Annual Risk Adjustment Data Validation (RADV) Audit

Sanford Health Plan partners with Change Healthcare to conduct the annual Health and Human Services (HHS) Center for Medicare and Medicaid Services (CMS) RADV audit.

This audit includes chart reviews from randomly selected members covered under an Affordable Care Act (ACA) plan and validates information supplied to the government specific to enrollment and diagnosis codes reported for 2018 claims. This year requests will come from EMSI who works directly with Change Healthcare and Sanford Health Plan to collect appropriate medical records for this audit.

To complete the audit, we are asking for you to submit complete medical record documentation for the selected members. Requests will begin going out in July and continue throughout the summer. All medical records requested will need to be submitted prior to November 1, 2019. EMSI will send a letter communicating to those providers selected for chart reviews outlining the specific request and where to submit the documentation.

REMINDER: Optum Claims Editing System Implementation

Sanford Health Plan is in the process of updating its claims editing software to Optum® Claims Editing System (CES). We expect to implement the software this summer.

As with our current claims editing system, Experian, Optum® CES utilizes national coding edits, edits based on CPT® guidelines, specialty society edits and clinically derived edits.

Watch for additional information about this in future editions of Fast Facts.
Preventive Health Guidelines Update

Preventive Health Guideline (PHG) updates effective July 1, 2019, are available in the provider portal under the ‘Resources’ program.

Preventive Health Guidelines Update Highlights:
- A Comprehensive Metabolic Panel (CMP) is now covered during a preventive visit. **NOTE:** Basic Metabolic Panel (BMP) is only covered under preventive benefits through the remainder of 2019 dates of service. Beginning January 1, 2020, BMP will be covered under deductible/coinsurance.
- Vision screenings are only considered preventive from ages 3-5 and are now allowed to be separately billable.
- Screening and counseling for unhealthy alcohol use for adults ages 18 and older, including pregnant women is now covered.
- Obesity screening and counseling for adults is now covered.
- Screening for syphilis in all pregnant women is now covered.
- Screening for cervical cancer: Coverage is the same with the addition of coverage for HPV testing alone every 5 years for women age 30-65. **Note:** Screening does not need to be done in conjunction with the Pap smear test.
- Osteoporosis screening for women 65 or older or women under age 65 who are at risk is now covered.
- Skin cancer counseling for ages 6 months to 24 years of age as part of a preventive exam is now covered.
- Coverage for screening mammogram codes only; diagnostic mammogram codes are removed and will be covered under deductible/coinsurance.
- Added age restrictions for diabetes screenings to 40-70 years of age.
- Added age restrictions for colonoscopies with family history or genetic predisposition to 40+ years of age.

Preventive Health Guidelines Reminders
- Annual services do NOT need to be scheduled 12 months apart. They are allowed once per calendar year.
- Services performed outside the Preventive Health Guidelines and/or billed with a medical diagnosis will be applied to the Member’s plan benefit (deductible/coinsurance may apply).
- If services are provided as outlined, they are covered at 100% unless the plan document states otherwise.
Cultural and Linguistic Competency

The purpose of Cultural and Linguistic Competency is to ensure Sanford Health Plan and its Providers meet the unique, diverse needs of Members, value diversity within the organization, and identify Members in need of linguistic services and have adequate communication support for such Members. Providers shall recognize and make arrangements to care for the culturally diverse needs of the Members they serve.

Culturally and linguistically appropriate services (CLAS) are health care services respectful of, and responsive to, cultural and linguistic needs. The delivery of culturally competent health care and services requires health care Providers and/or their staff to possess a set of attitudes, skills, behaviors and policies which enable the organization and staff to work effectively in cross-cultural situations.

The objectives of Cultural Competency Compliance are to:

• Identify Members who have potential cultural or linguistic barriers for which alternative communication methods are needed
• Utilize culturally sensitive and appropriate educational materials based on the Member’s race, ethnicity and primary language spoken (including American Sign Language)
• Make resources available to meet the unique language barriers and communication barriers existing in the population
• Provide education to associates/staff on the value of the diverse cultural and linguistic differences in the organization and the populations served
• Decrease health care disparities in the minority populations served
• Compliance in providing services in a culturally nativeness manner.

Sanford Health Plan expects Providers to:

• Have written materials available for Members in large print format and certain non-English languages, prevalent in Sanford Health Plan’s service areas.
• Telephone system adaptations for Members needing the TTY/TDD lines for hearing impaired services.
• Providers may contact the Health Plan for language assistance.
• Access to or staff able to translate in non-English languages including American Sign Language.
• Obtain Cultural Competency Training including the review of materials on the Sanford Health Plan Provider Portal and/or newsletters.

ATTENTION: North Dakota Medicaid Expansion Providers

The Federal Consent for Sterilization (HHS-687) form is available online for your use. Completion of this form is highly recommended before Medicaid Expansion patients undergo sterilization procedures. Providers can obtain the form online at: www.sanfordhealthplan.com/providers/medicaid-expansion
Policy Updates:

**Benefit Reimbursement Policy Updates:** To view this benefit reimbursement policy, log in to the provider portal mySanfordHealthPlan; benefits and reimbursement policies are located under the ‘Resources’ tab.

- Assistant at Surgery
- Chiropractic Care
- Cranial Prosthesis (Wig)
- Home Health Care
- Immunizations
- Preventive Health Guidelines

**Other Policy Updates:** To view this policy, log in to the provider portal mySanfordHealthPlan; policies are located under the ‘Resources’ tab.

- Claim Re-Considerations PR-014
Contact Us:

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

@ membersservices@sanfordhealth.org
Customer Service
Monday-Friday, 7:30 a.m. to 5:00 p.m. CST | (800) 752-5863
NDPERS Customer Service
Monday-Friday, 8:00 a.m. to 5:30 p.m. CST | (800) 499-3416
ND Medicaid Expansion
Monday-Friday, 7:30 a.m. to 5:00 p.m. CST | (855) 305-5060

CONTACT FOR: Preauthorization/precertification of prescriptions or formulary questions

@ pharmacyservices@sanfordhealth.org
Pharmacy [855] 305-5062
NDPERS Pharmacy [877] 658-9194
ND Medicaid Expansion [855] 263-3547

CONTACT FOR: Preauthorization/precertification for medical services

@ um@sanfordhealth.org
Utilization Management [800] 805-7938
NDPERS Utilization Management [888] 315-0885
ND Medicaid Expansion [855] 276-7214

CONTACT FOR: Assistance with provider portal password resets & logging in fee schedule inquiries, check adjustments & reconciling a negative balance, request explanation of payment (EOP), claim reconsideration requests, W9 form, change/updating information, provider education

@ providerrelations@sanfordhealth.org
Provider Relations [800] 601-5086

CONTACT FOR: Requests to join the network and contracted related questions, fee schedule negotiation, provider credentialing

@ sanfordhealthplanprovidercontracting@sanfordhealth.org
Provider Contracting [855] 263-3544

Hearing or speech impaired TTY | TDD (877) 652-1844
Translation Assistance for Non-English Speaking Members (800) 892-0675