

Network **NewsBrief**

A publication for **AvMed**
Providers and Staff

**Survey Says? Preparing
for CAHPS and HOS**

**Prescription Savings
for Your Patients**

**Introducing Our New
Radiation & Medical Oncology
Management Partner**



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For complete details on all the current news you need to know and to download forms, please visit our website at AvMed.org.

Submit New Claims:

P.O. Box 569000
Miami, FL 33256

Claims Correspondence, Reviews, and Appeals:

P.O. Box 569004
Miami, FL 33256
Fax: **1-800-452-3847**

OUR COMMITMENT TO YOU

Dear Valued Provider Partner:

No matter what is happening in the world, AvMed is committed to each and every one of our Members, your patients. Like you, we strive to help them transform their lives in big and small ways.

With the focus on coronavirus variants and people trying to avoid exposure, some might think it's too risky to visit their doctor's office. However, we both know that being proactive about their health and well-being is the best way to avoid serious medical issues. Annual wellness visits should be a part of every patient's care. Please remind your patients to schedule their annual wellness visits.

This issue of **Network NewsBrief** highlights the tools and resources to help your patients maximize their benefits including virtual events, the Sanvello behavioral health app, and prescription savings. You'll also find a reminder about the CAHPS and HOS surveys as well as the provider directory portal, **VerifyHCP®**.

In addition, beginning in April we are working together with a new radiation and medical oncology management partner, New Century Health. Read more on page 6.

Remember to take advantage of your Provider Portal. Learn how to register at www.AvMed.org/News/Service-Portals.

Thank you for your continued support. Drop us a note at Providers@AvMed.org. We welcome the opportunity to hear from you.

Be well,



Frank Izquierdo
Senior Vice President
Provider Solutions &
Strategic Alliances
AvMed

CARE OPPORTUNITY CORNER

Survey Says? Preparing for CAHPS and HOS

Every year the Centers for Medicare & Medicaid Services (CMS) conduct two separate surveys of Medicare beneficiaries to evaluate their experiences with their health plans and Providers. Here's a quick breakdown of each survey and how you can provide the best patient experience possible.

Health Outcomes Survey

The Health Outcomes Survey (HOS) asks Medicare beneficiaries several health-related questions about their own physical and mental health, the presence of pain and its effect on daily activities, smoking, exercise and more. In addition, the HOS also asks whether their AvMed Provider has spoken to them or advised them on certain issues.

Consumer Assessment of Healthcare Providers and Systems Survey

The Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey is used to assess the patient experience as well, but this survey focuses on how patients perceived different aspects of their care – not how satisfied they were. The survey touches upon topics such as patient-doctor communications, healthcare coordination and Provider accessibility.



What You Can Do

- Limit wait times. Try to see your patients as close to their scheduled appointment time as possible. Avoid overbooking (or double-booking) patients.
- Coordinate care more effectively. During each appointment, remember to ask patients about other care they may have received since their last visit.
- Follow up about any test results. Stay on top of test results and communicate them to patients as soon as possible.



For more help on improving the patient experience, contact AvMed's Provider Service Center at **1-800-452-8633**. Providers who contact the Center will be invited to participate in the Provider Post-Call Survey, which will ask you about the services you received during your call. Your feedback will help us improve our overall services to better suit your needs.

TALK TO YOUR PATIENTS ABOUT ANNUAL WELLNESS VISITS

With the focus on coronavirus variants and people trying to avoid exposure, we know that some of your patients may think it's risky to visit a doctor's office. But being proactive about their well-being is the best way to stay healthy, avoid serious medical issues, and keep health care costs to a minimum. For many people, the risk of missing preventive care far outweighs the small risk of exposure.

Now is a great time to encourage your patients to schedule an annual wellness visit with a focus on prevention, immunizations and health screenings. Please remind your patients of all the precautions you have in place and that AvMed offers comprehensive preventive care services as part of their coverage options.



When patients schedule their visit, you can direct them to the Conversation Starter at [AvMed.org/News/Publications/Medicare/](https://www.avmed.org/news/publications/medicare/). It's a list of topics and questions they can discuss with you.

VIRTUAL EVENTS FOR THE MIND, BODY AND SPIRIT

As some of your patients continue to stay active and healthy at home, AvMed has created a series of fun, interactive virtual events. From our Purposeful Movement to Ageless Face Yoga classes to our AvMed Book Talk series with bestselling authors, we provide your patients with ways to energize their mind, body and spirit.

Plus, AvMed Medicare and Individual & Family Plan Members can earn rewards (up to \$125 annually for Medicare Members and \$30 annually for IFP Members) for completing preventive or condition management related care such as wellness visit, flu shot, or a personal health assessment. Learn more at [AvMed.org/Healthyperks](https://www.avmed.org/Healthyperks).



