

# PROVIDER NEWSLETTER

A newsletter for Senior Whole Health Providers

## First Quarter 2023

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## SWH MA Website Enhancements

### Email Alerts Subscription

Senior Whole Health has developed an online subscription service for providers to automatically receive our critical updates delivered directly to your inbox. These important updates will include quarterly provider newsletters, operational updates, claims and pre-authorization information. If you are interested in signing up, please visit our website at

<https://www.molinahealthcare.com/providers/ma/swh/resources/comm.aspx>.

### Dedicated Behavioral Health Section

The Senior Whole Health website has a dedicated Behavioral Health section that includes important billing information and program specifications. This section can be found at

<https://www.molinahealthcare.com/providers/ma/swh/resources/Behavioral-Health.aspx>.

### Website Feedback

The Senior Whole Health website has a dedicated spot to leave feedback for our website. Website feedback can be found on the right side of the Contact Us page at

<https://www.molinahealthcare.com/providers/ma/swh/contacts/contact.aspx>.

### Email Contact Boxes Update

[SWHProviderRelations@MolinaHealthcare.com](mailto:SWHProviderRelations@MolinaHealthcare.com)-for general provider relations inquiries

[SHWDelegatedProviders@MolinaHealthcare.com](mailto:SHWDelegatedProviders@MolinaHealthcare.com)-for credentialing or demographic updates for providers with an active delegated credentialing agreement

[SWHNetworkRequests@MolinaHealthcare.com](mailto:SWHNetworkRequests@MolinaHealthcare.com)-for new providers requesting to join our network or inquire on contracting status, leaving an existing contracted provider group, or inquiring on a new contract

[SWHCredentialing@MolinaHealthcare.com](mailto:SWHCredentialing@MolinaHealthcare.com)-for providers to submit HCAS or when adding a new physician to an already existing group contract

## Requirements for Submitting Prior Authorization

Senior Whole Health has partnered with MCG Health to offer Cite AutoAuth self-service for advanced imaging prior authorization (PA) requests.

### What is Cite AutoAuth and how does it work?

By attaching the relevant care guideline content to each PA request and sending it directly to Senior Whole Health providers receive an expedited, often immediate, response. Through a customized rules engine, Cite AutoAuth compares Senior Whole Health's specific criteria to the clinical information and attached guideline content to the procedure to determine potential for auto authorization.

Self-services available in the Cite AutoAuth tool include, but are not limited to: MRIs, CTs, and PET scans. To see the full list of imaging codes that require PA, refer to the PA Code LookUp Tool at [SWHMA.com](http://SWHMA.com).

### How to Access and Learning More

Cite AutoAuth can be accessed via the [Availity Essentials Portal](#) in the Senior Whole Health's Payer Spaces. It is available 24 hours per day/7 days per week.

This method of submission is strongly encouraged as your primary submission route, existing fax/phone/email processes are also available.



## Our Gift to Network Providers: PsychHub Subscription

To offer our valued network providers with the most up-to-date behavioral health resources and education, Senior Whole Health has partnered with PsychHub to offer a subscription to the PsychHub platform at no cost.

PsychHub is an online platform for digital behavioral health education. Senior Whole Health Providers can access PsychHub's online learning courses. Some of these courses offer continuing education opportunities for select licensures. There are various learning courses, including the Mental Health Ally Certification Program, which may be beneficial for office staff or providers who are interested in learning more about working with the behavioral health population.

Ready to get started? Senior Whole Health network providers can access this and other courses that offer continuing education units (CEUs) on the PsychHub platform by clicking the following link and simply creating an account: <https://app.psychhub.com/signup/molina-mhp/>

To setup an overview of the PsychHub platform and the resources they offer, contact your Provider Services representative.

### Let's Get Started

Already have an account? [Log in](#)

Email address


First name

Last name

Password

I agree to and accept the [terms and conditions](#) for use of this site.

**SIGN UP**

## Senior Whole Health's 2023 Medicare Advantage Products Designed to Meet Member Needs

Senior Whole Health is always working to meet the needs of our members through our diverse Medicare Advantage products offered each year. The Medicare Advantage line of business expanded to Bristol, Essex, and Plymouth counties in 2023 with additional expansion in the works. If the provider is interested in adding this line of business, please contact your Provider Services Account Manager. To help our providers learn more about the specific Medicare Advantage products being offered in Massachusetts in 2023, we have created a summary showing our service areas and highlighting the supplemental benefits for each product offered. Check it out here: [2023 Medicare Fact Sheet Massachusetts](#)

## Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. It not only helps to increase patient retention but can also help increase compliance with physician recommendations and improve patient outcomes.

