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From: MultiPlan, Inc

From Email: Partnership@multiplan.com

Subject: MultiPlan Partnership, Fourth Quarter 2017

Preheader:

MultiPlan Partnership

Keeping the MultiPlan Provider Community Informed





Fourth Quarter, 2017

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Holiday Cards Available for Purchase







For more than 20 years hospitalized children have participated in MultiPlan's annual Holiday Card Program. In this popular program, pediatric patients in hospitals participating in our provider networks submit seasonal and holiday-inspired drawings to MultiPlan, which are displayed on our website for a public vote. We produce holiday cards featuring the top five drawings and present them to the participating hospitals that may then use the cards in fundraising to support activities for young patients.

By popular demand, all of the images submitted for this year's Holiday Card program are available as holiday cards! Cards may be purchased online in packages of 10 for \$10.00. Proceeds from card sales will be donated to Starlight Children's Foundation, a children's health charity that brightens the lives of seriously ill children and their families.

Get Ready for a New multiplan.com and Provider Search



Changes are coming to multiplan.com. In early December, we'll relaunch the website with a slick new design that incorporates our refreshed branding. In the first quarter of 2018, we'll unveil a new online provider search. The updated functionality will be similar to a Google search; users will answer a few qualifying questions to identify the correct provider network and then have the option to enter

Get them while you can! The MultiPlan Holiday Card Online Store will close on December 6, 2107 at 6:00 a.m. ET. To help keep production costs as low as possible, card orders will be produced and shipped in two batches. <u>Start shopping here!</u>

- Card orders placed through November 22, 2017 will ship on November 28.
- Card orders placed November 23, 2017 through December 6, 2017 will ship on December 8.

About Starlight Children's Foundation - Starlight creates moments of comfort and joy for hospitalized kids and their families. For 35 years, Starlight's programs have positively impacted more than 60 million critically, chronically and terminally ill or injured children in the US, Canada, Australia and the UK. With your help, more kids and their families will enjoy Starlight Brave Gowns, Starlight Fun Centers and other Starlight programs at a children's hospital or facility near you. Support Starlight's work by visiting www.starlight.org.

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Practical Matters: Notes from Dr. Anthony Sposato, MultiPlan Corporate Medical Director

An ounce of prevention... tips for a smoother recredentialing



You know the adage, "an ounce of prevention is worth a pound of cure," makes sense for keeping in good health; it also holds true for maintaining your provider profile. Maintaining your profile information helps ensure your practice is accurately reflected in provider

directories; it can also make for a speedier and smoother credentialing.

Remember the requirements

CAQH, state medical boards, and your provider contracts have requirements for maintaining provider data:

- CAQH requires re-attestation every 3 months
- State medical boards require profile changes be reported within 30 days
- Payer/PPO requirements may vary, see your contracts for details

When more is more

When it comes to the professional profile questions, less is not more; the more comprehensive your explanations, the better. Our physician panel considers this information during credentialing reviews.

Feel free to contact me directly to discuss our credentialing process and requirements.

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MultiPlan Donates to Hurricane Victims

MultiPlan has a proud history of performing community service and lending a hand to people in need. This fall after Hurricanes Maria, Irma and Harvey devastated Puerto Rico and parts of Florida and Texas, MultiPlan employees joined forces to sponsor fundraisers across multiple office locations to raise money for the people affected by the storms. More than \$8,000 was raised, and the funds were donated to the

on <u>Community Foundation</u>, the United Way and UNICEF to assist the hurricane victims.

keywords in the search bar. Users can also narrow search results by using filters.

Provider Service Portal News

Have You Registered for the Provider Portal? More and more providers are discovering the benefits of using our Provider Portal for their service interactions with MultiPlan.

Why Use the Portal? Here are just a few of the benefits that portal users enjoy:

- instant, anytime access to claims information
- faster turn-around time for service requests
- · quick downloads of applications and credentialing forms

Online registration is easy. Go to here and choose "Click here if you do not have an account." To register, you'll need your Group TIN (or a TIN for one of your practitioners) and Group NPI number. To expedite the registration process, you may also enter your MultiPlan Group ID if you have it. Once you create an account you may log in anytime. For more information or assistance specific to our portal, call 877-460-0352. For non-portal inquiries, call 800-950-7040.

Group Roster Updates Made Easy! Did you know that participating groups that have registered for self-service access in the Provider Portal have the ability to export their own group rosters? The roster contains a complete list of all practitioners affiliated with the group along with demographic information, effective date and recredentialing due date/status. Participating groups can use the information to verify accuracy and submit updates. Once you've identified demographic changes and practitioner terminations, you can even upload the roster back into the portal to submit your change requests. Best of all, it's quick and easy and you can export a roster when it's convenient for you because the Provider Portal is available 24/7! Read this guide to see how to export a roster and click here for a complete list of the portal's available features.

Looking for a List of MultiPlan Clients? Portal users can download the latest list of MultiPlan clients anytime in <u>three easy steps</u>.

Portal Demonstrations - Interested in attending a demonstration of the Provider Portal features available to Provider Groups? Sessions take place via web presentation twice a month and are designed to help groups take advantage of the portal's advanced features. There is no fee for this training, but registration is required. <u>See the schedule</u> on the Provider Education Resources page of multiplan.com.

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IN EVERY ISSUE

Follow us on LinkedIn!

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MultiPlan is now on LinkedIn. If you are active on LinkedIn, please check out the <u>MultiPlan company page</u> and become a "follower" to receive updates about MultiPlan.

