

# Provider Newsletter

[www.SilverSummitHealthplan.com](http://www.SilverSummitHealthplan.com)



**MATERNAL  
AND INFANT HEALTH TRAINING**

**EXPRESS SCRIPTS  
TRANSITION  
FREQUENTLY ASKED QUESTIONS**

**PHARMACY  
CLAIMS  
UPDATE 2024**



**silversummit  
healthplan™**

November 2023

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# Maternal and Infant Health Training



## Webinar: Help Fight the Syphilis Epidemic

Syphilis cases are on the rise in the United States.

Syphilis cases have increased 80 percent in the past five years (all stages and congenital syphilis). There were more than 3,700 congenital syphilis cases reported in 2022, reflecting an alarming 937 percent increase in the past decade.

One test can save 2 lives. Syphilis testing is recommended at the first prenatal visit for all pregnant women regardless of the risk factors. Testing is free and easy.

Silversummit Healthplan will be hosting webinars so we all can help fight the syphilis epidemic. We look forward to your attendance on any of these webinar dates (no need to register twice):

Click to Register:

**[March 06, 2024 - 12:00pm - Register](#)**

**[March 13, 2024 - 12:00pm - Register](#)**

**[March 20, 2024 - 12:00pm - Register](#)**

**[March 27, 2024 - 12:00pm - Register](#)**



# Important Pharmacy Claims Processing Change Effective January 1, 2024



Dear Providers,  
We are pleased to announce that, effective January 1, 2024, Express Scripts® will begin processing pharmacy claims for our plan members.

Express Scripts is a pharmacy benefit management (PBM) company serving more than 100 million Americans. Express Scripts Pharmacy delivers specialized care that puts patients first through a smarter approach to pharmacy services.

Members have been notified in advance and will receive a new ID card with updated pharmacy information, so that they are prepared to begin having their prescriptions filled at participating network pharmacies when this change occurs.

Providers can direct members to call the Member Services phone number listed on their ID card should they have questions about this change.

Please contact your Provider Relations Representative with any additional questions.

Thank you for the care you provide to our members.

Thank you,  
SilverSummit Healthplan





## Express Scripts Transition: Frequently Asked Questions

This FAQ provides additional information on the migration of our Pharmacy Benefit Manager (PBM) services from CVS® to Express Scripts®, effective January 1, 2024.

### **Who is Express Scripts?**

Express Scripts is a pharmacy benefit management (PBM) company serving more than 100 million Americans. Express Scripts Pharmacy delivers specialized care that puts patients first through a smarter approach to pharmacy services.

### **What is the rationale for changing PBM vendors?**

Express Scripts as our PBM will bring increased levels of transparency and value, positioning us to provide the highest level of quality at the lowest possible cost to our members.

### **What PBM services will Express Scripts be providing?**

Express Scripts will be the PBM of record providing pharmacy claims adjudication, pharmacy network administration and rebate administration on behalf of our health plan.

### **How will this PBM transition impact our members?**

There will be no immediate change in service for our members, although they will receive new ID cards. We will continue to provide the same member-focused care and support as we do today.

Our highest priority continues to be serving all our members, and we remain committed to providing affordable quality healthcare services. Our team is working closely with both CVS and Express Scripts to ensure a seamless migration.

### **Is Amazon part of the Express Scripts Network?**

Yes, Amazon is part of the Express Scripts network.

### **Can members still use CVS Caremark for their mail orders?**

No, CVS Caremark Mail Service Pharmacy will be out of network, effective January 1, 2024. If members wish to continue using mail order in 2024, they must switch to Express Scripts Pharmacy.



## Express Scripts Transition: Frequently Asked Questions

### **Who is Express Scripts?**

Express Scripts is a pharmacy benefit management (PBM) company serving more than 100 million Americans. Express Scripts Pharmacy delivers specialized care that puts patients first through a smarter approach to pharmacy services.

### **Do members have a choice besides Express Scripts for mail order services?**

Members have a choice to use other pharmacies that offer home delivery, but Express Scripts Pharmacy is the preferred mail order pharmacy for our health plan.

### **Are we communicating this mail order change to members?**

Yes. Impacted Medicaid members will receive a Mail Order Change notification letter.

### **How will members get started with mail order at Express Scripts?**

#### **For existing mail order users:**

- Most open prescription refills will be automatically transferred to Express Scripts
- Refills for controlled drugs, such as Alprazolam, Clonazepam, Pregabalin, Tramadol, Zolpidem, etc., will not automatically transfer to Express Scripts Pharmacy; members must request a new prescription from their provider

#### **For new mail order prescriptions on or after January 1, 2024, members may do one of the following:**

- Ask their provider to electronically submit or fax a new prescription to Express Scripts Pharmacy, as listed on their medical ID cards
- Visit [express-scripts.com/rx](https://express-scripts.com/rx) to register or sign in, then follow the guided steps to request a prescription
- Call Express Scripts Pharmacy, who will contact their provider for a new prescription to be filled via mail order
- Mail a Home Delivery Order Form (available at [express-scripts.com/rx](https://express-scripts.com/rx)) directly to Express Scripts Pharmacy

### **Does Express Scripts offer a mail order app?**

Yes, members will be able to download the Express Scripts Pharmacy app, available on the App Store and Google Play. Members with a mail order benefit can order medications, track delivery and more.

