

Network Connection

Information for Presbyterian
Healthcare Professionals,
Providers and Staff



NOVEMBER 2018

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Let Us Know Your Thoughts

UnitedHealthcare Centennial Care Members Transition to Presbyterian

Presbyterian is honored to continue our tradition of service and innovation with the Centennial Care program. On Sept. 1, 2018, we expanded our commitment to the Centennial Care program and partnered with UnitedHealthcare (UHC) to transition nearly 85,000 Medicaid members to Presbyterian.

Many of these members are already served by Presbyterian's contracted providers as well as other group and independent practices. Presbyterian hired a majority of UHC's care coordinators in an effort to preserve the provider-patient relationship and help ease the transition for these new members.

To ensure members continue to receive the procedures, services and medication they need, providers should verify the prior authorization process. For a complete guide to prior authorizations, please visit: www.phs.org/Providers/Authorizations.

We want to thank all our providers for the work they do every day to improve the health of New Mexicans. We are excited to meet the needs of our new members and to do our part to improve the health of the patients, members and communities we serve.

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

Enroll in Our New Electronic Payment Platform

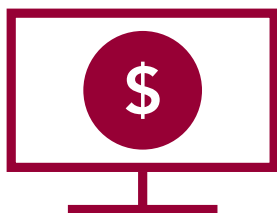
Presbyterian would like to remind providers that we recently implemented a new platform for electronic payments. Effective Oct. 18, the Presbyterian ePayment Center will replace our current platform for electronic remittance advice (ERA) and electronic funds transfer (EFT) services.

Presbyterian providers may enroll with the Presbyterian ePayment Center at any time. Providers who enrolled by Oct. 18 can expect to begin receiving ePayments from the Presbyterian ePayment Center in November. Providers who did not enroll by this date will receive paper checks until they complete the enrollment process.

To continue to take advantage of Presbyterian's ERA/EFT services, providers must enroll in Presbyterian's new electronic payment platform, the ePayment Center. This robust platform allows contracted providers to download remittance files, receive automated clearinghouse (ACH) claim payments at no cost and coordinate the delivery of 835 files from a selection of clearinghouses.

How do I enroll with the ePayment Center?

1. Visit <https://presbyterian.epayment.center/registration>.
2. Follow the instructions to register for an enrollment code.
3. Click "Sign In."
4. Enter your bank account information.
5. Select "Date Delivery."
6. Review and accept the ACH Agreement.
7. Click "Submit."



Upon completion of the registration process, your bank account will undergo a pre-notification process to validate the account prior to commencing the EFT delivery. This process may take up to six business days to complete.

What will I need to enroll with the ePayment Center?

To register with ePayment Center, you will need:

- Your nine-digit federal Tax Identification Number (TIN) or Employer Identification Number (EIN)
- The practice's corporate name and principal information
- Your bank account number and routing transit number (RTN) or the American Bankers Association (ABA) routing transit number

What if I have questions or require assistance with the registration process?

Comprehensive enrollment instructions and a detailed question-and-answer guide are available for download at <https://presbyterian.epayment.center/registration>. Should you require further assistance, please call 1-855-774-4392 or email Help@ePayment.Center.

Presbyterian ePayment Center

Our new electronic payment platform is designed to achieve the following:

- **Accelerate payment.** Electronic payments are issued 11 to 14 days faster than a paper check.
- **Increase payment accuracy.** The payment solution extracts payment information directly from Presbyterian for accurate payments.
- **Reduce risk.** Electronic payments are more secure, traceable and actively monitored.
- **Reduce provider expenses.** Electronic payments do not require lock boxes, which will help prevent any related bank fees.

Register for Our Provider Education Webinar

There are two remaining opportunities in 2018 for providers to receive their annual provider training. As part of our Provider Education Conference & Webinar Series, we are hosting two live training webinars in December to accommodate provider and office staff schedules. Please see below to identify a training date that best fits your schedule:

- **Tuesday, Dec. 11, 1 to 3 p.m.**
- **Thursday, Dec. 13, 9 to 11 a.m.**

Register online at: <https://phs.swoogo.com/PHP2018>.

This is the last opportunity before the New Year for contracted physical health, behavioral health and long-term care providers and staff to complete training and

receive valuable information regarding recent changes in the health plan, Centennial Care 2.0 updates, as well as requirements from the New Mexico Human Services Department, and the Centers for Medicare & Medicaid Services.