Focusing together on a positive patient experience will have many important benefits to your practice:

- Increase patient retention
- Increase compliance with physician clinical recommendations
- Improve patient's overall wellness and health outcomes
- Ensure preventive care needs are addressed more timely
- Reduce no show rates

Additional resources are available for office staff and patients:

- For additional after-hours coverage, Senior Whole Health members can call the 24-Hour Nurse Advice Line at 888-275-8750
- Senior Whole Health members can access interpreter services at no cost by calling Member Services
- Providers can access the Availity Essentials at <https://apps.availity.com/availity/web/public.elegant.login> to:
  - o Search for patients and check member eligibility
  - o Submit service request authorizations and/or claims and check status
  - o Review Patient Care Plan
  - o Obtain CAHPS® Tip Sheets
  - o Participate in online Cultural Competency trainings (also available at [SWHMA.com](http://SWHMA.com))

Please encourage your patients who have received the CAHPS® survey to participate. Listed below are several questions asked in the survey regarding patient care:

- When you needed care right away, how often did you get care as soon as you needed?
- When you made an appointment for a check-up or routine care at a doctor's office or clinic, how often did you get an appointment as soon as you needed?
- How often was it easy to get the care, tests, and treatment you needed?

- How often did your personal doctor listen carefully to you?
- How often did your personal doctor spend enough time with you?
- How often did your personal doctor explain things in a way that was easy for you to understand?
- How often did you and your personal doctor talk about all the prescription medicines you were taking?
- How would you rate your personal doctor?

## Senior Whole Health's 2022 Quality Improvement Results



Senior Whole Health conducts an annual program evaluation to assess how well we meet the performance goals and objectives for improving the quality and safety of clinical care and services specified within the Quality Improvement Program Description and annual Work Plan. Below are highlights from the annual evaluation.

### CAHPS®

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Enrollee Experience Survey assesses Senior Whole Health members' satisfaction with their

health care. It allows us to better serve our members.

Senior Whole Health has received the CAHPS® results of how our members rated our providers and our services.

**Medicaid:** In 2022, Senior Whole Health improved in Getting Needed Care, Coordination of Care, How Well Doctors Communicate, Rating of Specialist Seen Most Often and Ease of Filling Out Forms.

We need to make improvements in Getting Care Quickly, Customer Service, Rating of Health Care, Rating of Personal Doctor, Rating of Health Plan, Advising Smokers and Tobacco Users to Quit, Discussing Cessation Medications and Discussing Cessation Strategies

**Medicare:** In 2022, Senior Whole Health did not improve in any measures over the prior year.

We need to make improvements in Getting Needed Care, Getting Care Quickly, Customer Service, Care Coordination, Doctors Who Communicate Well, Rating of Health Care Quality, Rating of Health Plan, Rating of Personal Doctor, Rating of Specialist Seen Most Often, Overall Rating of Drug Plan and Getting Needed Prescription Drugs.

### HEDIS®

Another tool used to improve member care is the Healthcare Effectiveness Data and Information Set or HEDIS®. HEDIS® scores allow Senior Whole Health to monitor how many members are receiving the

services they need. Measures include immunizations, well-child exams, Pap tests and mammograms. There are also scores for diabetes care, and prenatal and after-delivery care.

**Medicaid:** In 2022, Senior Whole Health improved in Controlling High Blood Pressure (CBP), Comprehensive Diabetes Care (CDC) - HbA1c Control (<8.0%) and Comprehensive Diabetes Care (CDC) - Blood Pressure Control (<140/90 mm Hg).

We need to make improvements in Breast Cancer Screening (BCS) and Comprehensive Diabetes Care (CDC) - Eye Exam (Retinal) Performed.

**Medicare:** In 2022, Senior Whole Health improved in Statin Therapy for Patients with Cardiovascular Disease (SPC) - Total Received Statin Therapy and Comprehensive Diabetes Care (CDC) - Medical Attention for Nephropathy.

We need to make improvements in Breast Cancer Screening (BCS) and Comprehensive Diabetes Care (CDC) - Eye Exam (Retinal) Performed.