Maintaining Your Information for Medicare Advantage Programs

CMS requires our clients that are Medicare Advantage Sponsors to maintain information regarding network adequacy and availability. To support this requirement, MultiPlan asks all providers participating in our Medicare Advantage Network to inform us of any changes to your

Medicare Providers: Have You Completed the Annual CMS Fraud Waste and Abuse Training and Attestation?

The Centers for Medicare & Medicaid Services (CMS) and MultiPlan network provider agreements mandate all those contracted to provide health care services to Medicare Advantage beneficiaries complete the requisite General Compliance and Fraud, Waste and Abuse (FWA) training within 90 days of contracting and annually thereafter.

CMS requires all downstream entities, such as MultiPlan's Medicare Advantage Network providers, and their employees and subcontractors, to complete the CMS developed web-based compliance training available on the Medicare Learning Network (MLN) Web-Based Training page of the CMS website. The "Medicare Parts C and D General Compliance Training" module is available via this link.

Providers enrolled in the Medicare program are deemed to have met the CMS compliance training requirement for FWA. However, these providers are still required to complete the CMS standardized General Compliance training. To confirm your compliance with the Medicare Advantage training requirement, please complete and sign our General Compliance and Fraud Waste and Abuse Training Attestation and return it to MultiPlan. If we do not receive your attestation by December 31, 2017, you may be terminated from participation in our Medicare Advantage network.

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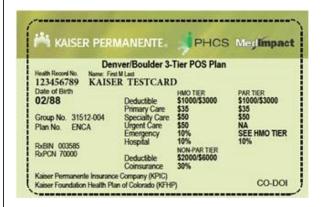
Payer News

We are sharing this news from select payers for your convenience.

KPIC POS and PPO Health Insurance Plans

You may associate the Kaiser name with HMO plans only. As a reminder, KPIC, a subsidiary of Kaiser Foundation Health Plan, Inc., offers Point of Service (POS) and PPO employer group plans. KPIC POS and PPO plans allow members access to a broad range of providers through MultiPlan's PHCS Network.

- Your services provided to KPIC POS and PPO plan members will be reimbursed based on your PHCS Network contractual agreement.
- KPIC POS and PPO plan members may search for participating providers through a special section of our online provider search: <u>multiplan.com/Kaiser</u>.
- The KPIC identification card will clearly display the PHCS logo.
 ID cards may vary by plan but all will have the PHCS logo displayed.





provider directory information (e.g., street address, phone number, office hours) and whether you are accepting new patients. Please promptly inform MultiPlan of any changes to this information. In cooperation with CMS requirements, we will reach out quarterly to MultiPlan providers participating in Medicare Advantage to review your

information. Please be sure to respond to our outreach.

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CMS Compliance Training Requirement for Medicare Advantage Providers

The Centers for Medicare & Medicaid Services (CMS) and MultiPlan network provider agreements for participation in the Medicare Advantage Network mandate that all those contracted to provide healthcare services to Medicare Advantage beneficiaries complete the requisite General Compliance and Fraud, Waste and Abuse (FWA) training within 90 days of the contracting and annually thereafter.

CMS requires all downstream entities, such as providers participating in MultiPlan's Medicare Advantage Network and their employees and subcontractors, to complete the CMS developed web-based compliance training available on the Medicare Learning Network (MLN). Providers participating in the Medicare program are deemed to have met the CMS compliance training requirement for FWA. However, these providers are still required to complete the CMS standardized General Compliance training.

Providers participating in MultiPlan's Medicare Advantage Network have the following three options to ensure they have satisfied the General Compliance <u>and</u> FWA training requirements:

- Complete the General Compliance and/or FWA training modules located on the <u>CMS MLN</u>. Once an individual completes each of the trainings, the MLN system will generate a certificate of completion. The MLN certificates of completion will be accepted by MultiPlan as proof of satisfying the training requirement;
- Download and incorporate the content of the CMS standardized training modules from the CMS website into their organizations' existing compliance training materials/systems; or
- Incorporate the content of the CMS training modules into written documents for providers (e.g., provider guides, participation manuals, business associate agreements, etc.).

Although the training content cannot be modified, CMS will allow modifications to the appearance of the content (i.e., font, color, background, format, etc.). Additionally, providers may enhance or wrap around the CMS training content by adding topics specific to their organization or the employee's job function. At MultiPlan's request, providers must submit an attestation confirming that they have completed the appropriate General Compliance and FWA training.

Providers participating in MultiPlan's Medicare Advantage Network are required to maintain evidence of completion of the General Compliance <u>and</u> FWA trainings, such as training materials, training logs and program materials, for a period of ten (10) years and must make such evidence available to MultiPlan for review upon request.

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For more information about KPIC POS and PPO plans, visit the KPIC Health Insurance Plans website.

Cigna News: Precertification Updates

Effective January 1, 2018, Cigna will add 53 HCPCS codes to the list of medical oncology and oral chemotherapy medications that will require precertification under their Integrated Oncology Management Program, which is managed through eviCore healthcare. For an updated list of affected medications, log in to CignaforHCP.com > Resources > Reimbursement and Payment Policies > Precertification Policies > Oncology Drugs Requiring Precertification through eviCore Healthcare.

For additional information about the Integrated Oncology Management Program, visit the dedicated program <u>website</u>.

Aetna Provider Newsletters Available Electronically

To learn register for Aetna newsletters and policy updates, click here.

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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 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 Optum 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.

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Code of Conduct

MultiPlan's Code of Business Conduct and Ethics contains the legal and ethical standards of conduct required of all parties with which MultiPlan contracts. We expect all providers participating with MultiPlan to comply with our Code's high ethical, moral and legal principles in every aspect of their business conduct. CMS requires that we notify providers of this code, which is available on our website.

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