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# No Surprise Act: Provider Update and Change Form

On August 20, 2021, the Tri-Agencies (Departments of Labor, Health and Human Services and the Treasury) announced that regulations to implement the provider directory requirements would be issued on or after January 1, 2022. Health plans are

expected to implement the provider directory requirements based on a good faith, reasonable interpretation of the requirements by January 1, 2022, with a primary focus on ensuring that members who rely on provider directory information that inaccurately depicts a provider's network status are only liable for in-network cost sharing amounts.

CCHP is working to comply with the requirements of the No Surprise Act, moving forward with compliance of this good faith, reasonable interpretation of the requirements while awaiting additional regulatory guidance. Providers need to prepare for the No Surprise Act for 2022 by keeping their provider directory information up to date. Check out the information below for more details:

### **Improving the accuracy of provider directory information**

As part of the No Surprise Act, providers will be asked to verify their online provider directory information on a regular basis to help ensure CCHP members can locate the most current information for in-network providers and facilities. It is important that you keep your information up to date. Here's what you can do now:

- **Review your online provider directory information every 90 days to ensure it is correct.** You can check your directory listing on CCHP's website, use the Find a Doctor tool to identify in-network physicians and other healthcare providers supporting member health plans. To ensure we have your most current and accurate information, please take a moment to access [Find a Doctor](#).
- Submit updates and corrections to your directory information by using our online [Provider Update/Change Form](#). Online update options include:
  - Add or change an address location
  - Name change
  - Tax ID changes
  - Provider leaving a group or a single location
  - Phone and fax number changes
  - Closing a practice location

Current CCHP BadgerCare Plus or Together with CCHP providers can update their demographic profile for our provider directory. Once you submit the provider update/change form, you will receive an email acknowledging receipt of your request.

Watch for upcoming editions of Provider Notes in 2022 for updates on our ongoing efforts to comply with the No Surprise Act requirements.

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## **Interoperability and Patient Access: AppConnect is Live!**

The Centers for Medicare & Medicaid Services (CMS) created the Interoperability and Patient Access final rule (CMS-9115-F) in 2020. The rule is focused on driving interoperability and patient access to health information, giving patients access to their health information and moving the healthcare system toward greater interoperability.

The first parts of this rule to go into effect were the Patient Access Application Programming Interface (API) and Provider Directory API. An API is a software intermediary that allows two applications to “talk” to each other. For example, each time a person uses an app such as Facebook, sends a text message, or check the weather forecast on one’s phone, as examples, you are using an API. For the CMS Interoperability rule, the Patient Access API gives members the ability to view their health data on their phone, tablet, and other devices through third party applications. Members will first need to authorize their health plan(s) the right to share their health data with the application(s) of their choice.

We're happy to announce that CCHP’s AppConnect portal is now live. AppConnect allows any CCHP member to create an account and authorize the use of their health care data in the third party application(s) of their choice. It’s import to understand that AppConnect does not directly store or provide health data to members. It is only a tool for members to authorize CCHP to share this data with the third party application(s) they choose.

AppConnect can be accessed via the CCHP website, and includes a FAQ to assist members with any questions they may have. Members can also contact CCHP at [AppConnect@chw.org](mailto:AppConnect@chw.org) with inquires related to AppConnect or Interoperability.

These new tools will not affect existing applications such as the Together Member Portal or CCHP's Online Provider Directory. These tools will continue to be available to members. For questions regarding the CMS Interoperability and Patient Access final rule, AppConnect or CCHP's strategy regarding Interoperability please reach out to the project lead, **Matt Kraus** at [MKraus@chw.org](mailto:MKraus@chw.org).

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## Reminder: Together with CCHP COVID-19 Reimbursement Policy

Due to the circumstances of the pandemic that has affected our entire nation, Medicare has created procedure codes to reimburse providers for COVID-19 services.

The Together with CCHP COVID-19 policy states that we will reimburse all providers the Medicare approved rates for any COVID-related service.

