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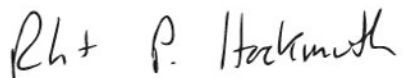
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A note from Dr. Robert Hockmuth, Chief Medical Officer

It has been another exciting year for AmeriHealth Caritas New Hampshire. Since we launched in 2019, our growth has continued, and we now have well over 55,000 members. We have network providers like you to thank for our continuing success.

This year, we have successfully completed the National Committee for Quality Assurance (NCQA) accreditation process and achieved full accreditation for three years. The quality care consistently delivered from our network providers was a major factor in making this happen. Also, value-based care initiatives such as our Quality Enhancement Program, which gives incentives to providers, and a member rewards program to encourage preventive care, prenatal care, diabetes control, and more.

I am glad to have returned as market chief medical officer for the plan to help continue our growth and serve our members. And I, along with our new plan president, Bill Keena, are committed to providing you with the service and support you have come to rely on from the plan. I can be contacted at rhockmuth@amerihealthcaritas.com.



Robert Hockmuth, M.D.
Chief Medical Officer
AmeriHealth Caritas New Hampshire



New Wellness and Opportunity Center opens up

AmeriHealth Caritas New Hampshire's new Wellness and Opportunity Center has begun operations. It's a bright, inviting space attached to the north end of our Manchester office, located at 25 Sundial Avenue. The concept of the Center is based on three pillars:

1. Information, resource, and referral — helping members with their benefits and addressing their social determinants of health, including community-specific information and referrals
2. Population health touchpoint — offering the Bright Start® program for pregnant members, and care plan review
3. Space-sharing — providing an open invitation to stakeholders (nonprofits, government, providers) to utilize our space for working, meetings, presentations, and more

The Center will also include planned programming and features for members and the public, including:

- Cooking demonstrations
- Financial literacy
- Discussions with your Care Manager
- Special community events
- Children's room with chalkboard wall

We encourage you to let our members know about the Wellness and Opportunity Center and welcome you to come and check it out yourself!

Join our Provider Advisory Board

Let your voice be heard on our Provider Advisory Board (PAB).

On this board, providers give us accurate and timely feedback on the Medicaid Care Management program and our performance, based on their observations and experiences of member needs. The board includes representation from a broad spectrum of local providers, including Local Care Management Networks, Federally Qualified Health Centers, Community Mental Health Centers, and Integrated Delivery Networks.

The PAB meets in the evening once every three months. Contact your Account Executive for more information.



Always report birth weight and gestational age on birth notifications

It is critically important to collect and report all applicable information on a birth notification. **This includes birth weight and gestational age.** This information, which should be supplied routinely, is needed to track and support better outcomes for our members.

The state of New Hampshire has instituted the [New Hampshire Medicare & Medicaid Managed Care Organizations Birth Event Notification form](#) for all New Hampshire Medicaid MCOs as part of an effort to standardize processes. It is available on our website. Please note that this form does not change our or any other MCO's policies or coverages.

Reminder: prior authorization information for outpatient therapy and home-based care

The prior authorization requirements regarding home-based services and outpatient therapy visits are as follows:

Home-based services

- Home health care (physical, occupational, and speech therapy) and skilled nursing (required after six combined visits, regardless of modality, per fiscal year — not per provider)
- Home infusion services and injections (required from start of service; see pharmacy list of HCPCS codes that require prior authorization)
- Home health aide services (required from start of service)
- Private duty nursing/extended nursing services (required from start of service)
- Personal care services (required from start of service)

To help ensure you do not receive a denial for services because of failure to request prior authorization, we encourage you to notify us of the first 12 outpatient visits, or the first 18 home-based therapy or skilled nursing visits, so we can track them in our system. You can notify us by calling **1-833-472-2264**, faxing **1-833-469-2264**, or submitting notification in NaviNet on the provider portal.

