



# IMM INSIGHT NEWSLETTER

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**IMM SERVICES**

Leisa Hills  
Executive Director, IMM  
621-7318

Dave Mooney  
Sr. Director of Finance, IMM  
621-7494

**Account Managers/Consultants**

- |                  |          |
|------------------|----------|
| Betty Boester    | 621-7766 |
| Debbie Bopp      | 621-7196 |
| Tim Gee          | 621-9580 |
| Lindsay Gross    | 621-7738 |
| Anita Huse       | 621-4090 |
| Linda Hutchens   | 621-9772 |
| Jason Keller     | 621-9750 |
| Kathleen McAllen | 621-7460 |
| Amy Miller       | 621-7790 |
| Ellen Stancil    | 621-9374 |
| Betsy Walter     | 621-9361 |

**Billing and Coding**

- |                 |          |
|-----------------|----------|
| Carol Hoppe     | 621-7555 |
| Jan Hooker      | 621-1644 |
| Lita Jones      | 621-1889 |
| Judy Odom       | 621-1645 |
| Charleen Porter | 621-9743 |
| Ann Silvia      | 621-9783 |

**Third Party Payer Enrollment Credentialing Committee (TPPECC)**

- |                 |          |
|-----------------|----------|
| Carol Hoppe     | 621-7555 |
| Darlene Gebhart | 621-9312 |
| Heather Guith   | 621-1886 |
| Michelle Hayes  | 621-1647 |
| Pat Schmitter   | 621-7187 |

**Regulatory Compliance**

- |                   |          |
|-------------------|----------|
| Brenda Chapelle   | 621-9782 |
| Cynthia Necessary | 621-9797 |
| Beth Wilhelm      | 621-9751 |

**REAL-TIME ADJUDICATION (RTA) FROM UNITEDHEALTHCARE**

UnitedHealthcare now offers real-time claims adjudication (RTA) via their website, UnitedHealthcareOnline.com. In just a few seconds, physicians can receive an approved, fully adjudicated claim response from UnitedHealthcare for professional claims. This process helps increase time of service collections and reduce bad debt. It also cuts the amount of back-end collections work required in the billing office. To learn more about RTA, visit [www.UnitedHealthcareOnline.com](http://www.UnitedHealthcareOnline.com)

**UPDATES FROM ANTHEM**

The following information was presented at the Anthem PPAC meeting on 2/10/2009:

- Anthem is turning on the "NPI only" edit soon so if you are still submitting claims with a legacy or Medicaid provider number, they will be denied. **Please check your claims now to avoid unnecessary denials!**
- Anthem is issuing new ID cards to be consistent with BCBS across the country. Practices need to be checking ID cards **at every visit** as the patient's insurance hasn't changed, but their ID number might. Do not ask, "Has anything changed since your last visit?" Patients don't remember when they were in your office last or if they gave you the new card yet. Ask the patient to provide all current identifying information necessary to create or update the patient record. Do **not** state the identifying information, such as date of birth and address and then ask the patient if it is correct. Let them tell you the information and verify that it matches what you have in their record.
- Anthem newsletters and Rapid Updates will only be going out electronically now. If you have been relying on paper copies, sign up to get them online at [www.MyAnthem.com](http://www.MyAnthem.com).

**HYALURONAN INJECTIONS**

**Effective March 31, 2009, the following changes to the Anthem precertification list will occur:**

Select Specialty Pharmacy reviews in all outpatient settings (i.e. office, outpatient, home infusion, dialysis centers if billed separately, ambulatory infusion centers) see Specialty Pharmacy Precertification phone and fax number below.