If you have any questions about the scheduled events, please contact your Provider Network Management relationship executive. You can find his/her contact information at www.phs.org/ContactGuide.

2018  **PRESBYTERIAN**
 Provider Education Conference
 & Webinar Series

Time's Almost Up: Complete Your 2018 Presbyterian Dual Plus Training

Presbyterian's Dual Plus (HMO-SNP) provider training is required annual training for all medical, behavioral health and long-term care providers who render services to Presbyterian Dual Plus members. If you have not completed this year's annual training, please do so by Dec. 31, 2018.

The training is online and can be found at: www.phs.org/ProviderTraining. The training module is self-guided and only takes about 30 minutes to complete. Please remember to attest to completing the training once you are finished.

If you have any questions about Presbyterian Dual Plus, please contact your Presbyterian Provider Network Management relationship executive at <http://www.phs.org/ContactGuide>.



You Have a Partner in Presbyterian

Presbyterian has been providing care and serving New Mexico communities for more than 100 years. Throughout this time, and especially during periods of New Mexico's growth, our sole aim has remained the same: to improve the health of our communities through the effective delivery of the broadest spectrum of healthcare services. To continue to meet the highest standards in healthcare and our members' unique needs, Presbyterian consistently explores new strategies to achieve the following.

- Decrease clinicians' workloads.
- Increase practice efficiency.
- Increase patient satisfaction.
- Lower emergency department utilization rates.
- Increase access for patients who need to see primary care providers (pcps).

We accomplish these goals by implementing patient-centered medical homes (PCMHs), the Medication Therapy Management (MTM) program and the new urgent care emergency care clinic model. Below is a more in-depth look at these initiatives.

Patient-Centered Medical Homes

In 2009, Presbyterian piloted its first PCMH. As of June 2018, 60 percent of our PCMH-eligible members are served by more than 700 PCPs in 103 clinic locations and school-based health centers in New Mexico.

The expansion of PCMHs increases access and helps improve quality outcomes.

Medication Therapy Management Program

The MTM program is designed to optimize therapeutic outcomes by identifying potential errors and gaps in care. Our pharmacists monitor members' medication use to remove barriers that interfere with the treatment adherence plan. Presbyterian's 14 MTM pharmacists are available 24 hours a day, seven days a week, to assist you. The typical response time is less than an hour.

Medical Therapy Management

Email: medtherpman@phs.org

Phone: (505) 923-6790 or
1-855-771-7737

New Urgent Care Emergency Care Clinic

We are proud to announce that we are opening our first urgent care emergency care clinic in 2019. Our new clinic model provides a single venue of care that ensures patients and members can access both emergent and urgent care closer to home. The new model also eases patients' way to their best health by ensuring that they are treated at the right level of care and not charged emergency room prices for less acute care. This will help improve the member experience and increase overall satisfaction.

As we enter 2019, we will continue to research best practices, innovative strategies and cutting-edge tools and resources that enhance the provider and member experience.



Presbyterian has been providing care and serving New Mexico communities for more than 100 years.

New Tobacco Cessation Product Is Available to Members

Presbyterian Behavioral Health has collaborated with Clickotine, a digital therapeutics mobile application and behavior change program, to offer an engaging tool for members who want to quit smoking. This program offers a science-based mobile application to help with tobacco cessation.

To access the program, an individual downloads the Clickotine app on his or her mobile device and

immediately begins a personalized plan. The app combines multiple strategies to engage individuals in personalized cessation interventions. The following features within the app are validated by clinical studies and published in academic peer-reviewed journals:

- Controlled breathing and mindfulness activities
- Personalized messages tailored to the individual's needs

- Connections to support from friends, family and the community
- Medication reminders, when applicable

Presbyterian members may take advantage of this service by contacting the Presbyterian Customer Service Center at (505) 923-5256.



Clickotine[®]
A Digital Therapeutics™ Program
for Smoking Cessation

Treatment Record Reviews Help Improve the Member Experience

Presbyterian Behavioral Health (BH) routinely conducts treatment record reviews (TRRs) with network providers to assist in evaluating the quality of care delivered to our members. We use the results of these reviews to identify opportunities for improvement within our quality improvement program.

