

April 29, 2022

**Subject:** Updated Value-Based Insurance Design Model Hospice Benefit Component Notice of Election (NOE) and Claim Submission Information

Presbyterian Health Plan, Inc. (Presbyterian) is pleased to announce that the Centers for Medicare & Medicaid Services (CMS) Innovation Center has again selected Presbyterian to participate in the Hospice Benefit Component of the Value-Based Insurance Design (VBID) Model for 2022. A list of all plans participating in the Hospice Benefit Component nationwide can be found at

https://innovation.cms.gov/innovation-models/vbid-hospice-benefit-participating-plans.

The VBID Model allows health plans to offer additional benefits within certain Medicare Advantage plans to treat specific chronic and socioeconomic conditions. Presbyterian has three plans participating in this Model: Presbyterian Senior Care Plan 1 (HMO), Presbyterian Senior Care Plan 2 with Rx (HMO) and Presbyterian Senior Care Plan 3 with Rx (HMO).

We would like to take this opportunity to provide important information to Presbyterian's contracted hospice agencies regarding the VBID Model in relation to Notices of Election (NOEs), Notices of Termination/Revocation (NOTRs), claims, transitional concurrent care benefits and supplemental benefits.

## Submitting Notices of Election and Notices of Termination/Revocation

Per CMS requirements, all hospice agencies must submit all NOEs and NOTRs to original Medicare and Presbyterian. To submit a notice to Presbyterian, please submit electronically through your clearinghouse following the same guidelines provided by CMS. If you are not established with a clearinghouse, then you may submit your NOE using Fast Claim. An overview of the CMS guidelines and the Hospice Benefit Component may be viewed at <a href="https://innovation.cms.gov/innovation-models/vbid-hospice-benefit-overview">https://innovation.cms.gov/innovation-models/vbid-hospice-benefit-overview</a>.

Fast Claim is a tool used to submit both NOEs and claims directly to Presbyterian. Fast Claim may be accessed at https://www.claim.md/phs.plx. If you are unable to submit electronically through a clearinghouse, then please securely email the notice(s) to PHPHospiceNOE\_NOTR@phs.org.

Please note that while Presbyterian follows CMS filing requirements, during the first part of 2022, Presbyterian will review extenuating circumstances that caused agencies to submit NOEs and NOTRs after the five-day filing limit. Effective June 1, 2022, Presbyterian will begin denying claims for NOEs that are not received within the required five-day filing limit.

## **Submitting Claims**

Hospice agencies must submit all claims **to original Medicare and Presbyterian**. Hospice claims for Presbyterian members should only be submitted to Presbyterian for NOE effective dates that are after Jan. 1,

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Page 1 of 3

Presbyterian exists to improve the health of the patients, members and communities we serve.

2021, and later. Any hospice claims with NOEs that are dated before Jan. 1, 2021, will continue to be paid by original Medicare.

Presbyterian encourages hospice agencies to submit NOEs and hospice claims electronically through a clearinghouse. Please note that electronic payor ID depends on the clearinghouse. For more information, please view the Presbyterian Practitioner and Provider Manual at www.phs.org/providermanual.

Contracted providers who do not submit claims through a clearinghouse may contact their Provider Network Operations (PNO) relationship executive for more information on how to submit NOEs and claims through Fast Claim, which may be accessed at https://www.claim.md/phs.plx.

If providers are unable to submit claims to Presbyterian electronically, then paper claims may be mailed to the following address:

Presbyterian Health Plan P.O. Box 27489 Albuquerque, NM 87125-7489

## Transitional Concurrent Care Services and Supplemental Benefits Requirements

Presbyterian's participation in the Hospice Benefit Component includes a set of transitional concurrent care services and additional supplemental benefits that allow members seeking care with in-network hospice agencies to complete a current course of curative care services as they transition to hospice. The services are available for a limited time period, usually 30 days after the initial hospice election. Presbyterian will cover these services when the following requirements are met:

- The need for ongoing curative care and the type and duration of such care is documented in the patient's care plan established by the hospice medical director.
- Presbyterian members in the Hospice Benefit Component who experience a hospital admission during their hospice enrollment period are eligible for supplemental benefits designed to prevent readmission to a hospital. Services include transportation to hospice provider visits, one meal per day (up to 60 meals over the hospice election period) and certain home modifications.
- The care plan is communicated to Presbyterian's Utilization Management and/or pharmacy team to
  establish the record of needed services, which enables Presbyterian to pay claims from concurrent
  care providers.
- Claims are submitted directly to Presbyterian by non-hospice providers who render services to Presbyterian for the primary hospice diagnosis, in accordance with the care plan that was communicated to Presbyterian.
- These concurrent care services and supplemental benefits are documented and submitted to
  Presbyterian on the VBID Medicare Hospice Transitional Services Request form. This form can be
  found at <a href="https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=pel\_00956211">https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=pel\_00956211</a>.

If you have any questions or concerns about the VBID Model Hospice Benefit Component, then please use the information below to contact your PNO relationship executive. A frequently asked questions document may also be found at <a href="https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=PEL\_00957289">https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=PEL\_00957289</a>. As always, thank you for partnering with us to improve the health of the patients, members and communities we serve.

## **Provider Network Operations**



Hours: Monday through Friday, 8 a.m. to 5 p.m.



Phone: (505) 923-5757Contact Guide: www.phs.org/ContactGuide



**Mailing address:** P.O. Box 27489, Albuquerque, NM 87125 **Location:** 9521 San Mateo Blvd NE, Albuquerque, NM 87113