



nh healthy families™

provider bulletin

2018 Vol. 3, No. 3



Spring forward—right into HEDIS® season



Our goal is to make HEDIS® easier on you and your staff!

Here are some ways we can streamline this process in the months ahead:

- Request NH Healthy Families HEDIS Quick Reference Guide from your provider representative.
 - ▶ It provides detail about specific codes and specific treatment required for each measure.

Please also refer to NH DHHS fee schedule for specific approved procedure codes applicable for the state.

- Do you have an Electronic Medical Record (EMR) system?
 - ▶ Can we work with you and your IT Department to find a way to collect information from it so we do not have any requests at all next year?

Work smarter, Not Harder

- Do you want to learn more about how to improve your HEDIS rates?
- Would you like to see a “Report Card” with your rates?

Reach out to your Provider Representatives to find out how!



NH Healthy Families' Out-of-Network helpline

This line is available **Monday through Friday from 8:00 A.M. to 5:00 P.M.** The NH Healthy Families' Out-of-Network helpline provides the option for providers to contact a member of our Health Plan staff to assist with redirection to one of our network or preferred providers. A member of our staff is ready to assist you. Please call the NH Healthy Families Out-of-Network helpline at [1-844-699-6840](tel:1-844-699-6840).

Do you have a Pregnant Patient?

Let us know

With your help, NH Healthy Families can identify pregnant members early on, and direct them to the services they need to support a healthy pregnancy and infant. Notify us about a pregnant member through the Member or Provider Secure Portal.

We also offer members the Start Smart for Your Baby® program, which helps women who are pregnant or who have just had a baby. Your staff and patients can learn more at startsmartforyourbaby.com or by calling us at [1-866-769-3085](tel:1-866-769-3085).



Encouraging Regular Prenatal Care

Women who do not get prenatal care are three times more likely to have low birth weight babies and five times more likely to lose the baby. Still, in a recent study, about 20 percent of women who gave birth didn't receive care until the second trimester, and 6 percent didn't receive prenatal care until the third trimester, or at all. Here are a few ways you can help make a difference for your patients:

- **Talk to women before they become pregnant.** For some women, there is a health literacy gap. And if she's only seeing you once a year, you can miss an opportunity to provide education about prenatal care if you wait until she becomes pregnant. Let women know that after a positive home pregnancy test, they should schedule a prenatal exam with an OB/GYN to confirm the pregnancy and begin prenatal care. This is also a good time to talk about prenatal vitamins and folic acid with women who hope to conceive.
- **Make it easy.** Make scheduling prenatal visits simple for pregnant patients. For example, encourage them to make their next appointment before they leave your office. Provide them with information at each visit, so they know what to expect. For example, give women easy-to-understand instructions for blood work or tests and for registering for parenting, prenatal, and breastfeeding classes.
- **Hand out a prenatal care schedule.** Share a prenatal care schedule (see sample below) with newly pregnant women so they understand that prenatal care starts immediately and continues throughout their pregnancy. When you confirm a member's pregnancy, it's important to submit the necessary Notification of Pregnancy (NOP) form to NH Healthy Families. Doing so helps us best use our resources to help you and your patients achieve a healthy pregnancy. You can find the NOP form in the Provider Resources tab at NHhealthyfamilies.com

Sample Prenatal Care Schedule:*

- Weeks 4 through 28 – Once a month
- Weeks 28 through 36 – Every two weeks
- Week 36 through birth – Once a week

*Note: Women who are older than 35 or have what is considered a high-risk pregnancy may need to see their doctor more often. This is a sample schedule and not a recommendation for care or proof of coverage.

Provider Updates

Clarification on Continuous Positive Airway Pressure (CPAP) Supplies Policy

New Policy Effective April 1, 2018

In follow up to the previous communication sent on 1/30/2018, please see below for additional details on the code set affected. The following new policy will be applied as medical claims reimbursement edits with our claims adjudication system. This is an addition to all other reimbursement processes that NH Healthy Families currently employs.

The effective date for the below policy is April 1, 2018.

Policy Name	Continuous Positive Airway Pressure (CPAP) Supplies
Policy Description	This policy references quantity limitations for reimbursement on CPAP supplies.

This policy is developed based on medical literature and research, industry standards and guidelines as published and defined by the

American Medical Association's Current Procedural Terminology (CPT®), Centers for Medicare and Medicaid Services (CMS), and public domain specialty society guidance.

