



Provider Newsletter

Spring 2021



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THANK YOU
HEALTHCARE HEROES



COVID-19 Vaccine Updates: Rate Increase Announced March 15

Effective for COVID-19 vaccines administered on or after March 15, 2021, the national average payment rate for physicians, hospitals, pharmacies and other immunizers will be \$40 to administer each dose of a COVID-19 vaccine. This represents an increase from approximately \$28 to \$40 to administer single-dose vaccines, and an increase from approximately \$45 to \$80 to administer COVID-19 vaccines requiring two doses. The exact payment rate for administration of each COVID-19 vaccine dose depends on the type of entity that provides the service and will be geographically adjusted based on where the service is delivered.

These updates to the Medicare payment rate for COVID-19 vaccine administration reflect new information about the costs involved in administering the vaccine for different types of providers and suppliers, and the additional resources necessary to ensure the vaccine is administered safely and appropriately.

Accordingly, COVID-19 vaccine administration code rates on commercial physician fee schedules have been added. As of April 1, a list of claims with service dates on or after March 15, 2021, will be run and submitted for reprocessing.

Stay informed on the latest COVID-19 updates by visiting **[VirginiaPremier.com/providers](https://www.virginia premier.com/providers)** and reviewing the **COVID-19 frequently asked questions (FAQs) document**.

Modifier 25 Payment Policy Changes: Same-day E/M and Preventive Exam Visits

Effective July 1, 2021, when a preventive examination and a problem-oriented evaluation and management (E/M) service are reported on the same day for the same patient, the problem-oriented E/M service, appended with modifier 25, is reimbursed at 50% of the allowed amount.

Preventive medicine codes:

- 99381-99397 (preventive medical exam)
- G0402 (preventive physical exam)
- G0438-G0439 (annual wellness exam)

Problem-oriented E/M codes:

- 99201-99215

Per CPT guidelines, modifier 25 (a significant, separately identifiable E/M service by the same physician or other qualified healthcare professional on the same day of the procedure or other service) must be billed in conjunction with the problem-oriented visit E/M code when a preventive medicine service is reported on the same day for the same patient.

The above policy change is now applicable to all Medicaid products.



Medical Payment Guideline Updates

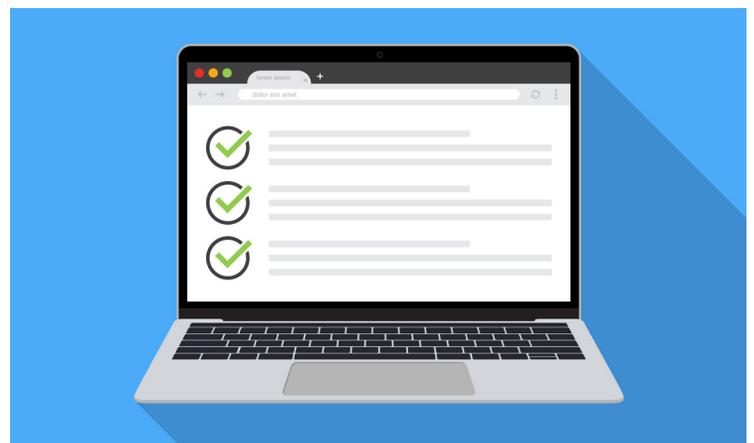
Virginia Premier publishes its medical payment guidelines on our provider website: **VirginiaPremier.com/provider**. We update policies at least annually and add new policies on a quarterly basis.

We have added new policies on phototherapy for dermatological indications, skin substitutes for treatment of chronic wounds and autologous platelet-rich plasma.

To find more information and get updates, please check the **medical payment guidelines site** regularly.

Prior Authorization List Updates Available

The Prior Authorization List (PAL) is updated on the website at least quarterly to reflect changes in code status including new code updates. Please **check the PAL** to find the most updated information on code coverage and authorization status.





From left to right: Tonya P. Taylor, Director, Quality & Regulatory (Virginia Premier), Arichica Holt, Quality HEDIS® Team Leader (Virginia Premier), Dr. Jackson (2020 PGA Recipient), and Angela Love, Quality Manager (Virginia Premier)

Announcing Our 2020 Golden Globe Winner: Richard Jackson, MD

Since 2005, Virginia Premier has recognized outstanding providers in our network for providing exceptional care to Virginia Premier members via its Practitioner Golden Globe Award (PGA). The PGA Program's foundational pillars include delivering high-quality, safe care while administering, coordinating and managing care for Virginia Premier members.

We are pleased to recognize and salute the 2020 Practitioner Golden Globe Award recipient: Richard Jackson, MD, Dominion Medical Associates.

