

CLAIMS CORNER

HEALTHCARE INSIGHT (HCI)

As a requirement of the Affordable Care Act (Title VI, Subtitle F, Section 6507) VPHP is reviewing claims for correct coding as defined by the National Correct Coding Initiative (NCCI). We have partnered with HealthCare Insight (HCI) in order evaluate claims on a post adjudication/pre-payment basis. A list of edits being applied to claims and their general description has been provided in an attachment to this letter.

Effective April 1, 2013 these edits will be evaluated and implemented. This may mean that services that historically were reimbursed will not be in the future. All edits comply with NCCI standards and should be part of your normal billing practices.

If you have any questions or would like any additional information about this program, feel free to reach out to us at (804) 819-5151.

EDIT	OB Short Description	EOB Long Description
ACW	Incorrect anesthesia code	Procedure <code> (<short description>) on line <number> appears to be anesthesia service that has been billed using a surgical procedure code. This service should be billed using an anesthesia code. Procedure <code> (<short description>) is a possible replacement code.
ADD	Add-on code denied as primary code was denied	Procedure <code> (<short description>) on line <number> is an add-on procedure code. Because the primary procedure has been disallowed, the add-on code is also disallowed. (see ClaSeq: <claim number>)
AGE	Inappropriate forage	Procedure <code> (<short description>) on line <number> is inappropriate for the patient's age.
AGM	Routine ante partum services	This Service <code> (<short description>) is denied as routine ante partum care and is not separately reimbursable.
ASM	Does not match surgeon	Procedure <code> (<short description>) on line<number> billed as an assistant surgeon service does not match the procedure code billed on the same date by the provider identified as the primary surgeon. The assistant surgeon should be billing the same procedure codes as the primary surgeon. (see ClaSeq: <claim number>)
ASP	Assistant bill w/o surgeons bill	There is no history of the primary surgeon's bill for the assistant surgeon service on line <number> procedure <code> (<short description>). Reimbursement should be based on the procedure codes billed by the primary surgeon. (See <claim number>. Line <number>)
ASR	Reduction for assistant	The Suggested Paid amount on line <number> for Procedure <code> (<short description>) has been adjusted to reflect reductions for assistant surgeons.
AWP	Anesthesia no surgeon	There is no history of the primary surgeon's bill for the anesthesia services on line <number> procedure <code> (<short description>). Reimbursement should be based on the procedure codes billed by the primary surgeon.
BIL	Bilateral disallowed	Procedure <code> (<short description>) on line <number> is not appropriately billed more than once per day. (see ClaSeq: <claim number>)
COS	Cosmetic procedure	Procedure <code> (<short description>) on line <number> is typically a cosmetic procedure and may not be covered.
CPD	Duplicate services	Procedure <code> (<short description>) typically requires only one provider. Another provider has billed for this service on <claim number>.
CSA	No co-surgeon allowed	Procedure <code> (<short description>) on line <number> typically does not require co-surgeons.
CSR	Reduce, surgical team	The Suggested Paid amount on line <number> for Procedure <code> (<short description>) has been adjusted to reflect reductions for co-surgeons or teams of surgeons.
DEL	Deleted Code	Procedure <code> <short description> on line <number> is not effective for the date of service billed. Procedure <code> was deleted <deletion date>.
DUP	Duplicate billing	This line is a duplicate of <claim number>.
EFR	Endoscopic Family Reduction	An Endoscopic Family Reduction was applied to line <number>. A reduction of <percentage>% was applied to procedure code <code> (code short description) which represents the value of base procedure code <code> (code short description).
ELG	Patient not eligible	Services on line <number> were provided on a date that is not within the eligibility period on record for the patient.
FOT	Frequency Over Time	Procedure code <code> (<short desc>), on (claseq, line) exceeds the number of services allowed over a given period of time. <number> units are recommended <time period>. The suggested paid amount has been reduced to reflect this recommendation.
FRE	Reimbursable once per day	The occurrence of procedure <code> (<short description>) on line <number> exceeds the number of times the procedure can typically be performed on the same day based on the description of the code or due to physiological or anatomical limitations. <number> units are recommended. The suggested paid amount has been reduced to reflect the recommended number of units.
FUD	Part of global service	Procedure <code> (<short description>) is within days of procedur e (<code> (<short description>) on line <number>. This is within the normal global follow-up period for that service. (See <claim number>. Line <number>)
GDR	Antepartum care included in global code	This service <code> (<short description>) was reduced for antepartum services previously reimbursed that are included in the global maternity package. (See <claim number>. Line <number> code <code> (<short description>.)
GEN	Incorrect patient gender	Procedure <code> (<short description>) on line <number> is inappropriate for the patient's gender.
GPA	Part of global service	Procedure <code> (<short description>) listed in <claim number> is within days of procedure <code> (<short description>). The Paid amount for the previously paid line has been subtracted from the Paid for this line. (See <claim number>. Line <number>)
IFR	Multiple radiological procedure reduction	An Imaging Family Reduction was applied to line <number>. A reduction of <percentage>% was applied to procedure code <code> (code short description) which represents the reduced value of the technical component.
INVC	Invalid CPT/HCPCS Code	Procedure <code> <short description> on line <number> is not a valid CPT or HCPCS code.
INVR	Invalid Revenue Code	Revenue <code><short description> on line <number> is not a valid revenue code.
LIF	Service reported more than typical	Procedure <code> (<short description>) on line <number> has exceeded the number of times the procedure can typically be performed during a patient's lifetime for physiological or anatomical reasons. (See <claim number>. Line <number>)
M52	Modifier 52 reduction	The suggested paid amount on line <number> for procedure <code> (<short description>) has been adjusted to reflect reductions for reduced services as indicated by the presence of modifier 52.
M53	Modifier 53 reduction	The suggested paid amount on line <number> for procedure <code> (<short description>) has been adjusted to reflect reductions for discontinued services as indicated by the presence of modifier 53.
M73	Modifier 73 reduction	The suggested paid amount on line <number> for procedure <code> (<short description>) has been adjusted to reflect reductions for discontinued outpatient services prior to the administration of anesthesia as indicated by the presence of modifier
M74	Modifier 74 reduction	The suggested paid amount on line <number> for procedure <code> (<short description>) has been adjusted to reflect reductions for discontinued outpatient services after the administration of anesthesia as indicated by the presence of modifier
MAT	Part of global service	Procedure <code> (<short description>) for maternity care was reimbursed with global maternity procedure code <code> (<short description>) on claim <claim number> on line <number>. (See <claim number>. Line <number>)
MAX	Exceeds daily limits	Procedure <code> (<short description>) on line <number> is not typically billed more than twice per day.
MEX	Unbundled to <code>	Procedure <code> (<short description>) on line <number> is mutually exclusive to procedure code on line <number>. (See <claim number>. Line <number>)
MNR	Review for Medical Necessity	HCI's Clinical Director has determined procedure <code> (<short description>) on line <number> requires additional clinical review for medical necessity.
MOD	Inappropriate use of modifier 26	The modifier assigned to line <number> is inappropriate for procedure <code> (<short description>).