#### **For More information:**

The progress related to the goals that Senior Whole Health has set for the annual CAHPS® survey results and the annual HEDIS measures can be viewed in more detail on the Senior Whole Health website. You can also view information about the Quality Improvement Program there and print a copy if you would like one.

- **Medicaid:** Please visit Senior Whole Health website at [SWHMA.com](https://www.swhma.com), select Health Care Professionals, line of business, and *Health Resources* to access this information.

#### **Culturally and Linguistically Appropriate Services/Disability Resources**

Senior Whole Health also assesses the cultural, ethnic, racial, and linguistic needs and preferences of members on an ongoing basis. Information gathered during regular monitoring and annual network assessment is used to identify and eliminate cultural and/or linguistic barriers to care through the implementation of programs and interventions.

**Medicaid:** The majority of Medicaid members specified English as their preferred language (35%). Spanish as a preferred language was identified by 16% of Medicaid members. Spanish was the most requested language among Medicaid members through Senior Whole Health's interpreter services, followed by Cantonese and Vietnamese.

**Medicare:** A majority of Medicare members speak English as their preferred language (43%). About 13% of Medicare members identified themselves as Spanish speakers. Spanish was the most requested language among Medicare members through Senior Whole Health's interpreter services, followed by Cantonese and Vietnamese.

Overall, Senior Whole Health found that the current Culturally and Linguistically Appropriate Services program resources, structure, and practitioner and community participation are sufficient based on member needs. Additionally, Senior Whole Health has a series of short Culturally Competency training videos (Health Disparities, LGBTQ+, Immigrants/Refugees, etc.) available on the [Availty Essentials Portal](#) and at [SWHMA.com](https://www.swhma.com) on the Culturally and Linguistically Appropriate Resources/Disability Resources page listed under Health Resources. Disability resources are also available at this location under Senior Whole Health Provider Education Series: Americans with Disability Act (ADA), Members who are Blind or have Low Vision, Service Animals and Tips for Communicating with People with Disabilities & Seniors.

## Council for Affordable Quality Healthcare (CAQH)

### What is CAQH?

CAQH technology-enabled solutions eliminate redundant and inefficient administrative processes between health plans and providers for credentialing, directory maintenance, coordination of benefits and other essential business functions. CAQH offers options to reduce the provider administrative burden.

### How Does Senior Whole Health Use CAQH?

Senior Whole Health is currently using the CAQH DirectAssure application to provide an opportunity for the enrolled providers to attest to their data, update their data in a single place that will be shared by all companies that they are contracted with and utilize CAQH. Senior Whole Health registers all of our non-delegated credentialed providers for CAQH DirectAssure, and currently pays the monthly fees related to the attestation tools for the providers.

### Benefits of Using CAQH?

- Decreased administrative burden: CAQH provides a tool to facilitate providers meeting the requirement to attest to their demographics and key information on record with Senior Whole Health every 90 days.
- Increased Senior Whole Health support: As providers update their information in CAQH, Senior Whole Health can systemically update our system, freeing up Senior Whole Health associates to assist providers with other needs.
- More accurate records: Senior Whole Health will obtain more frequent provider updates for our records and have more accurate provider information.

### How Does CAQH Work for Providers?

Providers enter updated information one time in CAQH, and it is shared with multiple entities utilizing the CAQH DirectAssure application. This simplifies the providers' administration work and reduces the need to be tracking who was informed of the changes. The No Surprises Act (NSA) requires providers to attest to their data every 90 days, CAQH provides an effective and efficient way to meet that requirement.

### What's Next?

Senior Whole Health is working with providers to encourage CAQH attestation. You may use other credentialing tools mandated by your state's regulatory agencies and think of CAQH as a credentialing only application—but it offers many other features and benefits beyond credentialing attestations.

Senior Whole Health is excited to continue our automation and improvement to provider information processes to reduce the administrative burden on providers and make it quicker and easier to update data.

## Senior Whole Health's Portal Access

Availity Essentials is now the official secure provider portal for Senior Whole Health providers.