To learn more about this policy, visit the [CMS.gov](https://www.cms.gov) website now.

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## CCHP's Electronic Claims Transmission: Confirmation Portal

### What is the Confirmation Portal?

CCHP provides confirmation on all new claims submissions for network providers. For every claim received by CCHP, whether it is filed on paper or through Electronic Claims Transmission (ECT), a receipt confirmation is generated and available to the provider.

**Providers who have access to the claims confirmation portal can:**

- Confirm if their claims were received by CCHP and entered into the claims processing system, whether submitted on paper or electronically.
- Receive an electronic report of rejected claims.
- Review an up-to-date list of all submitted claims. CCHP generates a nightly report of all received claims for that day.
- Look up coding rationale for claim denials.

**Resubmitting a claim:**

For each claim that doesn't pass the initial editing process, there is an associated error reason that shows why the claim didn't pass. Based on the error reason, the provider will need to make necessary changes and resubmit the claim within the allotted time frame agreed upon in their contract.

**Registering for the Confirmation Portal:**

Before a provider can access the portal, a CCHP Provider Relations Representative will need to verify the provider is an in-network provider. Once verified, the Representative will email the provider instructions for registering. Please reach out to your Provider relations Representative at the email below and provide them with the following:

- [CCHP Provider Relations email](#)
- Provider/clinic name
- Address, city, state and zip code
- Tax ID number
- NPI number
- Contact info email

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## Program Integrity Training

Children's Community Health Plan offers providers an opportunity to review Program Integrity Training resources. The resources below will help ensure required compliance and provide education around Medicaid program integrity.

For more information regarding Program Integrity Training, visit the links below:

- [Medicaid Integrity Program Educational Resources](#)
- [MACPAC Program Integrity](#)

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## Important Reminders

### Review CCHP's Telehealth Policy & COVID-19 Updates

CCHP is working hard to stay up-to-date with the latest Telehealth and COVID-19 information for our providers. Remember to review our designated [Telehealth and COVID-19 web page](#) for important information and updates. You may also reference our [Telehealth Billing Guide](#).

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### CCHP COVID-19 Clinics

Children's Community Health Plan and Children's Wisconsin have partnered with MPS and the Milwaukee Health Department to hold free COVID-19 vaccination clinics for everyone ages 5 and older. Please review and share the flier below:

- [COVID-19 Vaccine Clinics](#)

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### CCHP Contact Reminders

To better assist our Providers please use the following contact information and resources regarding any questions you may have:

- **Provider Relations:** Please contact customer service first for assistance.
- **Provider Contracting:**
  - New providers: Complete [Letter of Interest form](#) which

- CCHP Badger Care Plus (800) 482-8010
- Together with CCHP (844) 202-0117
- [CCHPProviderRelations@childrenswi.org](mailto:CCHPProviderRelations@childrenswi.org)
- **Provider Demographic Updates:**  
Complete the appropriate form and email to the address below
  - [CCHP Badger Care Plus](#) form
  - [Together with CCHP](#) form
  - [CCHP-ProviderUpdates@chw.org](mailto:CCHP-ProviderUpdates@chw.org)
- can also be found on our website
- [CCHP-Contracting@chw.org](mailto:CCHP-Contracting@chw.org)
- **Provider Credentialing:**
  - [CCHP-Credentialing@chw.org](mailto:CCHP-Credentialing@chw.org)
- **Clinical Services:**
  - [CCHP-ClinicalServices@chw.org](mailto:CCHP-ClinicalServices@chw.org)
- **Provider Portal Registration:**
  - 414-266-4522
- **2020 Provider Claims/Appeal portal questions:**
  - [CCHPProviderRelations@childrenswi.org](mailto:CCHPProviderRelations@childrenswi.org)
- **Member Advocates:**
  - [CCHPAdvocates@chw.org](mailto:CCHPAdvocates@chw.org)

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