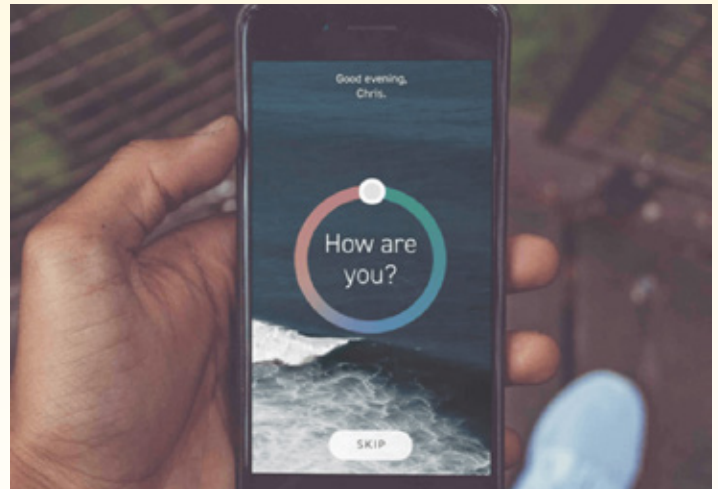
Members can register for a virtual event or request more information by calling **1-888-430-9896** or email us at AvMedClubAspire@AvMed.org. To view event dates, visit [AvMed.org/About-Us/Calendar](https://www.avmed.org/about-us/calendar).

Sanvello – A Behavioral Health Solution for Your Patients

If your patients are feeling extra stress, anxiety, depression or isolation right now, they are not alone. Sanvello can help. Our behavioral health partner, Optum, connects Members to the Sanvello app which supports your patient's mental health needs, all in a private, safe place, free from labels.

The Sanvello app puts your patients in the driver's seat and allows them to choose a broad array of self-care tools, on their terms. It makes managing mental health and tracking progress easy, at no additional cost to our Members. Here's a glimpse of what our Members can expect:

- Daily mood tracking
- Guided journeys
- Coping tools
- Meditations and progress assessments



Members can download Sanvello from the App Store or Google Play, select "Upgrade Through Your Insurance," search "AvMed," and upgrade with their AvMed Member ID to unlock complimentary Premium access.

The Sanvello App is available to our Fully Insured and Medicare Advantage plans and the SantaFe HealthCare Self-Funded Group.



For more information, Members can email info@Sanvello.com. To learn more, visit Sanvello.com.

PRESCRIPTION SAVINGS FOR YOUR PATIENTS

With tools like Rx Savings Solutions and Over-the-Counter Allowance, your patients get the medications they need at the best price.

- **Rx Savings Solutions** is a free online transparency tool that helps your patients find the best deals on prescriptions
- **Over-the-Counter Allowance** offers Members access to health and wellness products
- Members can save when they purchase prescriptions from a **Preferred Network Pharmacy** like CVS or Publix
- During the initial coverage stage, Members can save more money by getting up to a **100-day supply** of the medication*



To learn more about prescription savings, [visit AvMed.org](https://AvMed.org).

**Due to packaging and directions, some medications may not be available as a 100-day supply.*

INTRODUCING OUR NEW RADIATION & MEDICAL ONCOLOGY MANAGEMENT PARTNER

AvMed and New Century Health are working together to provide an Oncology* and Hematology Pathway Solutions Program. Effective April 1, 2022, all chemotherapy and hematology treatment requests and supportive medications requested by medical oncology, hematology, surgical oncology, gynecologic oncology and urology provider specialties, plus radiation oncology treatment requests will require prior authorization from New Century Health for the following lines of business:

Medical oncology and hematology:

Medicare Advantage

Radiation oncology: Medicare Advantage, Fully Insured Products, State of Florida and SantaFe HealthCare Self-Insured products

Prior Authorization Process:

Beginning in April, you will use the New Century Health provider portal to submit authorization requests for medical therapies or radiation oncology treatments associated with an oncology and/or hematology diagnosis. The requesting physician must complete an authorization request using one of the following methods:

- Log into the New Century Health provider web portal: **my.newcenturyhealth.com**
- Call **1-888-999-7713** (Monday–Saturday, 8 am–8 pm)
 - Medical Oncology – Option 1
 - Radiation Oncology – Option 2

* The oncology management program applies to members 18 years and older.



To assist your practice throughout this transition, a Frequently Asked Questions (FAQs) document about the program is posted to AvMed.org. If you have any questions, please contact **New Century Health at 1-888-999-7713**, Option 6 or email them at **providertraining@newcenturyhealth.com**.