Within Availity Essentials, you have access to these helpful tools and time-savers:

|                          |  |
|--------------------------|--|
| Claim Status             | Expanded search options include member name, service dates, claim history or the HIPAA standard.<br>Adjustment and remittance codes, along with their descriptions, at the claim and line level. |
| Prior Authorizations     | Manage your Senior Whole Health prior authorizations on Availity and use the Auth/Referral Dashboard to follow-up on the status of your prior authorization.                                     |
| Eligibility and Benefits | Use data from prior eligibility and benefits submissions to search for your patients and autofill your claim.  |
| Smart Claims             | A simplified claim entry tool with only the essential fields you need. Use data from prior eligibility and benefits submission to autofill your claim.   |
| Attachments              | Upload supporting documentation with your claims using the Send Attachments feature.   |
| Feature Coming Soon      |  |
| Accumulators             | Each member/plan submitted returns the Senior Whole Health plan/dollar and benefit   |

If your organization is not yet registered for Availity Essentials and you're responsible for the registration, please visit [Availity.com/Molinahealthcare](https://Availity.com/Molinahealthcare) and click the Register button. For registration issues, call Availity Client Services at 1-800-AVAILITY (282-4548). Assistance is available Monday – Friday 8 a.m. – 8 p.m. ET.

For a comprehensive list of tools and features available on Availity Essentials, log in and click on the Help and Training dropdown. As a registered Availity Essentials provider, you can also take advantage of our live webinar, “Availity Essentials Provider Portal Overview for Molina Providers.” Check with your Provider Services Account Manager for upcoming dates and times.

Once you have your Availity Essentials account, you can learn more about the features and functionality offered for Senior Whole Health providers. Simply log in go to Help & Training > Get Trained to register for a webinar.

## Coming Soon! Be on the look-out for our new annual Quality Bonus Payment Program

We are pleased to announce an annual **Quality Bonus Payment Program**. This is an upside-only program in which the PCP Group will be entitled to receive an incentive payment in addition to receiving the contracted rate. The incentive payment is tied to meeting or exceeding the identified quality goal(s) for each of the applicable measures. Program launch date will be determined in the future. Please contact your local Provider Services Account Manager for eligibility questions on the overall program. Thank you for your continued dedication to improving the overall health of our members.



## SWH Quality Corner

The Senior Whole Health (SWH) Quality team has been working on our 2023 strategy for continuous quality improvement focused on the care provided to our members. We look forward to partnering with our provider network to move these important initiatives forward.

### TOPICS

1. New External Quality Review Organization – Island Peer Review Organization (IPRO)
2. Transitions of Care Performance Improvement Project (PIP) – aimed at improving on the current rates of follow-up after an inpatient visit
3. Increasing Flu Vaccination Performance Improvement Project (PIP) – aimed at increasing flu vaccination rates among members, with interventions focused on members with disparities in racial, ethnic, cultural, and social determinants of health
4. Clinical Practice and Preventive Health Guidelines

1. New External Quality Review Organization!

MassHealth has partnered with a new External Quality Review Organization (EQRO) beginning January 1, 2023. Island Peer Review Organization (IPRO) will be overseeing various aspects of programming for SWH, including validation audits and the SWH PIPs. We are looking forward to working with IPRO to continue work toward our goal of continuous quality improvement! Our provider network is an integral part of our quality improvement initiatives, and we value the continued partnership to continue to make progress and improve the care to our members.

2. Transitions of Care Performance Improvement Project

Senior Whole Health is making great progress in the second year of our Transition of Care (TOC) PIP. Interventions have been successfully implemented and work will continue with new interventions aimed at enhancements to workflows and process improvement. Fax notification of discharge from an inpatient facility has been added to the standard workflow processes for our clinical team, with routine chart audits ongoing and showing 100% compliance overall. Our standard TOC Call template has been enhanced to include member education on the importance of follow-up after discharge, addressing transportation needs, and identifying non-English speaking members to pair that member with a nurse care manager speaking their language to the extent possible. As we move into year two of the TOC PIP, we will continue to work with our providers to make improvements in the TOC process overall.

3. Flu Vaccination Performance Improvement Project (PIP)

As we head into the final year of the 3-year Flu PIP, SWH continues to focus on improving flu vaccination rates among our members. Due to the transition to Molina Healthcare, staffing changes and restructuring of departments involved in our PIP project led to a drop off in flu clinics organized by SWH, originally planned to run throughout the flu season. SWH has initiated a workgroup to expand the resources devoted to flu clinics for the next flu season, with an aim at targeted outreach to

members early in the flu season. With a collaborative team and new staff on board, we anticipate the 2023/2024 flu season to be a success.

