

Provider Newsletter

Q3 2023



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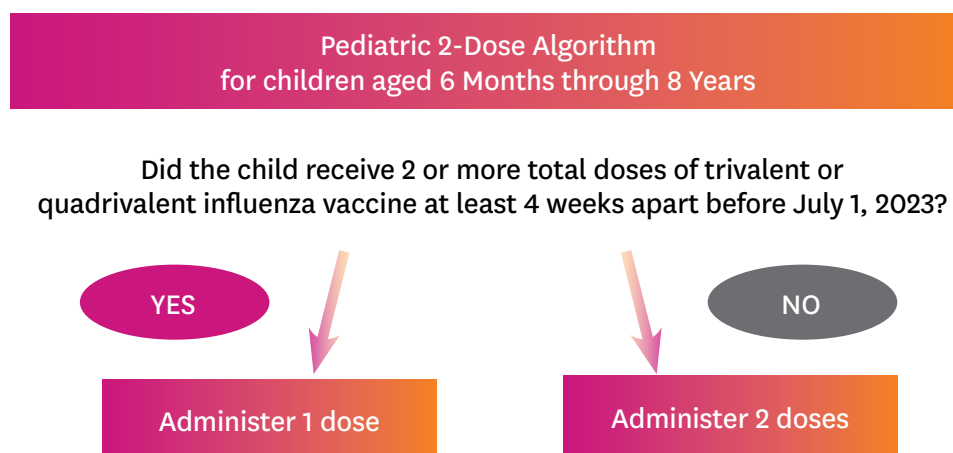


www.SilverSummitHealthplan.com

Vaccination is the best protection against Influenza!

Children should be vaccinated every flu season for the best protection against flu. For most people who need only one dose of flu vaccine for the season, September and October are generally good times to be vaccinated. Ideally, everyone 6 months and older should be vaccinated by the end of October. Some children may require **two doses** of the flu vaccine. For those children, it is recommended to get the first dose as early as July/August when the vaccine becomes available. The second dose needs to be given at least **four weeks** after the first. Flu Vaccines take approximately **two weeks** for the body to develop the antibodies that fight against the influenza Virus (FLU). Early Vaccination is the best way to be protected before the Flu spreads throughout your communities.

Who needs 2 Doses for 2023-2024 Seasonal Influenza Vaccine?



Points to consider for the 2023-24 Influenza Season

- Determination of the number of doses needed is based on the child's age at the time of the 1st dose of 2023-24 flu vaccine and the number of doses of flu vaccine received in previous flu seasons
- Children aged 6 months through 8 years need 2 doses of flu vaccine during their 1st season of vaccination
- Children aged 6 months through 8 years who received 2 or more total doses of any trivalent or quadrivalent flu vaccine (e.g., IIV3, IIV4, LAIV3, LAIV4, ccIIV3, ccIIV4) a minimum of 4 weeks apart before July 1, 2023, only need 1 dose of 2022-23 flu vaccine
- If a child has not received at least 2 trivalent or quadrivalent flu vaccines before July 1, 2023, or their flu vaccination history is unknown, give 2 doses of 2023-24 flu vaccine separated by 4 weeks
 - ▶ Give the 1st dose as soon as possible after vaccine becomes available to allow the 2nd dose to be received by the end of October
 - ▶ The same vaccine product does not need to be used for both doses; use any age-appropriate flu vaccine that is available that day (and ensure you use the correct dose volume, see box below)
 - ▶ Two doses are recommended even if the child turns age 9 years between receipt of dose 1 and dose 2
- When assessing a child's flu vaccine history to determine if 1 or 2 doses are needed, only review flu vaccine doses given prior to July 1, 2023 (i.e., do not include doses received during the 2023-24 flu season)
- Acronyms: Inactivated Influenza Vaccine, trivalent (IIV3) and quadrivalent (IIV4); cell culture based IIV, trivalent (ccIIV3) and quadrivalent (ccIIV4); Live Attenuated Influenza Vaccine, trivalent (LAIV3) and quadrivalent (LAIV4); NOTE: not all these presentations¹ are available in 2023-24

https://www.cdc.gov/flu/highrisk/children.htm#anchor_1577721999236

Provider Claim Reconsiderations and Claim Payment Appeals

Silver Summit Health’s goal is to ensure that providers have a full understanding of the claim reconsideration and payment appeals process and timeframes. Provided is an overview to help make this process as efficient and straight forward as possible for your office staff. Overview includes information on processing claims, subsequent adjustments, reconsiderations, and disputes.

Claim Submission Type	Timeframe for PAR & Non-PAR In State & PAR out of State	Non-PAR Out of State
Initial	180 Days from DOS	365 days from DOS
Corrected Claim	180 Days from DOS	365 days from DOS
Reconsideration	60 Days from the paid date	60 Days from the paid date
Claim Payment Appeal	60 Days from the paid date	60 Days from the paid date

Claims Corrections/Resubmissions:

Requests to change the initial claim.

- To correct a billing error (invalid or incorrect information) in the initial claim submission.