**Specialty pharmacy medications**

Generic Name:	Trade Name:	Medical Policy or Clinical Guideline:
Hyaluronic acid	Hylgan, Supartz	Hyaluronan Injections for Musculoskeletal Conditions — MP DRUG.00017
Hyaluronic acid	Synvisc	Hyaluronan Injections for Musculoskeletal Conditions — MP DRUG.00017
Hyaluronic acid	Euflexxa	Hyaluronan Injections for Musculoskeletal Conditions — MP DRUG.00017
Hyaluronic acid	Orthovisc	Hyaluronan Injections for Musculoskeletal Conditions — MP DRUG.00017

- |   |                               |
|---|-------------------------------|
| Indiana, Kentucky, Ohio Local Precertification                            | <b>877-814-4803</b>           |
| Indiana National Precertification   | <b>866-776-4793</b>           |
| Predetermination — Central (IN, KY, OH, MO, WI)                           | <b>888-769-9143 ext 08129</b> |
| If you would like to fax your request, you may use the fax numbers below. |                               |
| Indiana Local   | <b>317-287-8916</b>           |
| Indiana National  | <b>800-773-7797</b>           |

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## **MORE UPDATES FROM ANTHEM**

*Reference: Anthem Network Update, Issue 4, 2008*

### **Assistant surgeon services**

Effective April 15, 2009, the reimbursement for assistant surgeon services is determined by the reported modifier:

Modifiers 80, 81 and 82 are reimbursed at 16% of the maximum allowance. Modifier AS is reimbursed at 16% of the maximum allowance if there is a physician extender fee schedule — **otherwise 14% of the MD fee schedule.**

### **Anesthesia by the surgeon**

Effective April 15, 2009, Anthem will not reimburse additional amounts for modifier -47, anesthesia delivered the surgeon. The operating surgeon will be reimbursed the maximum allowable amount based upon the five-digit CPT code of the procedure performed. The reimbursement for the anesthesia services provided by the operating surgeon is included in the global amount and is not reimbursed separately.

### **Bundled services**

Anthem does not reimburse separately for services which are considered integral to another reimbursable service. These bundled services may have been performed or provided either on the same or different date of service as the primary service. The list below is not a comprehensive list but should be used as a guide to services that are always considered part of providing another service:

- Administrative services requiring physician documentation (e.g., recertification, release forms, physical/camp/school/daycare forms, etc.)
- All practice overhead costs, such as heat, light, safe access, regulatory compliance including CDC and OSHA compliance, general supplies (paper, gauze, band aids, etc.), insurance (including malpractice insurance), collections
- Collection/analysis of digitally/computer stored data
- Computer aided detection with chest radiography
- Copies of test results for patient
- Costs to perform participating provider agreement requirements, such as prior authorizations, appeals, notices of non coverage
- DME delivery and/or set up fees
- Handling and/or conveyance fees
- Insertion of a pain pump by the operating physician during a surgical procedure
- Peak expiratory flow rate
- Pharmacy dispensing services and/or supply fees, etc.
- Physician care plan oversight
- Pulse oximetry
- Recording or generation of automated data
- Review of medical records
- Robotic surgical system
- Routine post surgical services such as dressing changes and suture removal
- Supplemental tracking codes for performance measurement (Category II CPT1 Codes)
- Surgical supplies and materials supplied by the provider rendering the primary service (e.g. Surgical trays, syringes, needles, sterile water etc.)
- Telephone consultations with the patient, family members, or other health care professionals
- Team conferences to coordinate patient care

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## **CMS IMPLEMENTS NEW AUTHENTICATION REQUIREMENTS FOR MEDICARE PROVIDER TELEPHONE AND WRITTEN INQUIRIES**

**Effective Date:** April 6, 2009

When you call either the Interactive Voice Response (IVR) or a Customer Service Representative (CSR), you will be required to provide three data elements for authentication:

Your National Provider Identifier (NPI)  
Your Provider Transaction Access Number (PTAN)  
The last 5 digits of your Tax Identification Number (TIN)

In order to comply with the requirements of the Privacy Act of 1974 and the Health Insurance Portability and Accountability Act (HIPAA), CSRs from Medicare Fee for Service contracts must properly authenticate callers and writers before disclosing protected health information (PHI).

