

Network **NewsBrief**

A publication for **AvMed**
Providers and Staff

**Back-to-School
Immunizations at a Glance**

**Educating Your Patients
About Telehealth**

**Encouraging Your Patients
to Quit Smoking**

**CMS' Fraud, Waste and Abuse
Provider Training**



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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:

As our state continues to navigate these challenging times from the impact of COVID-19, we are committed more than ever to our mission of helping our Members live healthier. You played a vital role in providing telehealth services and expanding access to care for our Members.

At AvMed, our Members' health is our top priority and that hasn't changed. Our goal has always been to provide them with peace of mind, better service, quality, affordability and health. That's why during this challenging time, with your help, we removed the potential for financial barriers to care and alleviated concerns about access to testing and treatment for COVID-19. To find up-to-date information and useful resources to help keep your patients healthy, visit www.avmed.org/news/coronavirus.

In this summer issue of **Network NewsBrief**, we talk about kids having the proper vaccinations. You'll find a reminder about CMS Waste, Fraud and Abuse provider training. You can attest and complete the form on our website. We also offer resources to support your patients with quitting smoking. To further drive the message home, we show the average savings when a smoker kicks the habit.

Thank you for being a trusted health partner, delivering quality healthcare to our Members. As always we believe by working together we can help our Members live happier and healthier. Don't forget to share your thoughts with us by emailing **Providers@AvMed.org**.

Stay safe and be well.

Sincerely,



Frank Izquierdo

Senior Vice President,
Provider Solutions &
Strategic Alliances
AvMed

CARE OPPORTUNITY CORNER

Back-to-School Immunizations at a Glance

One of the main concerns that parents face each school year is immunization. Ensuring that kids have the proper vaccinations not only protects them, but also protects everyone around them. Each year, the Advisory Committee on Immunization Practices (ACIP) approves immunization schedules for persons living in the United States. We've highlighted a few of the vaccinations that are important for you to discuss with your patients.

Human papillomavirus (HPV): This year's recommendations are as follows:

- Vaccine series may be started at age 9
- Routine dosing intervals are recommended

It's never too early to start thinking about the flu. An annual vaccination is recommended for children 6 months to 18 years old, but the dosage is different depending on the child's age.

We also encourage you to stress the importance of annual flu shots to your patients, even if you do not administer them in your practice. Flu shots have a positive effect on vaccination rates, protecting the lives of patients and the people around them. Some patients may have reservations about vaccines like the flu shot due



to the presence of additives/preservatives. While there is no science to support that they pose any risk, there are "preservative-free" options available if the patient insists despite reassurances. The patient will need to request this option directly from their pharmacist during the flu shot visit.



For more vaccination guidelines, visit AvMed's Provider Portal at [AvMed.org](https://www.avmed.org). Once there, click on "**Providers**" and then click on "**Guidelines and Standards**."

Annual Enrollment Period 2021

As a Medicare Provider, you should be aware of 2021 benefits. Stay tuned for upcoming webinars and meetings, where you can meet your assigned Benefits Consultants. If you have any questions, contact AvMed's Provider Services Center at **1-800-452-8633**.

EDUCATING YOUR PATIENTS ABOUT TELEHEALTH



In the midst of social distancing, telehealth offers an innovative way for your patients to get the care they need without risking exposure to the coronavirus.

Telehealth visits are being recommended by the CDC as the safest and most productive way to attend a medical appointment. It not only helps prevent the spread of COVID-19, but it is a lot more functional and convenient.

Virtually visiting a doctor from the comfort of their homes helps avoid exposure to the virus in a waiting room and, as an added bonus, cuts wait times and costs.

“Essentially overnight, COVID-19 has created this unique situation where the traditional physician/patient interaction was limited to urgent or emergent situations,” said Dr. Edwin Rodriguez, MD, Medicare Director at AvMed.

“Our Members were faced with the real possibility of not seeing their physician for the foreseeable future. AvMed has adapted to this rapidly changing environment by allowing our provider partners to bill for telehealth services and expand access for our Members.”

Telehealth appears to be catching on, as Members understand the benefits. In March 2020, AvMed Members’ virtual visits increased by more than 79% compared to March 2019. Our Members have access to a vast number of board-certified physicians through our organization’s Virtual Visits service, which is powered by MDLIVE and can be accessed 24/7/365 from a computer or smartphone – anytime, anywhere.

During telehealth visits, doctors assess their patients’ condition to determine the best course of treatment for what ails them. Patients can also take this opportunity to ask any questions they may have, just like they would in a regular doctor’s visit.

For many patients, the emergency room might seem like the best option, so it’s important for you as their trusted provider to educate them about safe, cost-effective alternatives for expensive, overcrowded emergency rooms. A proven alternative is telehealth visits, offering easy access to primary care which also go a long way in preventing avoidable emergency room visits.

When your patients must use the ER, it is also important to educate them to call your office for follow up as soon as possible after the emergent visit. This is especially true for your patients with chronic medical conditions, behavioral health or substance abuse diagnoses. In fact, prompt follow up after ER visits can reduce fragmented care and improve overall condition management as well as reducing subsequent avoidable ER or inpatient visits.



Educate your patients about telemedicine as a better alternative than the ER and let them know about any virtual visits available through your office as well as the **24/7 availability of MDLIVE**. Always make sure your patients know that for life threatening emergencies, they should call 911 or seek care at an emergency room as appropriate.

TELEBEHAVIORAL HEALTH



Through our partnership with Magellan Health, patients have access to a network of qualified behavioral/mental health and substance abuse providers including psychiatrists, psychologists, social workers, master's level therapists and various specialty providers. More than 200 network providers in Florida participate in telebehavioral health.

