MultiPlan Holiday Card Program Spreads Cheer for Pediatric Patients
MultiPlan continues our tradition of helping to make hospital visits a little easier on young patients through our annual Holiday Card Program. Congratulations to this year's winners!

Through this program, now in its 19th year, MultiPlan invites pediatric patients at hospitals participating in MultiPlan’s networks to send in holiday inspired drawings. We then post images of the drawings on our website where the public can vote for their favorites. The five entries that receive the most votes are made into holiday greeting cards, courtesy of MultiPlan, and provided to the participating hospitals that use the cards in fundraising that supports their pediatric programs. We also provide the top five artists with framed prints of their artwork, their very own holiday greeting cards and a cash prize.

In addition to the Holiday Card Program, MultiPlan provides participating hospitals with Jeep PowerWheels™ toy cars through our Toy Car Program, and awards annual grants to qualifying hospitals through our Rural Health Partnership.
Outreach Grant Program.

DocASAP Now Booking 30,000 Appointments per Month

As we announced earlier this year, MultiPlan has invested in DocASAP, a company offering an online scheduling application that allows providers to publish their patient schedules through a variety of online venues, including payor sites, provider sites, and health content platforms.

DocASAP currently books appointments for providers across 27 states.

We’re excited about the value that DocASAP delivers to providers, helping them:

- **Attract New Patients** by promoting their practices online and gaining access to the growing number of patients who search for doctors online.
- **Improve Patient Satisfaction** through ease of access with 24/7 online scheduling and timely appointments for patients seeking immediate care.
- **Reduce Scheduling Overhead** by reducing call volume to your practice and freeing up time for your office staff.

To register, visit the DocASAP website at [http://www.docasap.com](http://www.docasap.com). For more information, please contact DocASAP: info@DocASAP.com or 800-991-7621.

The Skinny on Minimum Essential Coverage

We continually review news and information about the Affordable Care Act (ACA) to keep abreast of regulations that affect our provider networks. One topic of recent interest relates to what have been called Preventative Service Only, aka “skinny plans.”

So-called “skinny plans,” which offer full benefits for preventive services only, proliferated in 2013 because they were deemed to meet the minimum essential coverage requirements of the ACA (avoiding the employer penalty assessed per employee). In addition, they often met the law’s minimum value requirement based on the “minimum value calculator” provided by the government (avoiding the employer penalty assessed per employee on a subsidized exchange-based plan). MultiPlan clients offering these plans have been required to display the statement “Preventive Services Only” below the ID card logo so that our providers could easily identify the services covered.

Never happy with these preventive-only plans, the Department of Health and Human Services (HHS) and the Department of the Treasury intend to promptly propose rules which provide that plans that do not cover substantial physician and/or hospital benefits do not meet minimum value requirements, regardless of whether they are determined to meet such requirements through use of the minimum value calculator.

While Preventative Service Only plans may continue to make sense for some clients, now, with substantial coverage for inpatient hospitalization and/or physician services a required component of plans that qualify under the ACA, MultiPlan clients are structuring plans that cover a variety of preventive and other services that aren’t easily defined. We have, therefore, developed a new designation to identify our client’s plans that meet these requirements. Look for the statement “Specific Services. Call to Confirm” below the logo.
As with the original Preventive Services Only plans, these Specific Services plans are not limited benefit plans. They offer full benefits for the services covered. These plans are legitimate options for employers seeking to provide affordable coverage to young, healthy workers that don’t need full benefits.

MultiPlan’s Provider Demographic Data Receives High Quality Score
Every other month, MultiPlan sends our provider demographic data to an outside vendor, Enclarity, to score the relative quality of provider directory information. In other words, the score measures the likelihood that the provider is actively practicing at the address listed in the directory and reachable by the phone number given. The scoring ranges from 0 to 950, with the higher number indicating higher quality data. Rarely are scores of 700 or more awarded.

Since 2013, our scores have been trending upward, and in July, MultiPlan received a score of 608, the highest score we have received since we began working with Enclarity and the highest score the vendor awarded that month. We are proud of this score because it has a positive impact on helping health plan members access MultiPlan contracted providers. We will continue to work hard to enhance our demographic data through this and other data quality initiatives.

Claims Submission Refresher
Providers have two options for submitting claims to our clients for payment: mailing a paper claim form or electronic transmission. Electronic submission promotes faster, more accurate processing than with paper claims that are submitted by mail and is a requirement for federal benefit plans. Regardless of which method you choose, please be sure to verify the payor ID number and address to help ensure that your claims are processed accurately and timely.

ValuePoint by MultiPlan®
ValuePoint by MultiPlan is our access card program that lets you serve the growing patient population who are responsible for more of their healthcare costs while preserving the key benefits you expect from participation in a PPO network —

- Low collection risk—Patients pay your contracted MultiPlan contracted rate in full at the time of service.
- Patient steerage—With members from some of the country’s most recognized companies, including our client HealthAllies.
- Administrative ease—Simply call the number on the ID card to obtain your MultiPlan fee schedule information and collect that amount from the patient.

