



Quality

**NEW: Secure Portal
 Authorization Enhancements**

Authorization Enhancements

WellCare has made several recent enhancements to our secure Provider Portal Authorization System. We've expanded your online capabilities, so you can accomplish more than ever before – without the need to call Provider Services for assistance.

New features include:

- **Authorization Edits:** Providers can now edit previously submitted authorizations online. You can also return and upload additional attachments (such as requested medical records) and review previously submitted documentation, as well.
- **Real-time Authorization Status:** Quickly and easily look up status of any authorization request, at any time.
- **New Status:** We've added a new **“Partially Approved”** status to more accurately depict the current status of requests that are not fully through the approval process.



Not registered on our secure Provider Portal yet? It only takes a few moments to sign up for an account <https://provider.wellcare.com/Provider/Accounts/Registration> and start benefitting from the many useful features provided.

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Join the Conversation on Social Media

Join our digital and social communities for up-to-date information on how we're working with you and others to help our members live better, healthier lives.



Welcome to Welvie.
Better information.
Better decisions.

Log In

First time here?

Register



Welvie®: Improving Members' Health Care Experience

In 2015, WellCare began offering the Welvie online surgery shared-decision making program to its Medicare Advantage members.

Welvie's six-step program curriculum helps participants decide on, prepare for and recover from surgery. Through information, Q&As and videos, patients learn how to work with their doctors to explore treatment options – both surgical and non-surgical – when considering “preference-sensitive” surgeries like spine fusion, knee arthroscopy, prostatectomy and other elective procedures. Preference-sensitive surgeries are defined as those that have two or more viable alternatives for a presenting condition. If the patient, along with their doctor, decides surgery is right for them, Welvie then helps patients prepare for surgery and recovery with robust tools including checklists, calendars and other information and helpful tips to help them have error- and complication-free results.



Welvie participants receive a \$25 **Amazon.com** gift card for completing the first three steps of the program (reward is available once per member per 365 days).

The program's goal is to support member-physician interaction and preparation for surgery, as well as to promote improved health literacy.

After three years, the program has received high satisfaction marks from members. 96% of WellCare members have reported they felt the Welvie program helped them speak with their doctor about their treatment options and 97% said the Welvie program better prepared them for surgery.



To refer your WellCare Medicare Advantage patients to Welvie, just send them to <http://www.welvie.com> to register and engage in the program.

WellCare Taking Additional Steps To Protect Members' Health Amid COVID-19 Outbreak

As we continue to learn more and address the novel coronavirus and its resulting illness COVID-19, we want to update you on important coverage information around its testing, treatment and care.

WellCare will be extending coverage for COVID-19. This important step is being taken in partnership with other major insurers and with the support of the White House Coronavirus Task Force.

We intend to cover COVID-19 testing and screening services for Medicaid, Medicare and Marketplace members and are waiving all associated member cost share amounts for COVID-19 testing and screening. To ensure that our members receive the care they need as quickly as possible, WellCare will not require prior authorization, prior certification, prior notification or step therapy protocols for these services.

This coverage extension follows the Centers for Medicare & Medicaid Services' (CMS) guidance that coronavirus tests will be fully covered without cost-sharing for Medicare and Medicaid plans, a decision that WellCare fully supports for our members covered under these programs. We also support the administration's guidance to provide more flexibility to Medicare Advantage and Part D plans.

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The specific guidance includes:

- ✓ Waiving cost-sharing for COVID-19 tests
- ✓ Waiving cost-sharing for COVID-19 treatments in doctor's offices or emergency rooms and services delivered via telehealth
- ✓ Removing prior authorizations requirements
- ✓ Waiving prescription refill limits
- ✓ Relaxing restrictions on home or mail delivery of prescription drugs
- ✓ Expanding access to certain telehealth services



WellCare has been working in close partnership with state, local and federal authorities to serve and protect patients during the COVID-19 outbreak, including ensuring that its members and providers have the most up-to-date information to protect themselves and their families from the virus. We remain committed to protecting our communities during the outbreak.