Outpatient therapy (physical, occupational, or speech)

- Prior authorization is required after the 12th visit per modality, per fiscal year — not per provider. Benefit limit for members age 21 and older is 20 visits per modality, per fiscal year, not per provider. To help ensure you do not receive a denial for services because of failure to request prior authorization beginning with the 13th visit, we encourage you to notify us of the first 12 visits so we can track them in our system. You can notify us by calling **1-833-472-2264**, faxing **1-833-469-2264**, or submitting notification via the provider portal.



Provider credentialing rights

Are you awaiting credentialing? Health care providers who have submitted a credentialing or recredentialing application to AmeriHealth Caritas New Hampshire have the right to:

- Review the information submitted to support their credentialing application, with the exception of recommendations and peer-protected information obtained by the plan.
- Correct erroneous information. When information is obtained by the Credentialing department that varies substantially from the information the provider gave, the Credentialing department will notify the health care provider to correct the discrepancy. Corrections are to be made within 10 business days of notification and can be submitted via fax to **1-215-863-6369** or mailed to the AmeriHealth Caritas New Hampshire Credentialing department:

AmeriHealth Caritas New Hampshire
Attn: Credentialing Department
200 Stevens Drive
Philadelphia, PA 19113

- Be informed, upon request, of the status of their credentialing or recredentialing application. The Credentialing department will share all information with the provider with the exception of references, recommendations, or protected peer-review information (e.g., information received from the National Practitioner Data Bank). Requests can be made via phone, email, or in writing. The Credentialing department will respond to all requests within 24 business hours of receipt. Responses will be via email or phone call to the provider.
- Be notified of a Credentialing Committee or Medical Director review decision, within 30 calendar days for PCPs, and within 45 calendar days for specialty providers, of receipt of a clean and complete application. Providers may appeal any initial or recredentialing denial within 30 calendar days of receiving written notification of the decision.

To request any of the above, providers should contact AmeriHealth Caritas New Hampshire's Credentialing department at **1-866-610-2770**.

Medicine updates

Our pharmacy and therapeutics committee meets four times a year to vote on changes to the preferred drug list, including which medicines to add or remove. Visit [our website](#) for up-to-date pharmacy information. The website includes:

- Prescription benefits: www.amerhealthcaritasnh.com/member/eng/benefits/pharmacy.aspx
- Up-to date drug list (both searchable and printable): www.amerhealthcaritasnh.com/member/eng/find-provider/index.aspx
- Formulary changes are posted under provider updates at: www.amerhealthcaritasnh.com/provider/newsletters-and-updates/index.aspx

If you have any questions regarding prescription benefits, please call Pharmacy Member Services at **1-888-765-6383 (TTY 711)**, 24 hours a day, seven days a week.

Modifier KX and condition code 45: important information on billing for transgender, ambiguous genitalia, and hermaphrodite patients

KX modifier

To allow for normal claims processing, **the KX modifier** should be used in the following circumstances to allow for normal claims processing:

- The procedure is not typical for the patient's gender.
- The diagnosis is not typical for the patient's gender.

The KX modifier should be used by providers when billing for certain services administered to transgender, ambiguous gender, or hermaphrodite patients. Failing to do so may result in a claim being denied for the reasons listed above. Ambulatory surgery centers should bill the KX on the detail line only with the procedure code(s) that is gender-specific for transgender, ambiguous genitalia, and hermaphrodite beneficiaries.

Condition code 45

For UB-04 billing, **condition code 45 (Ambiguous Gender Category)** alerts us that the gender/procedure or gender/diagnosis conflict is not an error, allowing the claim to continue normal processing.

These policies were determined by the Centers for Medicare & Medicaid Services (CMS). Guidance can be found at <https://www.cms.gov/Regulations-and-guidance/Guidance/Transmittals/downloads/R1877CP.pdf>.

