August 2023



Annual Provider Attestation

Beginning Friday September 1, 2023 Network Health's annual Provider Attestation will be available on the home page of the provider portal. The Centers for Medicare & Medicaid Services (CMS) requires this for all participating providers who offer health care or administrative services to Network Health members enrolled in a federal health care program. <u>Please have the attestation completed on or before November 30, 2023</u>.

We have included a Frequently Asked Questions (FAQ) document in the provider portal to assist with completing the attestation. If you are not a registered user on our provider portal, please click <u>here</u> to begin the process. If you have questions regarding the portal registration, you may contact our member experience team at 800-769-3186.

If you have questions related to the provider attestation, please reach out to your provider operations manager.

Updated Payment Policy

Effective October 1, 2023, Commercial claims with a paid amount greater than \$65,000 will be reviewed per our Bill Audit Review policy.

Reminder to Review EDI Claim Rejection Report

If you have not received payment within 30 days of claim submission from Network Health, please review the EDI Claim Rejection Report located within the provider portal. The report

will indicate if claims have been rejected due to a provider or member submission error. Your clearinghouse may indicate the claim was accepted, and the claim may not go back through your clearinghouse as rejected. If you have any questions on how to access this report, please reach out to your provider operations manager.

Medicare Advantage D-SNP Training

Each year, Network Health sends several communications regarding the annual model of care training requirements for providers who have delivered care to our Medicare Advantage Dual Eligible Special Needs Plan (D-SNP) members. This training is required annually by the Centers for Medicare and Medicaid Services (CMS) and is designed to help educate providers on coordinating Medicare and Medicaid benefits for Network Health's D-SNP members. If you have not completed the training and attestation yet in 2023, please complete this training as soon as possible. The training and attestation must be completed by individual providers, as Network Health cannot accept group attestations. For your convenience, you can access the model of care training materials via our website at https://networkhealth.com/provider-resources/provider-training or via the link in the provider portal. Once the training is completed, please sign and return the attestation to Network Health.

If you have any questions about the training, please contact Laura Reinsch, Director of Care Management at 920-720-1711 or Ireinsch@networkhealth.com. Thank you for the continued services and care you provide to our members.

Provider Resources for New and Existing Customers

Please remind all providers, those established or new to your practice, of the following:

- 1. Member's Rights and Responsibilities
- 2. Prior Authorization Requirements
- 3. Payment Policies and Procedures
- 4. Appointment Access Standards (Network Management policy, click here)
- 5. Population Health Standards and Initiatives
- 6. Pharmacy Formulary and Authorization Requirements
- 7. Credentialing Policies and Procedures

You can find all the information at https://networkhealth.com/provider-resources/index

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

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



Don't forget to check us out on social media

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