To ensure you are keeping your environment safe from the coronavirus, please refer to the CDC guidelines here:

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/workplace-school-and-home-guidance.pdf>



WellCare Strengthens Our Fight Against Epidemic of Opioid Misuse

WellCare has created a comprehensive program for Medicaid and Medicare members who overuse opioid medications or are at risk of doing so, and we invite all of our providers to join us in this crucial effort.

In 2017, the HHS declared opioid misuse a public health emergency. In 2018, 2 million people had an opioid use disorder and 47,600 people died from overdosing on opioids, according to the U.S. Department of Health and Human Services.

WellCare believes that vigilance by our providers can play a key role in fighting the epidemic that has spread throughout the United States.

The goals of our Opioid Program are to:

- Reduce the risk of opioid misuse, dependence and ultimately overdose, improving our Members' health outcomes
- Support members who depend upon and/or abuse opioids by providing Care Management services, education and monitoring to improve health outcomes
- Promote the appropriate use of healthcare resources

Interventions using Care Management services are for Medicare and Medicaid Members:

- Who have shown outlier utilization of opioids and other services requiring access limitations controls,
- With low back pain and a high number of opioid prescriptions; and
- Who have been proactively identified as being at high risk of misuse of opioids

For our Medicare population, the Pharmacy Department administers CMS's Opioid Drug Management Program (Opioid DMP). CMS requires Pharmacists to address the Opioid needs of members. WellCare Pharmacists will refer members to Care Management as needed.

Also, we are seeking to expand the number of providers who are able to offer Medication Assisted Treatment (MAT services). MAT services use FDA-approved medications combined with counseling and behavioral therapies to provide a "whole-patient" approach to the treatment of substance use disorders.



To learn more about WellCare's Opioid Program, contact your Provider representative.

[Link to landing page for full details on Opioid Drug Management Program.](#)

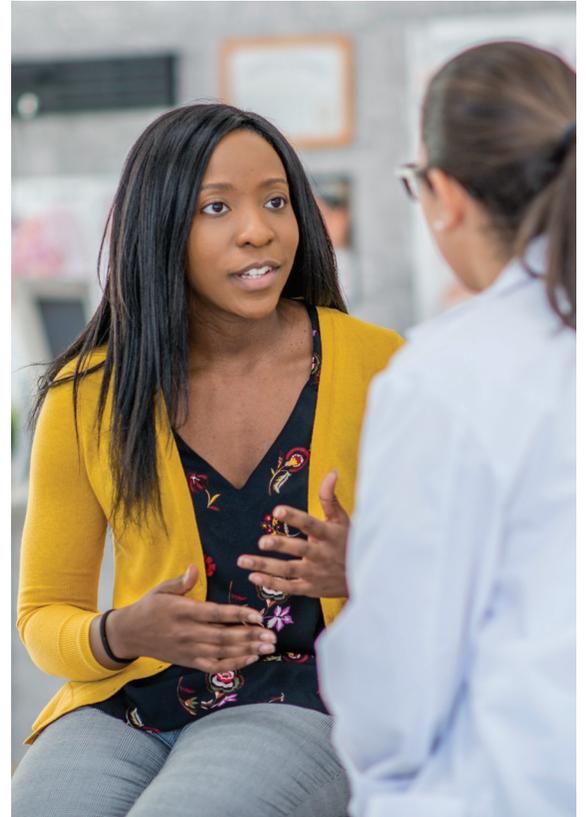
Healthy Rewards Program

The Healthy Rewards Program, rewards members for taking small steps that will help them live healthy lives. For simple tasks like completing prenatal visits, preventive dental visits and certain health checkups, members can earn rewards that are placed on prepaid debit cards. Members can use these cards at a variety of locations to purchase healthy items they use every day. The more services members complete, the more they can earn.