Providers are chosen for review through random selection every three years. The BH quality improvement team oversees this process. In collaboration with the BH chief medical officer, licensed clinicians conduct TRR reviews. The results are reported to Presbyterian's Credentialing Review Committee and BH Advisory Committee. In addition, the results support accreditation by the National Committee for Quality Assurance

(NCQA).

If a provider is randomly selected for a routine TRR, he or she can expect to receive a request for five member records. The documents included in the record facilitate the evaluation of each element of the TRR tools. Each record request is individualized to the level of service that is audited, and typical record requests include the following elements:

- Demographic information
- Informed consents (e.g., treatment informed consent and medication consents)
- Signed patient bill of rights
- Authorizations to release information
- All initial intake assessments, including psychiatric evaluations and/or psychosocial assessments
- Treatment plans

- Progress notes for specific dates of service
- All primary care provider (PCP) releases of information and communications
- Documentation of care coordination activities (e.g., progress notes/letters with other community providers involved in the member's care)

If Presbyterian receives incomplete or late records, we will request additional information from the provider. The provider will then have one additional week to submit the appropriate documentation.

If you have any questions, please contact your BH provider relations liaison. You can find his or her information at www.phs.org/ContactGuide.

Emotional Support Animals: Their Uses and Differences from Service Animals

Animals can make a significant difference in the lives of people who use them for companionship or animal-assisted therapy. Dogs and horses are known for their ability to help people with physical disabilities, but providers are also finding that animals can help people with mental and behavioral health disorders manage their conditions.

Therapists and other healthcare professionals are now recommending emotional support animals (ESAs) to people who suffer from anxiety, depression and stress. ESAs are animals that provide therapeutic benefits to their owners. Their presence can help people cope with stress and reduce feelings of anxiety and depression. They can also promote a more active lifestyle and give their owners a sense of purpose.

The popularity of ESAs is rapidly growing and people are demanding that their animals, sometimes pets, become certified ESAs. Providers can certify the use of an ESA. Similar to service animals, certified ESAs are allowed to board flights, occupy housing units and enter businesses. Regulations for ESAs, however, differ from regulations for service animals.