#### 4. Clinical Practice/Preventative Health Guidelines

We would like to remind our providers of the resources available to you on the Senior Whole Health website. Clinical Practice and Preventative Health Guidelines are reviewed and updated by our Quality team routinely, and new information is uploaded to the website on an ongoing basis. Please review the guidelines and work to incorporate these into your care of our members. As always, thank you for the care of SWH members! You can find the most current SWH by Molina Healthcare guidelines by clicking on the following links:

Clinical Practice Guidelines – <https://www.molinahealthcare.com/providers/ma/swh/health/cpg.aspx>

Preventive Health Guidelines -

<https://www.molinahealthcare.com/providers/ma/swh/health/phg.aspx>

## Help Us Spread the Word to Our Members About Our New Member Advisory Committee

Senior Whole Health, LLC (SWH), is forming a Member Advisory Committee for our MAPD, SCO & DNSP Members. We believe the health care system is stronger when we listen to the people we serve. We encourage our members to participate, as this can give them an opportunity to provide feedback on how we are doing as a plan. Our goal is to educate our members about the services that we offer and obtain any feedback from them, so that we can make improvements in their experience.

Here is some basic information about the Member Advisory Committee that you can share with our members:

- The Member Advisory Committee is for Senior Whole Health Members and/ or Caregivers. There will be various staff from our health plan in attendance to answer any member questions.
- Some of the topics that will be discussed in the meeting include but are not limited to: Health Management Programs, Benefit Education, and obtaining feedback on Enhancing the Member Experience.
- The Meetings will be held on a Quarterly basis. Meetings at this time will be conducted virtually and possibly move to an in-person environment. We do ask that members have internet access and are able to perform basic technical functions. SWH will be able to offer support to our members with this.

If you know a member and/ or a caregiver that is interested in joining our Member Advisory Committee, please let us know, or have them contact SWH Member Services at: 1-888-794-7268 (TTY 711) from 8 a.m. to 8 p.m., 7 days a week.

We look forward to creating better health care experiences- together!

## Clinical Policy Updates Highlights from Fourth Quarter 2022

Molina Clinical Policies (MCPs) are located at [molinaclinicalpolicy.com](http://molinaclinicalpolicy.com). The policies are used by providers as well as medical directors and internal reviewers to make medical necessity determinations. MCPs are

reviewed annually and approved bimonthly by the Molina Clinical Policy Committee (MCPC). The fourth quarter 2022 updates are noted below.

The following new policies were approved:

- MCP-422: Neuromuscular Electrical Training for the Treatment of Obstructive Sleep Apnea or Snoring (eXciteOSA)
- MCP-421: Intradialytic Parenteral Nutrition (IDPN) and Intraperitoneal Parenteral Nutrition (IPN)
- MCP-419: Remote Patient Monitoring
- MCP-424: Skysona (elivaldogene autotemcel)

The following policies were revised:

- MCP-347: Autologous Chondrocyte Implantation Knee
  - o Clarified Coverage Policy section regarding inadequate response to a prior arthroscopic or other surgical repair procedure; added statement regarding cooperation of member with post-operative weight bearing restrictions and completion of post-operative rehabilitation.
  - o Contraindications were added to the Limitations and Exclusions (per MACI labeling).
  - o Osteochondritis dissecans (OCD) was added as Experimental, Investigational, and Unproven.
- MCP-363: Hypoglossal Nerve Stimulation for OSA
  - o Addition to Coverage Policy section noting FDA approval and requirements for provider performing the procedure.
  - o DISE and SDM criteria were moved from the Exclusions and Limitations to Additional Required Documentation.
- MCP-301: Iluvien (fluocinolone acetonide) intravitreal implant
  - o Revised Criteria #3a to note “Triamcinolone acetonide, intravitreal injection OR a previous course of corticosteroid.” (Previously read as “Triamcinolone acetonide, intravitreal injection”).
- MCP-343: Intervertebral Stabilization Devices
  - o Updated Summary of Medical Evidence section with current studies and guidelines.
  - o Added Related Policies section and two additional intervertebral body fusion devices that received FDA 510(k) clearance in 2021 (IO™ Expandable Lumbar Interbody Fusion System and aprevo™ Transforaminal IBF).
- MCP-235: Measurement of Carotid Artery Intima Thickness
  - o Updated Overview and References sections; included current studies and guidelines to the Summary of Medical Evidence section.
- MCP-244: Powered Exoskeleton for Ambulation in Patients with Lower Limb Disabilities (ReWalk)
  - o Previously named *Lower-Limb Robotic Exoskeleton (ReWalk-P [Personal]) for Paraplegia in Spinal Cord Injury*
  - o Included FDA-approved powered exoskeletons, in addition to ReWalk.
  - o Expanded from paraplegia in spinal cord injury to include patients with lower-limb disabilities.
  - o Included current clinical studies and guidelines in the Summary of Medical Evidence section.