Now is a good time to remind your patients to take advantage of this program and their dental benefits by scheduling a dental visit. Providers can also encourage their patients to participate in the Healthy Rewards Program by signing and including their provider ID on applicable activity reports.



For more information on WellCare's Healthy Rewards Program, please contact your Provider Relations representative or call one of the Provider Services phone numbers at the end of this newsletter.



Medication Adherence and RxEffect™

To help with medication adherence, WellCare engages our members with refill reminder phone calls, off-therapy (missed dose) phone calls and letters as well as utilizing our network pharmacies to help counsel our members. However, there is nothing as powerful as a reminder from the member's primary care provider about the importance of medication adherence.

RxEffect™ is an online platform available to WellCare Medicare provider groups to help improve members' medication use.

Talk to your WellCare associate today to get users from your office access to the RxEffect™ portal.

This web portal:

- ✓ Is sponsored by WellCare – so there is no cost to our provider partners
- ✓ Uses predictive modeling to target the patients who need it most
- ✓ Uses real-time monitoring of pharmacy claims and is updated daily
- ✓ Includes opportunity flags for 30-day conversions, diabetic patients not on statins, appointment agendas and high-risk medications

CPTII Codes and HCPCS Billing for Medicare and Medicaid

Important Information on CPTII and HCPCS Codes

We're asking our providers to make sure to use accurate CPT Category II codes and HCPCS codes to improve efficiencies in closing patient care gaps and in data collection for performance measurement. When you verify that you performed quality procedures and closed care gaps, you're confirming that you're giving the best of quality care to our members.

WellCare has made a change to CPTII code payment to assist in the pursuit of Quality.

Starting January 1, 2020, WellCare will add CPTII and HCPCS codes to the fee schedule at a price of \$0.01. This will allow billing of these important codes without a denial of "non-payable code."

How does this help you, our Providers?



- Fewer dropped codes by Billing Companies due to non-payable codes
- Better reporting of open and closed care needs for your assigned members
- Increase in Payment for Quality (P4Q) due to submission of additional codes
- Collection of HEDIS® measure data year round, resulting in fewer chart requests during chart collection season

What measures do these codes apply to?



- Controlling Blood Pressure
 - Blood pressure results
- Comprehensive Diabetes Care
 - Hba1c levels
 - Nephropathy – urine protein tests or treatment
 - Diabetic Retinal Eye Exams, DRE
- Care of Older Adults
 - Pain assessment
 - Medication list and review
 - Functional status assessment
- Medication Reconciliation Post Discharge
 - Medication list and review after hospital discharge

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

Immunizations and Well-Child Checkups

Providers play a key role in establishing and maintaining a practice wide commitment to communicating effectively about vaccines and maintaining high vaccination rates – from providing educational materials, to being available to answer questions.

Confused parents may delay or refuse immunizations for their child due to misperceptions of disease risk and vaccine safety. A successful discussion about vaccines involves a two-way conversation, with both parties sharing information and asking questions. These communication principles can help you connect with patients and their caretakers by encouraging open, honest and productive dialogue.



Help educate parents on the prevention and spread of disease. Remind parents of the value of comprehensive well-child checkups and staying on schedule with immunizations. Remember, you may complete a comprehensive well-child checkup during a sick child visit or sports physical if the member is due for a checkup.

Updating Provider Directory Information

We rely on our provider network to advise us of demographic changes so we can keep our information current.

To ensure our members and Provider Relations staff have up-to-date provider information, please give us advance notice of changes you make to your office phone number, office address or panel status (open/closed). Thirty-day advance notice is recommended.

New Phone Number, Office Address or Change in Panel Status:

Medicaid



Send a letter on your letterhead with the updated information to KY_ProviderCorrection@wellcare.com. Please include contact information if we need to follow up with you.

Medicare



Call: 1-855-538-0454

Thank you for helping us maintain up-to-date directory information for your practice.