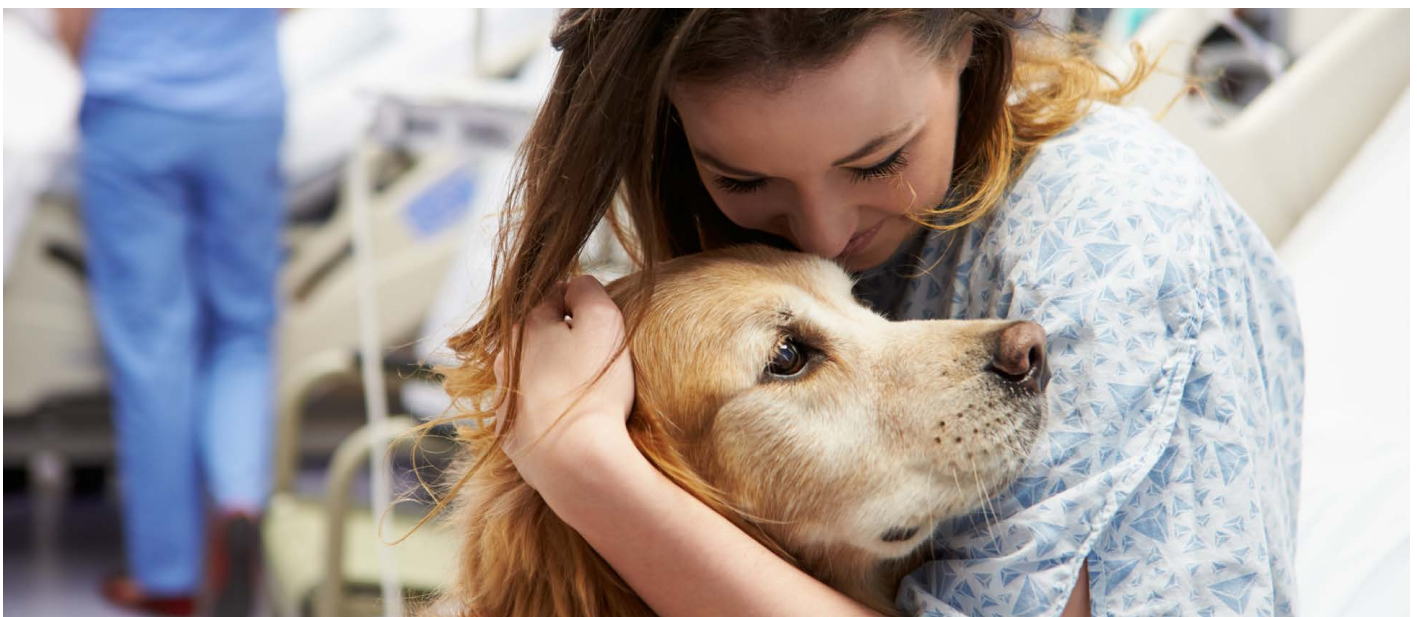
Services Animals vs. ESAs

Service animals are dogs or mini horses that are properly trained to perform tasks for people with disabilities. A wider variety of animals can be considered ESAs, and they are not required to go through any training. By law, ESAs are not considered service animals.

Service animals are regulated by the Americans with Disabilities Act

(ADA) and, by law, are allowed into organizations that serve the general public. ESAs, on the other hand, are regulated under the Fair Housing Act and Air Carrier Access Act. These regulations are completely different from the regulations of the ADA but allow ESAs to board flights and enter apartments and homes with proper documentation.

There is ongoing research on the effectiveness of ESAs in a member's care plan. This research will help people understand the legitimacy of ESAs and reduce the controversy that surrounds this topic. This research may also eventually influence the expansion of the term "service animal" to include emotional support animals.



HIPAA Compliance Tips for 2019

From small physician practices to the largest hospitals, a covered entity can face serious consequences when it suffers a data breach, including the potential for regulatory penalties. Officials at the Office of Civil Rights (OCR) of the Department of Health and Human Services (HHS) have identified some risks that providers should be aware of for 2019. Following these tips will help providers ensure that they are HIPAA-compliant in 2019.

1. Manage Identified Risk

A risk-management plan begins with a risk analysis. Once a threat to electronic protected health information (ePHI) is identified by the risk analysis, the provider should address the identified risks within a reasonable time frame.

2. Protect Confidential Information

The OCR reports many cases of data breach due to a lack of security for applications that can transmit protected health information (PHI). Organizations should implement strong security policies regarding how to properly communicate ePHI with patients and other covered entities, particularly for emails and text messages. Organizations should consider encrypting the following applications:

- Email, including fax by email
- Texting
- File sharing (e.g., file transfer protocol)
- Remote backups
- Remote access and virtual private network (VPN) sessions

Following a data breach, regulators will have final say as to whether the encryption in place was reasonable and appropriate.

3. Conduct Self-Audits

Appropriate auditing goes to the heart of your data protection management. Organizations should have an audit system in place and use it regularly. Also, providers should monitor access to the following:

- PHI during non-business hours or during time off by ex-employees
- An abnormally high number of records containing PHI
- PHI for people in whom the media has an interest
- Employee PHI

4. Prevent Insider Threat

Data breaches that involve ePHI often occur when employees access medical records they are not authorized to view. In some cases, these involve public figures who have had their privacy violated due to curiosity or financial gain.

Unfortunately, it is not unusual for a provider to report that an ex-employee inappropriately accessed medical records long after his or her termination. To prevent data breaches from former employees, providers should terminate their access to systems that contain PHI in a timely manner.

5. Properly Dispose of PHI

It is important for providers to implement disposal procedures that ensure paper records are properly disposed of and electronic devices are cleared, purged or destroyed consistent with the National Institute of Standards and Technology's "Guidelines for Media Sanitization." Proper disposal of ePHI should also be timely to avoid a possible data breach.

6. Plan for the Future

It is important to properly plan for emergency situations to ensure that PHI remains protected. Securing PHI at all times will prevent regulatory penalties and other negative aspects of a data breach. Plan ahead and ensure that everyone in your organization is aware of proper PHI disposal and security procedures.





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TALK TO US

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providercomm@phs.org



PHONE:
(505) 923-5757



MAIL:
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Albuquerque, NM 87125-7489
Attn: Provider Network Management

Let Us Know Your Thoughts

We are committed to ensuring that this newsletter remains a meaningful resource for providers and office staff. We want to hear your thoughts and suggestions on how we can improve our newsletter. Please use the link below to fill out a short survey and let us know what you would like to read about in future issues. Each person who fills out our short survey will be entered into a drawing to win a prize.

<https://www.surveymonkey.com/r/PHPnewsletter>