March 9, 2015

Inst/Degree
Address1
Address2
City, State Zip

Re: Health New England (HNE) ICD-10 Update and Appointment and After-hours Standards

Dear Provider:

Enclosed are notices regarding an HNE ICD-10 Update on claims submission requirements and HNE's participation in the ICD-10 Collaborative Testing Program, and HNE Provider Appointment and After-hours Standards. Please take the time to review both notices. If you have any questions or concerns, please contact Provider Relations at 413.233.3313 or toll free at 800.842.4464, extension 5000. A representative is available between the hours of 8:00 a.m. and 4:30 p.m.

We appreciate your ongoing partnership with us in providing excellent care and service to our members.

Sincerely,

Erik B. Johnson

Erik B. Johnson
Provider Relations Manager

HNE ICD-10 Update

As you are aware, last April, the CMS timeline for upgrading to ICD-10 changed to October 1, 2015. Health New England (HNE) continues to remain on schedule to meet this deadline. In an effort to keep you informed of decisions and activities at HNE related to ICD, we maintain a provider resource page on our website. You may access the page at http://hne.com/HNE_Providers/ICD10. In addition, below are some recent announcements that were also made on HNE Talk, HNE's healthcare provider blog.

Submitting Claims to HNE

HNE will follow the Centers for Medicare & Medicaid Services (CMS) guidelines regarding ICD-10 cutover and will not accept claims with ICD-9 codes for dates of service after the defined cutover date (October 1, 2015). They will be returned to the provider for correction and resubmission.

HNE ICD-10 Testing Initiative (HNE_I10_Test)

To proactively address the challenges involved in transitioning to ICD-10, HNE will shortly be initiating an ICD-10 Testing Initiative (HNE_I10_Test). This will allow Providers who either "Direct Submit" or use a Clearinghouse/Billing Agency, to submit test claims to our ICD-10 test environment for compliance evaluation and processing. As a springboard to HNE's participation in last year's Mass Health Data Consortium's Collaborative Testing Program, our aim is to reduce the risk of the ICD-10 transition and save time and resources you, our providers, by offering a comprehensive testing service for file validation, coding content and business impact.

For the most up-to-date information regarding the HNE_I10_Test initiative, please visit the HNE ICD-10 website, http://www.healthnewengland.com/HNE_Providers/ICD10/index.html

Appointment and After-hours Standards

HNE has long established Appointment and After Hours Standards that have been made readily available in the HNE Provider Manual. As part of HNE's ongoing effort to ensure that members have appropriate and timely access to care, we are sending out this reminder. Please see the attached Access Standards.

ACCESS STANDARDS

On average, 85% of members are able to access (type of appointment) within (stated time).

PRIMARY CARE PRACTITIONER

Appointment Type	Appointment Standard Non-Medical Home	Medical Home	Exception Product-Specific Standards
Routine/Regular (includes Preventive)	Within 1 month of request		Medicaid: Within 45 days of request
Non-Urgent Symptomatic	Within 7 business days of request	Same day of request	Medicaid: Within 10 days of request
Urgent	Within 24 hrs of request		Medicaid: Within 48 hrs of request
Emergency	Immediate or refer to emergency room		
After-Hours Care	24-hrs-a-day/7-days-a-week on-call system (answering service/ pager) for after-hours emergencies. PCP or covering MD returns call within 60 minutes		

HIGH-VOLUME SPECIALTY PRACTITIONERS

Appointment Type	Scheduled Appointment Timeframe	Exception Product-Specific Standards
Routine/Regular	Within seven business days of request	
Non-Urgent Symptomatic		Medicaid: Within 30 days of request
Urgent	Same day of request	Medicaid: Within 48 hrs of request
Emergency	Immediate or refer to emergency room	
After-Hours Care	24-hrs-a-day/7-days-a-week on-call system (answering service/ pager) for after-hours emergencies. PCP or covering MD returns call within 60 minutes	

BEHAVIORAL HEALTH PROVIDER

Appointment Type	Scheduled Appointment Timeframe	Exception Product-Specific Standards
Routine/Regular	Within 10 business days of request	Within 14 business days of request
Urgent and Life/Non-life Threatening Emergency Services	Requires immediate face-to-face medical care. The member or representative should call 911. Member referred to the nearest hospital-based psychiatric emergency service crisis team for immediate treatment	Urgent •Medicaid: Within 48 hrs of request Non-life threatening • Medicaid: Within 6 hrs of request
After-Hours Care	24-hrs-a-day/7-days-a-week on-call system must be in place for member emergencies after hours.	
Follow-up After Hospitalization for Mental Illness	After discharge from a hospital stay, members are scheduled for the first follow-up visit within 7 days of discharge, and a second follow-up visit within 30 days of discharge.	
After-Hours Care	24-hrs-a-day/7-days-a-week on-call system (answering service/ pager) for after-hours emergencies. PCP or covering MD returns call within 60 minutes	