Electronic Funds Transfer (EFT) through PaySpan®

Five reasons to sign up today for EFT:

- 1 You control your banking information.
- 2 No waiting in line at the bank.
- 3 No lost, stolen, or stale-dated checks.
- 4 Immediate availability of funds – no bank holds!
- 5 No interrupting your busy schedule to deposit a check.

Setup is easy and takes about five minutes to complete. Please visit <https://www.payspanhealth.com/nps> or call your Provider Relations representative or PaySpan at 1-877-331-7154 with any questions.

We will only deposit into your account, **not** take payments out.



Provider Formulary Updates

Medicaid:

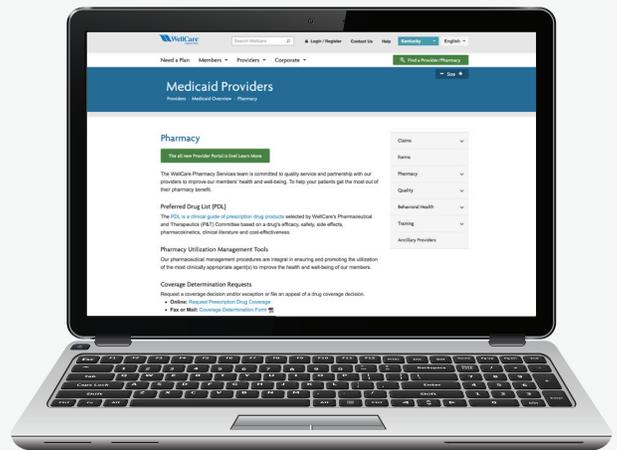
The WellCare Medicaid Preferred Drug List (PDL) has been updated. Visit www.wellcare.com/Kentucky/Providers/Medicaid/Pharmacy to view the current PDL and any pharmacy updates.

You can also refer to the Provider Manual available at www.wellcare.com/Kentucky/Providers/Medicaid to view more information regarding WellCare's pharmacy Utilization Management (UM) policies and procedures.

Medicare:

The Medicare Formulary has been updated. Find the most up-to-date complete formulary at www.wellcare.com/Kentucky/Providers/Medicare/Pharmacy.

You can also refer to the Provider Manual available at www.wellcare.com/Kentucky/Providers/Medicare to view more information regarding WellCare's pharmacy UM policies and procedures.



Community Connections HELP Line

1-866-775-2192

We offer non-benefit resources such as help with food, rent and utilities.



Beyond Healthcare. A Better You.

WellCare of Kentucky, Inc.
13551 Triton Park Blvd.
Suite 1800
Louisville, KY 40223

WellCare Office Locations



www.wellcare.com/Kentucky/Providers

WellCare has various offices throughout Kentucky where you will find your local Provider Relations and Health Services team members.

Ashland

1539 Greenup Avenue
5th Floor, Suite 501
Ashland, KY 41101-7613
Main Office Number: 1-606-327-6200

Bowling Green

360 East 8th Ave.
Suite 311
Bowling Green, KY 42101-2135
Main Office Number: 1-270-793-7300

Hazard

450 Village Lane, 2nd Floor
Hazard, KY 41701-1701
Main Office Number: 1-606-436-1500

Lexington

2480 Fortune Drive
Suite 200
Lexington, KY 40509-4168
Main Office Number: 1-859-264-5100

Louisville

13551 Triton Park Boulevard
Suite 1800
Louisville, KY 40223-4198
Main Office Number: 1-502-253-5100

Owensboro

The Springs, Building C
2200 E. Parrish Ave., Suite 204
Owensboro, KY 42303-1451
Main Office Number: 1-270-688-7000

Important reminder

You can use the member's Kentucky Medicaid ID number when the WellCare member ID number is not available when billing a claim.

Please remember to use the Kentucky MMIS, www.kymmisis.com, as your primary source of Managed Care Organization (MCO) assignment and eligibility for WellCare members. We encourage all providers to use KYMMIS as their primary source as it contains the most updated eligibility and MCO assignment information on each individual member.