Provider Report Report Cotal care.



Payment Policy Notification: Comprehensive Payment Integrity

Nebraska Total Care is committed to continuously improving its overall payment integrity solutions to prevent overpayments due to waste or abuse. This is a notification that we will begin performing additional prepayment claim reviews on 8/1/2023 using Optum's Comprehensive Payment Integrity (CPI) tool under payment policy CC.PP.074 CPI Policy. As a result of these prepayment claim reviews, providers may be asked for medical records and billing documents that support the charges billed.

Nebraska Total Care utilizes widely acknowledged national guidelines for billing practices and supports the concept of uniform billing for all payers.

The provider will receive detailed instructions about how to submit the requested documentation. Providers who do not submit the requested documentation may receive a technical denial, which will result in the claim being denied until the information required to adjudicate the claim is received.

If it is determined that a coding and/or payment adjustment is applicable, the provider will receive the appropriate claim adjudication. Providers retain their right to appeal results of reviews.

For more detailed information about this policy, please refer to the <u>Clinical and Payment Policies</u>.

Updated Payment Policies

Nebraska Total Care continually reviews and updates our payment and utilization policies to ensure that they are designed to comply with industry standards while delivering the best patient experience to our members. As a part of that review, the below policies have been revised or changed. Nebraska Total Care will be implementing effective August 1, 2023.

For more detailed information about these policies, please refer to the <u>Clinical and Payment Policies</u>. See the <u>Payment & Clinical Policies Listing</u>.

NebraskaTotalCare.com

Applied Behavioral Analysis (ABA) Provider Type Billing Guidance

Nebraska Total Care is issuing the following provider billing reminder.

ABA providers who have historically identified as a BCBA, BCaBA & RBT and been enrolled with Nebraska Medicaid via Maximus as Provider Type 35 are reminded to review and update their Provider Type with Maximus to ensure alignment to the Mental Health and Substance Use fee schedule July, 1st 2022-Revised 8.10.22. The following ABA providers who still have a Provider Type of 35 should be transitioning to Provider Types with Maximus that support accurate and timely payment in line with the Nebraska Medicaid Fee Schedule:

- Provider Type 83 for BCBA
- Provider Type 84 for BCaBA
- Provider Type 85 for RBT

If you have questions, please contact Provider Relations.

Diabetic Health

Although the names have been changed, three measures for diabetic health remain the same. The measure looks at the percentage of members 18-75 years of age with types 1 and 2 diabetes who have:

- Hemoglobin A1C Control for Patients with Diabetes (HBD) HbA1c control (<8.0%)
- \cdot Eye Exam for Patients with Diabetes (EED) had a retinal eye exam
- Blood Pressure Control for Patients with Diabetes (BPD) Blood pressure adequately controlled (<140/90)

Suggestions for a TO-DO LIST for members diagnosed with diabetes should include:

- Order a hemoglobin A1c test (HbA1c) at least once per calendar year.
- Refer member to an eye care professional for eye exam (retinal) every year.
- Measure and manage member's blood pressure.
- Ensure members are taking their diabetic medications

2023 Goal Rates

Hemoglobin A1C Control for Patients with Diabetes (HBD) 57.11%

Eye Exam for Patients with Diabetes (EED) 64.85%

Blood Pressure Control for Patients with Diabetes (BPD) 71.96%

For more information on the Diabetic measures, please refer to <u>HEDIS Reference Guide</u> located at NebraskaTotalCare.com.

Provider Accessibility Initiative and Survey

Nebraska Total Care continuously works to remove barriers that prevent our members from accessing quality healthcare because we have a responsibility to make it simple to get well, stay well, and be well.

To continue this mission, Nebraska Total Care has launched our Provider Accessibility Initiative (PAI). The goal of the PAI is to improve member access and health outcomes by increasing the percentage of practitioner locations and services in our network that meet minimum federal and state disability access standards.

We Need to Hear From You!

In order to ensure your disability access is current and accurate, we ask you <u>complete our survey</u>. Please fill it out to the best of your abilities, for every service location where you serve Nebraska Total Care members.

We thank you for your continued commitment to providing equal access to quality healthcare and services that are physically and programmatically accessible for our members with disabilities and their companions.

If you have any questions, please contact <u>PAI_Information@Centene.com</u>.





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