Claim Reconsiderations: Submitted when a provider disagrees with how a clean or adjusted claim was processed.

Examples include but are not limited to:

- Denials related to code edit. Requests related to code edit denial require medical records and must accompany the request for reconsideration.
- In-network providers may also dispute SilverSummit HealthPlan’s policies, procedures, rates, contract disputes, and any aspects of SilverSummit HealthPlan’s administrative functions.
- Payment amount which does not align with expected payment.

Submitters have **60 days** from the paid date to file a timely reconsideration request via our Secure Provider Portal found on our website at silversummithealthplan.com, or by mail to the address below. Requests submitted by mail must include a completed Provider Claim Reconsideration Form, which can be found on the Provider Manuals and Forms page of our website, as well as any supporting documentation.

Please send appropriate forms and supporting documentation to:

SilverSummit Healthplan
 Attn: Claims Department
 P.O. Box 5090
 Farmington, MO 63640-5090

Claim Payment Appeal: Submitted when a provider has received an unsatisfactory response to a previous reconsideration request.

- Any adverse action, including the denial or reduction of claims for services included on a clean claim.
- In-network providers may also dispute SilverSummit HealthPlan’s policies, procedures, rates, contract disputes, and any aspects of SilverSummit HealthPlan’s administrative functions.

Submitters have **60 calendar days** from receipt of notice of an adverse action to file a Claim Payment Appeal. A Claim Payment Appeal must be submitted in writing to the address below and must include a completed Provider Appeal Form, which can be found on the Provider Manuals and Forms page of our website, as well as supporting documentation.

Please send appropriate forms and supporting documentation to:

SilverSummit Healthplan
 Attn: Appeals & Grievances
 P.O. Box 5090
 Farmington, MO 63640-5090

Please note that additional information about the claims and dispute process, including related forms, can be found in the Provider Manual, which is available on our website at silversummithealthplan.com. You can also call Provider Services at 1-844-366-2880 with any questions.

You may also email Provider Relations directly at NVSS_ProviderRelations@SilverSummitHealthplan.com



Updating Provider Directory Information

SILVERSUMMIT HEALTHPLAN RELIES ON OUR PROVIDER NETWORK TO ADVISE US OF DEMOGRAPHIC CHANGES TO KEEP OUR INFORMATION CURRENT.

Thirty-day notice of effective date of change (if available) is recommended to ensure timely processing and to avoid any disruption to our members access to provider information and access to care. This includes any demographic, contact information and provider panel changes.



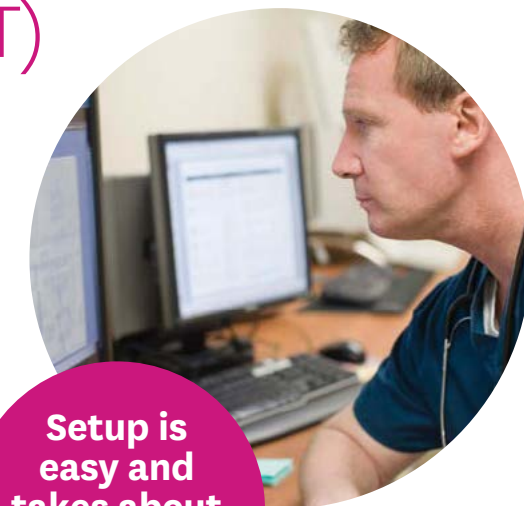
Thank you for helping us maintain up-to-date directory information for your practice.



Electronic Funds Transfer (EFT) Through PaySpan®

FIVE REASONS TO SIGN UP TODAY FOR EFT:

- 1** **You** control your banking information.
- 2** **No** waiting in line at the bank.
- 3** **No** lost, stolen, or stale-dated checks.
- 4** Immediate availability of funds—**no** bank holds!
- 5** **No** interrupting your busy schedule to deposit a check.



**Setup is
easy and
takes about
5 minutes to
complete.**

Please visit www.payspanhealth.com/nps or call your Provider Relations representative or PaySpan at **1-877-331-7154** with any questions. We will only deposit into your account, not take payments out.



Provider Formulary Updates

There have been updates to the Preferred Drug List (PDL).

Visit the plan's website to stay current on current PDL and pharmacy updates. Additional Pharmacy Utilization Management (UM) policy procedures are available in the *Provider Manual* available on our website.



Provider Resources

Provider News – Provider Portal

Log in to the secure provider portal using the Secure Login area on our home page. Messages from the HP are located on the right side of the provider home page.

Remember, you can check the status of authorizations and/or submit them online. You can also chat with us online instead of calling.

Resources and Tools

Guidelines, key forms and other helpful resources from the homepage. You may request hard copies of documents by contacting your Provider Relations representative.

For detailed information on Claims, Appeals and Pharmacy, please visit and review the *Provider Manual* and *Quick Reference Guide* located on our websites listed below.