For more information about ValuePoint, including how to identify members, calculate payment and collect reimbursement, click here.
MultiPlan Code of Business Conduct and Ethics

The MultiPlan Code of Business Conduct and Ethics (our “Code”) contains the legal and ethical standards of conduct required of all parties with which MultiPlan contracts. We require that all contracted providers comply with the applicable laws, rules and regulations including Federal health care program laws, set forth in our Code. The Code is available on the MultiPlan website.

MultiPlan Clients and ACA CO-OPs

In 2013, National Alliance of State Health Cooperatives (NASHCO), the non-profit organization that promotes the success of ACA CO-OPs, endorsed MultiPlan as its preferred vendor for out-of-network solutions. (As you may know, CO-OPs, or Consumer Operated and Oriented Plans, are a new type of non-profit health insurer created as part of the Affordable Care Act (ACA).)

Three MultiPlan clients have recently announced that they are accessing the PHCS and MultiPlan networks for their CO-OP members. Your MultiPlan contracted rates apply when members access your services through an exchange-based plan just as with any plans that use our provider networks.

Connecticut: HealthyCT

MultiPlan is pleased to announce that HealthyCT, Connecticut’s non-profit health insurance CO-OP, is accessing the PHCS and MultiPlan networks. HealthyCT is selling individual, small and large group products on and off Connecticut’s health insurance exchange.

Besides being governed by a Board of Directors with a majority who are plan members, HealthyCT makes its entire network - all 31 Connecticut hospitals and more than 15,000 providers - available to all of its members. HealthyCT members can access the PHCS Network for services rendered outside Connecticut at in-network benefit levels, and the MultiPlan Network for services rendered in Connecticut by non-participating HealthyCT providers. Now in its second year of operation, HealthyCT continues its mission to provide high-quality, affordable health care that is accessible to its members and focused on keeping them well. More about HealthyCT is available at www.HealthyCT.org.

Maryland: Evergreen Health and CoreSource-PHCS Relationship Enters 2nd Year

MultiPlan's client, CoreSource, Inc. is pleased to announce that Evergreen Health Cooperative will continue to access the PHCS Network through 2015. Evergreen Health Cooperative markets individual and small group products in Maryland both on and off the state exchange, the Maryland Health Connection. Evergreen will also enter the large group market in 2015 as soon as it receives approval of its forms and rates. Evergreen Health’s current enrollment both on and off the exchange is approximately 7,000 members and it projects enrollment of over 15,000 members during 2015. Evergreen Health’s mission is to provide members with affordable, high quality health care choices, a voice in how their plan is operated and the chance to experience being in a health plan that puts members at the core. More information about Evergreen Health can be found at www.evergreenmd.org.

Illinois: Land of Lincoln Health
As a CO-OP, Land of Lincoln Health is governed solely by its members, and is directly accountable to the people they insure. Their CO-OP status is just one sign of their larger commitment to offering plans that meet their members’ needs.

Land of Lincoln Health was founded on the idea that members should have bigger and broader roles in making decisions about their health insurance. They offer some of the most affordable plans across the state of Illinois. Those plans come with all the Land of Lincoln Health advantages – and a broad network of providers including the PHCS Network. Learn more about Land of Lincoln Health at LLHealth.org.

Other Payer News
We are sharing this news from select client payers for your convenience.

Cigna’s Dialysis Injectable Precertification Requirement
On February 16, 2015, the Healthcare Common Procedure Coding System (HCPCS) codes for three dialysis-related injectables (J0882, J0886, and Q4081) will be added to Cigna’s medical precertification list to help ensure their appropriate use and dosage. A dialysis center is typically both the ordering and the rendering health care professional of these injectables. Prescriptions for them can be filled under the pharmacy benefit (which already requires precertification) or the medical benefit.

Information about this change will be included in the January 2015 issue of Cigna’s Network News.

Cigna Coverage Policy Updates Coming in February 2015
To ensure that they are using the most current medical information available, Cigna routinely reviews their coverage, reimbursement, and administrative policies for potential updates. As a result of a recent review, Cigna plans to update three coverage policies on February 16, 2015. These updates will allow Cigna to apply the latest evidence-based clinical guidelines to their policies, resulting in more narrow coverage.

The three policies that will be updated are:

- Acupuncture
- Bone Growth Stimulators
- Facility Routine Services and Supplies and Equipment

By January 16, 2015, additional notification of these policy updates will be available on the Coverage Policy Updates page on the Cigna for Health Care Professionals website (CignaforHCP.com > Useful Links > Policies and Procedures > Coverage Policy Updates). The Coverage Policy Updates page outlines the upcoming changes to each coverage policy, and includes a link to the full policy.

Aetna Provider Newsletters Available Electronically
To learn more and register for Aetna newsletters and policy updates, click here or paste this address into your web browser: http://www.aetna.com/healthcare-professionals/news/regional_hcp_newsletters.html.

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