The following policies have been retired and are no longer available on the website:

- MCP-346: Bioness Foot Drop System (defer to MCG Criteria)
- MCP-259: Xiaflex\_Dupuytren's Contracture (defer to Pharmacy PA Criteria)
- MCP-279: Xiaflex\_Peyronie Disease (defer to Pharmacy PA Criteria)
- MCP-349: Zilretta (triamcinolone acetonide ER injection) (defer to Pharmacy PA Criteria)

## Healthmap Solutions Partnership Improves Care for Chronic Kidney Disease Patients

We've recently partnered with Healthmap Solutions (Healthmap), a kidney population health management company, to provide more comprehensive care for our members with chronic kidney disease (CKD). If you have a patient with kidney disease, or chronic conditions that may lead to kidney disease, Healthmap may contact you to partner with them. Healthmap provides collaborative recommendations through workflow-friendly clinical decision support.

Healthmap's Kidney Health Management (KHM) health solution integrates into your existing practice workflow to complement your patient's current plan of care. Healthmap can supply you with actionable information, based on industry proven, best practices that are powered by data analytics, to more effectively anticipate and deliver the right clinical care.

All patients identified as at risk for CKD Stage 3 and higher are included in the KHM program. A predictive algorithm is used to identify patients, detect opportunities for interventions, and surface disease-specific coding opportunities, offering you greater insight to individually tailored patient care. All patients are monitored for opportunities to address gaps in care related to medications, lab testing, specialty referrals and selective quality metrics.

Patients who may benefit from more interventional support are offered Healthmap's Care Navigation, a complex care coordination service to support members between office visits. Care Navigation supports the patient's overall care and focuses on identifying and removing barriers that prevent a patient from achieving the health goals you set with them.

Healthmap supplies providers with actionable information, aggregated patient treatment data, and predictive modeling to more effectively anticipate and deliver care. The KHM program offers the following benefits:

### Practice benefits

- Utilize algorithms based on claims and electronic medical record (EMR) data to uncover and identify care gaps
- Recommend patients who may benefit from Care Navigation
- Deliver identified opportunities in an easy-to-read format

### Provider benefits

- Facilitate increased information-sharing among the care team
- Promote communication of patient adherence to the plan of care
- Map individual health status to CKD guidelines
- Reduce provider fatigue by streamlining patient information

### Patient benefits

- Improve outcomes including avoiding emergency department visits and hospital admissions
- Serve as a resource to overcome social determinant of health (SDOH) barriers

- Provide complex care management to patients at stage 3 CKD and beyond, including dialysis care
- Educate patients on alternatives to in-center dialysis

Learn more at [www.healthmapsolutions.com](http://www.healthmapsolutions.com).

## Claim Submission

Senior Whole Health strongly encourages providers to submit claims electronically, including secondary claims. Electronic claims submission provides significant benefits to the provider including:

- Helps to reduce operation costs associated with paper claims (printing, postage, etc.)
- Increases accuracy of data and efficient information delivery
- Reduces claim delays since errors can be corrected and resubmitted electronically
- Eliminates mailing time and claims reach Senior Whole Health faster

**Senior Whole Health offers the following electronic Claims submission options:**

- Submit claims directly to Senior Whole Health via the Availity Essentials portal
- Submit claims to Senior Whole Health via your regular EDI Clearinghouse

If electronic Claim submission is not possible, please submit paper claims to the following address:

Senior Whole Health  
PO Box 22640  
Long Beach, CA 90801

**When submitting paper Claims:**

- Paper claim submissions are not considered to be “accepted” until received at the appropriate Claims PO Box.
- Claims received outside of the designated PO Box will be returned for appropriate submission.
- Paper claims are required to be submitted on original red and white CMS-1500 and CMS-1450 (UB-04) claim forms.
- Paper claims not submitted on the required forms will be rejected and returned. This includes black and white forms, copied forms, and any altering including handwritten claims.
- Claims must be typed with either 10 or 12-point Times New Roman font, using black ink.

For more information, please see CMS claims submission guidance:

<https://www.cms.gov/Medicare/Billing/ElectronicBillingEDITrans/1500>