is free. Not having one can be costly.**

**Health Plus**  
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