▶ **Silver Summit Healthplan:** silversummithealthplan.com/providers.html

▶ **Wellcare By Allwell:** wellcare.silversummithealthplan.com

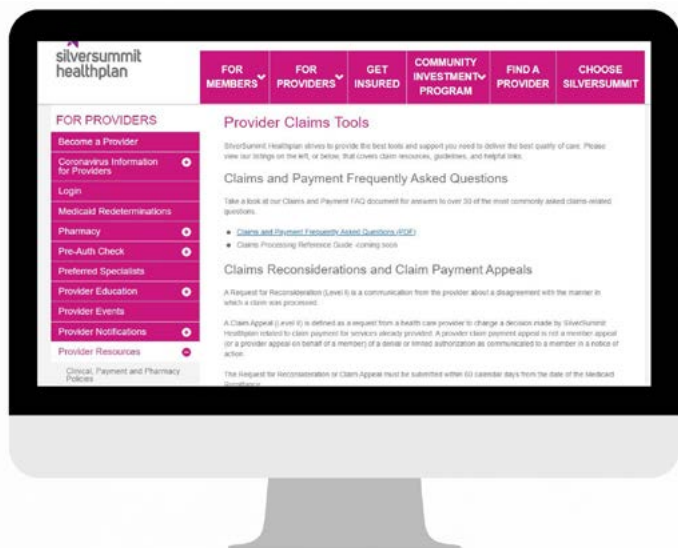
▶ **Ambetter:** ambetter.silversummithealthplan.com

Criteria to Guidelines Available

Clinical guidelines detailing medical necessity criteria for several medical procedures, devices and tests are available on the [website, click on Tools.](#)



SilverSummit has now launched our new Provider Claims Tools section!



What's New

SilverSummit Healthplan is pleased to announce a new area on our webpage.

New Section Outlines

- Claim FAQs
- Claim Reconsiderations & Claim payment appeals
- Latest SSHP Payment Policies Claim Resources
- Claim Resources

Clinical Documentation Improvement (CDI) Upcoming Webinars

Learn more about: Risk Adjustment

Each webinar includes an overview of Risk Adjustment (RA) and Hierarchical Condition Categories (HCCs).

To register, please click on the link next to the webinar you would like to attend.

Risk Adjustment 101 Medicare: Best Practices

- [Tuesday, September 19 @ 10am \(EST\)](#)
- [Thursday, September 21 @ 3pm \(EST\)](#)
- [Tuesday, September 26 @ 12noon \(EST\)](#)
- [Thursday, September 28 @ 6pm \(EST\)](#)
- [Friday, September 29 @ 9am \(EST\)](#)



Meet the Provider Relations Team



Jasmine Butler

Provider Relations Specialist – Southern Nevada
OB-Gyns, Clark County FQHCs, Perinatology, Pediatrics
and Pediatric Sub-Specialties, Labs, P3 Medicare, PCP
Provider Group or Last Name F-J

Jasmine.n.butler@silversummithealthplan.com

702.540.0433



Estel Davis

Provider Relations Specialist – Southern Nevada
DMEs, Home Health, Endocrinology, Rheumatology,
Pulmonary, Allergy, PCP Provider Group or
Last Name U-Z

Estel.davis@silversummithealthplan.com

702.274.9536



Roberto Navarro

Provider Relations Specialist – Southern Nevada
Hospitals, Hospitalists, ASCs, SNFs/LTAC, Urgent Care
Facilities, Medical Transport, Air Ambulance, UNLV,
UMC, IHC, Arkos, Provider Group or Last Name A-E

Robertomiguel.b.navarro@silversummithealthplan.com

702.427.5522



Chelsea Purisima

Provider Relations Specialist – Southern Nevada
Pain Management, Ophthalmology, Cardiology,
Oncology, Hematology, Neurology, Radiology, Physical
Therapy, Occupational Therapy, Speech Therapy,
Orthopedic, Provider Group or Last Name P-T

chelsea.purisima@silversummithealthplan.com

702.375.0991



Tamilya Hicks-Credle

Provider Relations Specialist – Southern Nevada
Behavioral Health, IMD, Crisis Stabilization Centers,
CCBHCs, PCP Provider Group or Last Name K-O

tamilya.e.hickscredle@silversummithealthplan.com

702.271.6752



Christina Galan

Provider Engagement Manager
VBC, P4P, CoC, Quality

christina.galan@silversummithealthplan.com

503-730-5202



Jessica Martyniuk

Provider Relations Specialist – Northern Nevada
Hospitals, Hospitalists, ASCs, SNFs/LTAC, Urgent Care
Facilities, Medical Transport, Air Ambulance,
All Specialties, Rural

jessica.martyniuk@silversummithealthplan.com

775.781.5214



Karina Torres

Provider Relations Specialist – Northern Nevada
FQHCs, Behavioral Health/CCBHCs/IMD/Crisis Stabilization
Center, Ob-Gyn, Pediatrics and Pediatric Sub-Specialties,
Labs, DMEs

karina.torres@silversummithealthplan.com

775.900.7128



Christine Sanders

Senior Manager, Provider Relations

chistine.sanders@silversummithealthplan.com

702.419.7008