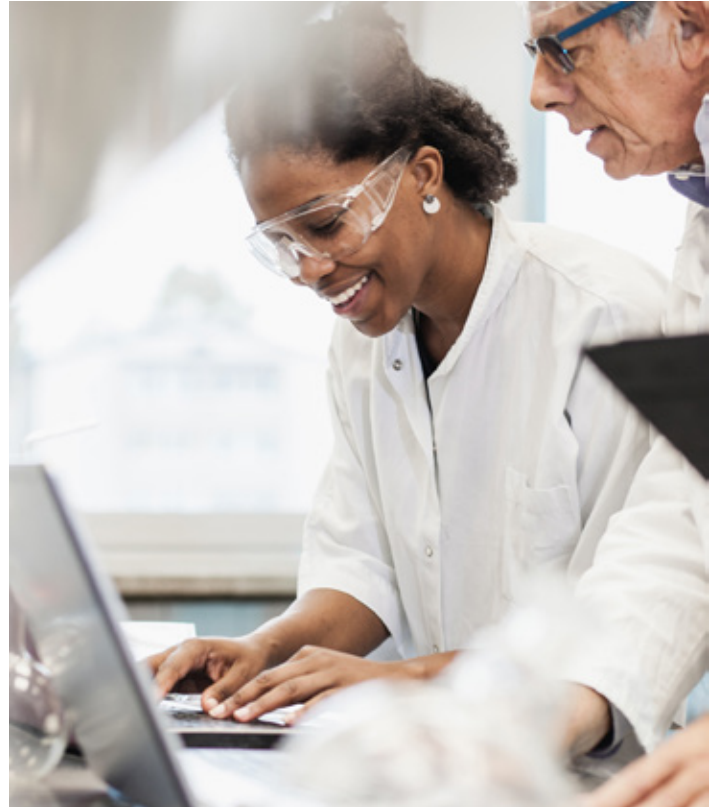
VERIFYHCP® – A QUICK AND EASY PROVIDER DIRECTORY MANAGEMENT TOOL

AvMed and LexisNexis® Risk Solutions are working together to introduce our contracted clinicians to VerifyHCP®, a quick and easy Provider directory verification portal.

To make attestation more efficient for you and your staff, VerifyHCP® enables practices to validate or update pre-populated directory information in one place across all participating health plans.

Updated practice information allows us to provide our Members (your AvMed-insured patients), with current directory information so they can select in-network providers, choose health plans, and ultimately access care.

To ensure proper inclusion in the Provider directories and avoid issues with the processing of claims, clinicians should respond to verification requests. Our goal is to make this process as easy as possible for clinicians and their practices and to receive 100% response to outreach requests.



If you have any questions about the Verify Health Care Portal, please contact LexisNexis Risk Solutions Tech Support at <https://healthcare.custhelp.com/app/ask> or the **VerifyHCP® Portal Help Desk at 1-888-245-4619**. Should you have any further questions, please contact a Provider Service Center Representative at Providers@AvMed.org or call the Provider Service Center at **1-800-452-8633**, Monday-Friday, 8:30 am-5 pm, excluding holidays.

Papa helps your Patients through their healthcare journey

Papa connects AvMed Medicare Circle and Choice Members with specially trained and selected “pals” for an array of services to improve your patients’ well-being, creating a family on demand.

All Papa Pals have extensive background checks, flexible schedules and will follow COVID-19 safety protocols and spend time with an older adult, including playing board games, assisting with computers, scheduling doctors’ appointments and more.

Your patients also have access to Papa Pals virtually while staying safe at home. Visit www.JoinPapa.com or call **1-877-751-9187**.

We welcome your feedback.

It's SURVEY time again and Members are being surveyed to assess their experiences with health plans, Providers and our ability to maintain or improve their physical and mental health. Remember, these surveys are used to assess the patient experience focusing on how patients perceive key aspects of their care. Some of those aspects include: office access and wait times for all Members, care coordination between the PCP and the Specialists and whether providers assess fall risk and provide a fall risk reduction plan to their Members.

If you would like to participate more directly in our Quality Improvement Program or would like information about the program, including progress toward our goals, email us at **Providers@AvMed.org** or call the Provider Service Center at **1-800-452-8633**, Monday-Friday, 8:30 am-5 pm, excluding holidays.

AVMED'S WEBSITE: AvMed.org

ONLINE PROVIDER SERVICES:

Claims Inquiry, Member Eligibility, Referral Inquiry, Provider Directory, Physician Reference Guide, Clinical Guidelines, Preferred Drug List

Please note our email address:

Providers@AvMed.org

Use our centralized toll-free number to reach several key departments at AvMed.

PROVIDER SERVICE CENTER

1-800-452-8633, Monday-Friday, 8:30 am-5 pm, excluding holidays

- AvMed Link Line, press one (1).
Use this option to verify Member eligibility and limited benefit information, or confirm and request authorizations.
- Claims Service Department, press two (2).
Use this option to verify status of claims payment, reviews and appeals.
- Provider Service Center, press three (3).
Use this option for questions about policies and procedures, to report or request a change in your panel status, address/phone, covering physicians, hospital privileges, Tax ID and licensure, or any other service issue.
- Clinical Pharmacy Management, press four (4).

AUDIT SERVICES AND INVESTIGATIONS UNIT

1-877-286-3889

(To refer suspect issues, anonymously if preferred)

CARE MANAGEMENT

1-800-972-8633

CLINICAL COORDINATION

1-888-372-8633

(For authorizations that originate in the ER or direct admits from the doctor's office)