Recent prior authorization changes: providers in credentialing, and codes related to hysterectomy

During credentialing

Credentialing generally takes 30 to 45 days to complete. During that time, providers must obtain prior authorization (PA) for all services provided to AmeriHealth Caritas New Hampshire members. Claims from providers in the credentialing process that did not get PA may be denied for payment.

Codes related to hysterectomy

Effective immediately, AmeriHealth Caritas New Hampshire is requiring PA for the following codes related to hysterectomy:

- **58575:** Laparoscopy, surgical, total hysterectomy for resection of malignancy (tumor debulking), with omentectomy including salpingo-oophorectomy, unilateral or bilateral, when performed
- **58951:** Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy

You easily can look up prior authorization requirements for medical services and procedures with our Prior Authorization Lookup Tool, which can be found on our website at <https://www.amerhealthcaritasnh.com/provider/resources/prior-authorization-lookup.aspx>.

Member rights and responsibilities

AmeriHealth Caritas New Hampshire is committed to treating our member with dignity and respect. AmeriHealth Caritas New Hampshire, its network providers, and other providers of service may not discriminate against members based on race, sex, religion, national origin, disability, age, sexual orientation, or any other basis prohibited by law.

Our members also have specific rights and responsibilities. The complete list is available on our website at www.amerhealthcaritasnh.com. Go to the member homepage and you'll find the link to [Your Rights and Responsibilities](#) at the bottom of the column on the left.

Close gaps in your members' care

Participating primary care providers can access and resolve Healthcare Effectiveness Data and Information Set (HEDIS®) care gaps for AmeriHealth Caritas New Hampshire members via NaviNet.

Care gaps identify missing recommended preventive care services so that you may address them when your patient comes in for an office visit. Care gaps are based on HEDIS measures and may impact your quality scores.

Once you've [logged in to NaviNet](#), check the **Activity** tab to see alerts for care gaps that need your response. Alternatively, you can click on **Patient Clinical Documents** under **Workflows** to see the list of members who have care gaps. You will also see care gaps for your patients upon using the **Eligibility and Benefits Inquiry**, and on the **Member Clinical Summary** and **Care Gap Query Report**. Read our [Care Gap Response Form Provider Guide](#) for more information.

Incentives for quality, value-based care

State and federal agencies agree — value-based incentive programs that reward health care providers for the quality of patient care, coupled with member rewards, can help in providing better care, improving population health, and reducing health care costs.

Participating in [value-based health care](#) has advantages:

- Transforms your practice to promote better care for patients and healthier communities.
- Provides your practice with an additional revenue stream.
- Provides your practice with a competitive advantage.
- Builds partnerships and solidifies referral relationships.
- Prepares your practice for compliance with state and federal mandates.

Components of our value-based care initiative include:

- **Provider incentives:** Our [Quality Enhancement Program](#) for primary care providers continues to provide incentives for high-quality and cost-effective care, excellent member service during office visits, and health data submission.
- **Member rewards:** Our [member rewards](#) include our [CARE Card program](#), which rewards members for things like completing the [Health Risk Assessment](#), getting an annual checkup, or getting prenatal and postpartum care.
- **Support through know-how:** We help you provide your patients the best quality care with tools [on our website](#). There are links to information on quality, clinical guidelines and policies, and even on how to better work with us.

As always, if you have questions, you can contact your Provider Account Executive or the Provider Services department at **1-888-599-1479**.

AmeriHealth Caritas New Hampshire Provider Manual

The AmeriHealth Caritas New Hampshire [Provider Manual](#) is posted on the Getting Started page at <https://www.amerhealthcaritasnh.com/provider/getting-started.aspx>.



Let Us Know program

AmeriHealth Caritas New Hampshire is pleased to offer the [Let Us Know program](#), a partnership between our case management team and the provider community for engagement with our chronically ill members and management of their conditions.