CMS will verify the NPI, PTAN and TIN before providing the information you request.

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**Note: You will only be allowed three attempts to correctly provide your NPI, PTAN and last 5 digits of your TIN.**

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**Written Inquiries:** You will need the same information listed above on your written inquiry or fax, UNLESS your written request is submitted on your practice or company official letterhead including the provider's name and address. The provider's practice location and name on the letterhead must match the contractor's file for this provider. In addition, the letterhead information on a letter or email needs to match one of the following:



NPI  
PTAN  
The last 5 digits of the TIN

Medicare contractors will ask you for additional information if necessary but this will slow down your response from Medicare.

## **NEW TEAM MEMBER OF CLINICAL/REGULATORY TEAM**

**Brenda Chapelle, R.N., M.B.A.**  
***Clinical/Regulatory Compliance Consultant***

Brenda has been working in health care since 1988. She started her career as a surgical nurse. Her areas of concentration included general, plastics, gynecology, orthopedics, neurology, ear, nose, and throat, with a specialty in ophthalmology. Brenda was part of the original leadership team that developed and planned the Methodist Medical Plaza North. As the surgery manager, she was responsible for managing the daily operations which included staffing, scheduling, budget management and vendor negotiations.

Prior to joining the VEI team, Brenda worked in the quality department at St. Vincent Hospital. There, she served as the quality liaison for the patient rights and ethics chapter for the hospital. Brenda has worked extensively throughout the health care system preparing a variety of facilities for successful surveys by the Joint Commission

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**NEW TEAM MEMBER OF CLINICAL REGULATORY TEAM (continued)**

and Indiana State Department of Health. She also worked on many performance improvement and quality of care projects.

In her current role at VEI, Brenda works with a variety of clients to educate, implement and enforce regulatory compliance (OSHA, HIPAA, CLIA, JACHO, AAAHC, and NRCP). Brenda's combination of education, nursing, business and regulatory experience enables her to work effectively with physician's practices.

Brenda holds a bachelor's degree in nursing from St. Mary's College in South Bend, Indiana. She received her M.B.A. from Indiana Wesleyan University. She graduated both times with honors.

In her leisure time, Brenda enjoys running, playing tennis and spending time with her two daughters.

**MARCH 15 – 21, 2009**  
**SEVERE WEATHER PREPAREDNESS WEEK IN INDIANA**

Governor Mitch Daniels has proclaimed March 15 through 21, 2009 as Severe Weather Preparedness Week in Indiana. The National Weather Service, in conjunction with the Indiana State Police, Department of Homeland Security, Department of Education, Broadcasters Association, the American Red Cross, and Amateur Radio Operators, will conduct a statewide test of communication systems on Wednesday, March 18 between 10:00 A.M. and 10:30 A.M. and 7:00 P.M. and 7:30P.M. EDT.

The goal of Severe Weather Preparedness Week is to better educate people about the hazards of severe thunderstorms and tornadoes, and to help everyone be prepared when severe weather occurs. Please take this opportunity to review with staff your facility action plan for tornados which can be found in your Safety Manual under: EOP: 5 RESPONSE: TORNADO – CODE GRAY.

**MARCH CALENDAR OF HEALTH OBSERVANCE DATES**

American Diabetes Alert Day (4th Tuesday)

American Red Cross Month

Brain Awareness Week (Mon. of 2nd full week)

Colorectal Cancer Awareness Month, National

Doctor's Day (last Tuesday)

Hemophilia Month

Inhalants and Poisons Awareness Week, National (3rd week)

Mental Retardation Awareness Month

Multiple Sclerosis Education & Awareness Month

Patient Safety Awareness Week, National (1st week)

Poison Prevention Week, National (3rd week)

Pulmonary Rehabilitation Week, National (2nd full week)

Sleep Awareness Week, National (last Monday week)

Tuberculosis Day, World (24th)