About Dr. Jackson

Dr. Jackson has more than 44 years of experience in the medical field. In 1977, he graduated from Howard University's College of Medicine. Dr. Jackson joined the Virginia Premier network on August 1, 1995. For more than 25 years, he has helped to close care gaps and improve outcomes for Virginia Premier members.

Dr. Jackson is affiliated with Bon Secours Memorial Regional Medical Center and Bon Secours Richmond Community Hospital. He is a principal investigator specializing in internal medicine and critical care and serves on a variety of medical-related boards and committees. Dr. Jackson is a frequent lecturer to both patient and physician groups on various medical topics. Dr. Jackson's practice, Dominion Medical Associates, Inc., exceeded national benchmarks for comprehensive diabetes care: HbA1C testing, medical attention to neuropathy, poor HbA1C control and timeliness of prenatal care.

Especially noteworthy, during the 2020 onset of the COVID-19 pandemic, a time when most practices were closed, Dr. Jackson and his staff remained open to treat patients who needed immediate care. Dr. Jackson's practice conducts phase II, III and IV clinical trials on-site using a diverse database of more than 20,500 active patients — over 85% of those patients identify as African American.

Congratulations to Dr. Jackson and his dedicated staff for receiving the 2020 Virginia Premier Practitioner Golden Globe Award.

Protect Your Patients from Medical Errors

A medical error is one of the most common causes of injury or death in the United States. Health professionals work hard to save countless lives; however, the incidence of concomitant error is high. All health professions should focus on the effort to “first do no harm” and work to decrease human and system error.

Approximately 400,000 hospitalized patients experience some type of preventable harm each year (Medical Error Reduction and Prevention, 2021).

- Medical errors account for more than \$4 billion per year.
- Medical errors cost approximately \$20 billion a year.
- Medical errors in hospitals and clinics cause approximately 100,000 deaths each year.



Patient safety, mortality and morbidity rates decrease when organizations implement system-wide action plans to reduce medical errors. Patient deaths resulting from healthcare-associated infection and equipment, drug and test errors decline when error-reduction protocols are created and sustained. Fewer nosocomial infections, better pain management, skin integrity maintenance and improved fall precautions also contributed to improved quality and patient safety.

Teamwork, education and training through structured initiatives are among the most effective strategies to improve patient safety. Accepting the contributions of team members, reducing barriers to reporting errors and promoting an environment where all individuals work together can significantly improve patient and staff safety.

Here are a few tips to reduce medical errors and enhance patient safety:

- Build better teams.
- Establish safeguards that require double- and triple-checks involving look-alike or sound-alike drugs.
- Carefully label medications delivered in bulb syringes, medication cups and basins.
- Decrease time to report abnormal test results.
- Encourage staff to follow written protocols and procedures.
- Create a “quiet zone” or “time out” when preparing medications for administration.
- Plan hospital discharges in coordination with the clinician, nurse, family and patient; if any have reservations, reconsider discharge.

- Insert tubes correctly and confirm placement location before activation.
- Involve a pharmacist in all high-risk drug delivery to patients
- Limit shift duration to avoid fatigue-related errors.
- Place hazard warnings where they will be seen.
- Encourage safety and promote education focused on avoiding errors.
- Promote the institution's patient safety organization.
- Store dangerous drugs in a separate area of the electronic dosage medication system.
- Take precautions to prevent central line-associated infections.
- Use anti-coagulants safely.
- Use computer technology for order entry.
- Use established guidelines to prevent venous thromboembolism.
- Use good design principles.
- Improve your hospital's patient safety culture.

National Stroke Awareness and National High Blood Pressure Education Month

May is "**National Stroke Awareness and National High Blood Pressure Education Month.**" At Virginia Premier, member health is our top priority. To ensure the safety and well-being of our members, we ask providers to educate patients with hypertension and diabetes on the importance of maintaining a healthy blood pressure.

You can also support improved health by taking steps to:

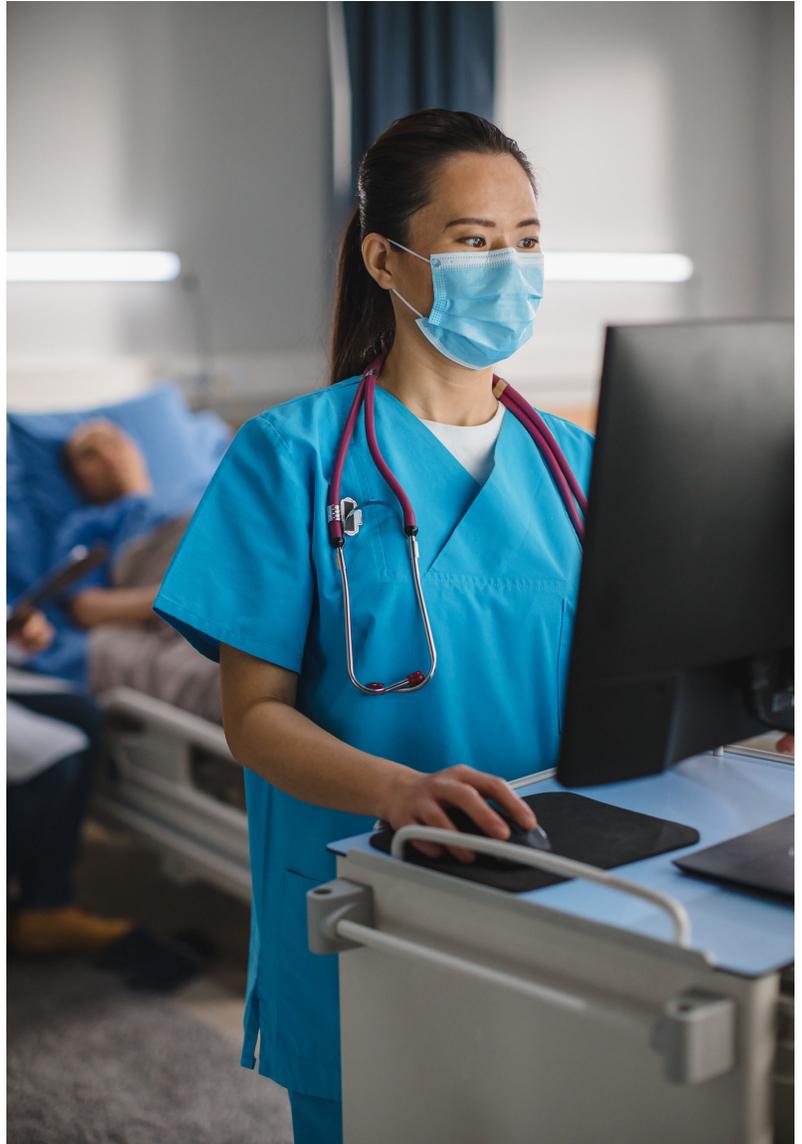
- Ensure all telehealth visits with members include a blood pressure check and advise all members reporting their blood pressure that a digital blood pressure machine must be used. To be considered a compliant blood pressure, members using a manual device will still need a digital blood pressure reading.
- Educate members with cardiovascular disease and diabetes about the importance of statin medications.
- Complete a pain assessment, functional assessment and medication review on all members 66 and older when conducting an annual wellness visit.
- Remind your patients to maintain a healthy diet and exercise three to five times a week for at least 30 minutes, if possible. Together, these changes will help members maintain a healthy blood pressure and decrease their chances of having a stroke.



Annual Update: Where to Find Coverage Details and Provider Resources

As a valued provider in Virginia Premier's network, we want you to know where to find the information pertaining to our plans' coverage. Important details – such as those described below – are available at **VirginiaPremier.com** (under the Medicaid member resources page) and in our Member Handbook or Evidence of Coverage:

- quality improvement programs and annual goals
- consumer satisfaction results
- search for in-network providers (doctors) covered including their qualifications, office locations, contact information and hours of operations
- compliance and reporting compliance concerns
- clinical practice guidelines
- practitioner and provider policies and procedures
- rights and responsibilities of our members
- notice of privacy practices and information related to Protected Health Information (PHI)
- affirmative statement
- HEDIS
- information services for members
- coordination of healthcare services
- covered and non-covered benefits and services information
- how members can receive services through their primary doctor and/or specialist
- how to receive care after normal business hours or in case of an emergency
- how members can receive care when they are outside of our service area
- how to file a complaint or appeal a denial of service
- request language translation assistance or receive materials in an alternative format
- pharmaceutical procedures
- advanced directives



Also, review this newsletter every quarter to stay updated on topics such as:

- our case management program and how to make self-referrals
- how we evaluate new technology
- quality improvement activities and programs
- provider education meetings
- best practices for medical record keeping
- cultural needs and preferences including information related to our cultural competency quiz
- access standards notification
- practitioner and provider rights
- language assistance/TDD/TTY services
- our Chronic Care Management Program, formerly known as Disease Management Program
- health education articles
- coordination of care and transition to other care
- under- and over-utilization results
- availability of utilization management criteria

To request printed copies of these materials, please call Provider Services at 1-800-727-7536 (documents will be mailed to your office). We appreciate your participation in Virginia Premier's healthcare network and the role you play in helping us achieve our mission of inspiring healthy living among our members.



Low Acuity, Non-Emergency ER Visits on the Rise

In recent months, we have noticed an increase in the number of members with low acuity, non-emergent conditions visiting the emergency room (ER).