# Guidelines for Providers

## Appointment Availability and Access Standards

SilverSummit Healthplan follows the availability requirements set forth by applicable regulatory and accrediting agencies. SilverSummit Healthplan monitors compliance with these standards on at least an annual basis and will use the results of appointment standards monitoring to first, ensure adequate appointment availability and second, reduce unnecessary emergency room utilization.

Type of Appointment	Scheduling Time Frame
<b>Emergency Services</b>	
Emergency Services	24 hours/7 days a week with unrestricted access, to a qualifying provider in network or out of network
<b>Primary Care</b>	
Emergent	Same-day care
Urgent Care	2 calendar days
PCP Routine, Non-Urgent or Preventative Care	Within 2 weeks. The 2 weeks standard does not apply to regularly scheduled visits to monitor a chronic medical condition if the schedule calls for visits less frequent than once every 2 weeks.
<b>Specialist Care</b> (For specialty Referrals to, Behavioral Health Services, physicians, therapists, vision services, and other diagnostic and treatment Providers)	
Specialty Care Emergent	Same-day within 24 hours of referral
Specialty Care Urgent	Within 3 calendar days of the referral
Specialty Care Routine	Within thirty (30) days of referral or as clinically indicated
Child/Adolescent Specialist	Upon request of the parents
<b>Maternity Care</b>	
Within First Trimester	Within 7 calendar days of the first request
Within the Second Trimester	Within 7 calendar days of the first request
Within the Third Trimester	Within 3 calendar days of the first request
High Risk Pregnancies	Within three (3) days of identification of high risk by <a href="#">SilverSummit Healthplan</a> or by the maternity care provider or immediately if an emergency exists
<b>Home Health, Private Duty Nursing and Personal Care Services</b>	
Urgent Needs	Same-day
Non urgent needs	Within fourteen (14) Calendar Days
<b>Appointments to Maintain Efficacy of Treatment</b>	
Not urgent or emergent	Within fourteen (14) Calendar Days of the first <a href="#">request</a> ; or Within the timeframe recommended by the referring Provider.

## Office Wait Times

Unless the provider is delayed or unavailable due to an emergency, urgent case, serious problem or unknown patient need that requires more services or education than was described at the time the appointment was scheduled SilverSummit Healthplan Members shall not wait longer than one (1) hour for a scheduled appointment. This includes time spent in the waiting room and in the exam room.

## Hours of Operation

The provider must offer hours of operation no less than the operating hours offered to commercial Members or comparable to Medicaid FFS Members if the provider does not provide health services to commercial Members.



FROM | **silversummit**  
**healthplan**

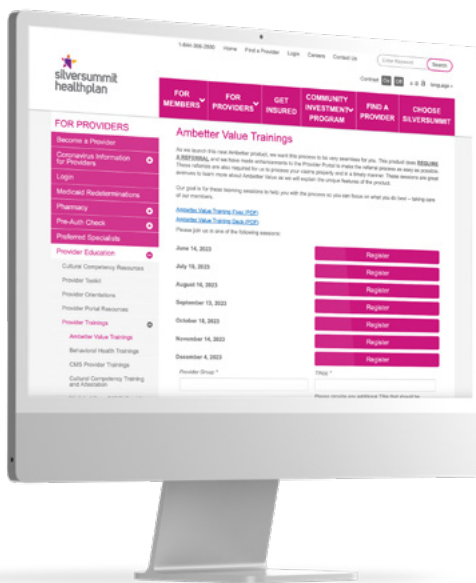


# Ambetter Value Trainings

Welcome to Ambetter Value, we want this process to be very seamless for you. This product does REQUIRE A REFERRAL and we have made enhancements to the Provider Portal to make the referral process as easy as possible. These referrals are also required for us to process your claims properly and in a timely manner. These sessions are great avenues to learn more about Ambetter Value as we will explain the unique features of the product.

Ambetter Value features a primary care physician (PCP)-centric approach to care delivery. PCPs coordinate our Members' medical care, as appropriate, either by providing treatment or by issuing referrals to other in-network providers. For services to be covered, they must be provided by or referred by a PCP. Emergency care, urgent care, and in-network mental health, behavioral health, and obstetrical or gynecological services are excluded from this requirement. As requirements may change, please refer to the provider portal for the most up-to-date list of specialties exempt from referral. It is also important you confirm you network participation in the Ambetter Value product. Please contact your Provider Relations Representative if you have any questions.

**Our goal is for these learning sessions to help you with the process so you can focus on what you do best -- taking care of our Members.**



Provider Group *	TRAIN *
Please provide any additional TRN that should be referenced in this form.	
LAST *	FIRST *
EMAIL *	PHONE *
TITLE *	CLEAR *
Training Completion: * <input type="checkbox"/> The Ambetter Value Training has been completed by the Provider above	

<https://www.silversummithealthplan.com/providers/provider-education-and-training/clinical-training/ambetter-value-trainings.html>