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SPRING 2013

VIRGINIA PREMIER HEALTH PLAN, INC.

PROVIDER NEWSLETTER

Special Note: The Provider Newsletters are produced quarterly by Virginia Premier Health Plan, Inc. We will only mail one (1) issue of the quarterly Provider Newsletter to each group's main location and to a limited number of facilities. Please pass along your copy to the other offices/departments or download this information and previous issues from our website at www.virginiapremier.com. Providers wishing to receive a hard copy should contact the Network Development Department at (800) 727-7536.

From the Senior Medical Director

Once again I open my comments with a Thank You! Virginia Premier Health Plan (VPHP) remains one of the top Medicaid Health Plans in the United States because of your contributions. It is always heartwarming with springtime just around the corner knowing that VPHP can count on our provider network to continue the excellent quality services given to our 170,000 members. The providers are indeed “leveraging the power of our mission statement”.

HEDIS (Healthcare Data and Information Set)

Each year at this time, the VPHP nurses are in the offices throughout the State gathering data for HEDIS. This year is no different. Thanks for allowing our nurses to come to your offices for this most important function. If VPHP can improve this process in any manner, feel free to call our Quality Department at 804 819-5151.

Look for results of our HEDIS audits in the next newsletter. VPHP remains hopeful that it will again be one of the top health plans in the USA and especially in the State of Virginia. Your efforts, contributions, and assistance are the key ingredients to this success.

Pharmacy and Therapeutics

VPHP has continued to update its PDL (preferred drug list) on a regular basis on our website, www.virginiapremier.com.

Our Pharmacy Director, Javier Menendez has done a tremendous job in responding to the

providers since his arrival. Just a reminder: on the website are all of the necessary forms and information needed for step therapy, prior authorizations, and other helpful hints. The searchable tool is always updated for new medications and other new information. VPHP remains aware of all current changes in the pharmacy environment and with the help of our PBM (Pharmacy Benefit Mangaer) Envision Rx we attempt to address the current changes and recommendation.