With telebehavioral health, providers can do everything they do during a regular face-to-face office visit — from counseling, diagnosing, and prescribing medication if appropriate — all via a HIPAA-compliant, secure, private online connection.

If you have a patient who would benefit from telebehavioral health, contact Magellan Health to request a behavioral health provider. Or, direct your patients to register online www.magellanassist.com and search for a provider.

Medical providers are encouraged to obtain a signed release of information form (or document the Member's non-authorization of release). While stigma associated with behavioral healthcare can sometimes inhibit such communication, providers can educate Members on the benefits of coordinated care.



Magellan Health can be contacted at **1-800-424-4810**. For screening tools and clinical guidelines at www.magellanpcptoolkit.com.

PCP ASSISTANCE WITH ALCOHOL DEPENDENCE

Alcohol and other drug (AOD) dependence can affect anyone. According to the Substance Abuse and Mental Health Services Administration, more than 23 million Americans are addicted to drugs and alcohol.

Research has found that Primary Care Physicians (PCP) are among the first to diagnose AOD dependence in patients. If you are a PCP, it's in you and your patients' best interests to perform AOD dependence treatment at your practice. You can do this through IET (Initiation and Engagement Therapy).

By initiating treatment within 14 days of the diagnosis at your practice and scheduling at least two follow-up visits within 30 days of the initial visit, you can also help close IET measure gaps. If you're not able to perform AOD



dependence treatments at your practice, you can still assist in improving patient care quality. Within 14 days of the diagnosis, refer the patient to a Behavioral Health Provider Partner for appropriate treatment. AvMed's current Behavioral Health Provider Partner is Magellan Health.



For more information about Magellan Health, visit MagellanHealth.com or call **1-800-424-4810**.

Encouraging Your Patients to Quit Smoking



If your patients are smoking regularly they may be spending anywhere from \$6 - \$12 on cigarettes a day. Below is the likely average savings if a smoker can kick the habit.

- 1 day without smoking (\$6 - \$12)
- 1 week without smoking (\$42 - \$84)
- 1 month without smoking (\$186 - \$372)
- 1 year without smoking (\$2,190 - \$4,380)
- 10 years without smoking (\$28,866 - \$57,731, adjusted for inflation)
- 20 years without smoking (\$80,560 - \$161,121, adjusted for inflation)

Keep in mind that these numbers don't even factor in potential healthcare cost savings. A young smoker could feel fine now, may not have a cough, or get winded when walking up a flight of stairs. But, it takes a while before the effects of smoking are really felt. By the time they are, nicotine may have them in its addictive grip.

Trying to help a patient quit smoking? Share these facts to drive the message home:

- 8 hours after quitting, carbon monoxide in blood goes down and oxygen levels go up.
- 48 hours after quitting, improved sense of taste and smell.
- 10 years after quitting, the risk of lung cancer is cut in half.
- 15 years after quitting, your health is essentially the same as that of someone who never smoked.

AvMed's Tobacco Cessation Program on the wellness portal provides interactive help through online classes, articles and self-management tools to support your patient's decision. The online portal provides community resources to support your patient with meetings and therapies at either a discount or no additional charge. Various name brand Nicotine Replacement Therapies (NRT) are available through ChooseHealthy®, AvMed's health and wellness values program at a discounted cost.

Tobacco-Free Florida

Quit kit with resources and tips

www.tobaccofreeflorida.com

1-877-U-CAN-NOW

American Cancer Society

Quit for Life

www.quitnow.net

www.cancer.org/healthy/stayawayfromtobacco

National Cancer Institute

Smoking Quitline

www.cancer.gov/cancertopics/tobacco/smoking



Please encourage your patients to visit the resources above for plenty of helpful advice and tips and to get support every step of the way.

CMS' Fraud, Waste and Abuse Provider Training on AvMed.org



The Centers for Medicare & Medicaid Services (CMS) mandates that all AvMed-contracted entities, including those contracted with AvMed subsidiaries, complete Fraud, Waste and Abuse Compliance Training annually. To attest that you have completed the Centers for Medicare & Medicaid Services Part C and Part D Fraud, Waste, and Abuse and Compliance Training please complete the form on our website; otherwise the resources here are provided to help healthcare providers complete these requirements.



Visit [AvMed.org/Provider-Education/ Training](https://www.avmed.org/Provider-Education/Training) to take the training before submitting your attestation. Once completed, you may print the certificate included for your records.

Balance Billing Limitations Regarding Medicare Patients

AvMed Medicare and Medicare Advantage Providers need to be aware of the Centers for Medicare & Medicaid Services' (CMS) recent guidance about balance billing certain enrollees. Providers who balance bill Dual Eligible Medicare beneficiaries or Qualified Medicare Beneficiaries (QMBs) are subject to sanctions, so it's in your best interest to verify your patient's status. The CMS mandate precludes the billing of any cost sharing amounts to Medicare beneficiaries who are also Medicaid beneficiaries or QMBs. The QMB program, in particular, is a State Medicaid benefit that covers Medicare deductibles, coinsurance, and copayments; it's also subject to state payment limits. Should the State not reimburse you for the full Medicare cost-sharing amount, you cannot charge the patient for

the remainder. This guidance is intended for all Medicare and MA providers – not just the ones who accept Medicaid. More information about dual eligible categories can be found at [Medicare.gov](https://www.Medicare.gov).



For more information, call AvMed's Provider Services Center at **1-800-452-8633, Monday-Friday, 8 am-5 pm**, excluding holidays.



**Embrace
better health.®**

9400 S. Dadeland Blvd.
Miami, FL 33156

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 patient experience focusing on how patients perceive key aspects of their care, such as 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 Services Center at 1-800-452-8633, Monday-Friday, 8 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 SERVICES CENTER

1-800-452-8633, Monday-Friday, 8 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)