



Provider Perspective

Inside this issue...

Site Spotlight: Provider Website Feature

Medical Record Requests for HEDIS

Chart Review & Quality Reporting

HEDIS Highlight – Meet the Measure

Quarter 1 2024

SANFORD[®]
HEALTH PLAN



2024

A new year always brings thoughts of new goals and new adventures. It is also a time for reflection of what has been. In 2023, we know that many of you encountered times of questioning, hard work and tough choices, but we also know that there were times of growth, showing what you were made of, and opportunities for awe and peace. We want to say 'Thank you' for the amazing job you do as you provide services, advice, care and fulfill your commitments to our Sanford Health Plan members.

A new year can mean plan changes and updates, so please reach out to us to discuss how a member's plan has updated or changed, or even to verify a member's eligibility. We look forward to serving you in any way that we are able.

Thank you,
Sanford Health Plan Leadership
and Teams



Site Spotlight Provider Website Feature

Please visit our Clinical Resources page
sanfordhealthplan.com/providers/resources.

This page can be a helpful tool as you work with Sanford Health Plan members.

Clinical resources include:

- Screening Tools
- Clinical Practice Guidelines
- Shared Decision-Making Aids
- Cultural Competency Trainings and Resources

Medical Record Requests for HEDIS Chart Review & Quality Reporting: Coming in February – May 2024

Providers are encouraged to inform their staff of upcoming medical record requests and timelines for HEDIS (Healthcare Effectiveness Data and Information Set) chart reviews, which begin in February and go through May 2024.

The purpose of HEDIS reporting is to evaluate performance in terms of clinical quality and customer service. HEDIS is reported annually as required by state and federal agencies, as well as the National Committee for Quality Assurance (NCQA). As both state and federal governments continue toward a quality-driven health care industry, HEDIS rates are becoming more important to both health plans and providers. LEARN MORE ABOUT HEDIS at ncqa.org/hedis.

Provider responsibilities regarding medical records requests can be found in Sanford Health Plan's provider manual and policy, which is considered an extension of the Sanford Health Plan provider contract.

What to Expect: Sanford Health Plan-contracted quality reviewers will reach out to providers beginning in February with a letter outlining the essential documents and information needed, along with submission instructions for this review. Additional follow-up requests may be sent through early May.

Please note:

- Records reviewed by Sanford Health Plan are kept completely confidential, and member-specific information is not provided to outside sources, including employers.
- Additional consent or authorization from the member/patient is not required. Protected health information (PHI) disclosed for purposes of treatment, payment or operations, including quality improvement activities such as HEDIS reporting, is permitted by privacy rules according to Health Insurance Portability and Accountability Act (HIPAA).

If the volume of records requested is too large, or you do not have adequate staff to complete the chart retrieval, we encourage providers to reach out to us using the following options to determine another authorized method to collect the information:

Email: HEDIS@sanfordhealth.org

Phone: (605) 328-6839

Toll-free: (877) 305-5463, request extension 86173

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

HEDIS HIGHLIGHT

Meet the Measure

Meet the Measure provides a collaborative opportunity to provide quality care for members through gathering patient data and increasing clinic access to helpful tools.

Social Need Screening and Intervention

A Healthcare Effectiveness Data and Information Set [HEDIS®] measure

What is the measure?

- The percentage of members who were screened, using prespecified instruments, at least once during the year for unmet food, housing and transportation needs, and received a corresponding intervention if they screened positive.

Please note: Patients are excluded if they:

- Are in hospice or using hospice services any time during the Measurement Year.
- Are Medicare members 66 years of age and older by the end of the measurement period who meet either of the following:
 - Enrolled in an Institutional Special Needs Plan (I-SNP)
 - Living long-term in an institution, as identified by the LTI flag in the Monthly Membership Detail Data File

Patient Medical Records Should Include:

- A screen that has been completed within the year.
- A positive screen finding must be documented in the medical record.
- A positive screen finding must be met by an intervention.
- An intervention corresponding to the type of need identified on or up to 30 days after the date of the first positive screening during the year.

Intervention for positive screenings may include any of the following intervention categories: assistance, assessment, counseling, coordination, education, evaluation of eligibility, provision, or referral.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)

Contact Us

CONTACT FOR: Member eligibility & benefits, member claim status, provider directory, complaints, appeals, report member discrepancy information

Customer Service (800) 752-5863

Monday-Friday, 7:30 a.m. to 5 p.m. CST

@ memberservices@sanfordhealth.org

CONTACT FOR: Preauthorization/precertification of prescriptions or formulary questions

Pharmacy (855) 305-5062

@ pharmacyservices@sanfordhealth.org

CONTACT FOR: Preauthorization/precertification for medical services

Utilization Management (800) 805-7938

@ um@sanfordhealth.org

CONTACT FOR: Assistance with fee schedule inquiries, check adjustments and reconciling a negative balance, request explanation of payment (EOP), claim reconsideration requests, W-9 form, change/updating information, provider education

Provider Relations (800) 601-5086

@ providerrelations@sanfordhealth.org

CONTACT FOR: Requests to join the network and contract-related questions and fee schedule negotiation

Provider Contracting (800) 601-5086

@ sanfordhealthplanprovidercontracting@sanfordhealth.org

CONTACT FOR: Align powered by Sanford Health Plan Medicare Advantage PPO

Customer Service (888) 278-6485 | TTY: (888) 279-1549

Utilization Management (800) 805-7938

Pharmacy Dept (844) 642-9090

CONTACT FOR: Great Plans Medicare Advantage (ISNP)

Customer Service (844) 637-4760 | TTY: (888) 279-1549

Utilization Management (800) 805-7938

Pharmacy Dept (855) 800-8872

Hearing or speech impaired TTY | TDD 711