Visit NHhealthyfamilies.com to find NH Healthy Families Payment and Clinical Policies. Policies can be found on the Provider Resources page under Manuals, Forms & Resources.

Please contact Provider Services at 1-866-769-3085 with any questions.

CPT codes and CPT descriptions are from current 2018 manuals and those included herein are not intended to be all-inclusive and are included for informational purposes only. Inclusion or exclusion of any codes does not guarantee coverage. Providers should reference the most up-to-date sources of professional coding guidance prior to the submission of claims for reimbursement of covered services.

CPT/HCPCS Code	Descriptor	Unit Limits
A4604	Tubing with heating element	1 every 3 months
A7027	Combination oral/nasal mask, used with continuous positive airway pressure device, each	1 every 3 months
A7028	Oral cushion for combination oral/nasal mask, replacement only, each	2 per month
A7029	Nasal pillows for combination oral/nasal mask, replacement only, pair	2 per month
A7030	Full face mask used with positive airway pressure device, each	1 every 3 months
A7031	Face mask interface, replacement for full face mask, each	1 per month
A7032	Cushion for use on nasal mask interface, replacement only, each	2 per month
A7033	Pillow for use on nasal cannula type interface, replacement only, pair	2 per month
A7034	Nasal interface (mask or cannula type) used with positive airway pressure device, with or without head strap	1 every 3 months
A7035	Headgear used with positive airway pressure device	1 every 6 months
A7036	Chin strap used with positive airway pressure device	1 every 6 months
A7037	Tubing used with positive airway pressure device	1 every 3 months
A7038	Filter, disposable, used with positive airway pressure device	2 per month
A7039	Filter, nondisposable, used with positive airway pressure device	1 every 6 months
A7044	Oral interface used with positive airway pressure device, each	1 every 6 months
A7045	Exhalation port with or without swivel used with accessories for positive airway devices, replacement only	1 every 6 months
A7046	Water chamber for humidifier, used with positive airway pressure device, replacement, each	1 every 6 months

Provider Updates, con't

Postpartum Long-Acting Reversible Contraception Reimbursement Update

Effective January 1, 2018

Please note, this notice includes clarifications to the hospital billing guidelines included in the original notice sent on November 28, 2017.

NH Healthy Families has updated its reimbursement policies effective January 1, 2018 to permit and encourage insertion of Long-Acting Reversible Contraception (LARC) immediately following a vaginal or cesarean delivery as a separately identifiable and paid family planning service. Increasing access to LARC immediately postpartum while the member is still inpatient will increase access to contraceptive devices sooner rather than waiting until the first postpartum visit.

Currently, NH Healthy Families utilizes a rate fixed global payment strategy for pregnancy and delivery. The LARC device is typically bundled into the DRG payment.

Effective January 1, 2018, NH Healthy Families changed its reimbursement to allow payment for the insertion of the LARC and the LARC device.

The following billing guidelines should be followed by physicians:

- ICD-10 family planning code(s) must be included on the claim
- Physicians will submit on a CMS 1500 form for the insertion
- The procedure code for insertion of the LARC device is 58300 and will be reimbursed at the NH State Medicaid Fee Schedule or contracted rate

The following billing guidelines should be followed for hospitals:

- Hospitals will submit claims for the LARC devices on a universal billing (UB) outpatient claim
- Hospitals must append modifier U1 to the following HCPCS codes (include NDC code with procedure code where applicable):

■ J7296	■ J7298	■ J7301
■ J7297	■ J7300	■ J7307

- The above LARC devices will be reimbursed at the NH State Medicaid Fee Schedule rate in addition to the DRG

Disclaimer: Healthcare Common Procedure Coding System (HCPCS) codes are subject to change according to the American Medical Association (AMA) coding updates.

Please contact Provider Services at [1-866-769-3085](tel:1-866-769-3085) with any questions.

Pharmacy Updates

Visit NHhealthyfamilies.com for the latest changes to our Pharmaceutical Policies and Formulary that may affect your patients. If you have any questions, call Provider Services at [1-866-769-3085](tel:1-866-769-3085) and ask for the Pharmacy team.

Call NH Healthy Families Provider Services if you have any questions or concerns about these changes. Thank you for your continued support of our members and being a partner in our network.



- NH Healthy Families PROVIDER SERVICES:
[1-866-769-3085](tel:1-866-769-3085), Monday to Friday, 8 a.m. to 5 p.m.
- Ambetter from NH Healthy Families [1-844-265-1278](tel:1-844-265-1278)



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