Members who require additional support for either physical or behavioral health services may be referred to us via the Let Us Know program. If you recognize a member with a special, chronic, or complex health condition who may need the support of one of our programs, let us know by:

- Calling the Rapid Response and Outreach Team at **1-833-212-2264** from 8 a.m. to 5 p.m.
- Faxing the [Member Intervention Request Form](#) (PDF) to **1-833-828-2264**.
- Referring a patient to the Care Management program by calling us at **1-833-212-2264**.

Keep your information updated with us

Our online provider directory is an important tool in helping members find a network doctor, dentist, or health care facility, such as a hospital or urgent care clinic, in their area. An accurate provider directory helps our members find you. Keeping your contact information updated with us also helps us communicate with you.

To keep your information updated: Check often to make sure your AmeriHealth Caritas New Hampshire provider directory information is accurate. Some of the important items we include in the directory are:

- Phone and fax numbers
- Hospital affiliations
- Address and office hours
- Open status
- Website address
- Cultural and linguistic capabilities
- Accommodations for members with disabilities or special needs

And for us to contact you, **it's important that we have your practice email address as well as your fax number.**

To update or correct your provider information, just complete the provider change form on our website at <https://www.amerihealthcaritasnh.com/assets/pdf/provider/provider-change-form.pdf>. The online directory is updated daily Monday through Friday.

If you suspect it, report it: Help us fight fraud, waste, and abuse

AmeriHealth Caritas New Hampshire recognizes the importance of detecting, investigating, and preventing fraud, waste, and abuse.

Examples of fraud, waste, and abuse include:

- Accepting kickbacks for patient referrals.
- Violating physician self-referral prohibitions.
- Billing for services not furnished.
- Providing medically unnecessary care.

Anonymously report suspected fraud, waste, or abuse directly to AmeriHealth Caritas New Hampshire, the New Hampshire Department of Justice Office of the Attorney General Medicaid Fraud Control Unit, or the New Hampshire Department of Health and Human Services:

AmeriHealth Caritas New Hampshire:

Call: AmeriHealth Caritas New Hampshire Fraud, Waste, and Abuse Hotline at **1-866-833-9718**

Email: fraudtip@amerihealthcaritas.com

Mail: Special Investigations Unit
200 Stevens Drive, Philadelphia, PA 19113

NH Department of Justice Office of the Attorney General Medicaid Fraud Control Unit:

Phone: 1-603-271-1246

Fax: 1-603-223-6274

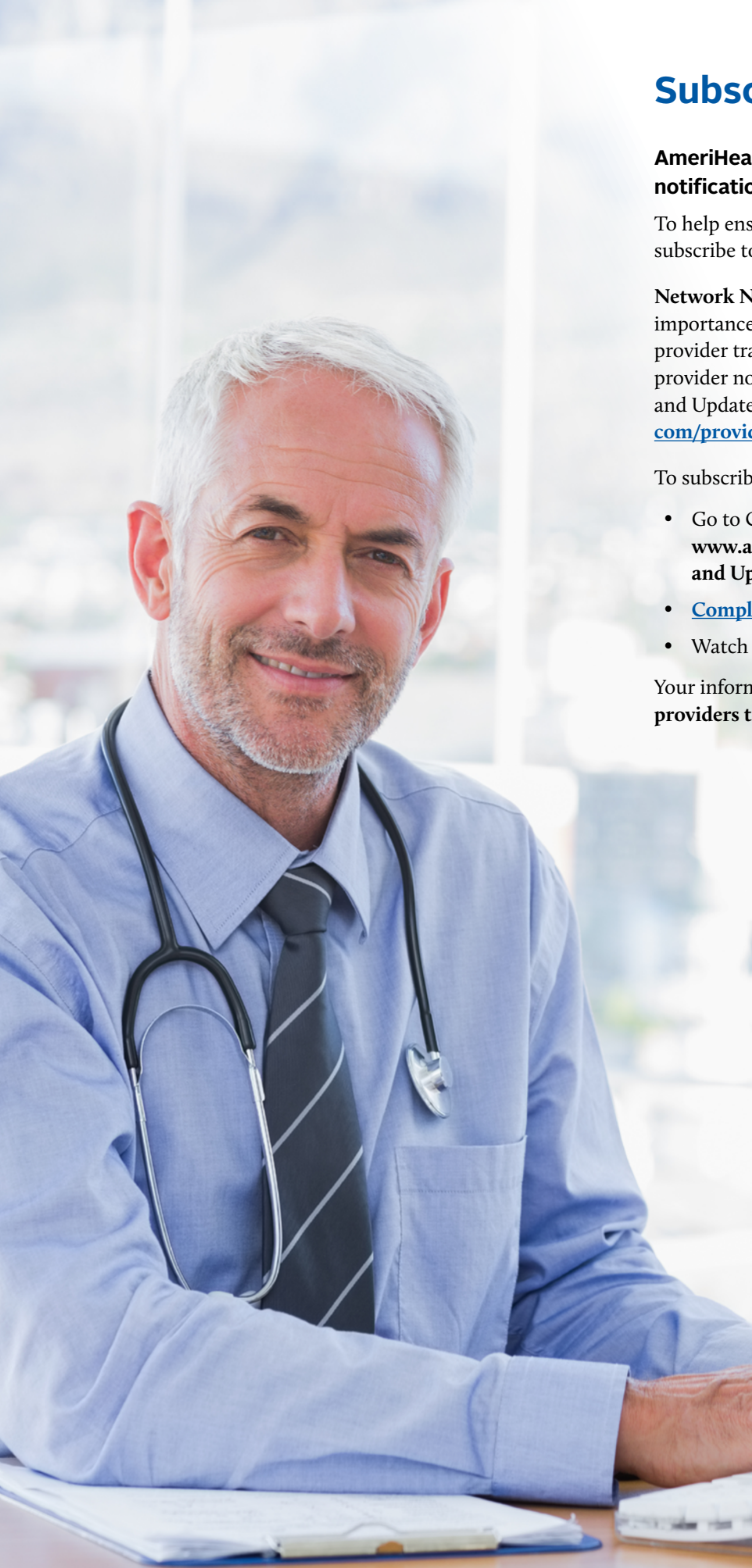
Email: mfcuinfo@doj.nh.gov

Website: <https://www.doj.nh.gov/criminal/medicaid-fraud.htm>

Mail: Medicaid Fraud Control Unit
Office of the Attorney General
33 Capitol Street, Concord, NH 03301

For more information, see [Report Fraud, Waste, and Abuse](#) on our website.





Subscribe to Network News —

AmeriHealth Caritas New Hampshire's email notification service

To help ensure that you are receiving all provider notices, subscribe to our email service, Network News.

Network News is used to share information on topics of importance to you, including important plan updates, provider training events, and more. It's a digest of recent provider notifications that can be found on our Newsletters and Updates page at: <https://www.amerhealthcaritasnh.com/provider/newsletters-and-updates/index.aspx>.

To subscribe:

- Go to Complete the online form found under <https://www.amerhealthcaritasnh.com> >Provider >Newsletters and Updates >Sign Up for Network News ([or click here](#))
- [Complete the form](#) and click Submit.
- Watch for a confirmation email in your inbox.

Your information will be kept confidential. **We encourage all providers to register.**



Connect with us on Facebook

Follow AmeriHealth Caritas New Hampshire on Facebook for event information, health tips, member information, and more. Search for **@amerihealthcaritasnh** to find us.



Do you know your Provider Network Account Executive?

Your Provider Network Account Executive is your liaison with AmeriHealth Caritas New Hampshire. They are responsible for orientation, continuing education, and problem resolution for our network providers.

Call your Account Executive:

Randy Basilone

PNM Account Executive I

Phone: **1-603-932-3345**

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Betsy Gray

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