Clinical Practice Guidelines

All of the clinical guidelines are currently on the website. If a hard copy is desired please contact medical management at 804 819-5151. VPHP encourages use of these guidelines, which are reviewed and updated annually by your peers. They can be found at www.virginiapremier.com.

VPHP has expanded into the Far Southwest and we welcome any questions or comments from providers in that region. Enjoy the beautiful springtime and contact VPHP with any concerns.

Best regards,

Melvin T. Pinn, Jr. MD, MPH, FAAFP
Senior Medical Director

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HOLIDAY OBSERVANCES SCHEDULE 2013

May 27, 2013:	Memorial Day	December 24, 2013:	Christmas Eve
July 4, 2013:	Independence Day	December 25, 2013:	Christmas Day
September 2, 2013:	Labor Day	December 31, 2013:	½ Day-New Year's Eve
November 27, 2013:	½ Day Thanksgiving Eve	January 1, 2014:	New Year's Day
November 28, 2013:	Thanksgiving Day		
November 29, 2013:	Day After Thanksgiving		

COMPLIANCE CORNER

Final Rule: Modifications to the HIPAA Privacy, Security, Enforcement, and HITECH Act Breach Notification Rules (January 25, 2013)

- Compliance date for all provisions of the Final Rule is **September 23, 2013**, penalties are effective NOW
- Final Rule removes the harm standard from the definition of “breach”
- Breach is defined as “the unauthorized acquisition, access, use or disclosure of PHI that compromises the privacy and security of that information”
- Presumption that an impermissible use or disclosure is considered to be a breach UNLESS the covered entity or business associate can demonstrate that there is a “low probability” that the PHI has been compromised
- Factors to consider when performing a risk assessment to determine whether there is a low probability of compromise:
 - Evaluate the nature and extent of the PHI involved
 - Consider the individual who impermissibly used the PHI or to whom the disclosure was made (Was it disclosed to a CE?)
 - Investigate whether the PHI was actually acquired or viewed or if only the opportunity existed for information to be acquired or viewed
 - Consider the extent to which the risk to PHI has been mitigated (Did the recipient certify that the PHI was not further used or disclosed and was destroyed?)

For a complete copy of the Final Rule please refer to The Federal Register, Vol. 78, No. 17 (January 25, 2013)



The VCU Neighborhood Partners Practice (NPP)



Many patients who are accessing dental care are not visiting their regular primary care provider, so Virginia Premier is collaborating with the VCU Schools of Nursing and Dentistry @VCU on a pilot project called the VCU Neighborhood Partners Practice (NPP).

What is the VCU NPP?

The VCU NPP provides basic health and education services to Virginia Premier patients accessing services within the VCU School of Dentistry. This practice- while not a medical home or a primary care provider- will help patients bridge the gap.

The practice will:

- Provide episodic care for patients who are deemed medically unsuitable for their planned dental treatments/ procedures at the time they arrive
- Educate patients with chronic health issues
- Work with you to facilitate the scheduling of patient appointments with your practice

Where is the NPP located?

The clinical space is located in the Wood Memorial Building of the VCU School of Dentistry complex.

Who will lead the VCU NPP?

Steve Crossman, MD, a family physician
Judith Parker-Falzo, a family nurse practitioner

It is their desire to serve as a health resource to both patients and their physicians. If you have any questions or if you want more information about this exciting initiative, call (804) 628-1792 or visit www.npp.vcu.edu.

QUALITY CORNER

2012 Practitioner Golden-Globe Award

It is with great pleasure that Virginia Premier Health Plan (VPHP) has selected Olivia A.K. Mansilla, MD as the recipient of 2012 Practitioner Golden- Globe Award.

Dr. Mansilla received her medical degree from the University of San Carlos, Guatemala. In 1989, she moved to the US, and in 1997, she moved to Pittsburgh, PA where she completed her residency in Internal Medicine at the University of Pittsburgh. After finishing her training, she decided to pursue and specialize in Geriatric Medicine which brought her to Richmond, Virginia where she participated in a two-year fellowship at the Medical College of Virginia Hospital.

Dr. Mansilla has numerous accomplishments. She has served as Medical Director of Vitas Hospice which is the nation's leading provider of Hospice services. Dr. Mansilla was also the Co-Director of Geriatric Grand Rounds at McGuire Veterans Medical Center. Another achievement includes being the recipient of the Hartford /American Federation for Aging Research Grant. Since 2004, Dr. Mansilla has served as the Assistant Clinical Professor for Virginia Commonwealth University/Medical College of Virginia's Internal Medicine Student Preceptorship program for 1st, 2nd and 3rd year medical students.