We are finding that members are being advised to return to the ER multiple times for follow up after the initial visit rather than being referred for follow up with their primary care physician (PCP). They are also being asked to wait a certain number of days after being seen in the ER before they can be seen in their PCP's office.

Virginia Premier is educating members on where to go when in need of medical care based on the severity of their condition, wait times and the cost. As a provider, you are a critical resource to help Virginia Premier get our message across to members.

Urgent Care vs. Emergency Department: Know Where to Go



24-Hour Nurse Advice Line

Members are encouraged to call the free 24-hour Nurse Advice Line when their physician is not available and they don't know what to do. The Nurse Advice Line is staffed by nurses who can help members understand medical topics and make good decisions about their health.



Physician's Office

Members are directed to their primary care physician's office for routine or preventive care, and to keep track of their medications and overall health. This includes general health issues such as:

- earaches
- headaches
- mild asthma
- skin rashes
- sore throat



- immunizations and screenings
- routine checkups



Urgent Care Center or Virtual Physician Visit

Members are encouraged to schedule a virtual physician visit or obtain services from an urgent care center like Minute Clinic, First Med, Patient First or Velocity when they experience the following:

- cough/cold/runny nose
- throat pain or sore throat
- ear pain
- pain/burning in urine
- headache
- nausea/vomiting
- loose stools/diarrhea
- fever less than 104°F
- rash
- back pain
- minor injuries, cuts, burns



Emergency Room and Calling 9-1-1

Members are directed to the ER when they have a serious or life-threatening medical condition. Members with less serious conditions may face longer wait times. We also want members to understand that member cost-share tends to be higher for services provided in the ER. Examples of conditions that might require a trip to the ER include:

- bleeding that won't stop or coughing up blood
- confusion
- drug overdoses
- head injury
- seizures or loss of consciousness
- severe chest or abdominal pain
- severe cuts and burns
- severe vomiting or diarrhea
- shortness of breath
- sudden change in vision

These guidelines are intended as general information and are not an all-inclusive list of medical problems that can be treated in these settings.

New SET Partnership Meets Member Transportation Needs

Effective March 1, 2021, Virginia Premier has partnered with Southeastrans (SET) to provide members with safe, reliable rides to and from medical appointments when there are no other options available.

This benefit applies to the following plans: Virginia Premier Advantage Elite (D-SNP), Virginia Premier Elite Plus (CCC Plus) and Virginia Premier Elite Individual (Medallion 4.0, except FAMIS).

If your Virginia Premier patients rely on you to schedule a ride, please note the following information.

How to schedule:

- Call the SET Facility Line to schedule: 1-844-856-7908.
- You can also schedule online via the **facility portal**. Contact Southeastrans to set up an account.
- When your patient is ready to return home, they **MUST** call 1-855-880-3480, option 3 to be picked up within 45 minutes.*
- Schedule rides at least five working days in advance. Weekends and holidays do not count toward these days.
- SET schedules up to 30 days in advance of an appointment.
- You can schedule multiple rides at one time, as long as they are within the 30-day window.
- Mention if your patient has needs such as oxygen, a wheelchair or an escort. An escort may go with your patient if they have a medical reason for assistance.

Transportation options include:

- **Mass/public transit:** Bus passes are available. If the member requires multiple trips within a short timeframe, SET may provide a monthly or weekly bus pass.
- **Mileage reimbursement:** Your office staff may receive a request to sign a patient form, confirming that the appointment was completed.



- Volunteer drivers
- Ambulatory (e.g., sedan, van or taxi)
- Wheelchair-accessible vehicle (ADA compliant)
- Ride-share services (e.g., Lyft) as approved
- Non-emergent advanced life support (ALS)/ basic life support (BLS) or stretcher (a letter of medical necessity is required for all ALS/ BLS or stretcher requests).

How have standing orders changed?

Southeastrans manages standing order requests through their facility line and facility portal. Standing orders for dialysis require recertification every six months. All other standing orders must be re-certified every 90 days.

What lines of business have NEMT as a benefit?

Virginia Premier Advantage Elite (D-SNP), Virginia Premier Elite Plus (CCC Plus) and Virginia Premier Elite Individual (Medallion 4.0, except FAMIS) lines of business have non-emergency medical transportation (NEMT) as a benefit.

**Hospital discharges can take up to three hours from time of call to the SET Facility Line.*



**Call us at 1-800-727-7536 (TTY: 711)
or visit us online at VirginiaPremier.com.**

**Hours of Operations
Monday through Friday; 8:00 a.m. – 6:00 p.m.**

Information in this newsletter - such as plan benefits for members, offerings to providers and other details - is subject to change.