Provider Newsletter

May 2023





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Transforming the health of the community, one person at a time.





Promoting access to equity & quality care

On March 22, SilverSummit proudly partnered with UMC to host an event focusing on promoting access to equity and quality care. At the clinical event, at the UMC Aliante, members had the chance to receive immunizations and preventive screenings, including A1C testing. In just 6 hours, we saw incredible results – 33 quality measures were closed.

We are dedicated to providing our members with equitable care, and this event was just one example of how we strive to meet this commitment in tangible ways. We look forward to continuing our collaboration with UMC and other partners in the future so that together we can build healthier communities and a more equitable healthcare system.

March 22, UMC Aliante - Closed 37 gaps in one day

- A1C 4
- Retinopathy 5
- Wellness Visits 6
- Colorectal Cancer Screening (Cologaurd) sign-ups 11

Mammograms - 10

Flu Shot - 1

UMC Aliante Event – Mammo Van provided by Nevada Health Center



Get everyday health care products at no cost to the member

2023 Over-the-Counter (OTC) Benefits

As part of the SilverSummit Healthplan, the member receives a \$30 quarterly benefit allowance that they can spend at any OTCHS CVS Pharmacy enabled store.





The allowance is for health care products and includes:

- · Pain relievers
- · Adult and incontinence care
- · Cold, cough and allergy remedies
- · Home health care
- · Digestion and antacid remedies
- · Vitamins and minerals
- · Ear, eye, and foot care

And many more non-prescription items to help the member take care of their health.



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There are three ways for members to order:

- · Pick up at a participating CVS Pharmacy
- · Order online at www.cvs.com/otchs/silversummit
- · Order by phone by calling 1-888-262-6298 Monday-Friday, 9 AM to 8 PM local time



New Value-Added Benefits for your Patients in 2023!



Individuals get a Free Gym Benefit

SilverSummit is offering the ActiveandFit program for the gym benefit. The program offers flexible gym options to meet fitness needs.

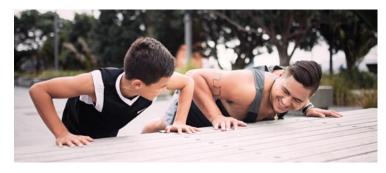
Members Get

- Gym membership to one of the participating fitness centers
- One Home Fitness Kit per benefit year. There are 10 options to choose from.
- · Workout plans to help start an exercise routine
- · A variety of On-demand workout videos
- The ActiveandFit Connected![™] for tracking activity
- · Online resources

How do they get started?

New! Members must complete a general health risk screening to receive the gym benefit. They can complete general health risk screening on the member portal at silversummithealthplan.com. They can also call Member Services at 1-844-366-2880 for help.

Active&Fit SilverSummit Customer Service toll-free at 1.877.771.2746 (TTY/TDD: 711)



Individual or Families get a FREE YMCA Membership! *

Individual or Families get a FREE YMCA Membership! *
YMCA Family Membership: full access to fitness center,
group exercise classes, access to pool, gymnasium, family
events, kid's gym, youth fitness classes and much more. *

- · YMCA Youth Summer Camp
- YMCA After School Care for your Kids at select schools*
- YMCA Teen Job Training Program*
- * Clark County Only













SilverSummit offers Providers and their Patients Important Resources



Claims Quick Reference Guide

A one-page reference guide to these typical requests will help you navigate the claims, reconsideration, and appeals processes for SilverSummit Healthplan.

Click for the Guide:

https://www.silversummithealthplan.com/content/dam/centene/Nevada/Notifications/2023Notifications/QuickReferenceGuideforClaimsReconsiderationandAppeals.pdf

Learn More about Payspan:

SilverSummit Healthplan is pleased to partner with PaySpan Health to provide an innovative web based solution for Electronic Funds Transfers (EFTs) and Electronic Remittance Advices (ERAs). This service is provided at no cost to providers and allows online enrollment.

To learn more:

https://www.silversummithealthplan.com/providers/resources/electronic-transactions/payspan---eft-era.html





Important information regarding your patients' Medicaid renewals is coming up fast



In March 2020, a temporary hold was put in place to halt Medicaid insurance renewals. That has now ended and renewals begin April 1, 2023.

To keep your patients covered please remind them to prepare for renewals by:

- Update their contact information. Make sure their mailing address, phone number, and email are up to date.
- To check the mail. A letter will be mailed out to each member about their Medicaid coverage. This letter will let them know if they need to complete a renewal form and to see if they still qualify for Medicaid coverage.
- Complete the renewal form immediately. Fill out form and return right away to avoid a gaps Medicaid coverage.
- 4 If they need help or have questions? Call 1-(844) 366-2880.

Many Medicaid beneficiaries are unaware of the State's changes in renewals and this could have an impact on themselves or family members. SilverSummit is taking proactive steps to ensure their coverage is maintained by a rigorous plan that includes calls, texts, and emails and it is important to tell the member to be patient, as we are trying to keep them informed.

If they no longer qualify for Medicaid? Please refer them to our affordable health insurance with Ambetter by SilverSummit. Explore Coverage Options https://ambetter.silversummithealthplan.com/#/

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 willuse 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
Emergency Services	
Emergency Service	es 24 hours/7 days a week with unrestricted access,
	to a qualifying provider in network or out of
	network
Primary Care	
Emergent	Same day care
Urgent Care	2 calendar days
PCP Routine, Non-Urgent or Preventative	Within 2 weeks. The 2 weeks standard does not
Care	apply to regularly scheduled visits to monitor a
	chronic medical condition if the schedule calls for
	visits less frequent than once every 2 weeks.
Specialist Care	
(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
Maternity Care	
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
	SilverSummit Healthplan or by the maternity care
	provider or immediately if an emergency exists
Home Health, Private Duty Nursing and Personal Care Services	
Urgent Needs	Same day
Non urgent needs	Within fourteen (14) Calendar Days
Appointments to Maintain Efficacy of Treatment	
Not urgent or emergent	Within fourteen (14) Calendar Days of the first
-	request;
	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.





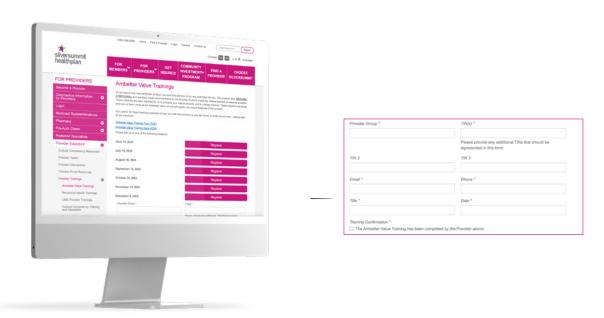
Ambetter Value Trainings



As we launch this new Ambetter product, 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.



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