In 2003, Dr. Mansilla opened her private practice, Mansilla Medical Practice, presently located at Railey Hill Office Park in Midlothian, VA. She offers primary care services specializing in Internal Medicine and Geriatrics, and provides medical services to approximately 4,500 patients. Dr. Mansilla has provided services to many VPHP members since joining our network in September 2006. Dr. Mansilla and most of her staff are bilingual as they speak both English and Spanish. Mansilla Medical Practice accepts Medicaid, VCC, and self pay patients.

Dr. Mansilla's patients and staff describe her as a truly talented, dedicated, and an outstanding physician. She is here to “Heal the sick” and works extremely hard to provide care to all individuals regardless of their economic status. Dr. Mansilla is committed to providing the highest quality of health care to our adult population, while embracing and becoming the bridge between cultural diversity and proactive health. VPHP values these elements of quality and safety first, which are hallmarks of this award.



iPad Raffle Winner

There was a raffle conducted for those practices that responded back within 24 hours of receiving a fax registration form. Of those that responded timely, one was chosen to win an iPad. The practice information is below.

The Eye Place Optometry PC
1601 Huguenot Road
Midlothian, VA 23113
804-794-3937 (phone)
804-794-9216 (fax)



Advance Directives Statement

"VPHP will provide information to members about advance directives and any changes made in state law as soon as possible but no later than 90 days after the effective date of the change."

PROVIDER EDUCATION MEETING FY 2013

Below is a listing of our provider education series for 2013 which is subject to change. Please visit our website monthly for future updates. If you wish to attend, please reserve your seat by emailing the designated representative listed on the website at www.virginiapremier.com

HARRISONBURG/WINCHESTER

Staunton/ Augusta Region

Monday April 22, 2013 Time: 8:30 am

Where: Augusta Health Campus, ACC Conference Rooms 2 & 3
Fishersville, VA

Woodstock/Rage Region

Tuesday July 16, 2013 Time: 8:00 am

Where: Shenandoah Memorial Hospital, Board Room
Woodstock, VA

Harrisonburg

Tuesday June 4, 2013 Time: 12:00 pm

Where: Rockingham Memorial Hospital, Hahn Conference Room
Harrisonburg, VA

Winchester Region

Friday, September 20, 2013 Time: 8:00 a.m.

Where: Winchester Medical Center, WMC Conference Center
Winchester, VA

CENTRAL VIRGINIA

Petersburg

Wednesday April 10, 2013 Time: 12:00 pm

Where: William R. McKenny Central Library
137 S. Sycamore Street, Petersburg, VA

Fredericksburg

Monday October 7, 2013 Time: 11:30 am

Where: Mary Washington Hospital, Classroom A
1001 Sam Perry Blvd, Fredericksburg, VA

Farmville

TBA Time: TBD

Where: Farmville, VA.

ROANOKE

Wednesday May 22, 2013

Where: Virginia Premier Health Plan, Inc., Multipurpose Room
4910 Valley View Blvd, Roanoke, VA

Wednesday August 21, 2013 Time: 12:00 pm

Where: Virginia Premier Health Plan, Inc., Multipurpose Room
4910 Valley View Blvd, Roanoke, VA

Wednesday November 6, 2013 Time: 12:00 pm

Where: Virginia Premier Health Plan, Inc., Multipurpose Room
4910 Valley View Blvd, Roanoke, VA

TIDEWATER

Portsmouth

Wednesday May 22, 2013 Time: 12:00 pm

Where: Bon Secours Maryview Medical Center
3636 High Street, Portsmouth, VA

Eastern Shore

TBA Time: 12:00 pm

Where: Riverside Shore Memorial Hospital, 6th Floor Board Room
9507 Hospital Avenue, Nassawadox, VA

Virginia Beach

Wednesday December 11, 2013 Time: 12:00 pm

Where: Virginia Premier Health Plan, Inc.
Landstown Commons
3388 Princess Anne Road, Suite 200, Virginia Beach, VA

ABINGDON

Wytheville

Wednesday April 17, 2013 Time: TBA

Where: Wythe/Bland Conference Room
Wytheville, VA

Richlands

Wednesday June 19, 2013 Time: TBA

Where: Southwest Virginia Community College, Conference Room TBA
Richlands, VA

Bristol

Wednesday August 21, 2013 Time: TBA

Where: Bristol Public Library, J. Henry Kegley Meeting Room
Bristol, VA

Wise

Wednesday October 23, 2013 Time: TBA

Where: Wise Public Library, Conference Room TBA
Wise, VA